

Enter & View Visit Report

Royal Shrewsbury Hospital Ward 28 (Frailty)

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About Healthwatch Shropshire

Healthwatch Shropshire is the independent health and social care champion for local people.

We work to ensure your voice counts when it comes to shaping and improving services. We address inequalities in health and social care; to help make sure everyone gets the services they need. We are a charity.

What is Enter & View

Healthwatch Shropshire gathers information on people's experiences of health and social care services and there are times when it is appropriate for Healthwatch Shropshire to see and hear for us how services are being provided.

These visits are called 'Enter and View', and can be 'announced', 'unannounced' or 'semi-announced'. For 'semi-announced' visits the service provider is told we will visit but not the date or time of the visit.

The responsibility to carry out Enter and View visits was given to Healthwatch in the **Health and Social Care Act 2012**.



Enter and View visits are carried out by a team of specially trained and DBS checked volunteers called Authorised Representatives. They make observations, collect people's views and opinions anonymously and produce a report.

Enter & View visits are not inspections and always have a 'purpose'.

Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experience of all service users and staff, only an account of what was observed and contributed at the time.



Details of the visit

Three Healthwatch representatives visited Ward 28 - Frailty at the Royal Shrewsbury Hospital on Tuesday, 25th February 2025. The visit was semi-announced, meaning that the Ward Manager was informed of the visit but not the specific date or time.

The purpose of the visit was to speak with the patients, visitors, staff and the manager, to assess the effectiveness of Ward 28's efforts to ensure a timely discharge from the hospital. This visit coincided with the Ward's initiative in this area, referred to as "Patient Reconditioning".

What is frailty?

'The term frailty or 'being frail' is often used to describe a particular state of health often experienced by older people... it actually describes someone's overall resilience and how this relates to their chance to recover quickly following health problems.

In practice being frail means a relatively 'minor' health problem, such as a urinary tract infection, can have a severe long-term impact on someone's health and wellbeing.

Frailty is generally characterised by issues like reduced muscle strength and fatigue. Around 10% of people aged over 65 live with frailty. This figure rises to between 25% and a 50% for those aged over 85.

Frailty isn't the same as living with multiple long-term health conditions. There's often overlap, but equally someone living with frailty may have no other diagnosed health conditions.'

What is frailty? | Age UK



What we did

Before our visit, we requested the Manager make Healthwatch survey forms available for patients, their relatives, and friends. These were intended to collect their confidential comments. Upon arrival at the Ward, the Manager welcomed us. We spoke with her and then talked to patients, visitors, and staff. We also collected the completed surveys.

What people told us

The Ward Manager

We were told that Ward 28 patients may have complex needs, making it challenging to hold conversations with some of them. The Ward aims to provide each patient with a positive hospital experience and safely discharge them as soon as possible. To support this goal, the Ward follows the Trust's "Reconditioning Initiative," known as "Get Up, Get Dressed and Get Moving", where patients are encouraged to "Eat, Drink, Move, Dress," before following one of four discharge routes: home without care, home with a care package, home with rehabilitation, or a nursing home/residential placement. Reducing time spent in bed is considered important. To aid this effort, the Ward has started a "Donate to Motivate" initiative to source clothing.

Activities such as chair-based yoga, ball games/exercises, and bingo have been introduced. Televisions have been purchased with donated funds. Staff actively encourage patients to get out of bed and stay active.

Relatives and friends are welcome to visit at mealtimes to offer support. Diets and eating preferences are individualised, and good fluid intake is emphasised and monitored. Relatives and visitors are also encouraged to accompany patients to the League of Friends café which is situated within the hospital, to get patients up and moving.



Many of the patients have some cognitive impairment or dementia and need extra encouragement to get involved. The ward have devised a "Keep in Touch" (K.I.T) day on a Thursday, assisted by physios and the Falls Prevention team, to involve patients in activities. Beds are pulled forward so that all patients (who want to) can be included.

The Ward promotes joint working between doctors, nurses, physiotherapists, dieticians, and discharge teams. There is also a desire to create a therapeutic space and increase volunteer/staff support in the future.

The Ward Manager told us that they operate an open-door policy for patients' relatives and staff, so that issues can be dealt with very quickly prior to patient discharge.

The Patients

We interviewed nine patients in the four side bays about their experience of care on the ward. Five of those interviewed reported that they had an excellent experience on Ward 28. Two used the phrase "It's 150%", one said "It's very, very good".

Food and drink

All the patient we spoke to shared some positive opinions regarding the food provided. The quality and variety of the meals were particularly commended. Six individuals mentioned experiencing either some difficulty, or a lack of interest, in eating. Three patients highlighted the efforts made by staff to assist them with their meals.

Additionally, two patients noted an improvement in their appetite.



Meals are excellent. When I had difficulty swallowing, they got me an omelette even though it wasn't on the menu.





Staff tempt me! I'm a fussy diabetic. They bring me 'build up drinks'.



All patients said that cold drinks were always available and that hot drinks are frequently offered.



Activity and getting dressed

During our visit, we observed that most of the twenty-three patients in the bed bays were either asleep, or out of bed in night clothes. One patient was dressed for a physiotherapy session. Another was dressed waiting to be discharged. Two people told us of their unwillingness to be dressed.



Staff ask me if I want to get dressed every day. I usually say 'no"



One patient was surprised that her physiotherapy sessions had started as early as her second day on the ward

Three patients said that they were bored and would have liked personal televisions, radios or newspapers.

Staff

All patients spoke very positively about the help and support they received from staff.



Couldn't improve on it. They are excellent.



The speed of staff response when called was praised, as was their attentiveness to personal care needs. Two patients stressed the kindness of the staff. One said that she had been on the ward for a few weeks and now saw the staff as friends.

Discharge plans were known by five of the patients we spoke to. The others were awaiting test results before any next steps were decided.

And one said:



I get to see what goes on here, and what they do is unbelievable.





The staff

Of the fourteen staff interviewed, nine were unaware of the "Reconditioning initiative" by name although the initiative is known to staff in the Trust as "Get Up, Get Dressed and Get Moving". One staff member knew Ward 27 was trialling it, while four felt the Initiative had a positive impact on Ward 28. The staff have noticed improvements in patient confidence, mobility, mood and eating. However, they did comment on the extra time spent sitting with patients and checking if meals were eaten.

Staff have been invited to speak at a conference on 2nd April in Stratford about the work they are doing to tackle deconditioning.

The visitors

We spoke to three visitors. A person who visited the ward last year observed that the patient experience has now improved. Possible further improvements included: more chairs for visitors; a space for patients to interact socially; and more organised activities.

Other responses

We received 9 completed survey forms. Every response was highly positive. Patients praised the staff, the care, the cleanliness and the communication.



Staff are friendly. I understand my treatment. Good nurses and doctors.





All good. Staff made it feel like Christmas and tried to get me home early.





Thank you for looking after me so well during my stay. I was so poorly and miserable, but the staff were very thorough and polite. It is obvious how much you all care. Many, many thanks.







I can't believe how the staff on Ward 28 can keep up with all the work they do. A very top team.



What we saw

The ward prominently displayed a pull-up banner for the "Reconditioning Initiative" and a wall poster promoting a walking exercise challenge: "Being up and active can help you."

Ward staff see the reconditioning project as an ongoing project which is going from strength to strength. They are asking schools and colleges to contribute some artwork to promote the project. <u>All</u> staff, including Ward clerks, Doctors, housekeeping, are encouraged to link together, share ideas and get involved.

The ward was warm and had a pleasant atmosphere. Staff treated patients respectfully, often repeating statements kindly for those who were confused. Requests for assistance were quickly addressed. Despite the busy environment, there was a relaxed yet professional atmosphere with a lot of smiles and encouragement. Staff supported patients in an authentic and positive way.

Three patient discharge co-ordinators, (whose role it is to ensure the safe and timely transfer of the patients from hospital services to their next place of care or home), were working on the ward during our visit.



Key findings

- Ward 28 is successful in providing encouraging and supportive care for its patients, and this has improved over time.
- Patients are informed of the role they need to play in their recovery and eventual discharge. However, most patients we spoke to were unaware of any activities taking place on the ward
- Patients express high levels of satisfaction with the care they receive on Ward 28.
- Most of the staff were not familiar with the "Reconditioning Initiative" by name and few of the patients we saw were dressed in their day clothes

Recommendations

- Communicate to staff the positive feedback received from patients regarding their work.
- Consider the suggestions made by visitors for future improvements.
- Advise patients about any activities taking place on the ward each day and actively encourage their participation.
- Regularly remind all staff about the "Reconditioning Initiative" to further develop and embed the approach and ensure it is shared language across the Trust.



Provider Response

'Thank you for the feedback which you have provided following your visit to Ward 28 at the Royal Shrewsbury Hospital. The visit was to review the experiences of patients being nursed within the area, with a particular focus upon discharge planning and the prevention of deconditioning with the 'Get Up, Get Dressed, Get Moving' initiative.

We value any feedback, particularly from our external partners. As a team we are always striving to improve the experience of care of our patients and your comments and recommendations are welcomed. The following actions have been identified in response to the feedback and recommendations which have been made:

Identified area for improvement	Provider response, including steps to be taken	Who will oversee this?
Communicate to staff the positive feedback received from patients regarding their work.	Ward 28 regularly receives compliments and thanks from patients and relatives. Until recently cards were displayed prominently on a notice board at the entrance to the ward. Due to the development of our patient social area we have transferred this board and are relocating it onto the staff room wall for visibility for our team. We are developing a monthly written staff briefing to support how information is communicated with our team across frailty service and this will include compliments and feedback from patients and relatives.	Ward Manager Ward 28
Consider the suggestions made by visitors for future improvements: "Possible future enhancements suggested included: more chairs for visitors; a space for patients to interact socially; and more organised activities".	Since the visit we have worked with our dementia lead to develop a small social area on the ward. Work on this has started in March 2025 with painting of the walls in a dementia friendly colour palette, high back comfortable chairs have been ordered using charitable funds and we have had a table, bookcase and books donated. The patient social area will support with our frailty vision to encourage mobility, facilitate therapeutic assessments and prevent (cont)	Ward Manager 28 with collaboration with Ward Manager 9



Identified Area for Improvement	Provider response, including steps to be taken	Who will oversee this?
	deconditioning as well as improving patient experience. We are working with our Powys colleagues to include resources for our Welsh speaking patients and further reaching out for resources for male patients recognising the gender	
	inequalities within the 'Get up, Get dressed and Get moving' project. We are also seeking charitable funds for purchase of additional visitors' chairs.	
Regularly remind all staff about the "Reconditioning Initiative" to further develop and embed the approach and ensure it is shared language across the	As part of the new staff briefing that will be sent out monthly to staff this will include a regular feature for an update on the reconditioning programme. A copy of this will be displayed in the staff room and doctor's office to ensure it is visible to all members of the multi-disciplinary team.	Matron to extend Invite to the Frailty governance team to the Reconditioning Lead
Trust	The Reconditioning Lead will be joining Frailty governance to share the latest update from our projects including data sharing	

Acknowledgements

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