



**Of the 510,450 people living in the Auckland district, approximately 2 out of every 5 will have been born overseas, nearly 5% of whom would struggle to communicate their basic needs in English (2013 census).**



**54, 738 interpreter requests  
(2015)**

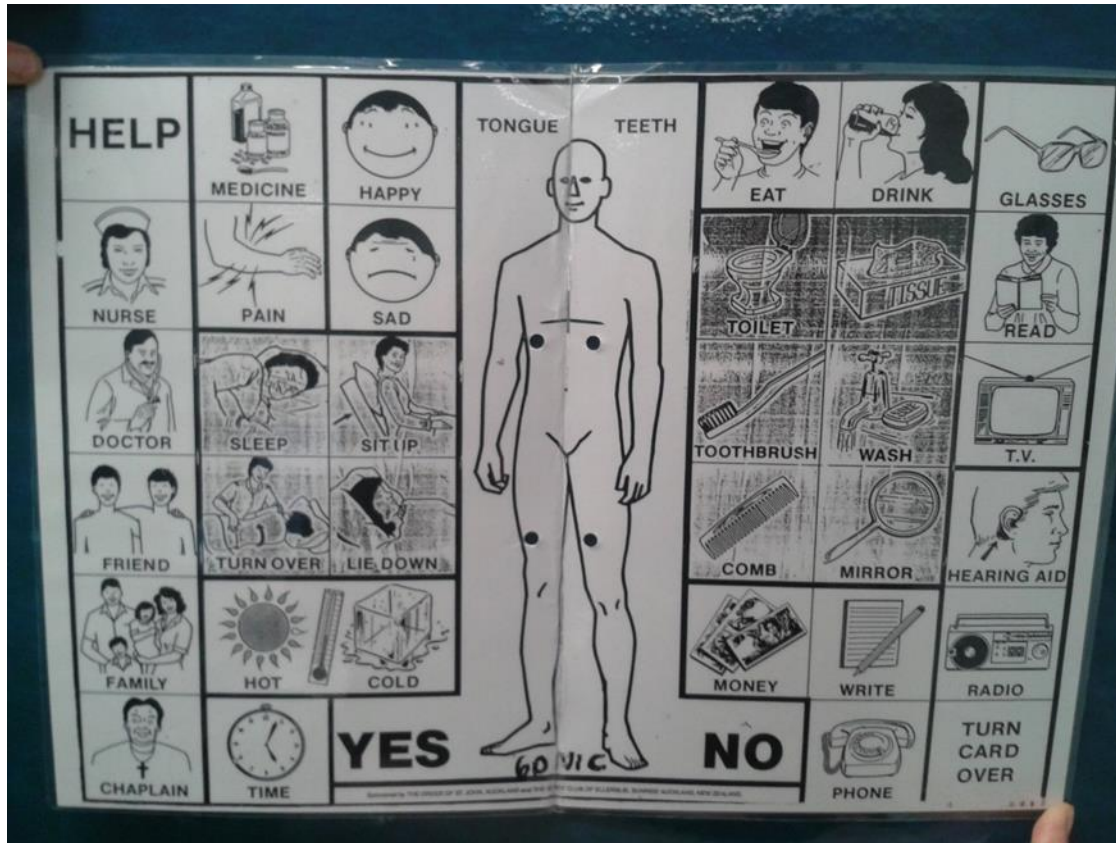
# What was our current practice?



*“It was a struggle before, we had to guess what patients wanted, you’d go in circles trying to work out what they wanted, sometimes you could find a colleague who spoke the same language ...”*

**Staff Nurse, Reablement ward**

# What were our resources?



# Ad-hoc solutions

*I need help with something.....*

head 	up 	fix my pillow 	bathroom 	TV remote 	nurse call button 
feet 	down 	Please wash & change me. 	blanket 	glasses 	clean glasses 
turn lights on 	turn lights off 	open/close curtains 	telephone 	listen to music 	doctor 
lip balm 	lotion 	eye drops 	wash my face 	sit in the chair 	go to bed 
stop 	that's okay 	thank you 	Get me off this board!!! 	leave me alone 	don't leave 

Courtesy of [www.speakingofspeech.com](http://www.speakingofspeech.com)



# What was our remit?

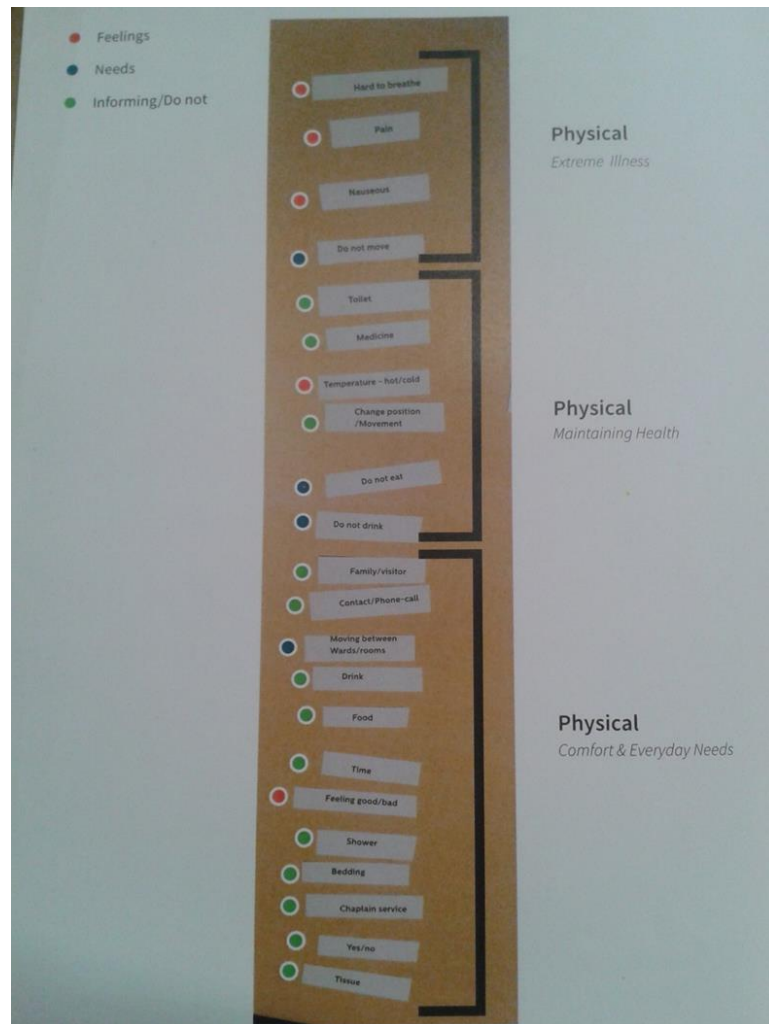
- Imagery needed to be universally understood (without words);
- Widely applicable across as many cultural contexts as possible
- Easily accessible by staff and low cost – e.g. printable from intranet
- Infection control measures considered
- Black and white or with minimal colour to provide maximum contrast when reading – especially for older patients



# Human Centred Design

We engaged a group of clinicians and interpreters to investigate

- How staff currently interacted with limited or non-English speaking patients
- What was most difficult to communicate?
- What was most important?



# Human Centred Design

We heard:

- Communicating everyday needs with non-English speaking patients was often difficult, frustrating and time consuming
- Staff felt concerned that they might not be delivering the best care for this vulnerable patient group





# Prototyping

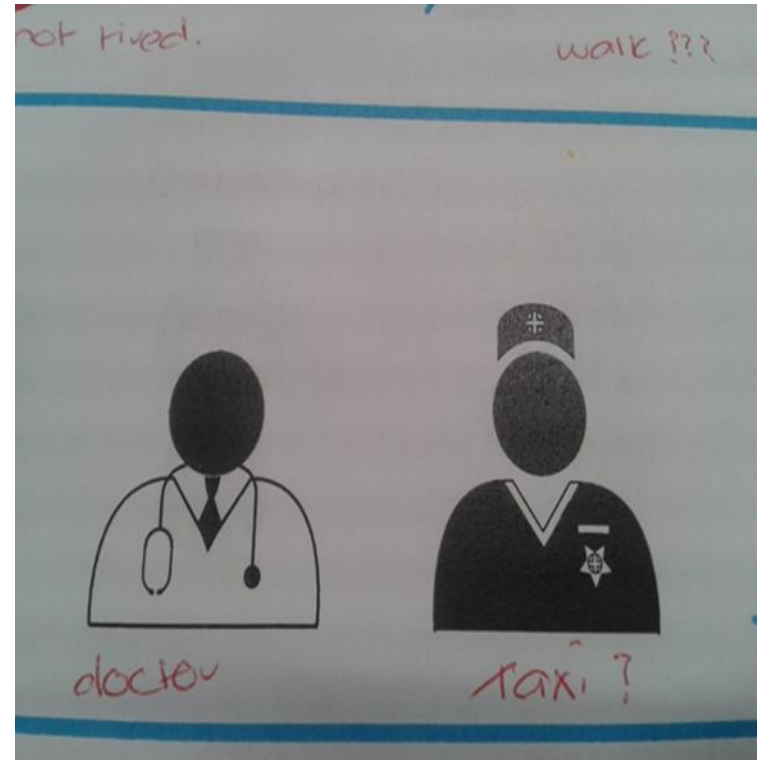
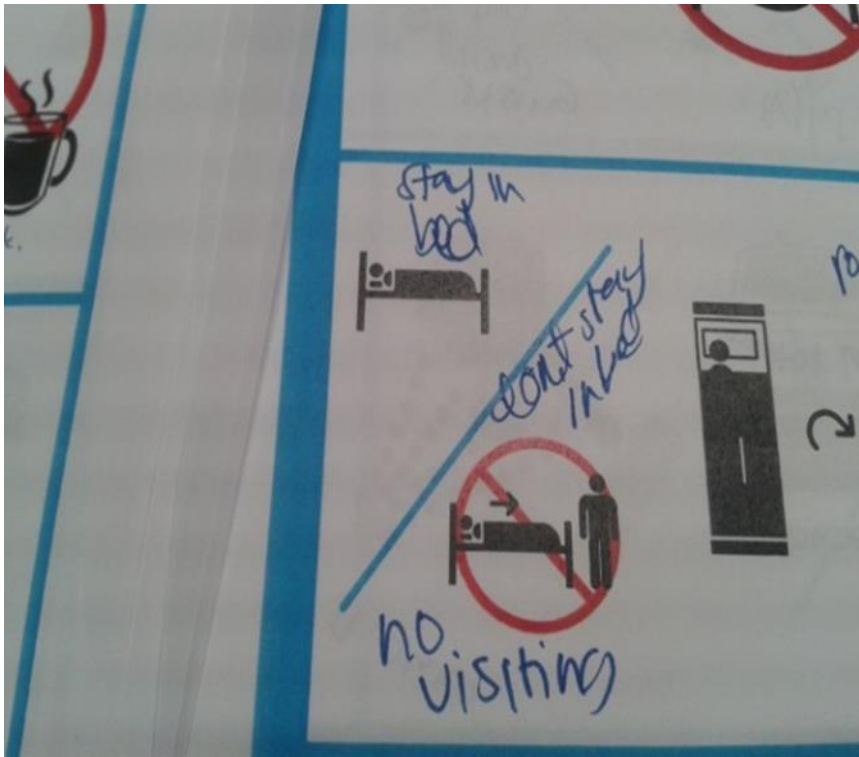


# Prototyping



*Cutting and rearranging an early iteration of the icons to make sense of their order. We settled on Intentional Rounding to guide icon hierarchy – focussing on priority needs around pain, elimination, positioning, environment, and personal needs or possessions*

# Testing for meaning

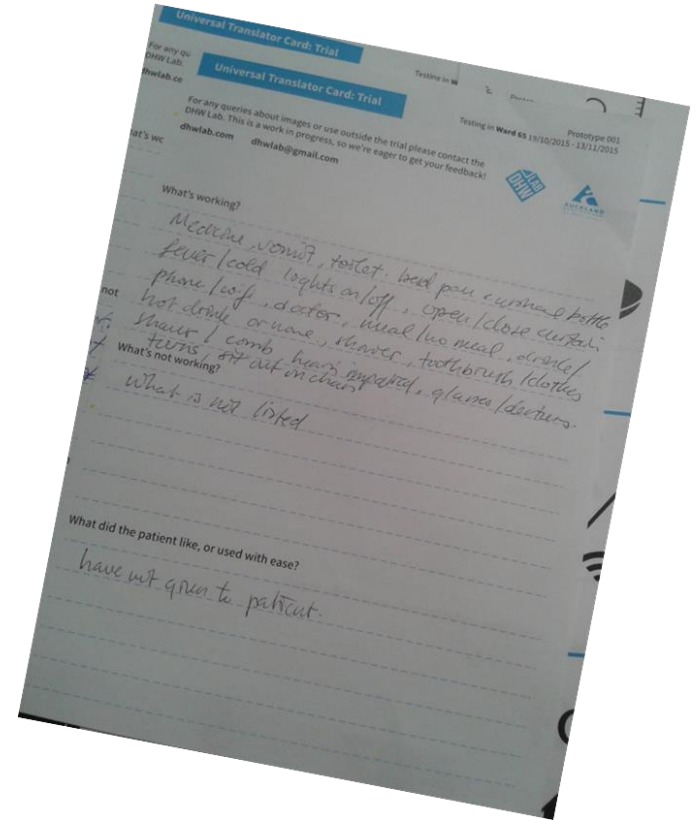


*Examples of universal icon testing with Rangatahi programme students – acknowledging different interpretations of icons attributed to cultural and contextual differences, including ethnicity and age.*

# Testing on wards



*Test packs for wards – posters, information and evaluation sheets for staff, 2016. We used PDCA cycles to test iterations in clinical environments where we got feedback from patients, families and staff regarding the appropriateness of icon choice and design.*



# Communication Cards go live!

## Communication Cards | English



Yes / Good  
No / Bad



I have pain  
(please point where)



Hard to breathe



Family /  
please call my family



Nausea / I feel sick



Toilet



Urine bottle



Bed pan



Bed / I want to lie down



Turnover / change position



Sit up in bed



Sit in chair



I want to walk /  
please walk



I don't want to walk /  
please do not walk



Walking aid

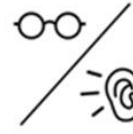


Wheelchair

Created by the Design for Health and Wellbeing Lab in partnership with staff and patients at Auckland City Hospital.  
For more information contact [kornijah@govt.nz](mailto:kornijah@govt.nz) | [@auckland](https://www.auckland.govt.nz)



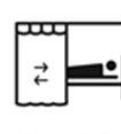
## Communication Cards | English



Glasses / hearing aids



I feel hot / I feel cold



Open curtains /  
Close curtains



Lights on / Lights off



I'm hungry /  
Please try to eat



I'm not hungry /  
Please do not eat



I'm thirsty /  
Please try to drink



I'm not thirsty /  
Please do not drink



Shower



Wash hands



Brush teeth / dentures



Shave / comb



Change clothes



Bag



Book



Mobile phone / tablet

Created by the Design for Health and Wellbeing Lab in partnership with staff and patients at Auckland City Hospital.  
For more information contact [kornijah@govt.nz](mailto:kornijah@govt.nz) | [@auckland](https://www.auckland.govt.nz)





## Have we addressed a need?

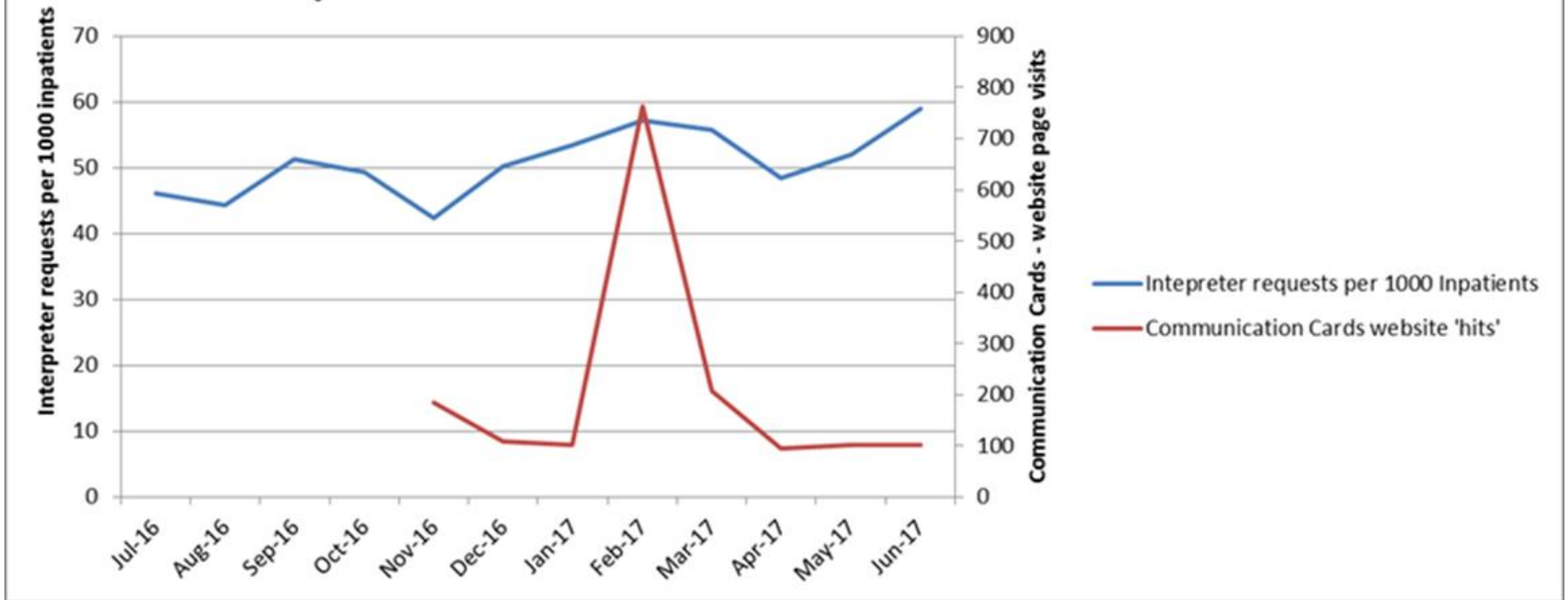
2300 visits to the communication cards web pages since Nov 2016

Month	Hits	Unique Users
2016-11	183	117
2016-12	109	70
2017-01	102	44
2017-02	764	479
2017-03	207	113
2017-04	94	51
2017-05	102	56
2017-06	101	54
2017-07	77	51

*Table shows Hippo intranet traffic for the Communication Cards page. Spike in February relates to post on eNOVA (hospital weekly online newsletter to staff).*



**Graph showing rate of Interpreter requests per 1000 Inpatients compared to number of Communication Cards website visits**



There was no obvious measure to demonstrate change; however, we measured interpreter requests per 1000 patient episodes to ensure no negative counterbalancing effect and have overlaid post hoc hits on the tool intranet page to show consumption of the tool

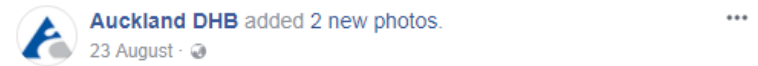
# Spreading the message

We also promoted the Communication Cards via Facebook, Twitter and Instagram.

*Facebook: Reach - 4,408(number of users who would have seen post)  
Engagement – 925 (sum of post clicks, reactions, comments and shares)*

*Twitter: Impressions/reach - 1,434 and  
Engagement – 83*

[icons@adhb.govt.nz](mailto:icons@adhb.govt.nz)



We're always looking for ways to improve communication with patients. For our patients who don't speak English as a first language, we now have a set of 'Communication cards' that can be used at times when interpreters aren't immediately available. Thanks to all the patients, families, staff, and our Design for Health and Wellbeing Lab who helped create them - we've received lots of positive feedback already about the difference they are making! #ADHBPX

Patients and family members can learn more about the cards - which are now available in 12 languages - at the following link: <http://ow.ly/8ehu30erkKI>  
Staff looking to find out more can visit the Communication Cards page on Hippo.



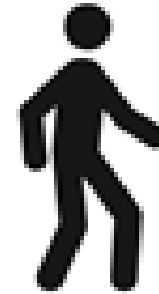
# What are people saying?

*“Sometimes we use them as prompts for our patients, for example, a Tongan gentleman did not know what we meant when we brought him towels and when we tried to gesture that it was time for a shower, he did not want to get up. When we showed him the picture for the shower, he got up straight away to have a wash. Then every day he knew what the towels meant”.*

*Charge Nurse, Reablement*



# What are people saying?

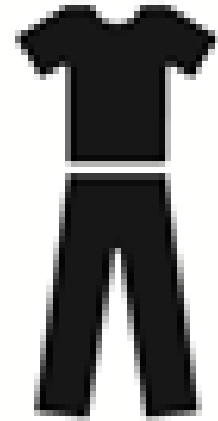
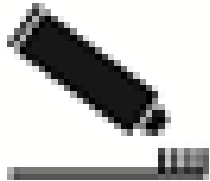


*“We were especially fortunate to trial the tool with a patient who had experienced a fall with harm which was partially attributed to not being able to communicate her needs to staff. Feedback regarding the tool was positive, so much so that the patient took the card with her to her next rehabilitation placement”*

*Physiotherapist, Reablement*



# What are people saying?



“I just wanted to let you know that I have used the communication cards for patients in our services’ AOU, whom speak little or no English. It has really helped me communicate basic ADL needs across better when interpreters are not available.

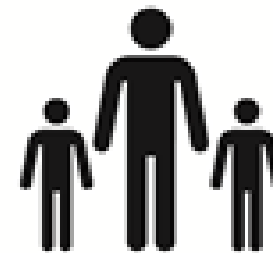
I have found the pictures are really helpful when communicating with some patients who are cognitively impaired.

Its another mode of communication that they can relate to. So I print the cards out when I am out reviewing patients, more often than not, I have used it for patients and it been invaluable.

So thank you for all the hard work you put into it”



# Key Learnings



- Creating universally understood icons was sometimes difficult and time consuming – the value of prototyping and testing
- Icons that the public thought were most important differed somewhat to what staff felt were most important – the value of Human-centred design, recognising contextual bias
- The prototyping process proved its value when it demonstrated that we should invest in paying for some simple translations to better meet the needs of our patients, families and staff
- Patient engagement with vulnerable groups is difficult, especially when language is a barrier – take opportunities for engagement wherever you can



# Communication Cards

<http://www.adhb.health.nz/health-professionals/resources/communication-cards/>

Communication Cards | English

Yes / Good / No / Bad

I have pain (please point where)

Hard to breathe

Family / please call my family

Nausea / I feel sick

Toilet

Urine bottle

Bed pan

Bed / I want to lie down

Turnover / change position

Sit up in bed

Sit in chair

I want to walk / please walk

I don't want to walk / please do not walk

Walking aid

Wheelchair

Created by the Design for Health and Wellbeing Lab in partnership with staff and patients at Auckland City Hospital. For more information contact koro@adhb.govt.nz | @adhb.com

Communication Cards | English

Glasses / hearing aids

I feel hot / I feel cold

Open curtains / Close curtains

Lights on / Lights off

I'm hungry / Please try to eat

I'm not hungry / Please do not eat

I'm thirsty / Please try to drink

I'm not thirsty / Please do not drink

Shower

Wash hands

Brush teeth / dentures

Shave / comb

Change clothes

Bag

Book

Mobile phone / tablet

Created by the Design for Health and Wellbeing Lab in partnership with staff and patients at Auckland City Hospital. For more information contact koro@adhb.govt.nz | @adhb.com