

## **Case Study**

# Women and Newborn Health Service (WNHS)

December 2024

### Feedback as a gift

#### 1. Introduction

This case study examines the successful centralisation of Care Opinion at the Women and Newborn Health Service (WNHS) in Western Australia. By moving to a centralised, consistent approach in handling patient feedback, WNHS has improved its responsiveness, standardised its engagement with consumers, and created a strong foundation for patient-centred quality improvement. The approach adopted by WNHS serves as a potential model for other health services looking to strengthen consumer feedback integration.

#### 2. Background

Care Opinion has been a valuable tool across WA Health, empowering patients to share their personal experiences openly and anonymously. For WNHS, this platform has been essential in capturing both positive feedback and critical insights that inform improvements across the organisation.

#### **Focus** area

Before centralisation, WNHS's approach to responding to Care Opinion stories was decentralised, with area managers and frontline staff handling responses. This structure led to inconsistencies in responses. "When I started, it was quite decentralised," explained Delaney Gibbons, Director of Safety and Quality at WNHS. "Area leaders were responsible for responding. We want it to be meaningful to staff on the frontline, but we also want to ensure there is a level of consistency and timeliness."

#### 3. Evaluation of the Case

Centralising Care Opinion within WNHS has led to significant improvements in feedback handling, aligning the service more closely with patient-centred values and quality and safety standards.

• Centralised Consumer Feedback Management: The decision to centralise responses allowed the CLS team, based at King Edward Memorial Hospital (KEMH), to oversee feedback handling while consulting local managers to ensure that responses are well-informed and contextually relevant. Gibbons elaborates, "The members of our CLS team...facilitate a written response in full collaboration with the managers of the area, who undertake a local investigation and provide feedback about what local changes or service improvements will be made as a result of the feedback." This model balances organisational consistency with the local context necessary for meaningful responses. The centralised model at WNHS also ensures consistent, empathetic responses while achieving a two-business-day response target. Gibbons emphasises the importance of timeliness: "We really aim [for] two business days...and most months we get 100% [compliance]," underscoring WNHS's commitment to swift, high-quality responses that demonstrate respect for patient input. This model allows clinical staff to focus on patient care, with the CLS team dedicated to maintaining a responsive and unified approach to feedback.

- Incorporating Feedback into Strategic Oversight: WNHS has elevated Care Opinion feedback to a central place in its quality and safety frameworks, using it to drive broad organisational improvements. "When we hear from our patients...we use that feedback through the way we operate, whether we need to update policies, [or] update the infrastructure," explains Gibbons. This alignment ensures patient feedback informs executive decision-making, guiding policy adjustments, practice improvements, and infrastructure development to address genuine patient needs and concerns.
- Encouraging a Culture of Recognition: WNHS has developed a supportive approach that fosters positive morale through Care Opinion. Staff members who receive praise in patient stories are awarded "Opinion Hero" certificates, co-signed by leadership and printed with the feedback itself, to acknowledge and celebrate their contributions. "One of the midwifery unit managers...has a channel about sharing positive feedback. All the staff members [can] celebrate each other as those posts go through," says Gibbons. This approach, which includes feedback-sharing channels on Microsoft Teams, recognises staff members' efforts, reinforcing the positive impact of patient feedback on staff engagement and workplace culture.
- Maintaining Patient Rights and Staff Safety in Transparent Responses: Balancing transparent responses on a public platform while supporting staff members can be challenging, particularly with negative feedback. This transparency requires WNHS to address patient concerns without publicly criticising individual staff members—a delicate task that CLS has approached with great care. As Gibbons explains, "We take considerable effort to acknowledge a patient's negative experience...without being critical of the staff members."

**Negative feedback on Care Opinion:** When responding to negative feedback, the CLS team acknowledges patient concerns with empathy. For instance, if a patient describes a rude interaction, rather than agreeing outright or implying discipline, WNHS might respond with, "The experience you describe is not in alignment with our values, and I am sorry that it occurred. I'm grateful you've reached out so we can take steps to make sure it doesn't happen again." This response addresses the issue while maintaining respect for the staff member involved. As Gibbons notes, "those steps should absolutely involve a discussion with [the staff member] about the interaction and remediation as required, but it wouldn't be fair to [the staff member] to post so publicly."

In an internal formal complaint where the staff is named: When a complaint names a specific staff member, managers discuss the issue privately with the individual involved. Staff are often distressed to learn they have negatively impacted a patient, and many request an apology be included in the response. In these cases, the apology is framed respectfully: "As part of their review, the manager spoke to the staff member you encountered during your admission. They were saddened to hear about the impact their communication had on you and would like to offer their unreserved apologies." This structured approach maintains accountability while supporting a positive culture for staff.

If a staff member is not apologetic: In cases where a staff member does not wish to apologise, WNHS handles it internally through performance management, and the response remains empathetic but focused on improvement: "I'm grateful you've reached out so we can take steps to make sure it doesn't happen again." This language signals action without exposing the staff member to undue public scrutiny. **Responding to vexatious complainants**: Occasionally, a complaint may appear vexatious. Even in these instances, WNHS maintains neutrality and empathy, acknowledging the patient's experience without attributing fault: "I am sorry that your experience did not meet your needs." This approach respects patient concerns and ensures all feedback is taken seriously, while also preserving a fair and supportive workplace.

This careful balancing of transparency and staff support allows WNHS to address patient feedback meaningfully while maintaining a respectful culture that fosters constructive accountability.

#### 4. Outcomes

The centralisation of Care Opinion at WNHS has produced measurable benefits for the organisation, illustrating how patient feedback can drive meaningful improvements in healthcare. Key outcomes include:

- Enhanced responsiveness and patient trust: With the CLS team's oversight, patients now receive timely, empathetic responses, reinforcing trust in the care they receive at WNHS.
- Strategic integration with organisational priorities: By embedding Care Opinion feedback within quality and safety frameworks, WNHS ensures that patient insights drive real-world changes in service delivery, aligning healthcare practices with patient expectations.
- **Supportive recognition of staff**: Recognition initiatives like "Opinion Hero" certificates and feedback-sharing channels create a culture of appreciation, encouraging staff morale and engagement by highlighting the positive impact of patient feedback.
- **Balanced transparency and respect for staff safety**: WNHS's centralised model fosters a supportive approach to handling feedback, maintaining patient rights to transparency while ensuring that staff concerns are handled in a constructive, non-punitive way.

Through the centralisation of Care Opinion feedback, WNHS has effectively balanced transparency, staff support, and patient-centred engagement, setting a powerful example for other health services. The model demonstrates how structured feedback management can enhance service quality, align organisational practices with patient insights, and foster a culture of respect and accountability.



Thank you to Delaney Gibbons, Director, Safety Quality and Performance at the Women and Newborn Health Service (WNHS) Western Australia

