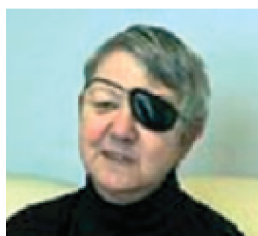


1.3 What it feels like to be a hospital patient

Here are two real older patients talking about their stay in hospital. They tell us what it feels like to lose their independence, and the difference staff attitudes can make to their sense of dignity.



If you want to watch these clips you can visit the online resource. There is also a link there which will take you to lots more patients.



1.3.1 Christine

Christine is 68 and used to be a financial journalist before she retired. She loves music, and uses her electric scooter to attend musical events regularly.

Christine cannot use her left eye, arm or leg. When she fractured her wrist on the right side of her body (the side that has movement) it meant that Christine temporarily lost her ability to take care of herself. She had to go into hospital for two months until her left wrist healed.

Christine said this about being a patient:

"The main thing about is, it is just so humiliating not being able to do anything for yourself. I found it one of the most humiliating times of my life, mostly because my underlying condition, when it came on so suddenly, it left me totally paralysed down one side. But at least one half of me was functioning. But when I broke my only good wrist then nothing of me was functioning. It was disgusting, but they were very kind to me in the [city] hospital, very kind. So...

So it must have affected you emotionally not to be able to do those things for yourself?

Oh terribly.

Because it seems to me like you are quite an independent person.

Yes, that was, that is what I said when I said it was so humiliating. That really did affect me very badly.

When you say that the staff at the hospital were kind can you elaborate a little bit more?

Well what I meant about kind, was kind and practical. Although I had to have everything done for me nobody there made me feel that I was any less a person because

of this. Even when they were having to wipe my bottom and bath me. I did not, was never made to feel that I was anything but a real person. So I was impressed with that. Very impressed with it.

And did they seem to have the time for you...

Yes, yes I felt that they really did.

OK, so they were not...

I mean everybody was very busy but it did not feel as if they could not do things because they were so busy.



- How did Christine feel about being dependent?
- What was important to her about the care she received?
- Christine says: "Nobody there made me feel that I was any less a person, even when they had to wipe my bottom and bath me. I did not, was never made to feel that I was anything but a real person" How can you achieve that?
- Christine notes how busy the staff were, but praises them for not making her feel they could not do things because they were so busy. What can you do to make sure patients know they can approach you and ask for help?



KEY MESSAGE

The way you carry out practical tasks can put people at ease, and makes a real difference to patients and how they feel about being cared for.



1.3.2 68 year old man

This 68 year-old man is married and has 3 children. He was admitted to intensive care because of pancreatitis and septicaemia. After 2 weeks he was moved to a High

Dependency Unit, followed by 6 weeks in a general ward, and then 2 weeks in a rehabilitation hospital.

This is what this man said about his experience as a hospital patient:

"But I've got say, 'Beware' some of you medical staff, that you can so easily give the wrong impression. You can so easily give the impression you'll be glad when your shift finishes. Or that you're looking forward to your lunch break or your tea break, and you'll come back to see to your patient afterwards." Now that is scary. And it was scary early in my stay on the general ward when I was still dependent on being hoisted both out of and into bed. And if you don't get the timing right, as a patient, you find yourself literally stranded.

And the more tired I became, the smaller became my comfort zone. And my comfort zone certainly was not the chair at the side of my bed. That was a high-risk area to be in. I felt so vulnerable and threatened. Visiting time had finished. It was approaching the time for outgoing day staff and incoming night staff. And no matter how I pleaded, this was experienced on two occasions, I didn't get put in, back into bed until the evening shift had come on, when I had spent twelve hours in the chair at the side of my bed.

And on some occasions that occurred when it was not possible for the physios to get to me. So I had been chair-bound for twelve hours. And that is very, very frightening. Nobody there to give you reassurance. Your family has gone, those who were sort of giving positive support. And you realise that, you might, I realised that I didn't like necessarily all the nursing staff. There were some I really adore because I saw that the quality and the love and care shining from them. But I was ultra-dependent even on the people that I didn't like or took an instant dislike to. Some of which couldn't be substantiated. But that was feeling, and feelings are difficult to handle. And I realised I had to speak in a most genteel way, almost at times in a grovelling way, to get the attention of staff who would not normally show me the care that I felt that I needed."



- What did this man say about staff looking forward to going on breaks?
- How did it make this man feel to be left in his chair?
- The man mentions "adoring" some staff, and disliking others. Why do you think he prefers some staff to others? Do you feel that way about some patients?
- This man says he felt like he had to "plead", to behave "in a grovelling way" towards some staff to get what he needed. Do you think patients on your ward ever feel like that?
- What must it be like to rely on someone you don't like very much?

! KEY MESSAGE

You can't help liking some patients better than others. But patients rely on us and we need to be approachable so they don't feel they are a burden to you.

