Our aim
To encourage and support more meaningful conversations between people who provide health and social care and the people, families and carers who receive health and social care.

We want to help people move from ‘What’s the matter with you?’ to ‘What matters to you?’ conversations that support the development of high quality compassionate support, care or treatment focused on what people really want and need.

What we did
We built on the success of ‘What matters to you day?’ 2016 and promoted the 2017 activities on:
• our website www.whatmatterstoyou.scot, and
• Twitter using #WMTY17 and @WMTYScot.

We also:
• sent emails to a range of networks
• shared our learning from 2016 at national and international conferences
• held online meetings (Scotland and international), and
• provided free resources for participants in physical and editable electronic formats, this included badges, pens, feedback postcards, post-its, posters and stickers.

What difference did it make?
People shared their feedback about taking part in ‘What matters to you?’ day. This included:
• positive experiences about having the conversation
• improved outcomes or experience of care for service users
• overcoming challenges, and
• next steps to take the approach forward.

More examples about the difference ‘What matters to you?’ day has made to people can be found on www.whatmatterstoyou.scot or via the QR code below.

Participation
1,017 individuals or teams from across 30 countries registered on our website to take part in ‘What matters to you?’ day 2017. This was a 76% increase in individuals or teams and a 114% increase in the number of countries registering since 2016. Across these additional countries, more than 1,000 new teams took part.

What we learned
Since last year’s activities, we:
• set up a Facebook page, whatmatters2you, to reach a wider range of people
• saw a 48% increase in registrations from primary and social care, and
• helped people to provide feedback that focused on acting on what mattered to the person.

Our next steps are to:
• encourage teams to develop local processes to routinely ask and act on what matters to people
• continue to build engagement and involvement in primary and social care
• build the expectation with the general public to be asked what matters to them, and
• continue to encourage people to ask what matters, listen to what matters, do what matters.

The problem:
It is recognised that the relational elements of care are vital to our ambition to create a health and social care system that is person-centred, safe and effective. Yet, the prevailing culture and pace of activity in these settings often makes prioritising these important skills difficult.