DORSET AND SOMERSET STRATEGIC HEALTH AUTHORITY

Dignity on the Ward Audit Template

1. INTRODUCTION

- 1.1 Achieving high standards of patient dignity and putting patient experience high on the agenda is now key at both the national and local levels.
- 1.2 The following audit tool is designed to support the assessment of core standards for delivering dignity on the wards and departments of hospitals in community, acute and mental health sectors and for developing plans for taking action, where appropriate.
- 1.3 The aim of this template is to assess patient dignity issues across a whole organisation by looking at how well wards and departments are meeting the core standards. In addition the template incorporates an action plan based on the findings of the audit to improve dignity standards.
- 1.4 This audit template has incorporated and reviewed the following national work and policies on dignity for patients:
 - 'Essence of Care benchmarking tool' Department of Health 2001;
 - 'National Service Framework for Older People' Department of Health 2001;
 - 'Dignity on the ward campaign' Help the Aged 2001;
 - 'A Matrons Charter, an action plan for cleaner hospitals' Department of Health 2004;
 - 'National Service Framework Reviews of Older People Services England' Joint Inspection by the Healthcare Commission and Commission for Social Care and Inspection 2004/2005 national report on older people services due November 2005.

2. KEY THEMES

- 2.1 There are five core themes and for each the audit tool contains a number of investigations aimed at determining the current position.
- 2.2 The five key themes are:
 - patient environment;
 - privacy, dignity and modesty;
 - communication with patients;
 - promoting individual needs;
 - staff training.

3. USING THE AUDIT TOOL

- 3.1 The audit tool is based on recording observations within the five core themes. These are not exhaustive but they offer a core set of principles from which to assess the fundamental standards of privacy and dignity for patients.
- 3.2 There are four parts to the audit:
 - the auditor is asked to write down observations for each issue using a number of investigation prompts. Suggestions (this is not an exhaustive list) for finding evidence is given in the corresponding source column;
 - a simple score card using three bands is provided to help assess findings at three levels:
 - fully achieved;
 - * some improvements required;
 - not achieved;
 - an overall summary sheet to summarise findings and scores for each of the five main standards;
 - a 'further action required' form within which to record:
 - * the action required to deliver improvements;
 - * the timeframe to achieve improvements;
 - * in addition this will support monitoring.
- 3.3 The action plans will be used to support monitoring and performance management both within each organisation and by Dorset and Somerset Strategic Health Authority.

Dignity on the Ward Audit Tool

Key to scoring each investigation;

Band 1	-	Standard Fully Achieved – no further action required
Band 2	-	Standard Achieved - minor improvement is required
Band 3	-	Standard Not Achieved - require action plan and follow up

Dignity on the Ward Audit Tool

Date of audit:

THEME		INVESTIGATION	OBSERVATIONS	SOURCE	SCORE
Patient Environment	1a	The patient environment is well maintained, clean and safe		Review all patients areas, including bathrooms, ward bays Refer to 'A Matron's Charter' DOH 2004	
	1b	Equipment is stored away from public areas		Store equipment cupboards are used not day rooms/quiet rooms, patient areas	
	1c	Cleaning routines are well publicised		Check in ward policies, patient information books staff information Departments, public corridors	
	1d	Patient feedback is sought and acted upon regarding ward cleanliness		Patient surveys and complaints Local ward/department reports	
	1e	There is single sex accommodation in all areas		Ward areas/bays, day rooms	
	1f	There are appropriate separation of male and female wards, toilet and wash facilities		Check for designated Male/Female patient bathroom/wash areas, toilets	

THEME		INVESTIGATION	OBSERVATIONS	SOURCE	SCORE
	1g	Strategies are in place to prevent disturbing or interrupting patients when the presence of others is required e.g. 'knock before entering' signs available for closed doors/ curtains		Signs and leaflets are used and available for use Privacy signs are available on doors to quite areas, consulting and treatment rooms	
	1h	What is the most recent PEAT score for the trust?		Most recent PEAT report	
Privacy, Dignity and Modesty	2a	Privacy is effectively maintained using appropriate curtains, screens, walls, rooms		Check curtains appropriate length, screens are available	
	2b	Modesty is achieved for patients moving between different care environments		Map/follow a patient journey to X-ray, and other diagnostic facilities	
	2c	Appropriate clothing is available for patients who cannot wear their own clothes		Check trust policies/procedures linen cupboards	
	2d	Patients are able to have a private telephone conversation		Situation of ward phones/mobile phones/phone booths	
	2e	Private areas are available for patients/visitors		Quite rooms can be identified and accessible	

THEME		INVESTIGATION	OBSERVATIONS	SOURCE	SCORE
Communication with Patients	3a	There are policies/ procedures in place to maintain patient confidentiality of information during multi- disciplinary handovers, telephone calls, admission/ discharge procedures, consultant and other ward rounds		Ward/Trust policies/ procedures	
	3b	There is access to translation/ interpretation		Ward patient information and trust policies	
	3c	Precautions are taken to prevent information being shared inappropriately. e.g. telephone conversation are not overheard, computer screens being viewed		Check Trust policy, observe patient areas Local ward/unit policies	
	3d	Trust staff are easily identified by patients		Check trust/ward/department uniform policy, staff wearing uniform and name badges Staff induction programmes	

THEME		INVESTIGATION	OBSERVATIONS	SOURCE	SCORE
Promoting Individual Needs	4a	Policies are in use regarding the promotion of individual needs; beliefs; values; religious need; cultural; sexual.		Patient care plans Trust policies	
	4b	Policies and procedures are in place to prevent disturbing or interrupting patients		Ward/department polices Ask ward/unit managers and staff	
	4c	The name the patient wishes to be called is agreed with the patient		Care plans; patient handover times	
	4d	Individual patients needs are assessed, recorded and communicated sensitively and appropriately		Staff training and induction programmes are provided for all staff in the organisation Patient care plans	
	4e	Disability discrimination audits are undertaken and reviewed, action plans are completed as agreed		Check recent organisation wide and any departmental DDA audits and action plans	

THEME		INVESTIGATION	OBSERVATIONS	SOURCE	SCORE
Staff Training on privacy, dignity and promoting individual needs	5a	Induction programmes for staff contain how to address patients individual needs on privacy and dignity and communicate sensitively		In house induction programmes, content and timetable	
	5b	There are ongoing awareness sessions for all staff on specific issues such as ethnic; age discrimination; disability issues; cultural; promoting dignity issues.		Staff training is provided for ALL staff in the organisation; check with support staff, managers, administrative staff	
	5c	Matrons and ward leaders participate in training associated with privacy, dignity and promoting individual needs awareness and cascade skills and awareness in their teams		Check local induction and ongoing awareness sessions Ward/unit induction packs, philosophy statements	

Dignity on the Ward Audit Tool SUMMARY SCORES

Date of audit: Overall Comments

Theme 1 – Patient Environment
Overall sages for issue 1. (use average number of sages agrees 1e 1h)
Overall score for issue 1: (use average number of scores across 1a-1h) Theme 2 – Privacy, Dignity and Modesty
Theme 2 – I Tivacy, Dignity and Wodesty
Overall score for issue 2: (use average number of scores across 2a-2e)
Theme 3 – Communication with patients
Overall score for issue 3: (use average number of scores across 3a-3d)
Theme 4 – Promoting Individual Needs
Theme 4 – I Tomoting Individual Needs
Overall score for issue 4: (use average number of scores across 4a-4e)
Theme 5 – Staff Training
Overall score for issue 5: (use average number of scores across 5a-5c)

Dignity on the Ward Audit Tool FURTHER ACTION REQUIRED

	THE	EME	ACTION REQUIRED	DATE FOR COMPLETION
Patient Environment	1a	The patient environment is well maintained, clean and safe		
	1b	Equipment is stored away from public areas		
	1c	Cleaning routines are well publicised		
	1d	Patient feedback is sought and acted upon regarding ward cleanliness		
	1e	There is single sex accommodation in all areas		
	1f	There are appropriate separation of male and female wards, toilet and wash facilities		
	1g	Strategies are in place to prevent disturbing or interrupting patients when the presence of others is required e.g. 'knock before entering' signs available for closed doors/ curtains		
	1h	What is the most recent PEAT score for the trust?		

	THE	EME	ACTION REQUIRED	DATE FOR COMPLETION
Privacy, Dignity and Modesty	2a	Privacy is effectively maintained using appropriate curtains, screens, walls, rooms		
	2b	Modesty is achieved for patients moving between different care environments		
	2c	Appropriate clothing is available for patients who cannot wear their own clothes		
	2d	Patients are able to have a private telephone conversation		
	2e	Private areas are available for patients/visitors		

	ТНІ	ЕМЕ	ACTION REQUIRED	DATE FOR COMPLETION
Communication with Patients	3a	There are policies/ procedures in place to maintain patient confidentiality of information during multi-disciplinary handovers, telephone calls, admission/ discharge procedures, consultant and other ward rounds		
	3b	There is access to translation/interpretation		
	3c	Precautions are taken to prevent information being shared inappropriately. e.g. telephone conversation are not overheard, computer screens being viewed		
	3d	Trust staff are easily identified by patients		

	ТНЕМЕ			DATE FOR COMPLETION
Promoting Individual Needs	reg pro ind be rel	olicies are in use garding the comotion of dividual needs; liefs; values; ligious need; ltural; sexual.		
	pro pla dis	olicies and occedures are in acce to prevent sturbing or terrupting patients		
	wi ag	ne name the patient shes to be called is reed with the tient		
	rec co: sei	dividual patients eds are assessed, corded and mmunicated nsitively and propriately		
	dis are rev pla	sability scrimination audits e undertaken and viewed, action ans are completed agreed		

	THE	EME	ACTION REQUIRED	DATE FOR COMPLETION
Staff Training on privacy, dignity and promoting individual needs	5a	Induction programmes for staff contain how to address patients individual needs on privacy and dignity and communicate sensitively		
	5b	There are ongoing awareness sessions for all staff on specific issues such as ethnic; age discrimination; disability issues; cultural; promoting dignity issues.		
	5c	Matrons and ward leaders participate in training associated with privacy, dignity and promoting individual needs awareness and cascade skills and awareness in their teams		