

OLDER PEOPLE'S CHAMPIONS NEWSLETTER

March 2008



Privacy and Dignity

As a result of the Privacy and Dignity Training in December 2007, 12 people undertook a learning activity in their clinical area. These included; observations of care and mealtimes, an audit and patient interviews.

Below are some of the things that were learnt, the good practice and the innovative ways in which people have addressed problems.

Things Learnt:

- Mealtime observations; menus were found difficult to read and older people do not always understand the people asking what they would like to order and therefore inappropriate or strange food was ordered.
- Mixed sex wards – nurses have not always thought about the impact on patients
- Inappropriate conversations in the ward – that this happens regularly.
- Patients overhearing bits of conversations – this can be quite distressing or confusing.
- Patients not having anyone to talk to and desperately wanting to talk, to allay their fears and overcome the boredom!
- When interviewed patients in high dependency areas saying that when they are very ill, they do not care about their dignity. This highlighted the importance of the nurse to care about dignity of these very vulnerable patients.
- Patients clothing, gowns, nighties and pyjamas are poor across the Trust – this was a recurrent problem.
- Patients not being able to wear pants or socks to theatre.
- The changes in the behaviour of someone with dementia when they were bored and how positive it was to have someone to talk to.

- A 4 week audit of patients going to X-ray and CT at HWP, showed 50% of patients had no dressing gown, only a blanket, 25% did not have slippers or shoes – patients felt cold and very vulnerable going through the hospital in flimsy nightwear.
- Full catheter bags on display when a patient leaves the ward and goes to another department, compromising a patients dignity.
- People coming behind the curtains to get the keys, without asking.

Good Practice and Changes

- A health care assistant in charge of mealtimes wearing a different colour apron, so people know they are not to be interrupted.
- Magnifying glasses to be purchased so that small print menus can be read.
- Eye-catching 'Care in Progress' Signs – which are kept above each patients' bed, so the nurse does not have to hunt for them.
- Taking opportunities to talk and encouraging other to do the same.
- Challenging inappropriate conversations
- In day surgery, the patients feedback was that privacy and dignity were excellent despite the poor surrounding and this is because the staff are aware that their environment could easily compromise privacy and dignity and therefore are mindful of the issues.
- Training porters to make sure patients are appropriately dressed prior to leaving the ward.
- On one ward a patient had made bags to put catheters in, so they were not on display when they left the ward.
- One ward has a bell on the desk that is rung (once) when the keys are needed.

Thank to all the staff who undertook these activities and shared them with the other champions.

If you would like **more information** or to do a **learning activity** to improve are in your area, please contact Caroline Davies on ext.8119 or by email.

As a result of these activities a sub group of the Older People's Champions has been set up to look at the issues surrounding patient clothing.

Older People's Champions Days 2008

June 11th – RSCH
September 11th – PRH
December 11th - RSCH

Pain Relief for Older People

Wendy Caddy did an excellent workshop on this and there are evidence based guidelines at <http://www.rcplondon.ac.uk/pubs/brochure> entitled assessment of pain in older people.