healthwatch Wakefield

# Visits to Wakefield Intermediate Care Unit

## Queen Elizabeth House

## March to May 2017

# Wakefield Intermediate Care Unit - WICU

## Also known as Queen Elizabeth House

## Details of visit

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|---|---|
| Service address: | Queen Elizabeth House, Queen Elizabeth Road, Wakefield WF1 4AA |
| Service Provider: | Mid Yorkshire Hospitals NHS Trust |
| Dates: | Six visits from March to May 2017 |
| Representatives: | Gaynor Endeacott and Laura Brown |
| Contact details: | Healthwatch Wakefield, 11-13 Upper York St, WF1 3LQ |
| | 01924 787379 |

## Acknowledgements

Healthwatch Wakefield would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme. We would particularly like to thank Kate Firth, Deputy Director of Nursing, and Julie Herrick, Occupational Therapist and Clinical Lead, for their support in accommodating our visits.

Senior management at Mid Yorkshire Hospitals NHS Trust were keen to support the visits as they felt an external view could help provide a level of assurance around the unit. All relevant staff were made aware of the dates and times that Healthwatch would be attending. Healthwatch staff made it clear to residents that they were providing information anonymously and, even when personal details were revealed by residents, these were not recorded.

## Purpose of visits

Our aim was simple. We wanted to chat with patients and relatives to gain an understanding of what they felt was good, what they felt was not so good and, if they could change one thing about their experience at WICU, what that would be.

Although it was not in our brief to talk to staff, we found that during visits, staff were keen to talk to us and provide information on the unit and their experiences of working there. They were proud of the changes they have seen and implemented themselves.

As well as a general conversation, we asked residents three key questions:

- What is good about staying here?
- What is not so good about staying here?
- If you could change one thing about staying here, what would that be?

## Background

Healthwatch Wakefield has used our Enter and View powers to visit WICU four times previously between December 2013 and January 2015.

The initial visit and subsequent follow up visits were prompted following complaints from the public about the standards of care being provided in the unit. The unannounced visit was undertaken following a serious complaint raised with the Patient Advice and Liaison service (PALs), Healthwatch Wakefield and the Wakefield Express which mirrored previous concerns.

### 05/12/13 – Announced Visit

- Potential safeguarding issues identified during visit were reviewed by multi-agency Safeguarding Strategy Meeting on 19/12/13 and confirmation provided that issues identified did not merit investigation under safeguarding procedures.
- Actions were agreed with the Trust to cover all other issues identified during 05/12/13 visit.

### 06/02/14 – Announced Visit

- Overall, visit revealed improvements underway, new management in place and no cause for concern. Some changes still not completed and further follow-up to be scheduled to check again on progress.

### 22/05/14 – Announced Visit

- The visiting team was delighted to see that all the Healthwatch recommendations had been implemented. The refurbishment programme had been completed quickly and the whole ambience of the unit hugely improved. The staff looked happily engaged with patients and it was felt that the new unit manager had made a significant improvement to patient care.
- The visiting team queried the current staffing levels and they were informed that the unit operated on a 1:8 patient ratio. Sickness rates for staff were down and staff appeared happy and well supported.

### 20/01/15 – Unannounced Visit

- This visit was prompted by a serious complaint from a member of the public that included many of the issues highlighted by earlier complaints about this service.
- At the time of our visit we found no significant concerns around the safety, dignity and care of patients.
- No specific recommendations were made following this unannounced visit as the Trust and WICU managers were taking forward actions in response to the complaint.

## 2017 - Announced series of visits

This most recent series of visits was prompted by another concern raised by a member of the public in early 2017, with issues similar to those raised previously. With the Trust's support, we visited WICU on six occasions between 26 March 2017 and 23 May 2017. The times of the visits varied in order to allow our staff to talk to people at different times of the day. We felt that this would give a better understanding of the service than a single visit. Details of each visit can be found in the table below:

| Date | Time | Workers | Patients spoken to | Relatives/ Carers / Friends spoken to | Staff spoken to |
|---|---|---|---|---|---|
| Wednesday 26/04/2017 | 14:00 – 16:00 | Gaynor Endeacott, Laura Brown | 10 | | 6 |
| Saturday 29/04/2017 | 10:00 – 12:00 | Gaynor Endeacott, Laura Brown | 7 | 0 | 0 |
| Wednesday 03/05/2017 | 10:00 – 11:00 | Gaynor Endeacott, Laura Brown | 6 | 2 | 0 |
| Wednesday 03/05/2017 | 18:30 – 19:30 | Gaynor Endeacott | 1 | 1 | 1 |
| Sunday 21/05/2017 | 14:30 – 15:30 | Gaynor Endeacott, Laura Brown | 10 | 0 | 0 |
| Tuesday 23/05/2017 | 19:00 – 20:00 | Gaynor Endeacott, Laura Brown | 7 | 3 | 3 |

Findings

On talking with residents, a number of very positive themes emerged. Of particular importance / strength was that the residents “felt well cared for”.

***“People are caring. I had an ‘accident’ in the night and the staff came and changed everything straight away – I wasn’t waiting at all.”***

***“Everything is good – I would just rather be at home. I’ve nothing but praise – everything excellent – apart from being at home – couldn’t be a better place.”***

***"Very well organised. The girls are very good, they look after you. I feel safe because the staff are watching me and not allowing me to do anything without them."***

***"Very good - all good - they all care - it doesn't matter what you ask them."***

This theme was supported by positive comments about the staff – that they were friendly, approachable and always willing to help. One lady commented that she likes to sit in the garden and last Sunday when it was sunny people were sat in the garden which was rather nice and all the staff came around with ice creams, which was really lovely.

***“Carers are very nice – can’t knock the staff – haven’t met a bad one yet, they are all great.”***

***“They [the staff] have a general casual way with people. I’ve never been anywhere like this before. People are looking after you. Staff, no matter what their job will drop things and do things for you.”***

***"They are very nice [the staff]. I did not know that these places existed. The help that you get is unbelievable." The staff had supported this patient to come and sit in the lounge instead of in his room.***

***“Anything you want, people come and are willing to help for example toileting”***

The overall “friendly” atmosphere of WICU also emerged from the conversations with residents:

***“It’s a really friendly place – better than lots of other places that I have been in anyway and I’ve been in two or three other places.”***

***“It’s good – most people [staff and other patients] are very helpful and very friendly.”***

Residents were also on the whole very complimentary about the food that was provided for them.

***“The most praiseworthy person here is the cook. She works miracles. I have never, never had a complaint about the food.”***

***“Food – as far as this is concerned, you couldn’t get a better meal anywhere.”***

The cleanliness of the unit was also noticed.

***"The place is clean, bed clean, room clean"***

***"Cleanliness wise it's very good"***

Finally, the therapy support and the support that was provided to help the residents to get home was also commented on frequently.

***"The aids and adaptations that they have sorted out [for my relative] have been brilliant."***

***"When they told me that I was coming here I was not happy and I thought what is the point? Since I have been here, I can walk and I am glad that I came. I am doing more here with the Physios and I am happy with the carry on."***

***"Lots of Physio input - even on Saturday and Sunday"***

One lady had a fall at home and felt that the staff have ***"got her going again"***, ***"they give you a second chance to get going"***. She can now walk 5-10 metres ***"they've given me the basis to work from."***

Negative comments focussed largely around access to toileting facilities, both during the day and at night. There was also a strong sense that residents felt that they sometimes had to wait a long time to get help.

***"Sometimes you wait a bit long to be taken to the toilet. It is longer on a night sometimes because there are not as many staff on. You try to manage but… [can be waiting 5-10 minutes] feels like a long time when you are desperate. When you are really desperate you need to go. You don't want to make any mess which puts more work on the nurses that are there."***

***"Ringing the bell for the toilet – they take so long that you get past it – last night I was waiting 35 minutes. It makes me panic waiting in the night – you can ring and ring and it can be 20 mins. I tried to avoid the shift changes at 19:30 so I waited and rang at 19:45 [which was just after the new staff came on] but still no-one came."***

***"I don't think the care on a night is adequate – you can be pressing the buzzer for 20 minutes on a night before somebody comes."***

One gentleman told us that he'd been ringing his buzzer to go to the toilet and was told "ladies before gentlemen". He had to wait while five other ladies were taken to the toilet and, as a result, he wet himself.

Two residents told us that they had been waiting for help to get off the toilet for over one hour.

***"You ring and you can be desperate but you are waiting 10-15 minutes then they have you on the toilet, on your own, unsupervised – no buzzer. If my son hadn't come to ask where I was I would still have been there." This lady told us that she was left on the toilet at the far end of the building for over 1 hour in her nightwear.***

***"I was left on the toilet for 1hr 5mins. I was banging, ringing the buzzer, shouting. The cleaner came and then went. I was banging on the floor with my frame. Then the cleaner came again. I was panicking – I have an irregular heartbeat. In the end they brought a male nurse. I was frozen as I was in my nightgown."***

Healthwatch raised these issues with the Trust staff and were informed that both of these instances had been known to them:

*"We are aware of both incidents, they happened about 3 weeks ago picked up from patient feedback forms facilitated by the therapy team. I spoke to both patients to gain more information, they were both in toilets and advised to ring the buzzers when they had finished. Both buzzers were not operating properly. I advised one of the patients that if she needed to make a formal complaint I would assist her with this; she didn't want to take any further action as she was happy that the issue had been addressed.*

*Because of the issue all the buzzers are checked every morning (allocated at handover or safety huddle) and reported to myself or ** to be reported to estates as urgent. Staff have been made aware that it is their personal responsibility to ensure if they assist a patient to the toilet they assist them off or inform another member of staff and if this is something that happens again it will be dealt with individually. This has been escalated with a notice in the staff room and is on the agenda for the team meeting. Thankfully this hasn't happened since then."* (WICU Clinical Lead)

On a couple of our initial visits we found that buzzers were either not working or tied up out of reach.

***"I don't know what I would improve but I wouldn't come in again."*** This lady had been in WICU for 48 hours. She said that staff did not respond to her buzzer when she rang her buzzer and eventually a nurse came but other patients said it was in response to their buzzers, not hers. We tested the buzzer and it did not work.

***"I don't use the buzzer, it's a waste of time. I don't use it anymore. I have pressed it again and again and no answer."***

***"They work so hard and are surrounded by people buzzing them. I must have rung the bell 13 times."***

We raised this also with Trust staff who responded very quickly:

*"Thank you for this feedback, part of my a.m. walk round every morning is to unravel the buzzers (as we seem to have a gremlin). I worked Saturday a.m. and this was my first job so this news means that someone has specifically wound them up after my walk around which is very annoying. I have and will again reiterate to all staff that this must not happen. We also now have someone allocated to check all the buzzers every day to make sure they are working and we are having ongoing work with the security firm that supply the buzzers and bleeps to ensure the system meets our needs."* (WICU Clinical Lead)

Some people commented on the regime of WICU, and how it didn't necessarily fit with their normal living routines.

***"Having to go to bed too early."***

***"I don't like going to bed at 8:30pm - it's too early."***

***"I was asked if I wanted to lay in at 7.15am, and I said yes please. Then another nurse comes in 10 minutes after and I have to argue to stay in bed for a bit longer."***

***"The place is nice in itself but in the afternoon, I'd like to go for a nap but I need help to go anywhere so I feel more or less tied to the same place [the lounge] every day. A bit more freedom to get into your room would be good - I have asked the staff if I can get into my room but they have said no."***

A lack of stimulation, activity and support to be independent was also mentioned by a few people.

***"Boredom - I don't know how to get around this."***

***"I am stymied. I feel at times that some parts of this establishment it is run for the staff. I feel like I am the puppet and they are the masters."***

***"I don't get to choose where I sit. I am frightened - they stick you in a chair and leave you - I'm petrified of being alone. I've got no idea when I am going home." This lady showed some symptoms of dementia.***

***"I don't like sitting here" when the lady questioned said that she had not been offered any activity. One lady felt that whilst they had volunteers, it would be nice if WICU could have some complementary therapists to do voluntary work for their training for example manicure, massage etc. as a full holistic wellbeing plan.***

***"You don't get much rehab…so there can be quite long periods between Physio….you have Physio one day but then not the next day. We could do with some more rehabilitation."***

## Summary of findings

Healthwatch Wakefield has visited WICU / Queen Elizabeth House on several occasions in the last four years following concerns raised by members of the public. In comparison to our first visit, we have seen a definite improvement in the environment, quality of care and quality of treatment at this unit.

In our most recent series of visits undertaken in early 2017, we found that on the whole the people resident at WICU and their carers had many good things to say. They felt well cared for and they spoke highly of the support and therapy that they were receiving. They said that staff were friendly and kind and that there was a good atmosphere. The food and the cleanliness of the unit were also praised.

Where complaints or concerns were heard, they were predominantly around toileting issues, with buzzers not being responded to quickly, being out of reach or broken. We were told that this had led on occasions to people wetting themselves or being left on toilets for long periods of time. Some people reported feeling bored or under-stimulated and that the regime of the unit meant that they couldn't necessarily be as independent as they wanted to be.

The unit itself appeared fresh and clean, with some rooms recently having been refurbished. Although the focus of our visits was not on staff, many nevertheless were happy to talk to us and tell us about improvements that they felt made WICU a good place to work. It was also good to see volunteers engaging in activities with patients. We did not go into bedrooms so the people we spoke to were all well enough to be up and about, sitting in the communal areas.

## 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 service users and staff, only an account of what was observed and contributed at the time.

## Recommendations

1) Continue with the attention to ensuring that buzzers work and are within reach at all times. Where buzzers are waiting to be repaired provide hand held bells previously used onsite. Senior staff to reiterate through team meetings and supervision that buzzers must not under any circumstance be moved out of reach of residents. Healthwatch Wakefield believes that moving buzzers out of reach constitutes neglect and is not safe/can give rise to distress and avoidable incidents.

2) Training for staff not to rely on buzzers if they tend to be faulty and to take responsibility for individual patients if they have taken them to the toilet. As staff have been made aware that it is their personal responsibility to ensure if they assist a patient to the toilet they assist them off or inform another member of staff, and if this is something that happens again it will be dealt with individually; Healthwatch Wakefield recommends that it is made clear through team meetings and supervision that this will be dealt with as a disciplinary/performance matter.

3) Increase the number of volunteers if possible, to offer more opportunities for activities and/or conversation during the day and early evening.

4) Further to recent Vanguard initiatives around care homes, engage with local community anchor organisations (for example St Swithun's Community Centre in Eastmoor) to see if other activities can be brought into the unit. Healthwatch Wakefield can assist with this if required.

5) Consider whether shift patterns could be adjusted to cover peak periods especially around toileting and putting to bed. This was a suggestion by a WICU member of staff, who thought that it would be helpful to have a 'twilight' shift 6 pm till 1 am.

**Healthwatch Wakefield 23 June 2017**

## Service Provider Response

**Mid Yorkshire Hospitals NHS Trust Response**

Thank you to Healthwatch for undertaking this review of WICU. The Trust welcomes independent feedback from stakeholders and value the support that Healthwatch can provide in helping to identify any issues or themes relating to patient experience that may not always emerge from the Trust assurance and patient experience surveys. It is great that Healthwatch have identified the many improvements that have been taken forward since they undertook their series of previous visits. However, this report also identifies that some experiences for patients is very poor and patient dignity is below what the Trust would expect. These issues were picked up during the review and actions taken immediately to address the concerns

The Trust has supported the Unit in the significant changes and improvements they have made and the improvement work still continues and the Trust recognises that there is still work to do on getting the model of staffing on the unit right to improve the patient experience.