

Title: Participation Policy

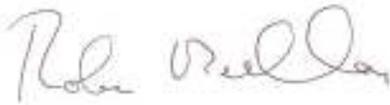
Document reference number/code:	GN031	Document developed by:	<i>Marianne Coady, Senior Administrator, CEO Office</i> <i>Joan Guinan Menton, ADON</i> <i>Clare Conlon, Occupational Therapy Manager</i> Peamount National Healthcare Charter Working Group
		Policy Reviewed by:	Policy Development Group
Revision number:	0	Recommend for authorisation:	Signature: _____ Date: _____ Policy Development Group
Effective from:	September 2015	Authorised by:	Signature: _____ Date: _____ Director Signature  Date: _____ Chief Executive Officer
Date due for Revision:	September 2018	Responsibility for implementation of this Policy:	Heads of service
Document tracking. Final version: 1	Date:	Responsibility for review and audit:	Policy Development Group

Table of Contents

1.0	Policy Statement	Page 2
2.0	Purpose	Page 2
3.0	Scope	Page 2
4.0	Legislation/ Other Related Policies	Page 2
5.0	Glossary of Terms & Definitions	Page 3
6.0	Roles and Responsibilities	Page 4
7.0	Procedure/Protocols/ Guidelines	Page 4
8.0	Revision & Audit	Page 6
9.0	References	Page 8
10.0	Appendix	

Appendix 1 – List of Peamount Healthcare Feedback Mechanisms

Appendix 2 – Policy Acknowledgement Sheet

1.0 Policy Statement

Peamount Healthcare is committed to the promotion of participation and the involvement of all service users, their families and carers or other nominated support people in shared decision making about their healthcare that takes account of individual preferences and values.

Participation occurs when service users, their families and members of the public are meaningfully involved in decision making about their own care and treatment options, the planning of services and about the wellbeing of themselves and their community.

2.0 Purpose

The purpose of the policy is to guide all stakeholders in the promotion and facilitation of participation within Peamount Healthcare and to improve the health outcomes for service users and the quality of the healthcare delivered.

3.0 Scope

This policy will apply to all service users, families, representatives and employees directly employed, whether in a permanent or temporary capacity, by Peamount Healthcare and those engaged in any capacity to provide services or advice to, or on behalf of Peamount Healthcare.

4.0 Legislation/ Other Related Policies

This policy should be read in conjunction with the policies listed below available on the internal policies online drive at policies on 'ph-fileserver\GroupsDirs'

- ❖ Peamount Healthcare Consent Policy
- ❖ Privacy, Dignity & Choice Policy
- ❖ Open Disclosure National Policy
- ❖ Communication Policy
- ❖ Rights & Advocacy Policy
- ❖ Risk Management Policy
- ❖ Health Promotion Policy
- ❖ Complaints Policy
- ❖ Data Protection Policy
- ❖ Code of Conduct for Employees

- ❖ Professional Standards for Healthcare Professionals
- ❖ Peamount Strategy 2008-2013
- ❖ National Healthcare Charter, you and your health service

5.0 Glossary of Terms & Definitions

Participation: is the process during which service users, family members and carers are consulted and involved in shared decision making about the service users healthcare with their preferences and values are taken into account.

- ❖ Participation is an important democratic right.
- ❖ Participation is a mechanism to ensure accountability.
- ❖ Participation is a requirement under the Standards for Safer Better Healthcare

HIQA: The Health Information and Quality Authority (HIQA) is the independent authority which has been established to drive continuous improvement in Ireland's health and social services.

National Standards for Safer Better Healthcare: The standards describe a vision for high quality, safe healthcare and provide a framework for services to organise, manage and deliver safe and sustainable healthcare. They set out the key principles of quality and safety that should be applied in any healthcare setting.

National Healthcare Charter: a statement of commitment by the HSE on healthcare expectations and responsibilities. It outlines what service users can and should expect every time that they use health services and what service users can do to help deliver safer and more effective health services in Ireland.

Health: a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity (World Health Organisation 1948).

Health responsibilities: the duty of people to do their best to maintain and improve their health, to respect the health of others and to support the Irish health and social care services to run efficiently.

6.0 Roles and Responsibilities

Chief Executive Officer

- ❖ The CEO has the responsibility for ensuring that participation is a core part of Peamount Healthcare's governance structure and operations.

Senior Management Team

- ❖ It is the responsibility of the Senior Management Team to ensure that all managers and heads of department are aware of their responsibilities in the implementation of this policy.
- ❖ To monitor the feedback mechanisms & ensure that the learning informs service improvements.

Clinical Nurse Managers and Department Managers

- ❖ It is the responsibility of the Clinical Nurse Manager/Heads of Departments to ensure that all staff has access to and are aware of this policy and to lead by example.
- ❖ It is the responsibility of the CNM's/Heads of Departments to champion the participation policy and ensure that work practices comply with the policy.
- ❖ It is the responsibility of all department heads to support and encourage service users to become more actively involved in their own care.
- ❖ It is the responsibility of all the CNM's/Heads of Departments to complete the participation audit outlined tool within this policy.

All Staff

- ❖ It is the responsibility of all employees to work together to create an environment that encourages participation and to carry out their duties/work practices in a way that is consistent with this policy and the National Healthcare Charter.
- ❖ It is the responsibility of all employees to read, understand and sign the policy acknowledgement sheet.
- ❖ It is the responsibility of all front line staff to ensure that all relevant documentation including assessments and details of service user's preferences and values are maintained, implemented and communicated to the relevant staff members.

7.0 Procedure

7.1 The participation policy promotes service user involvement and responsibility in their own health by implementing the principles of the National Healthcare Charter.

- ❖ Create a welcoming and accessible service for the diverse members of our community
- ❖ Treat service users, their families, members of the public and colleagues with dignity and respect by communicating clearly and respectfully.
- ❖ Actively seek feedback from service users, their families and members of the public on their experience and the services we provide. Encourage service users to utilize feedback leaflets and complete questionnaires to assist staff and the organization in receiving feedback. See Appendix 1 for further information.

- ❖ Encourage service users to ask and prepare a list of questions, concerns and symptoms to discuss with their healthcare professional or GP. Ensure relevant leaflets are available to inpatients, outpatients and insert into patient letters for appointments.
- ❖ Facilitate service users to be involved in making informed decisions about treatment and care to the degree and extent they choose.
- ❖ Assist service users to involve family, carers or other nominated support people in their healthcare treatment.
- ❖ Provide accessible information to service users and members of the public about care and treatment options using Peamount Healthcare approved information leaflets.
- ❖ Receive informed consent before any procedure following discussion of the options available to the service user, especially the expected results, success rates and possible side effects.
- ❖ Ensure service users are informed of the results of any tests or procedures
- ❖ Seek consent for any student involvement in the delivery of healthcare from the service user before any involvement in the delivering of care and seek the service users permission before any medical examination or review.
- ❖ Facilitate the service user to seek a second opinion at any time during their care.
- ❖ Facilitate the service user to understand their treatment plan before discharge ensuring that it is explained clearly and supported with the appropriate information leaflets.
- ❖ Facilitate education and supports for service users on self managing long-term health conditions
- ❖ Ensure participation is an agenda item in team meetings.
- ❖ Promote examples of how service users have been involved and what has improved following service user feedback for example informing and drawing attention to our ‘You said we did’ information.
- ❖ Ensure that service user/patient feedback is used to inform quality improvement.



Tell us your experience leaflet



Staff Guide National Healthcare Charter



It's safer to Ask Leaflet A5

8.0 Revision & Audit

- ❖ This policy will be reviewed in 3 years as per Peamount Policy Guidelines or before in line with any change to National or International best practice guidelines.
- ❖ All heads of departments will monitor the implementation of this policy.

To identify if the priority actions from service user/patient feedback are being implemented, an audit process is required. This includes implementing the continuous quality improvement cycle outlined below. The cycle shows how each department can improve their participation activities, based on the evidence obtained from evaluating and monitoring participation activities.

Participation Audit Tool

Areas for Audit	Measurement / Evidence	Actions to complete task	Responsible Individual	Timeframe for completion
Identify a member of staff in your ward /department to champion participation				
Facilitate staff to be trained in <ul style="list-style-type: none"> ❖ Customer care, ❖ Effective complaints handling ❖ Consent ❖ Open disclosure. 	Dates of Training % Staff Attended			
Ensure that the promotional resources for the Healthcare Charter are available and visible in your wards/departments				
Create a contact list of advocacy and social work group contacts currently supporting services and patients				
Arrange & facilitate feedback mechanisms with service users who have used our service in the previous six months to explore and investigate what worked well and what could be improved upon as follows: Feedback Mechanism Examples: Focus Groups – Rehabilitation Resident Committees – Pats/Ciarans Speak Up Groups – ID/Brid’s In-patient Questionnaires Out-patient Questionnaires				
Use evidence from engagement with patients and patient experience of your service to inform service improvements <i>(Communicate any improvements made based on service user feedback to inform Peamount’s ‘You said, we did’ initiative and Service user feedback tool).</i>				
Managers of all Wards/Depts to complete individual action plan(s) and report on its achievement through CNM & Team Meetings, feedback to inform Peamount’s ‘You said, We Did’ Initiative. Inform quality improvement plans.				

9.0 References

- ❖ Cork University Hospital Group Patient and public participation guide
- ❖ National Healthcare Charter, you and your health service

Appendix 1

List of Peamount Healthcare Feedback Mechanisms

- ❖ Service User Feedback an agenda item for Team Meetings
- ❖ Patient Satisfaction Surveys
- ❖ Mealtime Surveys
- ❖ HSE Employee Surveys
- ❖ Feedback Questionnaires [specific to individual Rehab initiatives]
- ❖ Residents & Relatives Committees
- ❖ House Meetings
- ❖ Speak Up Groups
- ❖ Advocacy Group
- ❖ Comments, Compliments and Complaints
- ❖ 'You said, we did' initiative
- ❖ Patient Forums- Rehabilitation - arrange focus groups with service users who have used the service in the previous six months to explore and investigate what worked well and what could be improved upon
- ❖ Peamount Healthcare Rights Group
- ❖ Food & Nutrition Working group meeting
- ❖ Service User Nutrition Feedback groups
- ❖ CNM/Heads of Department Meetings
- ❖ Management Team Meetings
- ❖ Board Involvement
- ❖ Quality & Risk Committee Meetings
- ❖ Health & Safety Committee Meetings
- ❖ Use of Healthcare Charter Leaflets

This list will be developed over time.

Appendix 2

Policy Acknowledgement sheet

Code/Name of policy: _____ **Participation Policy** _____

Ward/Dept _____

No	Date	Name	Signature	Initials
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				