

The following tips have been sent in from patients & visitors representing the US-PEX Lay Panel and are all things that they have encountered this year whilst being hospital inpatients or visitors. Use, choose, add & adapt....

Information

- Information booklets/sheets before admission or on admission with information on: medical procedure; what to expect; what not to expect; what & how to tell nursing/medical staff about etc.
- What to expect on the Ward: a simple sheet or poster telling patients useful information such as meal times, how to choose meals, where and how to get towels/linen, what time do lights go out, visiting times, how/when to get a wash, who to ask for what eg pain relief.
- If patients have been bed bound perhaps give a list of exercises to do on discharge to strengthen muscles and improve mobility.

Making patients feel 'Human' – Personal Care

- For patients unable to get out of bed: a toothbrush being brought to the bed (some have electric ones with toothpaste on for patients unable to put it on themselves); hair, face & body washing in bed. And the offer to brush hair for those unable to do it themselves or reach personal items from lockers.

Communicating

- Cheery, chatty & welcoming staff.
- Let pts know additional info – e.g. tell pts that they 'don't have Cancer' or other shocking news even if they don't ask – some will be too worried/ embarrassed to ask, or it might not be what they came in for, so if you can put their minds at rest do so.
- Tell pts why you are doing what you are doing. If it's necessary for pts to come in a few hours before a procedure explain why & it may save a lot of questions, anxiety and even some hostility.
- Show pts you have heard about them in hand-over, a comment such as 'I hear you had a bad night' comforts pts to know that information is shared.
- Some patients find it easier to write down everything that they want to ask and likewise for staff to write down responses / information this can be taken across services and kept with pt as a reminder and shared with staff during consultations.

Discharge

- Take an holistic view of pts – they may have come in for one thing but may not be well enough to go home because of another – take time to look at the whole person, hear their concerns it may save re-admission.

Distraction

- Even adults can benefit from being distracted such as having injections, removing epidurals and catheters. A few soft words, some chat about anything other than the procedure & the anxious build up is avoided.

“Always Events”

- Those aspects of the patient and family experience of healthcare that ideally should 'always happen' - perhaps create / add to the ward list (either from the above or from your patient data). You could also have a 'You Said – We Did' sheet on the wall to show what you've put into practice.