



Enter & View Visit Report

Details of Visit

Service Name and Address	Ward 27 (Respiratory) Royal Shrewsbury Hospital
Service Provider	Shrewsbury and Telford Hospital NHS Trust
Date and Time	20 th May 2016 14.00 - 15.30
Visit Team (Enter & View Authorised Representatives from Healthwatch Shropshire)	2 Healthwatch Shropshire Authorised Representatives

Purpose of the Visit

To explore the quality of the patient experience.

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.

Context of Visit

Shrewsbury and Telford Hospital NHS Trust (SaTH) provides services at the Princess Royal Hospital (PRH) in Telford and the Royal Shrewsbury Hospital (RSH) in Shrewsbury. Both hospitals can be used by residents of Shropshire and Telford & Wrekin so the two Healthwatch organisations, Healthwatch Telford & Wrekin and Healthwatch Shropshire, work together to visit wards at the two hospitals. This visit to the Respiratory ward at Royal Shrewsbury Hospital (RSH) was one in a series of such visits. A representative from Healthwatch Telford & Wrekin was not available to join the Healthwatch Shropshire visit team on this occasion.

Enter & View visits are done by a team of specially trained volunteers called Authorised Representatives. These volunteers are not experts in healthcare and report only on what they see and hear during the visit.

This visit was announced.

What we were looking at

We looked at the quality of patient experiences in the ward. In particular we asked patients about:

- their comfort and ability to relax
- their confidence in the staff
- whether they felt supported by staff
- if staff listened to them
- if staff communicated well.

What we did

The ward manager told us about the ward. The ward sister told us which patients we should not disturb because of their medical condition.

We spoke to 12 patients. Each patient completed a brief questionnaire, either in discussion with us or on their own. One patient, and the carer of another patient, chose not to speak to us after we had introduced ourselves.

What we found out

The Respiratory ward has 38 beds. One clinical room is designated for non-invasive ventilation (NIV) but, we were told, it is usually used as an extra bedroom. There are five bays each with 6 beds, a bay with 4 beds, and four side rooms as well as the NIV room. At the time of the visit, all 39 beds were occupied. We were told this is usually the case.

It was clearly a very busy ward. We observed staff in some of the bays, often writing clinical notes, but observing what was happening and responding quickly if patients needed help.

Privacy was respected well, with appropriate use of curtains during treatments or personal care, and staff making sure patients were covered or dressed.

The results of the 12 completed questionnaires are summarised below:

During your stay, have you felt...?	Not at all	Not very	Quite	Very	Don't know
Comfortable			6	6	
Able to relax			9	3	
Confident in staff ability			3	9	
Supported			2	10	
Listened to and understood			3	9	
That staff communicated with you well			2	10	

Several patients who have long term respiratory conditions told us they have had many visits to this ward over several years. They all said how much busier the ward has become over the last ten years or so.

Comfort and ability to relax

15 out of 24 responses said they only felt 'quite' comfortable and able to relax, whereas responses to all other questions were more positive.

Some patients said that it was noisy because it was a busy ward. One patient in the bay nearest the nurses' desk said it was very noisy at night and the light from the corridor disturbed them. We asked people whether they were able to relax and whether they could sleep at night. Some patients said they had no problem; others said that it is always difficult to sleep in hospital.

They said the temperature in the ward was fine and their personal belongings were stored in their bedside lockers.

Comments on the food included the following:

- 'Wonderful food. Give it 2 stars.'
- 'We get what we want from the menu and it is hot.'
- 'The food is warm and tasty - certainly edible.'
- 'The food is not bad, though it isn't what I normally eat.'

Three patients who had used the call button said that it was always responded to quickly.

Confidence in the staff

All the patients praised the staff, one saying that 'they always introduce themselves, use my name and say why they have come and what they are going to do'.

Several patients said that there have been some changes among the staff during their stay. One patient said that 'they know about you even if you haven't seen them before'.

One patient said that on the previous day a member of staff did not appear to understand how the machine to take clinical recordings worked and the patient did not have confidence that anything was written down at that time or that the member of staff asked for help in using the machine.

Another said they had been admitted to the ward many times over several years 'the staff are much busier now, but they still find time to have a bit of banter'.

Other comments included:

- 'The treatment they provide is fine and all the staff are friendly apart from one or two.'
- 'The staff are great on the whole but there are one or two who are so focused on their task, they don't see you as a person'.
- 'One or two you can have a laugh with even though they are busy.'
- One named member of staff was described as 'brilliant'.

- 'I feel that I have been well looked after' and 'they look after you really well'.

Support from staff

All the patients said they knew what was happening with their care. One patient had been admitted to the ward on previous occasions and was full of praise for the treatment they received.

One patient showed us the portable oxygen cylinder they were provided with to encourage them to move around. Another patient in a nearby bed said that they were not encouraged to get out of bed, even though they would have liked to do so. They had a walking frame at home and would have liked to have one provided whilst they were in hospital.

Patients said visitors are welcomed to the ward, and one patient said that they are even welcomed out of visiting hours. There were two or three visitors at several bedsides and we saw a nurse gently take a chair from an elderly visitor, to position it for them by the bedside.

All of the patients we spoke to had transferred from either the Accident and Emergency Department, or an assessment ward. They all said that the transfer was done smoothly, or that they were too ill at the time of transfer to know what was happening.

Staff listening and communication

Four patients said that nearly all the staff communicated well with them, but one or two didn't. Another patient said they had a speech impediment, but staff always took time to listen to them and make sure they understood what they were saying.

Most patients said that they were kept informed by staff and that staff listened to their questions and answered them clearly. One patient was being discharged on the afternoon of our visit and three others had been told that they would be discharged the next day. All of them said that staff had spoken with them about going home and that they were looking forward to it.

Additional Findings

Because there is so much pressure on beds, patients requiring non-invasive ventilation cannot receive it in the NIV room because it was being used as an extra bedroom.

Summary of Findings

- Patients said that:
 - they were looked after well
 - the ward was very busy and so sometimes it was noisy which made it difficult to rest
 - they had confidence in the care and treatment they received
 - the majority of staff communicated with them well.
- Most patients said that they were kept informed by staff and that staff listened to their questions and answered them clearly.

Recommendations

- To consider if anything can be done to reduce noise levels
- To ensure agency staff are confident about using specialist equipment on the Respiratory ward

Service Provider Response

The Associate Director of Nursing (Quality and Patient Experience) for Shrewsbury and Telford Hospital NHS Trust (SaTH) has provided us with the following response to this Enter and View visit and report:

Thank you so much for your visit and report. The assessors were very polite and friendly people, helping to make the experience a positive one. External reports are always of assistance in helping nursing and medical staff improve the patient care that they deliver. The report does include the following 'Because there is so much pressure on beds, patients requiring non-invasive ventilation cannot receive it in the NIV room because it was being used as an extra bedroom.' Can I please assure

yourself and our service users that anyone requiring Non-invasive Ventilation (even if the room is in use) will always receive the treatment they require either on ward 27 or on other wards, provided by highly qualified experienced members of staff. The nursing staff will then arrange for the patient receiving NIV to be transferred to ward 27 to continue their highly specialised treatment, at the soonest possible time.

The Associate Director of Nursing and Ward Manager have provided us with the following response to our recommendations:

To consider if anything can be done to reduce noise levels

1. All staff to be made aware of the visit from Health Watch Shropshire and their findings via weekly team brief. Read and Sign book to be used
2. Staff to be told to reduce their voices when doing handover in the morning
3. Staff asked to think about their foot wear noise
4. Staff to be told to turn main lights off as soon as possible
5. Staff to be asked to consider their own noise and the implications of this on the patients.

These actions to be done immediately - Ward Manager to do spot checks during night shift and at month 1 (July 2016), Month 3 (October 2016) and Month 6 (January 2017).

6. Patient Comfort kits to be obtained and offered to patients
7. To assess the effectiveness of the Patients Comfort kits (eye mask and ear plugs) by speaking to patients who have used them
8. SaTH Patient Engagement and Involvement Panel (PEIP) to be contacted within 1 month to ask for support and to assist in the evaluation of the ward noise levels and the effectiveness of measures put in place
9. Turn down the volume of patient call bells where safe to do so and lower volume of phone ring tone or turn onto visual alarm
10. Staff to advise other patients of the impact on other patients if they are using iPods, iPads or laptops and to turn volume and screen brightness down.

All actions to be overseen by the Ward Manager.

To ensure agency staff are confident about using specialist equipment on the Respiratory ward

Although agency nurses are not expected to use specialist equipment, it is expected that they are able to use basic nursing equipment, e.g. Vital signs monitors, infusion devices.

To ensure staff are confident about using specialist equipment we:

1. Keep the use of Agency Nurses to a minimum
2. Attempt to only have agency nurses who frequently work within SATH
3. Assess any new agency nurses competencies to use the basic equipment on the ward when starting the shift
4. Contact Nurse Bank manager if any nurse seems unable to use the basic equipment within the hospital to ask for further training
5. Seek guidance and advice from Temporary Staffing CPE Rachel Armstrong

This is in place and will be overseen by the Ward Manager and all Ward Sisters.

Acknowledgements

Healthwatch Shropshire would like to thank the service provider, service users, visitors and staff for their contribution to this Enter & View.

Who are Healthwatch Shropshire?

Healthwatch Shropshire is the voice for people in Shropshire about the health and social care services delivered in their area. We are an independent body providing a way for people to share their experiences to help people get the best out of their health and social care services. As one of a network of Local Healthwatch across England we are supported by the national body Healthwatch England, and our data is fed to the Care Quality Commission (CQC).

What is Enter & View?

Healthwatch Shropshire gather information on peoples experiences of health and social care services and there are times when it is appropriate for Healthwatch Shropshire to see and hear for ourselves how services are being delivered: these visits are called 'Enter & View', they are not inspections.

Teams of specially trained volunteers carry out visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows Healthwatch authorised representatives to observe service delivery and talk to services users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies.

Get in Touch!

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