Respecting Patient Privacy and Dignity in NSW Health

Eight ways to make a difference: for NSW Health Employees
NSW Health is committed to ensuring that the privacy and dignity of patients is respected at all times during their health care experience.

This booklet is a guide for all NSW Health employees, as respecting patient privacy and dignity is “everyone’s responsibility”. Each of us play our part in this and must work together to provide patients and carers with what matters the most.

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Director-General  
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### The NSW Patient Survey

In order to deliver better patient and carer experiences, NSW Health has invested in learning from real patient stories.

Over 700 in-depth interviews have already been conducted with patients and carers, and a NSW Health Annual Patient Survey is carried out with nearly 80,000 patients responding each year. This makes it one of the largest patient experience data collection programs in the world.

It is important to highlight that 89.2% of patients said their hospital experiences were positive. However, issues relating to privacy and dignity were consistently raised by patients and their carers. In particular, the issue of mixed gender wards were a concern to patients.

In light of this, and in accordance with the Garling Inquiry Recommendation 124, we have set ourselves the target of ensuring patients that are staying overnight in NSW public hospitals will be in a gender specific bed, where possible, within 24 hours of admittance.
Eight ways to make a difference

In order to deliver greater privacy and dignity to our patients, we have identified eight simple steps:

1. Make patients and carers welcome
2. Communicate frequently with patients and carers
3. Protect patient privacy during consultation and treatment
4. Respect the needs of dying patients and their carers
5. Respect culture and beliefs
7. Avoid mixed gender accommodation
8. Provide single sex bathrooms

“The policy which authorises, and the practice which gives effect to, using inpatient wards (except Intensive Care Units, High Dependency Units and Emergency Departments) to house both men and women in the same room, or separate ward space ought to cease forthwith”.

Garling Inquiry - Recommendation 124
Eight ways to make a difference

The most positive aspect of my hospital experience was the support I received... I felt very welcomed and nothing was a problem.

1 Make patients and carers welcome

A simple welcome to a patient can do a lot to make them feel comfortable and relaxed.

- Always introduce yourself – wear a badge with your name and profession
- Acknowledge the patient by name and describe your role in their care
- Provide verbal information and access to written material on the ward or unit about patients’ rights and responsibilities
- Clearly display visiting times for carers and visitors
Communicate frequently with patients and carers

Patients and carers have busy lives just like you. They want to know an expected date for discharge, even if it does change. Talk with your patients during the ward rounds, and handovers. Don’t just talk about them or at them.

- Find out what patients expect and involve the patient and carer in the round and clinical handover.
- When bedside clinical handover is conducted, please remember to discuss sensitive information away from the bedside.
- Always ask if they have any questions or concerns and discuss ways to meet their needs.
- Explain care and treatment using everyday language.

“I really liked the way the staff showed you the test results every time before treatment, it gives you an opportunity to ask questions. The first nurse that gave me treatment put me at ease immediately... I felt like I was going to be ok.”
When treating or talking to patients remember their need of, and right to, privacy. If an office or empty room is available, try using this for private conversations with patients and carers. Often a hallway or curtained bed space just isn’t private enough.

- What we see everyday can be confronting for others
- Respect and provide patients and carers with privacy at all times
- If a patients’ bedside curtain or door is closed, please ask the patient or staff attending the patient if it is OK to enter.

For some patients catheter bags can be very embarrassing. Consider ways that you can manage them better to maintain the dignity of the patient.

The doctor was clear and to the point, also caring and gentle to the touch... privacy was no problem... thank you for such a good hospital, that made me feel comfortable and at ease during my treatment.
Respect the needs of dying patients, the critically ill and their carers

Remember that dying patients and the critically ill have very special needs. The care of a dying patient and the critically ill is an extremely intimate and private event occurring at a time when a person is at their most vulnerable, and deserves to be treated with the utmost respect.

- Dying patients have priority for single rooms. If this is not able to be provided due to the clinical needs of other patients, please consider other alternatives.

- Keep environmental noise around the dying patient and the critically ill to a minimum.

- Talk to support staff (domestic staff, food service staff) so they know whether or not to enter the room.

- Cultural, religious or faith tradition perspectives on death and dying are available through: Aboriginal Liaison Officers, Multicultural Health Services, Accredited Hospital Chaplains, etc.

“"It took four days for my mother to pass away... at every level the care from the nursing staff was phenomenal... they have a sense of humour and respect... they made it that much easier""
Respect culture and beliefs

Do you know the cultural background of your patient? Do you know who is the family spokesperson? Do you know the religious or faith tradition of your patient? What are their dietary requirements?

Try to ascertain any belief or cultural issues relevant to the intended treatment plan. Use interpreters to explain and involve the carers.

- Talk to your patients or their carers about any specific cultural, religious or faith tradition requirements

- Consult available experts: your local Interpreter Service, Multicultural Health Service, Aboriginal Liaison Officers and Accredited Hospital Chaplains are all there to provide information and advice on how to respect culture and faith traditions

- Let patients and carers know about interpreters, chaplains, prayer rooms etc available in the facility

The nurses really understood that I could not share a room with males because of my faith... it was very refreshing not to have to argue the point.
Manage noise for patient comfort

It’s up to all of us to help control the noise. Sound travels in hospital hallways and rooms with linoleum flooring. Please consider this when holding conversations.

Disruptive patients, carers and visitors need to be managed early and asked to observe their responsibility to others, or to leave.

- Actively but courteously manage noise made by patients, carers and visitors for the comfort of others
- Keep voices low at night and avoid unnecessary conversation
- Personal conversations should be carried out away from patients’ earshot
  - Be conscious of the content of corridor conversations if they can’t be avoided.

“I am ever so grateful to the lovely nurse who looked after me during the night on the heart ward... he made sure that everything was quiet so we could all sleep.”
Avoid mixed gender accommodation

- Any patient staying overnight or more will be in a same gender room or ward bay, where possible, within 24hrs

- Let patients know if a same gender room or ward bay cannot be immediately provided and make every effort to rectify the situation as soon as possible

- Inform them when a same gender room or ward bay will be available

Avoid moving patients between 9.30pm and 8am. Nobody likes to be woken up and relocated. Inform patients that if empty beds are in their room that people may be admitted overnight.

If you’ve tried everything in your power to provide a same gender room or ward bay and it still can’t be provided, you **MUST** ensure the patients’ privacy is maintained.

“I had been in a mixed male and female room, but the nurses had asked if it was a problem for me. I was a bit worried that I might disturb them with my snoring! A couple of hours in, the nurses had moved me to a 4 bed all male room... it was terrific how quickly everything happened.”
Provide same gender bathrooms

- Make every effort to provide patients with access to same gender bathrooms, and every effort to ensure they don’t have to walk through opposite sex areas to reach their own bathrooms
  - Children and Adolescent patients should not have to walk through adult units to reach their own facilities and vise versa

- Make sure bathrooms are clean, and cleaned regularly and hand hygiene products are available

- Ensure bathrooms are clearly marked, using internationally recognisable symbols

Please remember to check the bathrooms regularly eg. at the beginning and end of your shifts. If you wouldn’t use it, please don’t let your patients use it either. Please do not ‘turn a blind eye’ to unacceptable situations. Remember it’s ‘everyone’s responsibility’.

I was so glad when I was in hospital that I was in a room with 3 other ladies…I don’t understand why you would need to share a room and bathroom with male patients when you are sick...you lose your self-respect and dignity