

Enter and View Report

Visit details

Service address:	London Road Community Hospital, London Road, Derby, DE12QY
CEO:	Sue James
Service Provider:	Derby Hospitals NHS Foundation Trust
Date and Time:	Thursday 16 January 2014
Authorised Representatives:	Rebecca Johnson, Steve Barr.
Reason for visit:	Healthwatch Derby Enter and View Program
Declaration of interest:	There were no declarations of interests on this visit.

Acknowledgements

Healthwatch Derby would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View program.

What is Healthwatch

Healthwatch Derby is an independent consumer champion created to gather and represent the views of the public. Healthwatch Derby plays a role at both a national and local level, making sure the views of the public and people who use services are taken into account.

What is Enter and View

Part of the Healthwatch Derby program is to carry out Enter and View visits. Healthwatch Derby authorised representatives carry out visits to health and social care services to see how services are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allow representatives of Local Healthwatch organisations to enter and view premises and carry out observations for the purpose of carrying on of Local Healthwatch activity including hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service, but they can also happen when services have a good reputation – so we can learn about and share examples of what they do well.

Disclaimer: This report relates only to the service viewed on the date of the visit, and is representative of the views of the service users, visitors and staff who contributed to the report on that date.

Purpose of the visit

This visit was part of Derby Hospitals NHS Foundation Trust monthly PLACE Inspection (Patient Led Assessment of the Care Environment), and was therefore an unannounced visit.

Methodology

Derby Hospitals NHS Foundation Trust carry out monthly PLACE Inspections at each of their sites where they produce an internal action plan. Healthwatch Derby contacted the lead, Debbie Wild, Contracts Monitoring Officer, to arrange for the Enter and View representatives to take part.

Introduction/summary

London Road Community Hospital is a community based hospital located in the city centre. It provides rehabilitation and intermediate care, independent facilities and some outpatient services including dermatology. During the tour, representatives visited various stairwells and fire exits, the Female G.U.M clinic, Orthotics, Ward 3, 4, 5 and 6 and The Grove and were invited to sample a selection of the three course meals from the hospital lunch menu.

Observations

Junctions and stairwells

Observations

- The stairwell at Junction 2 was clean and well maintained.
- The stairwell lights at Junction 2 have been set on economy mode so the stairs are dark and unwelcoming.
- The ceiling tiles near the vent were dirty, needed cleaning or replacing.
- The glazing on the door from the stairwell to the basement was dirty and smeared.

Basement corridor

Observations

- The corridor looked very clinical and required chairs and artwork to make it more welcoming.
- The elevator doors required repainting.

Female G.U.M.

Observations

- A bright, well-kept and clean environment.
- A calm and welcoming atmosphere.
- A broken tap in the ladies toilet needs repairing or replacing.
- One of the lights was out in the ladies toilet.

Orthotics

Observations

- Nice informative displays in the reception area explaining about good Orthotic care.
- The Reception desk is too high for wheelchair users. The lower section of the desk has been blocked by a chest of draws and a printer has been placed on the desk.
- The walls have been damaged by Sellotape, which has been used to hang posters.
- A woman was sat in the reception struggling to put on a new pair of Orthotic shoes, whilst the staff appeared to be having a conversation in a side room. The woman complained quite loudly that the laces were too short and that she could not fasten them by herself. Only after one of the representatives offered to help the lady did one of the staff leave the office to assist.

Ward 5 & 6

Observations

- Patients had been encouraged to knit and many of their completed products had been passed to charities. A display board featuring their work and explaining how the knitting had helped people was on prominent display in the entrance.
- Staff were playing a radio at the nurse's station with modern music. Although music on a ward can be therapeutic, the type of music didn't seem appropriate in a rehabilitation ward.

Grove Reception

Observations

- The reception area had recently had new chairs and tables added to make it more comfortable.
- Several trolleys and cages had been left outside the storerooms in the corridor between the reception area and the wards.
- The comment box next to the vending machine was used as a dustbin and full of comment cards ranging from recent comments to comments received 4 years ago.
- The reception area looked very clinical and sparse and didn't appear to be used by patients and visitors.

Ward 4

Observations

- Linen trolleys were covered & the linen point is well kept.
- Notice boards display mixed staff & visitor information.
- Men's Bay B shower curtain needs replacing and a mirror needs moving to shaving point.

Ward 3

Observations

- Ward 3 was nice and bright, it appeared clean and well kept.
- The housekeeper was observed attending to patients, helping them to eat and assisting with personal care.

- Food is well presented with a choice of crockery i.e. patients were being asked if they would like their soup served in a soup bowl with a spoon or in a mug.
Staff were observed feeding patients at meal times including encouraging a patient who kept falling asleep to eat.

General

Observations

- The signage indicating fire exists was not consistent, some signs would display a route for a disabled person only to change into a traditional fire exit sign which may not be appropriate for a disabled person to use.
- No stairwells visited had either a sign indicating a refuge area, an intercom or a visible Evac Chair.

Concerns Resolved During Visit

- The toilet entrance was blocked by wheelchairs (Addressed during visit).

Food Tasting – The Enter and View Team tasted the full lunch menu

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| <ul style="list-style-type: none"> • Quiche • Creamed Potatoes • Carrots • Peas • Bacon and Mushroom Pasta • Roasted Potatoes • Cheese Salad • Chicken Salad • Egg Sandwich • Tuna Sandwich | <ul style="list-style-type: none"> • Mince Meat Pie and Custard • Fruit and Ice Cream |
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Food Tasting

Observations

- Food taste was to a good standard.
- Some of the representatives felt the sandwiches were dry.

Interview/Survey findings

During the visit, Healthwatch Derby left patient, visitor and staff surveys for service users, their friends and family, and those who provide care to complete anonymously. A total of 8 surveys were completed within the two week timeframe.

Patient Surveys

- 3 responses were from Ward 5 and 2 responses didn't indicate a ward.
- 5 out of 5 responses said the doctors and nurses talked to them about why they were in hospital.
- 5 out of 5 responses said they knew what was wrong with them enough to be able to

explain it to a close friend.

- 4 out of 5 responses said they felt involved in deciding what treatment they got for their medical condition.
- 2 out of 4 responses said they had been offered information and leaflets about their medical condition.
- 1 out of 5 responses said they had seen a patient handbook.
- 1 out of 5 responses said they had been told where they or their family could get more information about their medical condition.
- 3 out of 5 responses said they were aware of the dignity champion for their ward.
- 3 out of 5 responses said there was always someone to help you when they needed it.
- 3 out of 3 responses said they received help at meal times when they needed it.
- 0 out of 3 responses felt their relative or friend had been told they could help at meal times if they needed it.
- 5 out of 5 responses said they always got help with washing and bathing if they needed it.
- 3 out of 5 responses said if they needed help toileting, they always got it on time.
- 1 out of 4 responses said a family member or someone close to them has had the opportunity to talk to a doctor with their permission.

Visitor Surveys

- There were no surveys received from visitors on this visit.

Staff Surveys

- The respondents didn't indicate which wards they were from.
- 1 out of 3 responses said they felt there were enough nurses on shift at this hospital to meet the needs of the patients.
- 1 out of 3 responses said they felt there were enough care assistants on shift to meet the needs of the patients.
- 2 out of 3 responses said they felt there were enough housekeeping staff on shift to meet the needs of the patients.
- 1 out of 3 responses said they felt satisfied with their present jobs.
- 1 out of 3 responses said they felt they were asked to do things against their better judgement.
- 1 out of 3 responses said they felt they had enough time to fulfil their duties on shift.
- 0 out of 3 responses said they felt they received adequate support at this hospital, both physically and emotionally.
- 1 out of 3 responses said they felt their work was valued at this hospital.

Conclusion

During the visit it was apparent that trends were emerging, namely issues around:

- Fixtures and fittings, including the lighting in the stairwell at Junction 2, lighting and taps in the female toilets in the G.U.M. Clinic and the shower and shaving provision in the en suite on Ward 4 Room 3.
- Access for wheelchair users approaching the reception desk in Orthotics.
- Staff/patient interaction – the Enter and View Team observed one example in Orthotics where staff were not attentive to the needs of a patient attempting

to put on shoes; and one example on Wards 5/6 in regards to the volume of the radio.

- The provision for patient feedback in the Grove Reception.
- The fire exit signage for wheelchair users.

Evidence of best practice

Evidence of best practice include:

- Monthly PLACE Inspections are conducted at this hospital site by the trust in addition to the annual PLACE Inspection, involving patient representatives to produce an internal action plan.
- 5 out of 5 responses said the doctors and nurses talked to them about why they were in hospital in a way they understood.
- 5 out of 5 responses said they always got help with washing and bathing if they needed it.
- The housekeeper on Ward 3 was observed attending to patients, helping them to eat and assisting with personal care.
- Food is well presented with a choice of tableware i.e. patients on Ward 3 were being asked if they would like their soup served in a soup bowl with a spoon or in a mug.
- Staff on Ward 3 were observed attending to patients, feeding with dignity including encouraging a patient to eat who was struggling.

Recommendations

Recommendations include:

- Fixtures and fittings need to be maintained in line with policies and procedures to minimise a health and safety risk.
- The Trust needs to ensure that the various departments are able and ready to accept wheelchair users.
- Staff must ensure that patient needs are met in a respectful manner.
- Patient feedback needs to be encouraged on the wards to allow for their opinion to be taken into account.
- The fire exit signage needs to be clearer in terms of evacuating not only patients but visitors as well.

Service Provider Response
