

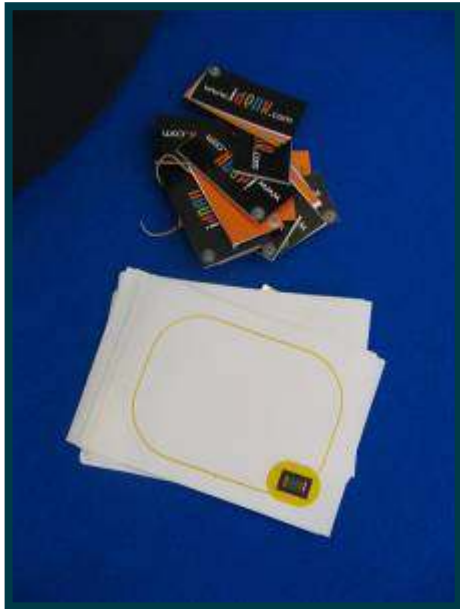
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Compassion

With Chris Beasley

NHS Confederation, Manchester 18 June 2008







Context

www.idenk.co.uk/compassion

Harnessing the growing global movement
for increased compassion in healthcare

INCONVENIENT TRUTHS

JOURNAL OF THE ROYAL SOCIETY OF MEDICINE Volume 99 2006

**Too little compassion in health care, or,
Please bring your head and heart to work,
not just your hands**

I have been visiting one of England's major teaching hospitals a couple of times every week for most of this year. My father-in-law is a 'frequent flyer' with heart failure and various co-morbidities. Seeing the NHS through the lens of his care is sobering. The NHS's addiction to structural change as a way of sorting things out seems unlikely to shift his shoddy support. This obsession with moving the resources around seems to know no bounds and yet is useless for him.

In the media we see continued coverage about sacking unaffordable staff this year and senior NHS and DoH leaders encouraging the closure of hospitals in the tail end of this decade. Others offer rationing services and big projects (like the national IT programme) as the only routes to sustainability. From my experience these are pretty irrelevant – what is really needed is a fundamental shift in how people relate to each other: staff to staff, patients to staff. And this is measured in the small things: the nurse who phones social services (again) to try to get a completed and accurate assessment—NOT the nurse who refused to go to the hospital shop to buy the barrier-nursed patient a bottle of orange squash.

If everyone who works in NHS did one extra act of kindness a day (the GP on a home visit who holds that egg for a housebound patient, the consultant who buys a phone card for a bed-bound patient and helps them to use it) and took one extra step to make things just a bit better for a patient (the SHO who phones the GP, the ward clerk who talks to the X-ray department, the sister who phones the relatives to brief them on a change in regime), the whole system would take a massive step forward in terms of service and smoothness, and would seem simpler to patients and more satisfying for staff. Once the NHS shifts out of its chaotic turbulence it is possible to try other improvements. Structural change is a side alley en route to giving patients and carers greater and greater value from the skills of staff. Painless improvements with IT are only part of the answer. Changing the way that compassion is shown, kindness demonstrated, conflict handled and decisions managed would be totally transforming. Starting with the little things is critical. It doesn't need a government policy or mandate from the top. This is a strategy that everyone can create—and all can implement.

Phil Hadridge

www.idenk.co.uk/compassion



Nurses to be rated on how compassionate and smiley they are

John Carvel, social affairs editor
The Guardian, Wednesday June 18 2008



Photograph: David Sillitoe

Nurses are to be scored on how compassionate they are towards



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Nurses to be rated on compassion

Nurses are to be rated according to the levels of care and empathy they give to patients under government plans.

Health Secretary Alan Johnson told the Guardian newspaper that he wants the performance of every nursing team in England to be scored.

He said he believes compassionate care was as crucial to the recovery of patients as the skills of surgeons.

Nurse leaders welcomed the move and said they would work with ministers on developing the system.

Mr Johnson said plans were to be outlined in the forthcoming review of the NHS by health minister Lord Darzi.



The attitude of nurses is very important, says Mr Johnson

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The meeting worked to answer a question

What are the simplest steps
to increase compassion
to improve patient
experience
in the NHS?

The group defined compassion - and what its absence looks like (see next 6 slides)

com·pas·sion (kəm-păsh'ən) *n.*

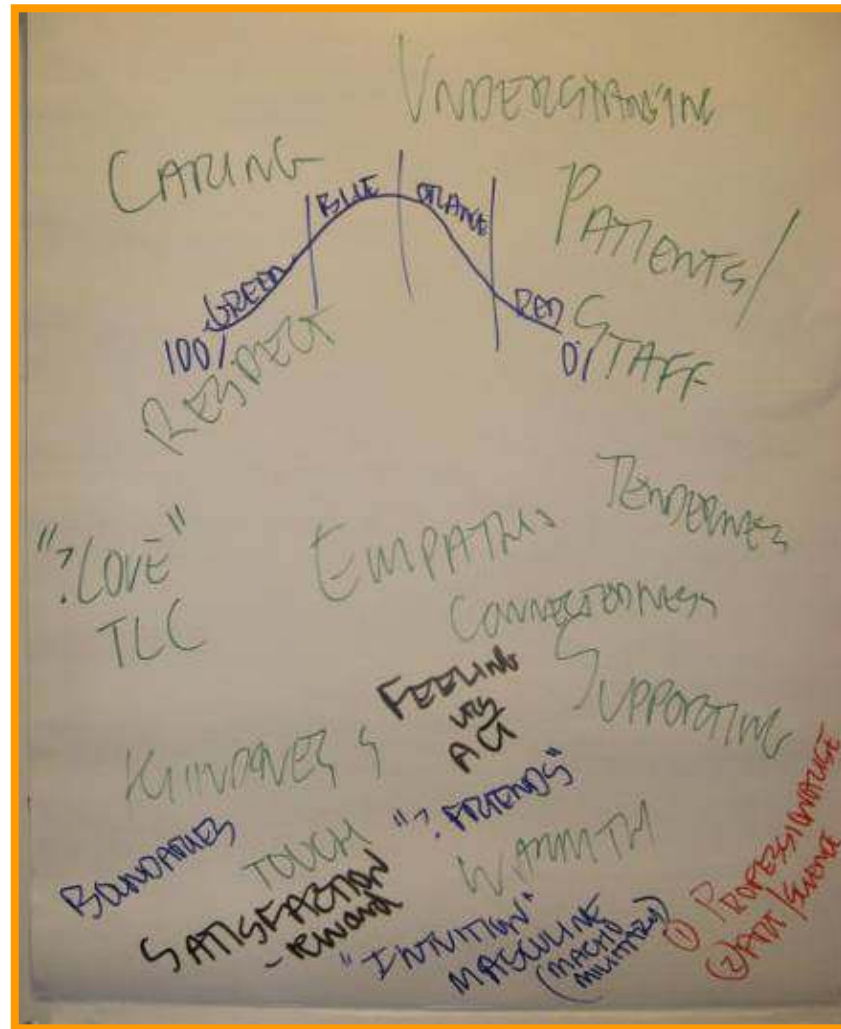
deep awareness of the suffering of another
coupled with the wish to relieve it.

[Middle English compassioun, from Late Latin compassiō, compassiōn-, from compassus, past participle of compatī, to sympathize : Latin com-, com- + Latin patī, to suffer.]

The group shouted out words associate with compassion

- Care
- Empathy
- Kindness
- Love
- understanding

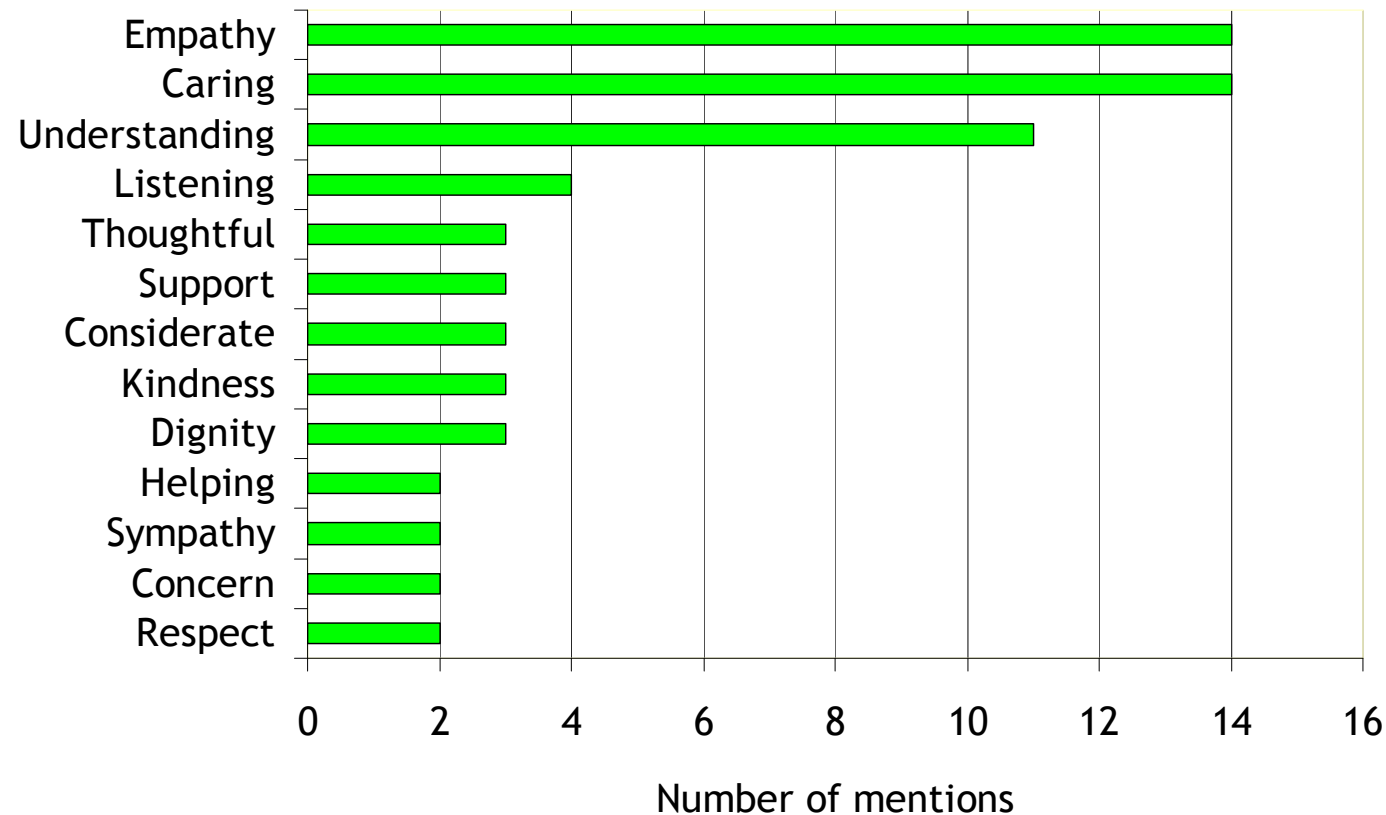
The key words that 'compassion' brings to mind were described



Source, Chief Nurses at CNO conference

Empathy, caring and understanding are the words most associated with the word compassion

Q2: What words come to mind in association to the word "compassion"?



Source, survey of Chief Nurses in one SHA

an·to·nym (ăn'tə-nĭm') *n.*

A word having a meaning opposite to that of another word: *The word wet is an antonym of the word dry.*

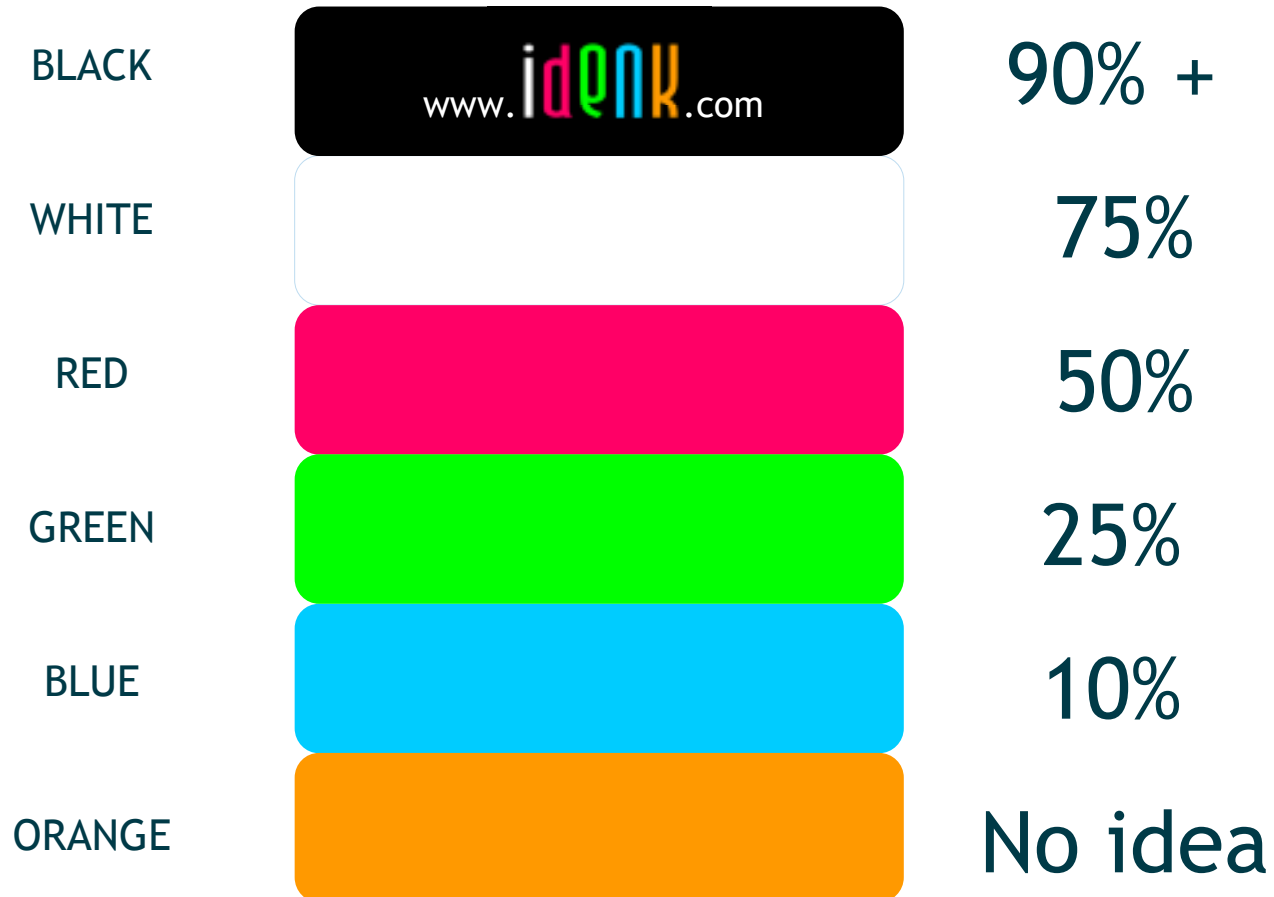
compassion *n*

Antonyms:

cruelty, harshness, hatred, indifference,
meanness, mercilessness, tyranny...

Having defined a spectrum there
was a vote

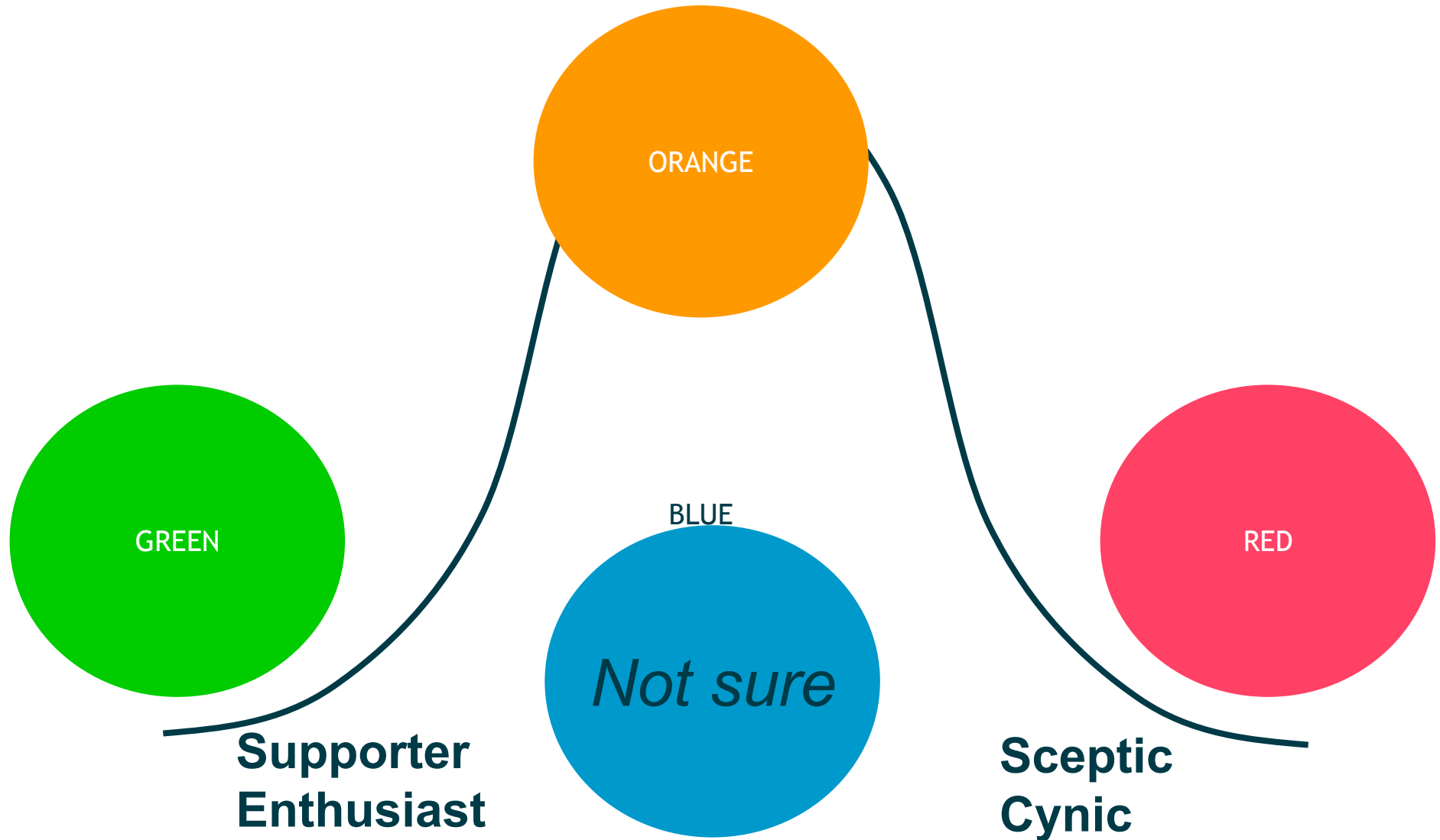
From your own experience...
How near high-compassion?



Pretty average levels of satisfaction



How supportive of all this push on 'compassion'



And pretty motivated to do something



The group shared their answers to this question in conversation with Chris Beasley

What are the simplest steps
to increase compassion
to improve patient
experience
in the NHS?



Session at NHS C: messages from plenary

- Try to make easy: lean to get rid rubbish; values based recruitment; permission to care in induction; what rewarded for
- Compassion fatigue, burn out, split reality for many
- Look for measures in sensitive way (NB this was the day SoS was reported to want judging nurses on being 'smiley')
- Support - staffing levels so time to care, visible leadership (manage by walk about); care for vulnerable (ill) staff
- Reflective practitioner - mindfulness
- Listening skills
- Commissioning compassion, kindness: relationships with providers, knowledge of managers
- Stimulate action - 7 day challenge
- Aspire to zero harm
- Care and confront; Micro and macro; Reignite OR find compassion

What are the simplest steps
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Messages to plenary conversation - Business of caring

- 70% is 0 - the minimum
- Beyond faux commercialisation - Passion for customer insight (quality matters)
- Design in care - British Gas
- Set cultural tone - servant leadership (lead with culture)
- What do get from 50 to 75%
- What compassion mean in NHS values? For your leadership
- Where are you with DVF>R
- Patient insight into heart what do - 3x same pt at board, video story to you tube
- Vie for top agenda - money, activity, safety, experience
- Regulation journey - BT

Evaluation and reflection forms (n=31)

1. Good use of time = 8.6/10
(10= high)

2) What I learnt

- Reminder about bringing real patient experience into commissioning
- Questions about how we can commission providers in a way that promote compassionate care
- A dialogue about compassion in emerging
- Had more read paper - learnt more about concept movement. Concern that it may be seen as 'silver bullet' showed not to lead but support a broader drive to improve patient experience
- Response at diverse group of colleagues echoed my aim (encouraging)
- Compassion starts with how organizations treat staff?
- The power of relationships. "respect" for each other. Didn't feature but seems important
- Compassionate leader = compassionate staff with each other (patients)

What have I learnt?

- Same real commitment from NHS professional to re-engage with patient care. Some great ideas and examples of what has been done in practice
- That there are a significant number of other people in the NHS who want to improve compassion in the NHS
- Challenges and risk of promoting importance of compassion
- There is an appetite for this
- A few useful audience comments
- Learnt a lot, thank you
- We're in danger of turning this into another thing to do
- The NHS Confed has produced a paper. There is literature about this subject. The may be an intractable issue
- Lot of other people conceived about this issue
- More of a consolidation of what I know already and what others are doing
- Definite feeling that 'compassion' is lower than it could be. Learnt that many people consider culture key - people need to be given time/permission to prioritize core work. This links strongly to productive work - we (as managers) have a responsibility to help them to achieve high levels.

What have I learnt?

- Very interested in the Addenbrookes work
- Compassion is a central issue that many others intuitively understand. And we near a tipping point?
- People still care
- All feel supportive of the push to be compassionate. Few tips on how to introduce into trust
- More willingness to attend
- Meeting with line manager to discuss important problems which need to be resolved - give your ideas, but are totally ignored or put down
- Developing new code of practice - compliments with business as usual demands on infection team
- Key issue needs debate rather than quick answer. Importance of face to face feedback
- There is a groundswell of feeling that the NHS risks losing its heart if compassion is not at the centre of what we do
- That compassion is important and needs to be built into culture of organisations - to care for each other. That we need to question targets that go against this
- Need compassion in NHS to reconnect staff and patients values important
- What others are doing and can be shown
- Compassion is something that all staff in the NHS should show I am not alone there is a groundswell we have enough evidence (pat + staff surveys, complaints, commentators etc)

3) What will I do next?

- Provoke thought through executive team paper - written by number of key stall (from all tribes),to get to next steps
- Carry on listening to all
- Develop knowledge I.e. what can be done
- Reinforce importance of values in compassion in my organization
- Raise this at the next staff forum session
- The role of religious faith in enabling compassion in many staff needs to be valued. This faith dimension can't go unnoticed
- Work through valid management indicators
- Help each other, make sure meetings have outcomes, don't say "not my job"
- Rolling out a finance training programme - it will not be as effective as it needs to be if the ideas/input/rationales/contributions. Future training are not valued
- Meeting with line manger to discuss important problems which need to be resolved - give your ideas, but are totally ignored or put down
- How to improve experience info gathering in our organisation
- Try to practice what I preach
- I am launching a major transformational change plan to improve patient experience. I will ensure we embrace this value and raise this profile in our change primary process
- Feedback to Robin. Conversation with Board Colleague
- Be compassionate to colleagues I work with and read further

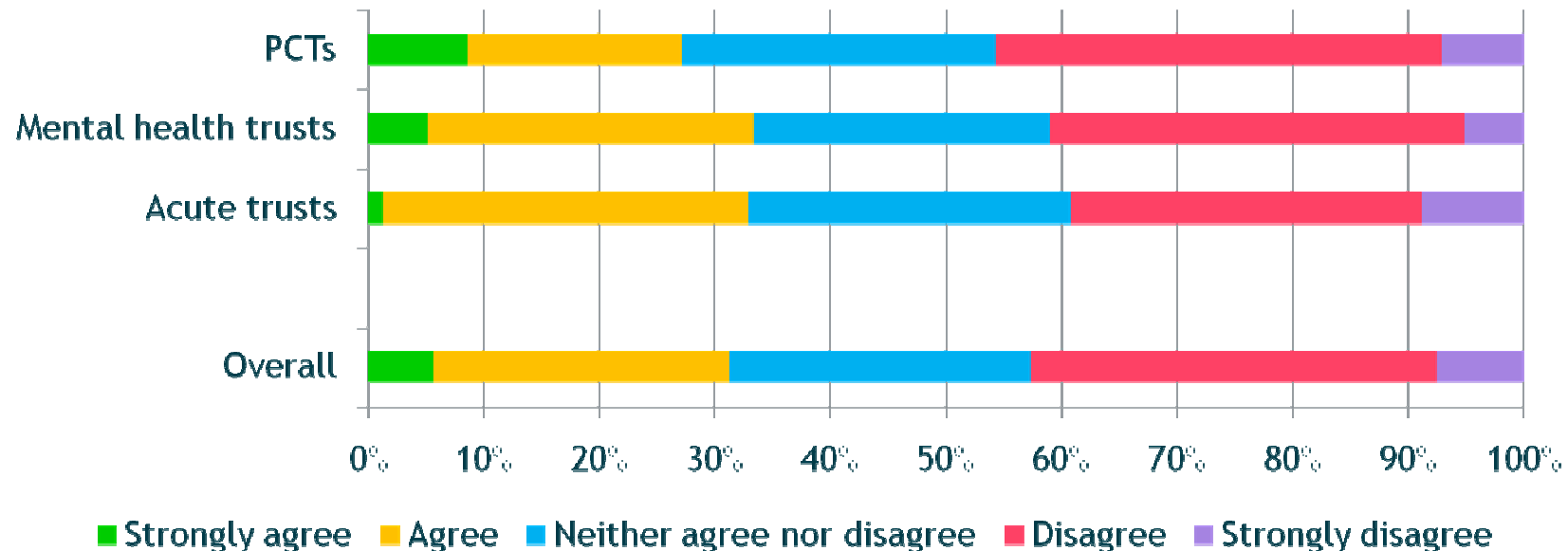
30 What will I do next?

- Continued conversations about this at the trust
- Explore patient experience gathering methods for commissioning
- Share info with colleagues - consider how we could engage my organisation with helping to have the patients voice and needs heard clearly
- Take the learning back to my colleagues at the PCT
- Use the word in discussion and show compassion to staff colleagues
- Continue with our engagement of staff and pts (re:values)
- I'm writing a article about customer service, and this helped
- Practice team
- Carry on going about it, ensuring people have permission to be kind
- Find out about literature search conducted by Cambs university hospital
- Reinforced my desire to have this conversation with my team (estates, hotel services), make space to walk about with my Trust
- Add and our current debates in my organisation of values
- I will look at how we can link our products into values more
- Need to think more about how I can be a compassionate commissioner and my organizational values - seen as a weakness?
- Look for opportunity, to put “compassion” is a value at the centre of a project
- Reflect on how can apply more every day
- Feedback to team to drive trust delivery
- Suggest to staff

Annex - pre-survey results

Opinion is divided on whether the NHS has become less compassionate ...

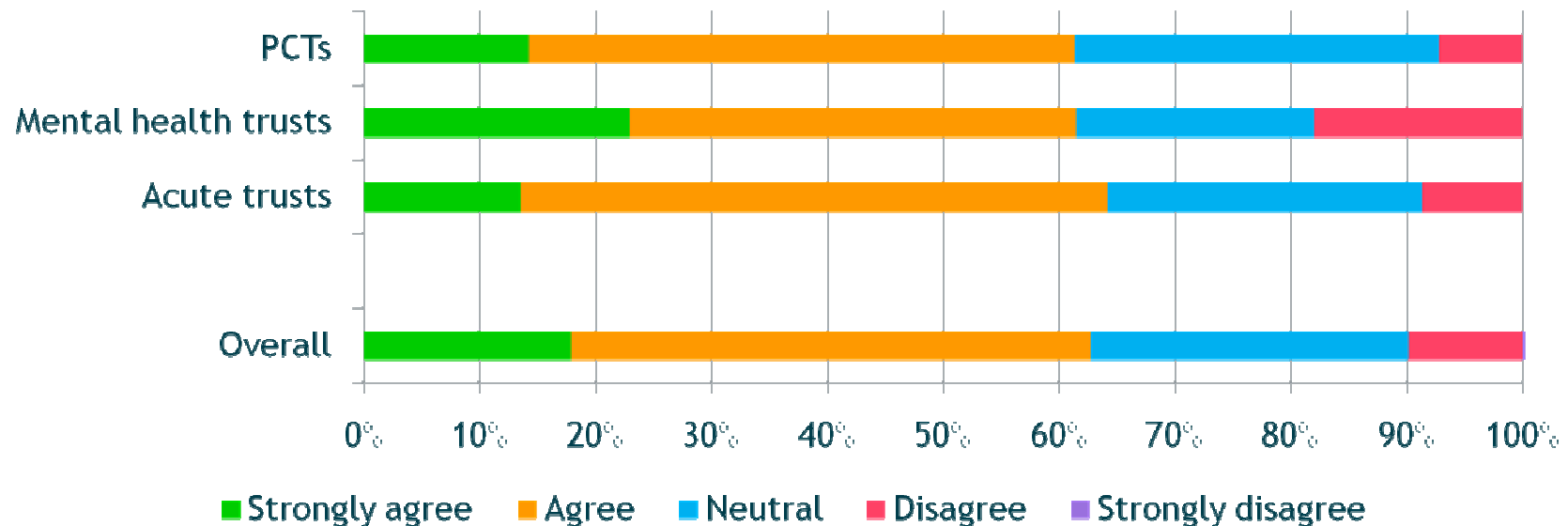
How strongly do you agree with the statement: “The NHS healthcare system has become less compassionate”? (n = 213 overall)



- Relatively few people held the extreme views, but the neutral position was held by only a quarter of respondents
- There were more individuals in **PCTs** than **acute trusts** agreeing strongly with the statement, but none of the major groups analysed (representing 188 of the 213 polled) differed significantly from the average

... but there was greater agreement that NHS leaders should put much more emphasis on compassion

How strongly do you agree with the statement: “NHS leaders should put a far greater emphasis on compassion in their leadership and management?” (n = 213 overall)



- 23% of respondents from **mental health trusts** (nine individuals from 39 respondents) were strongly in favour of greater emphasis on compassion, and fewer were neutral on this issue
- The other two major groups analysed differed little from the average

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