

## Content

The Charter contains information on rights and responsibilities in six areas: Access, Communication and Participation; Confidentiality; Respect; Safety; and Complaints and Complaints.

There are also sections describing what you can do if your rights have not been respected, and where you can get further information and support.

A leaflet will be produced to summarise this information further, and factsheets will provide practical examples of your rights and responsibilities in the six areas described above.

### 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?

### Question 1 Answer

- a) The level of detail in the charter is useful
- b) On page 7, following, or within, the statement starting 'You have the right to receive an agreed inpatient or day case treatment (subject to the exceptions set out below) within 12 weeks of agreeing to it' there should be reference to 'excluding time when you have told us that you are not available for the treatment'
- c) The Charter seems to pull everything together into one useful document for both members of the public and NHS staff.

However some suggested inclusions:

Section

**Everybody should register with a GP** – some explanation that a GP also acts as a gateway to secondary care (we have had some issues with patients not wanting to register with a GP but still need to access secondary care results etc)

**Patients can expect information in a format or language that meets needs** – this may not be immediate, as we only pay for alternative formats or languages as required

**Complaints** – says that relatives and carers can make complaints on a patient's behalf, but it doesn't say consent is required (which of course it is)

## Accessibility

We want the Charter to be as accessible as possible. This means that the language is easy to understand, and it is set out in a way that is easy to read.

### 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?
- c) What would make it better?

- a) The language is easy to understand.
- b) The – character used for indents does not help you to section up the information. A slight indent with a bolder indent character (eg hollow sphere or diamond) might make it visually more easy to follow down the page
- d) A slightly bigger gap before the start of each statement in bold, and a slightly larger font for each statement in bold.

## **Design**

The Charter is presented in A4 format, with a different colour and icon for each section.

### **Question 3**

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

### **Question 3 Answer**

The design is good. It might be helpful to have a smaller version of the current icon on each page as a reminder about what section you are in.

## Availability

The Patient Rights (Scotland) Act 2011 says Health Boards must make copies of the Charter available without charge to patients, staff and members of the public.

The Charter will also be published online, and supporting information such as a summary leaflet and fact sheets will be available.

We are considering what the most appropriate alternative formats for the Charter or the supporting information is. For example, different languages, large print or audio may be produced. We would normally make available alternative formats on request.

### 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?

### Question 4 Answer

- a) All of the above. A smartphone app would be useful as well – and it might make alternative formats easier to deliver (ie you could select them on the app)
- b) One respondent agreed that it should only be available in alternative formats on request'. However this is a difficult one, because if patients can't access the original they might not know to ask for alternative formats (the frequently seen example of 'if you can't read this please ask for large text format' remains a frustratingly common. One solution would be to have a partner leaflet that is solely designed to help patients access alternative formats eg 'We have produced a charter of your rights and responsibilities as a patient – if you want to know more please ask a member of the healthcare team' written in many different languages and formats including braille and large text,

## Rights and Responsibilities

The Charter outlines responsibilities as well as rights. These are things that people using health services can do to help the NHS in Scotland work effectively and deliver quality care and treatment.

### 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?

### Question 5 Answer

- a) There is a good balance between rights and responsibilities
- b) Statements such as 'You should treat NHS staff, and other patients, their carers and family members with dignity and respect' - You must not be violent or aggressive.....' On Page 17 could maybe be emphasised with reference to 'any such incidents will be followed up by the police if necessary' so it is clear that the law is still in place within health care (the Charter talks about legal responsibilities of the Boards so this is a balance)

Our Information Manager has noted in response to the section on confidentiality on page 13:

'This is rather tighter than the HRIS guidance, and I think there would be difficulty.

Second bullet point, thirds paragraph "... If the NHS in Scotland uses information that does identify you ..." means that every patient has to be informed about SMR transmission and no audits (in the loosest sense of the word) could ever take place. I'm not just thinking about cancer audits here; no clinician could ever do any clinical audit unless the patient had first been asked for their consent.

We do give most elective patients a 'Coming Into Hospital' booklet which describes these uses in more detail (and so could be said to be 'telling' the patient) but not all patients would receive this, particularly for an emergency admission and so, unless clinicians were explicit with them about SMR data and audit for example they would not have been told about information that identifies them being used for purposes other than direct patient care.

**General**

**Question 6**

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

**Question 6 Answer**

No