



## **Department of Health**

### **Dignity in Care Campaign Case Studies**

**November 2009**

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**Region:** East Midlands

**Organisation name/Location:** Eden Lodge Care Home, Nottingham

**Date the initiative started:** Ongoing

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The dignity initiative was developed at Eden Lodge in order to offer the best possible care to those terminally ill in palliative care. The objective is to embed a culture in which patients who are nearing death are treated with care, compassion, dignity and respect by staff in the care home.

## **Planning and preparation:**

The Dignity Champion felt strongly about treating patients with compassion and respect. She spoke with other senior managers and peers about the significant benefits that can be achieved by nurturing a greater patient centred approach.

The Dignity Champion felt strongly that in leading by example, she set the tone for all staff in the home. She operated a compassionate regime but was conscious of needing to be firm in certain circumstances in order to maintain her ethos of personal care for all patients.

## **Implementation/who helped and how?:**

The implementation of a caring and personal service to residents took place under the clear ethos of the home as set out by the manager. By setting a strong example, and by keeping a watchful eye on her staff, the manager ensured that dignity in care was a priority at Eden Lodge. Family members of residents were also included in the care programme which meant that staff were always able to incorporate their wishes into their treatment of residents.

## **The outcome of the initiative(s):**

A number of patients and their families have observed that the care being delivered is caring and personal. Staff have been collecting regular feedback – in the shape of informal conversations - from patients, families and medical practitioners.

**Region:** East Midlands

**Organisation name/Location:** Lincolnshire County Council, Lincoln

**Date the initiative started:** 2005

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

Lincolnshire County Council has set up workshops at various staff forums including senior managers' conferences and workforce conferences for care staff. Workshops also include an internally-produced DVD highlighting the importance of independence, choice and dignity for patients with a view to emphasising the improvements that can be achieved even by minor changes in client care. There has also been an initiative to improve dementia knowledge amongst staff. The Council have been involved in a study with Bradford University of dementia care mapping.

## **Planning and preparation:**

Lincolnshire County Council started to put courses and initiatives in place to improve dignity in care in 2005. They have encouraged person-centred thinking amongst all care staff and have promoted the ethos of training in order to improve the care service offered. As a Training and Development officer the Dignity Champion was involved in these policies.

## **Implementation/who helped and how?:**

All staff are trained to follow the Council ethos of personalised treatment of clients.

## **The outcome of the initiative(s)**

The dementia care mapping study whereby the quality of care provided by staff is observed and recorded provides further material for improving dignity in care as well as a tool for measuring the calibre of care offered. Individual feedback is given from this source and training course content is reviewed in the light of results obtained.

Staff assessments provide additional material for the measurement of service and further measurement can be made from the responses to questionnaires completed by service users.

**Region:** East Midlands

**Organisation name/Location:** Lincolnshire County Council, Lincoln

**Date the initiative started:** 2007

**Date the initiative finished (if appropriate):** Ongoing

### **Overview:**

The Dignity Champion has been instrumental in promoting dignity in the care arena as well as in other service areas of Lincolnshire County Council. He has given presentations at various workshops in care settings, and at senior manager conferences. He has made use of an internal DVD that highlighted the issues of dignity and accessibility with a view to highlighting how some small changes could enhance dignity for customers and staff.

### **Planning and preparation:**

Following attendance at a conference in 2007, the Dignity Champion started to prepare presentations which asked people in various care departments of the Council to identify where changes could be made to improve dignity in care. The initiative will continue and will increase its reach to Councillors who will be taking up the issue of dignity in the community.

### **Implementation/who helped and how:**

Senior care managers have been the first target to take up the dignity initiative but their role will be to promote dignity in care to their frontline staff and this process has now started.

### **The outcome of the initiative(s):**

One measure of the campaign is the increase in numbers of Dignity Champions. Additionally, there are surveys issued to service users in several areas including healthcare and social services.

**Region:** East Midlands

**Organisation name/Location:** Royal Derby Hospital, Derby

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Royal Derby Hospital has introduced Nutrition Assistants to ensure that patients receive nutrition that is most suitable for their taste and state of health.

As part of the initiative, patient comfort and convenience is being focused on during meal times. This includes added choice of meal, the provision of more suitable cutlery and crockery, and the adjustment of backrests and tables so that comfort is maximised. Staff have also been advised to ensure that the independence of patients is not jeopardised inadvertently.

## **Planning and preparation:**

The initiative was rolled out across the hospital after the Dignity Champion held initial discussions with colleagues in the Nursing Directorate, followed by informal consultation with patients, families, dietitians, occupational therapists, doctors, nurses, catering personnel and ward housekeepers.

## **Implementation/who helped and how?:**

Once the specifics of the initiative were finalised, it was implemented with the co-operation of all interested parties including staff, patients and families. Meal delivery staff were initially provided with awareness raising training on the objectives of the initiative.

## **The outcome of the initiative(s):**

In terms of measuring the impact of the initiative on the patient experience, staff are collating regular feedback from patients and meal delivery staff. The Dignity Champion is keen to ensure that the initiative continues to make a difference. Any comments and feedback from those involved are welcomed and considered during regular meetings between key staff.

A record of favourable/unfavourable comments from patients is kept with the aim of improving the ratio of positive to negative comments.



**Region:** East Midlands

**Organisation name/Location:** St Andrews Healthcare, Northampton

**Date the initiative started:** 2009

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

A manager at St Andrews Health decided in early 2009 to become a Dignity Champion and has since started some initiatives to enhance awareness amongst staff of dignity and privacy for patients. They are encouraged to watch out for everyday circumstances in which they can easily contribute to the improvement of patients' dignity.

## **Planning and preparation:**

The ten point Dignity Challenge cards have been issued to each ward and staff are encouraged to record any actions that they perceive to be part of the Dignity Challenge Campaign. This helps to raise their awareness of the scheme on a day-to-day basis and provides an incentive for them to discuss their performance in their personal annual review in the light of the dignity campaign.

## **Implementation/who helped and how?:**

Staff are already expected to pay attention to the dignity and privacy of patients. By asking staff to relate their work to the 10 dignity points, the Dignity Champion hopes to make the staff constantly aware of the importance of these issues and so to improve the level of service provided. The plan is to have a Dignity Champion on each ward who has a clear idea of what they are seeking to achieve and to pass this on to new staff. This will perpetuate the ethos envisaged by the Dignity Champion.

## **The outcome of the initiative(s):**

The Dignity Challenge actions recorded by staff will be used in an end of year review. An award ceremony for staff will also be held, based on these reports. Award winning staff will wear badges to stimulate awareness of the Dignity in Care campaign and to encourage debate about it. A further measure of staff performance will come from the dementia care mapping undertaken to assess patient progress in conjunction with staff care.

**Region:** East Midlands

**Organisation name/Location:** University Hospitals of Leicester NHS Trust, Leicester

**Date the initiative started:** 2005

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The University Hospitals of Leicester have been emphasising the need for ward staff to pay particular attention to patients' individual needs. The Dignity in Care campaign has evolved from the Excellence campaign initiated in 2005.

## **Planning and preparation:**

The Hospitals Trust has set up a committee of senior hospital staff to pay particular attention to patients' welfare throughout the hospitals. This in turn has been picked up by the Dignity Champions who are making a point of leading by example with good practice in their patient care. Staff are encouraged to attend a variety of training programmes available.

## **Implementation/who helped and how?:**

There has been a regional campaign to encourage all patient contact staff to attend training sessions. This has been promoted by the Hospitals Trust and has been led throughout the University Hospitals of Leicester by the Dignity Champions.

## **The outcome of the initiative(s):**

Regular staff meetings discuss the outcome of examples of personalised service provided for patients with a view to placing the individual treatment of patients at the top of the agenda.

**Region:** East of England

**Organisation name/Location:** Adult Community Services Suffolk County Council, Ipswich

**Date the initiative started:** 2009

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

Following the National Dignity Campaign, the Dignity Champion has set up Dignity in Care Awards for Suffolk County Council to encourage staff conduct that improves the wellbeing of their customers. Managers select as award-winners those deemed to have made the most improvement to their clients' quality of life. Awards are made at the workplace of the winning staff to enhance a feeling of pride and achievement.

## **Planning and preparation:**

Suffolk decided to draw up a dignity framework based on the national 10 point Dignity Plan. The departments that have taken the lead on this are those representing learning disabilities and older people. They are co-ordinating their approaches and running workshops.

## **Implementation/who helped and how?:**

Implementation will be across the board amongst staff in the departments for disabilities and the department for older people. Residential homes are being encouraged to sign up to the programme and most have done so. More nominations for the dignity award scheme will be encouraged so that awareness of the importance of dignity is raised.

## **The outcome of the initiative(s):**

The awards have led to improved collaboration across services and the development of a dignity framework throughout Suffolk. Assessment of performance is currently qualitative and takes place mainly in the course of annual staff reviews. Dignity is also one of the four main tenets of the Suffolk business plan so the progress of its adoption throughout county services will also be monitored in that context.

**Region:** East of England

**Organisation name/Location:** Arden House Nursing Home, Kings Langley

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion at Arden House Nursing Home has introduced a specific initiative with regard to patients' choice of meals to ensure that individual requests are understood and met. A staff member sits down with every resident every day to discuss their choice of meal. In addition, patients are presented with a menu album showing pictures of all food offered at the nursing home enabling everyone to make an informed choice. This is aimed especially at patients whose first language is not English as well as patients who may suffer from dementia or deafness. It had been noted that sometimes patients did not realise what they had selected or that they just agreed to a suggestion if they did not understand what they had to do.

The manager thought of this idea when he worked in another care home. There he found that staff seemed to be making the meal choices for residents whose first language was not English and for those who were hard of hearing, as neither group was able to understand fully what they were being asked to do.

## **Planning and preparation:**

The manager spoke to the cooks who were in favour of working with this scheme. Staff were also willing to speak to patients each day about their meal selection.

## **Implementation/who helped and how?:**

The pictorial menu initiative involved all colleagues including nursing staff and kitchen staff at the nursing home along with the proprietors, the residents and their friends and relatives.

## **The outcome of the initiative(s):**

Reaction to date has been positive all round. Relatives of the residents in particular express their satisfaction at the introduction of an additional element of choice. These are the factors that help provide some dignity for patients who are mainly dependent on others for almost everything. Measurement will also be taken from replies to the annual satisfaction survey completed by residents. There is already a question about satisfaction with food but another will be added to ask residents their opinions on the use of photographs.

**Region:** East of England

**Organisation name:** Balkerne Gardens Trust, Colchester

**Date the initiative started/Location:** Jan 2009

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

Balkerne Gardens Trust emphasises the importance of Dignity in Care by various means ranging from staff training, the use of specific nutrition needs of individual patients through to the use of numerous posters highlighting the issues of dignity, respecting confidentiality and privacy and giving people choices. The Dignity Champion instigated an in-house training package based on the Royal College of Nursing dignity training programme. All 60 staff from the nursing home attended the course.

## **Planning and preparation:**

The Dignity Champion at Balkerne Gardens Trust, made the decision to initiate a training programme for all staff including nurses, carers and domestic staff. The first training sessions have been completed for staff from the nursing home and the next stage will be to train the care home staff.

## **Implementation/who helped and how?:**

Staff from across the board will be trained on the new course with a view to continuously trying to improve the service given to residents. Giving the residents choices, speaking to them in an appropriate manner and providing them with privacy are all part of trying to improve their dignity.

## **The outcome of the initiative(s)**

The main way of assessing the impact of the training on patients' dignity will be in the reaction of the patients. Another measure will be any change in the level of satisfaction with care as indicated by the results of the residents' annual survey. The general awareness of the dignity issue is expected to be raised as a result of the training.

**Region:** East of England

**Organisation name/Location:** Bedfordshire & Luton Mental Health & Social Care Partnership Trust, Luton

**Date the initiative started:** 2009

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion in the Bedfordshire and Luton Mental Health & Social Care Partnership Trust has developed, together with a colleague, a Dignity and Respect workshop for all staff working with people who have a mental health problem or a learning disability. The theme is: "Dignity will be at the heart of everything we do". A broad spectrum of staff from all three main Council directorates joined the initial workshop representing learning disabilities and older persons.

## **Planning and preparation:**

The decision to set up a workshop in May 2009 was made when two colleagues realised that they were both promoting privacy and dignity and that they could be more effective if they joined forces. A follow-up workshop took place in September 2009 and the plan is to re-convene every 3 months.

## **Implementation/who helped and how?:**

In addition to the Dignity Champion and her colleague who are leading the campaign, participants include those staff from across the board in the Council who attended the first workshop. The plan is to increase the numbers of staff participating by encouraging other Dignity Champions to take part in future workshops. These Champions are known to have signed up to the main Champions website so the plan is to ask IT colleagues to set up a link with them and to invite them to become part of the Dignity and Respect team. This will help to augment the network and to disseminate the stance on dignity encouraged by the project.

## **The outcome of the initiative(s):**

In addition to the assessments to be made at future workshops, it is planned to set a benchmark with the use of the Department of Health self-audit document 'The Essence of Care'. Participants will also be encouraged to provide feedback on the Dignity Challenge 10 steps.

**Region:** East of England

**Organisation name/Location:** Luton & Bedfordshire NHS Trust, Luton

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion, a practice development practitioner, has, together with other colleagues, provided training and workshops on behalf of the Luton & Bedfordshire NHS Trust. The training was based on the 10 Dignity points. The outcome of these initiatives has had an impact in several areas including the running of wards and the co-operation of Champions in different areas to ensure the spread of good practices and the challenge of poor practices.

## **Planning and preparation:**

Change was initially nurtured through training and workshops set up by the Dignity Champion. A pilot scheme took place on three wards and this will now be extended. A Dignity Champions' workshop will also take place to further the initiative.

## **Implementation/who helped and how?:**

The implementation of the Dignity in Care initiatives has now spread to everyday practices via the establishment of a dozen Dignity Champions in the Trust and at least one Dignity Lead on each ward. When the Champions first met to discuss their role, they each made a pledge. This will be followed up at each subsequent meeting to assess progress.

## **The outcome of the initiative(s):**

The effects of good practice have spread with the result that gender separation exists on wards, 16 dignity pledges are being followed through by the Dignity Champions, a new quiet room has been set up for patients and relatives and a faith room has also been introduced.

Now it has become standard to work together with other champions to spread the good work practices.

The progress reports made by the Dignity Champions at the regular workshops will be audited and reviewed.

**Region:** East of England

**Organisation name:** NHS South East Essex

**Date the initiative started:** 2007

**Date the initiative finished (if appropriate):** 2008

## **Overview:**

The Dignity Champion worked for NHS South East Essex carrying out reviews of care in nursing homes. It became evident that a number of residents had hearing difficulties but could not tolerate hearing aids. The Dignity Champion decided to seek an alternative device for these people.

## **Planning and preparation:**

The Dignity Champion sought advice from the hospital audiology department and did some internet research. She then approached different companies that supplied personal amplified hearing devices and came to an arrangement with them that involved the trial use of free samples. The agreement was that if successful, the resident would keep the device and the PCT would pay the supplier company for the replacement.

## **Implementation/who helped and how?:**

The Dignity Champion started this replacement hearing aid programme with the co-operation of companies providing alternative hearing devices and the agreement of the patients. The devices were initially used to help facilitate care reviews with patients. They provided residents with a significant improvement in their ability to participate in their personal reviews. Often their relatives were present at the care reviews and were able to encourage future general use of the device.

## **The outcome of the initiative(s):**

As a result of the Dignity Champion's initiative, several of the devices were subsequently given to residents thus enhancing the dignity and quality of life of a number of residents. Their ability to participate in their own care review was an early measure of the success of the venture. After a year, the Dignity Champion moved on to another post and no-one has since replaced her so her project came to a close with her departure.



**Region:** East of England

**Organisation name/Location:** West Hertfordshire Hospitals NHS Trust, Watford

**Date the initiative started:** 2007

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The West Hertfordshire Hospitals NHS Trust has set up a broad range of initiatives over the past two years. A multifaceted approach was undertaken with people at all levels to demonstrate the value placed on their involvement. Every available opportunity was taken to celebrate achievements and communicate the message “that providing dignified care really is important” at the Trust. This was aimed at inspiring additional staff to get involved. The over-riding objective was to treat patients by attending to their individual needs.

## **Planning and preparation:**

West Hertfordshire now has a network of 80 champions, mostly consisting of nursing staff. They meet every two months to discuss the progress of the Dignity in Care campaign. Dignity Champions have an informal role but their common aim is to institute best practice that can be emulated by all, often in small but significant ways. For poor practice, by contrast, the aim is to identify and eradicate.

## **Implementation/who helped and how?:**

Staff at all levels are active in the campaign including the Chair of the Patients’ Panel as well as ward sisters and junior nurses.

## **The outcome of the initiative(s):**

News about the campaign appears in the quarterly newsletter distributed to all staff and posters round the wards display the results of the regular patient surveys conducted along as well as any appropriate action taken.

**Region:** London

**Organisation name:** Anchor Homes

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The four staff members who were Dignity Champions at this London Anchor Home set up a project in which new quiet areas would be created round the home for the residents. Previously, residents had only been able to sit in the dining area or the lounge where the television is on. Now it is possible to sit, read, chat, look at photos or look at the view in a quiet atmosphere in a choice of location.

## **Planning and preparation:**

The staff members had a few meetings to decide on how to improve the environment for residents. They identified some quiet areas in the home where a few chairs and tables could be added. They then obtained finance from the manager to buy some coffee tables and have now set these up with newspapers and magazines.

## **Implementation/who helped and how?:**

The dignity initiative involves the residents, colleagues, the manager and the activity coordinator of Anchor Homes.

## **The outcome of the initiative(s):**

Patients are voting with their feet and making use of the new spaces.

**Region:** London

**Organisation name:** London South Bank University

**Date the initiative started:** 2007

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion is based at London South Bank University in a large health and social care faculty which includes students of nursing, social work, physiotherapy, radiography, midwifery, operating department practice and occupational therapy. The Champion has a specific influence on the education of students on the topic of dignity

## **Planning and preparation:**

The students are taught the importance of dignity and are given the Dignity in Care cards within a teaching session during which they explore dignity.

## **Implementation/who helped and how?:**

The Champion leads an inter-professional dignity interest group in the faculty where plans are set out to ensure that the students learn about dignity. She has also developed a dignity intranet site, accessible to students and academics, with links to documents and websites, including the Department of Health campaign.

## **The outcome of the initiative(s):**

The Dignity Champion has no immediate plans to measure the increased emphasis on dignity in the curriculum although she acknowledges that it would be good to evaluate it. It would be difficult to measure since it has been included in past teaching but with fewer resources and references such as those provided on the intranet site.

**Region:** London

**Organisation name:** Outer North East London Community Services

**Date the initiative started:** June 2009

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

In June 2009 in line with the dignity challenge, the Commission for Quality and Innovation (CQUIN) group within ONELCS (on which the Dignity Champion serves) developed a Privacy and Dignity self assessment tool. All provider services undertook a self assessment audit within their teams and measured current care provision against the dignity challenge statements. Performance against government benchmarks is also being examined.

## **Planning and preparation:**

Following the self assessment exercise, completed assessment tools have been collated and action plans are being drawn up from the data obtained, to address any shortfalls identified.

## **Implementation/who helped and how?:**

This initiative has taken a multi-disciplinary approach and has involved all provider services. The CQUIN group will continue to meet to monitor progress by all service users against the action plan and to identify how service standards can be maintained or improved.

## **The outcome of the initiative(s):**

Patients' views are to be obtained via their participation in satisfaction questionnaires. The self-assessment tools will continue to be administered at intervals to indicate progress in service standards. The tool has also been shared with social services.

**Region:** London

**Organisation name:** Southern Cross

**Date the initiative started:** Ongoing

**Date the initiative finished (if appropriate):** Ongoing

### **Overview:**

The Dignity Champion confirmed that treating residents in a dignified way had always been the practice at this London Southern Cross home. She cited one particular incident where she had given help to a resident. The person in question used to ask her granddaughter to shop for her but her requests were not fulfilled. The Dignity Champion arranged for a carer to accompany the resident to go and shop for herself whenever she wished. This has much-enhanced the independence of the resident.

### **Planning and preparation:**

The champion always considers the dignity of the residents in the course of her work. As a team leader, she also trains other staff in residential welfare which includes instilling in them the need for dignity at all times.

### **Implementation/who helped and how?:**

All staff in the home are expected to respect the dignity of residents in all respects. Various requests are honoured such as female residents asking to be washed or bathed only by female staff or requesting that the doctor see them in the privacy of their own room.

### **The outcome of the initiative(s):**

Complying with patients' wishes and anticipating their needs are important ways of treating patients with dignity.

**Region:** London

**Organisation name:** St Joseph's Rest Home, De Vere Care

**Date the initiative started:** 2007

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

Early in 2007 the General Manager at St Joseph's Rest Home embraced the Dignity in Care concept and started to put in place a number of tools to ensure that the care plan for each person in the home offered the best possible care to each individual resident. Respect for residents amongst staff at all levels was also nurtured. De Vere's home care agency staff and service users have also been engaged in the Dignity campaign. Dignity in care training has been incorporated in the induction process.

## **Planning and preparation:**

Dignity in care training was designed for staff at St Joseph's and two staff Dignity Champions were nominated. In addition, a new dignity in care audit tool for the care home was tested and is in use. The safeguarding of dignity is promoted amongst staff and service users. St Joseph's has implemented person-centred planning and outcome focussed care plans by taking into account the smallest wishes of service users.

## **Implementation/who helped and how?:**

All staff at St Joseph's are part of the campaign and service users are also aware of the plan. The knowledge and experience gained throughout this Dignity in Care campaign are being shared with other providers in the London Borough of Redbridge during local forums. The audit tools used have been offered to other care home and domiciliary providers.

## **The outcome of the initiative(s):**

The St Joseph's Rest Home annual survey incorporates questions on dignity challenges and the results are analysed for both staff and service users with positive results from both to date.

Similarly, the annual survey amongst de Vere's home care agency staff also returned positive results on the dignity challenge issues. Further positive changes in staff attitudes have been identified via their accounts during appraisals.

The management at St Joseph's has played a significant part in designing the 'safeguarding through dignity in care' course for the local authority and has participated in evaluation and follow-up sessions where challenges and opportunities have been discussed.

**Region:** North East

**Organisation name/Location:** Anchor Trust, West Jarrow

**Date the initiative started:** 2007

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Anchor Trust has set itself the goal of empowering others to promote Dignity in Care. It has a dedicated Dementia Specialist Team of six people who are all registered dignity champions, one of whom wrote this report. They give support to staff providing care and information to older people by offering advice, education, mentoring, coaching and training. To date, the Trust has over 500 dignity champions registered and supported out of a total staff of 5500.

## **Planning and preparation:**

In order to nurture the dignity campaign throughout the Trust, Anchor have produced a range of training materials including an advanced dementia course and they support the development of dementia care via a project that ensures continued learning. The Dignity Champion has been instrumental in setting up the advanced course and in the follow-up of supporting and monitoring these staff in key roles. Those who attend and successfully complete the course are then registered as Dignity Champions, presented with a Dignity Champion badge and supported as Dignity Champions through support networks within the organisation. The overriding aims are to ensure the promotion of dignity for all and to share best practice.

## **Implementation/who helped and how?:**

Those involved in the initiative include all colleagues with the full support of the organisational director and chief operating officers. The training course continues to be rolled out across the Anchor Trust and those already trained are continuously supported and monitored. Meetings of the Anchor Dignity Champions take place within geographical areas every three months or more. To enhance the value of the award, it has been withdrawn (in 3 cases) where staff have been deemed not to have maintained the high standard of service required.

## **The outcome of the initiative(s):**

The aim is to achieve a change in culture by means of the training and support. The difference in the type of questions now asked by staff is an indication of the effects of the training. Their learning is evident as is their wish to learn more.

**Region:** North East

**Organisation name/Location:** Middlesbrough Department of Social Care, Middlesbrough

**Date the initiative started:** 2007

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

In Middlesbrough, Dignity in Care is high up on the agenda. The Mayor is emphatic that dignity is inherent in every aspect of citizen engagement. A strategy has been developed to promote dignity not just in the care sector but throughout the community including schools and the workplace. Middlesbrough aspires to become the Dignity Capital of England.

## **Planning and preparation:**

The Director of Social Care holds monthly review sessions with senior staff looking at ways to continuously improve and develop the dignity agenda. Success is celebrated by the Department of Social Services asking for award nominees in all areas of care including those provided by contractors and agencies. Good practice is then promoted on an annual basis through Dignity in Care awards to some of those nominated.

## **Implementation/who helped and how?:**

In the early stages, both service users and carers were asked to define dignity. As a result, the ways in which a dignified service could be offered to all users were included in the training of everyone in the department. In addition, staff were encouraged to become Dignity Champions. Now dignity is high on the agenda from the Mayor down including the Director of Social Care, the team managers and all staff.

## **The outcome of the initiative(s):**

The main measure at the moment is the annual award ceremony for Dignity in Care awards. To find nominees, carers and service users alike are asked to record examples of dignity in care. There is now a plan afoot to formalise the process by drawing up an audit of Dignity in Care.



**Region:** North East

**Organisation name/Location:** Royal Victoria Infirmary Newcastle

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

Newcastle Council was keen to ensure that the hot meal delivery service offered to qualifying people at home was a good, cost-effective service. In 2008, the Dignity Champion, a dietician, was brought in to assess those receiving the meals and to look at the menus offered. Patients were also surveyed about their meal requirements and the delivery drivers were re-trained.

## **Planning and preparation:**

As a result of the initial survey, a number of changes are now in place to ensure that the needs of the service users are fully met. In light of the fact that almost one third of patients were found to be at nutritional risk when measured by the standard nutrition measuring tool, improved menu choices were drawn up by the Dignity Champion. The food containers are now of an improved design.

The drivers who deliver the meals have been trained on the importance of good nutrition, its role in keeping people well and independent and how to spot and deal with problems such as malnutrition and deteriorating health as well as with practical problems such as helping with awkward packaging on meal trays. They have been given a new sense of the importance and responsibility of their role and this has now been reflected in their job descriptions and their pay. Their safeguarding training has also encouraged them to take note of small but telling details such as part-eaten meals and to act on this by encouraging patients to eat well in order to maintain their health. All new clients referred for this service are nutritionally screened so that dietary advice and monitoring is in place.

## **Implementation/who helped and how?:**

The Dignity Champion together with other senior managers in the Newcastle Council care services and the contracts department have led this initiative which is also being implemented by the delivery drivers.

## **The outcome of the initiative(s):**

User surveys will continue to be analysed, driver training will continue, menus will be checked periodically as will the contract drawn up for the provision of meals and nutritional screening will continue. A new brochure outlining the service has been produced and a helpline is in place for users of the meal delivery service.

**Region:** North East

**Organisation name/Location:** South Tees Hospitals NHS Foundation Trust, Middlesbrough

**Date the initiative started:** Feb 2009

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The South Tees Hospitals NHS Foundation Trust endorsed the organisation of the first regional conference promoting the privacy and dignity agenda. The conference attracted speakers from both local and national teams and also included presentations by patients. This was set up by a special working group of six clinical matrons who have been responsible for promoting the privacy and dignity agenda within the organisation. Their main task to date has been to set up a privacy and dignity policy for the Trust and this has now been approved.

## **Planning and preparation:**

One of the Trust matrons took on the role of lead for the Essence of Care and the Dignity Champions' network. She researched the policies of other Trusts and realised that the South Tees Hospitals NHS Foundation Trust needed a policy update on privacy and dignity. Staff from all departments and at all levels were consulted as well as staff from partner organisations. Meetings were led by one of the Dignity Champion matrons.

## **Implementation/who helped and how?:**

The initiatives promoting dignity have been led by six clinical matrons and have included other professionals as well as patients, their relatives and partner organisations. Training has been devised to include privacy and dignity and the matrons are particularly instrumental in spreading the word with their presentation which they are keen to offer to all departments. Their aim is to keep privacy and dignity at the forefront of all staff services.

## **The outcome of the initiative(s):**

There is a yearly measure in place for the Essence of Care as well as an annual patient satisfaction survey. Complaints are also examined as they often concern dignity issues. The 10 Dignity in Care steps are also promoted and analysed.

**Region:** North West

**Organisation name/Location:** Age Concern (Metro Rochdale)

**Date the initiative started:** 2007

**Date the initiative finished (if appropriate):** 2008

## **Overview:**

The Dignity Champion wrote of a case in which because of her role as a champion, she urged Age Concern to act as an independent organisation on behalf of a statutory body. She was particularly interested in the case because of her longstanding knowledge of the dignified and good character of the person concerned, though she remained neutral throughout. An elderly lady (who had suffered a stroke) with no immediate relatives in the locality, needed some advice and advocacy. The relatives were unhappy about the involvement of Age Concern and with the decisions ultimately made by the client.

The Dignity Champion is highly supportive of the Dignity Campaign, attended the Department of Health Conference in Leeds and is instigating, through Age Concern, a community award scheme to raise the profile of the campaign in Rochdale and to highlight those who are performing over and above the requirements of their jobs to enhance the dignity of others. She is also keen to encourage more people to enrol as Dignity Champions.

## **Planning and preparation:**

Age Concern participated in meetings where they ensured that the interests of the client were at the centre of any decisions made.

## **Implementation/who helped and how?:**

The professional involvement of Age Concern ensured that the lady in question maintained control over her individual wants and needs irrespective of relatives' wishes. Age Concern also arranged local support to help manage her affairs, arranged suitable accommodation and ensured that the lady was treated as an individual.

## **The outcome of the initiative(s)**

Age Concern identify an individual's requirements before they set out to help them. Afterwards, they ask the person to complete an evaluation, usually with the help of relatives, to show whether or not they were satisfied with the help they had received and if not, the reasons why. In this case, the person concerned chose to write a personal letter expressing her thanks.

**Region:** North West

**Organisation name/Location:** Bickham House Residential Care Home for the Elderly, Altrincham

**Date the initiative started:** Long ago

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Bickham House Residential Care Home considers itself part of the Dignity Challenge, with the manager nominated as Dignity Champion. The home has a policy of providing personal, homely service to each of its 22 residents. Residents are encouraged to bring whatever they choose to their rooms and their other personal wishes are also respected. This attitude has been of long-standing in the home which is in its 59<sup>th</sup> year. Training is taken seriously and though initial training is based on the twelve week Skills for Care course, new staff may be considered to be in training for 6 months if considered necessary. A mentoring system is also in place. No agency staff are used, so the 26 staff made up of nursing, domestic and kitchen staff all consider themselves to be members of one good team.

## **Planning and preparation:**

The ethos of Bickham House has clearly evolved over time but is also constantly refreshed by up-to-date training, by use of websites such as the Dignity Champions website, and by Joan Bakewell's blog in her capacity as Government representative for the aged. Staff take the opportunity to continue learning; all staff visited an undertaker over a three week period and some attended an embalment from which experience they were able to tell others of the dignified way in which the body was treated.

## **Implementation/who helped and how?:**

Staff attend monthly meetings but the manager has an open door policy so any issues are welcome to be aired at any time. All staff make up the team that runs this home and all adhere to the ethos of individual care.

## **The outcome of the initiative(s):**

Measurement takes place in the form of a live quality assurance programme. This is administered in an ongoing, random basis to anyone connected with the home including relatives, residents and visitors.

**Region:** North West

**Organisation name/Location:** Derbyshire County Council, Matlock

**Date the initiative started:**

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity in Care Campaign has resulted in a number of initiatives across the Council. It has prompted a range of activities including 'My Home Life' and a 'drop in session' for staff to talk about care issues for their residents.

## **Planning and preparation:**

## **Implementation/who helped and how?:**

'My Home Life' was jointly commissioned with the local Primary Care Trust and Help the Aged.

## **The outcome of the initiative(s)**

The feedback from the service users has improved; managers have observed how in everyday contact staff have refrained from asking closed questions (such as asking patients how they feel). Instead, the use of open and more 'enabling' questions is more common. These questions are helping staff to better understand service users and their feelings. It is also improving the amount of meaningful interaction between service users and staff.

**Region:** North West

**Organisation name/Location:** Heathlands Village Residential & Care Home, Manchester

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

Heathlands Village is a large Residential & Care Home for 200 patients and with 300 staff. They have concentrated on the issue of dignity since 2005 but specific initiatives have been put in place since the Dignity Champion attended a conference on the topic in 2008. There is now an emphasis to include dignity in all aspects of training for all those working at the Village including domestic and administrative staff. Job swaps are arranged so that every member of staff understands the role of each department. Probably the key area of their dignity initiative concerns dementia training. Staff are offered both an in-house and an online training course in dementia and those completing both are nominated dementia champions. The Heathlands Standard of Care document also emphasises the need for dignity to be a core part of patient care.

## **Planning and preparation:**

Managers have a monthly meeting at which action plans and their results are discussed. There is an emphasis on training for all staff. In particular, the Dignity Champion promotes the dementia courses which aim to raise the standard of service offered to residents.

## **Implementation/who helped and how?:**

Managers at the home take responsibility for disseminating the ethos of Dignity in Care to all staff who in turn are trained to incorporate best practice in all aspects of their work.

## **The outcome of the initiative(s):**

Various focus groups are held to get feedback on performance. The Chief Executive holds groups amongst the staff, and managers do the same with residents. Questionnaires are also completed by staff, residents, relatives and those in the home for respite care. The Dignity Champion analyses results against a benchmark. Results are discussed with staff and action is noted. Reasons are recorded where no action has been taken.

**Region:** North West

**Organisation name/Location:** Royal Liverpool & Broadgreen NHS Trust, Liverpool

**Date the initiative started:** 2006

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Royal Liverpool & Broadgreen NHS Trust has an active Champion Network for Older People which is attended by internal staff (a range of professions and grades) and external stakeholders and is chaired by the Dignity Champion. The work programme for the network identified the need to continue a focus on food and nutrition, given the Age Concern report *Hungry to be Heard* (2006) which highlighted the problems with meals and nutrition amongst elderly hospital patients. With this in mind the group targeted a health care assistant on every ward and provided them with a full day's training which covered issues regarding swallowing, monitoring, the Malnutrition Universal Screening Tool (MUST), puree diets, a visit to the hospital kitchen etc. The training was provided by senior staff on the Network.

## **Planning and preparation:**

The incentive for the Dignity Champion to take on a nutrition programme was the *Help the Aged 2006* report about nutrition problems for the elderly in hospital. The Dignity Champion was involved with the Trust-wide nutrition group and it was already known that the Royal Liverpool had issues regarding frail patients and nutrition which needed to be addressed. The outcome of this was the training aimed at the health care assistants.

## **Implementation/who helped and how?:**

The training days were evaluated with such a positive result that the Network has now agreed to deliver the same programme to all HCA's in the organisation. The course sought to make the HCA's take real pride in their learning and this was underscored by the presence of a senior manager who introduced the training day and highlighted the importance of their role. Also offered to attendees was a "goodie" bag of related documentation and other items which were also well-received.

## **The outcome of the initiative(s):**

The Trust's MUST compliance has not been good to date. The benchmark for this exercise was the MUST results which will continue to be audited. The aim of the exercise will be to see an improvement in patients' nutrition which is the expected result of the new training.

**Region:** North West

**Organisation name/Location:** Russley Care Homes Group, Manchester

**Date the initiative started:** May 2009

**Date the initiative finished (if appropriate):** Ongoing

### **Overview:**

The Dignity Champion has teamed up with an active and vociferous resident to make a number of improvements at Russley Care Home which has 17 residents and 22 staff. The ex-professor has been designated resident liaison officer and together with the Dignity Champion they have set up several initiatives. The objective is to involve residents in the running of the home to make sure that it is a happy place where residents have a choice in and an influence on how they live.

### **Planning and preparation:**

The residents' liaison officer has proved to be a catalyst at Russley Lodge to which the management have reacted positively by setting up a number of new initiatives. The Dignity Champion co-ordinates activities together with the liaison officer as a result of weekly meetings with him. Some of these provide entertainment and others offer opportunities for more self-expression. There is a weekly conversation club at which residents talk about themselves and their lives and work before entering the home. There is a fortnightly forum at which residents can express their views on any matters regarding the home, make suggestions and ask for changes. A new film club has been set up for which residents can select the films they wish to see instead of always watching TV and there is a new gardening club.

### **Implementation/who helped and how?:**

The Dignity Champion goes to networking meetings with about twenty other managers of residential homes every two months to exchange ideas and the liaison officer attends dignity meetings run by the Council Adult Social Care department. Meetings are held with the residents every two weeks. By working together, staff and patients put into practice a number of initiatives that give the residents a greater influence on how the home is run.

### **The outcome of the initiative(s):**

The Dignity Champion meets each resident individually every six weeks, discusses any issues they wish to raise and whether they are satisfied that they have been addressed. Records are kept to measure progress on every issue.



**Region:** South Central

**Organisation name/Location:** DCS Designs Ltd, Portsmouth

**Date the initiative started:** 2005

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion was approached to take on the role as a result of her successful introduction of her design for the DCS patient gown, developed to promote Dignity, Comfort and Safety. The design of the gown was developed as a result of practical experience when working in a hospital as a Health Care Assistant (HCA) and noting a need for a better design of gown. The new gown provides benefits to both patients and staff.

## **Planning and preparation:**

The Dignity Champion first designed the gown while a Business Studies student, having worked as a Health Care Assistant. She won awards for her design and was able to set up her business, start selling the design to hospitals and eventually go into production.

## **Implementation/who helped and how?:**

Promotion of the DCS gown has taken place through the Dignity Champion's direct contact with hospitals as well as with healthcare companies. Now a second design, a faith gown that includes a hood, has also been accepted by a number of hospitals.

## **The outcome of the initiative(s):**

The success of the designs will be measurable by the sales figures as well as by patient and staff satisfaction. Favourable reports have started to come in from nurses on wards trialling the gown.

**Region:** South Central

**Organisation name/Location:** Portsmouth City PCT

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion was instrumental in establishing the Dignity garden completed for Exbury Ward which is for elderly patients, some with mental health problems. The ward had been on the first floor which the Dignity Champion deemed to lack any dignity for the patients who would never be able to look at or walk out onto a piece of grass from there. He campaigned for a move to a ground floor site with an adjacent plot of land, and with the move completed the scene was set for the Dignity garden.

## **Planning and preparation:**

The Dignity Champion was aware of the undeveloped piece of land adjacent to the re-located Exbury ward and after one meeting, secured agreement for the go-ahead to plan a garden to suit the patients. Much care was taken in the design of the garden to make it appropriate for the patients on that particular ward. It was to be flat to avoid falls, to have continuous paths to avoid dead-ends, raised beds to enhance the enjoyment for wheelchair users, and plants that could be touched and smelt. Various other safety measures also had to be taken into account but above all the garden was to be for relaxation and pleasure and to enhance the dignity of the patients.

## **Implementation/who helped and how?:**

The company maintaining the gardens will be employing some ex-patients from the hospital, some with learning disabilities so the benefit of the garden extends to offering the dignity of work to some who may otherwise have difficulties in finding employment. Patients are encouraged to use the garden as they please. As the ward opens onto it, patients can freely and independently make use of it. The garden was officially opened by a patient on the ward, an ex-England and Pompey player, in the presence of the FA cup and several of his ex-playing mates.

## **The outcome of the initiative(s):**

The chief measures of the garden's success are the smiles on people's faces. Its tranquil effect has also been noted in its influence on patient behaviour, as illustrated by one patient with anger problems who uses the garden to calm himself.

Moving on from this project, the new facility about to open at Portsmouth City PCT has also been planned with carefully-designed rooms and gardens to provide the best possible facilities in which patients can experience some privacy and dignity.

**Region:** South East

**Organisation name/Location:** best-care-homes.co.uk, Tunbridge-Wells

**Date the initiative started:** June 2009

**Date the initiative finished (if appropriate):** Ongoing

### **Overview:**

As a result of difficulties encountered when looking for a care home for a relative, this respondent decided to start a website to help those in the same predicament. The aim was to give people additional information about homes so that time was not wasted visiting unsuitable places. The website lists 3 star homes as designated by the Government Care Quality Commission. Homes are invited to appear on the site and encouraged to ask for comments for the website from residents and friends & relatives with experience of the home.

### **Planning and preparation:**

The Dignity Champion set up this website as an independent party to help anyone needing to find a home. She selected the best homes, graded 3 star on the national scheme, wrote to them, sent them posters and encouraged them to find testimonials that would benefit them as well as their potential clients. Press releases are also used to publicise the service. Future plans include the seeking of sponsorship in order to maintain the website.

### **Implementation/who helped and how?:**

This is an independent product set up and run solely by the Dignity Champion.

### **The outcome of the initiative(s):**

The website has a comment box and also gives a postal address. Many positive comments have been received to date, as well as a considerable body of useful information about the homes, based on personal experience.

**Region:** South East

**Organisation name/Location:** NHS Medway Community Healthcare, Gillingham

**Date the initiative started:** 2004

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

*"How we treat our older people is a crucial test of our national quality. A nation that lacks gratitude to those who have honestly worked for her in the past whilst they had the strength to do so, does not deserve a future, for she has lost her sense of justice and her instinct for mercy" (David Lloyd George)*

This was the starting point for the Dignity Champion when she took up her post at Darland House, NHS Medway, one of the few NHS nursing homes in the country. She took the decision to develop and provide a holistic approach to care based on quality, empathy and honesty. Her aim was to give the 40 residents, all suffering from dementia, a normal quality to their life no matter what their mental capacities. The aim of the programme was to achieve: access for residents to services / facilities that meet their needs, the provision of meaningful activity, a decent and secure life and continual improvement in the care provided. The Dignity Champion states that at Darland House there will certainly never be a plaque over the door which reads, "Abandon hope all ye who enter here".

## **Planning and preparation:**

All 65 staff at Darland House are part of a unified team as everything is provided on site. The Dignity Champion takes responsibility for training them in the course of their work to change the way they work and the way in which they treat the residents.

## **Implementation/who helped and how?:**

The Dignity Champion found that the high profile of the Dignity Campaign was helpful in her dealings with her bosses as she made her case to support her ethos. She instilled in her staff her philosophy of maintaining a quality and independence of life and enlisted staff, community services and relatives to help achieve this.

## **The outcome of the initiative(s):**

The programme has been deemed successful to date in that it has won the Kent regional final in the Best of Health Awards (2008) in the Dignity in Care category. Change in residents' behaviour is an important measure of success and this is recorded for each resident alongside their care programme. Some patients with complex behaviour come to Darland House from other facilities that are unable to manage them and become able to participate in various activities that were previously not possible. A focus group amongst relatives demonstrated satisfaction with the unit and suggested that it should provide a template for other nursing homes.

**Region:** South East

**Organisation name/Location:** The Pines Nursing Home, Hove

**Date the initiative started:** 2009

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion at the Pines Nursing Home considers mealtimes to be one of the most important events in the day of its residents. Following several comments from residents about meals and noting comments from the recent survey regarding meals, the Dignity Champion talked to the catering department and the residents' committee and it was agreed that a Mealtime Comment Book would be introduced and that residents/relatives or staff would be invited to make comments about meals on a regular basis. Mealtime carers would write down comments for those unable to do so themselves. Comments would be used to try to improve the service of this very important part of Home life. Another outcome of the exercise would be that inspectors favour such involvement of residents in the running of the home.

## **Planning and preparation:**

Catering at The Pines Nursing Home is done by an outside company and they already use such comments at another home linked to The Pines to tailor catering according to residents' wishes. The company was therefore well-disposed to working alongside the Dignity Champion in setting up this initiative. As well as involving residents in an important aspect of their lives, the outcome could also mean that there is less waste at mealtimes.

## **Implementation/who helped and how?:**

At the request of management, mealtime assistants at The Pines ask residents each day if they have enjoyed their meal and remind them of the facility to comment on the meal. If there are any complaints, either the Chef or a catering assistant is invited to speak directly with the resident to see how the matter can be resolved.

## **The outcome of the initiative(s):**

The Dignity Champion and her staff look at the comments and discuss them with the relevant person whether a resident, a relative or maybe even a staff member who also eats the same meals. The matter is then taken to the chef and changes are made where possible. Residents are asked if they are happy with the changes and their improved satisfaction is the main measure of the exercise. Including residents in catering changes is one way of treating them with dignity by taking account of their wishes and not expecting them simply to accept what is offered.

**Region:** South West

**Organisation name/Location:** Cornwall & IOS PCT, Liskeard

**Date the initiative started:** 2006

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

This is the third year in which the Dignity Champion and a small group of five have been working on behalf of the Cornwall and IOS Trust. They make unannounced hospital visits, write reports and make recommendations. During the visit a checklist of questions is used in addition to the anecdotal evidence offered by patients. Several areas of the hospital are visited and visits take place to include mealtimes. Verbal feedback is given at end of the visit to a senior member of staff. Subsequently a formal report goes to the Dignity in Care group as well as to the hospital.

## **Planning and preparation:**

The Dignity Champion was originally a member of the Public & Patient Involvement forum and at that time was asked to sit on a dignity group on behalf of the forum. As honorary appointees of the PTC, the group took a gentle approach in the first year. Now they are firmly established and their methods of reporting have moved from the narrative to the formal.

## **Implementation/who helped and how?:**

A small voluntary group undertake this audit of hospitals under the authority of the Cornwall & IOS Trust.

## **The outcome of the initiative(s):**

The use of the Strategic Health Authority checklist during the hospital visits allows for the measurement of services and other factors year on year.

**Region:** South West

**Organisation name/Location:** NHS Gloucester, Brockworth

**Date the initiative started:** Feb 2009

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

NHS Gloucestershire and Age Concern Gloucestershire launched a pilot Meal Mates volunteering service in two community hospitals to improve the meal time experience for patients, particularly older patients. The Dignity Champion was instrumental in setting this up with the Dignity steering group after having had an inspirational meeting with a volunteer who was herself helping patients at mealtimes in one of the community hospitals.

The project aims to provide patients with practical and moral support at mealtimes, to improve their experience and to make mealtimes as comfortable, sociable and enjoyable as possible, whilst also supporting good nutrition.

Meal Mates visit the hospital at mealtimes and help with simple things, such as ensuring that patients are comfortable and have any special utensils that they need. They also help patients enjoy their meals by simply being there and chatting with them, offering encouragement and a friendly face.

## **Planning and preparation:**

Before launching the pilot scheme at two hospitals, a service level agreement was drawn up with Age Concern and a proposal for the project was set out. Meetings were held with other volunteers to talk over the scheme and to draw on their experiences.

## **Implementation/who helped and how?:**

The three month pilot scheme has taken place successfully and the operation is now up and running in one of the hospitals. The pilot will be reviewed before the scheme is rolled out to the other Gloucestershire Community hospitals as planned. One lesson learned is that a volunteer co-ordinator will need to be in place for each site to ensure the smooth-running of the scheme. There is also a plan to train any interested volunteers who may wish to help with feeding.

## **The outcome of the initiative(s):**

To date, the pilot scheme has been assessed via an evaluation conducted by another PCT colleague. He has written a detailed report based on questionnaires completed by patients, staff & volunteers.

**Region:** South West

**Organisation name:** NHS North Somerset, Clevedon

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

In North Somerset a community wide approach to securing Dignity in Care has been agreed across all agencies and partners, inclusive of older people, those with mental ill health and learning disability. The initiative promoted by the Dignity Champion involved setting up and implementing the North Somerset Health and Social Care Community Dignity in Care Action Plan to ensure that there was an improvement in standards amongst all service providers for North Somerset. The aim of the North Somerset Dignity in Care project was to embed Dignity in Care Standards in everyday practice.

## **Planning and preparation:**

The North Somerset Health and Social Care Community Dignity in Care steering group was formed to agree, oversee, monitor and support delivery of the action plan and to act as a forum for dignity. The steering group includes representatives from care homes, NHS North Somerset, North Somerset Council, Avon and Wiltshire Mental Health Partnership Trust, WAHT and community and voluntary sector organisations. A further purpose of the Dignity in Care steering group was to act as a catalyst for all health and social care organisations to embed Dignity in Care standards into everyday practice. Three Dignity in Care working groups are in place to ensure that high Dignity in Care standards are maintained.

## **Implementation/who helped and how?:**

Progress with the action plan, which reflects the 10 point Dignity in Care challenge, is driven by the steering group which meets every quarter to review updates.

## **The outcome of the initiative(s):**

An annual event has been established by North Somerset to maintain a high profile of the dignity agenda. Care homes complete self-assessment exercises which are monitored and acted upon by the Care Quality Commission. The National Patients' survey and the National Patients' Satisfaction survey will also show any perceived changes in the quality of care offered year on year.



**Region:** West Midlands

**Organisation name/Location:** Codsall Day Service, Wolverhampton

**Date the initiative started:** 2007

**Date the initiative finished (if appropriate):** Ongoing but changing

## **Overview:**

The Dignity Champion manages the Codsall Day Service Centre (Staffordshire County Council) for people with learning disabilities. Person-centred planning and personalisation is at the heart of everything they do. The centre concentrates on providing individual care according to each person's needs and wishes together with centre staff and any family & friend supporters nominated by the user. The aim is for people to become more independent and to use the day centre as occasional support rather than as a permanent prop. The person-centred approach adopted by the manager and her staff meets all the 10 Dignity Challenges.

## **Planning and preparation:**

Everyone at the Codsall Day Service Centre took the person-centred training course run by Mencap on behalf of Staffordshire County Council. The course provides them with the skills and tools with which to plan each person's needs in great detail together with the person and other supporters.

## **Implementation/who helped and how?:**

The Dignity Champion ensures that she and her staff offer each service user the most helpful and useful person-centred support. Where outside support is required in addition to that provided by the centre, a nominated member of the centre staff acts as 'gatekeeper' and takes full responsibility for ensuring that the outside service is forthcoming.

## **The outcome of the initiative(s):**

The main measure of success is via feedback received from users, their families and support staff.

**Region:** West Midlands

**Organisation name/Location:** Coventry & Warwickshire Partnership Trust, Coventry

**Date the initiative started:** 2009

**Date the initiative finished (if appropriate):** Ongoing

### **Overview:**

As a lecturer-practitioner and the lead Dignity Champion for the Coventry & Warwickshire Partnership Trust, the respondent wanted student nurses to become dignity champions so that when they qualify, the delivery of dignified care will already be embedded in their practice. The scheme was also an ideal opportunity for involving students with the hospital staff and allowing them to become part of a working team. The champion had a background in working with older adults and used this to build on as part of the dignity campaign extending to all patients.

### **Planning and preparation:**

Dignity training is now included in the student courses. On Nurses Day in May 2009, staff and students combined their efforts to launch the Dignity Campaign with displays and by talking to each other and to patients and relatives. The first students signed up to become champions alongside Trust staff making 45 to date in all.

### **Implementation/who helped and how?:**

The plan is to involve all health staff and some other professionals with whom they work and to start to include social services as well. Awareness is being raised throughout the Trust. The Dignity Champion has talked with the Trust Board, with staff and with carers. She has written in newsletters and plans workshops so that trained staff can take the dignity plans back to their places of work.

### **The outcome of the initiative(s):**

No measurement is yet in place but it is on the agenda.

**Region:** West Midlands

**Organisation name/Location:** GP Homecare, Stoke

**Date the initiative started:** 2006

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

GP Homecare have always had their own corporate care values but since the launch of the Dignity in Care campaign there has been a particular emphasis on dignity according to the Dignity Champion. They have ensured that all departments have become aware of the campaign and have handed out the 10 point dignity cards to encourage staff to aspire to them in the course of their everyday work.

## **Planning and preparation:**

The Dignity Champion aims to instil in all staff the culture of individual care and for them to take pride in delivering such a personalised service to clients. The training provided places emphasis on high standards of service and staff are rewarded and recognised for providing it.

## **Implementation/who helped and how?:**

High staff numbers mean that the Dignity Champion has to promote service standards by cascading it down through the levels of management and staff.

## **The outcome of the initiative(s):**

At various staff assessments, staff are asked to give examples of how they have performed against the dignity 10 point plan and this can be looked at on a regular basis when staff meet their supervisors or when they have their annual assessments. Files and care plans drawn up by staff for each patient are also examined by managers to see how much choice and control has been given to the service user.

**Region:** West Midlands

**Organisation name/Location:** Lencare Development Services, Birmingham

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

### **Overview:**

As a consultant, the Dignity Champion who runs Lencare Development Services has been developing and delivering a two day introduction course for the Managers Induction Standards for Skills for Care in the Worcester area. With a longstanding belief in dignity, having worked in care for many years, the champion was impressed with the Dignity in Care campaign and decided that there was an opportunity to make this a core part of the courses he offered.

### **Planning and preparation:**

The Dignity Champion started to work with Skills for Care about six months ago and together they decided that the managers' induction provided a good opportunity to explain to new managers and care owners how they could embed the dignity challenge into their philosophy and business planning for their service delivery. The course is currently being delivered to those offering residential care and care in the home. With the expectation that national minimum care standards are set to change, care managers wishing to ensure that their standards are well in excess of the minimum may accept that dignity in care is a good way to satisfy clients as well as a means of improving their business objectives.

### **Implementation/who helped and how?:**

The aim is that the training will encourage care staff to consider the dignified treatment of patients to be an essential part of their care programmes. They are expected to carry the ethos of dignity in care into their respective workplaces and to instil it into their colleagues' working practice.

### **The outcome of the initiative(s):**

The Dignity Champion will encourage those he trains to incorporate a means of measurement into their work.

**Region:** West Midlands

**Organisation name:** Lincote Resource Centre, Swadlincote

**Date the initiative started:** 2007

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

When the Lincote Resource Centre staff first found out about the Dignity in Care campaign on its website, they decided to nominate two champions and to register their centre.

They felt that it was important that all the people involved with their elderly users from when they left home to the time they returned needed to have some awareness of the dignity challenge. This was based on the fact that service users at the day centre often recounted stories to the staff about care agency members, transport contractors or other professionals who were involved in their care and who in their view had not treated them in an appropriate manner. Many of these incidents tied in with those illustrated on the Dignity in Care website so the Dignity Champion decided to address these particular issues.

## **Planning and preparation:**

Firstly the Lincote Resource Centre produced an eye-catching display on the Dignity Campaign in their reception area. They also started speaking about the campaign and giving out the 10 point dignity cards to those providers about whom users had complained. This included some drivers who brought the elderly users to the centre. Where complaints were made about home care staff, centre staff contacted those responsible for them.

Users have also been made aware of the dignity campaign and encouraged to speak to a dignity champion at any time.

## **Implementation/who helped and how?:**

Staff and the users of the centre were all made aware of the campaign and users were encouraged to report any problems they might be encountering. Staff were also alerted to help solve any issues by bringing together these users with one of the two dignity champions at the centre. The problem would then be taken on and dealt with.

## **The outcome of the initiative(s):**

A questionnaire has been devised and distributed to users of the centre to find out their views of the staff and services provided. The outcome will be discussed with the quality assurance team and a decision made as to how to progress. This survey could be used as a benchmark against which to measure future performance including adherence to the dignity standards.

**Region:** West Midlands

**Organisation name/Location:** Oaktree Care, Worcester

**Date the initiative started:** 2009

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion is a home carer with Oaktree Care and became a Dignity Champion earlier in 2009. She has continued to work in the style that she has always adopted which is to listen carefully to her clients.

## **Planning and preparation:**

Quite simply, the Dignity Champion carefully takes note of her clients' concerns and tries to support them in their wishes.

## **Implementation/who helped and how?:**

Together with her clients, the carer undertakes relatively small tasks that can make a big difference. Examples include one lady who wished to have some waxing so the carer found a beauty centre and taking her client there is now part of her care. Another lady likes to walk so they go walking together once or twice a day and have both joined a "health walk" club which meets monthly. A gentleman was lacking the confidence to have a bath. The champion contacted Occupational Therapy, had proper grips installed in the bathroom and now the client actually enjoys his weekly bath. The Dignity Champion has learnt to recognise the signs of concern in her Alzheimer patients and is able to act upon them.

## **The outcome of the initiative(s):**

The satisfaction and pleasure of the champion's clients are the measure of success.

**Region:** West Midlands

**Organisation name/Location:** Solihull Care Trust

**Date the initiative started:** 2004

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion has been working for some time on improving aspects of dignity in palliative care. As a District Nurse she worked to the Gold Standard framework for palliative care and aims to apply this when developing services for her colleagues. The end of life care service improvement project has been developed and expanded on over the past 5 years. The training includes specific ways in which those caring for the dying are guided in helping them in the best way possible, and in particular offering them choices.

## **Planning and preparation:**

The Dignity Champion acts as advisor to colleagues working in palliative care. Her work is backed up by the palliative care training programme.

## **Implementation/who helped and how?:**

The training has led to many improvements in care including a structured care plan which indicates in detail at which stages the nurses should be dealing with which issues. People have a choice in where they would like to die and staff are trained to discuss this and other issues with sensitivity. Any individual choice is recorded and made available to all relevant staff.

Anticipatory prescribing has improved access to appropriate drugs, more appropriate prescribing and decreased avoidable hospital admissions. These factors all help to lend more dignity to a sensitive situation. The Dignity Champion's background as a District Nurse lends weight to her advice in the eyes her colleagues at every level.

## **The outcome of the initiative(s):**

Records are kept by the palliative team and the annual audit shows outcomes. If a patient's wishes have been met, this is deemed to be a success.

**Region:** West Midlands

**Organisation name/Location:** Southern Cross Healthcare, Halesowen

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity in Care Lead for Southern Cross Healthcare, a Dignity Champion herself, trains the 750 further champions throughout the UK within Southern Cross Healthcare. She is responsible for maintaining standards of dignity in all the company's care homes via those she trains.

## **Planning and preparation:**

The Dignity Champion has developed twelve training packs based on the Roper Logan Tierney Activities of Living on which the care in Southern Cross homes is based. Training sessions are carried out once a month for groups of Dignity Champions in the company. They are left with DVDs showing various presentations relevant to the provision of dignified care in all twelve activities of living.

## **Implementation/who helped and how?:**

Once the Dignity Champion has trained the other champions in the company they in turn train the staff in their respective care homes. They have the back-up of the DVD received at their training session and they can draw from that any part that is specifically relevant to their residents and staff.

## **The outcome of the initiative(s):**

A number of measurements can be used to check service standards with particular reference to dignity. The Care Quality Commission reports on its visits to homes so these are examined by the Dignity Champion with her staff to check for changes. Staff in the homes implement what they have learnt from their respective champions, which is then monitored by the champions and in turn discussed with the lead Dignity Champion. Furthermore, the champions complete a dignity audit in their respective homes which is again examined by them and their trainer. Southern Cross also administers its own questionnaire to all users of their homes – residents, families, doctors and others.



**Region:** West Midlands

**Organisation name/Location:** Stoke-on-Trent City Council

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Adult Social Care and Health directorate in the Council developed the Dignity in Care Challenge Awards for residential and nursing care homes within the Stoke-on-Trent Area (70 private homes and 7 Local Authority). The awards serve as a medium of recognising individual and collective good practice in safeguarding service user dignity and respect. It is envisaged that the awards will result in increased motivation in all care homes to strive for improvement.

## **Planning and preparation:**

After the Council decided to trial the awards, information packs and applications were drafted. Once finalised, these were sent directly to each care home. The tone was positive and encouraging as the aim was to invite as many recipients to apply as possible. The internal and external Council websites also focused on the awards in order to raise the profile.

## **Implementation/who helped and how?:**

The initiative was developed and implemented by a project board comprised of individuals from the directorate in the Council. Home visits were made to the short listed homes, and they are then invited to the award ceremony.

The two award nights that have taken place have been very celebratory occasions. They have allowed those leading on dignity in care to be awarded with certificates, trophies and gifts to place in their respective homes.

## **The outcome of the initiative(s):**

The awards have been running for over two years. As a result, the Council has collated significant information on how homes are embedding greater dignity in care as an ethos across their services. In addition, many inspiring examples of staff going “above and beyond” for users of their services have been recognised and rewarded.

**Region:** West Midlands

**Organisation name/Location:** University Hospital Birmingham

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion working at the University Hospital Birmingham used to be the champion for older people as part of her involvement with the Strategic Health Authority. With the launch of the Dignity in Care campaign, the Dignity Champion decided to build on her work with the elderly and extend the principles to all patients. Based on twelve themes, she trains staff who in turn go to their wards and departments and pass on the training for inclusion in everyday patient care.

## **Planning and preparation:**

The Trust Dignity Action Group run by the Dignity Champion has weekly meetings to make short, medium and long-term plans for ensuring the implementation of Dignity in Care.

## **Implementation/who helped and how?:**

Implementation in this large unit has to cascade down from the Dignity Champion to her staff and on to their staff so that everyone is working to the same action plan.

## **The outcome of the initiative(s):**

There are two programmes per year run by the main training Dignity Champion for the other 116 Dignity Champions in the hospital. At these, results from action plans are reviewed for progress made. Further feedback comes from Patient Services who in particular deal with complaints. The Dignity Champions address the issues raised as these often refer to dignity issues.

In 2009 there will be two champions' events, one reviewing the past year at which awards will be made and one launching the next dignity programme.

**Region:** West Midlands

**Organisation name/Location:** University Hospital Birmingham NHS Foundation Trust (2)

**Date the initiative started:** 2009

**Date the initiative finished (if appropriate):** ongoing

### **Overview:**

The Foundation Trust has seconded an experienced Matron to lead on Eliminating Mixed Sex Accommodation. Successful bids to the Privacy & Dignity Challenge Fund are facilitating schemes to support moves for greater segregation.

### **Planning and preparation:**

The Matron is leading on discussions with key internal and external stakeholders in improving segregation. A project plan has been set up with clear objectives and associated timeframes.

### **Implementation/who helped and how?:**

Monitoring equipment is being purchased to facilitate single sex post operative bays following major surgery. Additional Bariatric equipment and low profiling beds are also being purchased. All of the assessment units have pledged to develop an operational procedure that supports segregation in the wards.

### **The outcome of the initiative(s):**

Single sex wards will help improve dignity and privacy for patients. In addition, the Foundation Trust is keen on building on its efforts to further dignity in care. Recently, two Dignity in Care Practice Educators have been hired. These professionals will focus on supporting Dignity Champions in their work across the Trust.

**Region:** West Midlands

**Organisation name/Location:** University Hospital of North Staffordshire, Stoke-on-Trent

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

### **Overview:**

The Dignity Champion, a matron at the University Hospital of North Staffordshire, abhorred the fact that there was a general acceptance of the use of commodes amongst patients and staff in wards for older people. She is of the opinion that commodes are the most undignified pieces of equipment available to hospital staff yet they are commonly used for transport in addition to toileting.

### **Planning and preparation:**

On taking on her ward a year ago in 2008 one of the Dignity Champion's main aims was to reduce the number of commodes in use. She has succeeded in this at the same time as encouraging staff to take patients to the toilet if they are able to walk there, or transporting them on the new ARJO Steadys, a type of lightweight mobile chair, rather than toileting by the bedside which is now the exception rather than the rule.

### **Implementation/who helped and how?:**

Staff are now accustomed to transporting patients in the ARJO Steadys and patients are more than willing to use them. They generally only need one member of staff per patient unlike commodes that require two. The Dignity Champion was successful in obtaining funding for additional ARJO Steadys on her four wards. She now has two per ward and plans for more. They are easy to use and to keep clean and hygienic.

### **The outcome of the initiative(s):**

Patients and staff alike are in favour of the great improvement in dignity and privacy on the wards as a result of the use of the new equipment. The Dignity Champion has discussed this improvement with a consultative group that she meets on a regular basis, the Newcastle 50+ Forum, and they too have applauded the enhanced patient care.

**Region:** West Midlands

**Organisation name/Location:** University Hospital of Birmingham NHS Foundation Trust (1)

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Project at University Hospitals Birmingham has covered a number of themes cascaded by 116 ward and departmental Dignity Champions. During 2009, the Trust has rolled out 'Ability not Disability' teaching sessions encompassing sensory loss and learning disabilities.

The Trust have also designed an emergency box for every ward and department which will aid communication for those with poor vision, hearing or understanding, and will signpost other good practice tools available. It will include a hand held communicator, magnifying sheets, communication book and alphabets.

## **Planning and preparation:**

The Trust had an Older People's Champion in post for sometime. This individual's experience and expertise was crucial in planning the different initiatives. A Dignity Action Group comprised of Dignity Champions from every ward and patient representatives was established to oversee all of the projects. Each of the five divisions across the Trust had specific project plans for their initiatives.

## **Implementation/who helped and how?:**

Matrons in each of the five divisions in the Trust were tasked with overseeing progress according to the set project plans.

## **The outcome of the initiative(s):**

The Trust is keen to collate progress and asked all Dignity Champions to carry out initial benchmarking. Since then, feedback from patients, document reviews and other analysis have been undertaken to quantify improvements ascertained by the various initiatives.

**Region:** West Midlands

**Organisation name/Location:** Walsall Hospitals NHS Trust

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

Caring for the older adult patients in the acute wards posed a significant challenge to hospital staff. These clients were seen to be receiving generic care which sometimes did not meet their specialist needs. Working with the local university, a training module was developed specifically for hospital staff. The module discussed older people's mental health issues, delirium, dementia and depression.

## **Planning and preparation:**

Dignity Champions from the nursing, key support, therapy, social care and Patient Advice and Liaison Service were asked to undertake a review to identify processes and practices relating to place and people which may inadvertently affect 'dignity' within their respective wards/departments.

## **Implementation/who helped and how?:**

Once the review had been undertaken, a core team – comprising of hospital and university representatives - identified and prioritised the key issues, and developed the module so that it addressed them appropriately.

The senior management was proactively involved in the initiative from an early stage. This helped in raising the profile of the module across the organisation.

## **The outcome of the initiative(s):**

As a result of the initiative, staff are better able to identify and discuss any specialist patient needs and/or issues.

The module has now been accredited with Continuing Professional Development credits for registered practitioners.

**Region:** Yorkshire & Humberside

**Organisation name/Location:** Abbeyfield Ilkley Society, Ilkley

**Date the initiative started:** 2003

**Date the initiative finished (if appropriate):** Ongoing

### **Overview:**

The General Manager of Grove House in Ilkley heard about Dignity Champions and decided to become one because she has always believed in treating people with respect and dignity. She was brought up looking after four younger siblings and caring for her grandmother. She started working in care in the early 1970s looking after the elderly.

Grove House really values older people in its provision of activities for its residents and for the local community via its day centres. It offers a wide variety of activities and its volunteers and staff provide help and support for people in their daily living, maintaining their dignity as well as reaching out and broadening their horizons.

### **Planning and preparation:**

A large team of volunteers offer their time to Abbeyfield and the residents and users of the centre value the time to talk and to be heard.

### **Implementation/who helped and how?:**

Respect for human life is at the centre of the Dignity Champion's natural way of working with people. She thinks it important not to see people as frail and elderly but to view them as they see themselves and to be aware of their former standing and achievements.

### **The outcome of the initiative(s):**

Working with people every day and demonstrating an understanding of them instils confidence in them and enables them to speak of any issues they may have. The Dignity Champion, through her familiarity with her clients, can tell whether they are happy. The statutory annual questionnaire also reveals people's opinions of the service and the champion makes sure that she addresses any problems

**Region:** Yorkshire and Humberside

**Organisation name/Location:** Anchor Trust, Ripon

**Date the initiative started:** 2008

**Date the initiative finished (if appropriate):** Ongoing

### **Overview:**

The Chef Manager at this Anchor Trust home requested to go on the four day dementia course run by the home and as a result became a Dignity Champion at the end of 2008. He took his role as part of the team very seriously and made a point of coming out of the kitchen to get to know customers (his preferred term for residents).

### **Planning and preparation:**

The attitude of the Champion was to be helpful, friendly and respectful to the residents and to encourage his kitchen staff to be the same. His manner was applied both in terms of his interaction with residents and in practical terms with his flexible, customer-orientated view of catering. To him, it was a matter of dignity to offer residents the food of their choice when they wished to eat it.

### **Implementation/who helped and how?:**

In addition to a friendly manner and a willingness to stop and talk to residents and to seat them near the kitchen so they could talk to each other while he worked, the champion was keen to offer choice in catering. He kept the kitchen open at all times between 0730 and 1700 and provided meals such as a late breakfast to anyone not coming to the dining room at the usual mealtime. He offered residents a cooked breakfast of their choice rather than a prescribed meal. He also offered tea and snacks on demand between meals to residents and their relatives, and welcomed relatives in for a meal. His plan for the future was to run shifts in the kitchen so that it could remain open later for residents. (He thought that this was also a necessity for business reasons).

### **The outcome of the initiative(s):**

The accommodating and flexible attitude of the Dignity Champion was appreciated by his customers.



**Region:** Yorkshire & Humberside

**Organisation name/Location:** Home Instead, York

**Date the initiative started:** 2009

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

Home Instead provides care in the home. The Dignity Champion has a philosophy that attitude and passion are the most important assets for their care workers. The 22 staff are trained to have a professional manner and to give a good impression to anyone contacting the company for any reason. Good results from staff bring the reward of a nomination as a Dignity Champion.

## **Planning and preparation:**

Staff training is planned to incorporate dignity in all aspects of care. Staff are expected to pay attention to the detailed requirements of clients, to spend time with them and to treat them as individuals. Staff are matched to specific client requirements including age and interests.

## **Implementation/who helped and how?:**

The trained staff are expected to treat their clients and others with dignity at all times.

## **The outcome of the initiative(s):**

The Dignity Champion undertakes various checks on the staff to measure the success of the training. He supervises them on client visits and checks their patient care plans as well as simply observing them in the workplace. He also measures their performance by noting any informal feedback from patients, relatives or colleagues. Good performance is rewarded by the Dignity Champion nomination.

**Region:** Yorkshire & Humberside

**Organisation name/Location:** Leeds City Council & NHS Leeds

**Date the initiative started:** 2006

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

Leeds City Council launched an enquiry into dignity in 2006. They called together representatives from across the board in local organisations and asked people to account for how they were working in line with the 10 dignity points in the national Dignity in Care campaign. A report was published in 2007 which included an action plan for all service areas with particular emphasis on care for the elderly. Organisations were required to measure themselves against the 10 dignity points. The Dignity Champion took a leading role in this whole exercise.

## **Planning and preparation:**

As a result of the report, all service areas set up task forces to initiate and monitor the key actions identified. One important action was the setting up of a simple complaints procedure in the form of a card showing the 10 dignity points and a number that could be phoned if people felt that standards were falling short, particularly in the area of care for older people. Dignity was also incorporated into contracts with outside services.

## **Implementation/who helped and how?:**

Implementation was to take place in all aspects of care for the elderly throughout Leeds. Top level management in all areas was committed to the campaign and this commitment was then filtered down into the respective organisations. The campaign was highlighted by a vigorous social marketing programme which included a widespread poster campaign, leaflets and radio advertising, all emphasising dignity in care for the elderly.

## **The outcome of the initiative(s):**

The Dignity Champion, alongside other senior architects of the campaign, was fully behind an audit for the whole programme in order to check on its success. A working group first drew up an audit tool with which standards could be measured. Older people were asked to say where they thought dignity was lacking, and a series of questions was drawn up to address this. In addition to questionnaires, independent senior medical staff carry out inspection audits in various areas of hospitals, concentrating on key aspects such as nutrition, hygiene and individual care. Care homes are audited by teams of mature adults recruited for the purpose by Age Concern.

**Region:** Yorkshire & Humberside

**Organisation name/Location:** Leeds Older People's Forum

**Date the initiative started:** 2006

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion works with the Leeds Older People's Forum. As part of Leeds City Council and NHS Leeds' wide-ranging 2006 investigation into the quality of life of older people in Leeds, the Forum highlighted and supported the need to involve care homes in the dignity campaign.

## **Planning and preparation:**

The Dignity Champion and the Leeds Older People's Forum acted as a pressure group to encourage this aspect of the wider investigation.

## **Implementation/who helped and how?:**

Leeds Older People's Strategic Partnership responded by commissioning Age Concern to carry out a dignity audit in a sample of care homes, including some providing dementia care. The auditors themselves were older people, recruited and trained by Age Concern; they were seen as being able to relate to older people.

## **The outcome of the initiative(s):**

After the findings were reported to the homes taking part, the auditors recommended follow-up meetings with the homes to evaluate the responses. As the report was only issued in mid 2009, no results of these evaluations are yet available.

**Region:** Yorkshire & Humberside

**Organisation name/Location:** Mid Yorkshire Hospitals NHS Trust, Wakefield

**Date the initiative started:** 2006

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion is passionate about providing dignified treatment to patients and particularly champions the cause of dementia patients whom she sees as the most vulnerable. The specific project she described relates to the production of an interactive training DVD, which she undertook together with other Trauma Unit nurses at Mid Yorkshire Hospitals NHS Trust. It looks at the effects of mental health problems in old age and the way in which participants can effectively manage these situations.

The aim is to help participants to understand the pathology and treatment of dementia, highlighting common problems and identifying workable, sustainable solutions. It focuses on protecting vulnerable patients admitted into acute wards, minimising risks and improving dignity and quality of care.

## **Planning and preparation:**

The Dignity Champion managed to obtain a grant to produce the DVD on the treatment of dementia patients and then set about producing it with colleagues.

## **Implementation/who helped and how?:**

Having produced the DVD, the champion now spends much effort in promoting it. In her own workplace she has ensured that the DVD is known to all the ward sisters. She also speaks at various forums and conferences around the UK to promote the use of the DVD to other professionals.

## **The outcome of the initiative(s):**

A condition of borrowing a copy of the DVD from the library is subsequently to evaluate its use on a feedback form designed by the Dignity Champion.

**Region:** Yorkshire & Humberside

**Organisation name/Location:** NHS Doncaster

**Date the initiative started:** 2007

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion has a nursing background but now commissions services for NHS Doncaster such as an acute liaison mental health service for older people's mental health. He regards dignity as a key requirement in any care work and ensures that dignity clauses are included in all contracts.

## **Planning and preparation:**

The Dignity Champion uses NHS core contracts when commissioning services but adds performance indicators for the service team involved to ensure that they are performing best practice regarding dignity and respect.

## **Implementation/who helped and how?:**

Supplier performance is monitored by means of performance indicators set by the Dignity Champion. These might be, for example, the requirement to report back every quarter showing performance achieved against performance indicators on various criteria. At the moment incentives are awarded for achieving specific goals relating to dignity in care.

## **The outcome of the initiative(s):**

Performance is measured in part by patients reporting on their experiences in a variety of areas, such as communication, expectations, choice etc. Currently, the Dignity Champion pays incentives for service providers to meet dignity goals but his objective is for these goals to become part of core expectations of service. The performance audits supplied by providers as part of their contract are another means of measurement of standards of service offered.

**Region:** Yorkshire & Humberside

**Organisation name/Location:** Patient Opinion, Sheffield

**Date the initiative started:** 2004

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion works for Patient Opinion, an independent website that was set up by a GP five years ago to encourage anonymous, helpful and non-bureaucratic dialogue between patient and clinician. This provides qualitative illustrations of patient experiences, both good and bad, and shows the response they receive from the NHS department concerned.

## **Planning and preparation:**

Patient letters, in particular letters of complaint, have historically received responses that have often been unsatisfactory for the patient. The public in general also tend to view such correspondence - and by implication the NHS itself - in a poor light. In setting up an anonymous forum, the objective was to provide a more informal setting for such dialogue and one that would provide increased patient satisfaction and better publicity for the NHS. In essence, the patient is given the power to set the agenda. The Dignity Champion sees the whole exercise as one of extending dignity to patients.

## **Implementation/who helped and how?:**

The objective is to attract membership from as many NHS Trusts as possible. There is also scope for membership to extend eventually to other service providers such as care homes. The Dignity Champion has worked as a volunteer with health organisations for many years so has been able to publicise Patient Opinion via her many networks. There has also been media coverage giving publicity to the organisation. A further aim is to run workshops for health workers based on some of the patient stories to provide examples of good and poor practice and how to provide the best possible care.

## **The outcome of the initiative(s):**

One measure of success is for the NHS to demonstrate by their responses that they listen to patients. An increase in the number of postings will show further success. In addition, some replies indicate that changes have been introduced as a result of the dialogue. The website can also be used as a reference so the more the website is used, the better the reference database will be.

**Region:** Yorkshire and Humberside

**Organisation name/Location:** Sheffield Local Involvement Network

**Date the initiative started:** 2006

**Date the initiative finished (if appropriate):** Ongoing

## **Overview:**

The Dignity Champion has embedded a more dignified approach to delivering social care at the front line by raising staff awareness. This has been achieved by allowing staff to see how it feels to be the recipient of personal care services.

## **Planning and preparation:**

The training package was developed in the form of an interactive presentation for staff working in the Care4you Service. These professionals are tasked with offering home support and residential care to patients across Sheffield, and number 900 in total. The presentation was delivered to all the staff and focused on delivering all care in a person centred way; dignity formed a large part of this.

## **Implementation/who helped and how?:**

The Dignity Champion was a senior professional and developed the training package from personal observations. Formal and informal feedback from frontline staff and patients was also considered throughout the process.

## **The outcome of the initiative(s):**

This training was exceptionally well received by staff. Furthermore, feedback ascertained from service users during a Charter Mark assessment also verified that it had an impact on the services they were receiving. Specifically, the initiative has resulted in staff being fully aware of the dignity challenge. Patients are also benefitting from increased personalisation, compassion and choice.

As a result of this initial initiative, other training modules have also been set up across Sheffield. For example, the 'Food for Thought' session aims to provide comprehensive training for staff on making meals and mealtimes a more pleasurable experience for service users.

**Region:** Yorkshire & Humberside

**Organisation name/Location:** Southern Cross Healthcare, Darlington

**Date the initiative started:** N/A

**Date the initiative finished (if appropriate):** ongoing

## **Overview:**

As a professional carer, the Dignity Champion has been making sure that she spends a sufficient amount of time interacting with residents. As a result of these interactions, many service users look forward to the regular 'chit-chats' as they can talk about anything that is on their minds. It has also helped in improving their perception of self-worth.

## **Planning and preparation:**

The Dignity Champion felt passionate about talking and giving time to all residents. After sharing this sentiment with her peers and management, the practice has been taken up by others as well. The Dignity Champion is particularly proud of her achievements as this is a very simple yet highly rewarding activity.

## **Implementation/who helped and how?:**

With the support and encouragement of her line manager, the Dignity Champion was able to devote more time to service users. Other staff in the care home are also interacting with residents a lot more.

## **The outcome of the initiative(s):**

The Dignity Champion has been told by some of the service users that they are always put at ease when she speaks to them before, during and after her shifts. The Dignity Champion has not undertaken any formal feedback collation but is encouraged by the many smiles her compassion generates.



**Region:** Yorkshire & Humberside

**Organisation name/Location:** Southern Cross Healthcare, Thirsk

**Date the initiative started:** 2009

**Date the initiative finished (if appropriate):** Ongoing

### **Overview:**

This care assistant at Southern Cross Healthcare has just recently applied to become a Dignity Champion. Forms were made available at the home and she applied to become a champion because she was keen to do as much as she could for residents.

### **Planning and preparation:**

The carer reads each resident's care plan to make sure that she understands their needs and wishes. Her main work is to help wash, dress and feed patients. She tries to ensure that any preferences they have are met. As an example, she realised that one woman resident was unhappy at being washed by a male carer so she assured her that she would do so instead. She also suggested that this be included in her care plan so that her preference would be honoured at all times.

### **Implementation/who helped and how?:**

The Dignity Champion treats people as she would her own parents. She always tries to maintain their dignity; when washing them, she covers them and makes sure the curtains are closed. She asks residents if they are comfortable and if they need anything.

If a trip is organised, the carer volunteers to go and help out.

### **The outcome of the initiative(s):**

The main objective is to try to ensure that each resident is comfortable and satisfied. The carer would welcome any guidance in her work from the Dignity Campaign including ideas on how to improve the life of patients.