

# Patient experience in adult NHS services overview

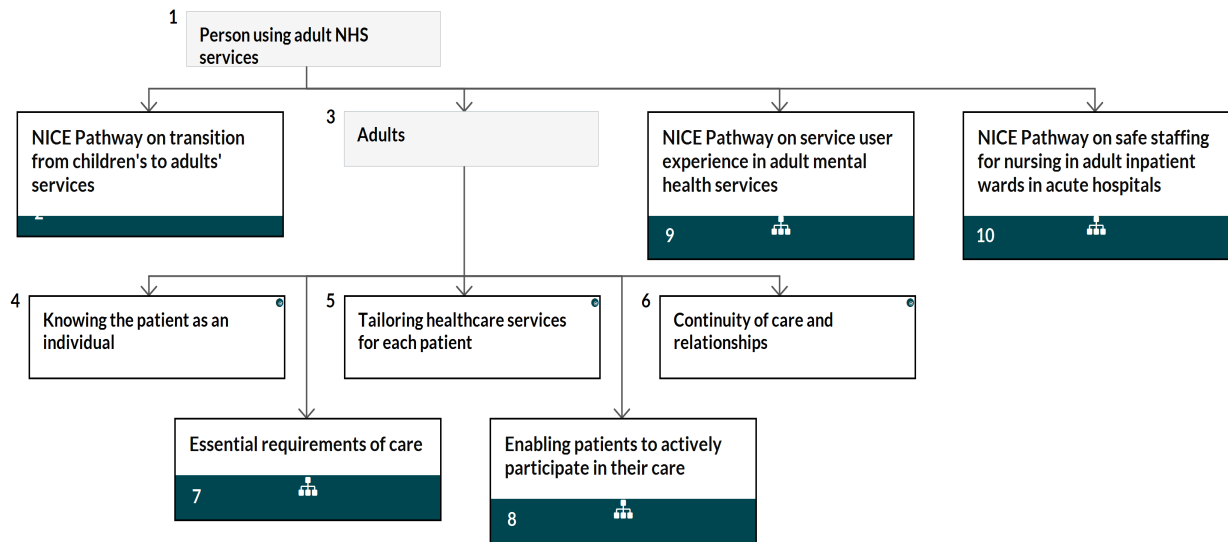
NICE Pathways bring together everything NICE says on a topic in an interactive flowchart. NICE Pathways are interactive and designed to be used online.

They are updated regularly as new NICE guidance is published. To view the latest version of this NICE Pathway see:

<http://pathways.nice.org.uk/pathways/patient-experience-in-adult-nhs-services>

NICE Pathway last updated: 17 June 2021

This document contains a single flowchart and uses numbering to link the boxes to the associated recommendations.



## 1 Person using adult NHS services

No additional information

## 2 NICE Pathway on transition from children's to adults' services

[See Transition from children's to adults' services](#)

## 3 Adults

No additional information

## 4 Knowing the patient as an individual

Develop an understanding of the patient as an individual, including how the condition affects the person, and how the person's circumstances and experiences affect their condition and treatment.

Ensure that factors such as physical or learning disabilities, sight, speech or hearing problems and difficulties with reading, understanding or speaking English are addressed so that the patient is able to participate as fully as possible in consultations and care.

Ask the patient about and take into account any factors, such as their domestic, social and work situation and their previous experience of healthcare, that may:

- impact on their health condition and/or
- affect their ability or willingness to engage with healthcare services and/or
- affect their ability to manage their own care and make decisions about self-management and lifestyle choices.

Listen to and address any health beliefs, concerns and preferences that the patient has, and be aware that these affect how and whether they engage with treatment. Respect their views and offer support if needed to help them engage effectively with healthcare services and participate in self-management as appropriate.

Avoid making assumptions about the patient based on their appearance or other personal characteristics.

Take into account the requirements of the Equality Act 2010 and make sure services are equally accessible to, and supportive of, all people using adult NHS services.

If appropriate, discuss with the patient their need for psychological, social, spiritual and/or financial support. Offer support and information to the patient and/or direct them to sources of support and information. Review their circumstances and need for support regularly.

## Quality standards

The following quality statements are relevant to this part of the interactive flowchart.

4. Individualised care
6. Decision making

## 5 Tailoring healthcare services for each patient

### An individualised approach to services

Adopt an individualised approach to healthcare services that is tailored to the patient's needs and circumstances, taking into account their ability to access services, personal preferences and coexisting conditions. Review the patient's needs and circumstances regularly.

Inform the patient about healthcare services and social services (for example, smoking cessation services) that are available locally and nationally. Encourage and support them to access services according to their individual needs and preferences.

Give the patient information about relevant treatment options and services that they are entitled to, even if these are not provided locally.

### Patient views and preferences

Hold discussions in a way that encourages the patient to express their personal needs and preferences for care, treatment, management and self-management. Allow adequate time so that discussions do not feel rushed.

Review with the patient at intervals agreed with them:

- their knowledge, understanding and concerns about their condition and treatments
- their view of their need for treatment.

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Accept that the patient may have different views from healthcare professionals about the balance of risks, benefits and consequences of treatments.

Accept that the patient has the right to decide not to have a treatment, even if you do not agree with their decision, as long as they have the capacity to make an informed decision and have been given and understand the information needed to do this. (For more information about capacity, see [consent and capacity](#).)

Respect and support the patient in their choice of treatment, or if they decide to decline treatment.

Ensure that the patient knows that they can ask for a second opinion from a different healthcare professional, and if necessary how they would go about this.

### **Involvement of family members and carers**

Clarify with the patient at the first point of contact whether and how they would like their partner, family members and/or carers to be involved in key decisions about the management of their condition. Review this regularly. If the patient agrees, share information with their partner, family members and/or carers.

If the patient cannot indicate their agreement to share information, ensure that family members and/or carers are kept involved and appropriately informed, but be mindful of any potentially sensitive issues and the duty of confidentiality.

### **Feedback and complaints**

Encourage the patient to give feedback about their care. Respond to any feedback given.

If necessary, provide patients with information about complaints procedures and help them to access these.

### **Quality standards**

The following quality statements are relevant to this part of the interactive flowchart.

4. Individualised care
5. Preferences for sharing information
6. Decision making

## 6 Continuity of care and relationships

Assess each patient's requirement for continuity of care and how that requirement will be met. This may involve the patient seeing the same healthcare professional throughout a single episode of care, or ensuring continuity within a healthcare team.

For patients who use a number of different services (for example, services in both primary and secondary care, or attending different clinics in a hospital), ensure effective coordination and prioritisation of care to minimise the impact on the patient.

Ensure clear and timely exchange of patient information:

- between healthcare professionals (particularly at the point of any transitions in care)
- between healthcare and social care professionals in line with the Health and Social Care Safety and Quality Act 2015.

See [the NICE Pathway on transition between inpatient hospital settings and community or care home settings for adults with social care needs](#).

All healthcare professionals directly involved in a patient's care should introduce themselves to the patient.

Inform the patient about:

- who is responsible for their clinical care and treatment
- the roles and responsibilities of the different members of the healthcare team
- the communication about their care that takes place between members of the healthcare team.

Give the patient (and their family members and/or carers if appropriate) information about what to do and who to contact in different situations, such as 'out of hours' or in an emergency.

### Quality standards

The following quality statements are relevant to this part of the interactive flowchart.

2. Contacts for ongoing care
3. Information exchange

**7 Essential requirements of care**

See [Patient experience in adult NHS services / Patient experience in adult NHS services: essential requirements of care](#)

**8 Enabling patients to actively participate in their care**

See [Patient experience in adult NHS services / Patient experience in adult NHS services: enabling patients to actively participate in their care](#)

**9 NICE Pathway on service user experience in adult mental health services**

See [Service user experience in adult mental health services](#)

**10 NICE Pathway on safe staffing for nursing in adult inpatient wards in acute hospitals**

See [Safe staffing for nursing in adult inpatient wards in acute hospitals](#)

## Glossary

### Equality Act 2010

(replaces all previous anti-discrimination legislation, and includes a public sector equality duty requiring public bodies to have due regard to the need to eliminate discrimination and to advance equality of opportunity and foster good relations between people who share certain protected characteristics and those who do not (the protected characteristics are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation); the Act provides an important legal framework which should improve the experience of all patients using NHS services)

### Sources

[Patient experience in adult NHS services: improving the experience of care for people using adult NHS services](#) (2012 updated 2021) NICE guideline CG138

## Your responsibility

### Guidelines

The recommendations in this guideline represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, professionals and practitioners are expected to take this guideline fully into account, alongside the individual needs, preferences and values of their patients or the people using their service. It is not mandatory to apply the recommendations, and the guideline does not override the responsibility to make decisions appropriate to the circumstances of the individual, in consultation with them and their families and carers or guardian.

Local commissioners and providers of healthcare have a responsibility to enable the guideline to be applied when individual professionals and people using services wish to use it. They should do so in the context of local and national priorities for funding and developing services, and in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities. Nothing in this guideline should be interpreted in a way that would be inconsistent with complying with those duties.



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Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

### **Technology appraisals**

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, health professionals are expected to take these recommendations fully into account, alongside the individual needs, preferences and values of their patients. The application of the recommendations in this interactive flowchart is at the discretion of health professionals and their individual patients and do not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian.

Commissioners and/or providers have a responsibility to provide the funding required to enable the recommendations to be applied when individual health professionals and their patients wish to use it, in accordance with the NHS Constitution. They should do so in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

### **Medical technologies guidance, diagnostics guidance and interventional procedures guidance**

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, healthcare professionals are expected to take these recommendations fully into account. However, the interactive flowchart does not override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

Commissioners and/or providers have a responsibility to implement the recommendations, in

their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations. Nothing in this interactive flowchart should be interpreted in a way that would be inconsistent with compliance with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.