

What People Think of District Nursing

December 2018

This report is based on conversations or responses freely given by members of the public. Where possible quotations are used to illustrate individual or collectively important experiences.

Engagement officers collect responses verbatim and we also present these in our final report as an appendix. This is important in showing the accuracy of our analysis, and so that further work can be done by anyone wishing to do so.

A full explanation of the guiding principles and framework for how we do engagement and analysis can be found online on our website www.healthwatchwiganandleigh.co.uk.

Please note that this report relates to findings observed and contributed by members of the public in relation to the specific project as set out in the methodology section of the report.

Our report is not a representative portrayal of the experiences of all service users and staff, only an analysis of what was contributed by members of the public, service users, patients and staff within the project context as described.



- Healthwatch Wigan and Leigh has received a number of comments, both through engagement activity and from the Information, Advice and Guidance team, about people's experiences of the District Nursing Service.
- The King's Fund has produced a Quality Framework for District Nursing suggesting nine characteristics of good quality care. We used this framework to speak to patients and carers accessing the District Nursing Service.
- This information and report from this piece of engagement should inform Bridgewater Community Healthcare NHS Trust, Wrightington, Wigan and Leigh NHS Foundation Trust, and Wigan Borough Clinical Commissioning Group.

Positive

- On the whole people were happy with their experience of the district nurse service.
- People liked when the same team of nurses visited them over time.
- Largely staff were well mannered and seen as pleasant.
- A phone line was offered for contacting the district nurse team.
- Family were involved when appropriate.
- Nurses were said to have the skills needed to treat most of the cases they were involved in.



Critical

- However there were four key areas in which people were not as content; being treated as a whole person, continuity of visits, support from other services and advice and information given.
- Some people felt there were not enough appointments available.
- At times appointments get cancelled without being well communicated. This has an impact for those affected.
- The phone line for the nurses operates by answer phone, this means it can take some time to get a reply.
- The personality of individual nurses has an impact on care, a small number of comments relate to not getting along.

What have we asked people ?

- What are your experiences of the District Nursing Service in Wigan Borough?

Who did we talk to?

- Patients and carers of those who use or have used the District Nursing Service.
- The sample size will be between 50-80 individuals.

How we carried out this research

- Healthwatch Wigan and Leigh developed a set of questions based on comments collated from local people's views gathered when establishing the work plan priorities for 2018/19. These questions were used to create an online survey and used in conversations with individuals during engagement opportunities within the project period.
- An online survey was distributed to those individuals held on the Healthwatch Wigan and Leigh members and contact database and social media channels. We used a snowball sampling method, by asking to gatekeepers such as the voluntary and statutory sector to publicise the survey and encourage people to participate.
- We collected a basic set of demographics information about the context in which an individual accesses the service and responses to questions about the service.
- Data was analysed and 'qualitative and quantitative' themes identified. Please see our Research Framework April 2018 for further details on how we analyse data.

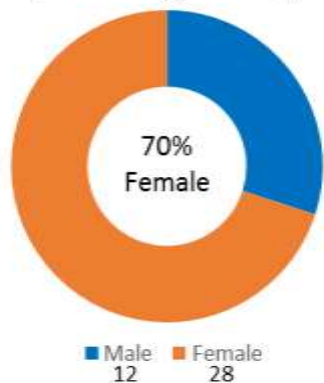
1. Who has completed this survey?
2. Can you tell us why you or your loved one is or was using the District Nursing Service?
3. Did you feel that the District Nurses cared for you or your loved one as a whole person and considered your other health conditions, social issues and wider circumstances and not just a particular condition?
4. Did you or your loved one receive continuity of care by the same nurse or group of nurses so that you did not have to repeat information and were able to build a relationship and trust?
5. How happy were you with the personal manner of staff? Were you or your loved one treated with care, compassion, dignity, respect?
6. Were you happy with the scheduling and reliability of appointments? Were you or your loved one given advance warning of any changes to appointments?
7. Do/did you know what to do or who to contact between District Nurse appointments for information, advice or support or in case of emergency?
8. Do you feel that family members and/or carers were involved and were their contributions valued and recognised?
9. Did you feel that your District Nurse supported you or your loved one in any contact with other services and identified the need for other services to support you to access them?
10. Were you confident in the clinical skills, knowledge and expertise of your District Nurse?
11. Were you offered any information and/or support to self-manage your condition?
12. Is there anything else you would like to tell us about your care from the District Nursing Service?

In this study we spoke to 41 people and collected 144 comments.

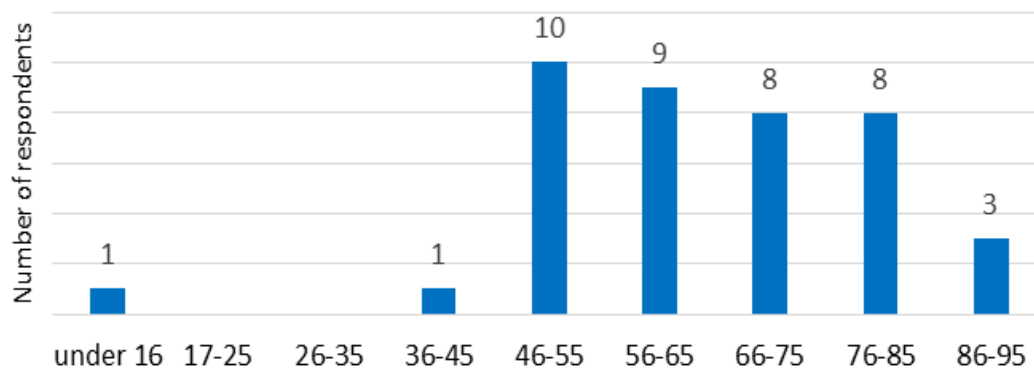
District Nursing - Who we spoke to

Engagement site	Date	Area of Wigan	People	
	2 nd August	Leigh Infirmary	Wigan North	11
	9 th August	Royal Albert Edward Infirmary, Wigan	Wigan Central	8
	15 th August	Boston House, Wigan Health Centre	South Wigan and Ashton North (SWAN)	4
	16 th August	Think Ahead Carers Group	Lowton & Golborne (LIGA South)	6
	16 th August	Pemberton Health Centre	Leigh	1
	22 nd August	Golborne Health Centre	Tyldesley, Atherton, Boothstown, Astley (TABA)	2
	23 rd August	Atherton Health Centre	Ince, Hindley, Abram, Platt Bridge (LIGA North)	5
	29 th August	Chandler House, Worsley Mesnes Health Centre	Other	4
	30 th August	Platt Bridge Health Centre		
	5 th September	Claire House, Lower Ince Health Centre		
	6 th September	Wrightington Hospital		
			TOTAL	41

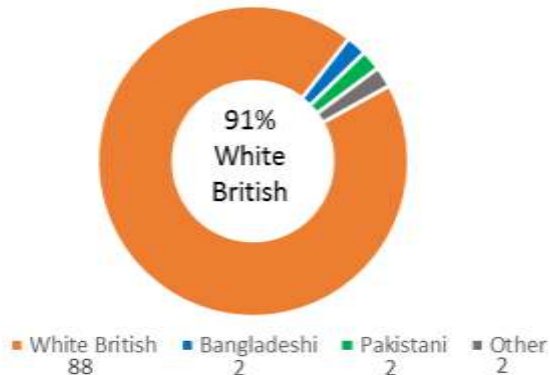
Respondent gender (n=40)



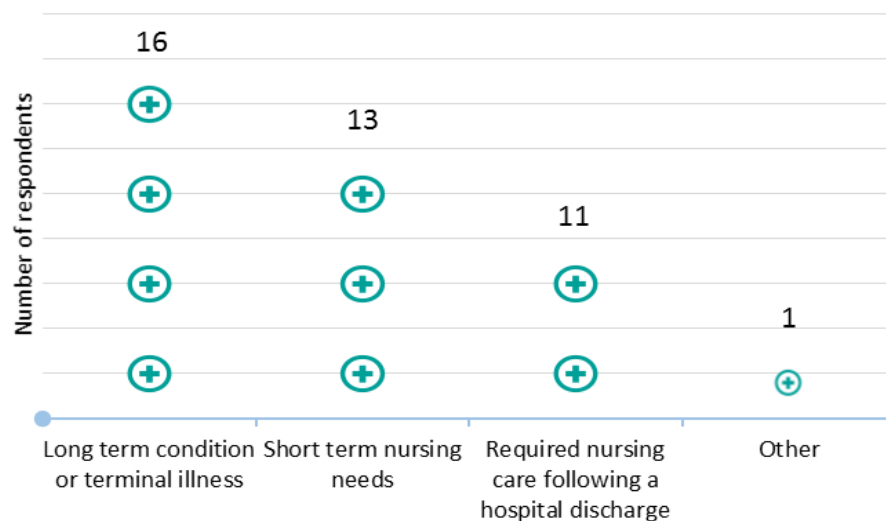
Respondent age (n=40)



Respondent ethnicity (n=39)



Why were people using the District Nursing Service? (n=41)



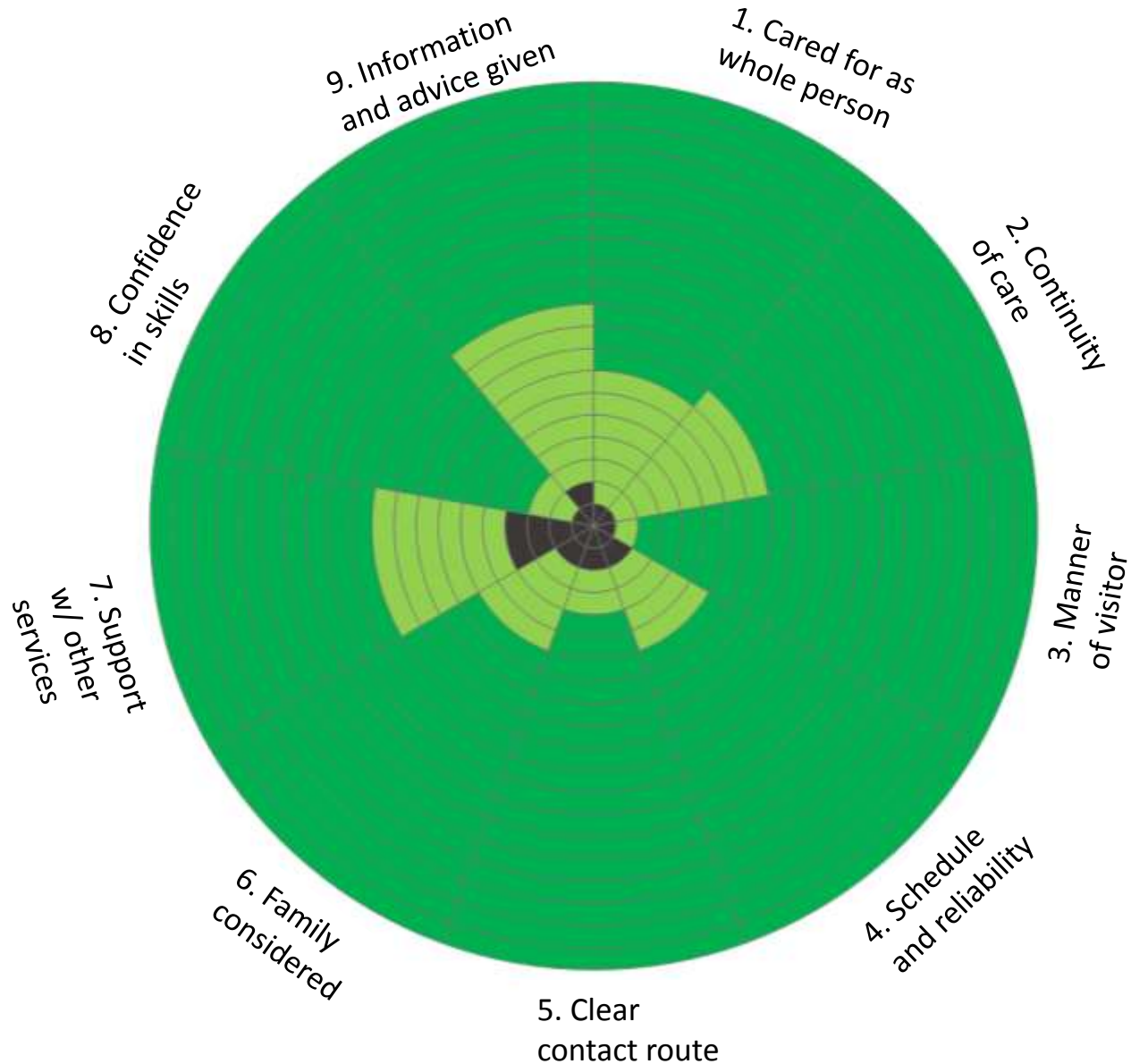
Do you use the internet? (n=40)



Question	Percentage of responses %		
	Yes	No	n/a
1. Whole	71	27	2
2. Continuity	63	34	2
3. Manner	93	5	2
4. Schedule	76	20	5
5. Contact	83	12	5
6. Family	78	17	5
7. Support	49	32	20
8. Confidence	90	7	2
9. Information	51	37	12

Were you happy with these aspects of district nurse care?

(for each question n=41)



Response key	
Yes	Green
No	Light Green
n/a	Dark Grey

Each section slice is made up of 20 parts, therefore each part represents approximately 5%.

The chart is intended as a visual guide, the true values can be found in the table above.

What people thought was working well:

General quality of care important. There was also positivity around staff.

“They are always polite and helpful as I am frightened of needles.”

“They are lovely and check up on me when I come to see them.”

“I use the District Nurses for a recurring problem I have and she understands that I have other health conditions and always checks up on me and how I am doing. I have complete confidence in the DN here at Platt Bridge Health Centre, she is very good and will always fit me in although I should attend Hindley Health Centre but I can never get an appointment, no-one can because they have closed the GP surgery in Hindley Green and now everyone has to attend Hindley Health Centre on Liverpool Road so you can never get an appointment with a GP or a nurse.”

Continuity of care was valued

“It wasn't always the same nurse who came to mum but it was the same group of nurses so she did get to know them.”

“It wasn't always the same nurse but over 16 weeks there were 2 or 3 nurses but they knew my son's situation and the continuity of care was what mattered.”

What people thought was working well:

Communication

“Mum's nurses were brilliant. They would ring me up and tell me what they had done on that visit or they would leave me a note knowing I would be calling in at some point in the day.”

“The nurses were reliable and always attended but mum is over 80 so if she was told they were coming at 2pm and they hadn't arrived by 2.05pm she would start to panic and ring me. I think in some circumstances it would help if the nurse could phone ahead and tell the person that they may be 5/10 minutes late. It wasn't a problem for us but it did disturb mum.”

Information

“A folder was left in each of my clients houses with all information needed.”

“I was given a phone number to contact for any problems with appointments in case I had to change the time or date.”

“I was left dressing packs if needed and was told what to do or who to contact if I needed a change between appointments.”

“I have a contact number and I have used it on a couple of occasions and they have always answered and offered advice or help.”

What people had concerns about:

Pressure and staff levels

“They are under too much pressure to deal with anything other than the reason they are visiting you.”

“Gave good care for what they had been sent for, but find time factor didn't allow for other health conditions to be considered.”

Quality of care

“My husband came out of hospital requiring care from the district nurses but they didn't have much knowledge of what they were supposed to be doing and how to treat him. They were inefficient, often had the wrong dressings and unreliable and they had no understanding of the impact of these things on my husband. He already felt ill and vulnerable and they had no consideration of how their actions affected him.”

“The DNs only really saw the wound they were dressing they didn't ask anything about it or what had happened and yet it was the result of a serious operation, as a result of an emergency admission with suspected pneumonia, but on investigation an abscess was found in his leg. We were warned that he could lose the leg and the whole episode was very frightening.”

Knowledge and treatment

“Their enthusiasm for my care was non existent. Luckily I am good at finding out information for myself. God help the ones that aren't!”

“Only focussed on reason for visit.”

“They often didn't have the right dressings with them, when they did turn up. They said they would bring a cream out as his skin was getting sore but they never did. They didn't seem confident in themselves to look after his wound when it was so near to the drain and stoma.”

What people had concerns about:

Issues around appointments

"I needed an emergency catheter change and rang for them to visit me at home. I had a hell of a job getting them to visit when it wasn't my scheduled home visit. I was quite ill but they still dithered about coming and even offered to pay for a taxi to get me to them. In the end I told them to forget it and I would go to A&E, but in the end they did visit but it was a rushed unfriendly job."

"Initially we were not told we had to contact district nurses ourselves. Consequently by the time we did phone them there were no appointments for over a week."

"1. they were not flexible in understanding my temporary location conditions and did not understand how important the treatment I needed was, even though the hospital doctor said that I needed it and would get it. 2. The 1st nurses who came were very understanding and did an excellent job. The 2nd nurses that came said I did not need treatment and refused to return. I felt she had been forced to come to me and did not like being told to be flexible. Her attitude towards me was un-friendly."

Continuity

"It was always a different nurse who visited. Often no-one turned up and my husband would get worked up."

"More flexibility should be given to the patient especially when they are quite ill and we should get the same nurse or small group of nurses on a constant basis."

"It was always a different nurse turning up - actually that's if they did turn up as they often didn't and we would have to telephone to find out where they were, but because you only reach an answerphone you then have to leave a message and wait until somebody phones you back, which could be the next day and then you have missed that day's visit."

Communication

"They never offered any advice or support and there were other things that could have helped, but we had to do our own research."

"Not really, the nurse just dealt with the wound and never asked anything or offered anything."

"It is difficult to get hold of them on the phone. They have an answerphone and sometimes they get back to you but many times I have to keep chasing them. They need to answer the phone. No-one ever does and if you leave a message they don't always phone you back, so I have to keep ringing. I'm not sure if they are short staffed or just don't answer to save time."



It is useful to look at the responses to our yes/no questions on slide 9. There and in the table provided people indicated they are largely happy with the service they are receiving from the district nurse team.

In particular the positive comments received show that the quality of care and continuity in those visiting was valued by people in this study. Regarding the associated communication and information, people gave examples where this had been handled well.

We also collected a number of critical comments within this study. Largely these comments stemmed from people feeling their care did not meet expectations, for example not having the right dressings. Communication was also a factor in critical comments, with difficulties getting hold of the district nurses by phone, as well as inflexible appointments being important. While some people were getting continuity of care, other people were not finding this, though they valued it highly.



- People were largely happy with the quality of care received.
- Continue to prioritise continuity of care.
- For some people there were difficulties in contacting the district nurse team due to the use of an answerphone, a phone line that someone answers gives patients more confidence.
- When people receive care from the district nurses they expect them to bring right equipment. Several people mentioned that DN's did not always have the right dressings. If the team mentions some kind of treatment they might offer, this should be followed up or it can lead to disappointment for patients.
- Several people mentioned the fact that DN's only treated the specific issue they were looking at (eg dressings) when a more holistic outlook existed, with DN's enquiring about the patients wider wellbeing, people felt happier and more confident.
- Clear communication is needed to explain why appointments are offered (made available) in the way they are. In addition clarity might be provided on the role of the district nurses, and whether they should be informing patients of other relevant services.

Healthwatch Wigan and Leigh would like to thank all those that took part in this research or facilitated it to take place.