

Scottish Health Council Response to Consultation on The Charter of Patient Rights And Responsibilities



General Comments

The Scottish Health Council welcomes the opportunity to respond to this consultation. It is important that people understand their rights and responsibilities with regard to NHS services, and the publication of this Charter will be useful in helping to raise awareness of these and encourage more active participation in decision making about health services.

Detailed Comments

Question 1

- a) *Do you think the level of detail in the Charter is useful and appropriate?*
- b) *Is there any information not included in the Charter that should be covered?*
- c) *What would make it better?*

We agree that the information in the Charter is useful and appropriate. However, it is a lengthy document covering multiple topic areas and some people may find this off-putting. We therefore welcome the commitment to produce a summary leaflet and factsheets focussing on individual topics.

It is a requirement of the Act that the Charter covers the rights of patients and other relevant people i.e. carers. However, we understand that carers' rights are to be covered in a separate Carers' Charter. It will be important to ensure that there is consistency in these two documents and that they complement each other.

The Act focuses on rights and responsibilities for people accessing NHS services. Many people will access both health and social care services, and it is important that they understand their rights and responsibilities in relation to both, particularly given the drive for greater integration of these services. It would be helpful if 'Part 3: How can I find out more?' included signposting to information on rights in the context of social care.

Page 12, first bullet point covers the right to be involved in service planning and development. We would suggest adding: "To find out about opportunities to get involved in the planning and development of health services in your area, contact your local health board."

Question 2

- a) *Do you think the information in the Charter is written in a way that is easy to understand?*
- b) *Does the format of the Charter make it easy to find the information you need?*

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c) *What would make it better?*

Although we believe that the Charter is generally easy to understand, we would suggest that this is tested through focus groups involving patient and public representatives.

The format of the Charter is acceptable for a written document, but will need to be adapted for the web in order that it is easy to navigate online. Given the wide target audience for the Charter, consideration should be given to making it available as a mobile phone 'app', which could be promoted at NHS facilities, and through social media.

It is important that language used is clear and consistent. In the first paragraph on page 5, the term 'optometrist' is used, and in the third paragraph on the same page, the term 'optician' is used. It may be unclear to the reader what the difference between these terms is, and whether the usage of different terminology is deliberate.

Question 3

Do you have any comments on the design of the Charter?

See above comment regarding web and 'app' formats. The use of different symbols for each of the topic sections is useful.

Question 4:

- a) *What do you think is the most appropriate way for people to get a copy of the Charter?*
- b) *Do you agree that we should only make alternative formats available on request?*

The Charter should be promoted and made available in a variety of places, as well as in different formats. Paper copies should be sent out to community venues, including local authority service points and libraries, in addition to having copies on display in hospital and primary care settings. Voluntary sector premises such as Citizens Advice Bureaux, community based drop-in centres would also be useful venues. The electronic version should be easy to locate and navigate on the web, and the link to this should be disseminated widely, including through use of social media.

Whilst we appreciate the arguments in support of making alternative formats available only on request, this raises questions about how people who require alternative formats will be made aware of the Charter and how to request it. Given that there are rights in the Charter which relate particularly to those who may require communication support in the course of receiving healthcare, it is particularly important that they are made aware of those rights.

If alternative formats are only being made available on request, there is likely to be a time delay between the request being made and the information being provided. This could act as a barrier and could potentially disadvantage affected groups/individuals. It may be worth considering having the more popular alternative formats prepared in electronic version so that they are readily available for online access (or printing) when requested.

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Question 5

- a) Do you have any comments on the balance of rights and responsibilities set out in the Charter?
- b) What would make it better?

It may make it easier for people to identify and differentiate rights and responsibilities if they were more clearly identified in the section headings – for example, ‘your rights’ could be inserted in the headings for the sections starting ‘what does this mean for me?’ and ‘your responsibilities’ could be inserted in the sections starting ‘what does the NHS in Scotland expect from me?’.

The balance of rights and responsibilities in the Charter is appropriate. We support the stronger emphasis on ‘rights’ and feel that the responsibilities generally complement these. Effective two-way communication is vital in achieving a successful relationship between patients and the NHS, and the combination of both rights and responsibilities helps to underline the message that both parties have key roles to play in this regard.

Question 6

Do you have any additional comments to make about the Charter of Patient Rights and Responsibilities?

Page 5

It may be helpful to include some reference to access to spiritual care in NHS facilities.

Page 5

The first bullet point relates to NHS services that are provided free of charge. It may be worth noting that this includes free prescriptions.

Page 20

Research has shown that “...people are concerned that if they do complain this will have repercussions”¹. It may therefore be helpful to include a statement providing assurance that making a complaint will have no adverse impact on the care or treatment that someone receives.

Page 21

The final bullet point which refers to people sharing experiences on the Better Together website should be deleted as this facility is no longer available on the Better Together website. Although the website currently contains a link to the Patient Opinion website where people can share experiences online, this link has been included as part of a pilot exercise and it is unclear whether this will continue when the pilot concludes at the end of June 2012.

Page 25

With regard to the section headed ‘For information, help and advice’ – it would be helpful to include information and signposting about independent advocacy services. It would also be

¹ Making it Better: Complaints and Feedback from Patients and Carers about NHS Services in Scotland, Scottish Health Council, May 2009, pg 16

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useful to include a telephone number, if possible, for the PASS service, as some people may not have access to the internet.

28th June 2012

About the Scottish Health Council

The Scottish Health Council was established in April 2005 to promote improvements in the quality and extent of patient and public participation in the NHS in Scotland. It supports and monitors work carried out by NHS Boards to involve patients and the public in the planning and development of healthcare services, and in decisions about those services.

The Scottish Health Council is part of Healthcare Improvement Scotland.

Further Information

Further information about the Scottish Health Council can be found on our website www.scottishhealthcouncil.org

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