

The Village Residence	POLICY NO:	
	Date reviewed	Revised Feb 2012 Feb 2015, May 2017, September 2021 Sept 2023
	Page 1 of 7	
Policy on Advocacy		

Policy on Advocacy	
Developed by: Drogheda Services for Older People.	Date Developed: Revised February 2012 Revised Feb 2015, May 2017, September 2021, Sept 2023
Developed By: Nursing Department.	Date Approved: April 2011. Revised Feb 2012. Revised Feb 2015, May 2017, September 2021, Sept 2023.
Implementation Date: April 2009	Review Date: September 2024.
Policy Reference Number: DSOP	No. of Pages: 7
Status of the Policy: Final	

The Village Residence	POLICY NO:	
	Date reviewed	Revised Feb 2012 Feb 2015, May 2017, September 2021 Sept 2023
	Page 2 of 7	
Policy on Advocacy		

1.0 Policy Statement:

Advocacy is an integral part of providing healthcare and forms the foundation of the trust inherent in the nurse/carer-client relationship.

2.0 Purpose

To specify the principles which encompass the advocacy role and clarify the responsibilities of all staff with regard to advocating on behalf of Older Adults.

3.0 Scope

This policy applies to all staff within The Village Residence.

4.0 Roles and Responsibilities

It is the responsibility of;

The Clinical Nurse Manager to ensure this Policy is distributed to all staff within The Village Residence. The Clinical Nurse Managers are to ensure that:

- All relevant staff are informed of the Policy
- There is compliance to the Policy

And are;

- Responsible for auditing the Policy
- Responsible for evaluating the Policy
- Responsible for providing feedback to all relevant staff.

It is the responsibility/duty of staff;

- To read the Policy.

The Village Residence	POLICY NO:	
	Date reviewed	Revised Feb 2012 Feb 2015, May 2017, September 2021 Sept 2023
	Page 3 of 7	
Policy on Advocacy		

- To sign the attached sheet stating they have read and understood the Policy.
- To inform their managers if they need further information in order to understand and implement this Policy.

5.0 Procedure/Protocol/Guideline

Advocacy is undertaken by nurses/carers in the best interests of the patient/client for the provision of quality health care and should occur at the level of an individual client, an agency or as a larger health issue. The patient/client has access to citizen's information and advocacy services (Advocacy Services are listed on the HSE Information Booklet "Your Service Your Say").

The advocacy service in place for any resident in Saint Mary's Hospital is SAGE SUPPORT AND ADVOCACY SERVICE FOR OLDER PEOPLE.

SEE CONTACT DETAILS

Staff in all areas of practice, including Older Person Services, are equally obliged to act as advocates. Advocacy is a shared responsibility. As Registered Nurses, working with Older Adults, we recognize that others, including health care professionals, the client's family and friends, and community advocacy agencies, may also act as advocates. Patients/clients should be asked to nominate a person / persons who staff would discuss their care/wishes with should the patient/client become unable to do so (Appendix One).

Staff believe in the concepts of personal autonomy and self-determination, they respect their clients' values and beliefs even when they are different from their own.

Staff must not practise in a way which assumes that only they know what is best for the patient/client, as this can only create dependence and interfere with the patient's/client's right to choose. Any wishes and choices relating to treatment and care are discussed with the patient/client and this should be recorded, implemented and reviewed regularly with them. The patient/client should be facilitated to access advocate/advocacy services when making decisions relating to their treatment or care in agreement with their wishes.

Advocacy is concerned with promoting and protecting the interests of patients or clients, many of whom may be vulnerable and incapable of protecting their own interests and who may be without the support of family or friends.

The Village Residence	POLICY NO:	
	Date reviewed	Revised Feb 2012 Feb 2015, May 2017, September 2021 Sept 2023
	Page 4 of 7	
Policy on Advocacy		

Nurses/carers can do this by providing information and making the patient or client feel confident that he or she can make their own choices/decisions and act according to their own wishes socially, legally and politically. Patients who wish to vote or meet their legal representative will be facilitated.

A nurse/carer may speak on behalf of clients who are incapable of representing themselves. Within the boundaries of their role, nurses/carers must ensure that clients have the information required to make decisions, including information about alternate health care options. Respect for patients' and clients' autonomy means that staff should respect the choices patients/ clients make. This means discussing with them any proposed treatment or care so that they can decide whether to refuse or accept that treatment or care. Therefore, this information should enable the patient or client to decide what is in their own best interests. This respect is extended to situations where the client is incapable and a substitute decision maker is appointed.

Nurses/staff support the appointed decision-maker, unless the decision-maker does not abide by the client's expressed wishes when known or, if unknown, does not act in the client's best interest.

Staff are obligated to act on their knowledge when a client's best interests are endangered as a result of unsafe practice or professional misconduct by nurses or other health care providers. When nurses/carers encounter impediments that hinder their ability to provide safe and competent care, it is their duty to advocate within their practice environments to resolve problems and promote quality health care. Fidelity to the client is primary and must be supported by a moral climate that facilitates client autonomy and decision making that is in the best interest of the client. All staff are entitled to have a clearly delineated, responsive and fully supportive process within their work environments that enables them to fulfil their advocacy role completely and effectively. Staff are personally accountable for ensuring that they promote and protect the interests and dignity of patients and clients, irrespective of gender, age, race, ability, sexuality, economic status, lifestyle, culture and religious or political beliefs.

6.0 Expected Outcome:

Registered Nurses have a professional obligation to provide safe and appropriate nursing care to the patients/clients they serve. Patients/ Clients are in an unfamiliar environment when they enter the

The Village Residence	POLICY NO:	
	Date reviewed	Revised Feb 2012 Feb 2015, May 2017, September 2021 Sept 2023
	Page 5 of 7	
Policy on Advocacy		

health care system. All staff are knowledgeable about this environment and are able to interpret information and clarify language associated with this environment so that patients/clients are well-informed and empowered to make decisions about their own health care. Nurses/carers help create a health care environment in which patients/ clients have maximum control within the limits of their capabilities and the health care options available to them.

7.0 Implementation Plan

It is the responsibility of the Clinical Nurse Manager to bring this guideline to the attention of all staff working in The Village Residence

8.0 References

Nursing and Midwifery Board Ireland (2000) - The Code of Professional Conduct for each Nurse and Midwife

Nursing & Midwifery Council (2002) – Code of Professional Conduct

Consultation with Directors of Nursing (Community Hospitals)

HIQA (2009) National Quality Standards for Residential Care Settings for

Older People in Ireland, Standard 3 (3.5 and 3.6) and 5 (5.1, 5.2, 5.4. 5.5 and 5.6)

The Village Residence	POLICY NO:	
	Date reviewed	Revised Feb 2012 Feb 2015, May 2017, September 2021 Sept 2023
	Page 6 of 7	
Policy on Advocacy		

Appendix 1.

Consent to Share/Give Information Agreement Form

In order to fully understand your situation, it will be helpful to discuss with some other agencies and people what they know about you.

We will only ask them about matters which concern your health and care needs.

It may also be necessary to share with them information I have about you.

I do need your permission to do so and I will not act against your wishes.

We will respect the confidentiality of any information shared with other agencies.

Name: _____ Signature: _____

DOB: _____ PCN: _____

Address: _____

To nominate a person to act on your behalf.

Should you be unable due to ill health to make decisions regarding your wishes, we would like you to nominate a person / persons who we could with your permission discuss your wishes / health needs to enable us to make an informed decision regarding your care.

I nominate _____ relationship _____ as my advocate to represent my wishes should I be unable to do so.

<p style="text-align: center;">The Village Residence</p>	<p style="text-align: center;">POLICY NO:</p>	
	<p style="text-align: center;">Date reviewed</p>	<p style="text-align: center;">Revised Feb 2012 Feb 2015, May 2017, September 2021 Sept 2023</p>
	<p style="text-align: center;">Page 7 of 7</p>	
<p style="text-align: center;">Policy on Advocacy</p>		

Signed: _____ Date: _____

Witnessed by: _____ Grade: _____

Date: _____

Review this form every 6 months with client

Date of next review: _____