

IMPROVING PATIENTS' EXPERIENCE

SHARING GOOD PRACTICE

RESPECT, PRIVACY AND DIGNITY

Privacy and dignity are now a high priority on quality improvement agendas following their inclusion in *The NHS Plan* and *The Essence of Care*. Both of these initiatives highlight dignity as an essential part of good quality patient care.

The dictionary defines dignity as 'being worthy of respect'. Unfortunately a significant proportion of patients feel this is a quality lacking from their hospital experience. Almost a quarter of inpatients surveyed recently by Picker Institute Europe stated that they felt they were not always treated with respect and dignity during their hospital stay.

Admission

Patients are likely to feel particularly vulnerable when they are admitted to hospital but many simple things can be done to make them feel more at ease. Kind words and a friendly smile can do much to alleviate the anxieties a hospital visit can bring.

Patients should be asked about their preferences and needs when they first arrive. For example, some patients may wish to be known as Mr or Mrs whilst others may prefer to be addressed by their first name only. Respect for religious and cultural beliefs is also essential in order to make patients feel more comfortable.

Privacy

Privacy is an extremely important issue for patients. One third of patients felt they weren't always given enough privacy when discussing their condition or treatment. Providing a quiet area away from the ward for confidential discussions would help to solve this. This may not always be feasible but private matters should not be discussed within earshot of other patients and visitors. The survey also highlighted how

many patients want their views to be taken into account. Almost half of those questioned stated that they wanted to be more involved in decisions about their care and treatment.



Examinations should be private but nearly 15% of patients felt they weren't given enough privacy when being examined or treated. Screens around the bed should give adequate cover and curtains need to be properly closed. Making staff and visitors aware that treatment is taking place will help to ensure that they don't enter the cubicle whilst the patient is being examined.

No one should have to wear flimsy gowns that don't fit properly, particularly in public areas. It is humiliating to walk down a corridor to the toilet wearing a gown that barely covers you. All gowns should be designed to give adequate cover, they should fasten securely and be available in a wide range of sizes.

Embarrassment

Patients may feel awkward about asking for help, particularly if they think staff are too busy or if they don't know who to ask for assistance. It can be embarrassing to ask to be taken to the toilet or to request help to eat your meals and it is often difficult to admit

that you are not as independent as you would like to be. Nearly a third of respondents who needed help to get to the bathroom or toilet didn't get it in time and 18% of those who used a call button had to wait more than 5 minutes to get the help they needed.

27% of respondents were bothered about staying in a mixed sex room or ward. Explaining to a patient why this arrangement is necessary could help to reduce the upset it may cause but mixed wards should be avoided wherever possible. Ensuring that wherever practical male and female patients don't have to share toilet and bathroom facilities is also crucial.

** All figures quoted are based on 80 patient surveys carried out by Picker Institute Europe in 2001/2. The total number of patients who responded was 44,383.*

SUGGESTION BOX

- Introduce yourself to patients so they know who to ask for if they need help
- Ensure that all curtains and screens provide adequate cover and that they are used when needed
- Provide gowns that fit properly and don't cause embarrassment
- Treat patients with the same level of courtesy you would extend to your family and friends
- Find out what the patient's needs and preferences are at the beginning of their stay
- Provide a private area for discussion with patients and their relatives
- Offer help without waiting to be asked

READING LIST

- The Essence of Care: Patient-focused benchmarking for Health Care Practitioners (2001) Department of Health, London.
- Haddock, J., (1996) Toward further clarification of the concept 'dignity', *Journal of Advanced Nursing*, **24**:5, 924-931
- Shotten, L., Seedhouse, D., (1998) Practical dignity in caring. *Nursing Ethics*; **5**:3, 246-255.
- University of Sheffield, School of Nursing and Midwifery, (1999) Dignity on the ward: promoting excellence in care: good practice in acute hospital care for older people. Help The Aged, London.
- Gallagher, A., Seedhouse, D. (2002) *Dignity in care: the views of patients and relatives*. *Nursing Times*; **98**: 43, 38-40.
- Straw P, Bruster S, Richards N, Lilley S. Sit up, take notice. *Health Service Journal*. 2000; **5704**: 24-26.

SHARING GOOD PRACTICE

Please send any examples of good practice within your Trust to:
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WHERE IT'S WORKING

Emergency Wash bags

Mayday Healthcare NHS Trust

Patients admitted in an emergency to Mayday University Hospital are provided with a free toiletries bag of essential items. The wash bags are a charitable donation from The Friends of Mayday Hospital and contain soap, a flannel, shampoo, toothpaste, a toothbrush and a comb. The bags cost approximately £2 each and Mayday distributes around 100 packs a week. Feedback from patients has been extremely positive.

ITU Gowns

Rotherham General Hospitals NHS Trust

In recognition of the need to maintain patients dignity at all times, Rotherham General Hospital has designed specialist gowns for patients in ITU. A staff member from ITU raised the issue and worked with linen services to design the gown. They have been made to allow all lines and drips to be attached whilst the patient is still wearing bed clothes. The gowns are kept on ITU and patients and relatives with nursing staff decide whether the patient can wear the gown.

Contact: Mary Nicols, Linen Services Supervisor, Rotherham General Hospitals, 01709 304607

Outpatient Gowns

Wirral Hospital NHS Trust

At Wirral Hospital NHS Trust, patient feedback led to new gowns being introduced into the Outpatient Department. Patients had complained that they felt embarrassed wearing the

previous gowns and staff themselves thought the gowns to be unacceptable. Since the toga-style gowns were phased in almost seven years ago there have been no complaints or comments from patients about their dignity not being maintained.

Contact: Eirian Taylor, Outpatient Manager, Wirral Hospital NHS Trust, 0151 678 5111 (Switchboard) Eirian.Taylor@whnt.nhs.uk

Curtain Clips

Royal West Sussex NHS Trust

Nursing staff on the Boxgrove Ward were concerned that cubicle curtains did not always stay closed while they were treating patients. They found that the curtains came apart easily as they moved around the cubicle. Staff and relatives entering the cubicle at an inappropriate time was also an issue.

To solve the problem some large coloured clips were purchased from a local supermarket. The clips are used to hold the curtains together so the patient's dignity is maintained. The clips also act as a signal to other staff and visitors not to enter the cubicle.

Nurses use these clips frequently and feel the system works well. Every nurse has their own clip to carry around in their pocket to use when necessary. A pot of spare clips is also kept on the desk.

Contact: Sister Sarah Byrne, sarah.byrne@rws-tr.nhs.uk

WHAT ARE YOU DOING WITH YOUR SURVEY RESULTS?

In response to their Inpatient Survey results, East Cheshire NHS Trust has segregated an assessment ward into separate bays. Several patients had commented on the arrangements for mixed sex accommodation on this ward.

Please distribute this newsletter throughout your organisation.