

C3: Patient and Public Involvement – Respecting & Involving Service Users and the Public

Document Summary Table	
Person Responsible for Policy:	Clinical Services Manager
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Ratified by:	Hospice Governance Group

AIMS OF THE POLICY

- To ensure that patients and the public across High Peak, Dales and North Derbyshire have the opportunity to be involved in feeding back on, co-creating and designing palliative and End of Life services delivered by Blythe House Hospicecare and Helen's Trust that meet their current and future needs.
- To ensure every patient accessing care and support from Blythe House Hospicecare and Helen's Trust receives personalised care, treatment and support through being well-informed and involved in all decisions relating to their care and treatment.

SCOPE

The Policy applies to

- People who use Blythe House Hospicecare and Helen's Trust services
- People who may have use of services in the future
- The population of North Derbyshire who have an interest in End of Life care provision in North Derbyshire and want to support the Hospice to develop services to meet the needs of the local population

THE POLICY

Blythe House Hospicecare and Helen's Trust strives to provide high quality care at all times through service's that are evidence based and incorporate best practice. The Hospice will align its developments with the Ambitions for Palliative and End of Life Care: A national framework for local action 2021-2026.

The hospice values information and feedback from people who use its services or have an interest in improving palliative and end of life care for the population of High Peak, Dales and North Derbyshire now and in the future.

Patient and Public Involvement

Patient representatives are invited to attend appropriate hospice forums or focus groups and be involved in co-creating services to meet the needs of our local population.

The views of patients and the public, and what is important to them, is considered in the way that services are provided and delivered. Patients and the wider public of High Peak, Dales and North Derbyshire are encouraged to participate in discussions and provide feedback about how hospice services can be improved. This may be undertaken by the Hospice directly or through a range of local health and social care partner organisations and external agencies e.g. Health Watch

Patients are encouraged to provide feedback about how Hospice care and support can be improved based on their experiences of using the services. Patients are offered various opportunities to provide this via a range of electronic and paper-based options.

Respecting and involving service users in decisions about their care

Patients are actively encouraged to be involved in their care including developing their personal support plan, to express their views, and make informed decisions about their care, treatment and support. They are encouraged to fully discuss their choices with the worker and other health professionals involved in their care. This helps the patient to balance any risk, limitations and/or potential benefits involved in any care or activity.

Workers must recognise that these choices may not be wise, in their opinion, but are nonetheless informed decisions that the person has taken whilst in receipt of all the information they need. Workers must respect the decisions taken by the patient.

If the worker is of the opinion that the person is unable to make sound decisions because of capacity issues, they should refer to the policy relating to Mental Capacity, Deprivation of Liberty and Best Interests. Workers should also be aware of opportunities for people to be coerced into making unsound decisions as a result of pressure put on them by other people such as family members, carers etc. Where this may be the case, workers should be aware of the Policy for Safeguarding and follow the protocols contained within the policy.

Workers will ensure that individuals acting on behalf of a patient understand the care, treatment and support choices available to the patient and that they can represent the patient's views, if appropriate and with their consent, in an informed way. Where English is not a first language and therefore impacts on a person's understanding, formal translation services must be used to ensure that the person is receiving the correct information in order to make informed decisions about their current and future care.

Patients are encouraged and supported to manage their own care and promote their autonomy and independence through regular, holistic, ongoing assessments with

their worker. They will be fully involved in reassessing their support plan with their worker should their situation or needs change.

Workers will provide patients and their carers with accurate and relevant oral and written information to enable the patient and carer to understand the care, treatment and support available to them. This supports and informs them in making their choices. Where required, information will be provided in an appropriate format or alternative language.

Patient information in the form of leaflets, folders and notices will be kept up to date and relevant.

Patients and carers will know how to contact their worker involved in their care or, if they are unavailable, another member of staff.

Patients will have their privacy, dignity and independence respected at all times. They will be treated with respect, courtesy and consideration and addressed by their preferred name and title.

The processing of patient information is undertaken in line with GDPR. In addition, Nursing staff adhere to the Code of Conduct of the Nursing and Midwifery Council (NMC) and counsellors to the BACP code. Patients are advised of limits to confidentiality and are informed in circumstances when confidentiality may need to be broken.

Where consent is not given to share information, a discussion with a member of the Senior Management Team will take place before the decision to disclose information is taken. The decision must be appropriate and defensible and is recorded. Information is shared only with those for whom it is relevant.

Patient information is only shared with their GP or other healthcare professional involved in the patients care if consent for this has been obtained.

All written information relating to patients is scanned onto the patient record or other secure electronic device and only available to relevant staff.

RELEVANT LEGISLATION, GUIDANCE AND REFERENCES

- The Care Act 2014
- Derbyshire Safeguarding Adults Board Policies and Procedures
<https://www.derbyshiresab.org.uk/professionals/policies-and-procedures.aspx>
- Ambitions for Palliative and End of Life Care: A national framework for local action 2021-2026

This policy should be read in conjunction with the following Blythe House Hospicecare and Helen's Trust policies:

- C4: Consent to Care and Treatment Policy
- C6: Mental Capacity Act (2005), DoLS and Best Interests Policy
- C22: End of Life Care Policy
- C24: Chaperoning Policy
- BHH27: Safeguarding Children Policy
- BHH31: Safeguarding Adults Policy
- BHH32: Data Protection Policy
- BHH33: Management of Records Policy
- BHHH35: Access to Personal Information
- BHHH38: Accessible Information Policy

MAPPING TO RELEVANT REGULATORY BODY

- NMC
- CQC
- BACP

VERSION HISTORY

Version	Approved by	Revision date	Description of change	Author
1		Feb 2021	New Policy	
2	Hospice Governance Group	June 2023	Updated Policy	C Walker

APPENDICES