



Damara Gutnick, MD

Montefiore Hudson Valley Collaborative
The Albert Einstein College of Medicine

**Why This Work
Matters to Me?**



What Matters to You?



Think about an experience that you or a loved one had in a healthcare setting

- What mattered to you?
- Was it addressed?
- What would have made the experience better?

Reflections



Why This Work Matters to Me

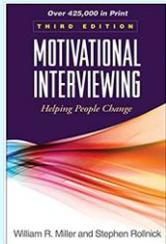


Agenda

- Review the Evidence for WMTY
- Share WMTY Stories from Diverse Care Settings
- Provide Insights:
 - WMTY & the Social Determinants of Health
 - Alignment with Motivational Interviewing
- Share a WMTY Implementation Example
- Share Resources and Tools to Help You Get Started
 - Slide Addendum: Tips for Asking, Listening & Doing What Matters

The Evidence

WMTY conversations help healthcare teams understand what is **most important to patients**, leading to **high quality care delivery**, **improved PX**, and **improved patient-provider relationships**.



**Evidence for
Motivational
Interviewing**

1991

Miller & Rollnick
Motivational Interviewing,
Helping People Change



**Shared Decision
Making– The
Pinnacle of Patient-
Centered Care**

2012

Barry M & Edgman-
Levitan S NEJM



**“What Matters to
You?” – A pilot project
for implementing
patient-centered care**

2016

DiGioia AM, et al.
PX Journal
WMTY first applied to
orthopaedic setting



**IHI Framework
for Improving
Joy in Work**

2017

Perlo J, Balik B,
Swensen S, et al
IHI White Paper



**Key Pillar of
Age- Friendly
Health System’s
4M’s**

2019

Age-Friendly Health
Systems Guide



**1 of 5 strategies with
potential to enhance
physician presence &
meaningful connection
with patients during
clinical encounter**

2020

Zulman DM et.al
JAMA

WMTY Papers

Olsen et al. *BMC Health Services Research* (2020) 20:317
<https://doi.org/10.1186/s12913-020-05150-4>

BMC Health Services Research

RESEARCH ARTICLE

Open Access

What matters when asking, “what matters to you?” — perceptions and experiences of health care providers on involving older people in transitional care

Cecilie Fromholt Olsen^{1*}, Jonas Debesay², Astrid Bergland¹, Asta Bye^{2,3} and Anne G. Lervang¹



Check for updates

Industry Insight

Motivational Interviewing is “Doing” What Matters: Integrating Motivational Interviewing Spirit and Skills into What Matters to You? Conversations

Damara Gutnick, MD^{1,2} and Sarah McNeilly, BA¹

Abstract

As the What Matters To You (WMTY) movement spreads across the globe, countless clinicians have been inspired to ask their patients its eponymous question: *what matters to you?* Still, some clinicians remain apprehensive about asking *what matters*, the spirit and skills of motivational interviewing (MI) can help and provides practical recommendations for navigating the synergistic uses of MI and WMTY.

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Original research



OPEN ACCESS

‘What Matters to Staff Programme’: eight steps to improve staff well-being at work

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ABSTRACT

Background and aim The What Matters to Staff programme was designed at the Royal Free Hospital to address a key priority of improving workforce well-being. The initial aim was to set up a programme that responded to what mattered to staff and could be spread to 70 teams across the hospital within 2 years.

Methods The programme was developed by adding a set of simple, yet important steps around the ‘what matters to you’ conversation from the Joy in Work Framework. The programme enrolled its first teams in January 2022 and has since spread widely to over 90 areas and has involved approximately 3000 staff.

Results There have been significant improvements in staff experience, staff engagement and workforce metrics

WHAT IS ALREADY KNOWN ON THIS TOPIC

⇒ National Health Service (NHS) workforce well-being is a national priority; however, poor staff morale is a significant issue in many healthcare organisations.

WHAT THIS STUDY ADDS

⇒ Using a structured and systematic method to asking, listening and doing what matters most for staff, we have shown that significant improvements can be made to both workforce and well-being metrics with little extra resource in a large acute trust.

HOW THIS STUDY MIGHT AFFECT RESEARCH, PRACTICE OR POLICY

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OPEN ACCESS

Let’s reconnect healthcare with its mission and purpose by bringing humanity to the point of care

Mathieu Louiset ^{1,2}, Dominique Allwood,³ Suzie Bailey,⁴ Robert Klaber ⁵,
Maureen Bisognano⁶

¹Plateforme pour l’Amélioration continue de la Qualité des soins et de la Sécurité des patients, Bruxelles, Belgium

²Faculté de santé publique, UCLouvain, Bruxelles, Belgium

³Medical Directors Office, Imperial College Healthcare NHS Trust, London, UK

⁴Kings Fund, London, UK

⁵Imperial College Healthcare NHS Trust, London, UK

⁶Institute for Healthcare Improvement, Boston,

INTRODUCTION

There is a global workforce crisis in healthcare. The WHO projects that an additional 40 million health workers will be needed by 2030,¹ meanwhile, burn-out² and retention within the healthcare workforce have been compounded by the pandemic. This unsustainable situation needs health systems where people are at the centre of our goals.³

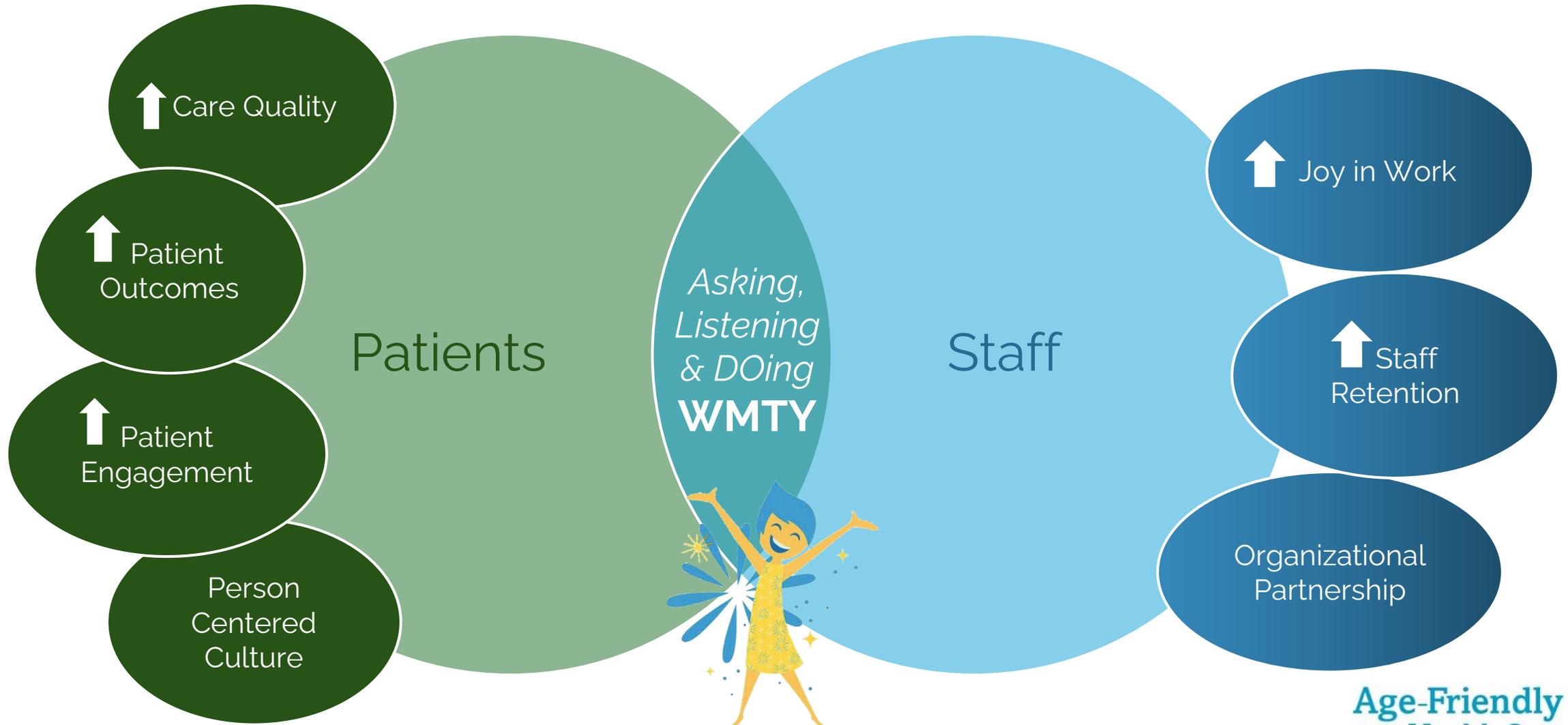
This requires significant change, not least in the culture of ‘industrialised healthcare’ which frequently prioritises technical and scientific aspects of delivery over humanity and whole person

Asking staff what matters to them is also a foundational element of IHI’s framework for ‘Improving Joy in Work’¹³ and aligns closely with Motivational Interviewing; a method designed to align with patients’ needs to enhance improved health behaviour change.¹⁴ WMTY is not only rebalancing work toward things that matter; it is also proving effective in unleashing progress on results for IHI’s Quintuple Aim in healthcare,¹⁵ including the important societal needs of access to and cost of care and simultaneously improving experience for staff (statement from the WMTY international steering group). The IHI Quintuple Aim—better

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WMTY is a simple and effective way to build trust and connections, which form the foundations of person-centered care

The Power of Asking WMTY



Impact of Asking WMTY

Asking the WMTY question

- 67% reported the question led to a change in an aspect of their care /intervention
- 80% shared the information they learned with other professionals
- 91% of staff reported their conversations with patients were enhanced

- WMTY was implemented across all units at the Royal Free Hospital in London
- Staff surveyed about their experience

Examples of what we learned from patients and what we did

My syringe driver keeps getting caught up as it's in my right arm and I'm right handed

Doctor made aware in MDTM and plan to change position that afternoon

I don't want my wife to be told I've died over the telephone, I want her to be told face to face

Family meeting was arranged to discuss these concerns and to work out a solution

Being outside matters to me and I'd love to go out into the garden

Team arranged for the patient to be taken outside in their bed



Karen Turner
@KarenHTurner1

#wmtly20 in action @RoyalFreeNHS where @orlakRD asked a gentleman what mattered to him and he said he was too hot and getting really uncomfortable. She asked #wmtly, listened and then hunted down a fan!
@WmtlyWorld @WMTYScot @rachelnandy @RFTherapyTeam



Amy Cruickshank
@AmyCruickshank2

It's 'what matters to you' day! Our #WMTY20 tool has been distributed @RoyalFreeNHS. @Barnet_ITU @BCFTherapyTeam @BarnetED are leading the way! Let's understand the impact by asking staff 2 Qs. Does WMTY enhance convos? Has it changed the care? My prediction... yes! @WmtlyWorld



Deborah Kirby
@kirby_deborah

Thank you to all of the wonderful staff at Barnet Hospital for asking their patients "what matters to you"?#WMTY
All the responses have been collated and prizes have been won in SAS = Cedar ward, MUC = Olive ward and W&C = Starlight. Well done to all who joined in!
@SusanTierney2



Ward / Department Learning Summary

What Matters to You?

What Matters To You?



We asked 32 patients what matters
94 % of staff reported this question enhanced their conversation
53 % of staff changed an aspect of their care / intervention as a result.

We asked patients... They said...

We did....



"I am scared because I don't know who is going to look after me overnight"

→ Explain that on this hospital we provide 24h care.
→ Introduce the night staff to the patient.

"Call bells to be answered promptly"

→ Informed patient about ward situation.
→ Informed staff about patient concern
→ Reassure patient and apologize.

"I need to eat, I am nil by mouth and I don't know if my scan will happen"

→ Scan contacted to get an estimated time
→ Informed the patient about the importance to don't eat until scan happens.

"According with the doctors, I am medically fit for discharge but I can't go home because I don't have my medication ready"

→ Chase pharmacy and verify that medication load was in progress.
→ Apologize to the patient because the delay.

Changes we plan on making in the future as a result:

- weekly call bell AUDITS
- chase doctors for TTAs day before discharge.

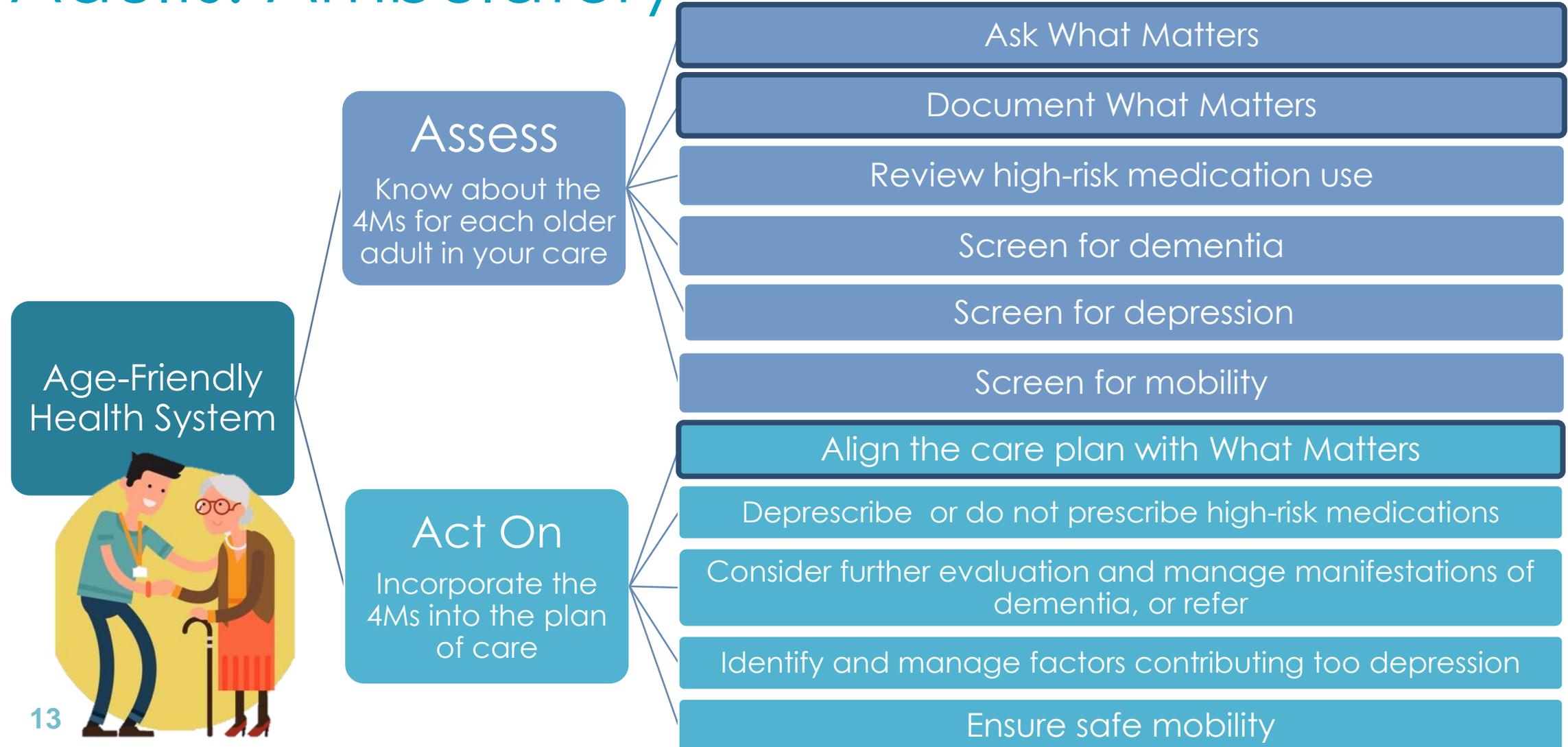
Informed future workflow and process changes

world class expertise  local care

NHS
Royal Free London
NHS Foundation Trust



Guide to Using the 4Ms in Care of Older Adults: Ambulatory



Guide to Using the 4Ms in Care of Older Adults: Hospital

Age Friendly Health System

Assess:
Know about the 4Ms for each older adult in your care

Act On:
Incorporate the 4Ms into the plan of care

Ask What Matters

Document What Matters

Review high-risk medication use

Screen for delirium at least every 12 hours

Screen for Mobility

Align the care plan with What Matters

Deprescribe or do not prescribe high-risk medications

Ensure sufficient oral hydration

Orient older adults to time, place and situation

Ensure older adults have their personal sensory adaptive equipment

Prevent sleep interruptions; use non-pharmacological interventions to support sleep

Ensure early and safe mobility



Essential Ingredients



Essential Ingredients

**Ask
What
Matters**

- Who? When? Using What Questions?
- Build asking WMTY into workflows and organizational culture



**Listen to
What
Matters**

- Listen to Learn!

**Do
What
Matters**

- Empower Staff to align care plans
 - Meet patients where they are at!
 - Address SDH needs
- How do we know if that has happened?

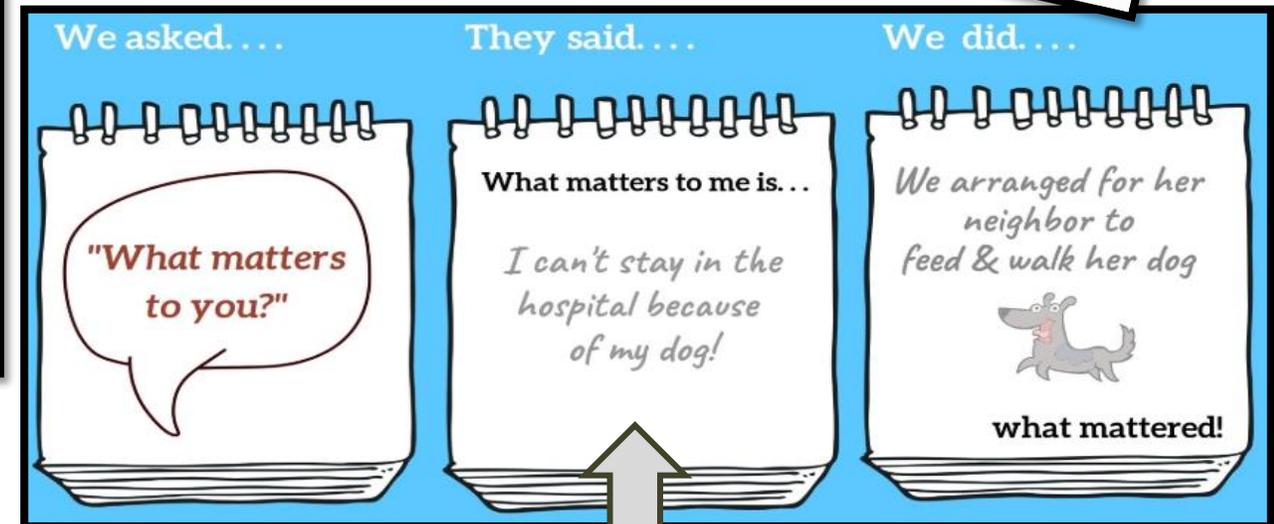
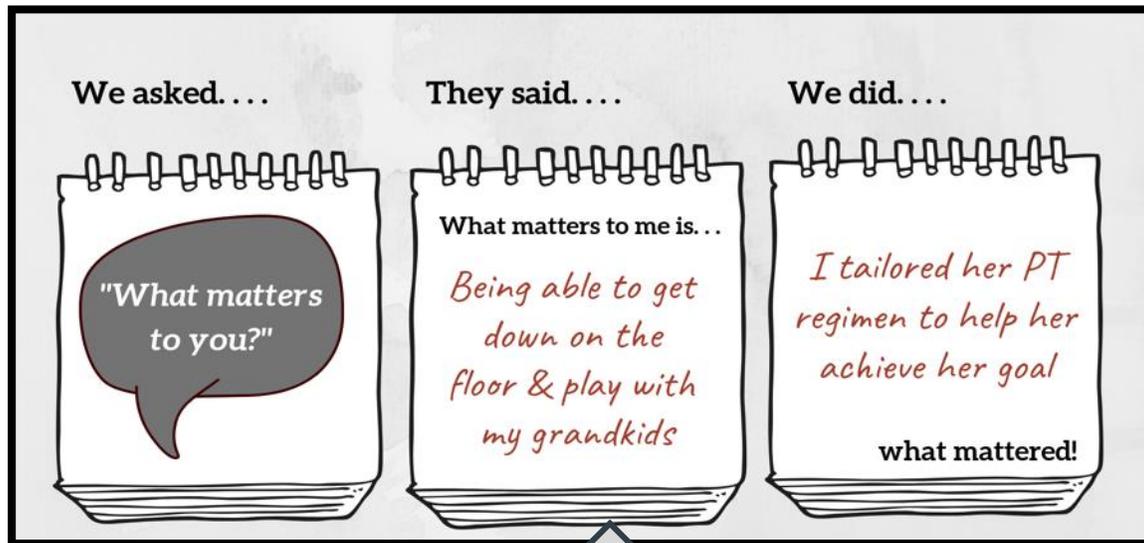
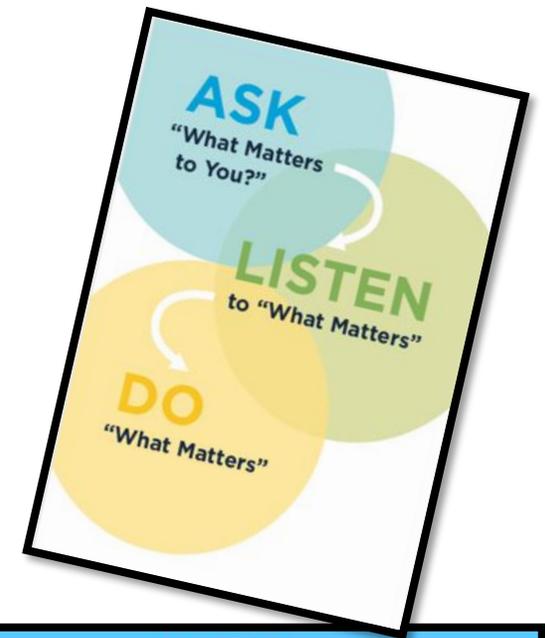
**Document
What
Matters**

- Communicate WMTY to extended care team
 - Who? What? Where?
- Improve care transitions



Doing What Matters

- Co-design care plans that help patients meet their goals



Document What Matters

What Matters May Include. . . Social Determinants of Health (SDH)

What Matters
to You?

I am being
evicted.

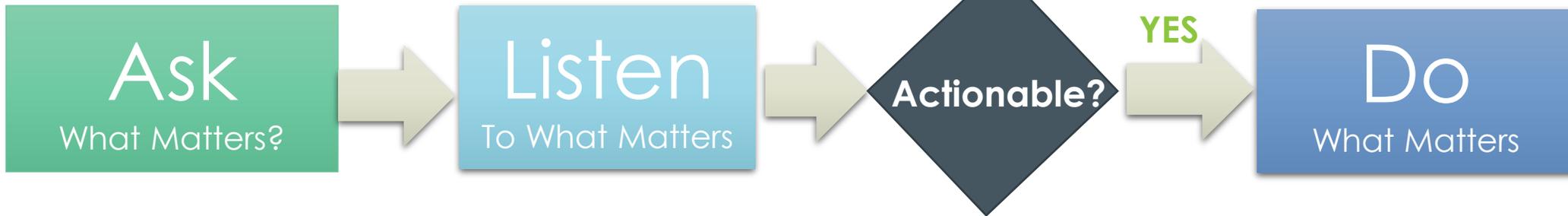
I don't have
access to
healthy food

I can't get to
appointments

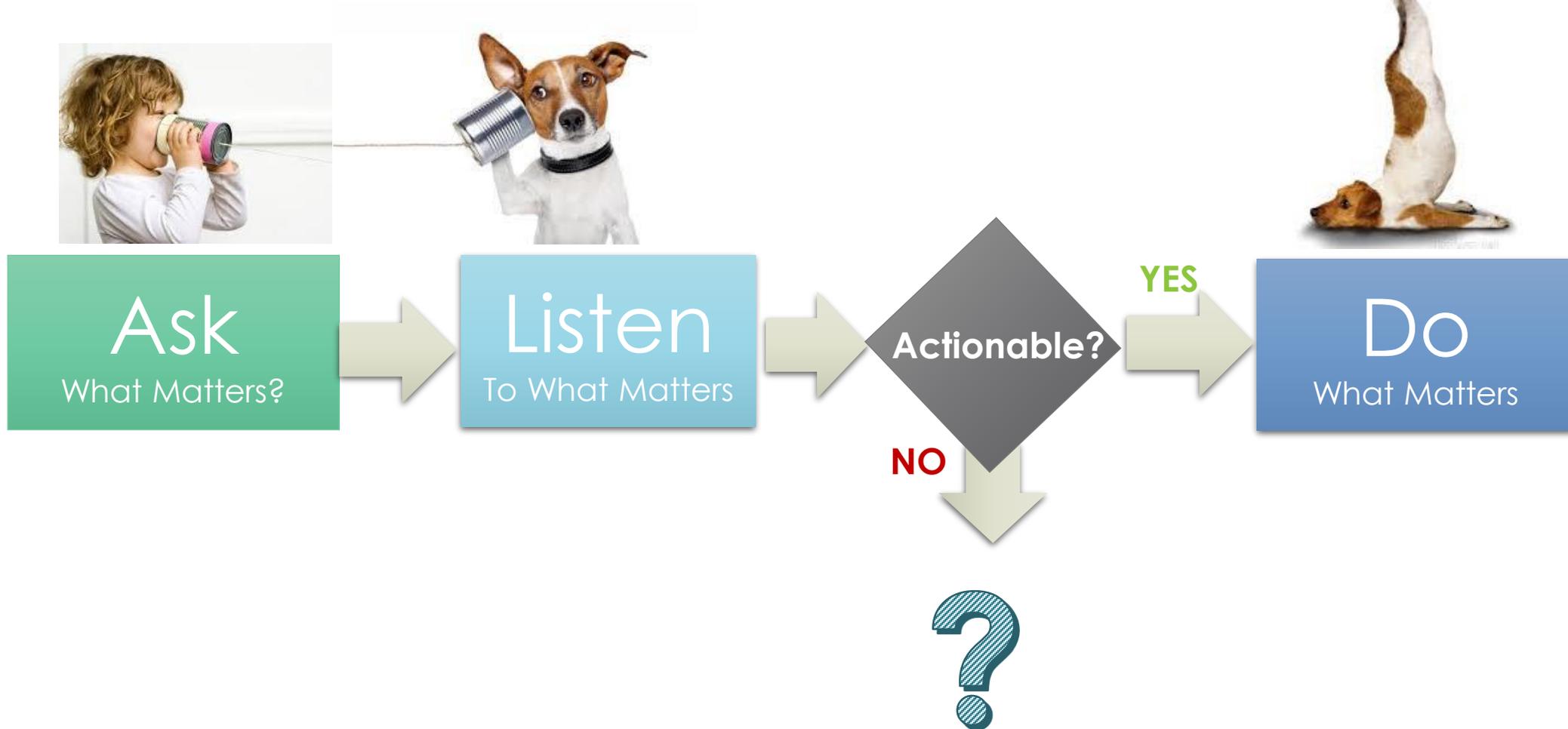
My son uses
drugs



Ask, Listen & Do *What Matters*



Ask, Listen & Do *What Matters*



Motivational Interviewing is “Doing” What Matters: Integrating Motivational Interviewing Spirit and Skills into What Matters to You? Conversations

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Damara Gutnick, MD^{1,2} and Sarah McNeilly, BA¹ 

Abstract

As the What Matters To You (WMTY) movement spreads across the globe, countless clinicians have been inspired to ask their patients its eponymous question: what matters to you? Still, some clinicians remain apprehensive about asking what matters, worried that it can open a Pandora's box of problems too big for any one person to solve. This paper argues that embracing the spirit and skills of motivational interviewing (MI) can help and provides practical recommendations for navigating the synergistic uses of MI and WMTY.

Ask, Listen & Do *What Matters*



Ask
What Matters?

Listen
To What Matters

Actionable?

YES

Do
What Matters

NO

REFLECT
On What Matters

Motivational Interviewing



MI SPIRIT

- Compassion
- Acceptance
- Partnership
- Evocation
- Empowerment



SKILLS

- Open Ended Questions
- Affirmations
- Reflections
- Summaries

*Gutnick and McNeilly, Motivational Interviewing is "Doing" What Matters. Journal of Patient Experience 2025

Ask, Listen & Do *What Matters*



Ask
What Matters?



Listen
To What Matters



Actionable?



Do
What Matters

NO



REFLECT
On What Matters



Doing
What Matters

Motivational Interviewing



MI SPIRIT

- Compassion
- Acceptance
- Partnership
- Evocation
- Empowerment

SKILLS



- Open Ended Questions
- Affirmations
- Reflections
- Summaries

*Gutnick and McNeilly, Motivational Interviewing is "Doing" What Matters. Journal of Patient Experience 2025

Doing WMTY is easily actionable most of the time!

WMTY Matrix:





Karen Turner
@KarenHTurner1

#wmtty20 in action @RoyalFreeNHS where @orlakRD asked a gentleman what mattered to him and he said he was too hot and getting really uncomfortable. She asked #wmtty, listened and then hunted down a fan! @WmttyWorld @WMTYScot @rachelnandy @RFTherapyTeam



Simple and meaningful
Just Do It!

What we learned and what we did

They said

Being outside matters to me. I'd love to go into the garden

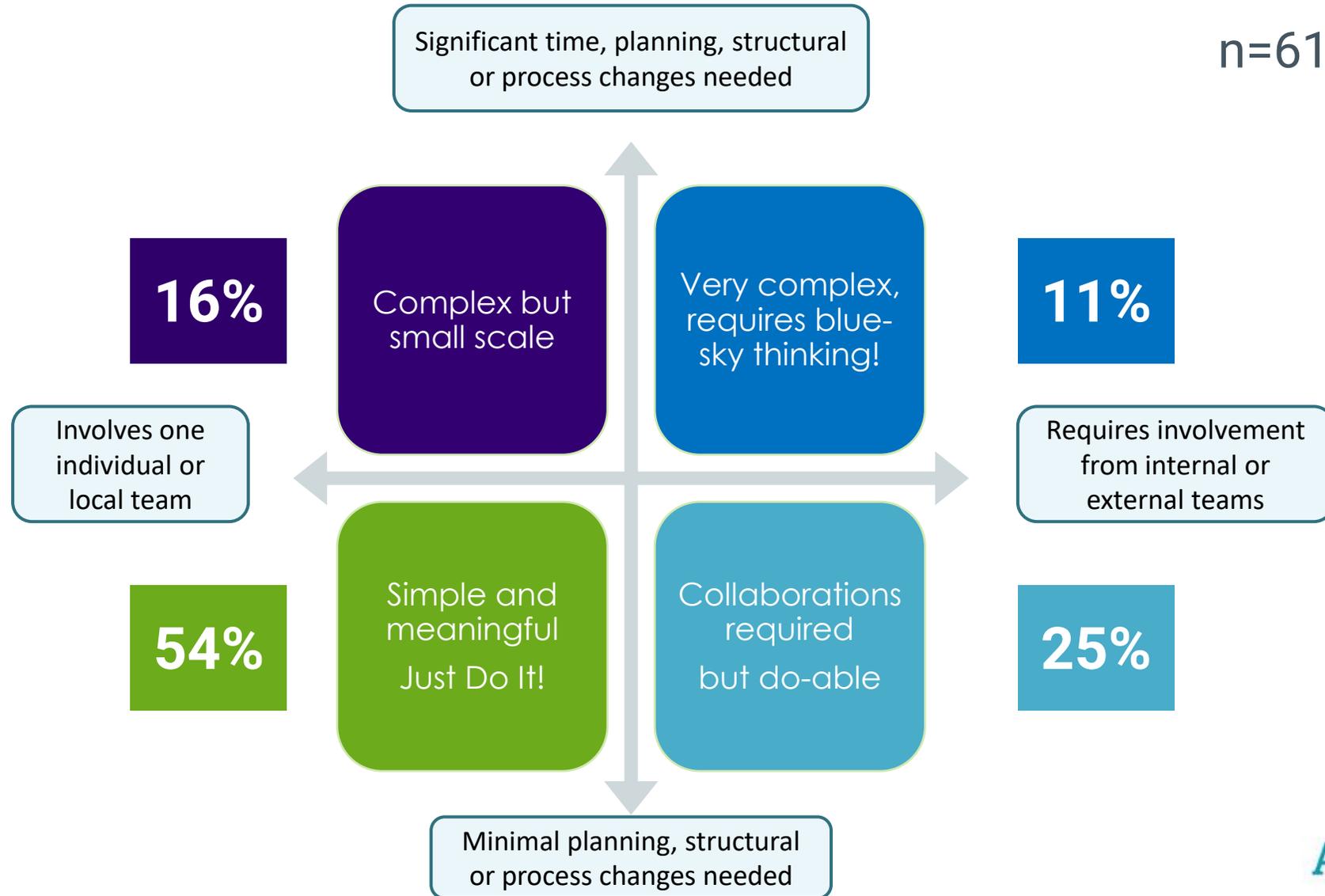
We Did

Team arranged for the patient to be taken outside in their bed



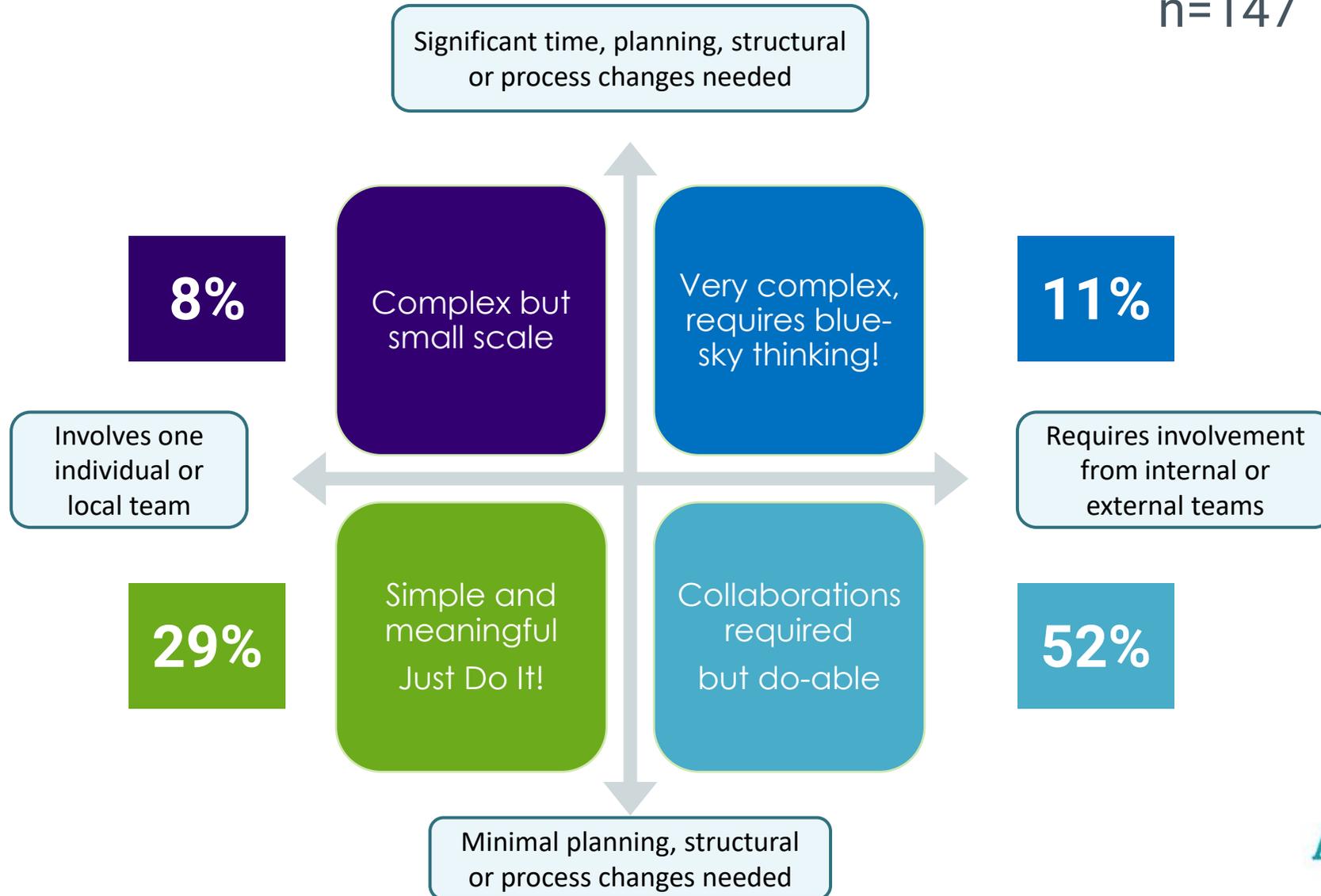
Collaboration required but do-able

Top Patient Requests NHS Royal Free London



Top Requests During the Pandemic by Employees

n=147



Building Momentum: Stories of Impact

Wakefield Hospital, Bronx, NY

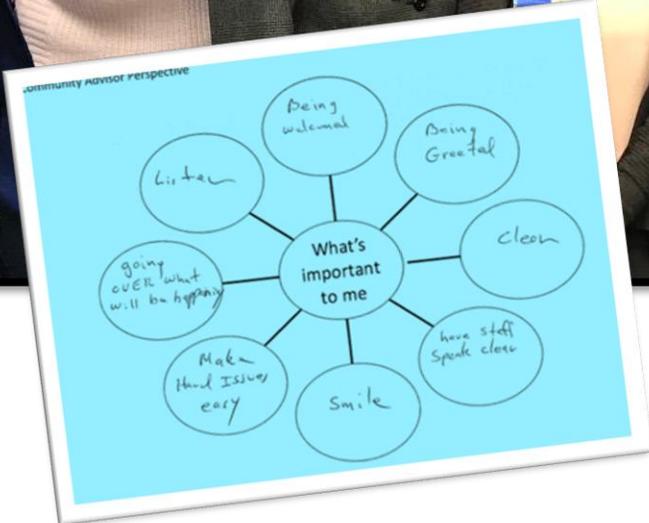


Person Centered Lens



Incorporating Patient Voice to Improve PX

Wakefield Hospital Community Advisory Board Embraced WMTY



CO-DESIGN
Bedside Interviews

- Elicit patient's preferences & Ideas re:WMTY

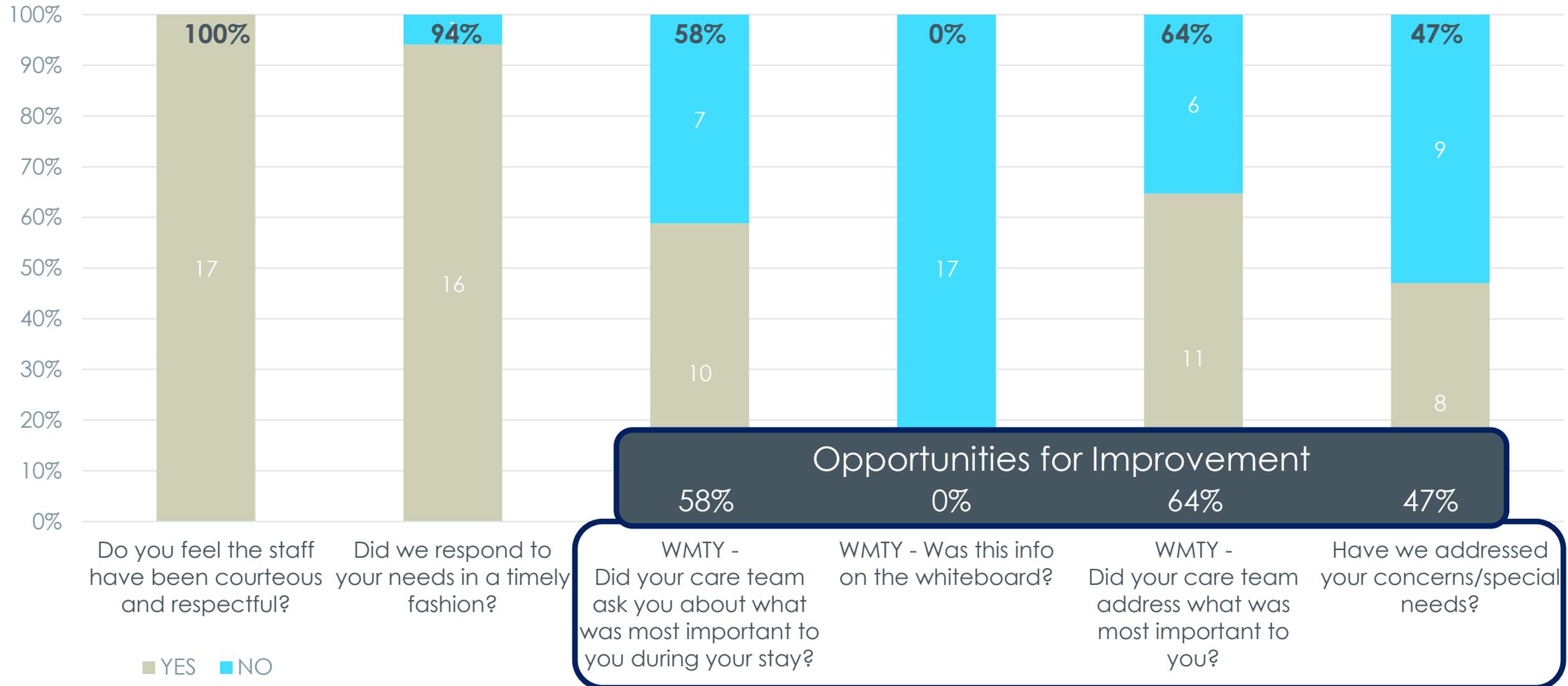
Integrating WMTY into the Orthopedic Joint Replacement Care Journey to Impact Patient Experience

*Montefiore Wakefield Hospital, Bronx, NY
GNYHA Clinical Quality Fellowship Project*



Baseline Proxy Metrics: Patient Interviews on 6N6E - June 2019

Patient WMTY Interviews at Wakefield June 2019 (n=17)



Integrating WMTY into the Joint Replacement Care Journey at Wakefield



"Being able to ride my bike again"

"Being able to play with my grandchildren on the floor"

"Dancing at my daughters wedding"

"Clean hospital bathroom"

"Being pain free"

"Knowing what to expect next"

Staff Engagement: A Wakefield Patient Story

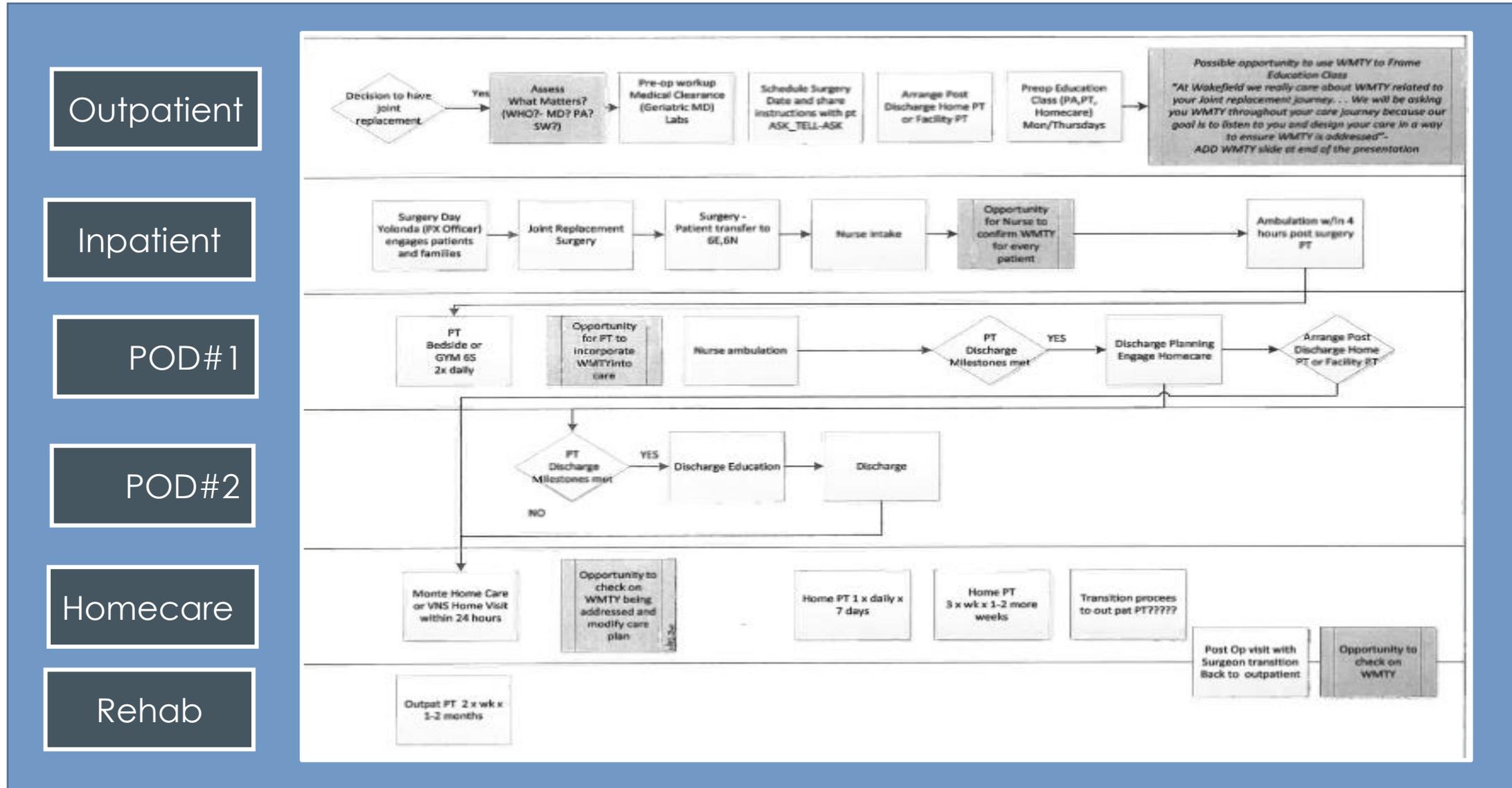


- 70 y.o. presented to ED
- CC of Hip pain and mass
- PMH: Total Hip Replacement
- Scheduled for MRI
 - h/o Claustrophobia

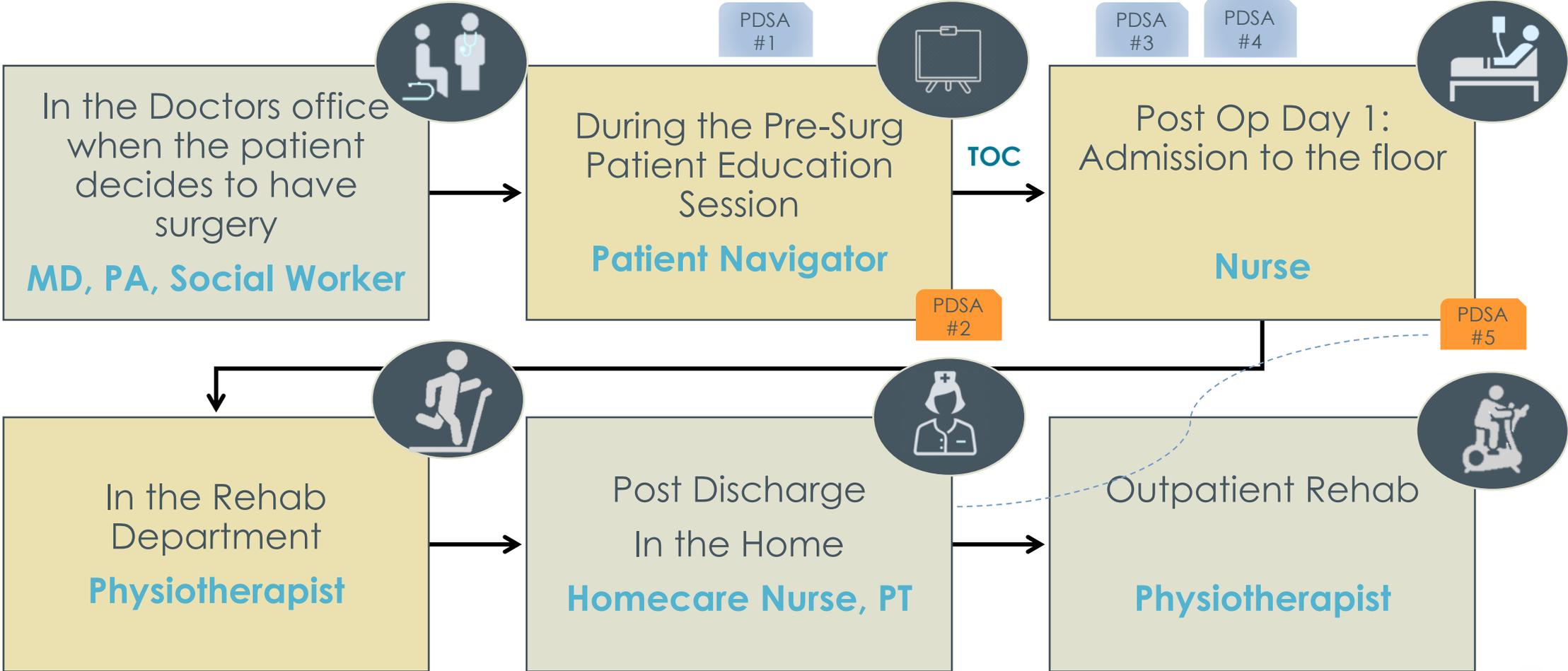
What Mattered:

For information regarding his condition be communicated to all members of the care team.

Process Mapping the Patient Care Journey



Process Mapping: Identified opportunities to integrate WMTY into the Joint Replacement Journey



PDSA Cycles

During the Pre-Surg
Patient Education
Session

Patient Navigator

- Integrate WMTY discussion into Pre-Op Education Session
- Create a “common language”

PATIENT- AND FAMILY-CENTERED CARE

At The Montefiore Center for Joint Replacement Surgery, our Health Care Delivery System is based on a model that:

- Provides a supportive environment.
- Involves you, your care coach and family members in the decisions related to your care.
- Shows respect to you and your family.

At Wakefield Hospital,

We care about . . . WHAT MATTERS TO YOU?

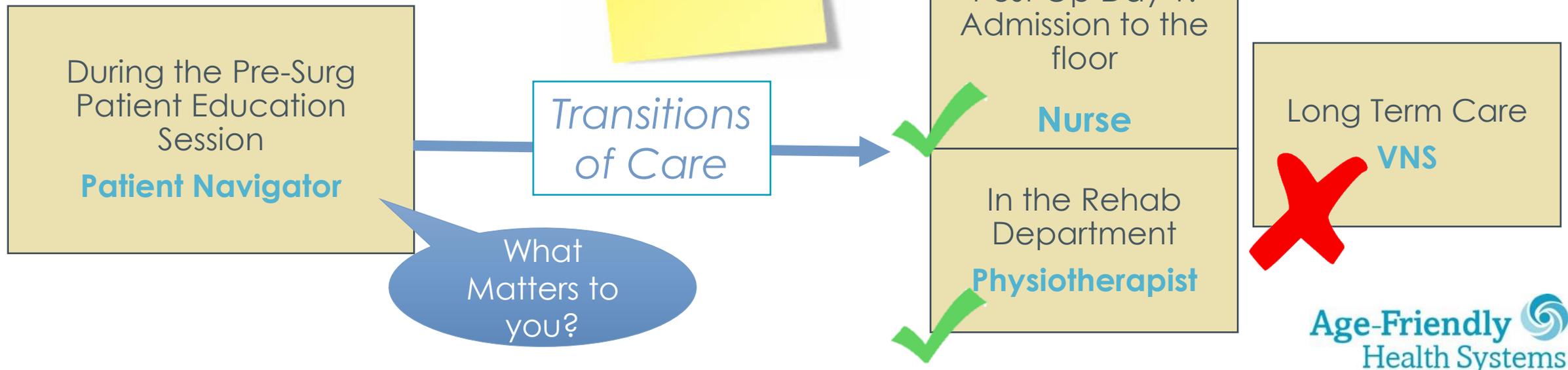
What are
your goals?



Montefiore
DOING MORE™

PDSA Cycles: Transitions of Care Document WMTY

- **Social Worker asks WMTY**
- **Use Sticky Note** to document WMTY in the EHR for downstream team member sharing



WMTY White Boards at Montefiore Nyack Hospital

Montefiore Nyack Today is 08/08/2019 ROOM # TCU 469 ROOM PHONE # 845-348-8469 FOOD SERVICE FOOD (3663)

SUN MON TUE WED THU FRI SAT

Preferred Name

MY CARE TEAM

Nurse Katie
PCA Kristin
Case Manager Lillian Ext 2345
Primary Provider Dr. Singh
Nurse Manager Patti Ext 2435
Physical / Occupational Therapy Trish
Respiratory Staff Jason

WHAT MATTERS TO ME?

Having my call phone nearby
Knowing times of pain med admin

Today's Plan / Goal
Walk with Physical Therapy
Use the Incentive Spirometer
Switch IV antibiotics to oral

STOP Please Call, Don't Fall!

MY FAMILY / CARE PARTNER

Name Elizabeth M
Phone Number (845) 828-8282

MY DIET

Regular

Special Dietary Instructions
 Feed Encourage Intake NPO: Nothing By Mouth
 Set-Up

MY QUESTIONS

How will I know what medications to take once I leave the hospital?
(discussed discharge packet)

MY PAIN MANAGEMENT PLAN

Wong-Baker FACES[®] Pain Rating Scale

0 No Pain 2 Little Pain 4 More Pain 6 Even More Pain 8 Quite a Bit of Pain 10 Worst Possible Pain

Pain Goal 2

Last Dose Given 8:00 am pm
Next Dose Due 12:00 am pm

MY ACTIVITY

Up In Chair At 8:30 am pm

Self Bed Rest Fall Risk
 Assist Level Bed Alarm Device

MY DISCHARGE PLAN / TRANSITION PLAN

Home with Home Care

Anticipated Discharge Date 08/10/2019

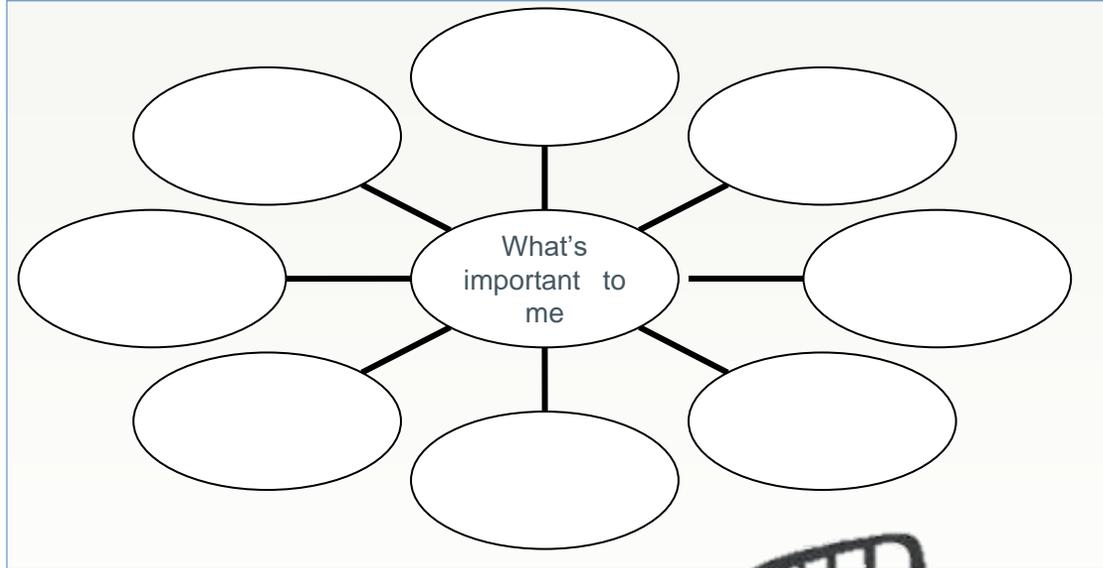
MY NEW MEDICATIONS / SIDE EFFECTS

Ceftriaxone - Diarrhea, Nausea, Vomiting

MY PRECAUTIONS / SAFETY ALERTS / SPECIAL NEEDS

Hearing Aides
 Dentures Full upper/lower
 Glasses

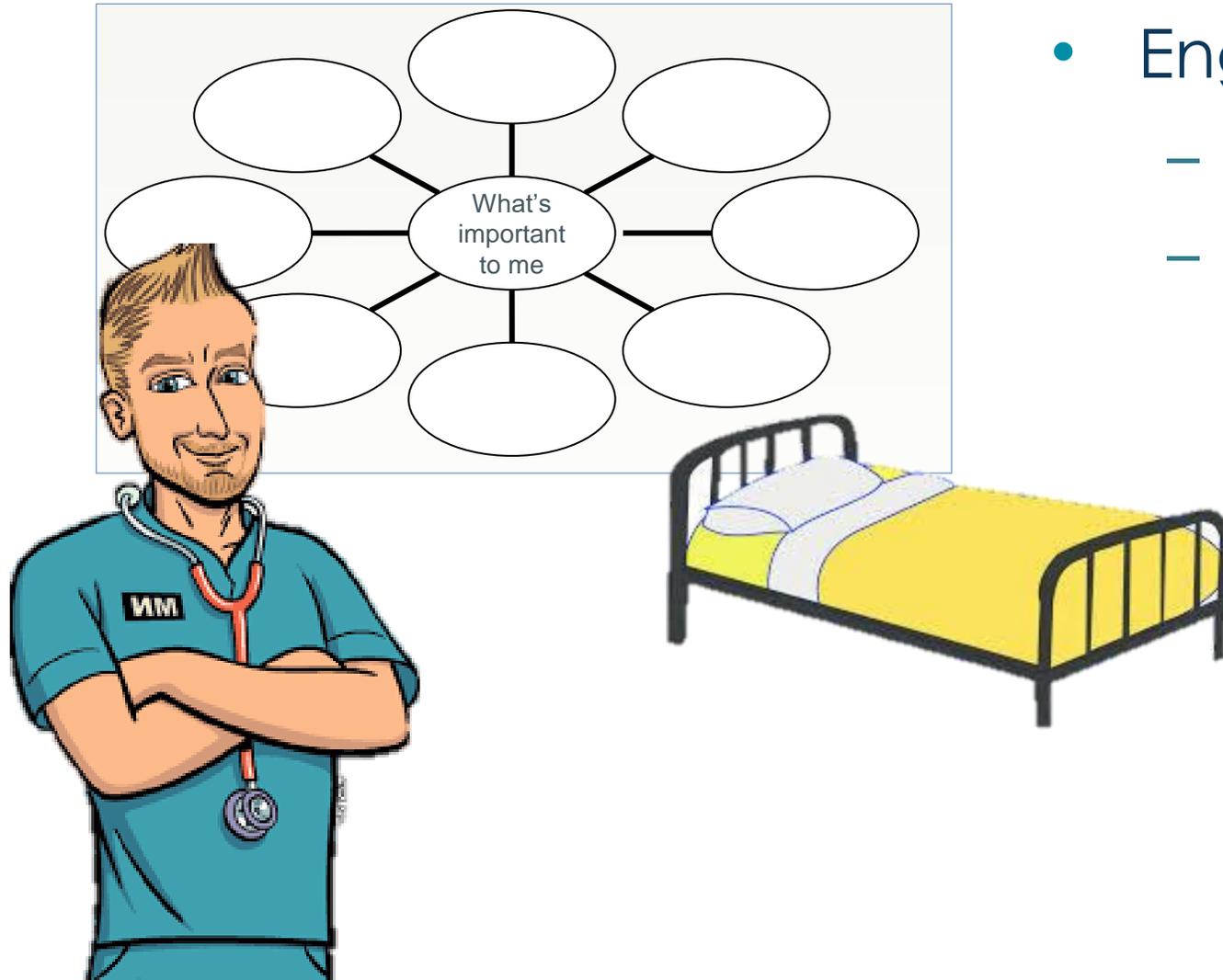
PDSA



Post Op Day 1:
Admission to the floor

Nurse

The Right Champion Builds Momentum

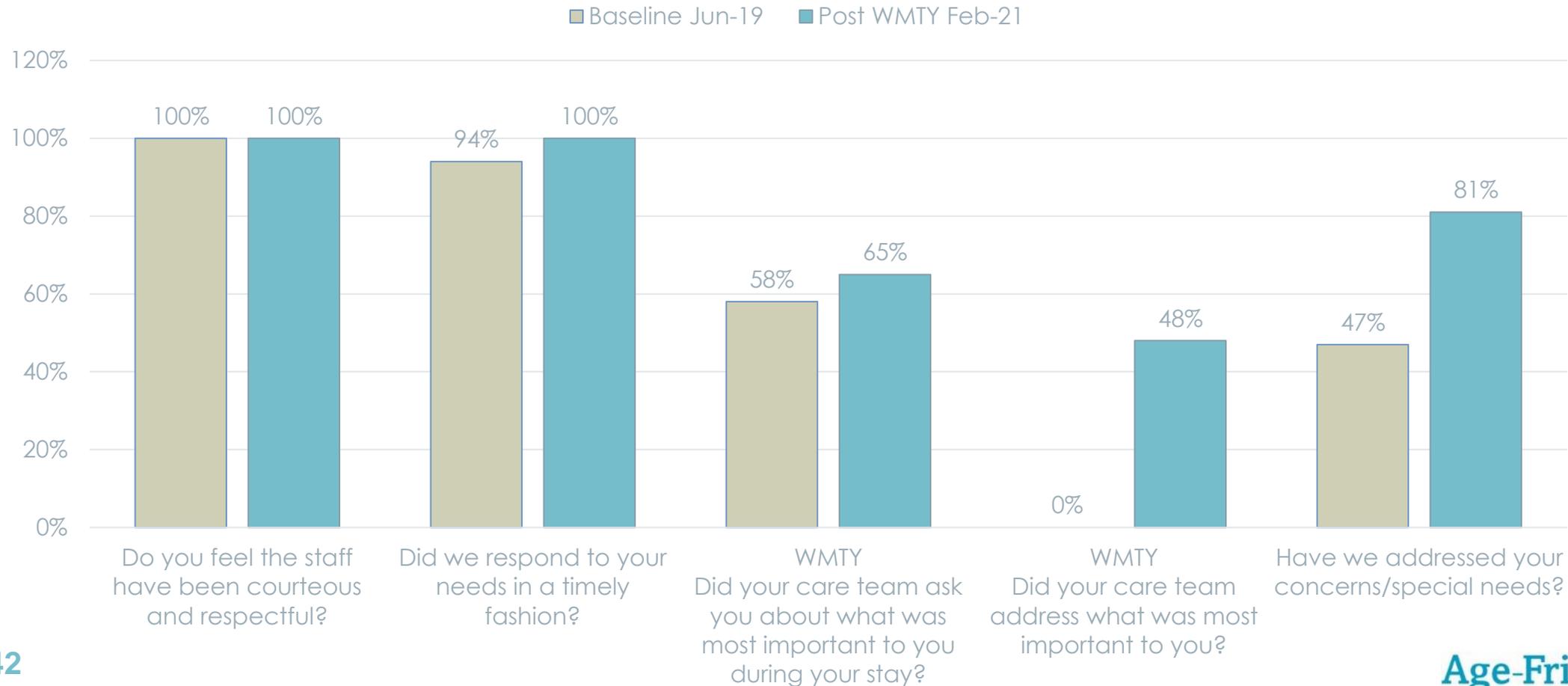


- Engage additional staff
 - Pre-op
 - Nursing



Wakefield: WMTY Impact

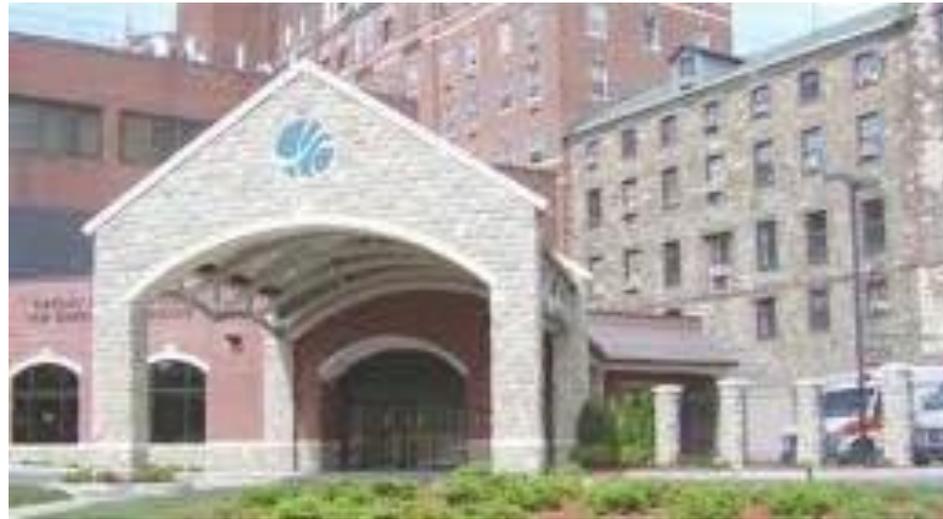
Patient Interviews Proxy Metrics 6E/6W



MHVC Leadership Donning Person Centered Frames



Hospital Leadership Executive Rounds: Changing Group Dynamics at St. Lukes

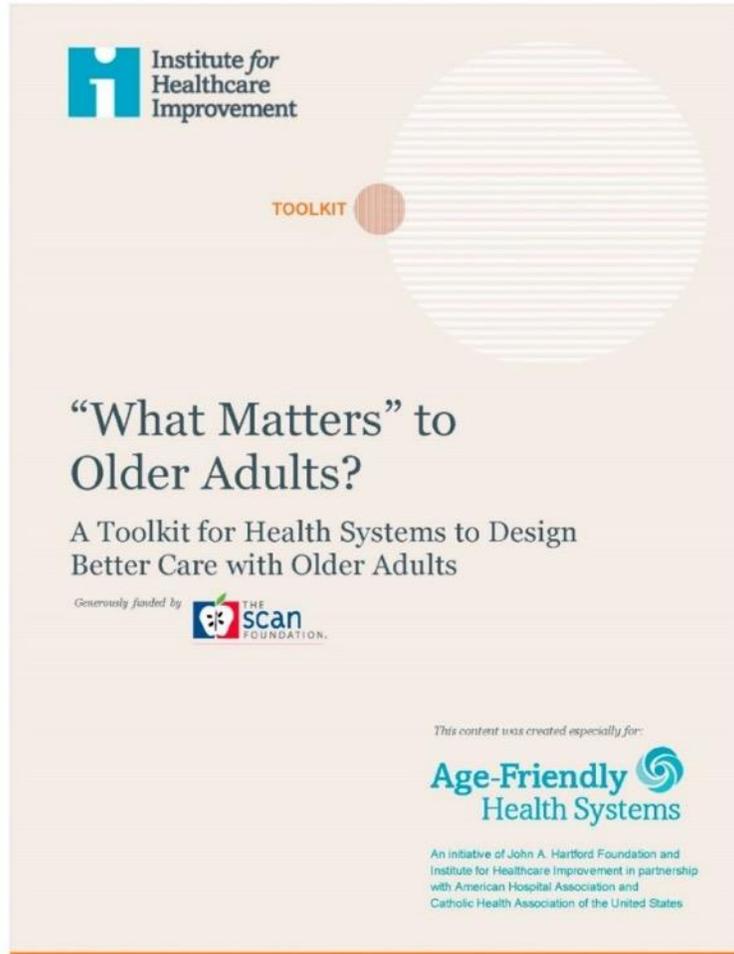


***Asking my leadership team "What Matters to you?"
changed the dynamics of our executive leadership
meeting. . . .less focus on barriers, . . . more on prioritized
solutioning***

- Joan Cusack, Former President & CEO,
St. Lukes Cornwall Hospital

WMTY Tools & Resources

Age-Friendly Health System: What Matters Toolkit



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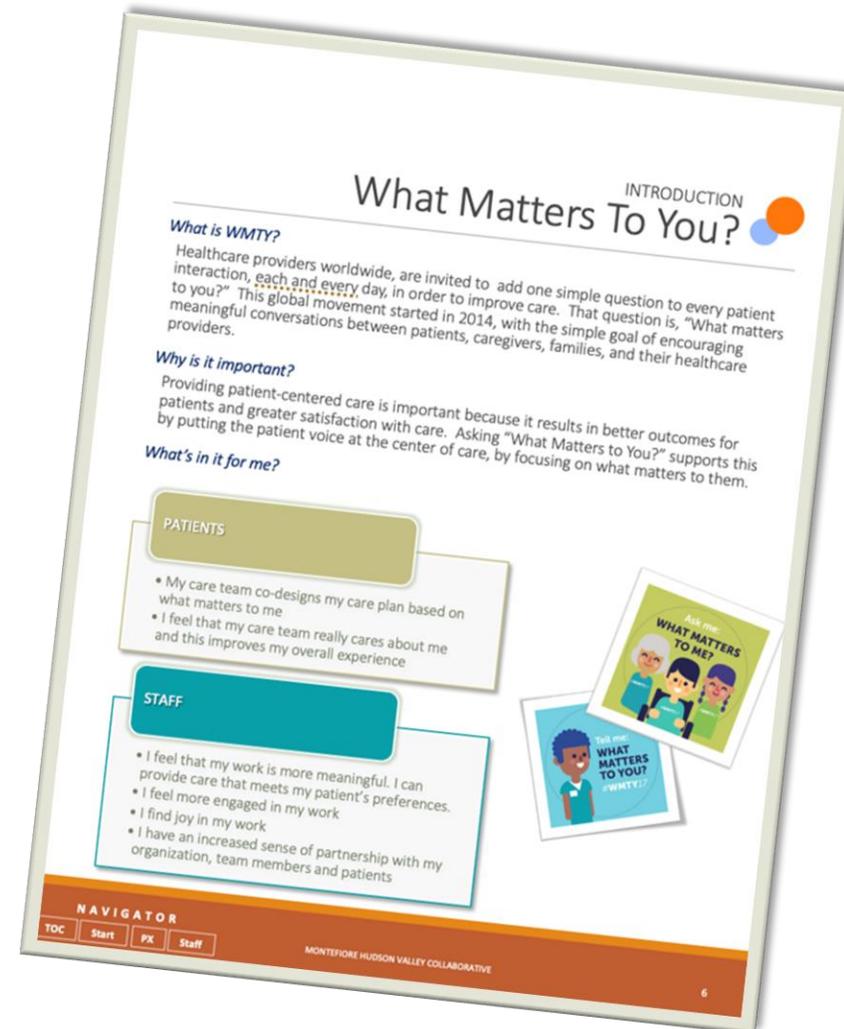
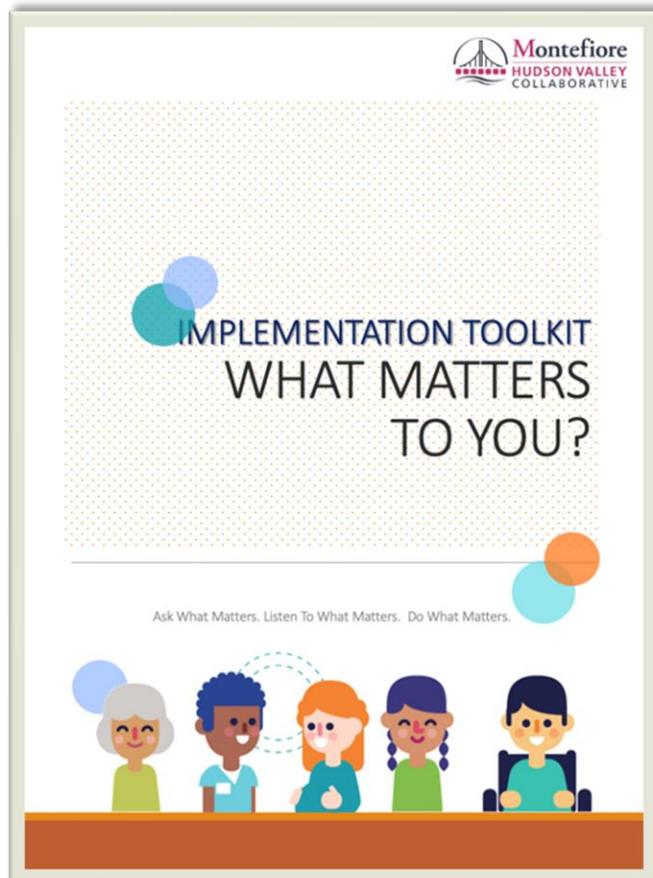
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Guide to Using the 4Ms

- Posted on www.ihi.org/agefriendly
- Learn how to get started with key actions to incorporate the 4Ms into your plan of care, including:
 - Ask the older adult What Matters– [page 31-32](#)(hospital) and [page 39](#) (ambulatory/primary care)
 - Align the care plan with What Matters – [page 34-35](#) (hospital) and [42-43](#) (ambulatory/primary care)

Montefiore Hudson Valley Collaborative WMTY Implementation Toolkit

Available at WMTY.world



Sustainability

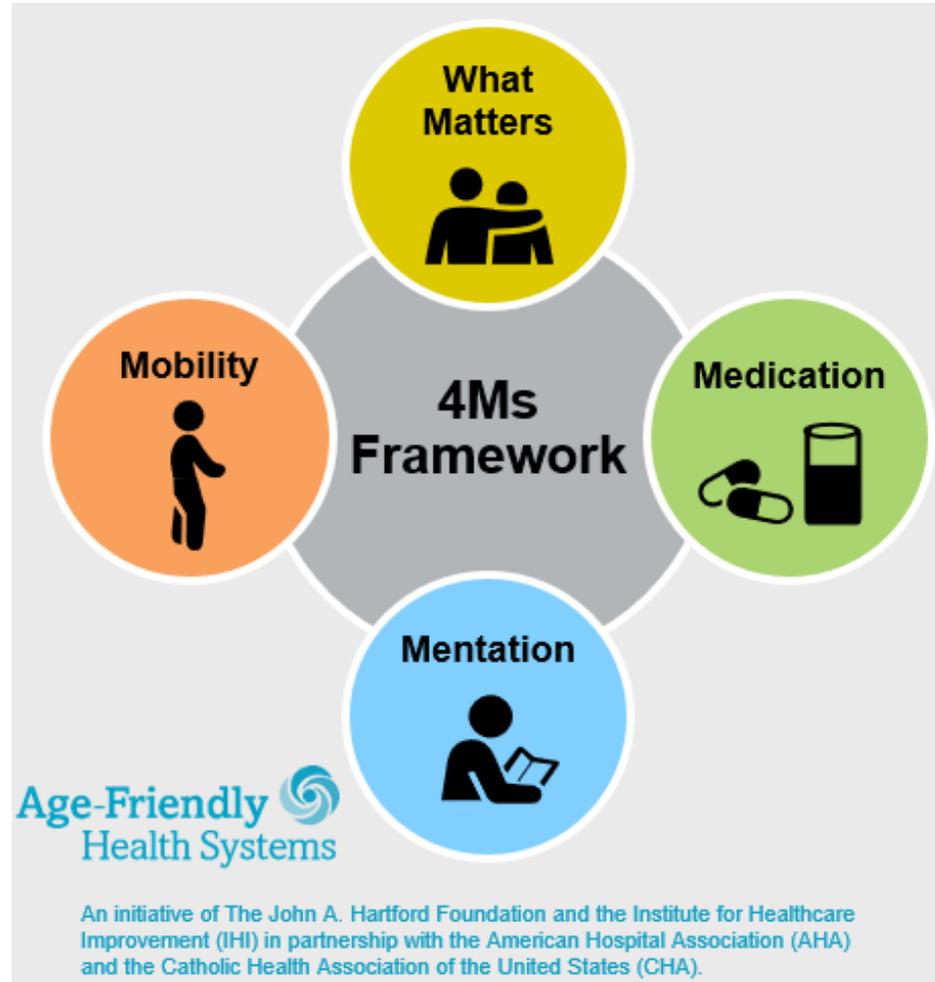
- Co-Design
- Change Management
- Build into Standard Workflow
- Build WMTY into EHR
- Don't squash the movement!



Top tips and pit falls

- Find champions
- Exec sponsor
- Takes time but keep focused
- Don't get disheartened
- Collect stories that show impact
- Avoid a tick box at all costs - needs to be meaningful
- Join up with others who are doing the work

Your System is Only Age-Friendly When You Act on What Matters to Older Adults



Join the WMTY Movement!

- Join our monthly calls
 - 3rd Wednesday 10am ET
 - Share stories and materials
- Visit our **WMTY.world** website
- Celebrate WMTY Day!
 - Tuesday, June 3, 2025



Questions?

WMTY
incorporated
into standard
hospital
admission
intake forms

What Matters to You!

WHEN GOING BIONIC

Welcome to the 7N Joint Replacement Center at
St. Luke's Cornwall Hospital
Help Us Get To Know You

During my recovery from joint replacement, I plan to have the following people available to support and assist me _____

I would like to manage my pain using the following : relaxation, cold therapy/ice, medications _____

I understand there is a patient navigator as well as trained nursing staff, physical therapists and case manager available to assist with mobilization/exercise, discharge planning, follow up care and to answer any questions.

I am concerned or feeling anxious about: _____

I would like to make sure my nurse knows: _____

I would like to make sure my doctor knows: _____

Any other concerns, question or request: _____

Thank you for choosing us as your Joint Replacement Center!

Patient Name: _____ Consultant: _____

NHS
Greater Glasgow
and Clyde

Patient's Preferred Name:	Named Nurse:
Date of Admission:	
EDD:	
Nutrition:	Active Care:
Fluids:	Other information:
Mobility:	
Bedrails: Required <input type="checkbox"/> Not Required <input type="checkbox"/>	

WHAT MATTERS TO ME

ECARD



Summary

Nyack WMTY Outcomes



- **Enriched relationships between staff & the senior leadership team**
 - Improved trust & transparency throughout the organization.
- **Improved 10/11 HCAHPs & Press Ganey key indicators.**
 - Positive feedback & unique stories collected from patients, families, and team members.



Nyack Hospital: WMTY Day

We ASKED What Matters to You? , You SAID, & WE LISTENED					
They Said	We did	They Said	We did	They Said	We did
Switchboard Operators stated they are receiving an increase in phone calls from patients who are unable to locate their call bells	Nurse Manager's made aware and will reinforce with staff. Nurse Leaders to also ensure patients are familiar with how to use call bell during leader rounding	Phlebotomy staff expressed concern re: lack of communication related to patient's condition and any potential behavioral concerns that may impact blood draws.	In discussion with Nurse Leaders & Linda Albert - PPE measures should be used on all patients regardless of clinical status. Discussing handoff with phlebotomy re: any patient behavior concerns so we can ensure all staff are safe.	Pharmacy inquired if Nursing Supervisors can become chemo certified to assist with evening chemotherapy administration	While having Nursing Supervision certified to assist with chemotherapy was entertained, they are normally needed in active management throughout the hospital and would be challenged to assist with chemotherapy administration. Also, providing chemotherapy during the daytime hours might be an improved experience for patients.
Teamwork between RNs and PCAs could improve. Some staff use phrase "Not My Patient."	Discussed at Nursing Director & Manager meeting re: teamwork and collaboration. "Not my patient" no longer in our vocabulary	Discussed need for PCAs to bathe patients daily.	Discussing expectation of daily bathing at NM meeting and to be discussed at PCA meeting on July 17th 2pm.	12 hour shifts for PCAs in Recovery Center	The PCA's shift times are provided within our union contract responsibilities.
Monthly PCA meeting	July 17th 2pm	Need greater inpatient capacity (especially in ECU)	at reallocation of inpatient beds		
"No Pass Zone" clinical team meeting	No Pass Zone at Manager's Office. "Pass Zone" audits will continue to monitor.	PCAs asked that the audits be done more thoroughly	on scheduled for		
Patient Experience would like to be more involved with the community outside of the hospital.	Patient Experience continuously making efforts to form relationship with community members (ex: Rockland Pride, Arc of Rockland, Rockland Clean Up). Open to add't suggestions and recommendations.	Acknowledge those individuals that come in to fill staffing holes	Nurse Directors discussing ways to acknowledge staff		
Need to improve flow and communication between ED & ECU	ED & ECU teams meeting to improve communication between units.	Short-staff PCAs and floating staff when units are down	HR recruiting and filling vacancies to decrease floating		
Improve "Bridge Ordering"	Bridge order set updated. ED & Inpatient staff educated on changes made.	4D wants to pursue Magnet status, have unit-based councils, promote certifications and shared governance	Discussing initiating unit-based councils and will work towards preparing for future Magnet status.		
Need to improve teamwork, collaboration and relationships with co workers	Continuing to reinforce importance of teamwork & collaboration. Implementing TeamSteps in September 2019 and will be house-wide in 2020.	ANM for Med Surg overnight	Currently working on job description for evening clinical support position for Med/Surg units		
OR Nurses requesting night shift	Position Posted	Establish ED float pool	Currently looking at enhancing current float pool		
Lack of sufficient supplies - par levels not being met for pillows, pads, linens, syringes, diapers	Par levels and re-stocking procedures for all supply closets have been revisited. Regular AM & PM checks are in place to assure that unit storerooms are re-stocked regularly. We believe this issue has greatly improved. In addition, Supply Chain is evaluating regular cart replacement as opposed to restocking. It is felt that this would further improve stock availability and par level replenishment. A pilot floor is being evaluated to test this concept.	ED providers need sickle-cell awareness	Falling Angels Sickle Cell Foundation information shared with all Case Managers re: support in the community available to sickle cell patients and their family members. Falling Angels preparing educational material and will send to us once complete.		

- Senior Leaders met with over 600 employees to find out what mattered to them.
- A stoplight report was created that highlights the actions taken based on the feedback received from staff.

ACTION COMPLETED

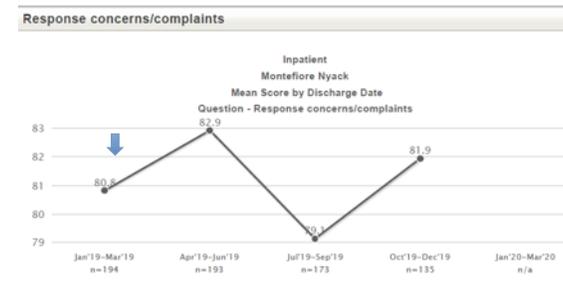
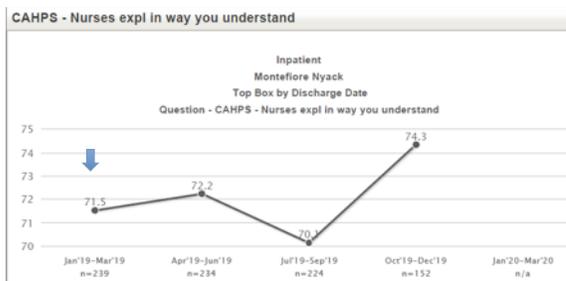
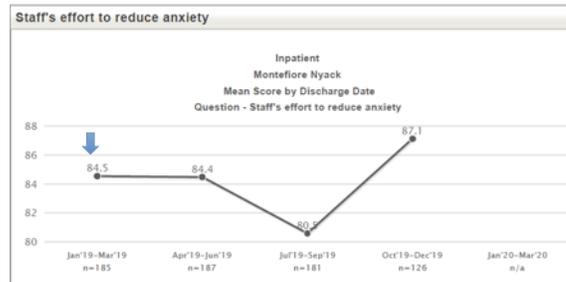
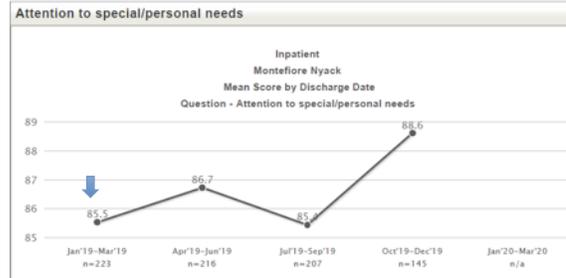
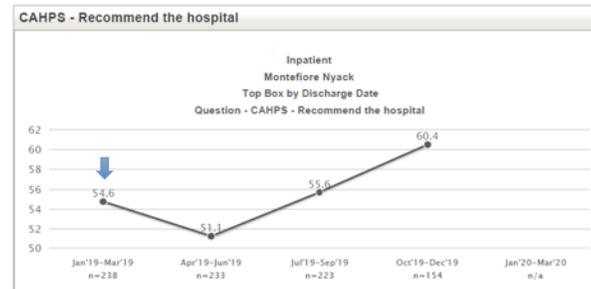
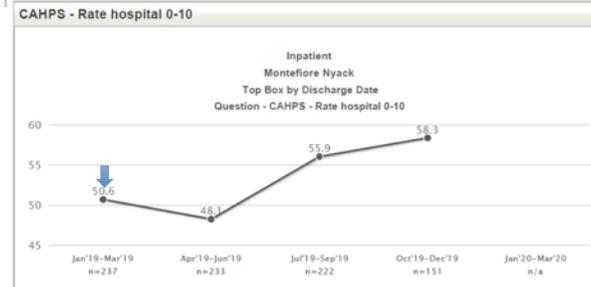
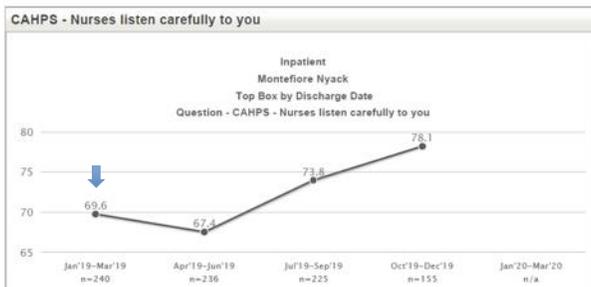
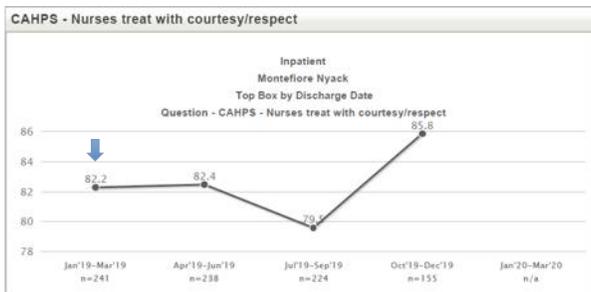
IN PROGRESS

Can not Complete at this time and here is why

Inpatient HCAHPS Metrics

Montefiore

Nyack



3 Wishes



<https://www.youtube.com/watch?v=ccsWGC35A60>

What can you do?



- Ask one person WMTY
- Really Listen to what they say
and
- Do What Matters!
- Reflect on your experience and share with someone else!

END

Addendum

3 Wishes



<https://www.youtube.com/watch?v=ccsWGC35A60>

END