



Patient Journeys

Ward 39, Royal Lancaster Hospital

February 16-21st 2015

Introduction and context

In February 2015, Healthwatch Lancashire documented five patient's journeys from Ward 39 of Royal Lancaster Infirmary over a period of six consecutive days.

A report of the findings from listening to the views of the patients was then presented to University Hospitals of Morecambe Bay NHS Trust (UHMB).

Healthwatch Lancashire are applying for the Healthwatch England Award for 'Making a difference to healthcare' for the project as a result of the action taken by UHMB in response to the report to further improve the standards of care for their patients.



Background

Royal Lancaster Infirmary was subject to a series of Care Quality Commission (CQC) inspections during 2013 and 2014. In June 2014 the CQC reported:

'...We found that staff at the hospital were committed to providing safe and effective care for patients. There were good examples of compassionate and person-centred care across all the core services.

'...We inspected the medical wards in October 2013 and found that there were not enough staff to provide appropriate and safe care to patients. As a result, we served a warning notice to the trust. We visited the trust again in January 2014 to assess its progress against a warning notice issued regarding staffing on Ward 39. Although the nurse staffing levels had improved by the provision of new staff and agency nurse support, we found that there were still concerns regarding the staffing levels and skill mix on the ward, and that some patients were not benefitting from high quality care as a result. We concluded that the trust had failed to comply with the earlier warning notice.'

Following the CQC's inspection report in February 2014 University Hospitals Morecambe Bay NHS Foundation Trust made a number of improvements on ward 39, Royal Lancaster Infirmary:

- A new ward manager was appointed and temporary support was provided by a matron.
- A review of leadership on the unit resulted in a band 6 clinical leader (nurse) being rostered for every shift to provide supervision, support and consistency.
- A review of working practices between medical and nursing staff resulted in the introduction of zoning. Zoning refers to the ward being divided into zones of clinical specialties to ensure timely, accompanied ward rounds and multi-professional clinical discussion/decisions. A nurse leader and a nursing team is assigned to each zone for a minimum of three months which will increase knowledge and competency in all designated specialties.
- A review of staffing levels against NICE staffing guidance (2014) and acuity levels resulted in further investment in nursing resources.
- Administrative support for the ward manager to release more time to provide leadership on the ward area.
- All clinical leaders now have delegated responsibility e.g., governance, training and workforce.



In November 2014 Healthwatch Lancashire recommended to UHMB and NHS Lancashire North Clinical Commissioning Group (CCG) that recording patient journeys may provide useful independent information to help ascertain whether these improvements were reflected in patients' experiences. This recommendation was readily accepted, and in February 2015 Healthwatch Lancashire undertook a number of patient journey assessments at the Royal Lancaster Infirmary.

Methodology

A member of the Healthwatch team attended ward 39 at the Royal Lancaster Hospital for 6 consecutive days, visiting the ward at different times of the day including evenings and at the weekend and used semi-structured one-to-one patient interviews to collect patient's experiences. Semi-structured one-to-one interviews were used to collect qualitative data as Healthwatch Lancashire aimed to understand the respondent's point-of-view rather than make generalisations. The interviewer was able to delve more deeply and ask "why?" because this often yields more information and emotional response than a questionnaire. The patient also has the opportunity to ask for clarification. They were however, more time consuming to conduct and analyse.

Improvements to patient care

In February 2015, a report was presented to the Executive Chief Nurse at University Hospitals of Morecambe Bay NHS Trust, who then shared the report with the Chief Executive, Chairman, the board of directors and staff on Ward 39 at Royal Lancaster Infirmary.

The report included a number of positive comments by patients and their families along with recurring themes which highlighted where care could be further improved.

This work was highly commended by the Executive Chief Nurse and as a result of the findings UHMB has made a number of additional improvements on ward 39 including:

- Introduction of name boards which now include patient name, name of consultant, name of nurse and any individual needs including diet, falls risk etc.
- A new poster been designed and developed in association with Healthwatch Lancashire to inform how patients / carers / relatives can raise concerns / make complaints.



The Healthwatch Lancashire report was shared with all medical staff with agreed actions to be implemented.

- A 'Sleep Well' campaign was launched on Ward 39.
- A review of staffing over seven days was undertaken to ensure staffing is sufficient over the full week.
- Reiteration of the professional responsibilities of all staff when caring for patients.

Healthwatch Lancashire have also been requested by UHMB to repeat the project in July 2015.