# Content

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

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

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

# **Question 1**

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

# **Question 1 Answer**

- a) Yes. I agree that the level of detail in the Charter is useful and appropriate.
- b) In the Access section it highlights that no-one should be refused a service under a list of unlawful discrimination however there is no direction regarding post-coded services. For example, access to a particular drug in one area and not in another.
- c) [Content screened], I am disappointed that there is no reference to the role that the [Public Partnership] Forums play in the Communication and Participation section of the document or how this will change with the proposed integration of Health and Social Care Services.
- d) More clarity is needed in the detail surrounding some of the statements in the document.

# Accessibility

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

# **Question 2**

a) Do you think the information in the Charter is written in a way that is easy to understand?

b) Does the format of the Charter make it easy to find the information you need?c) What would make it better?

- a) Although I agree that the information in the Charter is written in a way that is easy to understand, there is a need to ensure that the document itself is accessible to specific client groups/patients. For example those from ethnic origin, deaf, blind, learning disability, mental health and those who cannot read.
- b) The format of the document makes it easy to find the information you require.

# Design

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

### **Question 3**

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

# **Question 3 Answer**

The document is clear and concise in its layout however an A5 document is often easier to handle for most patients and their carers.

# Availability

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

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

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

#### **Question 4:**

a) What do you think is the most appropriate way for people to get a copy of the Charter?

b) Do you agree that we should only make alternative formats available on request?

#### **Question 4 Answer**

- a) All of the formats listed above are helpful. Information needs also to be available in other venues such as GP Practices, various departments in the Hospitals, Community Centres, etc. It would also be helpful to commission a "Tonight" programme on the television to truly ensure that the public were informed of this Charter and their Rights and Responsibilities as a patient.
- b) Yes. I initially agree that alternative formats should only be available on request however to assist with not having too many requests it would be helpful to have appropriate copies available to the organisations who support the ethnic community, those who have deaf, blind and other support needs and they could also support them to access and understand the document.

# **Rights and Responsibilities**

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

#### Question 5

a) Do you have any comments on the balance of rights and responsibilities set out in the Charter?

b) What would make it better?

#### **Question 5 Answer**

a) I agree that the balance of rights and responsibilities are set out quite clearly in the Charter.

# General

### **Question 6**

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

#### **Question 6 Answer**

In the Communication and Participation section highlighting the right to clear communications, this is an ideal proposal however, in reality, this seldom happens due to the time commitments of staff and poor communications. Work needs to be undertaken to change staff attitudes to patients and their carers views.

In particular appointment times being constantly changed by not just days or weeks but months and as for being provided with the name of the staff member responsible for your care, this appears to change by the hour.

In the section with the Adults with Incapacity Act, I have concerns that a health professional can make decisions on the care for patients under 16. Surely this should be made by the parent!!

There also does not seem to be clarity on how to resolve conflict between the patient, carer and the professional and who has the final say.

Under the Respect section, the document outlines what is hoped to achieve however this often does not happen due to local challenges such as not being able to provide appropriate privacy.

In the Safety section, many patients and their carers do not feel confident in challenging staff, especially in a hospital setting, for fear of repercussions on the patient care of their loved one.

In the section on Comments and Complaints, these should inform improvements on future services and not be viewed as the patient or their carer being a "trouble maker" because they have made a complaint.