



Ward Matron



Enter & View Report

Location: University Hospital of North Tees. **Ward 36**, General Medical Ward.

Date of Visit: Friday 5th April 2019 at 2pm

Healthwatch Team Members: Judith Gray, Ruby Marshall, Margaret Wrenn & Margaret Metcalf.

What is Enter & View?

Part of the local Healthwatch programme is to carry out Enter & View visits. Enter & View visits are conducted by a small team of trained Healthwatch volunteers, who are prepared as 'Authorised Representatives' to conduct visits to health and social care premises.

Enter & View is the opportunity for Healthwatch Hartlepool to:

- Enter publicly funded health and social care premises to see and hear first-hand experiences about the service.
- Observe how the service is delivered, often by using a themed approach.
- Collect the views of service users (patients and residents) at the point of service delivery.
- Collect the views of carers and relatives through evidence based feedback by observing the nature and quality of services.
- Report to providers, the Care Quality Commission (CQC), Local Authorities, Commissioners, Healthwatch England and other relevant partners.

Enter & View visits are carried out as 'announced visits' within a given timescale.

Enter & View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation – so we can learn about and share examples of what a service does well.

Acknowledgements

Healthwatch Hartlepool would like to thank the staff and patients at the University of North Tees Hospital Ward 36 for their hospitality

Disclaimer

Please note that this report relates to findings observed during our visit made on 5th April 2019

The Visit

We were escorted to Ward 36 by Fiona McElvoy's secretary. We were introduced to Ward Matron Nanette Parkin and Sister Elizabeth Meldrum. Ward 36 is a general medical ward with 30 beds, comprising of:

18 medical beds

12 nurse led beds, ran by nurse practitioners of the ward

1 medical consultant.

Staffing levels during the day are 3 teams consisting of 1 RGN's (Registered General Nurse) and 1 HCA's minimum levels. On night duty there are 2RGN's and 2 HCA's (Health Care Assistant). From 19.00 til 00.00 further staff cover to help settle the ward down for the night.

Ages for admissions are from 16yrs to 102yrs at present. The average patient stay can be from a few hours to 9 months, even though the ward has a rapid turnover and is extremely busy. It takes patients who need as little as social intervention to COPD (Chronic Obstructive Pulmonary Disease), step up and down beds for ITU cases. Ward Matron starts with morning huddle. As the day progresses she may have to escalate further huddles according to how busy the ward is. The ward was restful despite being very busy. It appeared clean and tidy.

A 'deep dive' inspection of the ward was carried out a week prior to our visit. This consists of members of the multi-disciplinary team visiting the ward unannounced to check the cleanliness, tidiness and ambience of the Ward. The last inspection was passed with flying colours.

Family visitors and volunteers are welcomed to help in the care and carrying out of activities of their daily living of their loved ones. Johns Campaign is practiced on this ward. *Johns Campaign* was founded on 30th November 2014 by the writers Nicci Gerrard and Julie Jones. Nicci's father, who had Alzheimers Disease, was admitted to hospital with an unrelated illness. During his stay his mental and physical health drastically deteriorated over a period of 5 weeks. The family believed this was due to the lack of contact with his family and familiar people during his stay. Due to restricted visiting hours and further infectious outbreaks on the ward the contact was restricted more than usual causing him to deteriorate rapidly and pass away prematurely. The family lobbied parliament and in March 2016 it was announced that the NHS would endorse John's Campaign, allowing families and carers of people with dementia and alzheimers to support their loved ones whilst in hospital. It has now been implemented across North Tees and Hartlepool NHS Trust.

Sister Meldrum attended a two day Leader Development Course recently. It was regarding learning disabilities and making reasonable adjustments to their stay on the wards. She is shortly to present her findings of this course to senior trust management in the hope of implementing it across the trust, to make life easier for those with learning disabilities and other people who are seldom heard in the community when admitted to hospital.

It was noted that there were 3 dementia patients in one bay. There was an enhanced care team practitioner in that specific bay to try to avoid distress to the patients by helping them, observing them and interacting with them to prevent them from having trips, slips and falls. It seems an excellent preventative measure for such patients.

Some excellent practices are being implemented and carried out on this ward.

Over our stay we questioned 16 patients both male and female.

Feeding and Hydration

Quality of food

1 stated they did not have an appetite and was not eating

2 stated the quality and quantity was ok

2 stated Yes it was fine.

Remainder were neutral

Correct food arriving

All stated Yes, I think so

1 stated "The presentation is lovely"

Remainder were neutral

Is assistance given when food arrives

All stated that it was not applicable to them as they were independent with their feeding needs.

1 stated that "The food arrives and I eat it".

Hydration

Are water Jugs close by?

Water jugs were close by

Are they regularly topped up?

All stated Yes

Assistance given if and when required

7 stated if and when needed

2 stated not applicable

Rest did not comment

Do you ever feel thirsty?

It was noted by the team that there were jugs of water close by all patients and that they were regularly topped up,

Dignity and Respect

Are staff friendly and polite?

The majority of the patients questioned stated "Most of the staff are friendly and polite and they do take time to listen to you and answer your questions"

Are you called by your preferred name?

All questioned stated Yes.

Is the call button close by and do you get a quick response?

Everyone stated Yes to it being close by. However, it can take a while to respond to, up to 10 minutes.

If needed, is appropriate and sensitive assistance provided with washing and toileting?

8 people stated they did not have continence issues

4 people said the incontinence pads and changing was always done with dignity and sensitivity.

Most people brought their own continence products with them despite there being a good stock and variety on the ward.

Are you able to discuss your condition and treatment privately with staff?

Everyone stated Yes, they were very amenable.

Are you happy with your overall care and treatment?

Everyone was very happy with their overall care and treatment.

Cleanliness and Hygiene.

Do you think the ward is clean?

All stated Yes.

Cleanliness and Hygiene passed a "Deep Dive" inspection over one week ago. All of the ward all stated that the wards staff hand hygiene was excellent in that they were always washing their hands and arms. The toilets and bathroom facilities were "spic and span". The bed linen is changed a minimum of once a day or more often if necessary.

Rights and Fulfilments

Do you know how to make a complaint or compliment?

All patients interviewed stated Yes.

Are you regularly updated on your treatment and progress?

All said Yes, and that they are aware of their treatment plans so far.

Discussed discharge and on-going care needs

10 patients were unaware of their discharge date

2 stated Yes, they knew their planned discharge date.

Safety and Security

Is there Staff there to help and support me if I need them?

9 people stated that there was always staff there if they needed them, including if they had to use their call bell to call for help

3 said the staff were always there and happy to assist.

My personal Possessions

Are your personal possessions safe?

All stated Yes because they did not bring anything in with them of value.

Most had enough money for a morning paper.

Slips, trips and falls

10 people said No

2 people said Yes, they had but not in hospital.

Any hazards observed during the course of the visit?

None observed throughout visit

Staff and Managers views

8 Staff stated that there were many training opportunities on this ward.

There was a philosophy of care statement on the wall.

There was an achievement board regarding in house training and all certification goes up on the board.

Adequate staff and resources

Everyone thought that there was a good level and mix of staff per shift.

There is a good use of volunteers on the ward especially in regards to Johns Campaign (previously mentioned).

Staff morale

Of 8 people questioned, staff morale is ok but sometimes it is good and sometimes bad. It can depend on who you are working with. Problems do get rectified quickly.

Patients with Dementia, learning difficulties and sensory loss.

Please see main report, regarding Sister Meldrum.

General Comments and Observations

8 people stated their dates of admission. The remainder of patients could not remember as they were so poorly.

8 people arrived at the hospital by ambulance, and the remainder were unable to recall how they arrived.

No one questioned could state their test results and discharge date.

Responses ranged from “not yet” to “under discussion”

We would like to thank the staff, especially Nanette and Elizabeth for spending the time to explain all of the intricacies of the workings of the ward. It was a very good experience for the visiting team. Many thanks for the cup of tea we received after finishing.

Recommendation

Our only recommendation would be to carry on with the good work and practices and the sharing of good practices.

Questionnaire for Relatives/Carers (Ward 36)- 9 Responses

A. Food, Nutrition and Hydration

1. Is the food varied, plentiful and well presented?

Plentiful but not well presented.

Yes, very nice.

Yes (7)

2. Has your relative different options to choose from at meal times?

Yes (8)

Lots of choice

3. Is assistance available if required?

Not required (2)

Yes (7)

4. Are water jugs close by and are they regularly topped up?

Close by, but not topped up unless requested.

Yes (8)

5. Are any health issues (e.g. diabetes) or cultural, religious requirements catered for with regards to food options?

Staff unaware I am diabetic

No

Yes (6)

Yes diabetes

6. Is a drink provided in the evening before going to sleep?

Yes (9)

B. Dignity/ Respect

1. Are staff friendly and polite?

Mostly

Yes (6)

Very much so

Yes, very helpful

2. When you visit, have you noticed staff talking to your relative?

Yes (7)

Yes, they speak politely and calmly to every patient.

Yes, everything fully explained.

3. Do they treat them with respect?

Yes (8)

4. If your relative has specific needs due to a condition such as dementia, are they met appropriately?

N/a (5)

I don't know

Yes

5. Is the call button close by and do you get a quick response?

Close by but not quick response

Yes (6)

Sometimes

6. If needed, is appropriate and sensitive assistance provided with washing and toileting?

Yes (6)

N/a

Independent

7. If your relative needs to use continence products, are they changed quickly when necessary?

N/a (6)

Yes

8. Are you able to discuss their condition and treatment privately with staff?

Curtains around bed.

Yes (6)

N/a

C. Cleanliness & Hygiene

1. Do you think the ward is clean?

Yes (6)

Yes, very clean (2)

2. Are toilet/bathroom facilities clean?

Yes (6)

Yes, very!!

Don't know

D. Rights

1. If you are not happy or have issues or concerns about your relatives care or treatment, do you know to whom, how and where to pass your complaint or compliment?

Yes (4)

Yes, but very happy.
Yes, I am fully aware of the process.
No complaints but staff seem approachable.

2. Are you regularly updated on the treatment of your relative and their progress?

Yes, if we ask.
Yes (5)
Yes, by both nurses and doctors.

E. Safety & Security

1. Are your relatives' personal possessions kept safely?

Yes (9)

2. Have you been given any advice regarding safety and security of personal possessions?

Yes (7)
Yes, plus signed disclaimer.
Not needed, already aware.
No

F. Admission and Discharge

1. Did the admission process go smoothly?

Yes (9)

2. Has your discharge been discussed?

Yes (5)
Kind of?
No

3. Do you feel fully involved in planning and arranging your discharge?

Yes (5)
We thought so for previous discharge, but afterwards things did not go well.
No, I wish I was though!
All right
No

4. If you need a package of care after your discharge, are you confident that this has been arranged and will be in place?

Yes (5)
We hope it will be better this time.
Unsure
N/a (2)

Any other comments

“Everyone is wonderful. It is my first stay in hospital and overwhelmed with the kindness of everyone and the spot on cleanliness of the ward. The cleaners/porters are wonderful (as is everyone), thank you all!”

“This hospital is clean, food nice and always hot. Would recommend this hospital to all my friends and relatives.”

“I can’t speak highly enough of the staff who have looked after my mam.

“Very good staff, cared for and safe. A credit to the Trust.”



Hospital Enter and View Group
Visit to Ward 36 North Tees Hospital
Friday 5th April 2019
Patient Feedback Sheet

Please use the attached forms as a guide to help you with the issues and topics you will be discuss during your conversations with patients and family members and other visitors. The areas listed are not exhaustive and there will often be other things which will come up that you will need to explore. Also please use the forms to record your general observations and impressions of the ward based on what you see, hear and smell during the course of the visit.

	Issues	Discussions and Observations
1.	<p data-bbox="208 248 613 288"><u>Feeding and Hydration</u></p> <p data-bbox="208 347 483 387">Quality of food-</p> <ul data-bbox="255 451 907 671" style="list-style-type: none"><li data-bbox="255 451 907 491">• Choice, quality and quantity of food?<li data-bbox="255 496 907 536">• Options and special dietary needs?<li data-bbox="255 541 907 580">• Correct food arrives?<li data-bbox="255 585 907 625">• Hot on arrival?<li data-bbox="255 630 907 671">• Assistance given if/when required? <p data-bbox="208 826 394 866">Hydration-</p> <ul data-bbox="255 930 869 1102" style="list-style-type: none"><li data-bbox="255 930 869 970">• Water jugs close by?<li data-bbox="255 975 869 1015">• Regularly topped up?<li data-bbox="255 1019 869 1059">• Assistance given if/when needed?<li data-bbox="255 1064 869 1102">• Do you ever feel thirsty?	

2. Dignity and Respect

- Are staff friendly and polite?
- Do staff take time to listen to you and answer your questions?
- Are you called by your preferred name?
- Is the call button close by and do you get a quick response?
- If needed, is appropriate and sensitive assistance provided with washing and toileting?
- Are you able to discuss your condition and treatment privately with staff?
- Are you happy with your overall care and treatment?

3. Cleanliness and Hygiene

- Do you think the ward is clean?
- Staff hand hygiene?
- Are toilet and bathroom facilities clean?
- Is bedding changed quickly if necessary?

4.	<u>Rights and Fulfilments</u> <ul style="list-style-type: none">• Do you know how to make a complaint or compliment?• Regularly updated on your treatment and progress and aware of care plan?• Discussed discharge and ongoing care needs	
5.	<u>Safety and Security</u> <ul style="list-style-type: none">• Always staff there to help and support me if I need them?• My personal possessions and money are safe?• Trips, slips, falls?• Any hazards observed during the course of the visit?	

6. Staff/Manager Views

Training opportunities?

Philosophy of care plan?

Adequate staff and resources?

Staff morale?

7. General Comments and Observations

Date of admission?

How did you get here?

Discharge arrangements/communication

Care and support arrangements after discharge

Response from Hospital Trust

3.05.2019

Dear Carol

Please accept my apologies for not getting this to you. I thought I had sent it last week but had some IT issues that meant emails disappeared without sending so this must have been one of them

There were just a couple of matters of accuracy which are marked on the report. Otherwise thank you for the kind comments which have been shared with the staff. We have noted that there are opportunities for improvement in a couple of areas and the ward matron is taking those forward

Best wishes

Lesley

(on behalf of Julie Lane, Director of Nursing)

Lesley Wharton

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