Overview

To learn from Cwm Taf Health Board’s experience of developing and introducing a Dignity Pledge to drive local improvement to achieve dignified care at ward level.

The case study describes the development and implementation process and showcases examples of the changes achieved at local and organisational level due to the introduction of the Dignity Pledge.

A checklist is also included which will help you set up your own Dignity Pledge in your area.

Authors

Authors: Rebecca Aylward and Sarah Puntoni

Published

May 2012

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1000 Lives Plus is the national improvement programme supporting organisations and individuals to deliver the highest quality and safest healthcare for the people of Wales.

Every health board and trust in Wales, together with universities, voluntary organisations and charities, other public sector services, and commercial organisations are involved in 1000 Lives Plus.

The programme is focused on building capacity and sustaining and spreading improvements. It supports frontline staff across Wales through evidence-based ‘programme areas’ and provides clinical leadership through its Faculty. It is committed to engaging patients and students in improvement work and promotes an internationally-recognised quality improvement methodology.

1000 Lives Plus is underpinned by measurement to illustrate improvement, and facilitates collaborative working to test new methods and protocols. The central team supports senior managers and frontline staff to deliver the quality of care that every person needs, everywhere and every time.

www.1000livesplus.wales.nhs.uk

1000 Lives Plus emphasises the centrality of the patient in all its improvement work. It has actively promoted the involvement of patients in their own care and key decisions relating to treatment.

The voices and stories of patients are an effective and powerful way of making sure the improvement of services is centred on the needs of the people using the services.

‘Stories for Improvement’ have helped identify numerous small changes that have resulted in large improvements. 1000 Lives Plus has encouraged using stories to ensure that the patient’s voice is heard at the highest level, in board meetings and at national conferences.

www.1000livesplus.wales.nhs.uk/public-engagement
Introduction

Cwm Taf Health Board has developed a Dignity Pledge to provide an organisational wide definition of what dignified care looks like in practical terms and to raise awareness of dignity with staff and patients alike.

The Pledge provides a platform for staff and patients to discuss and raise dignity matters. It has been instrumental in the development of locally designed and implemented changes to support consistent and sustainable dignified care.

The following pages highlight the organisation’s experience of designing and implementing the pledge including examples of its impact and a checklist to help other organisations test a similar approach.

Developing the Dignity Pledge

The Pledge grew from the recognition of the need to bring dignity to the forefront of the minds of staff and patients, raising standards of care and ensuring consistency in practice. The pledge focussed around the recommendations contained within the Older People’s Commissioner report and serves as a visible aide memoire for all multidisciplinary teams providing healthcare and for the patients and families in Cwm Taf Health Board.

The Pledge was designed by the Lead Nurse for Fundamentals of Care and Professional Standards in October 2010. Its content was developed following discussion with ward sisters and charge nurse forum members, and took into consideration existing Welsh developments such as Fundamentals of Care and HealthCare Inspectorate Wales Dignity spot check audits.

The Dignity Pledge provides positive examples of the components of dignified care for staff and patients, explained via 16 clear and simple elements (See appendix 1 for a copy of the Dignity Pledge):

- We will greet patients and visitors in a welcoming and sincere manner.

- All interventions will be explained to patients while in our care and staff will offer opportunities for further questioning.

- Patients will be given privacy during treatments or when receiving personal care. ‘Care in progress’ signs will be used when interventions are being carried out.

- Patients/relatives will be given privacy during consultation/breaking bad news.

- We will ensure patients remain properly clothed/covered when in our care or when transferred to other areas.
- When patients are using toilets/washing facilities internal privacy curtains need to be closed. Care in progress signs need to be displayed.

- Ensure toilet/wash facilities have a nurse call system in place to help maintain patient safety.

- Where possible, ensure ward has designated male and female toilets and wash facilities. Where possible designate wards to have male and female areas. This excludes assisted facilities.

- We will prevent patient information from being shared inappropriately, e.g. stopping telephone conversations being overhead, computer screens being viewed and white boards have non-identifiable patient information upon them.

- We will manage visiting times and visitor members to ensure patients are not unduly disturbed by their own or other patients’ visitors.

- We will manage protected meal times ensuring the ward provides a calm environment and patients are not disturbed while eating their meals. Relatives/carers to assist with feeding are welcomed to the ward to support nutrition and hydration for complex and vulnerable patients.

- We will ensure patients are in a comfortable position and their bed tables are within easy reach (access to drinks, meals).

- We will provide assistance to patients who require encouragement and support to eat their meals.

- We will appropriately and sensitively communicate with patients.

- We will ensure call bell is within easy reach and patients know how to use it.

Its aims were fourfold:

- Clearly define what dignified care means and highlight all its aspects.
- As a measurement tool to assess the level of dignified care delivered by the organisation.
- As a tool to empower staff and patients to challenge colleagues and raise dignity issues.
- Support staff to provide a consistent and standard level of dignified care.
Implementing the Dignity Pledge

The Pledge is displayed in all hospital wards, outpatient departments and operating departments and is included in all nursing documentation at each patient’s bedside.

All staff are encouraged to raise the Pledge to the attention of the patient. To support staff in raising awareness of the Pledge, prompt questions have been included in the initial patient assessment documentation.

Patients are invited to comment via a “Have your say” form and state if they feel the Health Board met the aims of the Pledge. The patient experience manager monitors all ‘Have your Say’ feedback forms and provides feedback to individual wards / departments.

To assist the implementation of the Dignity Pledge ‘spot check audits’ were undertaken by volunteers and staff members to monitor compliance during the initial six months. The checks required the completion of a check box form completed through an interview with patients.

The audits need to be undertaken weekly until there is consistent 100% compliance, then they are gradually reduced to two weekly initially and then monthly.

However, spot check audits are also undertaken by the Board Members during 1000 Lives Plus WalkRounds, as well as by the Senior Nurse for Fundamentals of Care and the volunteers.

The data is kept at ward level and individual action plans developed in the event of breaches to the Dignity Pledge.

The impact of the Dignity Pledge

Some practical examples of local changes made as a result of issues raised by staff and patients as a result of implementing the Dignity Pledge are:

- Improved signage of gender specific toilets and bathrooms also in Welsh.
- Assistance with the enforcement and sustainability of protected meal times.
- Individual patient wipes are available for patients to cleanse their hands prior to meals.

Organisational wide changes resulting from the introduction of the Dignity Pledge are:

- “Thinking Differently about Patient Dignity” training day, which has been designed to challenge participants to be creative, innovative and think
differently with their approach to patient-centred care. The focus is to increase positive attitudes, to provide skills to effectively deal with difficult situations and enable staff to feel confident to challenge poor practice.

- A growing number of Dignity Champions, who are required to make one change to improve Patient Dignity within their areas of work following their participation in the ‘Thinking Differently about Patient Dignity’ training.

- Volunteers are recruited to undertake patient satisfaction surveys which capture many aspects of dignified care and their understanding of the Patient Dignity pledge.

- Staff have commented that the Dignity Pledge reinforces and assists with understanding the delivery of the Older Peoples Commissioner’s “Dignified Care” report recommendations and the 1000 Lives Plus ‘Improving Dementia Care’ programme.

- Translation of the Dignity pledge into Welsh, Braille, Polish and Portuguese to reflect local population needs and to respect people’s language choice.

- The implementation of a new initiative called ‘Dignity Wards’ and a more in-depth testing of a full definition of dignified care.

**A practical example**

Following a local press article publicising the Dignity Pledge, the organisation was approached by a former patient following a poor experience of care during day surgery at the local hospital gynaecological theatre. The patient felt the care received did not comply with the Dignity Pledge and agreed to share the experience for improvement purposes.

The lessons learnt from the patient feedback were fed to the staff who felt sadness that they had let their patient down and worked towards making sure lessons were learnt.

Within days of hearing the patient story, locally owned, patient centred changes were introduced:

- The operating table was turned to face away from the entrance to the theatre.

- Mobile discretion screens were introduced to the theatre for increased dignity and privacy.

- Ensured appropriate use of ‘Care in progress signs’.

- Allocation of a nurse to sit at the patient’s side to explain all aspects of care.
✓ Consent for student observation is now consistently taken on the ward and full explanation given - patient should not feel under pressure to agree.

✓ Enforced restriction of staff entering theatre.

✓ Challenging of staff who do enter theatre.

A meeting between staff members and the patient offered the opportunity to share their experiences and learning and gain a positive outcome for all. It also provided the opportunity to remind staff of their responsibility to deliver the Dignity Pledge to patients.

The Dignity Pledge has also been a great platform for other improvement projects across the organisation, focusing on delivering and maintaining dignified care.
Checklist for developing and implementing your own Dignity Pledge:

1. Take time to undertake focus groups with staff, patients and local community to define what dignified care means. Consider what it looks like in practical terms.

2. Work with staff to design the Dignity Pledge so it can easily become part of their routine.

3. Raise awareness amongst staff. Your Communications Team can help you spread the word.

4. Develop a monitoring process to support local improvement overtime. The data should also be monitored centrally to support spread and identify wider trends and patterns at organisational level to support organisational learning.

5. Contact your local press and publicise the Dignity Pledge to your local community.

6. Work with volunteers to monitor the use and spread of the Dignity Pledge.

7. Empower staff to respond to any local issues by developing their own improvement projects. Use the Model for Improvement* to ensure the change results in an improvement.

8. Celebrate success and keep publicising the pledge and its impact. Your Communications Team will be able to help you with this.

9. Engage your executive team members to ensure their support and encourage them to enquire about the Pledge during their 1000 Lives Plus WalkRounds.

10. Set up multi disciplinary dignity training to support staff implementing and championing the Dignity Pledge. Use these sessions to develop and recruit Dignity Champions.

Visit: http://www.1000livesplus.wales.nhs.uk/methodology
## Appendix 1

### The Dignity Pledge

**DIGNITY PLEDGE TO OUR PATIENTS**

We believe that staff should treat patients the way they would wish to be treated.

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NATIONAL PRINCIPLES FOR PUBLIC ENGAGEMENT IN WALES

1. Engagement is effectively designed to make a difference
   Engagement gives a real chance to influence policy, service design and delivery from an early stage.

2. Encourage and enable everyone affected to be involved, if they so choose
   The people affected by an issue or change are included in opportunities to engage as an individual or as part of a group or community, with their views both respected and valued.

3. Engagement is planned and delivered in a timely and appropriate way
   The engagement process is clear, communicated to everyone in a way that’s easy to understand within a reasonable timescale, and the most suitable method/s for those involved is used.

4. Work with relevant partner organisations
   Organisations should communicate with each other and work together wherever possible to ensure that people's time is used effectively and efficiently.

5. The information provided will be jargon free, appropriate and understandable
   People are well placed to take part in the engagement process because they have easy access to relevant information that is tailored to meet their needs.

6. Make it easier for people to take part
   People can engage easily because any barriers for different groups of people are identified and addressed.

7. Enable people to take part effectively
   Engagement processes should try to develop the skills, knowledge and confidence of all participants.

8. Engagement is given the right resources and support to be effective
   Appropriate training, guidance and support are provided to enable all participants to effectively engage, including both community participants and staff.

9. People are told the impact of their contribution
   Timely feedback is given to all participants about the views they expressed and the decisions or actions taken as a result; methods and form of feedback should take account of participants' preferences.

10. Learn and share lessons to improve the process of engagement
    People's experience of the process of engagement should be monitored and evaluated to measure its success in engaging people and the effectiveness of their participation; lessons should be shared and applied in future engagements.

These Principles were developed by Participation Cymru working with TPAC Cymru, under the guidance of the Participation Cymru partnership. Endorsed by the First Minister of Wales, The Right Hon. Carwyn Jones AM on behalf of the Welsh Government.
Further guidance on the National Principles can be found at www.participationcymru.org.uk
March 2011