



Why compassionate care is better for both patients and health professionals

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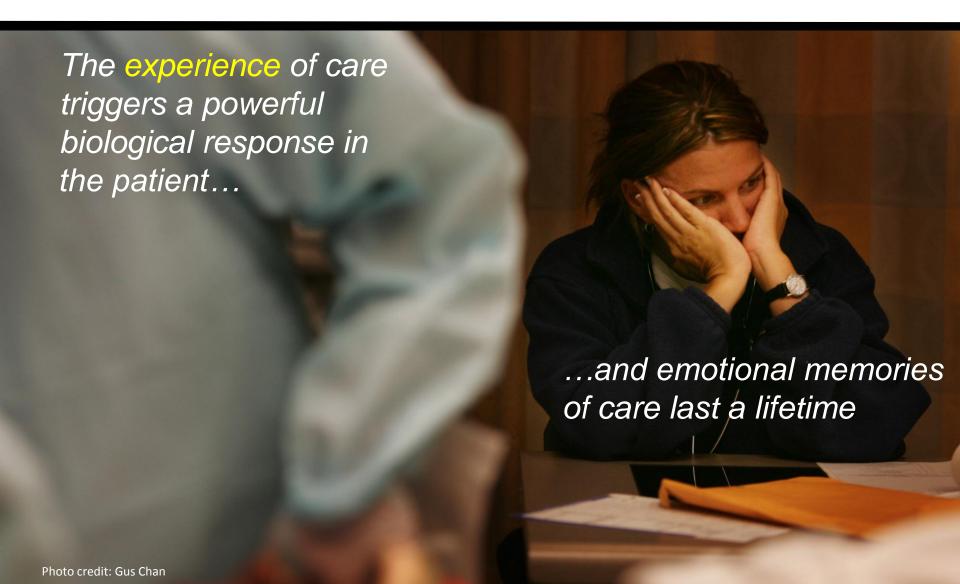


















Does NHS staff wellbeing affect patient experience of care?

It may be reasonable to presume that patients receive better care from staff who feel happier in their work. However little is known about the strength or possible impact of associations between staff wellbeing and patient outcomes including their experiences of the care provided. Previous research has tended to focus on single aspects or one staff group [1,2], or have looked at associations at the whole hospital level (for example using the national staff and patient surveys, and hospital level outcomes [3,4]. Researchers in the NNRU have completed a study within the English NHS exploring the links between patients' experiences of health care and staff experiences at work such as staff motivation and wellbeing at work [5,6]. Staff and patient views were captured at the team/unit level – where possible matching staff to the individual patients they cared for to test associations between staff and patient experience [7].



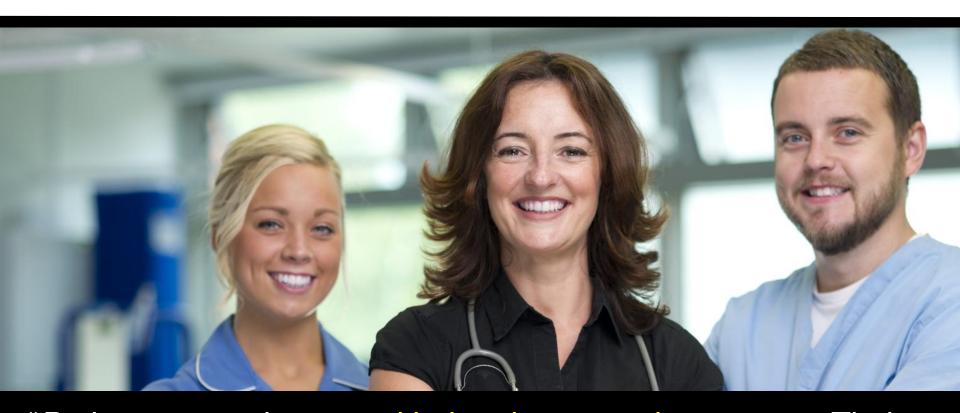
200 hours of direct care observation

Interviews with 100 patients, 86 staff, 55 managers

Surveys of 500 patients, 300 staff



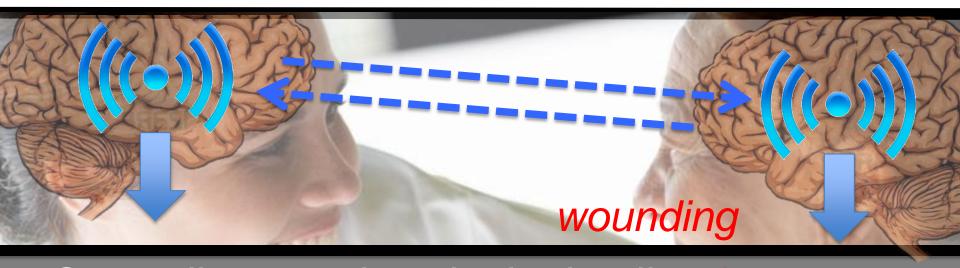




"Patients wanted prompt, kind and compassionate care. Their views of the relational care they received informed their judgement of whether the care was generally 'good' or 'bad', and whether individual staff were 'good' or 'bad' at their job."





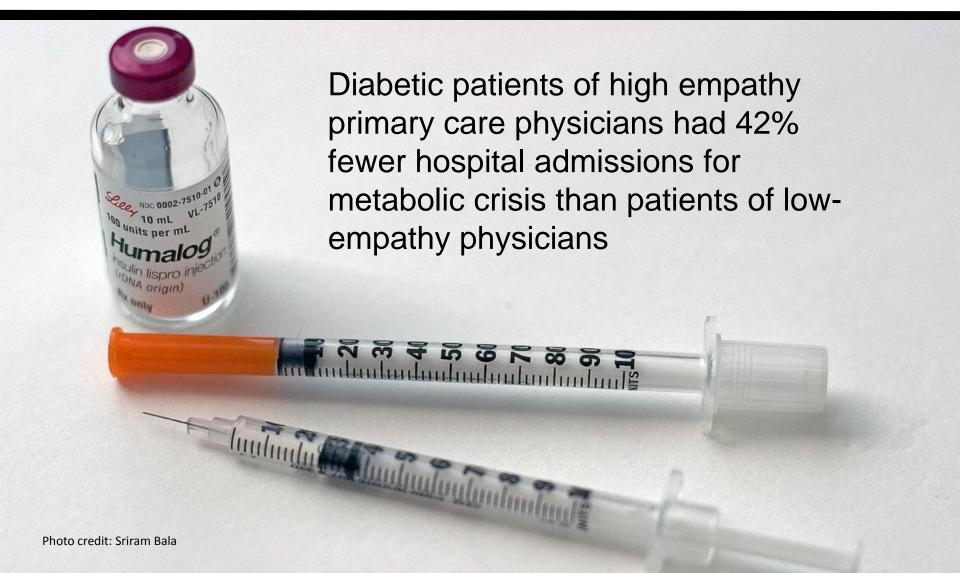


Cascading reactions in the healing response...

wellness genes up-regulated new protein synthesis tissue healing enhanced immunity lowered blood pressure positive emotions cancer genes activated stress hormones tissue breakdown compromised immunity raised blood pressure negative emotions















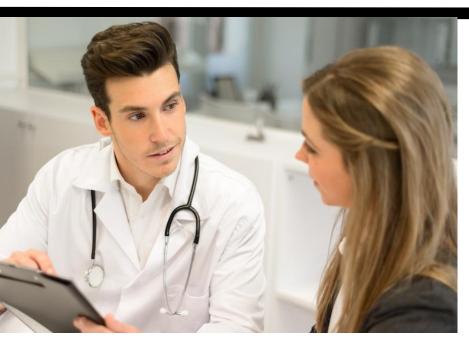


Compassionate, whole-person care in terminal lung cancer – early access to palliative care

- Fewer patients have depression, 16% vs 38%
- Fewer patients chose aggressive end of life care, 33% vs 54%
- Reduced overall cost of care
- But increased median survival,
 11.6 months vs 8.9 months!







Supportive pre-op visit by anesthesiologist:

Halved the dose of post-op opiates



Non-supportive pre-op visit by anesthesiologist:

- Length of stay 2.7 days longer

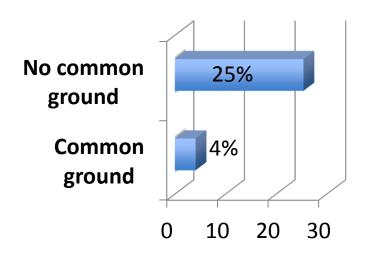
Harvard study 1964: Randomised trial of supportive / non-supportive manner in pre-op visit by anesthesiologist



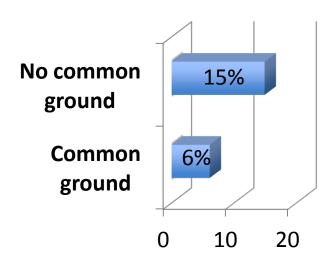


Dramatic reduction in healthcare utilisation as a result of finding common ground with patient, through compassionate, patient-centred primary care (Stewart 2000)

% Receiving diagnostic tests



% Receiving specialist referral



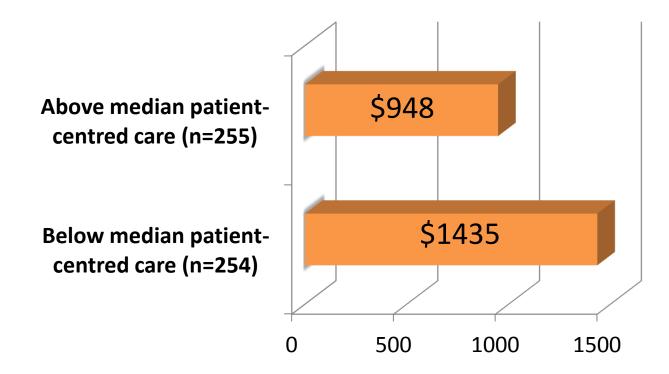
Patients who found common ground with their doctor also had better recovery from their discomfort and concern, and better mental health 2 months later





The percentage of interactions in family and general internal medicine that are patient-centred predicts total cost of healthcare (Bertakis 2011)

Median annual cost of healthcare







The healing power of touch:

- evidence from randomised controlled trials
- Reduced pain, reduced cortisol, enhanced immune function in post-op patients
- Reduced rate of complications and hospital length of stay in premature infants
- Reduced pain levels in multiple studies (meta analysis)
- Reduced fatigue and pain in cancer patients
- Increased haemoglobin levels in anaemic students















And the health professionals who flourish in the broken system are those who learn and practice the daily habits of...

- kindness
- appreciation
- gratitude
- mindfulness
- self-compassion
- choosing to love their work





