

The Patient's Charter



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RAISING THE STANDARD



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Contents

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Foreword

The rights and standards set out in this document form The Patient's Charter, a central part of the Government's programme to improve and modernise the delivery of the service to the public whilst continuing to reaffirm the fundamental principles of the NHS. The Patient's Charter puts the Government's Citizen's Charter initiative into practice in the NHS.

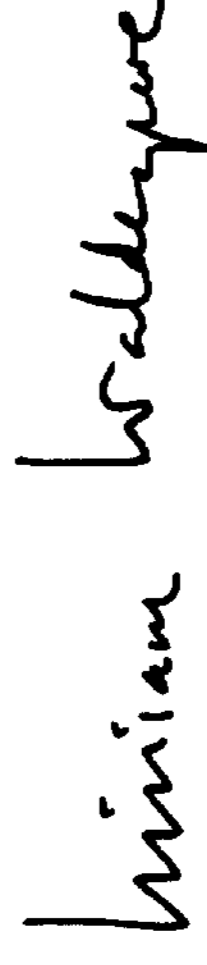
Since it was set up in 1948, the National Health Service has been the envy of the world. Since then, it has grown immensely in capability. Every day, the doctors, nurses and other staff, who are the NHS, save lives and help patients overcome disabling conditions, in ways that would have been impossible forty years ago.

The Government believes that there must be no change to the fundamental principles on which it was founded and on which it has continued ever since, namely that services should be available to *every citizen* on the basis of clinical need, regardless of ability to pay, and that the service should in the future, as in the past, mainly be paid for out of general taxation.

The Government is also firmly committed to improving the Service – *to creating a better National Health Service.*

This means a Service that:

- always puts the patient first, providing services that meet clearly defined national and local standards, in ways responsive to people's views and needs. The Patient's Charter is a central part of achieving this objective by seeking to ensure everywhere the high standards of the best;
- provides services that produce clear, measurable benefits to people's health, with more emphasis than in the past on health promotion and prevention. The consultative document "Health of the Nation", which you can obtain from your local library, suggests explicit targets for improvements in health for the first time in England;
- is highly efficient, representing really good value for money, achieved through better management following the implementation of the proposals in the White Papers "Working for Patients" and "Caring for People";
- respects and values the immense resource of skill and dedication which is to be found amongst those who work for and with the National Health Service.



William Waldegrave
SECRETARY OF STATE FOR HEALTH

How this affects you

The Patient's Charter sets out clearly for the first time your rights to care in the National Health Service and the National and Local Charter Standards which the Government intends to see achieved.

In addition to seven well-established rights, the Government is introducing three important new rights for you from 1 April 1992. These are set out on pages ten and eleven.

The Government is also introducing National Charter Standards in nine key areas. These are not legal rights but major and specific standards which the Government looks to the NHS to achieve, as circumstances and resources allow. They are set out on pages twelve to fifteen.



The Government will be ensuring the collection and publication of information on the achievement of these Standards at national and local level. Where performance is unsatisfactory, the Secretary of State will require the Chief Executive of the NHS to take action to put things right.

The Government would welcome your views on what additional National Charter Standards there should be. Details of where to send suggestions are given on page twenty-three.

National Charter Standards are essential in the nine key areas. The Government believes that other Standards are better set at local level where they can more accurately reflect differing local circumstances. The Government will require health authorities to develop and publish their own Local Charter Standards from 1 April 1992. More information is given on pages sixteen and seventeen.



The Patient's Charter Rights

Seven existing rights

Every citizen has the following established National

Health Service rights:

- to receive health care on the basis of clinical need, regardless of ability to pay;*
- to be registered with a GP;*
- to receive emergency medical care at any time, through your GP or the emergency ambulance service and hospital accident and emergency departments;*



to be referred to a consultant, acceptable to you, when your GP thinks it necessary, and to be referred for a second opinion if you and your GP agree this is desirable;

to be given a clear explanation of any treatment proposed, including any risks and any alternatives, before you decide whether you will agree to the treatment;

to have access to your health records, and to know that those working for the NHS are under a legal duty to keep their contents confidential;

to choose whether or not you wish to take part in medical research or medical student training.



The Patient's Charter Rights

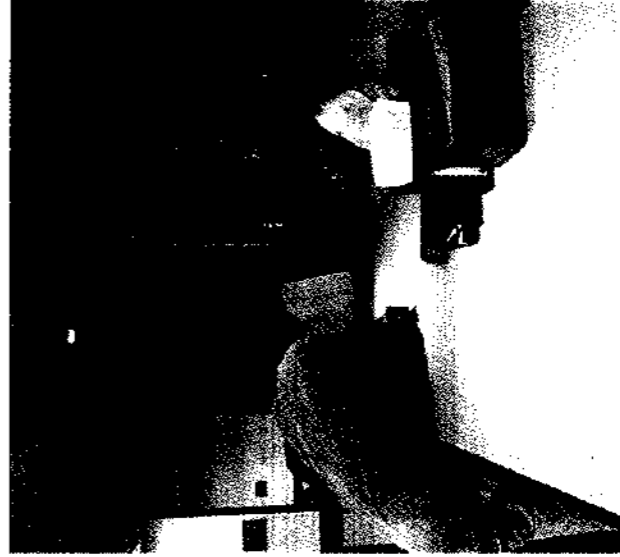
Three new rights from 1 April 1992

From 1 April 1992, the Government will introduce three important new rights:

To be given detailed information on local health services, including quality standards and maximum waiting times. Your district health authority and, in some cases, GP, are now arranging services from hospitals and community services. They must make information about these services and National and Local Charter Standards available to you. You will be able to get this information from your health authority, your GP or your local Community Health Council. Your health authority will make sure that all local NHS hospitals publicise current maximum admission times for each speciality;

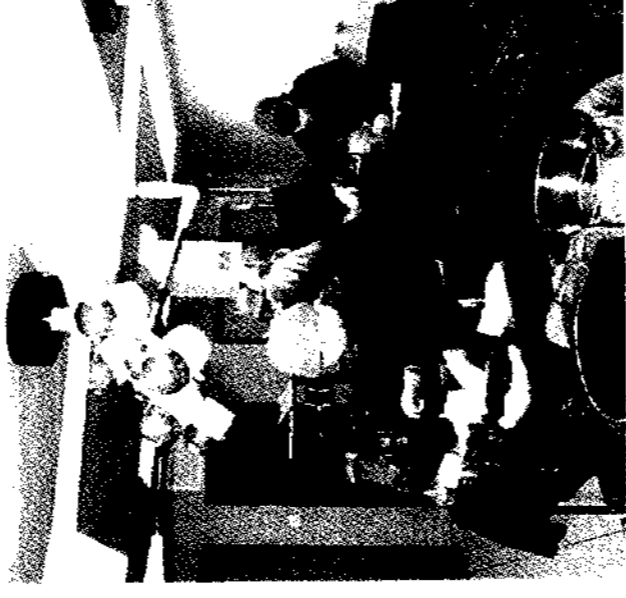
To be guaranteed admission for treatment by a specific date no later than two years from the day when your consultant places you on a waiting list.

The great majority of patients will be admitted well before their guaranteed date. Currently, of patients admitted from waiting lists, half come in within five weeks and 90% are admitted within a year. Exceptionally for some treatments it may be necessary to set a date more than two years away. Your health authority (or GP) will be responsible for ensuring that the guaranteed times are met, if necessary by offering you treatment in an alternative hospital;



To have any complaint about NHS services – whoever provides them – investigated and to receive a full and prompt written reply from the chief executive or general manager. From 1 April 1992, health authorities and NHS hospitals will have to publish details regularly of both the number of complaints received and how long it has taken to deal with them. If you are still unhappy with the way your complaint about the administration of an NHS service has been handled, you have the right to take the matter up with the Health Service Commissioner.

On page nineteen we tell you what you can do if you think you are not being given one of the National Charter Rights.



National Charter Standards

The first nine National Charter Standards

These are the standards of service we are aiming to provide for you in the first nine National Charter Standards.

Respect for privacy, dignity and religious and cultural beliefs. The Charter Standard is that all health services should make provision so that proper personal consideration is shown to you, for example by ensuring that your privacy, dignity and religious and cultural beliefs are respected. Practical arrangements should include meals to suit all dietary requirements, and private rooms for confidential discussions with relatives.



Arrangements to ensure everyone, including people with special needs, can use services. The Charter Standard is that all health authorities should ensure that the services they arrange can be used by everyone, including children and people with special needs such as those with physical and mental disabilities, for example, by ensuring that buildings can be used by people in wheelchairs.

Information to relatives and friends. The Charter Standard is that health authorities should ensure that there are arrangements to inform your relatives and friends about the progress of your treatment subject, of course, to your wishes.



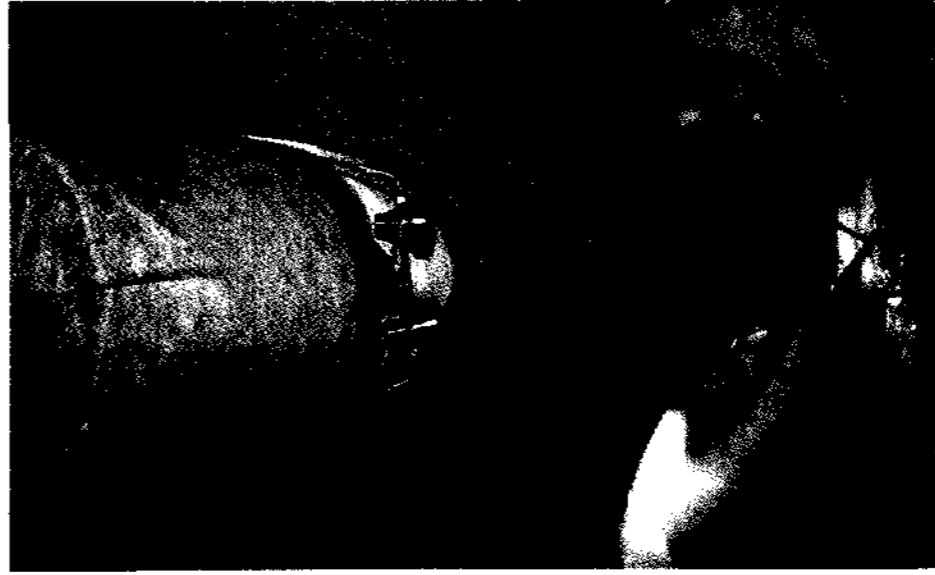
National Charter Standards

Waiting time for an ambulance service. The Charter Standard is that when you call an emergency ambulance it should arrive within fourteen minutes if you live in an urban area, or nineteen minutes if you live in a rural area.

Waiting time for initial assessment in accident and emergency departments. The Charter Standard is that you will be seen immediately and your need for treatment assessed.

Waiting time in outpatient clinics. The Charter Standard is that you will be given a specific appointment time and be seen within thirty minutes of that time.

Cancellation of operations. The Charter Standard is that your operation should not be cancelled on the day you are due to arrive in hospital. However, this could happen because of emergencies or staff sickness. If, exceptionally, your operation has to be postponed twice you will be admitted to hospital within one month of the date of the second cancelled operation.



A named qualified nurse, midwife or health visitor responsible for each patient. The Charter Standard is that you should have a named, qualified nurse, midwife or health visitor who will be responsible for your nursing or midwifery care.

Discharge of patients from hospital. The Charter Standard is that before you are discharged from hospital a decision should be made about any continuing health or social care needs you may have. Your hospital will agree arrangements for meeting these needs with agencies such as community nursing services and local authority social services departments before you are discharged. You and, with your agreement, your carers will be consulted and informed at all stages.



Local Charter Standards

In addition to the National Charter Standards, there are many other aspects of service which are important to you and which your health authority therefore needs to consider.

From 1 April 1992, authorities will increasingly set and publicise clear Local Charter Standards on these matters, including:

- waiting time for first outpatient appointments;
- waiting times in accident and emergency departments, after your need for treatment has been assessed;
- waiting times for taking you home after you have been treated, where your doctor says you have a medical need for NHS transport;



- enabling you and your visitors to find your way around hospitals, through enquiry points and better signposting;

- ensuring that the staff you meet face to face wear name badges.

Your health authority will also publicise the name of the person you should contact if you want more information about the Local Charter Standards they have set.



Tell us what you think

We want to know your views so that we can take them into account as we develop and introduce new Charter Standards.

We know from experience that it is not always easy to get patients' real views. For example:

- some people have told us that they fear a 'come-back'; they worry that if they tell a doctor or hospital their real views they will be labelled as 'awkward';
- people may not feel that it is worth taking the trouble to tell us their views.

We will be encouraging health authorities to continue and expand their use of questionnaires and surveys to find out what you think of the current services and to get your suggestions of how things could be done better.

Performance and progress

Charter Rights. These are guaranteed. If you think that you are being or are likely to be denied one of the National Charter Rights you should write to Duncan Nichol, Chief Executive of the NHS, Department of Health, Richmond House, 79 Whitehall, London SW1A 2NS. Mr Nichol will investigate the matter and if you have been denied a right he will take action to ensure that this is corrected.

National Charter Standards. Your health authority will publish information about performance against the Standards annually, with the name of the person to whom you should write with any comments. Every year the Secretary of State will discuss performance with the Chief Executive, who will take action where this has been unsatisfactory. The Department of Health will publish details of this action.

Local Charter Standards. Your district health authority will publish an annual report of achievement against its local standards, and the name of the person to whom you should write with any comments. In the following year's report, the authority will say what action has been taken where necessary to improve its performance.

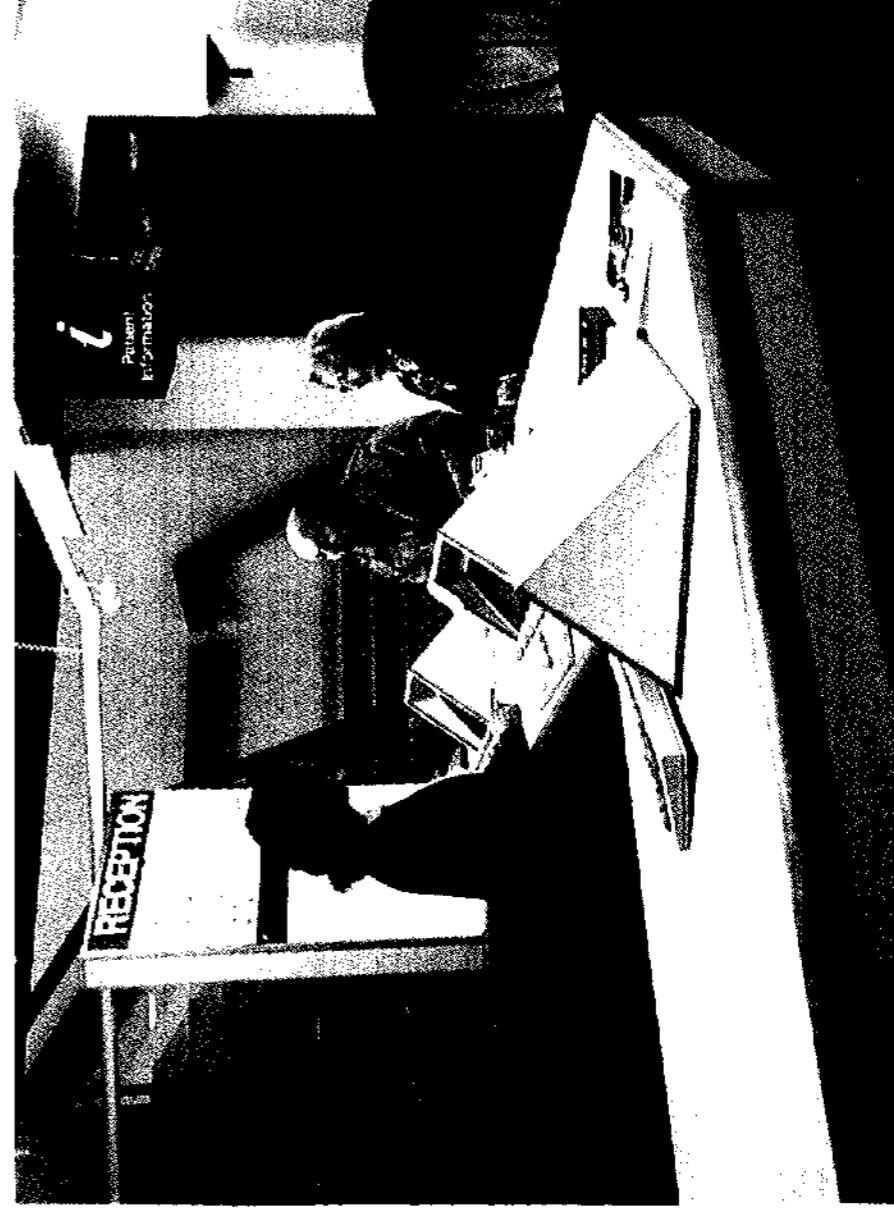


Better information about services

The Government wants you to know what services are available. From 1 April 1992, the Government will require regional and district health authorities to publish information about the services they provide and their performance in relation to Local and National Charter Standards, to help you to make informed choices about care and treatment.

Your health authority must provide information about the specific services it has arranged. In addition, your health authority will set up more general information services to help people to find their way around the NHS and to understand what is available. From 1 April 1992, you will be able to get information about:

- Local Charter Standards;
- the services your health authority has arranged;



- waiting times for outpatient, day case and inpatient treatment by hospital, speciality and individual consultant, set out in a standard way;
- common diseases, conditions and treatments;
- how to complain about NHS services;
- how to maintain and improve your own health.

From 1 April 1993, you will be able to find how successful your health authority has been in relation to the National and Local Charter Standards.

Chartermark

The new rights and standards in this Charter are designed to meet the commitments in the Citizen's Charter. The NHS will play a full part in the Chartermark scheme when it is launched.

How you can help

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Did you know that:

Many appointments are missed by patients without warning staff:
- with around 40 million outpatient appointments each year, this is a problem even if only a small proportion of patients do not let the hospital know if they cannot attend.

Organs such as kidneys are urgently needed:

- between 1978 and 1990 the number of kidney transplants more than doubled. We could do even more if we had more donor organs.

The NHS needs more blood donors:

- on average, hospitals use 6 units of blood a minute;
- this requires 9000 blood donors a day;
- less than 10% of people who could give blood do so.

There is an enormous need for voluntary helpers, for example in hospital shops.

You can help your NHS locally on all these - by keeping appointments, by checking whether volunteers are needed locally, by giving blood (if you want to give blood, you can ring 0800 300 333) and by filling in and always carrying your organ donor card and telling your relatives your wishes (donor cards can be obtained by ringing 0800 444 136).



Summary

On 1 April 1992, the Government will:

- create three important National Health Service rights to add to the seven existing ones;
- introduce the first nine National Charter Standards. Information about performance against the Standards will be published regularly;
- require each health authority to introduce and publish Local Charter Standards. Information about performance will be published regularly.

The Government would welcome suggestions for additional National Charter Standards.

From 1 April 1992, health authorities will publish information about services. This will be updated annually.



Where to send your comments on The Patient's Charter

We would welcome your views on The Patient's Charter and proposals for new standards. Please send your comments or proposals for new National Charter Standards to: John Richardson, Department of Health, Richmond House, 79 Whitehall, London SW1A 2NS.



