



hello my name is...

A call for research on ... [#HelloMyNames](#)

is a [healthcare campaign](#) designed “to encourage and remind healthcare staff about the importance of introductions in healthcare” (see <https://hellomynameis.org.uk/>). The Campaign was founded by Dr Kate Granger (1981 to 2016) aka [@GrangerKate](#) and her husband Chris Pointon aka [@PointonChris](#) in August 2013.



The ‘Hello my name is’ campaign can be considered to be a *population-level socially-mediated intervention* aimed at increasing the number of health professionals who (a) introduce themselves to every patient they meet, and (b) consider the patient at the centre of their interactions. Almost four years after its launch, on 8th August 2017, we searched the scientific databases (CINAHL, Embase, Web of Science, PsycInfo, Medline) and Google Scholar, for articles including the term “#hellomynameis” or the phrase “hello my name is” for evidence of the uptake or implementation of the campaign, associated actions (e.g., wearing of ‘Hello my name is’ badges, orientation of staff to the campaign), and its outcomes (and any citing articles). In total, we located:

- 28 sources, including 21 full text PDFs which were retrieved for review.
- 1 full peer-reviewed journal article, a commentary on a debate about person centred care in the NHS (Hardy, 2015),
- 1 peer reviewed conference abstract on research auditing bedside boards and patient recall of patient and nurse names in a hospital which had adopted the campaign (Mahdi, English, & Ahmed, 2016),
- several non-peer reviewed editorials and other publications about the ‘Hello my name is’ campaign of Dr Kate Granger [@GrangerKate](#) and Chris Pointon [@PointonChris](#).

We did not locate any systematic evaluation of the campaign in the UK or internationally, or any research on patients’ views of the campaign or its outcomes.

Collaborative, interdisciplinary research is now needed to evaluate the impact of the ‘Hello my name is’ campaign on health services, organisations, staff, and patients alike.

The following is information gleaned from selected sources located in our search on 8th Aug 2017:

- **Debs Robertson (2013)** [@RobertsonDebbie](#) noted that the hashtag #hellomynameis, coined by [@GrangerKate](#), came about “after she tweeted about her own experiences and perceptions of a stay in hospital. As a medic ‘on the other side’ she felt it would be useful to tweet and then storify her experience.” (p. 473).



- **Stephenson (2014)** reported that student nurses at Swansea University suggested wearing the 'hello my name is' badges, and that as a result more than 200 of the students would wear the badges, and "the university plans to extend them to students on other healthcare-related courses in the future."
- **Kmietowicz (2015)** noted that Kate first used the hashtag on 31st August 2013, and by 2015 400,000 NHS staff and more than 80 NHS organisations had signed up to the 'Hello, my name is' campaign "in which NHS staff are encouraged to introduce themselves to patients".
- **Peate (2015, p.131)** described the genesis of the #hellomynameis campaign, commenting that: "saying who you are, greeting someone, can suggest to the other person that you value them; making an introduction can make a big difference to how people feel."
- **Flynn (2015)** provided details about the campaign, some campaign principles, tips for both spreading the campaign in social media or launching a local campaign on a "ward, unit, or team", along with @GrangerKate Twitter handle, hashtag #hellomynameis, and website hellomynameis.org.uk
- **Hardy (2015)** reported on a debate held on 2 July 2015 at London South Bank University School of Health and Social Care (@LSBU_HSCPPC) on 'Is health and social care person centred?'.
 - The panel featured speakers @KathEvans2 @JohnWalsh88 for the affirmative, and Andree le May, Emeritus Professor Nursing, Southampton University and @ShaunLintern for the negative.
 - Regarding the "recent trend in nursing (and social media noms de plume) of starting any interaction by politely stating your name" (i.e., #hellomynameis), Hardy reported that "as the evening's debate continued it became evident that this simple act of kindness and social courtesy just isn't enough to respond to a complex health and social care culture" and raised the question: "is this simplicity a starting point towards changing a culture where people can reclaim their workplace as a caring and person-centred one?" (p. 518).
 - At the close of the debate "a significant number (79%) of the audience voted the statement 'health and social care is person-centred' as being false."
- **Dean (2016)** reported that "Using mainly social media, the [#hellomynameis] campaign has been backed by more than 120 health organisations across the UK, including hospitals, ambulance trusts, universities and clinical commissioning groups, reaching more than 400,000 healthcare professionals. It has spread beyond health care into other sectors and is being used in Australia, New Zealand, the US and Canada." Kate Granger worked and was a patient at Leeds Teaching Hospitals NHS Trust, and the head of the oncology clinical service unit Kate Smith reported that about 13,000 staff had taken the pledge that they would "always introduce themselves, and many now wear a name badge emblazoned with the campaign message." Erin also reported on the Kate Granger compassionate care awards, set up by NHS in 2014, and that the campaign had raised 250X (Pound symbol) for the Yorkshire Cancer Centre in the days before her death.
- **Kmietowicz (2016)**. At the BMJ Awards 2016 (5th May), Kate Granger was awarded a one-off 'Special Achievement Award' for her work as "founder of the successful 'Hello, my name is' campaign, which encourages medical staff to introduce themselves to patients (Kmietowicz, 2016). Kmietowicz reported that Kate had 42,000 Twitter followers at that time.
- **Mahdi, English and Ahmed (2016)**. In the 'International Journal of Surgery'. Mahdi, English, and Ahmed (2016) provided an abstract on an intervention study at the Royal London Hospital, Barts Health NHS Trust in London, a hospital taking part in the #hellomynameis campaign. The study involved five general surgery wards in an audit of
 - how many communication boards at the patient's bedside included the consultant's name; and



- how many of those patients knew their consultant's name and the name of the nurse looking after them that day.

The audit occurred before and after the intervention, which involved "staff interviews and a poster campaign." ○ Before the intervention, only 55/112 patients' beds had boards; only 4/55 of these boards had consultant names, and only 12/55 patients recalled their consultant's name.

- After the intervention, 16 of 54 beds with boards included the consultant's name and 30 of 54 patients recalled the consultant's name.
- There was a significant association "between recall of consultant name and presence on name board in both cycles", but no significant association with nurses' names.
- Figures are not provided for recall of the nurses' names.

The authors concluded that "to improve patient autonomy, all patients should have boards with names of staff looking after them." (p. S32).

- **Lai (2017)**, Editor-in-Chief of the journal 'Surgical Practice', commented that "Perhaps one of the many reasons why the campaign was backed by over 400,000 doctors, nurses, therapists and porters was that self-introduction is a simple and effective act of professionalism" and that "many would testify that such a simple act brings amazing changes in their practice. They do not find patients unreasonable or difficult anymore." Lai urged readers to try selfintroduction with every patient, and "to influence one, two or at a maximum of three other colleagues to do so?" (p. 101).

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