



# **The Harbour Conversation Project**

April 2016

Report summarising the experiences  
from service users at the Harbour

## Introduction

Healthwatch Lancashire is committed to listening to patients and members of the public and making sure their views and experiences are heard by those who run, plan and regulate health and social care services.

Healthwatch Lancashire acted as the lead on this project with both Healthwatch Blackburn with Darwen and Healthwatch Blackpool supporting the project.

Healthwatch volunteers and staff gathered survey responses from service users, family members, friends and carers who were using The Harbour facility, which is run by Lancashire Care NHS Foundation Trust.

The Harbour is a 154 bedded mental health hospital providing care and treatment for adults who cannot be safely treated at home. The hospital's ethos is to provide therapeutic care which is empowering, person centred and needs led, and focuses on promoting recovery and independence.

The hospital has single ensuite bedrooms of varying specialisms over ten wards. The wards are defined as follows:

- Churchill and Orwell - 2 Male acute mental health wards
- Shakespeare and Stevenson - 2 Female acute mental health wards
- Dickens - male advanced care need ward
- Austen - female advanced care need ward
- Wordsworth - male dementia ward
- Bronte - female dementia ward
- Keats - male Psychiatric Intensive Care Unit (PICU)
- Byron - female Psychiatric Intensive Care Unit (PICU)

The current project was to review The Harbour's service offered since its opening in 2015 and to gain insight and experience from the service users and their family members, friends and carers. This report summarises reviews from 22 service users and 14 family members, friends and carers.

**Hospital:** Lancashire Care NHS Foundation Trust - The Harbour

**Address:** The Harbour  
Windmill Rise  
off Preston New Road  
Blackpool  
FY4 4FE



## Methodology

It is often those closest to the process who are best placed to give useful feedback on the way services work and how they can be improved.

Service users of The Harbour hospital experience the process or service first hand, so they have a unique and highly relevant perspective. Service user input into designing services can be invaluable as seeing services from their point of view can open up real opportunities for improvement that may not have been considered before.

Representatives from Healthwatch Lancashire, Healthwatch Blackburn with Darwen and Healthwatch Blackpool gathered feedback by undertaking surveys with service users from a number of wards across the hospital and from any visitors passing by in the main corridor.

Two different surveys were used; one for service users and one for visitors. The service user questionnaire included 26 questions on specific aspects of their experience along with additional comments, compliments and concerns. The family members, friends and carers questionnaire consisted of 4 questions relating to their relatives or friend's experience along with additional comments, compliments and concerns.

All questions asked assessed whether services are safe, effective, caring, responsive and well led.

### **The following representatives participated in the activity:**

- Natalie Cotterell - Staff member at Healthwatch Lancashire
- Ilyas Patel - Staff member at Healthwatch Lancashire
- Amanda Higgins - Staff member at Healthwatch Lancashire
- Lindsey Hall - Volunteer at Healthwatch Lancashire
- Steven Robinson - Staff member at Healthwatch Blackpool
- Kim Wardell - Volunteer at Healthwatch Blackpool
- Gill Dowling - Volunteer at Healthwatch Blackpool
- Kim Rushton - Volunteer at Healthwatch Blackpool
- Claire Moran - Staff member at Healthwatch Blackburn with Darwen
- Fiona Isherwood - Volunteer at Healthwatch Blackburn with Darwen
- Alwyn Cooper - Volunteer at Healthwatch Blackburn with Darwen
- Dianne Adama - Volunteer at Healthwatch Blackburn with Darwen
- Madhu Pandya - Volunteer at Healthwatch Blackburn with Darwen

# Results

Healthwatch representatives were positioned in the recreational rooms in Stevenson, Shakespeare Churchill, Orwell, Austin and Dickinson wards and also outside the dementia wards (Bronte and Wordsworth) on all dates, with the exception of the evening session on Monday 14th March where Healthwatch were positioned outside the dementia wards only.

The following questions and results were obtained from speaking to a total of 22 service users.

1. We asked "Do you feel listened to?"

**50%** said yes      **23%** said no      **27%** said sometimes

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2. We asked "Do you feel safe at all times?"

**50%** said yes      **23%** said no      **27%** said sometimes

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3. We asked "Do you feel that your ward and hospital in general are kept clean?"

**73%** said yes      **23%** said no      **4%** said sometimes

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4. We asked "Do staff know your name?"

**82%** said yes      **4%** said no      **14%** said sometimes

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5. We asked "Are there enough staff on the ward to ensure you feel safe?"

**59%** said yes      **14%** said no      **27%** said sometimes

6. We asked "Do you receive your medication when you need it?"



7. We asked "Have you ever seen medication left unsupervised?"



8. We asked "Are there enough activities on offer?"



9. We asked "If you did not feel safe, would you know who to speak to? Or know what to do?"



10. We asked "Do you enjoy the food on the ward?"



11. We asked "Are you given hand wipes or have access to handwashing before you eat?"

**45%** said yes    **18%** said no    **0%** said sometimes

**37%** were not applicable (as do not feel this is necessary)

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12. We asked "Are you disturbed during meal times?"

**9%** said yes    **37%** said no    **27%** said sometimes

**27%** said they would prefer not to answer

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13. We asked "Do you sleep well at night?"

**36%** said yes    **41%** said no    **18%** said sometimes

**5%** said they would prefer not to answer

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14. We asked "Do you have a call bell/buzzer and if you press it, do staff respond quickly?"

**14%** said yes    **86%** said no    **0%** said sometimes

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17. We asked "Do you need a special diet? If so, are you catered for at all times?"

**18%** said yes, they have a special diet and are catered for at all times

**55%** said no, they do not have special diet

**4%** said they have a special diet and only sometimes are catered for

**23%** said they would prefer not to answer

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18. We asked "Do you know by name who the staff are that care for you?"

**50%** said yes    **22%** said no    **14%** said sometimes

**14%** said they would prefer not to answer

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19. We asked "Are you able to understand and read information that is given to you?"

**64%** said yes    **8%** said no    **14%** said sometimes

**14%** said they have not received any information

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20. We asked "Does the information given to you help you to make your own choices about your care and treatment?"

**54%** said yes    **14%** said no    **14%** said sometimes

**18%** were not applicable

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21. We asked "Do you know and understand what your plan of care is?"

**32%** said yes    **45%** said no    **18%** said sometimes

**5%** said they would prefer not to answer

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22. We asked "Are you aware if your relatives are kept informed of your care and progress whilst you are in hospital?"

**59%** said yes    **27%** said no    **0%** said sometimes

**14%** were not applicable

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**23.** We asked “Do staff understand and respect you?” With regards to your needs relating to:

- Age
- Level of Ability
- Gender
- Race
- Religion or belief
- Sexual orientation or gender reassignment

**68%** said yes    **14%** said no    **14%** said sometimes  
**4%** said they would prefer not to answer

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**24.** We asked “Are you able to keep in touch with friends and family?”

**59%** said yes    **9%** said no    **18%** said sometimes  
**14%** were not applicable

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**25.** We asked “Do you feel optimistic/positive about your care going forward?”

**50%** said yes    **23%** said no    **5%** said sometimes  
**22%** said they would prefer not to answer

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**26.** We asked “Are staff caring, supportive and open with you?”

**59%** said yes    **14%** said no    **23%** said sometimes  
**4%** said they would prefer not to answer



**27.** We asked “Are you treated with kindness and compassion?”

**59%** said yes

**9%** said no

**27%** said sometimes

**4%** said they would prefer not to answer

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**28.** We asked “Have you experienced any delays in your care and treatment, through no fault of your own?”

**55%** said yes

**27%** said no

**9%** said sometimes

**9%** said they would prefer not to answer

### **Quotes from service users about food:**

**“The food is excellent”**

**“You don’t get what you have asked for with the food and when it comes it’s disgusting. It’s all stodgy and horrible”**

**“I’ve only had 2 special diet meals in 9 days”**

### **Quotes from service users about the environment:**

**“I cannot sleep at night because every hour the light flashes on”**

**“I love my room and privacy here”**

**“It is very clean and well maintained”**

**“I am a really light sleeper and I keep being disturbed by a sensitive light in the bathroom coming on all the time”**

**“The torch light wakes me up every hour when I am trying to sleep at night”**

**“There is no buzzer in room. Have to come out of room to get hold of staff”**

**“There isn’t anything to do here”**

**“The activities on offer are quite childish”**

## Quotes by service users about the staff:

“Staff are excellent besides one who made me cry”

“The staff friendliness is excellent - the best place I have been to!”

“Every time I want to go into my room, I have to ask permission from a member of staff”

“Problems with written communication between staff over shift changes. Staff don't know what medication I have had that day”

“The psychiatrist is arrogant and does not listen or respect me”

“Nurses are very good”

“Staff need to deal with problems more quickly”

“Loads of staff coming and going out”

“Staff always ask me if I am okay, they don't just walk past”

“There have been different doctors throughout being here - so I keep having to repeat myself. I don't like seeing the doctors. It would be more helpful if there was just one doctor”

“The doctors do not respect me. The staff are alright”

“The doctors are not compliant with regulations. The consultant is poor in the way she deals with patients and is a bank doctor”

“I feel like everyone's singled out by the doctors.”

“Everything changes when the next shift comes on. Different things that they tell you change.”

“Staff are always on their phones.”

“I have asked to see a doctor for my swollen foot but I'm still waiting to see one”

“Different doctors all the time and I feel like I am repeating myself”

“I feel vulnerable with certain staff”

“Staff are inexperienced”

“The staff don't speak to you, and at night time the support workers close their door”

“I get no respect from anyone here”

“I have had the door slammed in my face by

consultants”

“I have difficulty in seeing staff when needed”

“There is not enough Occupational Therapy staff - things are always locked away”

“Bank staff often have to cover the usual staff shifts”

“I feel listened to by the staff”

“They (staff) talk about their own lives and it makes me feel sad because I have just been here”

“Some staff walk around with a face on and some are nice. You feel like a burden because you want a cup of tea or something but don't feel like you can ask. I'd happily make my own if they gave me a kettle and things but we're not allowed”

“The lack of staff holds back my treatment. Not getting the right information and I still need to see a doctor. They said they'd refer me for migraine but they haven't”

“Permanent staff know my name. A lot of supply staff don't”

“The staff talk to you. I worry about them with all the work they have to do”

“There's not enough staff when you need it”

“The staff change over a lot on their shifts which gets confusing”

“They (staff) talk amongst themselves. I'm not disrespecting them but it makes me feel funny”

“I came in on Thursday and was not seen by a consultant until Tuesday”

“It's too noisy. People check on you every 5 minutes and they don't knock. You wouldn't just walk into someone's house, plus there are male staff in here and I could be getting changed”

### Quotes from service users about medication:

**“My medication is hit and miss. I'd prefer to have my usual medication but my doctor has told me it is not required”**

**“I have to keep asking for my medication when I need it”**

### Quotes from service users about safety:

**“I did not feel safe at first, but I have been made to feel safe”**

**“Codes of practice were not adhered to when I was first admitted”**

**“I felt so unsafe here in the first 2 weeks, but I feel safer now”**

**“I don't feel safe on the ward. The patient that assaulted me is supervised on a 1-1 and she still managed to spit on me”**

### Quotes from service users about information:

**“There is sometimes a lack of information around when I can go home and have leave to take”**

**“I haven't been given any information to read or anything like that”**

**“Nothing is explained to me like what is the medication that I'm taking, what is it for and what are the side effects. They don't tell you anything”**

**“I do not know why I was transferred from Blackburn to The Harbour”**

**“I am unhappy as my access to the gym has been delayed, as I am waiting for a doctor's note. No information on the reason why”**

**“I would like to go and use the gym. I have been assessed and they said I could go, but they have not yet allowed me to use it and I don't know why”**

**“I have never seen my care plan”**

**“I don't have a care plan”**

## General quotes from service users:

**“Escorted walks around the grounds would be good”**

**“It has improved but there is still a long, long way to go”**

**“There is a shortage of beds here. It took me a week to move from the intensive care unit to the ward”**

**“People are sometimes discharged when they still seem ill”**

**“It sometimes feels like a prison as I can’t get out. I would like to leave sooner”**

**“Some people stay in their pyjamas all day, there is no encouragement to get dressed”**

**“I have experienced delays speaking to my mother, as my mobile phone has been taken away from me”**

**“First impression - pleasant surprise!”**

**“There is a bit of a lack of dignity”**

**“I don’t know how to get out of here. It seems to be all about this ward but there’s a whole world out there. I wish I hadn’t have come here. Other patients say they’ve been out doing things and I’ve just been here. There’s nothing to do on the ward and also close by outside the hospital. I seem to be stuck on this ward. Staff and patients talk about what they have been doing. I feel like I’m getting dragged down being here. People are going out they tell you to do stuff like bring friends and family but you can’t when you’re in hospital. It just feels like we are left. “**

**“It is lovely here with what they are trying to do”**

**“My door was left open at night whilst I was sleeping, and I did not like this”**

**“The signal is terrible. They have a phone we can use but I have my own”**

**“The whole system doesn’t work. I don’t understand why I don’t get therapy whilst I am here”**

**“It’s always kicking off in here with patients attacking staff and other patients”**

**“Other patients are a bit violent but it’s not too bad”**

The following questions and results were obtained from speaking to a total of 14 family members, friends and carers of service users using The Harbour:

1. We asked "Do you feel that your relative/friend is safe at all times?"

**93%** said yes      **7%** said no      **0%** said sometimes

2. We asked "If you had a concern or comment about the service provided, would you know who to speak to? Or know what to do?"

**79%** said yes      **14%** said no      **7%** said sometimes

3. We asked "Do you feel that The Harbour is making a difference to your relative's/friend's health?"

**79%** said yes      **14%** said no      **7%** said sometimes

**7%** said not sure

4. We asked "Has your relative/friend ever experienced any delays in care or treatment through no fault of their own, whilst at The Harbour?"

**7%** said yes      **86%** said no      **0%** said sometimes

**7%** said not sure

**Quotes from family members, friends and carers about safety:**

**“He is threatened and assaulted by other patients several times. As a parent I have not been reassured by staff and they don’t tell me when things happen, so I am always worried”**

**“He was given a flu jab on the ward, but outside we avoid them because he is allergic to egg. Thankfully they gave him an egg free flu jab but I think it was just luck. It has not been written in his book”**

**“Because of the assaults on the ward, and how it has affected him - this has delayed his discharge”**

**“There have been improvements in his health over the last few weeks but the dangers on the ward have set him back”**

**Quotes from family members, friends and carers about the environment:**

**“The information boards on the wards are very useful. They show day to day activities on the wards”**

**“They have their own rooms, so it is like being at home”**

**“I like the environment and how open the corridors and spaces are. I like the white walls; most others are old and dark”**

**“The size of the ward is better than other psychiatric wards he has been on, as they have their own rooms and there are fewer patients on the wards it is more calming for him, particularly at night “**

**“He feels like he is in prison sometimes”**

**“There are no activities - he has done relaxation once but it would be good if they had more of this kind of thing”**

**Quotes from family members, friends and carers about staff:**

**“I need him to have a slower process of discharge so that there’s support at home with professionals. I was not invited to the Care Plan Approach meeting so he went to that on his own. The nurses are supposed to let me know. The staff don’t tell me anything”**

**“Some nurses have been really good”**

**General quotes from family members, friends and carers:**

**“Everything has been really good - we have had no issues at all”**

**“First impression is good”**

**“Only downside is travelling 45 miles to visit”**

**“A great place. It is a pity that there are not many others”**

**“Excellent place - been coming here for a few months and care provided is excellent”**

**“We have been all over the country in psychiatric hospitals and I think this is one of the best we have been to, in terms of the care and facilities”**

**“He doesn't have a hospital passport. There has been no assessment of capacity and there are problems with his care plan and lack of minutes of meetings”**



# **LCFT Action Statement**

**Healthwatch Conversation Project to:**

**The Harbour, Preston New Road, Blackpool, FY4 4XQ  
April 2016**

**Healthwatch undertook a project seeking the experiences from services users at The Harbour. Healthwatch carried out two surveys, one with service users and the second speaking to family members, friends and carers of service users.**

As a result of the Healthwatch visit the following have been noted and where necessary actions to address have been developed:

- Service user responses
- Family members, friends and carers responses
- Direct quotes

**Service user responses.**

## Action 1

<b>When asked ....</b>	
<b>Do you feel safe at all times? 50% of services users reported no or sometimes.</b>	
<b>Response to findings noted. Action you will take:</b>	
<p>1.1 At the weekly patient meetings on wards we will explore with patients what makes them feel unsafe and work with them to develop and implement solutions</p> <p>1.2 Senior Matrons will review with their teams the monthly data from the Mental Health Safety thermometer.</p> <p>1.3 The Friends and Family Test is established on the adults and older adult wards, the patient feedback will be reviewed by the Senior Matrons and Modern Matrons for their respective areas, and actions will be taken based on the findings – ward notice boards will show ‘you said, we did’</p> <p>1.4 We will continue with ongoing specific work, led by Psychologists and Violence reduction Leads (VRT) around de-brief and patient welfare. Themes from debriefs by the Violence Reduction Teams are discussed by the team on a regular basis and can be escalated through the Trust Reducing Restrictive Practices group.</p>	
<b>How will you know it is achieved?</b>	<b>Date when action(s) will be completed.</b>
<p>1.1 Minutes of patient meetings</p> <p>1.2 Friends and family and mental health safety thermometer data - Q8 specifically asks: Does the patient feel safe?</p> <p>1.3 Ward notice boards displaying up to date ‘you said, we did’ information</p>	<p>30.07.16</p> <p>30.07.16</p> <p>30.07.16</p>
<b>Outcomes for patients:</b>	<b>Name of responsible manager:</b>
<ul style="list-style-type: none"> <li>More patients will report that they feel safe</li> </ul>	Zuber Patel / Sheila Kasaven

## Action 2

When asked ....	
<b>Are there enough staff on the ward to ensure you feel safe? 41% of service users said no or sometimes.</b>	
Response to findings noted. Action you will take:	
<p>2.1 'Safe Care' is being established within practice which is enabling Ward Managers and Matrons to review safe and adequate staffing levels across the Harbour, based on acuity and staffing deficits staff are re-deployed.</p> <p>2.2 The Trust wide Safe Staffing group is being replaced by a Staffing for Safety &amp; Quality Meeting. This wider meeting will encompass all aspects of staff usage, including the appropriate scrutiny of Bank &amp; Agency and the correlation between clinical incidents and the care hours the patients receive. This will be led by the Deputy Director of Nursing and Nursing colleagues with a clear focus on the outcomes received by patients and directed at broader questions about safe staffing levels, for example; "What is safe staffing?".</p> <p>2.3 On-going recruitment of registered nurses and health care support workers</p> <p>2.4 Weekly meeting to review staffing hot spots for the week ahead to improve consistency of care using substantive staff, rather than bank and agency where possible and these will be escalated to senior staff where needed.</p> <p>2.5 We will explore with patients in the weekly patient ward meetings what would make them feel safe and develop a joint plan to address this.</p>	
How will you know it is achieved?	Date when action(s) will be completed.
2.1 Safe Care staffing report	15.07.16
2.2 Staffing for Safety and Quality dashboard data	01.09.17
2.3 Vacancy factor reducing	01.09.17
2.4 Production of minutes from the weekly meeting	30.07.16
2.5 The joint plan and 'you said – we did' will be displayed on ward notice boards	30.07.16
Outcomes for patients:	Name of responsible manager:
<ul style="list-style-type: none"> <li>Patients on the Wards will feel safer.</li> </ul>	Zuber Patel/Sheila Kasaven

'Safe Care' is a live staffing system which allows the duty matron to review the position of the staffing across the Harbour in real time. It demonstrates what the staffing is like on each ward versus the acuity / dependency. The programme identifies which wards are staffed well, over staffed, under staffed, hence pulling the resources together across the site so the duty matron is able to move staff around.

### Action 3

<b>When asked ....</b>	
<b>Are there enough activities on offer? 73% said no or sometimes.</b>	
<b>Response to findings noted. Action you will take:</b>	
3.1 Health and Leisure Team to visit the wards daily to plan activities 24 hours in advance based on patient views. 3.2 Activity logs to be created for all inpatient wards, detailing what activities have occurred on the wards on a shift by shift basis. 3.3 Senior Modern Matrons to review with the Occupational Therapy Leads and patients the provision of activities offered to patients on a bi-monthly basis and review the contents of activity logs. 3.4 Review Friends and Family feedback particularly Q2 which asks Did you feel that your care or wishes were considered in the planning and delivery of your care? And also the free text questions which ask about what the service does well and ideas for improvement.	
<b>How will you know it is achieved?</b>	<b>Date when action(s) will be completed.</b>
3.1 Evidence of activity planners being published on the wards. 3.2 Copies of activity logs 3.3 Minutes of meeting 3.4 Review of Friends and Family data	30.07.16 30.08.16 30.07.16 30.09.16
<b>Outcomes for patients:</b>	<b>Name of responsible manager:</b>
More patients will feel that we offer enough activities.	Zuber Patel / Sheila Kasaven

## Action 4

<b>When asked ....</b>	
<b>Do you enjoy the food on the ward? 50% of service users said no or sometimes.</b>	
<b>Response to findings noted. Action you will take:</b>	
<p>4.1 Current menu to be reviewed with patients and patient's opinion sought on what they would like.</p> <p>4.2 Themed menu days (Moroccan / Indian etc.) to be held on a regular basis to give patients a variety of food options.</p>	
<b>How will you know it is achieved?</b>	<b>Date when action(s) will be completed.</b>
<p>4.1 Documented evidence of patients being involved with the new menu.</p> <p>4.2 Dates to be produced with pictures of food on themed days.</p> <p>4.3 Review the free text questions which ask about what the service does well and ideas for improvement. We can also add additional questions to ask specifically about enjoying food on the ward.</p>	<p>30.08.16</p> <p>30.08.16</p> <p>30.09.16</p>
<b>Outcomes for patients:</b>	<b>Name of responsible manager:</b>
More patients will report they enjoy the food service.	Zuber Patel / Sheila Kasaven

## Action 5

<b>When asked ....</b>	
<b>Do you sleep well at night? 59% of service users said no or sometimes</b>	
<b>Response to findings noted. Action you will take:</b>	
<p>5.1 We will explore with patients what would help them sleep better at night:</p> <ul style="list-style-type: none"> <li>○ Where patients are unable to sleep well due to their mental health state, ward MDT will review patient presentation and any interventions required.</li> <li>○ Where patients are unable to sleep well due to environmental factors, ward managers will review the option of bedrooms being re-located.</li> </ul>	
<b>How will you know it is achieved?</b>	<b>Date when action(s) will be completed.</b>
5.1 MDT minutes and review of case notes Confirmation from ward managers that action is taken where appropriate.	30.07.16 30.07.16
5.2 We will ask patients if they are sleeping well	30.09.16
<b>Outcomes for patients:</b>	<b>Name of responsible manager:</b>
More patients will report that they are sleeping well	Zuber Patel / Sheila Kasaven

## Action 6

<b>When asked ....</b>	
<b>Do you have a call bell/buzzer and if you press it, do staff respond quickly? 86% of service users said no.</b>	
<b>Response to findings noted. Action you will take:</b>	
Due to the clinical presentation of some of the patients at the Harbour, actioning this concern may be challenging. 6.1 Senior Matron will ensure full testing of all call bells on the ward. 6.2 We will share these findings with staff and explore with them what would help improve response times 6.3 Ad hoc checks will be completed of staff response times by Matrons.	
<b>How will you know it is achieved?</b>	<b>Date when action(s) will be completed.</b>
6.1 Confirmation from Rydon's that the check has been completed on all wards.	30.07.16
6.2 Written feedback from Modern Matrons	30.07.16
6.3 We will ask patients in the weekly patient meetings if staff respond quickly when a call bell/buzzer is pressed	30.07.16
6.3. We will review Friends and Family data - particularly Q4 which asks Did you feel able to access staff when you needed to speak to them? And also the free text questions which ask about what the service does well and ideas for improvement.	30.09.16
<b>Outcomes for patients:</b>	<b>Name of responsible manager:</b>
Staff will respond in a timelier manner to call buzzers.	Zuber Patel / Sheila Kasaven



## Action 7

<b>When asked ....</b>	
<b>Do you know and understand what you plan of care is? Only 32% of service users said yes.</b>	
<b>Response to findings noted. Action you will take:</b>	
<p>7.1 During reviews the MDT are to ensure that patients are informed of their plan of care.            7.2 Patients will be encouraged to work collaboratively with the primary nurse to produce their plan of care.            7.3 Preceptorship training to include care planning training.            7.3. We will explore how we can routinely check with patients that they know and understand what their plan of care is e.g. additional questions to existing feedback mechanisms such as friends and family, safety thermometer</p>	
<b>How will you know it is achieved?</b>	<b>Date when action(s) will be completed.</b>
<p>7.1 Audited MDT notes            7.2 Monthly quality audit will show whether care plans are produced collaboratively.            7.3 Evidence of preceptorship training being delivered.            7.4 Feedback collected from patients - Review Friends and Family feedback particularly Q2 which asks Did you feel that your care or wishes were considered in the planning and delivery of your care? And also the free text questions which ask about what the service does well and ideas for improvement.</p>	<p>30.07.16            30.07.16            30.11.16            30.07.16</p>
<b>Outcomes for patients:</b>	<b>Name of responsible manager:</b>
More patients will feel that they understand what their plan of care is.	Zuber Patel / Sheila Kasaven

## Action 8

<b>When asked ....</b>	
<b>Are staff caring, supportive and open with you? Only 59% of service users said yes.</b>	
<b>Response to findings noted. Action you will take:</b>	
8.1 All staff to be reminded of the need to be caring, supportive and open with patients	
<b>How will you know it is achieved?</b>	<b>Date when action(s) will be completed.</b>
8.1a To be discussed at Ward Managers meeting	30.07.16
8.1b Copy of email to be sent to all staff working at the Harbour.	30.06.16
8.2 Modern Matrons to speak to patients on their wards and establish whether they feel that staff are caring, supportive and open. Outcomes of the discussions will be addressed in supervision.	30.07.16
8.3 Friends and family test feedback results particularly Q3 which asks about how often staff treated patients with courtesy and respect	30.09.16
8.4 Review of complaints and compliments data	30.09.16
<b>Outcomes for patients:</b>	<b>Name of responsible manager:</b>
More patients will feel that staff are caring, supportive and open with them.	Zuber Patel / Sheila Kasaven

## Action 9

<b>When asked ....</b>	
<b>Are you treated with kindness and compassion? Only 59% of service users said yes.</b>	
<b>Response to findings noted. Action you will take:</b>	
<p>9.1 These results to be discussed with staff at team meeting</p> <p>9.2 To explore with patients at weekly team meeting what we do well at the moment when we treat patients with kindness and compassion and how we can facilitate this to happen all the time</p>	
<b>How will you know it is achieved?</b>	<b>Date when action(s) will be completed.</b>
<p>9.1a To be discussed at Ward Managers meeting.</p> <p>9.2 To be discussed at Ward Managers meeting. Modern Matrons to speak to patients on their wards and establish whether they feel that staff are caring, supportive and open. Outcomes of the discussions will be addressed in supervision.</p> <p>9.3 Friends and family test feedback results particularly Q3 which asks about how often staff treated patients with courtesy and respect</p> <p>9.4 Review of complaints and compliments data</p>	<p>30.07.16</p> <p>30.07.16</p> <p>30.09.16</p> <p>30.09.16</p>
<b>Outcomes for patients:</b>	<b>Name of responsible manager:</b>
Patients will feel that staff are treating them with kindness and compassion.	Zuber Patel / Sheila Kasaven

Family members, friends and carers were asked a total of four questions and all responses were positive with scores of 79% and above. Lancashire Care NHS Foundation Trust will continue to work together with family members, friends and carers to maintain these high levels of experiences.

## Direct Quotes:

### Action 1

#### Direct quotes to consider as they convey staff (including medics) behaviours/culture issues.

##### Staff behaviour (examples extracted from the report):

“Problems with written communication between staff over shift changes. Staff don’t know what medication I have had that day”.

“Loads of staff coming and going out”

“Staff are always on their phones.”

“Everything changes when the next shift comes on. Different things that they tell you change.”

“I feel vulnerable with certain staff”

“There is not enough Occupational Therapy staff – things are always locked away”

“They (staff) talk amongst themselves. I’m not disrespecting them but it makes me feel funny”

“Some staff walk around with a face on and some are nice. You feel like a burden because you want a cup of tea or something but don’t feel like you can ask. I’d happily make my own if they gave me a kettle and things but we’re not allowed”

##### Medics (examples extracted from the report):

“There have been different doctors throughout being here - so I keep having to repeat myself. I don’t like seeing the doctors. It would be more helpful if there was just one doctor”

“The doctors do not respect me. The staff are alright”

“The doctors are not compliant with regulations.

The consultant is poor in the way she deals with patients and is a bank doctor”

“Different doctors all the time and I feel like I am repeating myself”

“I have had the door slammed in my face by consultants”

**Having considered the sample of direct quotes how will The Harbour staff teams address the issues raised?**

**Action you will take:**

- 10.1 Examples extracted from the report will be shared with all staff in supervision and expectations made clear.
- 10.2 Examples extracted from the report will be shared with nursing staff at levels in the form of a written communication from the Senior Matrons and expectations made clear.
- 10.3 Examples extracted from the report will be shared with nursing staff during team meetings and expectations made clear.
- 10.4 Two bi monthly audits to be completed in each patient area at The Harbour with similar questions to what was asked during this visit to gain specific information for specific areas.
- 10.5 Specific information relating to how patients can provide feedback to be displayed on all wards including 'you said, we did'

**How will you know it is achieved?**

**Date when action(s) will be completed.**

- |   |          |
|---|----------|
| 10.1 Copies of supervision notes                          | 30.08.16 |
| 10.2 Copy of written communication                        | 30.07.16 |
| 10.3 Minutes of team meetings                             | 30.08.16 |
| 10.4 Copies of the audits and associated action plans     | 30.10.16 |
| 10.5 Photographic evidence of information being displayed | 30.07.16 |
| 10.6 Review of friends and family data                    | 30.09.16 |


**Outcomes for patients:**

**Name of responsible manager:**

- |   |                              |
|---|------------------------------|
| <ul style="list-style-type: none"> <li>• The feedback received about medics and nursing staff will improve, this will be as a result of better experiences for patients.</li> </ul> | Zuber Patel / Sheila Kasaven |
|---|------------------------------|

## Action

Direct quotes to consider in relation to medication:	
<b>Medication (examples extracted from the report):</b>	
“My medication is hit and miss. I’d prefer to have my usual medication but my doctor has told me it is not required”	
“I have to keep asking for my medication when I need it”	
Having considered the direct quotes how will The Harbour staff teams address the issues raised?	
Action you will take:	
11.1 All Consultants and nursing staff to be reminded of ensuring patients opinion is sought when reviewing medication and a clear rational is to be provided for any changes, reviews etc. Please also see action 7	
How will you know it is achieved?	Date when action(s) will be completed.
11.1 Copy of communication sent to Consultants and Nursing staff	30.07.16
11.2 Review of Friends and Family data	30.09.16
11.3 Review of complaints and compliment data	30.09.16
Please also see action 7	
Outcomes for patients:	Name of responsible manager:
<ul style="list-style-type: none"> <li>For Patients to be better informed and their views heard in regards to their medication.</li> </ul>	Zuber Patel / Sheila Kasaven

<b>Signature:</b> (on behalf of the registered person)	
<b>Name:</b>	Matthew Joyes
<b>Role:</b>	Associate Director of Safety and Quality Governance
<b>Date:</b> (dd/mm/yyyy)	<b>15.06.16</b>

**healthwatch**  
Blackpool

**healthwatch**  
Blackburn with Darwen

**healthwatch**  
Lancashire

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