Rediscovering Nightingale: Compassionately illuminating the teaching of health care sciences. Who will pump up my pillows?



It is salutatory to note that this winter edition of "Working papers in the Health Sciences" has coincided with the publication of the Francis Report in the United Kingdom which has rocked the realm of professional health care delivery world-wide. The full Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry was published on the 6th February 2013 and is available via (http://www.midstaffspublicinquiry. com/report).

This public inquiry led by Queens Council lawyer Robert Francis was commissioned by the English Secretary of State for Health in 2010 to investigate the role of the commissioning, supervisory and regulatory bodies in the monitoring of the Mid Staffordshire Foundation NHS Trust which consists of two English hospitals with a total of 465 inpatient beds. The inquiry investigated a catalogue of events which took place within the hospitals during the period January 2005 and March 2009 and has considered why the serious problems within them were not identified and acted on sooner. The report has identified important lessons to be learnt for the future of patient care. The analysis of data from that period under investigation has shown there were between 400 and 1,200 more deaths than would have been expected when compared with similar institutions .Worryingly this public inquiry has revealed that within some parts of the English NHS dignity, care and compassion have been marginalized within the patient care pathway .

It is important to stress that the Francis Report is designed to help the British NHS learn from its failings and to undergo a process of improvement by fully encompassing a care philosophy which positively embraces patient centred openness and compassion and importantly learning when aspects of that care delivery go awry. It is, however, important to stress that this is not just an English phenomenon and all health care professionals wherever and whenever they work need to reflect on their care delivery and the care delivered by others under their jurisdiction as proxies, such as health care assistants (HCA). Although it cannot be concluded that these primarily elderly patients would have survived had they had received better treatment, the public inquiry concludes that large numbers of patients were left unprotected, exposed to harm, and subjected to quite unacceptable risks of harm and indignity over a period of years. This was because the extensive system of checks and balances intended to prevent such failures in the hospital simply did not work.

The inquiry report has shown that many patients and indeed the health care professionals who cared for them were betrayed by a hospital culture that put cost-cutting and target-chasing ahead of the quality of care delivery. Exemplars cited within media coverage of the scandal as it unfolded included patients being so thirsty that they had to drink water from flower vases and receptionists left to decide which patients to treat in the emergency department. It is acknowledged by Francis in the report of the inquiry that the hospitals involved had lost sight of their primary mission parameters, the most important of which was their responsibility to provide safe and supportive compassionate care to the patients who used their services.

A significant finding related to staff shortages and skill mix issues, especially among nursing staff and it was this which was largely implicated as being responsible for the substandard care delivered at these hospitals. This reinforces the adage that the care patients receive in hospital is often only as good as the nurse who delivers It! This is something the UK Royal College of Nursing (2010) has been concerned about for a number of years. The Royal College of Nursing (RCN) has shown that the hospitals involved in the inquiry repeatedly failed to comprehend the gravity of the staffing situation and its impact on care. Coincidently the RCN have been championing the regulation of health care assistants who they believe need the "esprit de corps" philosophy that unites the nursing profession. This notwithstanding Glasper (2011) reports that despite assurances given by the previous UK prime minister that some form of regulation of non-registered health care assistants and assistant practitioners must be introduced to protect the public and ensure the delivery of high quality care, the current UK government has made a decision to not to extend statutory regulation to health care assistants (HCA). This decision may now be overturned as a key finding in the Francis Inquiry is that healthcare support workers such as HCA's should be registered and that no unregistered person should be permitted to provide paid direct physical care to patients in health settings where they are currently under the care of a registered nurse or doctor.

There is no doubt that chronic staff shortages particularly among nursing staff can lead to low morale as it was in these hospitals under investigation. The inquiry report shows that while many staff did their best to provide healthcare in difficult circumstances, others showed a disturbing lack of compassion towards their patients. Additionally some staff did speak out and whistle blow, but the Inquiry shows that many of their complaints were ignored and there was strong evidence that often they were deterred from lodging concerns to management through fear and bullying.

However it is the report of a lack of compassion among staff which has shocked many in the caring professions and it is therefore timely to revisit Florence Nightingale's famous quotation and mantra to her probationary student nurses:

"It may seem a strange principle to enunciate as the very first requirement in a hospital that it should do the sick no harm." (1863)Page 2

Similarly within the nursing profession especially, the use of data as a source of decision making and the implementation of evidence based care can also be traced back to Florence Nightingale, who powerfully demonstrated her commitment to systematic data collection. (McDonald 2001). This is because after her return from the Crimean war, she was haunted by the excessive loss of life caused mainly by disease rather than bullets by a factor of seven and she used data as a weapon for driving up standards of care.

Since then the caring professions have fully embraced the study of health care sciences as a way of generating the evidence to underpin practice. The Francis Inquiry findings will serve to remind health professionals world-wide that compassion is the fundamental cornerstone of care provision. Additionally being open with patients when something goes wrong is a key component of developing a safer and more transparent health service. For such a service, where patients can be more confident of receiving the highest quality care delivered with compassion and professional, knowledge is surely one that will reward those who work in it cognitively and spiritually. Health care educators need to reinforce the teaching of the health care sciences and underpin them with a strong curricular thread of compassion. The delivery of evidence and values based health care is dependent on compassionate and knowledgeable professionals. They should be enabled to deliver care that is underpinned by those same morals and philosophies which

motivated those health care professionals of yesteryear who built the architecture that underpins today's contemporary health care.

Patients in some parts of the English NHS were badly let down by those whom they entrusted to deliver their care and those responsible for healthcare regulation and supervision. Robert Francis's inquiry report recommendations which commands professional to embrace a culture which is underpinned by compassionate care, will resonate among all health care professionals. Those who teach clinical skills to tomorrow's healthcare professionals will want to ensure that the health care sciences are fully underpinned by compassionate practice and that plumping up the pillows of a sick patient is an important aspect of that care delivery.

Although Nightingale is credited with laying the foundation stones of compassionate evidence based care delivery, it is Virginia Henderson (1897-1996) in the 20th century, who perhaps picked up the gauntlet of her legacy, and left her definition of nursing which can be e applied to the practice of all health care professionals:

"The unique function of the nurse **[health care practitioner]** is to assist the individual, sick or well, in the performance of those activities contributing to health or its recovery (or to peaceful death) that he would perform unaided if he had the necessary strength, will or knowledge" (1966 p15) Working Papers in the Health Sciences is committed to promoting the evidence base for practice

Working Papers in the Health Sciences is committed to promoting the evidence base for practice underpinned by compassionate care delivery to all.

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