Engaging patients in their care

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Ensuring that patients are engaged in their own care is a key theme of current healthcare policy. However, research highlights that in the UK levels of engagement are not as high as in other countries. This article discusses the benefits of engagement and gives practical steps for improving practice.

In 2000 The NHS Plan was launched with a promise that ‘for the first time patients will have a real say in the NHS’ (Department of Health, 2000). A core principle of the document was that services would be shaped around the needs of individual patients, their families and carers. There was recognition that most patients want to play an active role in their own healthcare and the plan included suggestions for:

- Letters of patients’ care being copied to them;
- Patient advocates and advisers;
- Surveys and forums to help services become more patient centred.

The theme of patient involvement has continued in more recent documents such as The National Service Framework for Long-term Conditions (DH, 2005) and Our Health, Our Care, Our Say (DH, 2006). However, despite these policy commitments to patient-centred care, a recent survey by the Picker Institute Europe (2006) found that the UK is not as effective as other countries at patient engagement.

The benefits of engagement

The Wanless (2004) report found that there is a large difference in expected cost of the NHS depending upon how much people become engaged with their health. Evidence shows that when patients engage in managing their care, health services are used more appropriately. This improves cost effectiveness and outcomes (Picker Institute Europe, 2006). Therefore, patient engagement is key in keeping healthcare spending under control.

Two strands underpin this theory: The first is that engaged patients will take more responsibility for their health. They are more likely to adopt lifestyle changes to improve their health such as healthy eating or taking exercise. This will improve the future health of the population, reducing obesity-related conditions, for example. This theme is seen in the recent white paper Our Health, Our Care, Our Say (DH, 2006).

The second is that engaged patients, given the correct information and support, can help themselves when they are ill and have a reduced need for medical intervention. For example, patients with asthma who have a clear self-management plan can monitor their condition and take timely action to prevent their health deteriorating to a level where they need inpatient care.

Also patients involved in decisions about their treatment have higher levels of satisfaction with the service they receive (Picker Institute Europe, 2006).

Engagement in the UK

The Picker report examined data from the four countries of the UK along with data from Australia, Canada, New Zealand, Germany and the US. The study looked at performance in relation to six indicators of patient engagement (Box 1, p22). The results showed:

- Quality of doctor-patient communication for UK patients was more positive than for patients in the US. However, reports were less positive than those from patients in Australia and New Zealand;
- Access to alternative sources of information and advice showed that UK patients reported the lowest rate of access to medical records and next to lowest for email access to a doctor. However, UK patients had the highest rate of telephone helpline use (except in Northern Ireland);
REFERENCES


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PROVISION OF PREVENTIVE CARE AND ADVICE

Provision of preventive care and advice showed that UK patients were less likely to receive opportunistic advice on disease prevention and lifestyle modification. However, UK and US patients reported more reminders for organised preventive care programmes than patients in other countries;

- Informed choice of provider revealed that UK patients were less likely to have had access to information about surgeons and were less satisfied with the choice of surgeons;
- Risk communication and involvement in treatment decisions was an area where few UK patients reported that they were involved and they were less likely to have been given information about medicine side-effects than patients in other countries;
- Support for self-care and self-management found that patients from the UK were less likely to be given clear instructions on what to do than other countries except the US. Also, UK patients are less likely to have a self-management plan and treatment goals than patients from other countries apart from Germany.

The study concludes that UK patients receive less support from health professionals for engagement with their healthcare than patients in other countries. However, it acknowledges that no country excels in promoting patient engagement.

WHY IS ENGAGEMENT POOR?

It has been suggested that the pressure that NHS staff in the UK are working under means that they do not have time to be more active in engaging patients. But when patient engagement is analysed against number of nurses and doctors per capita or funding levels this does not provide an explanation for the difference (Picker Institute Europe, 2006).

Other theories for the lack of support for patient engagement include (Picker Institute Europe, 2006):

- Failure to make this a core part of the curricula in both nursing and medical education;
- A low level of expectation from organisations such as the Healthcare Commission, the General Medical Council and the NMC;
- A lack of government incentives to engage patients. For example, the Quality and Outcomes Framework for general practice currently gives no reward to GPs for promoting patient engagement.

The UK has been concentrating on promoting involvement in terms of planning and service development. While this has provided some successful improvements, it does not contribute to improving interactions between individual patients and clinicians. This is what most patients are concerned with (Picker Institute Europe, 2006).

INCREASING ENGAGEMENT

Patients want advice from health professionals who are good communicators. They expect their views to be taken into account and want to be given reliable information about their condition and treatment, as well as information about helping themselves (Picker Institute Europe, 2006). To ensure greater engagement health professionals may need to adopt a partnership approach. Ewles and Simnett (2003) suggest that working in partnership with patients means:

- Ensuring that there is openness in your relationship with patients so that they are not intimidated;
- Asking for your patient’s opinion and respecting it;
- Telling patients when you have learnt something new from them or their experience;
- Acknowledging the experience and knowledge that patients bring with them and building on this;
- Encouraging patients to share their experience and knowledge.

It is suggested that by adopting a partnership approach, rather than the traditional paternalistic style of practice that undermines people’s confidence in their ability to look after themselves, self-efficacy and patient satisfaction will be improved (Picker Institute Europe, 2006).

BOX 1. INDICATORS AND QUESTIONS
(PICKER INSTITUTE EUROPE, 2006)

Quality of doctor–patient communication

- Time with the doctor
- Doctor’s listening skills
- Clarity of doctor’s explanations

Access to alternative sources of information and advice

- Use of telephone helplines
- Access to medical records
- Email communication with doctor

Provision of preventive care and advice

- Reminders sent for screening and preventive care
- Advice received on weight, diet or exercise
- Enquiry about stress and emotional issues

Informed choice of provider

- Information about doctors
- Availability of choice of doctors
- Ability to choose surgeon for operative procedure

Risk communication and involvement in treatment decisions

- Explanation of medication side-effects
- Patient involvement in medication review
- Patient involvement in treatment decisions

Support for self-care and self-management

- Instructions on what to do and symptoms to watch for
- Clear goals and treatment plan
- Plan for self-managing chronic condition at home