

Macmillan briefing on dignity and respect of cancer patients ahead of the General Election



Briefing for: MPs and Peers

Purpose: To provide a briefing on the importance of dignity and respect of cancer patients and supporting staff

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1. Introduction

Macmillan Cancer Support strongly believes that all cancer patients should have a positive experience of care and be treated with the highest levels of dignity and respect throughout their journey. However, the public inquiry report into the failings of care at Mid Staffordshire NHS Foundation Trust told a story of appalling suffering for many patients and a lack of staff engagement and support. To address these problems, the Francis Inquiry recommended developing a common culture where patients are the priority. It also recognised the need for supported development for healthcare professionals across the NHS.

Dignity of patients must not be denied. Ahead of the General Election, Macmillan is calling on all political parties to ensure:

- All cancer patients are treated with the highest levels of dignity and respect.
- NHS staff are supported to deliver this ambition.

2. Putting patients at the heart of the NHS

The National Cancer Patient Experience Survey (CPES), run by NHS England, provides valuable information on which hospital trusts' cancer patients are receiving a positive experience of care, and where further progress is required. The CPES gives cancer patients a meaningful voice and is a vital tool for holding the NHS bodies to account.

However, for many people, experiences of cancer care are not positive. The results of the 2013 CPES showed that urgent improvements are needed in care planning, provision of information, coordinated care, financial support and relational careⁱ. Furthermore, there is stark variation in patient experience across the country and inequalities in relation to age, gender and ethnicityⁱⁱ.

Simon from Dorset: *"If I had had the courage to speak up and voice my fears and concerns when I was facing treatment for prostate cancer, my partner and I would have been far better prepared emotionally to face what was to come. As it was, I had to learn the answers the hard way, as I went along."*

Macmillan's research shows that across the NHS patient experience is still not regarded as having equal importance as clinical effectiveness and patient safety. Experts we spoke to told us that this is because patient experience is not meaningfully prioritised at all levels of the system. For example, when hospital boards raised patient experience as an agenda item, only 5% of these items had further actions attached to them. Without hospital boards leading the way and emphasising the importance of patient experience, frontline staff are less likely to see it as a priorityⁱⁱⁱ.

3. Supporting NHS staff to deliver the best experience of care

A letter from the Cancer Voices Network to Jeremy Hunt: *'The Francis Report showed that things can go wrong at all levels of NHS organisations. The right tone at leadership level is key to promoting positive cultural change and ensuring junior professionals do not become disillusioned by a culture which only rewards cure, not care.'*

Since the publication of the Francis Inquiry report, the Government has stated that well-treated staff treat patients well and that staff wellbeing is the foundation on which compassionate care must be built^{iv}. Macmillan's research on this issue also shows that the treatment of hospital staff is intrinsically linked to patient experience. Happy staff means supported patients.

Yet, the 2013 NHS Staff Survey shows that a significant proportion of staff are having a poor experience. For example, only 41% of staff were satisfied with the extent to which they felt their hospital values their work^v. Also where staff suffer high levels of discrimination or harassment, cancer patients are up to 18 times more likely to receive poor care^{vi}.

As a first step to address this, there must be national leadership for improving staff experience and a strong recognition at the highest level that the evidence clearly supports the link between patient and staff experience. In addition, all employers must be meaningfully measured on the experience of their staff and held to account for improving it. Furthermore, all staff – both clinical and non-clinical – should have the time and support to access regular development opportunities on providing a good experience and to reflect on the emotional impact of caring.

As well as incentivising change through frameworks and measures, it is equally important to rollout solutions that work on the ground and share best practice. For example, Macmillan has developed and supported measures to improve patient and staff experience including:

- **Macmillan Values Based Standard®**: eight practical behaviours designed to improve the relationship between staff and patients to be implemented across the NHS.
- **Schwartz Center Rounds®^{vii}**: regular sessions which provide professionals from all disciplines the opportunity to discuss challenging instances of patient care.

Mark, a senior nurse from Hertfordshire said: *'I've always loved coming into work. I love my job. I love that every day that I come into work, even though I'm doing the same job of administering chemotherapy, it's different patients we're treating every day. They're all different – we treat them all as individuals.'*

4. How can MPs and peers support improvements in cancer patient experience?

This briefing shows much more needs to be done to ensure all cancer patients are treated with the highest levels of dignity and respect. It also highlights that national leadership is needed to support NHS staff to deliver the best possible care to cancer patients.

Macmillan is calling on political parties to commit to a three-point action plan that includes the following:

- I. Publishing a **national benchmark** of cancer patient experience in hospitals trusts: comparing the experiences of cancer patients in different hospitals to help address unacceptable variations of care.
- II. Requiring trusts to publish their **action plans** to address weaknesses in cancer patient experience and staff engagement, and report annually on their progress: the NHS should also hold trusts to account on their delivery of these plans, including the implementation of practical solutions such as the Macmillan Values Based Standard®.
- III. Develop a set of commitments for action to support all NHS staff to deliver better care: this could be done through the 6 Cs programme and should include providing access to **training and development** to deliver care with dignity and respect.

We would be extremely grateful if you could:

- Write to the leadership of your party responsible for policy development raising Macmillan's calls ahead of the General Election.
- Ask Parliamentary Questions on the issues mentioned in this briefing. Naturally, we can offer suggested wording.

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ⁱ NHS England. *Cancer Patient Experience Survey 2013: national report*. 2013.

ⁱⁱ Macmillan Cancer Support. *Cancer Patient Experience Survey: Insight Report and League Table 2012–13*. 2013

ⁱⁱⁱ Macmillan Cancer Support. *Improving care for people with cancer*. 2013

^{iv} Department of Health. *Hard Truths. The Journey to Putting Patients First*. Volume one. 2013. Page 20 and 36.

^v NHS. *Briefing Note: Issues Highlighted by the 2013 NHS Staff Survey in England*. 2013

^{vi} The relationship between cancer patient experience and staff survey results, Picker Institute Europe (30 July 2013). Picker Institute Europe was commissioned by Macmillan Cancer Support to investigate the relationship between the results for the Cancer Patient Experience Survey (CPES) and the NHS Staff Survey. The data were from the 2011 CPES and the 2011 NHS Staff Survey. See here for the full report.

<http://www.macmillan.org.uk/Documents/AboutUs/Research/Researchandevaluationreports/ReportCPES-StaffexperienceP2709v4.pdf>

^{vii} Developed and provided by the Point of Care Foundation.