

Lewisham LINK Enter & View Visit Check List

Details of Visit

Premises: Wharton Ward, 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 1.15 to 2.45 pm (Duration 1.5 Hours) Comments from outreach; PALS & complaints reports. This is an 18-bed mental health ward for people between 18 and 65. The ward has an extensive welcome pack that is given to each service user who is admitted to the ward. They also have regular visits from the Trust Information Office who disseminates information from the Trust and community groups in the borough.	

The Dignity Challenge

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

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

Stable environment with no raised voices, and no evidence of dismissive behaviour. The use of a personal diary helped give a sense in individuality and worth to service users. Community groups are also held to give service users the chance to discuss any issues they may have about their care. The service user information pack is extensive and shows a commitment to respect and dignity.

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 very welcoming and made the enter and view team visit very structured. A service user reported that we have "good staff and they make me feel respected."

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

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

There are clear therapeutic boundaries set, and the use of personalised diaries seems to be a very effective way of stimulating engagement while maintaining boundaries.

There could be a negative aspect of too much structure and the use of group timetables in that this reduces the individualised nature of the interventions and could be seen to restrict choice. A balance needs to be made between choice and structured activity.

As far as possible, given that many of the service users are detained under a section of the Mental Health Act 1983.

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 are allowed to keep their mobile phones whilst on the ward. There is a lot of information on notice boards and in various rooms that patients can access by asking staff. The availability of a laundry room (locked when in use but access given by staff) also gives service users more independence and choice. Named staff also gives allocated therapeutic time, at specific time of the day. Menus offer food choice and variation.

Smoking was not raised as such an issue on this ward as on others visited.

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

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

Once again the use of a laundry room, community meetings and suggestion box all indicate an open ward that encourages individuals to take responsibility for their care and welcomes feedback on service provision.

The use of protected mealtimes and protected therapeutic time before lunch also indicates a service user focus to care.

The direct one to one time also offers service users the time and opportunity to discuss individual needs and wants.

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

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

Comments: All staff knocked before entering rooms and it was explained about the new privacy films that are currently being fitted onto glass panels to promote service user privacy whilst maintaining safety.

As far as possible, staff respect the need for privacy and staff were observed carrying out hourly observations discretely.

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

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

Comments: Complaints procedure clearly displayed on notice boards. In addition ward round standards and other documents to explain the roles and boundaries to staff and service users.

The service user information pack also included clear information on the complaints procedure.

Each service user is allocated a specific nurse on each shift to encourage one to one communication.

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

Excellently
 Very Well
 Well
 Adequately
 Poorly

Lots of information is available to all parties in the care system including information on carer's services and other useful links to community resources. Information is available in different areas of the ward including a relaxation room and on notice boards. The ward has a nominated "carers and families nurse" enabling carers and families to ask questions, discuss issues and concerns and an opportunity to share their experiences. The ward has allocated room to facilitate these visits for adults and children.

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

Excellently
 Very Well
 Well
 Adequately
 Poorly

Comments: People encouraged to comment on services as listed earlier. Service users have access to a hairdresser and a nail technician is also available at regular intervals. A patient kitchen with drinks and snacks and a laundry facility, which can all be seen as encouraging independence and in turn self-esteem.

There is also a handout on the care review meeting. The handout in the pact states "We will ask you your views, involve you in decisions and answer any question you might have".

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

Excellently
 Very Well
 Well
 Adequately
 Poorly

Comments: The extensive group sessions and the use of common areas such as a family room all indicate the ethos of a team that encourage engagement and attempt to alleviate isolation and loneliness. A quiet relaxation room is also available for use by service users and includes the use of a keyboard, which attracts people to the room.

The patient kitchen, also offers a social interaction focus for service users.

Environment

<p>Type of room or ward?</p> <p><input checked="" type="checkbox"/> A large ward</p> <p><input type="checkbox"/> A bay with less than 6 other patients</p> <p><input type="checkbox"/> A shared room</p> <p><input checked="" type="checkbox"/> A single room</p>	<p>Comments: A homely ward environment with plants and lots of light. A female only inpatient ward for 17 service users. A range of service users are admitted to this ward with a wide range of diagnosis from psychotic illnesses to mood and anxiety disorders.</p>
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<p>How clean was the room or ward?</p> <p><input checked="" type="checkbox"/> Clean <input type="checkbox"/> Fairly Clean <input type="checkbox"/> Not very clean <input type="checkbox"/> Not clean at all</p>
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This ward appeared to be clean and tidy with a good ambiance encouraged by plants and pictures throughout. Each service user had a comfortable chair in their room, which was not evident in the rest of the Ladywell Unit. Each room had storage facilities and a hand basin.

<p>How clean was the bathroom and toilet?</p> <p><input checked="" type="checkbox"/> Clean <input type="checkbox"/> Fairly Clean <input type="checkbox"/> Not very clean <input type="checkbox"/> Not clean at all</p>

Bright and airy rooms with lots of towels made available for service users as bath mats are not allowed due to health and safety regulations.

<p>What was the food like during the visit?</p> <p><input type="checkbox"/> Excellent <input type="checkbox"/> Very Well <input checked="" type="checkbox"/> Well <input type="checkbox"/> Adequate <input type="checkbox"/> Poor</p>

The enter and view team did not sample the food but the use of daily menus and readily available snacks offers choice in terms of what and when to eat. One service user did comment that the food is a bit repetitive, with the same food was available on specific days such as fish and chips on Fridays. Special dietary requirements can be met by ordering in advance in order to meet cultural or medical need.

It was noted that the evening meal is served 5.30, which is very early and leave a long period of time until breakfast the following morning.

Any Other Comments

Please write any other comments here: The use of an information pack for all service users and the large amount of clear information displayed around the ward was very informative. There are a number of leaflets including service user and carer information on medication.

The development of the "Productive Ward" has seen the introduction of a new medication trolley, which has added to the organisation improvements made using this programme.

The ward staff that supported this visit made this a well structured and interesting enter and view and the staff should be commended for their knowledge and support.

Some staff commented on the change in the ward since it became a female ward only. They explained that they perceive a rise in aggression and higher support needs from women. The ward is a multi—diagnosis ward and can have a large range of need at any one time.

Staffing:

Day shift. 3 qualified staff and 1 support worker.

Night shift. 2 qualified staff and 1 support worker.

4 Student nurses also work on the ward but these are supernumerary (RMN students).

1 part time activity co-ordinator works 3 days per week.

It was felt that there was a positive feeling about this ward with several quiet rooms including ones without television. The atmosphere on the ward was positive, vibrant and calming. The service user information was impressive and this was the only ward to advise visitors about the use of the panic alarm system, should we require using it. There was also evidence of engagement and activity on the ward, which is vital in this type of setting.

Declaration

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

On:
04.07.11
(DATE)