



# Enter and View Visit Report

## Princess Royal Hospital

### Day-Surgery Unit



Princess Royal Hospital, Apley Castle, Apley, TF16TF

**Visit date:** 21<sup>st</sup> June 2019

**Publication date:** 28<sup>th</sup> August 2019

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## Terminology and Acronyms

**T & W** - *Telford and Wrekin*

**SATH** - *Shropshire and Telford Hospital's*

**SRN** - *State Registered Nurse*

**HCA** - *Health Care Assistant*

**DSU** - *Day Surgery Unit*



## About Healthwatch Telford & Wrekin (HWT&W)

Healthwatch Telford & Wrekin is the independent health and social care champion for local people. We work to ensure your voice counts when it comes to shaping, delivering/receiving and improving services. We address inequalities in health and social care to help make sure everyone in Telford and Wrekin (T&W) gets the services they need.

There are local Healthwatch across the country as well as a national body - Healthwatch England (HWE).

## What is Enter & View?

Healthwatch Telford & Wrekin gathers people's experiences of health and social care services and there are times when it is appropriate for Healthwatch to see and hear for ourselves how services are being provided. These visits are called 'Enter and View' and can be 'announced', 'partially announced' or 'unannounced'.

'Partially announced' visits mean the service provider is told we will visit but not the date or time of the visit.

The responsibility to carry out Enter and View visits was given to local Healthwatch in the **Health and Care Social Act 2012**.

Enter & View visits are carried out by a team of specially trained and DBS-checked staff and/or volunteers called Authorised Representatives. These volunteers are not experts in health or social care and report only on what they see and hear during the visit.

They make observations and collect people's views and opinions anonymously and produce and publish a report.

Enter & View visits are not an inspection, and always have a 'purpose'.



## Details of the Visit

Visit Details:	
Service	Princess Royal Hospital (PRH) - Day Surgery Unit
Provider	Shropshire and Telford Hospital NHS Trust (SATH)
Date and Time of visit	21 <sup>st</sup> June 2019 at 2.00 pm
Visit Team	1 HWT&W Enter & View Authorised Representatives (AR) and x1 Representatives "In-Training" (T-AR)
Service contact details	Name: Charlie Hipkins Phone: 01952 641222 ex 4240 Address: Princess Royal Hospital, Apley Castle, Apley, Telford TF1 6TF

## Purpose of Visit

To find out if patients are treated with dignity, have privacy respected, and how staff respond appropriately and with compassion to meet healthcare needs. To find out how patients living with dementia are cared for and supported, and how accessibility is supported during their stay.

We want to hear about patient experiences and those of any relatives and visitors present, and we will observe the patients engaging with the staff and their ward surroundings. We want to identify examples of good practices and hear about any ideas the patients or staff may have for change.

### Disclaimer

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



## Context of the Visit

In 2018 concerns were raised about maternity services provided by the SATH hospitals (Royal Shrewsbury, and Princess Royal - Telford), including those related to historical concerns. An Independent Inquiry was initiated and is in progress.

Unannounced inspection visits have also been made by the Care Quality Commission (CQC) and care-issues reported, resulting in measures to be taken and NHS-Improvement provision of additional support to resolve problems. Princess Royal Hospital (PRH) is currently rated 'Inadequate' by the Care Quality Commission.

During recent years SATH have experienced problems resourcing Accident and Emergency (A&E) services in both hospitals, and with increased needs experienced particularly during the winter, have had to plan for possibility of deciding on a temporary over-night closure of the Accident and Emergency department at Princess Royal Hospital. Were the decision to be made, this will have impacts on the Telford & Wrekin patients, ambulance services, and the Accident and Emergency departments in other near-by hospital trusts such as New Cross (Birmingham), Stoke, and Wolverhampton.

As part of their engagement programme Healthwatch Telford & Wrekin has visited several Wards and Departments/Units/Clinics in Princess Royal and Royal Shrewsbury Hospitals since 2014. The Enter & View committee agreed that Healthwatch Telford and Wrekin should aim to visit all wards at Princess Royal Hospital starting in 2019 to find out about the patient experience of healthcare in the hospital setting - compassionate care delivered with patient dignity and privacy being respected. Some visits will also find out about the care experiences of patients attending hospital who are living with dementia. Individual ward visit reports will be published. From these individual visit reports, over-arching theme reports will be published on patient experience of compassionate care respecting dignity and privacy, the care of patients with dementia, and on the discharge experience.

The visit to Day Surgery Unit would understand the patients experience of hospital care. The visit was 'partially announced' and we told the ward manager of the visit but not the date and time.



## What we were looking at

The focus of this visit was to find out if patients of Day Surgery were happy with their hospital care. We wanted to learn about:

- The ward environment - the layout of the ward, and the staffing arrangements.
- Patients experience of being treated with dignity and respect and if they felt comfortable on the ward; observed interactions between staff.
- Patients experience of compassionate care.
- Accessibility to facilities and support on the ward and services provided by the hospital.
- Contributing factors that delay a patient's discharge from hospital.

## What we did

We had a pre-meeting with the Ward Manager and used a series of questions to understand the care processes and other matters the staff on the ward deal with and any other teams associated with patient care.

When we arrived on the ward for the visit, we spoke to the Ward Manager on duty. We took advice on whether any patients should not be approached due to safety or medical reasons, or any issues regarding ability to give informed consent.

We then went to speak with any patients who were willing to talk to us and any visitors and relatives. We spoke to 4 patients and to 3 staff present at the time. There were no patients with dementia on the ward at the time of our visit. As part of the visit, an Authorised Representative used the 'Observe and Act' tool to gather observations while in the unit.

## What we found out

### About the Day Surgery Unit

The Day Surgery Unit is situated near to the Women and Children Unit. The Unit has a reception, a ward with patient beds, two theatres, and the Lofthouse Unit which is used for Dental Surgery. The Ward is also currently identified and used (when needed) as an 'Escalation' Ward for in-patients as well

as adult and children day surgery, to meet additional in-patient bed needs when demands exceed capacity on in-patient medical wards. Day Surgery admissions may



be cancelled due to a shortage of day-surgery beds when many in-patients are being cared-for in the unit. Additional capacity and support to reduce cancelled Day Surgery operations impacts (particularly during winter period pressures) is sometimes provided by a mobile healthcare facility supplied by Vanguard Healthcare Solutions - a combination of mobile theatre and mobile recovery ward unit.

Most Day Surgery patients are admitted either for a morning surgery list or afternoon surgery list.

### **The layout of the ward and the staffing arrangements**

During the visit the representatives observed the physical ward environment and were given additional information. The Day Surgery Unit has a ward with three bays of patient beds and two single side rooms, a reception, and a waiting/lounge room. The ward is accessed by a door release button for Safeguarding reasons as Children's Day Surgery is undertaken. At the far end of the unit a changing room provides two toilets - a shower/toilet room and a disabled toilet.

On the day of our visit, the Day Surgery Unit was staffed by a receptionist, Ward Clerk, Ward Manager, two State Registered Nurses (SRN's), two Paediatric nurses, one student Paediatric nurse, three Health Care Assistants (HCA's) as well as a housekeeper and cleaning technician. Additionally, two SRN's were on duty for the Vanguard mobile surgery/recovery ward units, and an agency nurse (who was due to go up to Ward 8). A children's play support specialist was in attendance on the unit - staff commented this was a real help for the child patients

Staffing cover is arranged for over-night and at the weekend when there are in-patients to be cared for in the Unit. As this is more difficult to predict and agency nurses are often used.

### **Whether patients said they are treated with dignity and respect and feel comfortable on the ward.**

Patients told us they felt staff treated them with dignity and respect. Staff spoke to the patients by their chosen name, they pulled the curtains around the patient's bed before undertaking any personal care, and staff always talked with the patient before they commenced any procedures. Patients said they felt safe and relaxed on the unit.

Patient information boards placed above each bed were sparsely populated, but it did show the patients' chosen name, a diabetes sticker, and indicated by a yellow card a patient at a risk of falls.



As the weather was hot staff had opened windows for patients to get some air, to make it more comfortable. A patient agreed they were comfortable on the ward and told us they had enough space around the bed to move in their wheelchair.



*Patients told us:*

“Kind, caring staff, who do anything for you”

“Some of the nurses are excellent, they cannot do enough for you”

“Doctors are compassionate, they always draw the curtains around when I have a procedure”

Some of the patients we spoke to were occupying ‘Escalation’ bay in-patient beds. One commented that their experience had been difficult at the beginning and it had caused them to be upset. The patient felt staff weren’t as understanding as they should and commented that they could distinguish between some agency staff and regular ward staff by their attitude to the patients. Some patients complained it was hard for them to access their call buzzers to ask for assistance as they were put out of reach.

Other patients commented that they found the staff were pleasant and work as a team, confidently responding to patient questions and needs.

On entering the ward, the Ward Manager explained they were trying to organise surgery for several patients, as the Vanguard unit was without an Anaesthetist. Eventually they were able to arrange surgery for some patients by working with staff on another Surgical Wards and by agreeing with surgeons a suitable alternative local anaesthetic for use for the remaining patients. This was quickly put-in-place to enable patients to receive their surgery on that day.

One of the patients who was to have a different anaesthetic than anticipated, spoke of being happy with the process. They were less happy with the communication between staff and themselves, and they would have liked to have been kept up to date about their waiting time, although they appreciated that there were difficulties.

*Patients said:*

“Food is tasty, hot, I always have a choice and I get the food I order”

“if I want a hot drink, they get it for me”





## Preparations for discharge and patient experience of discharge.



We discussed the discharge process with staff and patients. Patients we spoke to in the 'Escalation' in-patient beds bay commented that the discharge process and their discharge had not been discussed with them.

Staff told us this was nurse led unless a patient needed to see a surgeon. We were told there are different protocols for different situations which could be affected by hospital transport issues and pharmacy supplies.

### Observations

During the visit the representatives observed interactions between staff and patients, and looked at the physical ward environment.

### The environment of the ward

Day Surgery patients book in at the Unit Reception and are then taken through to the ward to prepare them for surgery. After surgery when they have recovered, patients are discharged home with any required mobility aids and medication. The Unit waiting area is spacious with plenty of seating including high backed chairs, and a small children's area for the younger children with a suitable variety of reading books. The unit/ward was clean and functional with the key ward 'station' located very close to the ward bed bays. The ward clerk, doctors and nurses worked from this area. An electronic board displayed details of patients by each bay. There was also a board displaying the surgery list with location and surgeon.

The ward is bright, clean, uncluttered and cheerful. The bays benefit from natural light entering from a glazed area at the end of each bay. Notice boards provide a wealth of information, although some of this was out of date. A vast array of thank you cards from previous patients was prominently displayed.



During our visit the Unit appeared busy with a Children's Day Surgery. We saw the children were brought in from Bay A in their beds and taken directly into the Unit theatres. We observed patient beds being moved through the unit to and from surgery and ward bays several times. The spacing in the corridors and particularly around the main desk was cramped and did not appear to be well designed for a high bed-traffic area.

**'Observe and Act' Findings:** we found that the Vanguard Unit didn't have any signs inside the hospital to direct patients. We were later told patients were taken over to the unit by a member of hospital staff. Parking for attending patients, and visitors, is a hospital issue, but there is a 'drop-off and pick-up' zone outside the Day Surgery Unit.



The front reception desk was staffed, and the Receptionist was welcoming and helpful. The décor inside the unit was clean, bright, and appropriate. Information on the notice boards was relevant however some information dated back to 2013/14.

### Staff interactions with the patients

From the main corridor we observed interactions between staff, child patients and parents in Bay A. Staff were attentive to the children, both prior to and after surgery, and we observed compassionate behaviour was shown throughout. Parents were supported by staff with kind caring words, which appeared to be appreciated



by the parents as observed by their expressions. One parent was advised by staff to go for a walk or to get a drink to pass the time whilst their child was in surgery. Staff informed the parent of the time the child could be expected to return to the bay.

We noticed one young patient was upset. Staff ushered the patient and their parents to a side room to provide them with support and comfort away from the other patients in the Unit

A member of staff bringing the hot drinks around was cheerful, kind and had a chat with each patient, even rousing a napping patient to enquire if they wanted a hot drink.

**‘Observe and Act’ Findings:** Communication with the patients was observed to be friendly. Staff spoke to patients for confirmation of their consent to make observations; a little light banter occurred between them. All patients had a jug of water and a plastic tumbler. Patients chatted when the drinks came in, and a cup of tea was the favourite choice.

All patients have a hand-gel dispenser on their locker. There is also one by the sink on the wall near the ward bay entrance, but there seemed to be a lack of hand-gel dispensers in the unit for use by visitors.

End of visit feedback was shared with a member of staff. Some points were clarified, and timescales to rectify some of the observation points recorded.

### Additional Findings

This Ward in the Day Surgery Unit has been used for in-patient ‘Escalation’, with some day surgery sometimes taking place in the mobile Vanguard Units. We were unable to visit this facility. Signposting to this area from the hospital grounds is poor. Once admitted in-patients are cared for and discharged from the ‘Escalation’ ward. Some staff commented that due to the ongoing ‘Escalation’ situation they felt that the ward was under pressure to take in patients; and the pressures arising



from these different care needs affected their ability to operate well. Staff hoped the Escalation status would be concluded in three months' time. The need for an additional ward on site was mentioned.

Friends and Family comment cards were not often given to 'Escalation' in-patients who were admitted to the ward directly from A&E, AMU, or from other surgical/medical wards. The comment cards were included with the discharge pack given to day surgery patients.

## Summary of Findings

- Patients felt comfortable and were treated with dignity and respect.
- Patients felt safe and comfortable in the unit.
- Staff mostly friendly, kind and caring.
- Staff went to great lengths to ensure patients could have their surgery on the day.
- A family of a young child were supported by staff to ensure their child had a comfortable environment as a patient.
- There was no Anaesthetist available for the Vanguard Unit surgery.
- Some patients are not engaged and informed about their discharge.
- Patient information bed boards were sparse on information.
- In several cases the patients call-bell was placed out of reach.
- In-patients didn't have access to TV/or phone.

## Recommendations

- Review the mechanisms for provision of TV/radio/telephone for those in-patients admitted to the ward.
- Ensure in-patients are engaged in the discharge process and are kept informed as their treatment and care progresses.
- For those in-patients on the ward, re-design the patient information bed-board in line with other wards so relevant information is clear and available for all staff.
- Ensure agency staff are familiar with the ward procedures, the needs of in-patients including engaging with their patients.



## Service Provider Response

Healthwatch Telford & Wrekin received the following response to this Enter & View visit and report from the manager of Day Surgery Unit in July 2019. The manager has also provided the following information in response to our recommendations:

Thank you for the feedback which you have provided following your visit to DSU at the Princess Royal Hospital, to review the experiences of patients being nursed within the area. We value any feedback, particularly from our external partners.

As a team we are always striving for excellence in delivering care to our patients and your comments and recommendations are greatly received.

In response to the recommendations which have been made:

**Review the mechanisms for provision of TV/radio/telephone for those in-patients admitted to the ward** - We are exploring the provision of a television for patients in the waiting area. In addition to this we are also looking at the potential for providing individual televisions at the bedside. Although there has not been a requirement for this previously due to the ward operating as a day surgery unit, we recognise that we have inpatients residing in the ward at times during the year due to escalation. We therefore believe this is now appropriate.

**Ensure in-patients are engaged in the discharge process and are kept informed as their treatment and care progresses** - We will ensure that a nurse accompanies the Doctors on their ward round to ensure that patients are fully engaged in conversations surrounding their care and discharge. We will also ensure the generic discharge information which is given out to all patients on inpatient wards is disseminated to our patients on arrival to the area. We will discuss patient engagement in our team meetings to ensure this message reaches all staff.

**For those in-patients on the Ward, re-design the patient information bed-board in line with other wards so relevant information is clear and available for all staff** - The Day Surgery Unit has been included in the roll out of standardised patient information boards across the Trust and the boards are now in place. Whilst this was not necessarily appropriate for day case patients as their needs are different, we recognise that this would be of benefit for inpatients if nursed within the area.

**Ensure agency staff are familiar with the ward procedures, the needs of in-patients including engaging with their patients** - There is an induction folder for all staff available when they arrive on the ward. We have looked at updating this and sending it to all the agencies we use on a regular basis



so that staff can be prepared for their shift in advance before they arrive. Currently DSU staff are instructed each day to hand over to the night staff (both substantive staff from other areas, temporary staff and agency staff) any up-dates, direct them to the huddle folder and escalation folder which contains all the information the staff may need.

## Acknowledgements

Healthwatch Telford & Wrekin would like to thank the patients and staff of PRH Day Surgery Unit for their contribution to the visit and our Enter & View programme.

### Get in Touch

Please contact Healthwatch Telford & Wrekin to share your views and experiences of this service or any other health and social care service in Telford & Wrekin or received elsewhere by people living in Telford & Wrekin.

We gather comments anonymously and share them with the public, service commissioners and providers to highlight areas of good practice and identify areas for improvement.



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