

Lewisham LINK Enter & View Visit Check List

Details of Visit

Premises: Johnson Unit, Ladywell Unit University Hospital Lewisham	Enter & View Representatives: Miriam Long, Cathy Collymore, Desmond Hodgson and Kevin Trowell
	Date of visit confirmation: 20 th June 2011
	Date of visit: 1 st July 2011
Pre visit information: Visit from 9.05 to 11.05 (2 hours duration) Comments from outreach; PALS & complaints reports. 10 bed closed PICU unit plus 136-assessment suite. This unit also has facilities for extra care when a patient needs one to one care due to the level of disturbance or risk. All service users on this ward are under section of the Mental Health Act.	

The Dignity Challenge

1. How does the service ensure that service users/ patients are treated with dignity?				
<input type="checkbox"/> □□ Excellently	<input type="checkbox"/> □□□ Very Well	<input checked="" type="checkbox"/> □□ Well	<input type="checkbox"/> □□ Adequately	<input type="checkbox"/> □□ Poorly
Service users and staff talked to each other using first names and with respect and dignity. Although staff reported this to be a quiet morning, staff still had a busy morning with ward round and a daily planning meeting. Staff expressed the aim of providing client centred care but identified the nature of the unit and the influx of out of borough service users as impacting on this aim. During the visit staff treated all service users with dignity and respect despite the service constraints.				

2. Are people supported with the same respect you would want for yourself or a member of your family?

□□ Excellently □□□ Very Well □□ Well □□ Adequately □□ Poorly

Staff advised us on new developments including the Productive Ward programme but this appears to be a new work stream on this ward. This is a very structured ward and despite the environment and the high level of need displayed the staff seems to cope well and showed respect and support to all services users observed during this visit. Staff displayed a high level of knowledge and skill in maintaining respect for clients in difficult situations.

During 136 assessments the police are asked to carry out any searches and staff are trained in PSTS (Promoting Safe and Therapeutic Services) in order to reduce incidents and safely manage any that do occur.

3. How well do staff members treat each person as an individual by offering a personalised service?

□□ Excellently □□□ Very Well □□ Well □□ Adequately □□ Poorly

No mobiles are allowed for safety reasons but a phone call back system is in place for service users to contact friends and family. However a service user stated that the pay phone was not working, a member then informed that the engineer had attended the day before and that the phone was now working. It would have been useful if there a notice had been displayed informing people that the phone was now working.

Due to the nature of the unit and structures required there is little evidence of personalised services.

A separate exercise area is used for activities and also as a smoking area. Access to this is limited due to the need for staff to carry out 136 assessments and other ward management duties such as EPJ updates and ward rounds. It is also difficult for staff to plan personalised services due to the introduction of Clinical Academic Groups and service users from outside the borough now being admitted.

During the visit staff treated all service users with dignity and respect despite the service constraints. This is a difficult environment to facilitate independence, choice and control and the mental state of individual patients exacerbates the situation.

4. How does the service enable people to maintain the maximum possible level of

independence, choice and control?

Excellently

Very Well

Well

Adequately

Poorly

Service users were encouraged to talk to the visiting team and 2 people agreed to meet and discuss their experiences. Information is made available on notice boards and from staff directly. Once again there are limitations on the amount of independence possible in such a structured environment. All service users have limited options due to the mental health act and dependent on the section status of the individual.

One service user stated that if he could change anything about the ward he would change the access to the smoking area.

On occasion the level of need displayed by a service user or the risks lead to the use of the extra care suite (previously called seclusion) and due to the nature of the intervention this area is very stark but using boundaries can support control and choice.

A patient informed the team that he did not know what his medication was for, we would recommend that patients are informed of their medication, effects and possible side effects in an accessible format.

There are pictures of nursing staff displayed on one of the notice boards, we would recommend that pictures of the doctors also be displayed clearly stating who is on duty on the day.

5. How well do staff listen and support people to express their needs and wants?

Excellently

Very Well

Well

Adequately

Poorly

Despite the nature of the unit service users are able to express their needs to any member of staff including a student. One member of staff on each shift is given the role of safety officer and carry out both risk assessment and support service user access to personal belonging and toiletries. Staff also explained why certain needs and wants are not met.

6. How well do the staff respect people's right to privacy?

Excellently

Very Well

Well

Adequately

Poorly

Comments: Service users have their own rooms but privacy is limited and observations have to be made at regular intervals dependent on the risk assessment. Privacy film is used on all bedroom doors to improve privacy.

7. How does the service ensure people feel able to complain without fear of retribution?

Excellently Very Well Well Adequately Poorly

The complaints procedure was on notice board but no leaflets observed on the unit. One service user made a comment that his request for his solicitors telephone number had taken 5 days which he considered to be too long.

8. How does the service engage with family members and carers as care partners?

Excellently Very Well Well Adequately Poorly

Information is available in secure notice boards and one service user explained that visitors are allowed to visit most of the time. Information on advocacy services was also advertised for service users and carers.

9. How well do staff assist people to maintain confidence and a positive self-esteem?

Excellently Very Well Well Adequately Poorly

Comments: Service users were observed talking to staff individually but no therapeutic interventions were carried out during the visit. One service user requested a towel and socks and this was followed up by the safety officer as all belongings are stored in a locked cupboard.

10. How does the service act to alleviate people's loneliness and isolation?

Excellently Very Well Well Adequately Poorly

Service users did use the garden area when facilitated by members of staff and most came out of their rooms to talk to staff and or watch the TV. There was evidence that individual patients were trying to attract staff attention. Each service user is allocated a named nurse for each shift in an attempt to provide one to one support. There is an activity room but access is limited to 5 patients who must be escorted by staff due to the nature of the ward and would benefit from activity coordinators to support patients in the activity room and to support activities in the garden area. The garden must be staffed by a minimum of 2 staff due to potential risks which restricts access by patients.

Environment

<p>Type of room or ward?</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> A large ward 10 Beds</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> An extra care (seclusion suite)</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> A place of safety (136 suite)</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> A single room</p>	<p>Comments: A very structured and restrictive ward due to the nature of the services users being treated. This is a double locked ward for male service users detained under a section of the Mental Health Act 1983. The 136 suite and the extra care suite were unoccupied at the time of our visit.</p>
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<p>How clean was the room or ward?</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Clean <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Fairly Clean <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Not very clean <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Not clean at all</p> <p>Comments: A domestic member of staff was observed cleaning rooms and the corridors during the visit and it was reported that the ward has fulltime equivalent domestic support.</p>
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<p>How clean was the bathroom and toilet?</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Clean <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Fairly Clean <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Not very clean <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Not clean at all</p> <p>Comments: The shower room was clean but a service user was not satisfied with the temperature of the water. This was checked and it appears to take some time for the water to warm up once the automatic push button is pressed.</p>

<p>What was the food like during the visit?</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Excellent <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Very Well <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Well <input type="checkbox"/> <input type="checkbox"/> Adequate <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Poor</p> <p>Comments: The enter and view team did not sample the food but the use of daily menu's encouraged choice. Staff reported that meal times can be flash points and a high level of supervision is required during these periods. A service user commented that there is plenty of toast available but our visit was after breakfast had been served.</p>

Any Other Comments

The staff on the unit did not know that the visit had been arranged despite the previous visit of the LINK to the site 2 weeks prior to the enter and view visit. A student welcomed us to the ward and was very helpful as were the staff when we met after the planning meeting.

The pressure of working in such an intensive environment, especially when 136 assessments are being carried out can be very demanding on staff and other service users. If 2 staff attend a 136, the remaining 3 staff would be limited in their ability to facilitate all the other ward activity especially when service users are requesting a garden/smoking break.

The ward cover is provided by a ward doctor, specialist registrar and a consultant psychiatrist.

Staffing.

Day shifts : 3 Qualified Staff and 2 support workers

Night Shift: 3 Qualified staff and 1 support worker.

Any additional staff required can be called in at relatively short notice from Trust bank staff.

Ward Environment@ The communal TV area was very Spartan.

136 Suite: Staff showed us the suite and explained the operational policy for the suite. All our questions were answered and it was confirmed that 2 staff observe 136 admission.

One of the comments that prompted our enter and view reported an admission under section 136 and was held in the suite for 6 hours.

One of the commentaries received by Lewisham LINK was from a service user who was brought to the unit under section 136 and was there for 6 hours. The complaint was dealt with by the Trusts complaints department. There still remains a couple of issues as the complaint stated that they were in the unit for 6 hours – The Royal College of Psychiatry recommends that all patients to be assessed within 4 hours and the reason for any variance to this should be clearly documented.

The joint operational policy for the reception and care of service users admitted to a place of safety under section 136 – Mental Health Act 1983, section 3.13 state the place of safety (136) co-ordinator be informed if a person has been searched or not. The complainant states that she was not initially searched on being admitted to the place of safety. She was not searched until 3 hours later. There appears to have been a breakdown in procedure. The person under section refused to hand over a mobile phone, she was physically restrained and the phone was removed from her, causing distress. The enter and view team asked whose role it was to search patients admitted under section 136 and were informed that it is a police function to search patients before hand over to ward staff.

The service user was assessed by the psychiatrist and subsequently discharged home after 6 hours without the provision of transport. The Royal College of Psychiatrists recommends a person is not admitted the hospital should make transport arrangements and that there should be funds for this purpose available 23 hours a day. This did not happen according to the service user complaint.

Declaration

This checklist completed by:	
Kevin Trowell Desmond Hodgson Miriam Long (SIGN)	Kevin Trowell Desmond Hodgson Miriam Long (PRINT)

On:
04.07.11 (DATE)