



A consultation to inform an update of the NHS Constitution

We are consulting on how to strengthen the NHS Constitution.

The main changes proposed cover:

- the changes recommended by Sir Robert Francis QC, in his Inquiry Report following the terrible failings at Mid-Staffordshire NHS Foundation Trust;
- giving greater prominence to mental health;
- weaving in some of the new Fundamental Standards;
- making reference to a more transparent and accountable NHS; and
- making reference to the Armed Forces Covenant.

The questions below seek your views on the proposed changes. When answering each question, there are four options available to you;

- Yes, and I have no further comments
- Yes, in principle, but I have some comments
- No, and I would like to explain why
- No, and I have no further comments

If you completely agree with the proposed wording, and have no further comments, please respond 'Yes, and I have no further comments'. Similarly, if you completely disagree with the proposed wording, but have no further comments, please respond 'No, and I have no further comments'. If you select either of these two options, please move on to the next question.

If you agree with the proposal in principle, but would like to comment on the proposal, please respond 'Yes, in principle, but I have some comments'. Similarly, if you disagree, and would like to comment on why, please respond 'No, and I would like to explain why'. Please then explain your reasons in the space provided below the options.

All responses will be analysed, and used to inform an update of the Constitution later in 2015.

The closing date for comments is 11th March 2015

Question: **What is your name?**

Dr AD Dwarakanath

Question: **What is your email address?**

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Question: **What is your organisation?**

Royal College of Physicians of Edinburgh

Question 1: **Mental Health**

We would like to rephrase principle one of the NHS to read: '***The service is designed to improve and prevent, diagnose and treat***

both physical and mental health problems with equal regard'
(Annex 2, Change 1). Do you agree?

We would also like to rephrase an existing right to read: '***You have the right to drugs, treatments and psychological therapies that have been recommended by NICE for use in the NHS, if your doctor says they are clinically appropriate for you'***'. (Annex 2, Change 7).
Do you agree?

Yes, and I have no further comments

Further Comment

Question 2: **A patient-centred NHS [Recommendation 4]**

We would like to change the current wording to: ***'Patients will be at the heart of everything the NHS does'*** (Annex 2, Change 2). Do you agree?

Yes, in principle, but I have some comments

Further Comment

The use of "will be" still suggests that this is an aspiration. Changing this to "patients **are** at the heart..." is more consistent with the language used in the other principles and the Francis recommendation to strengthen the language and move beyond aspiration.

Question 3: **Protecting patients from avoidable harm [Recommendation 5]**

We would like to include the following wording for staff: ***'You should aim to provide all patients with safe care, and to do all you can to protect patients from avoidable harm.'*** (Annex 2, Change 12). Do you agree?

Yes, in principle, but I have some comments

Further Comment

The word 'aim' could perhaps be removed here – again it suggests aspiration rather than this being a fundamental responsibility of staff to provide safe care and avoid harm.

Question 4: **Helping patients find assistance [Recommendation 5]**

We would like to include the following wording for staff: ***'You should aim to help patients find alternative sources of assistance, when***

you are unable to provide the care or assistance a patient needs'
(Annex 2, Change 14). Do you agree?

Yes, in principle, but I have some comments

Further Comment

As above, the word 'aim' could perhaps be removed here –it suggestions aspiration rather than this being a fundamental responsibility of staff to help patients.

Question 5: **Complying with guidance and standards [Recommendation 10]**

We would like to include the following wording for staff: "***You should aim to follow all guidance, standards and codes relevant to your role, subject to any more specific requirements of your employers***" (Annex 2, Change 13). Do you agree?

Yes, in principle, but I have some comments

Further Comment

As above, the word 'aim' could perhaps be removed here –it suggestions aspiration rather than this being a fundamental responsibility of staff to follow relevant guidance.

Question 6: **Duty of candour [Recommendation 178]**

We would like to include the following wording for patients: '***You have the right to an open and transparent relationship with the organisation providing your care. You must be told about any safety incident which has caused, or could still cause, significant harm or death. You should be given the facts, an apology, and any reasonable support you need, in relation to the incident.***' (Annex B, Change 11). Do you agree?

Yes, in principle, but I have some comments

Further Comment

We agree with this inclusion around candour in the section for patients, although it could be complemented with similar wording in staff responsibility section. There is a mention of being open when things go wrong but this could be strengthened and encouraged, as cultural change is key.

Question 7: **Fundamental standards [Recommendation 13]**

We would like to include the following wording for patients:

- ***‘You have the right to receive care and treatment that is appropriate for you, meets your needs and reflects your preferences.’*** (Annex B, Change 4)
- ***‘You have the right to be cared for in a clean, safe, secure and suitable environment.’*** (Annex B, Change 5)
- ***‘You have the right to receive suitable and nutritious food and hydration to sustain good health and wellbeing.’*** (Annex B, Change 6)
- ***‘You have the right to be protected from abuse, neglect, and care that is degrading.’*** (Annex B, Change 8)
- ***‘You have the right to be involved in planning and making decisions about your health and care with your care provider, including your end of life care, and to be given information to enable you to do this. Where appropriate this right includes your family and carers. This includes being given the chance to manage your own care and treatment.’*** (Annex B, Change 10). Do you agree?

Yes, in principle, but I have some comments

Further Comment

We have some concerns about change 4 and who is determining what is appropriate treatment and what the patients needs are. Most want and need to be cured, but that is not always possible. The treatment the patients wants may not always be available to them and this needs to be recognised.

For change 10 we would suggest the addition of 'suitable' or 'appropriate' before the word information, as different audiences eg young people, those with a disability or sensory impairment, or those where there is a language barrier may require information about their care to be presented in a different way. The chance to manage your own care may also be dependent on the patient's needs, so the inclusion of 'where appropriate' may also be required in this sentence. As above, who decides the 'appropriate' right in relation to family and carers?

Question 8: Transparency

We would like to include the following wording for patients: ***'You have the right to transparent, accessible and comparable data on the quality of local healthcare providers, as compared to others nationally'*** (Annex B, Change 9). Do you agree?

Yes, in principle, but I have some comments

Further Comment

If the right is to access data (as opposed to being automatically provided with it) as suggested in the explanatory notes, the word access could be added here.

Question 9: Armed Forces Covenant

We would like to include the following wording ***'As part of this the NHS will ensure that in line with the Armed Forces Covenant, those in the Armed Forces Community are not disadvantaged in***

<p><i>accessing health services in the area they reside'</i> (Annex B, Change 3). Do you agree?</p> <p>Yes, and I have no further comments</p>
<p><u>Further Comment</u></p>
<p>Question 10: <u>Do have any other comments about the NHS Constitution?</u></p>
<p>No</p>

You can either email or post responses to the consultation, using the details below:

contact NHS Constitution Team
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e-mail NHSConstitution@dh.gsi.gov.uk

If you have any questions at all regarding the consultation process, please email consultations.co-ordinator@dh.gsi.gov.uk

Many thanks for taking the time to complete this consultation. Your response will be analysed, and used to inform an update of the Constitution later in 2015.