“What Matters To You?” (WMTY) captures important individualised information about a person. It is completed with patients, their families and carers, and kept at the bedside, in the patient’s notes or their care plan. It provides information about the person in the context of their own life.

WMTY improves communication and builds rapport between staff, patients and carers. It invites staff to ask what matters to the patient, to listen to the answer and use this information to offer more personalised care. Meaningful connections lead to more inclusive healthcare decisions, care strategies, personalised communication and trust. This contributes to better care outcomes.

Who is this tool for?

All clinical staff (nurses, midwives, doctors and allied health professionals). Other staff who communicate with patients (e.g. hospital porter, food service staff) may also find referring to the information helpful.

When should you use this tool?

At the beginning of a healthcare relationship with a patient. For example, upon admission to the clinical unit/ward, or when doing your baseline assessment. Remember to involve the patient’s carer and family, if this is aligned with the patient’s wishes.

Using ‘What matters to You?’

1. Use the WMTY template or design your own to gather important information when you connect with new patients.
2. After introducing yourself with "Hello my name is", start a conversation by informing the patient that you are interested in understanding what matters (or is important) to them.
3. To start, ask the patient their preferred name and write this in the centre space on the template.
4. Continue to complete the template in a conversational way or ask the patient and their family to finish. Make sure you communicate that this is to help others understand them better and they only need to answer questions they are comfortable with. It is important to respect cultural differences, and consider whether some questions may not be appropriate.
5. WMTY is not a lengthy story. One to three words per field helps staff to quickly identify what matters to the patient.
6. Once completed, place the form at the front of their patient record or care plan.
7. When visiting or working with a patient, check their ‘What Matters to You’ form and use these as prompts to strengthen your relationship.

Safety Fundamentals and Accreditation

Implementing this Safety Fundamental for Person Centred Communication will support healthcare organisations to demonstrate they are meeting actions in National Standards 1: Clinical Governance, 2: Partnering with Consumers, 3: Preventing and Controlling Healthcare Associated Infection, 4: Medication Safety, 5: Comprehensive Care, 6: Communicating for Safety, 7: Blood Management and 8: Recognising and Responding to Acute Deterioration.
<table>
<thead>
<tr>
<th><strong>What is Important to You</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>My preferred name</strong></td>
<td>List the first name of important family members or friends.</td>
</tr>
<tr>
<td><strong>People important to me</strong></td>
<td>List interests or hobbies which have been or are still important to the person e.g. golf, fishing, gardening, lawn bowls, dancing, football, knitting, watching TV, sport, listening to the radio.</td>
</tr>
<tr>
<td><strong>Hobbies and interests</strong></td>
<td>Hearing familiar music can be reassuring and settling. If music is important, the family can be asked to bring some music in to play.</td>
</tr>
<tr>
<td><strong>Favourite music</strong></td>
<td>It is important to know if the person has a particular pet they are attached to. People can often miss the closeness and familiarity of their pet. Knowing the pets name and talking about the pet can be reassuring for the person and support your communication with them. You can also ask the family to bring in any photos of the pet they may have.</td>
</tr>
<tr>
<td><strong>Pets</strong></td>
<td>Beliefs and practices (religious or otherwise) are important to many people. You can explore this by asking patients to share what makes them feel happy and content, or perhaps places and events that have special meaning to them.</td>
</tr>
<tr>
<td><strong>Spiritual and cultural needs</strong></td>
<td>List any routine that is important to the patient. e.g. ‘my slippers’ or ‘my dressing gown’. ‘I always have a shower at 8am.’ Consider how this can be incorporated into the daily schedule.</td>
</tr>
<tr>
<td><strong>Important routines &amp; things I like</strong></td>
<td>This space can be used to add any other important information specific for the patient and context. For older, confused or vulnerable patients you may expand this to also include other information that will help staff to understand unexpected exhibited behaviours. Questions to ask may include: Is there anything else you would like us to know? Is there anything you don’t like?</td>
</tr>
</tbody>
</table>

**Principles behind this concept**

This framework has been adapted from examples that were used to support person centred care for hospitalised older persons with cognitive impairment or dementia.

The purpose of the conversation is to understand and act on what matters most to the person receiving care. The motto: ‘Ask what matters, listen to what matters, do what matters’, is intended to help people think and act in a way that is tailored to the needs of the person.

---

**Acknowledgement and source**

The CEC consumer partners for their input and support

*What matters to you – Introduction by Healthcare Improvement Scotland*