

Enter & View Visit Fern Ward Medicine and Elderly Care Ward King George Hospital

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Introduction

Healthwatch Barking and Dagenham is the local independent consumer champion for health and social care. We aim to give our citizens and communities a stronger voice to influence and challenge how health and social care services are provided for people in the borough.

Enter & View is carried out under the Health & Social Care Act 2012. It imposes duties on certain health and social care providers to allow authorised representatives of local Healthwatch organisations to enter premises and carry out observations for the purposes of Healthwatch activity.

Authorised representatives observe and gather information through the experiences of service users, their relatives/friends and staff to collect evidence of the quality and standard of the services being provided.

To do this we:

- Enable people to share their views and experiences and to understand that their contribution will help build a picture of where services are doing well and where they can be improved.
- Give authoritative, evidenced based feedback to organisations responsible for delivering and commissioning services.
- Are able to alert Healthwatch England or the Care Quality Commission, where appropriate, to concerns about specific service providers of health or social care.

Summary

Healthwatch Barking and Dagenham authorised representatives undertook the visit to speak with patients about three areas of care during their hospital stay: nutrition, personal hygiene and interaction between staff and patients. We spoke to 10 patients on the day of the visit.

Overall patients were satisfied with the meals provided and felt that they were given a choice of what they would like to eat. In terms of drinks, all patients were not aware that soup or a milk drink was available. There were concerns raised about catering staff asking if people want a drink only from the entrance of the bay. This was a problem for those who had hearing impairments and also for those who were in the bathroom or asleep at the time.

Patients highlighted that staff had a lot to do but do try their best to provide the care they can.

Although patients were satisfied with their bedding being changed and staff helping them with bathing, issues were raised by relatives about incontinence items not being changed overnight.

All patients have an information board placed behind the bed. Relatives indicated that these are not always updated to reflect the correct information.

Details of the Visit:

<u>Date:</u>

8th October 2014

<u>Premises Visited:</u>

Fern Ward, King George Hospital

Enter & View Authorised Representatives:

Barbara Sawyer Val Shaw Manisha Modhvadia (Healthwatch Officer)

<u>Specific Areas Identified for Observation:</u>

- Nutrition
- Personal Hygiene
- Interaction between Staff and Patients

Reasons for the Visit:

To visit wards that provide in-patient hospital services for older people - to gather the views and experiences of patients about the services being provided to them. This Enter & View visit is part of a wider programme being undertaken by Healthwatch Barking and Dagenham around issues concerning health and social care services for older people and is as a consequence of findings from the Francis Report. Healthwatch have undertaken a visit previously to Queens Hospital as part of this work programme and wanted to determine parity of care across the Trust.

Purpose of the Visit:

To ascertain patients' views on the choice and quality of the food and drink they receive; to ask patients and their visitors about the staff interaction with them and to get views and comments about the quality of personal hygiene support that patients receive.

Healthwatch authorised representatives spoke to 10 patients on the day of the visit.

The Wards' Services:

The ward has 30 beds: split into 4 units with 6 bays each, set up as single sex units. There are 4 side rooms.

It is a medicine ward for elderly care.

Visiting times start at 10.30am till 7.30pm and patients are provided with 2 cooked meals a day.

Staffing arrangements:

Morning: 6 Qualified Nurses and 3 Health Care Assistants

Afternoon: 4 Qualified Nurses and 3 Health Care Assistants

Evening/Overnight: 3 Qualified Nurses and 3 Health Care Assistants

During the weekend the staff numbers drop by 1, in all categories.

During the visit, the staff from the ward were very helpful and assisted by providing all information that was requested.

Healthwatch Barking and Dagenham would like to thank the staff for their assistance and co-operation during our visit.

On entering the wards, each one has a sink near the entrance to encourage visitors to wash their hands as well as use the alcohol hand rubs.

Information boards were observed on the wards' reception areas.

We saw a system of red trays and water jugs with red lids being used to identify patients that required help with feeding and drinking.

Patients' Experiences:

Nutrition:

Healthwatch representatives were not looking at nutrition on the wards from a Dietician's perspective, but from the point of view of the patients.

The questions asked centred on the help patients get to eat and drink, whether they can choose the food they eat and if they feel it is of good quality.

On the day of the visit Healthwatch representatives spoke to ten patients.

Generally, patients found the quality of food to be satisfactory. Healthwatch Representatives observed a red tray and lid system being used. Every patient had a red tray and lid. A staff member told Healthwatch Representatives that all the patients in the ward had them as it's an elderly ward.

Patients were asked if they are helped with food and drink, four patients told Healthwatch representatives that they did not need any help but were sure a member of staff would help them if they did. Five patients out of the ten said they received help.

Eight patients said they were happy with the size of food portions provided and two said they were not.

Patients' opinions varied on the choices of food.

Comments included:

"I was given what the patient before ordered; there was no other alternative choice for me".

"I am given a menu to choose from and the choices are good"

"Yes I am given choices by the menu".

"I have had sandwiches the bread is too thick, Its needs to be thin bread"

In discussion with patients and relatives it came to light that some patients are not being helped with the menu options, the menu is left on their table to complete by themselves.

Comments included:

"Don't always get what you want, not much help to fill out the menu option, there are a lot of the elderly people in here who are confused and are left to fill in the options."

" I cannot read very well, as my sight is very poor, the staff do not always do the menu with me."

Relatives highlighted that patients were not aware that they can ask for a milk drink or a cup of soup. It's only when a patient or a relative ask staff that they become aware of this.

Healthwatch representatives spoke to patients about drinks. Out of the ten patients 5 mentioned that catering staff only came to the doorway and ask patients if they wanted a drink. One patient on the ward, who was hard of hearing, told us that she has missed out on drinks due to this.

Patients also told us that catering staff do come back to ask if they would like a drink. Patients who are asleep or in the bathroom miss out on having a drink.

One relative spoke about his mother's care on the ward. His mother, he explained, his mother is a stroke victim and unable to use one side of her body. No staff member had helped her to have a drink and her jug was left on the side of the table where she was unable to reach it. No beaker was provided to the stroke patient until a relative asked for one.

Comments from patients

"You have a menu that you can choose from. I am happy with the choices, sometimes if I don't like something, the staff will give me something else but it depends on if there is anything left"

"Not aware that soup is an option, unless you ask, you would not know that's its available, it's only a packet of soup, but people still need to know it's an option"

"Yes food is hot enough for me"

"Two hot meals a day, but when I have had sandwiches the bread is too thick, it needs to be thin bread"

"Plenty of water in the jug"

"Always enough water and drinks"

Personal Hygiene:

Patients were asked for their views and experiences of personal care support: was it meeting their needs and was it being carried out in a way that preserved their dignity?.

Overall, patients were satisfied with the way they were being cared for and said that they were treated with dignity and respect. All patients that were asked said that their bed linen was changed every day.

Patients and relatives commented on the call button: highlighting that it took a while for staff to attend to patients once they had buzzed.

One relative spoke to Healthwatch Representatives about his mother's experience within the ward. He felt that the staff seem to be very busy but try their best. His concern was over the call buttons "I told the nurse that the call button does not work: the nurse told me that the button would be fixed the following day. I felt uncomfortable leaving my elderly mother without having a way to call for help overnight. The nurse then got some sellotape as a temporary measure. My mother has been here over two weeks and the problem has not been dealt with."

Relatives were concerned that patients were not being asked about changing incontinence pads overnight. A relative commented, "One morning I came in my mother was drenched, although the nurses changed her and gave her a bed bath, this would not have happened if someone asked if she needed a change."

Two patients told us that when they use a bedpan, they are left with the bedpan and the nurse goes to deal with something else and then they are left waiting until she comes back. The patients said the position is uncomfortable.

Comments from patients

"I wash everyday"

"I can use the toilets, wash every day, I do wear continence items."

"Would help if asked, but can wash myself"

"Overnight no one asks if you need a change."

"I had to wait a while before anyone came to take the bedpan"

"After using the buzzer there was no response and therefore her daughter had to go to the desk"

"It does take staff a while to come I know they have a lot to do"

Staff interaction

Healthwatch representatives wanted to explore the experiences that patients and relatives had when interacting with hospital staff.

We spoke with patients; we wanted to know if they had been treated with respect and dignity during their stay: that the staff responded to requests for assistance in a timely way and whether patients understood why they were in hospital and the treatments they were being given.

Overall patients were generally happy with their experience of the staff.

Patients felt that sometimes staff had a lot to do but tried their best. Feedback from some patients showed that staff treat them with respect and are approachable.

Comments from patients included

"Staff do treat me well",

"Very pleasant"

"Yes staff are very nice".

"Patients are put at the end of the queue".

Comments from other patients and relatives however, were less favourable:

"I had to wait one and a half hours for them to set up a commode".

Two relatives who were spoken to on the day felt that if they were not there, their relative would be left alone all day, they felt a befriending service of some sort would be of great help.

Some patients said they are given an explanation about their treatment and medication, whilst others said they were not told what was going on.

Relatives who were present on the day said doctors had explained what medication their relative was taking. One relative said "I am glad I know what is going on, as a carer I need to know what is happening with my mother or it will make things a lot worse when she comes home and I have no idea."

Additional information

Representatives observed information boards above each bed, they consisted of patient information, including the patients name, the date, the nurse and consultant who were treating the patient.

Three relatives indicated issues with incorrect information being displayed on the boards.

One relative told Healthwatch Representatives that staff had swapped their relative and other patient between bays. However once this was done the information on the boards were left with incorrect details of the patient. Another relative said that although the boards are a good idea, at times the details of the nurse who is treating the patient are incorrect.

The third relative told us that there is vital information that nurses keep missing out such as their mother only being able to drink with a beaker. The relative felt this information should be on the board so that all staff are aware and catering staff know that the patient needs her water in the beaker.

Incorrect or incomplete information on these boards is inconvenient at the best, and could possibly be dangerous. This is particularly the case if the wrong name and details are mistakenly left over a bed when patients are moved.

Conclusion and Recommendations:

Overall feedback indicates that majority of patients were happy with the portions of food they receive. However issues were raised about catering staff and the communication with the patient when distributing drinks and the food menu.

Information boards were an issue raised by relatives in particular. Their feedback indicated that incorrect information was being displayed. Healthwatch Representatives felt that incorrect information could have serious implications, especially in terms of the wrong medication being given to the patient.

Patients did not have issues with bathing. However feedback that was received about the management of incontinence items show that improvements need to be made.

Taking into consideration the views of patients and relatives Healthwatch recommend:

- Catering staff distributing tea and coffee need to each individual patient and ask if they would like a drink. This is essential on an elderly ward, where patients could be confused and for those with hearing impairments.
- Before leaving the ward, catering staff should ask those who may have been having a wash/gone to the toilet if they would like a drink.
- All patients should be asked if they need help filling in the menus.
- Staff need to double check that patient information boards display the correct information at the beginning of their shift.
- Where patients are using a bedpan, staff need to wait for the individual to finish using the bedpan so they are not left waiting in a uncomfortable position longer then they need to.
- All call buttons on the ward need to be checked to ensure they are in working order. If a call button is not working an alternative method needs to be provided to ensure the patient has a way of calling staff when they need to.