

making patients' views count

# Patient safety through patient involvement

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#### **Adverse events**

- Falls
- Wound infections
- Medication errors
- Wrong site surgery
- Mortality

- Malnourishment
- Pneumonia
- Urinary tract infections
- Decubitus ulcers
- Deep vein thrombosis
- Pulmonary embolus



## Patient barriers to being involved

- I don't want staff to think I'm difficult
- I don't want staff to feel threatened
- Staff seem too busy
- I didn't know I could be involved
- I might make the wrong decision
- I probably wouldn't understand



## **Professional barriers to involving patients**

- It takes too long
- Patients wouldn't understand
- I don't see what's good about it
- I don't know how to do it
- Patients will interfere with our work!
- Patients don't want the responsibility



#### **Patient safety myths**

- Patients don't want to be involved
- Patients / relatives are "not insured"
- Patients lose their medical notes
- Patients panic if you give them information
- Mobile phones are dangerous



## Patient top 6 issues Adult Inpatients

- 1. Confidence and trust in doctors & nurses
- 2. Clear explanations
- 3. Staff knowing about my condition and treatment
- 4. Clean ward
- 5. Being treated with dignity and respect
- 6. Pain relief



## Patient top 6 issues Young patients

- 1. Confidence and trust in doctors & nurses
- 2. Information I could understand
- **3.** Being involved in decisions
- 4. Clean ward
- 5. Having the chance to discuss fears with doctor
- 6. Pain relief



## Patient top 6 issues Outpatients

- 1. Confidence and trust in healthcare professionals
- 2. Being listened to
- 3. Explanations I could understand
- 4. Having enough time with a doctor
- 5. Healthcare professionals being open with me
- 6. Being involved in decisions

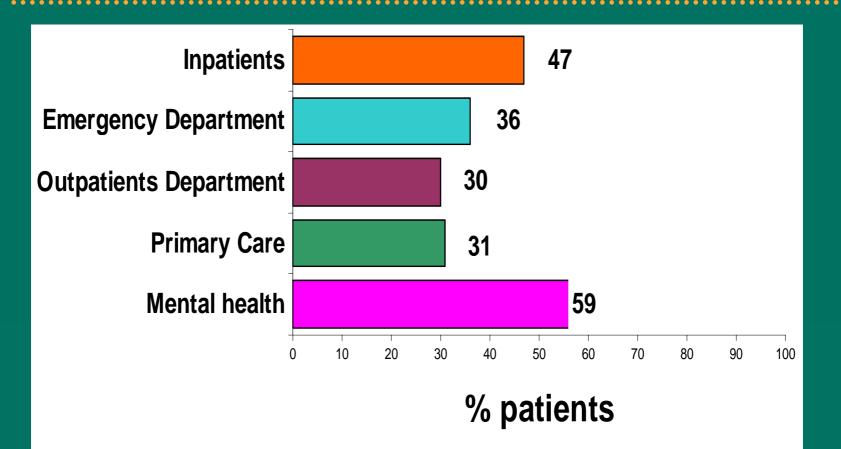


## Patient top 6 issues Emergency care

- 1. Confidence and trust in doctors & nurses
- 2. Being treated with respect and dignity
- 3. Clear explanations
- 4. Being told what danger signals to watch for
- 5. Privacy when discussing condition/treatment
- 6. Being involved in decisions



## **5 patient surveys:** Wanted to be more involved in decisions



National Surveys of NHS Patients 2004-05 (n=371,421)



#### Stroke survey findings: essential nursing care

 37% did not think there were enough nursing staff on duty to care for them

- 34% did not always get help getting to the toilet
- 41% did not always get help with eating meals

"More staff to see to patient's needs...stroke patients unable to wait 5-10 minutes for toilet." "Meals were left at end of bed for [patient] to feed herself, which she can't."

Stroke inpatient survey 2005, n=2786



#### Mental health survey findings: crisis care

- 52% did not have the number of someone in mental health services that they could call out of hours
- 52% did not get all the help they wanted the last time they called the crisis number

"The crisis team is only open until 9pm..."

"I have no-one to call in times of crisis who is qualified in mental health"

Mental health survey 2005, n=25,555



#### Coronary heart disease survey findings: Patient involvement and information

- 39% wanted to be more involved in decisions about their care and treatment
- 46% not told about changes in diet that might affect their condition

"No regard to medicine allergy if it wasn't for family on three occasions i would be dead." "I have no knowledge of what is happening to me. I've had an operation but no-one seems to know who'll see me next. This is

worrying."



CHD survey 2004, n=3,784

## Inpatient survey findings: Nutrition

 49% could not always get healthy meals from the hospital menu (Inpatient pilot survey 2005, n=572)

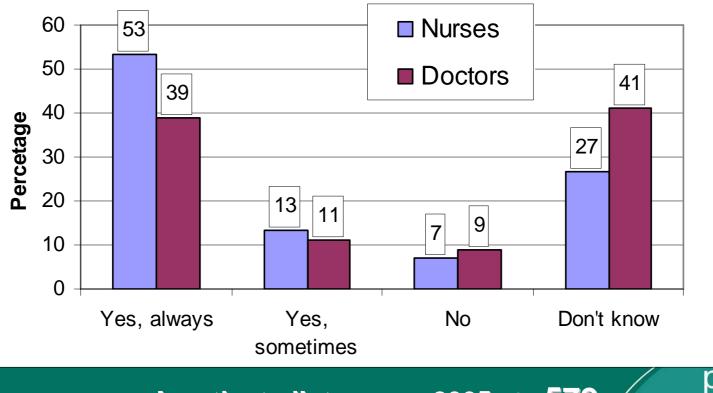
*"I was not allowed to eat after 12 midday. The operation was at 8pm and when I returned to ward around 9pm the only food available was toast."* 

"The food needs to be more heart friendly. macaroni/cheese was my first meal after quadruple bypass"

> "The food recommended for my condition was often unavailable.."

## Inpatient survey: hand washing

## Did staff clean hands between touching patients?

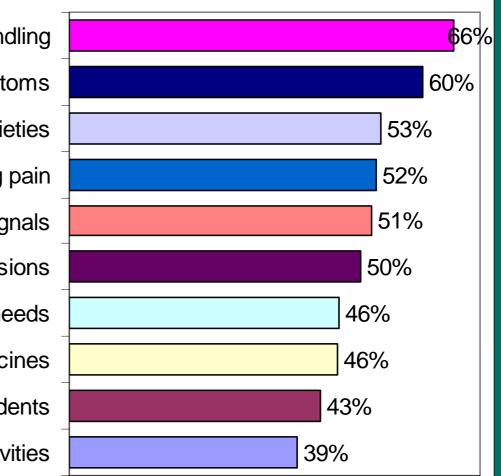


Inpatient pilot survey 2005, n=572



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## Nurses: have you had enough training?



Lifting and handling Treating symptoms Addressing anxieties Measuring pain Explaining danger signals Involving patients in decisions Addressing patient information needs Explaining medicines Prevention of accidents Explaining when to resume activities

2001 Nurses Survey in 20 London hospitals (n=2889)



#### How can patients help to ensure safer care?

- Help to reach an accurate diagnosis
- Share decisions about treatments: better decisions, improved compliance
- Contribute to safe medication
- Participate in infection control
- Check the accuracy of medical records (e.g. patient held notes, copying letters to patients)
- Observe and check care processes
- Identify and report complications and adverse events
- Shape the design and improvement of services





- Staff need training in sharing information and involving patients
- Patients have an important role in safe treatment
- Well-designed surveys ensure that patient safety is carefully monitored
- Assess risk of action against inaction
- Weigh short-term against longer-term risks
- Patients are decision-makers, not passive victims

