

EXECUTIVE & CENTRAL COMMITTEES

VISITING MONITORING REPORT

SUBJECT:	VISITING ACTIVITY APRIL – JUNE 2019
REPORT OF:	DEPUTY CHIEF OFFICER
STATUS:	INFORMATION PAPER
CONTACT:	JEMMA MCHALE
DATE:	AUGUST 2019

PURPOSE

To inform Committees of the CHC's visiting activity and the Health Board's responses following visits undertaken between April 2019 and June 2019.

BACKGROUND

Visits were carried out to outpatient departments for trauma and orthopaedic appointments, community hospitals and general acute wards as part of the CHC annual plan.

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Visits from the previous quarter updated with Health Board response

Visit	St Cadocs Hospital – Adferiad ward	Date:	06/03/2019
<ul style="list-style-type: none">• The CHC would be pleased to receive information regarding the staffing levels on the ward.• The CHC would be pleased to receive information on the policy/process of discharging patients who are experiencing homelessness.• The CHC would be pleased to receive information about how patients with hearing impairments are able to communicate effectively on the ward.			
Health Board response:			
<ul style="list-style-type: none">• There are currently eight nurse vacancies (band 5), four have been appointed to. The remaining four post are anticipated to be filled in September 2019. In the meantime, the division are utilizing temporary staff as highlighted in the report. In addition, the ward has recently recruited four Healthcare Support Workers (Band 2). The ward is run on a Morning (early), Afternoon (Late) and Night shift basis. On both the Early and Late shift there are 6 staff on duty (3 registered, 3 unregistered) in addition to an Advanced Nurse Practitioner who is based on the ward Monday – Friday, 9-5. The night shift is staffed with 5 staff (2 registered and 3 unregistered).• There is a new, Health Board-wide discharge policy which is due to be ratified soon. Housing and accommodation are key areas for consideration as above, as opposed to an explicit policy with regard to homelessness. Adferiad is supported by a Housing support worker employed by Gofal. This role is key in identifying service users who are homeless, at risk of homelessness or who may have difficulty in maintaining tenancies/ accommodation. For someone who is homeless on admission or made homeless during admission to the ward, the Housing support worker will accompany the person to the Local Authority Homelessness office to ensure that they are able to access emergency accommodation and thus able to access support to find more permanent accommodation. If the person is to receive follow up from the CMHT, this will continue to be support be staff from the CMHT.• Adferiad ward is able to access interpreters via the Health Board for people who use BSL. Staff are encouraged to follow			

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general advice with regard to enabling lip-reading for example not covering mouths when speaking, enunciating words, using a visually 'quiet' background/room. The ward does not have a Loop system for Hearing Aid users, though this is incorporated into new builds within the Health Board. Currently, there are plans to commission feasibility studies into changing the internal layout of the ward, and the feasibility of inclusion of a loop system in the ward will be included.

The ward:

- The CHC would be pleased to understand whether the Dashboard is no longer used and if so, what method is in place to capture the relevant data.
- The CHC would be pleased to receive information regarding the refurbishment of the bathroom.
- The Health Board should consider providing bins within the shower rooms.
- Ward staff should ensure that shower rooms are free from toiletries.
- The CHC would be pleased to understand whether there are any plans to deep clean/refurbish the shower rooms.
- Ward staff should ensure that sharps boxes found in public areas are closed.
- The CHC would be pleased to receive information regarding the timetable of activities that is available to patients to become involved with during their time on the ward.
- The CHC would be pleased to know what provision is available for patients to meet with family/friends in privacy.
- The CHC would be pleased to understand whether there are plans to change the 136 Suite.

Health Board response:

- The ward has a "you said, we did" whiteboard in situ to facilitate service user and visitor's to offer suggestions and ideas which may improve their experience. The recommendations are logged and discussed with the senior nurse on a monthly basis.
- The bath is now in situ & the final snag list is being completed prior to the work being signed off.
- Consideration has been given to citing bins in shower rooms, however this can lead to the accumulation of toiletries in the bins which can pose a health and safety risk in that some people have been known to ingest toiletries. Sanitary bins in

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toilet areas are provided.

- Ward staff regularly check shower areas for the presence of toiletries.
- There are plans to refurbish the shower rooms and a programme of works is now being established. Start and completion dates to follow.
- All sharps boxes are stored in the clinic area of the ward which is a managed area (i.e. locked, and only accessible to service users with a member of staff)
- Activities are available to service users on a daily basis and also individual Occupational Therapists undertake personal programmes. Whilst much of these interventions are on weekdays, the OT Support worker also works some evenings and weekends to facilitate engagement throughout the week.
- There are quiet rooms available on the ward for people to meet with family/ visitors in private.
- There are no plans to change the location or layout of the s136 suite at present. But the staffing levels have been acknowledged and temporary increase of staff is in place whilst a longer term solution is being worked through.

Patient area:

No recommendations required.

Staff:

- The Health Board should ensure that all staff display clearly visible name badges.
- The Health Board should ensure that the patient, and/or relatives where appropriate, are at the center of, and involved in, all decision making.
- The Health Board should note the comments made by patients in relation to the numbers of staff on the ward.

Health Board response:

- All staff reminded to wear identity badge.
- Care and Treatment plans will be coproduced by service users and ward/ community staff, including relatives where appropriate. Service users are also encouraged to be part of the "ward round".
- Feedback with regard to staffing levels will inform current and future planning.

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Comfort and hygiene:

- The CHC would be pleased to understand what facilities are available to patients who are considered to be 'high risk', regarding comfort, i.e. blankets and pillows.
- The CHC would be pleased to receive information regarding repairs to the showers on the ward.

Health Board response:

- Any removal of items such as blankets, pillow cases etc. must be clearly clarified in a person's risk assessment and risk management plan; including the conditions required for a person to have access to such items again.
- Any repairs that are required in the interim will be escalated to the Works & Estates Department for resolution.

Linen:

No recommendations required.

Meal time provision:

- The CHC would be pleased to receive information regarding the process of meal times on the ward and whether patients are able to select their meals in advance.

Health Board response:

- Service Users are requested to submit their meal choice for the following day, and this is communicated to the kitchen. The ward will also confirm numbers each morning with the kitchen to ensure there is adequate meal provision.

Areas Visited, Status of Response and Response Received

Visit	Ysbyty Ystrad Fawr – Ty Cyfannol	Date:	15/03/2019
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The ward:

- The CHC would be pleased to receive information about how patients with hearing impairments are able to communicate effectively on the ward.
- The CHC would be pleased to understand more about 'Treat me Fairly' and why this information is available instead of the Putting Things Right process.
- The CHC would be pleased to understand whether there is flexibility for visiting hours where family/friends are unable to attend during the usual visiting times.
- The Health Board should assess whether the doors to the ward would benefit from being replaced.
- The CHC would be pleased to understand the following:
 - a) Whether the order for new furniture had been delivered.
 - b) Whether there are any activities available in the evenings and weekends.
 - c) Changes that have been implemented as result of the 'Hear Me Out' discussion group.
 - d) Whether staffing levels allow all activities to run each week.
 - e) Whether the outdoor area is not accessible to patients on weekends.

Health Board response:

- The ward manager will ensure that ward staff receive training in the use of the 'loop' system available on the ward.
- 'Treat Me Fairly' is online equality training for staff and this has been displayed in error. The correct procedure with respect to the NHS management of complaints and concerns is the 'Putting Things Right' process. This has been rectified.
- Whilst visiting hours are displayed on the ward door, there is flexibility around visiting times. Patients and their visitors are advised that visiting can usually be accommodated at any time.
- A feasibility study has been commissioned with regard to potential options for position and type of doors.
- A) Furniture has been ordered
- B) A protocol has been designed for opening the activity room in the absence of OT staff, which includes risk assessment, and is awaiting ratification. There have been activities arranged in

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the evenings and weekends via third sector organisations, however unfortunately these have become more 'ad hoc'.

- C) Garden furniture has been purchased and pictures have been placed in the courtyard
- D) Staff vacancies do present a challenge however, OTs commit to a weekly timetable of activities that is flexible.
- E) The main courtyard garden is open every day & is available to all.

Patient area:

- The CHC would be pleased to know whether the blinds have been replaced.

Health Board response:

- New blinds have been ordered & the ward is awaiting a delivery/ fitting date

Staff:

- The Health Board should note the comments made by patients in relation to the numbers of staff on the ward.
- The CHC would be pleased to receive information regarding the frequency with which patients miss treatments due to staff shortages.

Health Board response:

- Nursing vacancies have been acknowledged. The Health Board has used both nursing agencies and the nurse bank in the short term, however recognises that this is a temporary solution.
- The Health Board recognises that it has a duty to ensure that patients receive treatment in a safe and timely manner. In the past six months, there have been three occasions where an ECT treatment has been missed. Further explanations were given in the full action plan.

Comfort and hygiene:

- The CHC would welcome information regarding whether the 'mindfulness' room, or elsewhere, is available to be used by patients throughout the day to ensure a quiet, relaxing environment is accessible.

Health Board response:

- Patients are welcome to use the mindfulness room for quiet time at any time of the day.

Areas Visited, Status of Response and Response Received

Linen:

- The Health Board should ensure that only linen of a satisfactory standard is supplied to the ward.

Health Board response:

- Ward manager will review the current linen supply and discuss with the house keeping leads.

Meal time provision:

- The Health Board should note the comments made by patients regarding the portion sizes and variety of the food available.

Health Board response:

- The Health Board notes the feedback from patients with regard to choice and portion size. Portion size also reflects nutritional balance.

Areas Visited, Status of Response and Response Received

Visit	Maindiff Court Hospital – Ty Skirrid	Date:	19.03.19
<i>The ward:</i>			
<ul style="list-style-type: none">• The CHC would be pleased to receive information about how patients with hearing impairments are able to communicate effectively on the ward.• The CHC would be pleased to learn if the ward environment has been considered for decoration.• The CHC would be pleased to receive information regarding the refurbishment of the bathroom.• The CHC would be pleased to understand whether the kitchen is scheduled to be refurbished and the reasons for its deferral.• The CHC would be pleased to understand whether internet access is available for patient use on the ward.			
<i>Health Board response:</i>			
<ul style="list-style-type: none">• The ward has access to BSL service. The ward does not have a hearing loop system.• The ward is on the rota for painting this year.• A funding bid has been approved to refurbish both shower rooms.• A funding bid to refurbish the kitchen area was not approved for reasons that, once the wider Health Board estates strategy is clear and has been approved the ward may make another funding application.• Wifi has now been installed on the ward.			
<i>Patient area:</i>			
No recommendations required.			
<i>Staff:</i>			
<ul style="list-style-type: none">• The Health Board should ensure that all staff display clearly visible name badges.			
<i>Health Board response:</i>			
<ul style="list-style-type: none">• Staff will be reminded of their responsibility to wear ID badges.			
<i>Comfort and hygiene:</i>			
No recommendations required.			

Areas Visited, Status of Response and Response Received

Linen:

- The Health Board should ensure that only linen of a satisfactory quality is supplied to the ward.

Health Board response:

- Ward manager will review the current linen supply and discuss with the housekeeping leads.

Meal time provision:

No recommendations required.

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Visit	Ysbyty Aneurin Bevan – Carn y Cefn	Date:	22.03.19
The ward: <ul style="list-style-type: none">• The CHC would be pleased to understand if there are any plans to redecorate the ward.• The CHC would be pleased to understand whether the Health Board has plans to move the smoking room to an outdoor area.			
Health Board response: <ul style="list-style-type: none">• A request has been made to add the ward to the painting programme.• The smoking facility on Carn y Cefn ward has now been moved to the garden area. A shelter has been assembled for the patients use.			
Patient area: <p>No recommendations required.</p>			
Staff: <ul style="list-style-type: none">• The Health Board should note the comments made by a patient in relation to the numbers of staff on the ward and the impact on being able to go out.			
Health Board response: <ul style="list-style-type: none">• The Health Board recognises that spending time away from the ward is a valuable part of a patient’s recovery. The availability of staff to facilitate this will depend on the individual needs of the patient group at any time. However, there is a commitment to facilitate this whenever the ward situation and the individual’s care plan allows. The ward also benefits from an Occupational Therapist and OT Support Worker who also facilitate off-ward interventions with patients when clinically indicated.			
Comfort and hygiene: <p>No recommendations required.</p>			
Linen: <p>No recommendations required.</p>			

Areas Visited, Status of Response and Response Received

Meal time provision:

No recommendations required.

Areas Visited, Status of Response and Response Received

Visit	County Hospital - Talygarn	Date:	25.03.19
<p><i>The ward:</i></p> <ul style="list-style-type: none"> • The CHC would be pleased to receive more information about the plans for the self-contained flat on the ward. • The CHC would be pleased to understand whether there is flexibility for visiting hours where family/friends are unable to attend during the usual visiting times. • The Health Board should ensure the shower curtain is repaired/replaced to ensure patient dignity is maintained. • The CHC would be pleased to understand if the following have taken place: <ul style="list-style-type: none"> A) Whether the curtains/blinds have been replaced. B) Whether the ward has facilities for patients to charge electronic devices, or to have them charged for them. C) Whether the outdoor furniture, smoking shelter, wall mounted lighter and 'gym' equipment has been delivered. <p><i>Health Board response:</i></p> <ul style="list-style-type: none"> • The ECA (Extra Care Area) it is a closely supervised space, away from the main clinical area in which a single patient may be safely nursed and supported away from other patients. This is to preserve the patient's dignity and ensure that the patient's behaviour / presentation does not negatively impact on the other patients. There is a proposal to knock 2 bedrooms in to one large space with safe and robust fittings at the furthest end of the ward. A meeting is planned for 20/6/19 to review the building work required which will inform any future capital bid, should it be agreed that this option will be progressed. • Whilst visiting hours are displayed on the ward door, there is flexibility around visiting times. Patients and their visitors are advised that visiting can usually be accommodated at any time. • The shower curtain has been rehung. • A) The blinds have now been replaced and curtains are on order. • B) Chargers have been reordered. • C) The Smoking shelter and outside lighter are not in place. A charitable bid for outside furniture, fittings and furniture was awarded on the 25/5/19. Once the money has been received; chairs, wall mounted games, plants and exercise equipment will be purchased for the court yard. 			

Areas Visited, Status of Response and Response Received

Patient area:

No recommendations required.

Staff:

No recommendations required.

Comfort and hygiene:

- The Health Board should note the comments made regarding noise levels at night times.

Health Board response:

- This has been raised with ward staff by the ward manager, who has reminded staff of the need to maintain a quiet environment by night.

Linen:

No recommendations required.

Meal time provision:

- The Health Board should ensure patients are aware of having access to snacks throughout the day and night if required.

Health Board response:

- The ward always orders a supply of sandwiches, to ensure that patients who may miss meal times for any reason receive adequate nutrition. The Ward Manager has reminded staff to make patients aware of this on, and throughout their admission.

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Visit	Nevill Hall Hospital – 3/4 Tretower Ward	Date:	05.04.19
Ward:			
<ul style="list-style-type: none"> • The CHC would be pleased to receive information about whether any staff are due to be trained to use the hearing loop system. • Ward staff should ensure that once patients are well enough to receive information, they are given an information leaflet or verbal communication about their stay on the ward. • Ward staff should ensure the Dashboard is updated with relevant information. • The Health Board should ensure that clinical waste bins and sharps boxes within patient areas are locked and/or closed. • The Health Board should review whether more facilities/activities could be utilised on the ward to help prevent boredom and isolation. 			
Health Board response:			
<ul style="list-style-type: none"> • Ward sister to identify training needs of ward staff and facilitate access to training if appropriate. • The ward will provide all patients with welcome information on admissions to highlight routines/discharge/visiting/meal times etc. and undertake regular checks of stock. • Dashboard will be updated daily and monitored by the Senior Nurse. • The clinical waste bins have been removed from the ward area. • Patient will be informed of and encouraged to utilise the day room. Staff will ensure there are activities available in the day room such as; books, television, games, cards and crafts. A wheelchair can be provided to patients so visitors can take patients off the ward to the canteen etc. if appropriate. 			
Patient area:			
No recommendations required.			
Staff:			
<ul style="list-style-type: none"> • The Health Board should ensure that patients are listened to and at the centre of decision making regarding care and treatment. 			

Areas Visited, Status of Response and Response Received

Health Board response:

- The Ward Sister will ensure that Nurses to act as patients advocates at all times. That all relevant information is shared openly and honestly with patients so they can make informed choices. Verbal communications will be followed up with written information to ensure understanding. Patient feedback in relation to involvement in decision making to be collated through Health and Care Standards Audit (HaCSA). A nominated next of kin will be identified and communicated with in a timely manner within the realms of patient consent and confidentiality.

Comfort and hygiene:

- Ward staff should ensure that buzzers are accessible and responded to in a timely manner.

Health Board response:

- The Nurse in Charge will check buzzers are in working order at the start of each shift. Any broken buzzers will be replaced immediately. All nurses will be reminded to check that buzzers are within raise every time they leave the bedside.

Linen:

No recommendations required.

Meal time provision:

- Catering staff should ensure that the food trolley is plugged in to maintain an appropriate temperature.
- Staff should ensure that all patients are given the option to use hand hygiene facilities prior to eating.

Health Board response:

- All ward staff have been reminded to plug the food trolley in and that service is timely.
- The Ward Sister will reinforce to staff the need for patients to be offered or encouraged to use hand hygiene facilities before meals.

Areas Visited, Status of Response and Response Received

Visit	Ysbyty Ystrad Fawr – 3/2 Penallta	Date:	16.04.19
Ward:			
<ul style="list-style-type: none"> • The CHC would be pleased to receive information regarding whether all staff are trained to care for patients with dementia and/or mental health issues on the ward. • Ward staff should ensure that once patients are well enough to receive information, they are made aware of the information pack within their room. • The Health Board should ensure that sharps boxes within patient areas are closed. • The Health Board should review whether more facilities/activities could be utilised on the ward to help prevent boredom and isolation. 			
Health Board response:			
<ul style="list-style-type: none"> • All staff will receive Dementia training and all staff are being supported to complete the online training module. • All patients and relatives will be informed on admission. All information packs are in the process of being updated. • All staff to be reminded of the importance of ensuring that all sharps boxes are closed and the clinical room will be kept closed at all times. • The ward is looking into a volunteer service and also have explored the prospect of Intergenerational Volunteering with local schools. 			
Patient area:			
<ul style="list-style-type: none"> • Ward staff should ensure that patients have access to their buzzer at all times. 			
Health Board response:			
<ul style="list-style-type: none"> • All staff will be reminded that each time they have contact with a patient they make sure that the buzzer is within reach. Each buzzer should be tested on to ensure its operational. 			
Staff:			
<ul style="list-style-type: none"> • The Health Board should ensure that patients are listened to and at the centre of decision making regarding care and treatment. • The CHC would be pleased to understand whether staffing levels are an issue on the ward. 			

Areas Visited, Status of Response and Response Received

Health Board response:

- Patients are encouraged to attend ward multidisciplinary team meetings and consulted on care plans and discharge planning where capacity allows. Where patients are too unwell or do not have capacity, family representatives are encouraged to engage with process. All staff are committed to “making Every Contact count” training and updates.
- An in-depth review of staffing levels has been undertaken by Head of Nursing, no issues were identified. Extra staffing is agreed if a more complex patient cohort is being nursed.

Comfort and hygiene:

- Ward staff should ensure that buzzers are responded to in a timely manner.
- Ward staff should ensure that all patients’ toileting needs are being met.

Health Board response:

- Each Registered Nurse and Healthcare Support Worker has the responsibility for 8 patients within “pod” working which will enable the buzzers to be answered in a timely manner. The practice is audited daily by the Ward Sisters.
- Each Registered Nurse and Healthcare Support Worker has the responsibility for 8 patients within “pod” working which will enable the buzzers to be answered in a timely manner. This practice is audited daily and during leadership walk arounds.

Linen:

No recommendations required.

Meal time provision:

- Catering staff should ensure that gloves are worn when serving food.
- Staff should ensure that all patients are given the option to use hand hygiene facilities prior to eating.
- The Health Board should note the feedback from patients regarding the temperature of the food, incorrect meals being served and the lack of assistance in cutting up food when required.

Areas Visited, Status of Response and Response Received

Health Board response:

- The Ward Sister and Senior Nurse will ensure that all staff serving meals wear the appropriate gloves.
- All staff will be reminded to offer hand hygiene facilities.
- Facilities Manager to ensure that meals on mobile carts are of the correct temperature reaching the ward prior to meals being served. Ward Sister to ensure that meals orders are correct prior to being served.

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Visit	Royal Gwent Hospital – B7 West	Date:	25.04.19
Ward: <ul style="list-style-type: none">• The Health Board should ensure that all patients receive an information leaflet either prior to arriving on the ward, or on admittance.• The CHC would be pleased to understand whether male staff toilet facilities will be made available on the ward.• The Health Board should ensure that clinical waste bins in public areas are locked.• The Health Board should review whether more facilities/activities could be utilised on the ward to help prevent boredom and isolation.			
Health Board response: <ul style="list-style-type: none">• Scheduled care Nurses have been reminded to give patient information leaflets at pre assessment clinic.• Current staff toilet will be made available to male and female staff. Notice on the door changed.• All staff have been reminded of their responsibility to ensure the clinical waste bins are locked.• WRVS contacted to ask if the hospital trolley could be taken to B7 daily. Radios to be purchased to be made available for patients. A Television has been purchased for the ward. Works and estates have been contacted to attach TV to the wall.			
Patient area: <p>No recommendations required.</p>			
Staff: <ul style="list-style-type: none">• The CHC would be pleased to understand whether staffing levels are an issue on the ward.			
Health Board response: <ul style="list-style-type: none">• Staffing is monitored on a daily basis and it is acknowledged that movement of staff is necessary at times to maintain staffing in all wards.			
Comfort and hygiene: <ul style="list-style-type: none">• The CHC would be pleased to understand whether the number of toilets available on the ward is adequate for the requirements of the patients.			

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Health Board response:

- There has been no concern expressed by patients or staff regarding the number of toilets available on B7. Additional toilets are available on the Colposcopy unit adjacent to B7 ward if required.

Linen:

No recommendations required.

Meal time provision:

- Staff should ensure that all patients are given the option to use hand hygiene facilities prior to eating.
- The Health Board should note the feedback from patients regarding the quality and temperature of the food, as well as the portion sizes.

Health Board response:

- Healthcare Support Workers reminded at team meeting to offer hand hygiene facilities prior to meals.
- Patient feedback was forwarded to Hotel Services Manager and an audit to evidence any improvement is due to take place on 09.08.19.

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Visit	Ysbyty Aneurin Bevan – Sirhowy Ward	Date:	29.04.19
Ward:			
<ul style="list-style-type: none"> • The Health Board should review whether the ward could provide more information for patients/visitors, including complaints procedure, staff information etc. • Ward staff should ensure that all patients receive information about the ward and facilities; via a leaflet or staff explaining verbally. • The CHC would be pleased to understand whether the bathroom being used as a store room is negatively impacting on patient access to bathrooms. • The Health Board should ensure that fire exits are clear at all times. • The Health Board should review how patients who cannot access the day room are offered activities to reduce the impact of boredom and isolation. 			
Health Board response:			
<ul style="list-style-type: none"> • Patient information leaflets are being reviewed and will be complete 31.07.19. These will be offered to all patients and will be monitored by the Ward Manager and Senior Nurse. • The Ward Sister will monitor the distribution of leaflets to patients. • All patients have access to ensuite showering facilities and are asked on a daily basis if they would prefer to shower or bath. The patient hoist is currently stored in the bathroom due to lack of space but is removed when patients are using the facilities. • All stock has been relocated to clear fire exits. • Ward sister will ensure that staff are offering the patients opportunities to engage with activities from their room when this is possible. 			
Patient area:			
No recommendations required.			
Staff:			
<ul style="list-style-type: none"> • The CHC would be pleased to understand whether staffing levels are an issue on the ward. 			

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Health Board response:

- The ward is staffed to establishment in line with safe staffing levels. The ward has a vacancy factor of 2.5 and are currently recruiting. There may occasionally be an issue when there is short notice sickness or cancellation of the bank or agency nurses and this is managed on as it occurs by shift swapping, moving staff, bank usage and agency as necessary.

Comfort and hygiene:

- Ward staff should ensure patient hygiene needs are being met.

Health Board response:

- Care planning does include patient preference in respect of either showering or bathing, which will include hair washing/shaving. Staff to ensure that options offered and patient's choice is articulated in documentation to support staff on following shifts. This will be monitored through spot checks and audits.

Linen:

No recommendations required.

Meal time provision:

No recommendations required.

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Visit	County Hospital – Hafan Deg Ward	Date:	14.05.19
Ward:			
<ul style="list-style-type: none"> Ward staff should ensure that all patients receive information about the ward and facilities; via a leaflet or staff explaining verbally. 			
Health Board response:			
<ul style="list-style-type: none"> The Ward Manager will remind nursing staff that the admitting nurse must ensure that verbal information is given to the patient on admission to the ward or as soon as is reasonable thereafter; either by themselves or delegated to another member of staff. The Ward Manager has confirmed that ward Information Booklets are available, and are stored with other information leaflets at the entrance to the ward. The Ward Clerk is to be asked to place the information leaflet in the Admission Pack which nursing staff complete with patients, to ensure that patients receive the booklet on the day of admission. 			
Patient area:			
No recommendations required.			
Staff:			
<ul style="list-style-type: none"> Ward staff should ensure that they introduce themselves to patients before providing any care. 			
Health Board response:			
<ul style="list-style-type: none"> The ward manager will remind all nursing staff that they must introduce/re-introduce themselves to patients prior to providing any care/ intervention. 			
Comfort and hygiene:			
<ul style="list-style-type: none"> Ward staff should ensure that all patients have access to a buzzer, or other method of contacting staff if they need assistance. 			
Health Board response:			
<ul style="list-style-type: none"> The Ward Manager will remind all nursing staff that they must ensure that once in bed, patients are able to reach their buzzer. 			

Areas Visited, Status of Response and Response Received

Linen:

No recommendations required.

Meal time provision:

No recommendations required.

Areas Visited, Status of Response and Response Received

Visit	County Hospital – Rowan Ward	Date:	15.05.19
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Urgent visit findings:

- The ward is often understaffed, although not today. Staff are particularly concerned about the staffing levels during the next few days.
- It was reported that the ward does not have a lounge chair for each patient, a block has been put on for chairs.
- Patients raised concerns that they are not always listened to.
- Patients reported that staff are not always helpful and friendly.
- Some patients reported that their buzzers were not working and are not always answered in a timely way due to a lack of staff.

Immediate response from Health Board:

- Staffing will be reviewed by the Senior Nurse for the site to support deficits in staffing/ skill mix.
- Ward will be reverted back to a 20 bedded ward from 26 beds.
- Senior walk arounds will continue.
- Agency staff were further advised of the Health Board's Values and Behaviours' Framework.
- All "staggered ordering of chairs" have now been received.
- The call bells in each area were checked. There were 4 which were not working; 2 without the call bell hand sets and 2 where the handsets were found to be faulty. Additional handsets were available on the ward; the hand sets were changed and re checked. All handsets were then in working order. Staff have been reminded to check these regularly and to escalate without delay any health and safety issues.
- Patient experience survey was planned for May 2019 and 6 patients took part, findings suggest:
 - Patients report that the ward is clean and they all feel safe.
 - Most staff were described as helpful but there was definite identification of bank/agency staff who were not as helpful.
 - Most patients stated they did not normally sleep well, but their sleep was disturbed by noise at night, especially staff 'shouting down the ward'.
 - Patients reported that staff sometimes responded quickly to their buzzers and sometimes it took longer.
 - Patients identified they were treated with dignity and respect and most identified that they had privacy, but one patient did not like being in a bay with other patients.
 - The patients spoken with felt listened to the majority of the

Areas Visited, Status of Response and Response Received

time, again there was identification that this was not always the case with bank /agency staff.

Ward:

- The CHC would be pleased to understand whether staffing levels continue to be an issue on the ward.

Health Board response:

- Following immediate review by the Health board to significant concerns raises, all Registered Nursing shifts are filled and 1x outstanding sift for a Healthcare Support Worker has been requested via Bank.

Areas Visited, Status of Response and Response Received

Visit	St Woolos Hospital – Sycamore Ward	Date:	24.05.19
Ward:			
<ul style="list-style-type: none"> • The Health Board is asked to consider the CHCs feedback regarding the areas of damp observed in the main corridor areas of the hospital and provide feedback on any plans to address this. • The CHC would be pleased to receive information in respect of the ward’s access to hearing loop facilities for patients with hearing impairments. 			
Health Board response:			
<ul style="list-style-type: none"> • This has been raised with the Works and Estates Manager who cover St Woolos Hospital. The Directorate will request an update in due course. • The ward does not have a 'Loop system' for Hearing Aid users, though this is incorporated into new builds within the Health Board. Sycamore ward staff are able to access interpreters via the Health Board for people who use BSL. 			
Patient area:			
No recommendations required.			
Boredom and isolation:			
<ul style="list-style-type: none"> • The CHC would like to pass on its congratulations to the ward and its volunteers for the many activities available to patients and for the fund raising to introduce more engagement opportunities. 			
Health Board response:			
<ul style="list-style-type: none"> • The Division and Directorate Team will pass on the CHC's congratulations to the ward team, and request that the Ward Manager share the report with all staff to ensure that all are aware of this recognition. 			
Staff:			
No recommendations required.			

Areas Visited, Status of Response and Response Received

Comfort and hygiene:

No recommendations required.

Linen:

No recommendations required.

Meal time provision:

- Staff should ensure they return patients' water jugs following cleaning.
- The Health Board is asked to consider the views of patients regarding the level of choice for meals and some dissatisfaction with the quality of food.

Health Board response:

- The Ward Manager will remind staff to return patients' jugs in a timely way after cleaning. Due to the unsettled nature of the ward at times this is risk assessed, if jugs are unable to be returned immediately staff ensure regular drinks are offered and given on request of the patient. Staff will be reminded again in ward meetings.
- The Ward Manager will ensure that any feedback with regard to meal choices is passed on to the Facilities Division to inform future meal provision. The positive feedback with regard to the breakfast club will be passed on to the staff involved.
- The Health Board wished to thank the CHC for highlighting and commending the staff and volunteers on this ward for their efforts in promoting opportunities for engagement in activities and for the fundraising work they do for the ward.

Areas Visited, Status of Response and Response Received

Visit	Ysbyty Ystrad Fawr – Annwylfan Ward	Date:	27.05.19
Ward:			
<ul style="list-style-type: none"> • The CHC would be pleased to receive information in respect of the translation services available to the ward. • The CHC would be pleased to receive information about how patients are orientated to the ward and what information is available to patients and visitors. • The Health Board is asked to consider the feedback given by the visiting team regarding the ward's décor. 			
Health Board response:			
<ul style="list-style-type: none"> • Face to face interpreting can be arranged, and details are also on the intranet site. This includes access to Welsh and BLS interpreters. • All patients and their relatives are orientated to the ward on admission by the admitting nurse, or as delegated by him/her. We apologise if this was not made clear at the time of the visit. All patients and their relatives are provided with a copy of the patient /ward information leaflet. The leaflets are displayed at the entrance to the ward, and we will ensure that these are prominently visible. • The ward has recently been redecorated using 'dementia-friendly' colour schemes to aid individuals with depth perception. Large colourful murals are displayed in some areas in addition to the entrance to the ward. On entering the ward, the art work has a theme – 'Forget me Not Street'. Additionally, sensory boards are in situ on the walls in the corridor leading to the bedroom area. The directorate has considered the feedback given by the visiting team, and will continue to further develop the dementia friendly environment for Annwylfan Ward. 			
Patient area:			
<ul style="list-style-type: none"> • The Health Board is asked to consider the visiting team's feedback regarding the garden area. 			
Health Board response:			
<ul style="list-style-type: none"> • Work will commence shortly in developing a second garden area and the CHC team's feedback will be considered in the design of this area. Additionally, gardening activities are also 			

Areas Visited, Status of Response and Response Received

encouraged indoors when outdoor areas are not accessible due to weather, a patient's health etc.

Boredom and isolation:

- The CHC would be pleased to understand how patients are informed of activities on the ward.
- The CHC would be grateful to receive information about the television facilities within bedrooms.

Health Board response:

- We acknowledge that the activities board displayed in the lounge area may not adequately inform patients and carers of daily activities available on the ward. The directorate will further support purchasing additional activities boards to be displayed prominently in the main ward corridor. Soon after admission, Occupational Therapy staff complete interest check lists with patients in order to assess what activities may be meaningful for that individual and to inform the wider care plan.
- There are two televisions within the ward for people to spend time watching TV. These are in communal areas to encourage positive social interaction between patients, carers, and staff. The ward also has an iPad which can be used to view things such as historical rugby games and TV programmes. The directorate will purchase a further iPad and wireless headphones for patients to use. Currently TVs are not provided within the patient bedroom area. The directorate will further explore this taking into consideration, risk factors that affect this very vulnerable patient group.

Staff:

- The Health Board is asked to remind staff to introduce themselves before providing care or treatment.

Health Board response:

- The ward manager will remind all nursing staff that they must introduce/re-introduce themselves to patients prior to providing any care/ intervention.

Comfort and hygiene:

No recommendations required.

Areas Visited, Status of Response and Response Received

Linen:

No recommendations required.

Meal time provision:

- The CHC would be pleased to receive information from the Health Board regarding the "targeted trolley" mentioned above and what this entails.

Health Board response:

- At the time of the CHC visit, one service user was at risk of burns due to his ill health, he was unable to understand that it was not his job to push the trolley around the ward at each mealtime. Therefore, the hot trolley has been temporarily placed away from the patient area. Once the person's risk profile changes/ the person has been discharged; the hot trolley will be returned to the dining room area to serve food.

Areas Visited, Status of Response and Response Received

Visit	Royal Gwent Hospital – D3 West	Date:	04.06.19
Ward:			
<ul style="list-style-type: none"> • The CHC would be pleased to receive information in respect of the hearing loop system. • The Health Board should ensure that dashboards are updated daily. • The CHC recognises that information leaflets on arrival are not always possible on this ward, however, the CHC would be please to understand how patients are orientated to the ward when it's appropriate to do so. • The Health Board is asked to review whether the availability of shower access is suitable on this ward. 			
Health Board response:			
<ul style="list-style-type: none"> • There is a hearing loop on the ward and it is functional. The ward sister will speak with all staff members to ensure they know it is there and how to use it. • The ward manager has been reminded of the importance of updating the dashboards weekly. • All patients that are admitted to D3W should be orientated to the ward in terms of toilet facilities, mealtimes and visiting. Time will be given for patients to ask questions about their admission. This will happen during the admission process. • Patients are given the choice of how they wish to undertake their personal hygiene. The number of showers has been reviewed and is deemed appropriate for the ward. 			
Patient area:			
<ul style="list-style-type: none"> • The Health Board is asked to remind all staff to ensure that patients can access their buzzer. 			
Health Board response:			
<ul style="list-style-type: none"> • All staff have been reminded and as part of monthly Dignity and Essential Care Inspections undertaken by the Senior Nurse & Assistant Divisional Nurse compliance of this will be checked. 			
Boredom and isolation:			
<ul style="list-style-type: none"> • The Health Board is asked to review the access to the visitor's room and review the corridor storage. 			

Areas Visited, Status of Response and Response Received

Health Board response:

- Unfortunately D3W does not have a visitor's room but there is a small room within the Coronary Care Unit (CCU) that can be used by patients. It is acknowledged that due to environmental constraints there is nowhere nearer to CCU for commodes to be stored. This area serves CCU, High Dependency and D3W. This risk has been assessed by the Infection Prevention and Control teams. The nurse in charge will ensure the linen trolley is only in the corridor if it is being used. Domestic staff have been reminded to ensure their trolley does not block the corridor.

Staff:

- The Health Board is asked to remind staff to clearly display their name badge.

Health Board response:

- A uniform inspection was completed in July 2019 for all wards within Unscheduled Care. Compliance with Health Board policy for D3W was 94%. All staff who require name badges have been reminded of the correct process for ordering.

Comfort and hygiene:

- The Health Board is asked to consider the feedback from one patient who did not feel comfortable to shower and the second patient who was not encouraged to undertake dental care.

Health Board response:

- There are showers located directly next to D3W on D3E, all patients are encouraged to use them and assistance is offered if required. All staff will encourage patients to undertake dental care as and when required.

Linen:

No recommendations required.

Meal time provision:

- The CHC would be pleased to receive information from Health Board about the roll out of the same day meal ordering system and how many wards now utilise this system.
- The Health Board should ensure that patients are aware of what snacks are available throughout the day and night.

Areas Visited, Status of Response and Response Received

Health Board response:

- The concept of electronic meal ordering system is to allow patients to order & consume their meals on the same day consequently enhancing the patient's whole mealtime experience. The ordering system allows patients to order meals directly from their bedsides leading to benefits of improved choice, nutrition and reduced wastage. Meal options are customised so that patients are only presented with suitable options specific to their dietary needs. This increases safety and eliminates the possibility of a patient being served a meal which could cause further medical issues as well as increasing patient satisfaction by avoiding showing the patients the options they cannot have. Each morning the Nurse in Charge completes a dietary request sheet, which aids the Hostess in offering the correct menu to a particular patient. To date, this has been rolled out at three hospitals, Ysbyty Aneurin Bevan, Ysbyty Ystrad Fawr & the Royal Gwent Hospital. We are now in the planning stage of implementing the system at Nevill Hall Hospital on 30th July 2019.

Every patient is able to enjoy a smooth ordering process, enhanced by the interactivity of the ordering solution, to ensure a personal and accurate meal experience. Sites / Wards Rolled out.

- YAB 3 Wards
- YYF 5 Wards
- RGH 27 Wards

- Mental Health Units at YAB & YYF are not using the tablets due to the nature of the patients, although all patients feeding requirements are inputted into the back office system. This also applies to A&E, D1W & MAU at RGH, due to the high turnover of patients in these areas same day ordering would not work.

- Ward staff will ensure all patients are aware of what snacks are available and how to request them if required.

Areas Visited, Status of Response and Response Received

Visit	Ysbyty Ystrad Fawr – Rhymney Ward	Date:	13.06.19
Ward:			
<ul style="list-style-type: none"> The CHC would be pleased to receive information in respect of the hearing loop system. 			
Health Board response:			
<ul style="list-style-type: none"> There is a hearing loop on the reception area of Ward 2.3. This loop is tested on a monthly basis by a member of the Audiology Department in YYF. Reception staff are familiarised with the hearing loop functions. An update session for these staff has been arranged with Audiology for 20th September 2019. 			
Patient area:			
No recommendations required.			
Boredom and isolation:			
<ul style="list-style-type: none"> The CHC would be pleased to understand the varied access to Television and radio facilities for difference wards with the hospital. 			
Health Board response:			
<ul style="list-style-type: none"> Access to television on other wards is assessed on the differing patient need and risk. Rhymney Ward – all single rooms have functioning, remote control TV's as do other medical/community wards. Mental Health Wards have communal access, and electronic devices are available on a risk assessed basis. 			
Staff:			
<ul style="list-style-type: none"> The Health Board is asked to confirm when the ward snack facilities, e.g. toaster, will be replaced to increase patient snacking choice. 			
Health Board response:			
<ul style="list-style-type: none"> The toaster has been replaced. Toast, biscuits and fruit are available as a snack. 			
Comfort and hygiene:			
<ul style="list-style-type: none"> The CHC would be pleased to receive information about any other hair washing facilities available to patients who are unable to shower. 			

Areas Visited, Status of Response and Response Received

Health Board response:

- If a patient is unable to be assisted to have their hair washed in the en-suite shower area in each room, the ward has its own remote control bath that can be height adjusted to allow hair washing.

Linen:

No recommendations required.

Meal time provision:

No recommendations required.

Visits conducted between April 2019 and June 2019 – report awaiting response

	Response expected
Nevill Hall Hospital – 2/4 Raglan Ward	02.09.19
Chepstow Hospital – Caerwent Ward	30.09.19

Visits conducted between April 2019 and June 2019 – report not yet submitted

	Date of visit
None.	