

Enter & view Report:

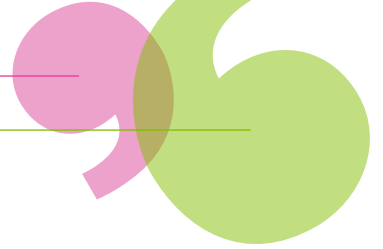
healthwatch
Trafford

Manchester Orthopaedic
Centre at
Trafford General Hospital,
Moorside Road, Davyhulme
Manchester, M41 5SL
Tel: 0161 748 4022

Friday 10th November

Date of publication: March 2018





Contents

What is Enter & View?	3
Acknowledgements.....	3
Disclaimer.....	3
Executive Summary	4
Findings and Recommendations	4
Good practice identified:	6
Purpose of the Visit	7
Strategic Drivers	7
Methodology.....	8
Healthwatch Trafford Authorised Representatives	8
The visit.....	9
Introduction	9
Profile of Manchester Orthopaedic Centre.....	9
General Observations	9
Outpatients clinic.....	11
Profile of patients	11
Management of the Centre.....	12
Appendix - 1: Management questionnaires and responses.....	13
Manchester Orthopaedic Centre (Trafford General Hospital).....	13
Summary of patients' responses to questionnaire (appendix 2)	16
Healthwatch Trafford Enter & View visit	17
Manchester Orthopaedic Centre (Trafford General Hospital)	17
Addendum	21
Distribution.....	22
Contact details.....	22

What is Enter & View?

Part of the local Healthwatch programme is to carry out Enter and view visits. Local Healthwatch representatives carry out these 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 local Healthwatch 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 Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit. In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the Care Quality Commission [CQC] where they are protected by legislation if they raise a concern.

Acknowledgements

Healthwatch Trafford would like to thank the Matron, Managers, staff and patients we interviewed.

Disclaimer

Please note that this report relates to findings observed on the specific date set out on the front cover. Our report is not a representative portrayal of the experiences of all service users, only an account of what was observed and contributed at the time.





Executive Summary


Findings and Recommendations

Findings

1. Overall, we were impressed by the service offered to patients in the orthopaedic department of Trafford General Hospital. On the day of our visit we found the hospital to be very busy offering a very good service to Trafford residents.
2. The Manchester Orthopaedic Centre for planned elective day case and inpatient surgery. Patients are received from Manchester NHS Foundation Trust and Salford Royal NHS Foundation Trust.
3. Ward 12 has 20 inpatient beds inclusive of four side rooms and beds can be reused/occupied more than one patient per day.
4. All staff were pleasant, approachable and willing to share information on the services they provide.
5. We observed good interaction between all members of staff working throughout the centre.
6. Patients we spoke to on the ward appeared comfortable in their surroundings.
7. In total, we collected 24 completed questionnaires from patients attending for day surgery, inpatient surgery and those in the outpatients' clinic. 84% of patients rated their overall experience of the centre as good or very good. Of 127-star ratings received only five were negative with waiting times accounting for four of these. To see full results, go to <https://healthwatchtrafford.co.uk/our-reports/manchester-orthopaedic-centre-appendix-addendum/> on page 12 of the patient survey results.
8. Community physiotherapy to Trafford residents is provided by Pennine Care NHS Foundation Trust. One issue raised by staff is patients who require physiotherapy from Pennine Care NHS Foundation Trust can wait up to 10 weeks to be seen. This was thought to have a negative impact on length of inpatient hospital stay and continuity of patient care to aid recovery when discharged home.

Recommendations:

-  Consider displaying notification of delays electronically in the outpatients' clinic to keep patients informed and manage expectations, being mindful of patients with sensory needs.
-  A new hospital initiative enabling some patients to have their pre-ops undertaken on the same day as their initial consultant appointment. We would recommend



that this scheme is extended to all patients in due course as this will reduce repeated visits and shorten the patient pathway.

- Consider staggering patients' arrival times to avoid gatherings of patients waiting for day-case surgery beds to become available.

Response from the provider to the above recommendation:

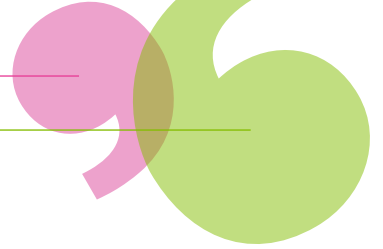
In recognition of feedback received from patients regarding their experiences of waiting times, staggered admission times were implemented in September 2017. Patients who are admitted on days when there are three operating sessions and the patients planned to undergo surgery in the afternoon sessions, now have a later admission time than those planned to be operated on in the morning session. Our patient information has been adapted to reflect this.

- Seek Pennine Care and Trafford Clinical Commission Group's input with the aim of reducing community physiotherapy waiting times, thereby optimising recovery following surgery.
- Review 'Your surgery' information booklet to clearly state that patients must bring in medications they are taking in a SEALED bag or container.

Response from the provider to the above recommendation:

"In regard to comments about sealed bags, I have been advised that staff ask patients to bring their medications into hospital in their original containers/packets, not necessarily in a sealed bag. The patient information leaflet will be reviewed to make sure it accurately reflects this request and will be reinforced to patients during their pre-operative visit".

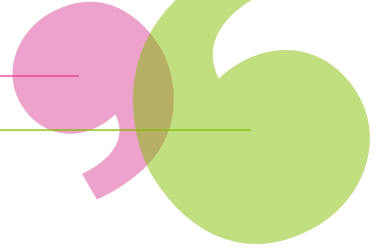
- Clearly ask patients in any correspondence, on telephone and email contact to advise the hospital if any of the medical information is known to be in error prior to admission.
- We would encourage Trafford General Hospital management to:
 - Make contact with the Trafford Coordination Centre in respect of raising awareness of what can be offered to staff to improve the patient journey to maximise outcomes.
 - Trafford General Hospital management to enter into discussions with the new primary care organisation to encourage all GPs to use the electronic referral system, rather than writing letters.
- That all staff working on the Orthopaedic Wards should be fully conversant with the criteria for Ascot House Intermediate Care Unit.



Good practice identified:

- The use of a computerised white screen on wards that is linked to nursing staff's iPads with the up to date status of each patient.
- Practical encouragement to patients' in exercising self-help in relation to measurement of height, weight and BMI using freely, available equipment.
- Involvement of Manchester Foundation Trust's community dental services in supporting all patients to maintain good oral health to enhance positive health outcomes following surgery by reducing the risks of infection.
- A new hospital initiative enabling some patients to have their pre-ops undertaken on the same day as their initial consultant appointment.





Purpose of the Visit

The purpose of the report was to gather views from people using the Manchester Orthopaedic Centre at Trafford General, the services that are provided and examples of good working practice by:

- Observing and identifying best practice in the provision of Manchester Orthopaedic Centre for those Trafford residents accessing their surgery and follow-up services.
- Observing the clinical and non- clinical environment of the Centre.
- Capturing the experience of patients.

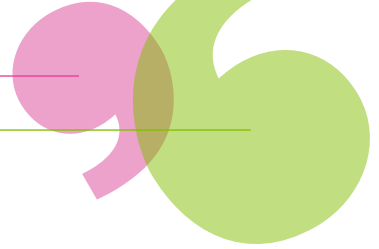
This Enter and View visit has taken place as part of the Healthwatch Trafford three-year programme to visit publicly funded health and care settings used by Trafford residents. The visit is undertaken by lay people who are trained and authorised representatives of Healthwatch who will report on the quality of care they perceive is provided on the day of the visit. This is not an inspection.

Strategic Drivers

We are using any/all the following criteria for the timing of our visits.

- Length of time since the last Care Quality Care [CQC] visit.
- Where any issues of concern are raised with Healthwatch either by patients or their carers.
- Changes shaped by the formation of the Single Hospital Service in Manchester combining University Hospital South Manchester and Central Manchester Foundation Trust.

These visits are simply a snapshot in time but our reports are circulated widely and can be used by Trusts and general public to acquaint themselves with the services on offer.



Methodology

This was an announced Enter and View visit.

Contact was made with Manchester University NHS Foundation Trust [MFT] Matron of surgery at Trafford Hospital Division explaining our reasons for the visit. All information was supplied to Managers and staff on the areas we wished to visit.

The Chief Officer of Healthwatch Trafford and the Matron of Surgery devised the staff questionnaires for the visit. Prior to the visit we sent the questionnaires the Manager of elective surgery [in-patient], to the day-surgery Manager and to the Manager responsible for the outpatients' clinic (see Appendix 1).

We used the patient questionnaire when speaking to patients on Ward 12 and in the outpatient clinic (see Appendix 2).

We looked at all relevant local intelligence available.

On the morning of the visit we met with Managers, clinicians and senior members of non-medical staff to gain an understanding of the services being provided by those responsible for their delivery.

On Ward 12 we talked to 10 elective surgery patients. In the Outpatient department, we talked to 14 patients.

The finding and recommendations were sent to the Head of Patient Services at Manchester University NHS Foundation Trust, who liaised with operational management team at the orthopaedic centre at Trafford General Hospital to produce a response, details of which been included in the body of the report.

Healthwatch Trafford Authorised Representatives



Sandra Griesbach [Lead Representative]

Heather Fairfield

Susan George

Marilyn Murray



The visit

Introduction

Healthwatch Trafford visited Manchester Orthopaedic Centre on 10th November 2017.

We have framed our questions in such a way that they reflect how residents feel about the quality of service on offer. We have also observed governance arrangements to see how the hospital is run and assessed whether we feel it meets the standards the public should expect.

Before our visit, we sent questionnaires out to the management of ward 12 and the outpatient department at the centre. We supplied a questionnaire for our face-to-face meetings with patients who were asked to anonymously provide their views. The questionnaire for management and the responses are provided at Appendix 1 and the questionnaire for residents can be found at Appendix 2. The responses to Appendix 2 are also summarised on page 4.

Profile of Manchester Orthopaedic Centre

Manchester Orthopaedic Centre is a specialist orthopaedic centre based at Trafford General Hospital. The centre is a partnership launched in December 2014 between Salford Royal and Central Manchester University Hospitals NHS Foundation Trust [now [MFT] Manchester University NHS Foundation Trust] and is staffed by consultants, nurses and other staff who specialise in orthopaedics. It provides planned day-case and in-patient surgery for patients in a purpose-built facility. Joint replacements including hips, elbows, knees, and shoulders are carried out at the centre and are supported by an extended therapy service which aims to see patients within 24 hours following treatment. Salford patients on discharge from the centre following surgery will receive their outpatient rehabilitation and follow-up care at Salford Royal.

Our visit did not cover medical services.

General Observations

Ward 12

Most of the people we talked to on the day of the visit told us they were happy with their care and the service they received at the orthopaedic centre. Patients we spoke to at the time of the visit informed us that they were happy with the food that is provided. Staff told us that portions are tailored to the individual patient's choice, further enhancing personalised care. Food is served from trolleys outside the ward by staff. Most people told us they had received prior information on their care, what to expect and the plans for their post-operative care.

When we visited ward 12 where the elective and day surgery is carried out we were impressed with the environment as it was bright and clean with dementia friendly signs



displayed. We observed a good team interaction between managers and staff throughout the Orthopaedic Centre. All staff appeared happy in their work.

When we asked staff if they use Trafford Coordination Centre [TCC] to support people to access the orthopaedic centre we were told that the hospital staff know very little about the TCC and that most referrals come from GPs and it would be the GP who would refer them to the TCC. All patients arrive around 7:30am on the morning of their planned surgery, all patient's beds are pre-allocated the day before surgery.

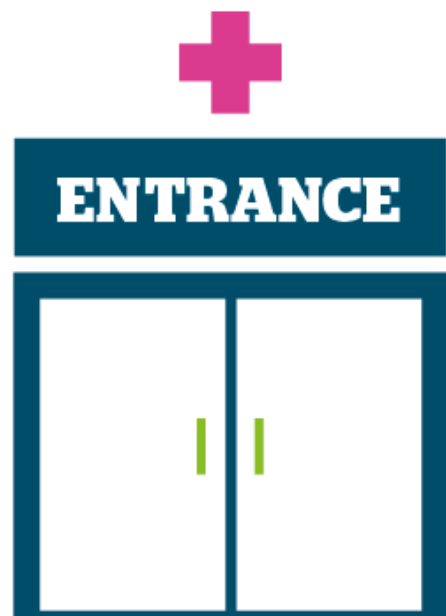
On the ward, we saw a computerised white screen board that held all current information relating to each patient. The information board was linked to nursing staff's iPads ensuring that all staff are kept informed simultaneously with the up to date condition statement on each patient. If a patient had special needs, such as dementia this would be immediately flagged up.

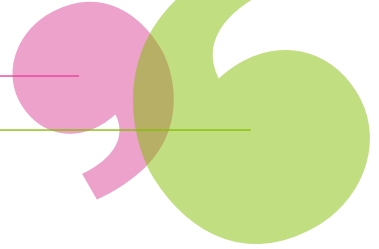
To support patients to help manage their health and wellbeing following surgery there is a Body Mass Index [BMI] machine situated on the ward for patients to access which calculates the individual's BMI. Patients on the ward also have access to a video showing exercises they can do for themselves to aid their recovery.

Staff informed us that the community dentist is involved in the care of patients as good oral health achieves better health outcomes for patients following surgery.

We were informed by staff that Trafford General Hospital has no physiotherapist community outreach and that currently there is a 10-week waiting time for patients waiting to access physiotherapy at home. The Enter and View team felt that people are not maximising the benefit of their operations due to the delay in obtaining outreach physiotherapy. We were informed by staff that community physiotherapy outreach is provided by Pennine Care NHS Foundation Trust.

Overall the Enter and View team felt that the Manchester Orthopaedic Centre is offering a good level of service, whilst welcoming continuous improvement. One example of continual improvement is when patients are referred to surgery, pre-assessment staff offer patients an 'on the day' appointment. This provides patients the opportunity to have pre-operative assessment on the day [usual wait time approximately two weeks], and this identifies if the patient is fit to be added to the waiting list.





Outpatients clinic

At the time of the visit we spoke to nurses and non- medical staff. Staff informed us that currently the outpatient clinic has 9% Do Not Attends [DNAs].

Most of the people we spoke to in the outpatients' clinic told us they were satisfied with the service they had received at the centre. However, at the time of the visit four patients told us that their appointment time with their consultant was an hour overdue. We witnessed a member of staff on two occasions apologising for the delay but offering no explanation why the delay had occurred.

One couple from central Manchester visiting the outpatients' clinic told us that they were very happy to come to Trafford General Hospital for their treatment as it was so much cleaner and amenable and worth the extra travel time than attending appointments at Manchester Royal Infirmary where they had been seen previously.

Below are some of the quotes we collected from people visiting the outpatients' clinic at the time of the visit:

“The entrance to the orthopaedic centre is much more easily accessed. This is much better than having to go through the whole hospital to get there”.

One patient with mobility restriction visiting the outpatient clinic stated:

“Not enough disabled car parking spaces”.

Another patient visiting the outpatients' clinic stated:

“I visited the centre two weeks ago to have an injection in the right hip. The letter had stated left hip. On arrival, the computer stated left hip. I told the nurse it was my right hip. The doctor looked at the computer and changed the information on the screen to right hip.”

The patient went on to explain that it was worrying that both the letter and the computer had wrong information and that she felt lucky that she could give the correct information on the day. At no time did the health professional who changed the information on the screen provide any explanation or communicate anything to the patient on the inaccurate information displayed.

Profile of patients

The patients we talked to on the ward and in the outpatients' clinic on the day of the visit were of a mixed age group, gender and ethnic origin.

Management of the Centre

The Enter and View team asked what procedures are in place for patients with special needs and were informed that safeguarding policies are in place; that the hospital provides a bespoke service throughout the journey to accommodate patients with learning difficulties and special needs. We were informed by senior staff that Manchester Foundation Trust Community Dental Services provide support to patients to maintain good oral health, adding that good oral health produces overall good health outcomes following surgery.

We were informed by Management that the surgery ward [ward 12] has 20 inpatient beds inclusive of four side rooms and beds can be reused or occupied more than one patient per day. Following surgery both day surgery patients and elective patients are directed to appropriate beds.

Management informed us that there is a booking system that is GP specific and that there is a maximum 18-week waiting time for a Consultant appointment when referred by a GP, this is in line with the national target. We were told that 70% of hospital referrals are done through electronic referrals from GPs but that some GPs do still refer by letter.





Appendix - 1: Management questionnaires and responses

We received one completed manager's questionnaire out of three questionnaires given out to managers of inpatient surgery, day care surgery and the outpatients department prior to the visit in spite of numerous request for the completed questionnaires to be returned to us. Below is the response from the manager of the outpatients' clinic.

Manchester Orthopaedic Centre (Trafford General Hospital)

Friday 10th November 2017

Questionnaire for staff on the outpatients' department

1. How do you manage patients that arrive late, particularly if on ambulance transport?

Ensure they have a snack and drink, ensure they are comfortable, provide blankets if necessary

2. What steps are taken if an appointment or planned procedure has to be cancelled on the day?

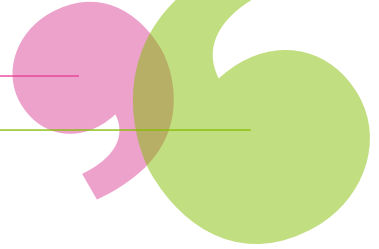
Ensure this is communicated to all relevant stakeholders. Ensure that another appointment/ date for procedure is given.

How is this explained to the patient?

In a manner in which they can understand, with the help of an interpreter if necessary

What procedures do you have in place to handle a patient's disappointment?

To ensure a full explanation is given.



3. How do you know if a patient has specialist needs for example, learning disability, deaf, partially sighted, no English or spoken word? If it is known, how is it dealt with on the day?

Planning is made for the day, stakeholders in the patient's care contacted and a management plan put in place.

4. What information do you give to patients and carers regarding car parking charges if they have to stay longer than three hours?

It is given with the letter detailing their clinic appointment.

5. How do you ensure where applicable that ambulance transport is arranged for patients returning home?

It is booked when the patient is ready to go home.

6. How do you promote infection control within the outpatients' areas?

Bare below the elbow, weekly hand hygiene audits, infection control mentioned at the staff huddle every morning.

How are these monitored?

Weekly hand hygiene audits, monthly ward manager's ward rounds.



7. If patients are kept waiting for a long time, how do you address their nutritional and hydration needs?

Provide drinks and snacks from the restaurant.

Do you monitor other needs of the patient and if so how?

Pressure area care, toileting needs, communication.



Summary of patients' responses to questionnaire (appendix 2)

The overall experience during time spent as day patients and inpatients at Manchester Orthopaedic Centre was positive and the majority told us that the service they received was 'good or very good' with comments such as:

"Good throughout whole journey"

"Very satisfactory, friendly, professional and very supportive".

"Nurses wonderful, very caring, enough staff. Very clean, food brilliant, trolley with snacks at 11am"

We received the comment below from one patient on the inpatient ward:

"Not enough staff on the ward, long wait to answer the buzzer at night [about 20 minutes]. Could have pain medication every two hours but they said they would bring it. I wasn't told that my own medication needed to be sealed".

Issues were raised by some patients about the waiting times between appointments as they are moved through the system:

"...the length of wait for diagnosis".

... "the waiting times between the scans and the results of scans. Also, the delays that arise in outpatients when the consultant is running late".

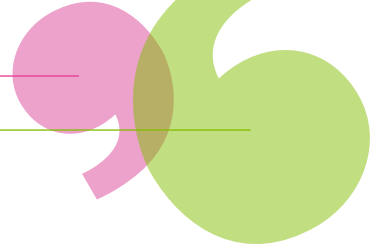
"Communication is not effective. No real explanation about delays. Otherwise ok".

We received specific negative comments from a few patients waiting in the outpatients' clinic around delays to their appointment times.

"not very good as previous appointment list was not brought down resulting in Consultant not being able to access notes. This caused a 40-minute delay".

"Generally good. Not today however, I work and expected to be seen and on my way to work by now, but the consultant is running late".

**on day of the visit to the outpatients' clinic one consultant's clinic was running late resulting in several patients waiting more than an hour of their allotted appointment time. We did observe a member of staff apologising for the delay to patients and giving the approximate extended waiting time. No explanation was given for the delay, which annoyed the patients waiting.*



Healthwatch Trafford Enter & View visit

Manchester Orthopaedic Centre (Trafford General Hospital)

Friday 10th November 2017

Questions for patients

1. Do you feel you were fully informed of what to expect during your time at the hospital?

Yes []

No []

2. If the procedure didn't go ahead as planned how was it explained to you?

3. How has the hospital addressed any specialist needs you may have?

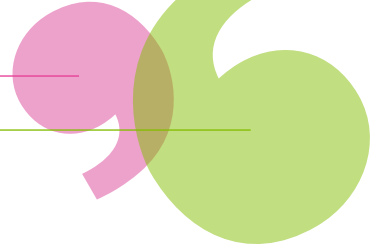
4. If you have had an appointment cancelled at any time, what method of communication did the hospital use to inform you of this?

[] Text

[] Telephone

[] Letter

[] Other



5. Did you use the ambulance service [NWS] to get you to your appointment?

Yes []	No []
---------	--------

Did the transport arrive to pick you up at the expected time?

Yes []	No []
---------	--------

Did the transport get you to the appointment on time?

Yes []	No []
---------	--------

If No, approximately how late were you? What reasons were given for any delays?

--

What happened when you arrived late?

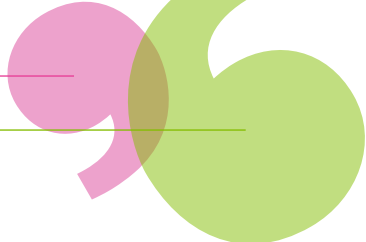
<input type="checkbox"/> I missed my appointment
<input type="checkbox"/> My appointment was rearranged
<input type="checkbox"/> The appointment went ahead
<input type="checkbox"/> Other - Please provide details below:

6. Did you receive an information pack from the Orthopaedic Manager?

Yes []	No []
---------	--------

Was this in advance

--



Yes []

No []

Upon arrival?

Yes []

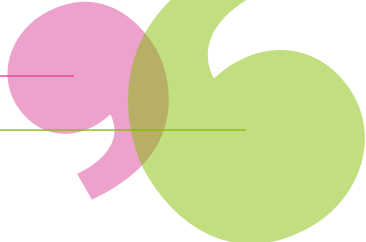
No []

Did it include information on car parking?

Yes []

No []

7. How would you describe your experience attending Orthopaedic Outpatients' at Trafford General Hospital Orthopaedic Unit?



8. How would you rate the following (please tick):

Treated with kindness and compassion



Cleanliness



Treatment explanation



Waiting time



Clean



Staff attitude



Reading materials in waiting room



TV or radio access



Quality food



How to rate services



One star = Very poor



Two stars = Poor



Three star = Satisfactory



Four stars = Good



Five stars = Very good



Addendum

Following the completion of the first draft report of the Enter and View visit to the Manchester Orthopaedic Centre in December 2017, we received the six completed questionnaires from the staff working on the elective surgery and day case surgery ward at the beginning of January 2018. See the full results here: <https://healthwatchtrafford.co.uk/our-reports/manchester-orthopaedic-centre-appendix-addendum/>

On receiving the completed questionnaires and analysing the data, amendments to the recommendations which you can find on page five of this report, have been added. The two recommendations refer to Trafford General Hospital management to consider making contact with the Trafford Coordination Centre and for the hospital management to enter into discussion with the new primary care organisation.

Distribution

This report will be sent to the following organisations:

The Care Quality Commission (CQC)

Trafford Council:

- Trafford Health and Overview Scrutiny Committee
- All Age Commissioning Team

Trafford Clinical Commission Group (CCG)

Chief Nurse / Associate Director of Nursing Trafford CCG

Healthwatch England

Manchester University NHS Foundation Trust

The provider visited

It will also be published online on the Healthwatch Trafford website (www.healthwatchtrafford.co.uk)



 **0300 999 0303**

 **07480 615 478**

 **info@healthwatchtrafford.co.uk**

 **@healthwatchtraf**

 **Healthwatchtrafford.co.uk**



Floor 5, Sale Point

126-150 Washway Road

Sale, M33 6AG

healthwatch
Trafford