

**ENTER AND VIEW VISIT REPORT**

Sandwell Hospital

Lyndon Ward 4

22<sup>nd</sup> October 2019



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**Sandwell General Hospital, Lyndon, West Bromwich B71 4HJ**

## Healthwatch Remit

Part of Healthwatch Sandwell's remit is to carry out Enter and View visits. Healthwatch Sandwell Authorised Representatives will carry out these visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allows Authorised Representatives to observe service delivery and talk to service users, their families and carers on premises such as 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, equally, they can occur when services have a good reputation – so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Sandwell Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Sandwell's safeguarding policy, the service manager will be informed, and the visit will end. The Local Authority Safeguarding team will also be informed.

### **Acknowledgements:**

Healthwatch Sandwell would like to thank management, staff and patients for their cooperation during the visit.

### **Disclaimer**

Please note that this report relates to findings during our visit made on 22<sup>nd</sup> October 2019. The report does not claim to be representative of all residents, only of those who contributed within the restricted time available.

This report and its findings will be shared with Sandwell & West Birmingham Hospitals NHS Trust, Care Quality Commission (CQC), Sandwell MBC, Sandwell and West Birmingham Clinical Commissioning Group (CGG) and Healthwatch England The report will also be published on the Healthwatch Sandwell website [www.healthwatchesandwell.co.uk](http://www.healthwatchesandwell.co.uk)

# **Sandwell & West Birmingham Hospitals NHS Trust**

## **Lyndon Ward 4**

**Lyndon, West Bromwich, West Midlands, B71 4HJ**

Lyndon 4 is a high dependency elderly care cluster ward for 34 patients. A lot of the patients present with dementia. There are 5 single sex bays and 4 isolation rooms.

### **Purpose of the report:**

This report will detail, where appropriate, a range of recommendations based on the findings of our Enter and View visit and it is anticipated that these recommendations will contribute to improving service delivery within the service and in turn improve the service experience patients at Sandwell Hospital

In keeping with Healthwatch Sandwell's role of sharing 'good practice' in service delivery within the Sandwell Borough we visited Sandwell Hospital as part of our enter and View Programme for 2019/20

Prior to the Enter and View visit we conducted a desk top review of the most recent CQC report, based on inspections undertaken in 2019. Sandwell General Hospital was rated as 'requires improvement' across areas of 'safety' is 'well-led', 'effective' and 'responsive', and 'outstanding' in relation to caring services - with an overall rating of requires improvement.

[https://www.cqc.org.uk/sites/default/files/new\\_reports/AAAH7597.pdf](https://www.cqc.org.uk/sites/default/files/new_reports/AAAH7597.pdf)

### **Purpose of the visit:**

The purpose of our visit was to explore first-hand with patients present on the day of our visit, their experiences of the service provided during their stay on Lyndon 4, in addition to 2 concerns made to us direct regarding care.

We also spoke to staff and management about the operation of the ward including the management of staff and delivery of care.

### **What we did**

A team of four authorised representatives visited Lyndon 4 from 11:00 until 13:00 on 22<sup>nd</sup> October 2019. The Group Director of Nursing and Senior Sister were available to answer our introductory questions and give an overview of the services delivered on the ward.

Signage directions to the ward were good within the main hospital and on the 4<sup>th</sup> floor. Gaining entry to the ward was clear, via an intercom which was responded to quickly.

## A Healthy Environment

*Our aim was to measure the patient experience - that the environment promoted the right to live or spend time in an environment that is conducive to positive wellbeing.*

Staff described how noise is kept to a minimum to promote a healthy environment, although this aspect is challenging due to the nature of the conditions of the patients.

Measures included sleep packs, the introduction of the 'sleep well' campaign, decibel counters and; practically with soft-lid bins.

Disruption is limited at staff changeover which occurs at 7pm and is localised to the nurses' station. Patients confirmed that there was no disruption with noise on changeover.

We were advised by staff that medication is kept secure in accordance with local procedures. The ward sister confirmed that medication is kept in secured trolleys along the corridor and cupboards behind the nurse's station accessed by an 'Abloy'<sup>i</sup> key which is programmed to the appropriate staff. There is also an intravenous supply store.

We were told that Ward Services ensure that there are adequate resources to avoid infection e.g. hand sanitisers, paper towels, toilet paper etc. These were observed by a member of our team who spoke to a Ward Services staff member at length about the cleaning system and rotas for toilets, shower rooms and wards. It was observed that hand sanitisers were present on entry to and throughout the corridor and wards. There were also 2 hand cleaning stations with sinks in the corridor on entry to the ward. The ward was observed to be very clean and well maintained with soap dispensers and toilet roll holders stocked. There were no odours present during our visit. Patients were happy with the cleanliness at the hospital and one commented that the cleaning is done every day.

The ward corridor contained medicine trolleys and other equipment stations, all of which were put to the sides of the corridor to minimise obstruction. The nature of the ward necessitates a lot of equipment and the layout of the ward did not suggest alternative locations for such trolleys or stations. There were no handrails affixed within the corridor.

It was observed that the cleaning procedure of the male and female shower rooms presented a trip hazard due to the location of the electric socket and the cable for the floor cleaning machine. This was brought to the attention of the Ward Sister who understood the problem and identified a potential solution.

One of the toilet seats was observed to be faulty in that it was loose and slipped to one side.

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<sup>i</sup>Abloy is one of the leading manufacturers of locks, locking systems and architectural hardware and the world's leading developer of products in the field of electromechanical locking technology. ASSA ABLOY is the global leader in door opening solutions, dedicated to satisfying end-user needs for security, safety and convenience.

## Being Involved

*We wanted to find out if patients had the right to be treated as an equal partner in determining their own health and wellbeing.*

Staff informed the team how patients are informed and involved with their care and treatment process. Due to the nature and impaired ability of patients on this ward friends and relatives are encouraged to be involved for example; relatives can assist with feeding during protected mealtimes, the 'Johns' campaign<sup>1</sup> and that family are enabled to be present at end of life.

Most of the patients felt involved with their treatment. One mentioned about poor communication for obtaining test results. When discussed further it was highlighted that this concern has not been raised with a member of staff. The patient stated that they would mention this concern to a member of staff.

We observed staff being attentive and interacting with family members at the nurse's station.

To minimise isolation and loneliness there are a range of interventions for example; an activity coordinator and volunteers. Community services also visit the ward i.e. the Sapphire Service<sup>2</sup>. Additionally, staff informed us that, with the agreement of patients, they leave curtains drawn back on the bays, and the doors on two of the isolation rooms were observed to be left open adjacent to the nurse's station.

We observed during our visit that Lyndon 4 was a busy ward. When finding patients to complete questionnaire we had to be flexible in our working and take in account the patients' needs, such as whether they were being attended to by medical staff, the need for rest and how poorly they were at the time. This reduced the amount of people that could take part.

Although no visitors were expected to complete the survey on the day, they were given information on Healthwatch Sandwell and the choice to take part in the questionnaire over the phone at a time that was more convenient.

## Access

*We wanted to ensure patients had access to services on an equal basis without fear of discrimination or harassment*

The communication needs of patients is met by the Trust and the team were informed that there is access to language interpreters via Language Line. (a telephone interpreting service). This was demonstrated by the presence of a patient who could not communicate in English

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<sup>1</sup> John's Campaign is a campaign for extended visiting rights for family carers of patients with dementia in hospitals in the United Kingdom, founded on 30 November 2014 by the writers Nicci Gerrard and Julia Jones

<sup>2</sup> The Sapphire Service is a new hospital and community initiative operating across older people's wards at Sandwell and City Hospitals Trust Charity. Jointly delivered by Agewell, a local social enterprise for older people and the West Bromwich African Caribbean Resource Centre, a local charity for African Caribbean and Dual Heritage individuals and families.

whose language was identified by using Google Translate and then using this to recruit the appropriate translator.

The hospital team have not needed a BSL interpreter to date.

We were also told that the Trust has designated staff who ensure that the service is equitable.

## A Safe, Dignified, Quality Service

*Ensuring patients have the right to high quality, safe and confidential services.*

We were told that, to ensure that Lyndon 4 is a safe place, that there are robust risk assessment processes in place to minimise the risk of harm, these processes begin on admission and include: assessing the use of bed rails, ergonomics assessments, lighting of bays at night etc.

There are adequate hand sanitisers and staff adhere to safe practices while attending to patients to avoid infection. The team observed the use of disposable aprons while giving medical care. The hospital team have access to infection control nurses for advice and guidance too.

Staff are trained in the Trusts safeguarding procedures and liaise with the safeguarding team about all concerns.

We were informed that staff respond to patients requests as quickly as they can, the ward is a very busy ward, and this was observed during our visit.

For patients who are approaching end of life, care is administered that is sensitive to the needs of the patients and their relatives and friends. There is a facility of a side room where relatives are welcome to stay with their loved one as recommended by Johns Campaign. There is also a Chaplain Service which aims to assist in meeting the spiritual or religious needs of all patients and their relatives. The Trust currently employs specialist faith chaplains from the Christian, Hindu, Muslim and Sikh communities.

Staff receive regular mandatory training that is appropriate to their role. All staff are appraised and where there are training needs these are identified and met. All staff have individual action plans. The team were advised that there is a culture whereby staff are nurtured and helped to achieve identified competencies in a supportive manner.

Staff were observed to be using the hand sanitiser. Green aprons were observed to be worn during meal distribution. Clear aprons were confirmed by the Ward Manager to be worn during close procedure interactions with patients, but no such activity was observed during the visit. Blue gloves were seen to be being put on by staff preparing to attend to a patient in one of the isolation rooms.

Catheter bags were observed on the wards, none were seen to be full or required emptying. Patients with intravenous bags were observed on the ward and they were satisfactory .

The curtains to bed bays were long enough and observed to be used during attendance of a Doctor, the curtains closed fully to ensure privacy.

Patients were dressed appropriately to protect their dignity.

Recruitment of staff is a local and national challenge influenced by several issues. The Trust is aiming to address this position with open days and the promotion of flexible working to encourage people into the workforce.

## Information and Education

*Ensuring patients have clear and accurate information that can be used to make decisions about health and care needs*

Patients are communicated with, commencing on admission, about their treatment and care. This communication continues during the patients stay during ward rounds by medical staff. Information posters were displayed on the ward doors informing patients and visitors about ward visiting hours, protected mealtimes and staff uniform coding systems. There were posters on the ward doors and leaflets at entrance informing on the Purple Point Initiative<sup>3</sup>. The telephone was located in the corridor along from the ward and was tested as working.

There is a Communication Folder which contains pictures, symbols and sign languages to aid effective communication. Patients are able to choose meals from an iPad with pictures.

Relatives are communicated with directly either by telephone or private conversations. There is also a portable telephone so that patients can speak to relatives directly themselves.

The reception area to the ward was not clear. On immediate arrival into the ward there is a discharge desk which was not staffed. There was a spare desk area to the left which staff were intermittently using to conduct their work. The nurse's station is located at the end of the ward where the highest dependency wards are also located. High level signage along the corridor identified areas well and all bays and rooms were well marked. The nurse's station was the logical reception area to go to and visitors were observed communicating with staff there.

The fire exit was marked at the end of the corridor and kept clear of obstruction. Some information regarding tackling a fire was on display.

The process for patient feedback or any feedback was not on display. An enquiry with the Ward Sister verified that forms were handed to patients by the ward clerk and on discharge.

## Choice

*Patients have the right to choose from a range of high-quality services.*

We were informed that Patients are given choices in relation to food, drinks and treatment. They can access their prescribed medication as required.

We were informed that staff can discuss the menu with patients using an iPad.

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<sup>3</sup> The PPI was implemented in February 2018, it is a hotline that has been introduced to respond to concerns of in-patients or their loved ones about their care before the patient is discharged. The PPI does not address patients concerns after discharge, they are advised to contact Patient Advice and Liaison Service

## Being Listened To

*Patients concerns and views are listened to and acted upon*

Staff told us they check regularly to ensure that patients are ok and happy with their care.

Patients we spoke to felt they, and their relatives, were listened to by staff. Some patients felt they would know how to make a complaint, but none of them had heard of Purple Points Initiative.

Staff informed us that they actively listen to Patients and their families by being available on the ward. The staff use feedback from the Friends and Family Test (a tool that gives people who use NHS services an opportunity to provide feedback on their experience).

We were told that people's positive and negative feedback is displayed with what action has been taken however this was not observed during our visit. The ward is contacted regularly by the Governance Team who answer the Purple Points. This means that patients' needs can be addressed before they are discharged.

The staff informed us that there is a Learning Folder for staff so that the learning from issues raised can be shared and in turn practice changed.

Information about making complaints is included in the information folder and patients and family members are directed to the Purple Points Initiative. Also, family members can ask at the desk for the complaint's procedure.

## Essential Services

*Patients have a right to preventative treatment and care services*

There are two dedicated discharge co-ordinators available on the ward. To limit delays on discharge staff ensure that patients have their medication ready to take with them, checking with the pharmacy to make sure they are delivered to the ward on time, and also to check on the availability of transport.

A staff member said that the red bags were not regularly used. Some staff may not fully understand the purpose of the red bags.

Only one patient was at a stage to be discharged. Staff had explained to the patient why they had to stay a little longer which was to ensure the appropriate adjustments were made at home.

We were informed that the Medical Team visit the ward regularly. From admission to discharge the team aim to meet the needs of patients and their relatives to ensure that they have an effective stay on the ward and a planned discharge.

There have been occasions when the fast track discharge process has been hindered due to transport issues especially with complex cases. The transport service is an external contract.

The Senior Sister has conducted an audit around what causes delays in discharge. An example was given about a patient who was end of life and wished to go home. The discharge was delayed due to transport and the difficulty setting up an appropriate package of care. This resulted in the patients' wishes not being adhered to. HWS agreed to raise this issue in their recommendation from this visit.

## Recommendations

We would recommend the following:

- The reception area needs to be made clear for visitors on arrival.
- That the electrical socket used for the floor cleaning machine be relocated to not present a trip hazard in the shower room doorways.
- That the faulty toilet seat be replaced.
- To improve discharge of patients ensure that the transport needs and appropriate packages of care are addressed.
- That the 'purple points initiative' be better promoted.
- Ensure staff are made aware of the purpose of the red bag scheme

## Provider Comment

*We welcome the report from Healthwatch following their inspection of the Lyndon 4 ward at Sandwell Hospital. We are pleased to note that Healthwatch found that the environment was clean, tidy and that patients were enabled to have privacy when receiving care, treatment and discussions with the clinical team. Healthwatch noted that patients and family members were happy with the care received and were informed and involved in the care planning and treatment. They also note in the report that patient received information in different formats depending on their communication needs and patients felt listened to.*

*The recommendations within the report have been taken into consideration. The Trust will continue to raise awareness of the Purple Point Phone service so that patients and relatives can raise any issues on the spot that can be dealt with straight away.*

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