



National Health Service in Scotland  
Management Executive

St. Andrew's House  
Edinburgh EH1 3DG  
30 November 1995

Dear Colleague

**COMMUNICATING WITH PATIENTS: AUDIT STUDY**

**Summary**

This MEL commends to Health Boards and NHS Trusts the findings of a report by the Scottish Office Audit Unit (SOAU) on Communicating with Patients. The report, covering general information, clinical communication, and feedback from patients through surveys and complaints, was based on a study of 8 acute hospitals but its recommendations are applicable throughout the NHS.

**Action**

NHS Trust Chief Executives should review their practice in the areas covered by the report, making use of the action checklist it contains. Health Board General Managers should ensure that quality clauses in contracts with providers cover the issues dealt with in the report.

**Other information**

Effective communication between the NHS and those who use its services is one of the key commitments in the Patient's Charter. The report by SOAU, the findings of which are summarised in the Annex, concludes that progress has been made but that there is scope for further improvement.

As work on this report was completed prior to transfer of responsibility for NHS audit to the Accounts Commission, it has been agreed that it should be issued in the name of SOAU. Subsequent reports of this nature will be issued by the Accounts Commission itself.

Yours sincerely

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Head of Health Gain

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## COMMUNICATING WITH PATIENTS

The Scottish Office Audit Unit Study looked at the methods used at 8 acute hospitals to communicate with their patients. Three main aspects were examined:

- general information about the hospital provided to patients and visitors through booklets and signposting;
- the use of methods such as written information and specialist nursing staff to improve the quality of clinical communication about diagnosis and treatments for 4 representative conditions (breast cancer, stroke, benign prostatic hyperplasia (BPH), rheumatoid arthritis);
- the extent to which hospitals obtain feedback from patients on the services provided through surveys and through complaints systems.

The report confirms that the importance of these topics is widely recognised and that standards are improving, particularly in the content of general hospital booklets following the creation of NHS Trusts. However, the quality of clinical communication is more variable with, for example, significant scope for improving the use of written information to support consultations. Similarly, there is evidence that the scope and use of patient satisfaction surveys varies greatly.

The report identifies a wide range of examples of good practice, such as the use of patient's representatives, the introduction of breast care nurses, and the development of integrated care pathways. With the help of an action checklist, it aims to disseminate to a wider audience the experience of these hospitals in tackling issues of concern to all parts of the NHS.

The report's recommendations on complaints should be read in conjunction with the Interim Guidance on Implementation of New NHS Complaints Procedures which was issued earlier this month under cover of MEL(1995)76.