

Lewisham LINK Enter & View Visit Check List

Details of Visit

Premises: Triage Ward Ladywell Unit South London and Maudsley NHS Foundation Trust	Enter & View Representatives: Jen Gillard; Desmond Hodgson; Tony Sullivan; Miriam Long
	Date of visit confirmation: 20.06.11
	Date of visit: 23.06.11 Duration: 1 hour 45 minutes
Pre visit information: Comments received from outreach; Patient Opinion; PALS & complaints reports. It would have been useful to have had a copy of the TRIAGE ward welcome pack prior to the visit.	
Ward Information: Segregated ward, 14 beds, used to assess all patients for an average stay of 7 days prior to moving to a locality ward or discharge. Runs at full capacity, current occupancy: 9 male/ 5 female. Welcome to Triage Ward booklet given to patients describing the ward and what to expect and information on advocacy support.	

The Dignity Challenge

1. How does the service ensure that service users/ patients are treated with dignity?

Excellently Very Well **Well** Adequately Poorly

We were unable to speak to any patients on the ward as the ward had a female disturbed patient. Tina Irwin, Ward Manager clearly indicated during her tour and in conversation that patients are treated with dignity. We were informed that the ward holds weekly community meetings where patients are able express their views and concerns.

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

The ward manager gave very clear indications that patients were treated with respect- this was demonstrated with her dealings with a patient waiting to be admitted.

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

Excellently Very Well **Well** Adequately Poorly

Unfortunately we were unable to talk to patients on the ward but have arranged to attend a ward community meeting at a later date. Patients on two to other wards visited informed us that staff did treat them as individuals. One patient commented "I am a schizophrenic and on a ward with other patients with the same diagnosis and we are treated as individuals".

The manager informed that all staff on the ward have completed 5 day dual diagnosis training. Non English speakers have access to an interpreting service.

The ward liaises with the Home Treatment Team to support people through discharge and to prevent further admissions. The team is available at short notice, on the same day if needed. The team can provide individual community support twice daily for up to six months. A social worker is also attached to the ward.

There is no specific service for patients who have learning disabilities, this is seen a gap in service provision.

4. How does the service enable people to maintain the maximum possible level of independence, choice and control?

Excellently Very Well Well **Adequately** Poorly

Smoking is seen as a major issue for patients as they have to be escorted outside to the designated smoking area. Where ever possible they are granted section 17 of the Mental Health Act which allows a doctor to grant leave from hospital to a patient detained under the Mental Health Act. This enable some patients to go our for a smoke unsupervised.

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

Excellently Very Well **Well** Adequately Poorly

We were told about the community meetings where patients are able to express their needs and wants but were unable to observe this in action. However, patients on the other 2 acute wards indicated that they felt supported when they were being assessed on the Triage Ward.

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

Excellently Very Well Well Adequately Poorly

Unable to ascertain a patient's perspective however the ward manager indicated that staff respect people's right to privacy. Staff monitor patients regularly as part of the assessment by looking through the window to their rooms.

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

Excellently Very Well Well Adequately Poorly

There was information on the ward notice board regarding complaints and advocacy services. i.e. Voice Ability and representatives from ISIS visit the ward regularly. Patient and Carers information leaflets contain information on advocacy services.

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

Excellently Very Well Well Adequately Poorly

Unable to observe any engagement with Carers but we were informed that patients are consulted if they want staff to talk to family or other carer givers about their care. Visiting times are 2- 5pm, 6.30 – 8pm but there is some flexibility.

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

Excellently Very Well Well Adequately Poorly

Unable to observe as we did not speak to any patients on the ward. Agreed to return and meet patients at a community meeting.

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

Excellently Very Well Well Adequately Poorly

Ward manager informed that they try to encourage patient activities on the ward and have an activities coordinator but due to the nature of triage it is difficult to engage people who are only there for assessment and they are either discharged or admitted to a locality ward. There are no therapy groups on the ward but patients can access gym facilities in the basement of the Ladywell Unit. Although there were 14 patients staying in the ward, there were none in the communal areas of the ward during the visit.

Environment

<p>Type of room or ward?</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> A large 16 bed ward</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> A bay with less than 6 other patients</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> A shared room</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> A single room</p>	<p>Locked acute admission ward with segregated male/ female bays.</p> <p>Currently 14 patients: 9 male, 5 female. 2 rooms in main communal corridor are being converted to DLA compliance with en-suite.</p> <p>The TV in the communal area was very loud and in a locked frame so could not be adjusted.</p>
--	---

<p>How clean was the room or ward?</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"/> <input type="checkbox"/> Fairly Clean <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Not very clean <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Not clean at all</p>
<p>Generally the ward was clean and well maintained. Decorations, bright and cheerful. The day room/ dining room has been refurbished and is now open plan café style. We were only observed the male and communal areas.</p>

<p>How clean was the bathroom and toilet?</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"/> <input type="checkbox"/> Fairly Clean <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Not very clean <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Not clean at all</p>
<p>There are separate male and female bathrooms in each bay. There is a unisex shower/ toilet in the main corridor near the nurse's office however this is being refurbished and will be part of the DLA en-suite facility. Therefore once the refurbishments are complete there will only one bathroom/toilet available for each of the segregated bays unless the unisex accessible facility is unoccupied.</p> <p>The bathrooms are basic and painted a dull grey, there is no natural light and no bathmats. The bath in the male bathroom was dirty however the overall facilities were clean.</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"/> <input type="checkbox"/> Very Well <input 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>We did not sample the food but were informed that the food provided on the ward is placed in a hot lock trolley and is heated.</p>

Any Other Comments

Major issues and recommendations:

1. Smoking facilities, currently patients have to wait to be escorted to the communal garden area. Only 4 patients are able to go out escorted at any time. This entails nursing time to escort patients. It was felt that the smoking ban was unfair to these vulnerable people as it causes additional stress when they are particularly unwell. South London & Maudsley NHS Trust recommended to give consideration to installing an enclosed balcony for patients to be able to smoke without the need to be escorted to the garden.

2. People presenting at Lewisham Hospital A & E with physical health needs who are redirected to Triage ward without having their physical health needs assessed and met. 2 patients had subsequently died. The hospital and Triage ward need to work together to ensure a holistic approach to patient care.

3. 2 LINK representatives to attend a ward community meeting to get patient's perspective of the ward.

Staffing Levels and shifts

Am shift: 7.30am – 3.30pm, 4 trained staff; 1 support staff

PM shift: 1.15 - 9.15pm, 5 trained staff

Mid shift: 8.30 – 4.30pm, 2 staff

Night shift: 8.45pm – 7.45 am, 4 staff

Staff undertake internal night shift rotation and normally work 2 weeks on nights. Student nurses and RMN students are supernumerary. Turn over of staff is very low. One staff nurse was recruited last year. Some staff have worked in the ward for over 8 years. The low staff turnover is a good indication that staff moral is high.

LINK members felt that the ward was a positive one. The ward manager was open to questions and conveyed a caring attitude towards patients and viewed them with dignity and respect.

The 7 day maximum turnaround of patients creates an area of good practice. Patients are constantly being reviewed and being transferred to an acute ward or discharged to the Home Treatment Team of Community Care. The ward manages to discharge 50% of patients admitted.

Declaration

This checklist completed by:	
(SIGN)	Jen Gillard Desmond Hodgson Tony Sullivan Miriam Long <div style="text-align: right; padding-right: 10px;">(PRINT)</div>

On:
05.07.11
(DATE)

