

INPATIENT CARE REPORT

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Manager

Why we looked at inpatient care

Our prioritisation process identified the following in order:

- GP Access - Completed
- Outpatient Care - Completed
- **Inpatient Care - Published**
- Mental Health - Planned



Setting up the project

- Looked at the catchment area and approached Healthwatch Merton (Surrey?)
- Invited anyone to become a member of the Inpatient Project Group and held inaugural meeting
- Looked at existing to data to identify key concerns
- Approached Healthwatch Volunteers (Sutton and Merton)
- Consulted key trust staff and identified participating wards (max 8) AMU, A3, B5, C3, C5, C6, Derby, Oaks
- Developed and agreed questions (carers, observation sheets)
- Put together programme of visits over 6 weeks.



Implementation

- Very supportive staff
- 170+ patient surveys completed
- Mostly positive feedback
- Volunteers enjoyed it
- Very little opportunity for Carers survey
- Observation sheets
- Would have liked 20 response per ward (capacity and time)



Commendations

OVERALL - Average rating of the 'overall experience' of staying on the ward, across all participating wards is 8 out of 10.

TRUST IN NURSES - 89% of patients advised that they 'Agreed' or 'Strongly Agreed' that they trusted the nurses on the ward that they were staying on.

TRUST IN DOCTORS - 91% of patient advised that they 'Agreed' or 'Strongly Agreed' that they trusted the doctors on the ward that they were staying on.

OTHER STAFF - Analysis of comments relating to 'other staff' show that these were overwhelmingly positive (only 8 negative from 135 comments).

WARD CLEANLINESS - Staff and volunteers visiting wards noted an overall high level of cleanliness and this is also reflected in patient comments



Recommendations

GENERAL - We have produced individual ward-based reports for each of the 8 participating wards.

RECOMMENDATION - Individual wards respond to these reports

NOISE AT NIGHT - Just less than half of all patients surveyed said that they had been bothered by noise at night on the ward. A fifth of patients have been bothered by light.

RECOMMENDATION - Investigate effective ways of alleviating both noise and light issues on wards that impact on patient's rest/sleep.

SUFFICIENT NURSES - 1 in 10 patients said that they felt that there were not enough nurses on a weekday, rising to 1 in 5 patients when asked the same question about nursing staff levels at the weekend.

RECOMMENDATION - St Helier wards to look at any real/perceived deficit in nurse staffing levels to reassure patients (this could be achieved as part of Recommendation 1 above).

OTHER - There is a significant amount of analysis that has not been used to make recommendations in this report.

RECOMMENDATION - To look at all the remaining analysis to see if there are any other areas where potential improvements can be made.



Potential Areas for Action

RECOMMENDATION - that the full data is shared with Mitie and that Mitie respond with any action/feedback in relation to the food provided to patients.

RECOMMENDATION - Investigate potential ways to improve English communication between nurses and patients

RECOMMENDATION - Look at ways to reduce the number of incidents where nurses spoke in front of patients as if they were not there potentially through awareness/training.

RECOMMENDATION - Assess any ways to reduce the cost of TV for patients and cover areas where TV is not available.



Noise at Night

In response to this a number of senior nurses now conduct night visits regularly. This has highlighted the need for further review of some behaviours at night, radios on at the desk, noisy talking by staff, lights. This has now formed the basis of a larger piece of work where we as nurses will develop a night standard centred around the following;

- Dimming lights at a set time
- Reducing noise on phones by turning to dull sound
- Maintaining nurse call buzzers but monitoring answering them closer at night
- Formal series of night visits with feedback to wards through e update
- Ensuring all bins are soft close
- Continue to roll out bay nursing where the nurse is seated in the bay and not at the desk
- Obtain eye masks and ear plugs for patients through the introduction of comfort packs on wards



Sufficient Nurses on Wards

The survey found a variation in numbers of nurses at weekends compared to weekdays.

- Through the annual establishments review this has now changed and the same numbers of nurses are on duty 7 days a week due to the change in ward activity.
- Ward boards will clearly state numbers of staff on each shift
- Nurses to ensure intentional rounding is carried out 2 hourly to ensure every patient is asked about comfort, pain and position regularly throughout the day.
- Nurse in charge badges will be re-introduced to ensure all visitors and patients know who is in charge
- The nurse in charge will go round every patient once a day and this will be included in our ward improvement programme for 2017/8



Nurses Talking Over

Whilst this was a small number of respondents it is unacceptable practice

- We will highlight this through our Patient First programme, we will ensure that this very poor practice is demonstrate as unacceptable
- Observational audits being introduced in 2017 (QIS Audits) where we have trained a number of senior nurses to undertake will look for this behaviour and tackle it head on.
- We are also reviewing our bedside handovers to ensure that staff are explaining this process to the patient and can include them in the information shared.

TV

- A programme of refurbishment is taking place in the main wards. As we carry this out a TV will be placed on the wall in each bay
- More work will be done to introduce volunteers who can read and chat to patients to provide company



Individual Wards

- 15 Step programme in place to assess the wards
- SWLEOC to replace windows to improve the temperature in Derby and Oaks
- Posters showing Healthwatch Feedback in staff areas.
- Detailed Action Plan from Mitie in response to the food feedback. Food tasting sessions to check the quality and taste of the food. If you stay more than 3 weeks, you get a personal visit from a Mitie employee to see how the variety can be improved. Sometimes this will involve giving patient vouchers for the canteen. Improving by enforcing 'protected' meal times
- EStH now have 'Patient Centred Care' (termed intentional rounding elsewhere). Each patient is checked on every 2 hours to check pain and other needs etc.
- Language and accent barriers - Staff have been asked to check for understanding with patients before moving on.
- AMU being refurbished to have a Rapid Assessment Area at both Epsom and St Helier to improve patient flow.
- Recruitment drive in the Philippines to address staff shortages



Action Event



Next Steps

- These action plans will be supported by the divisions and shared with the ward teams
- Positives were shared with staff as well as negatives
- Agreeing next steps to improve our patient experience

