Enter and View Visit to Mandarin ‘A’ Renal & General Ward
Healthwatch Representatives undertook the visit after receiving feedback from relatives of patients who were treated on Mandarin A ward. Relatives and friends told Healthwatch that the ward came across very busy and some staff were uncaring:

- Comments included “*A few staff members stand around having a chat whilst an elderly man has called them, but they continue to chat, until he has called and called*” Another relative said “*There is no way, there are enough nurses on that ward, people just don’t get the best care as there are too many patients and little staff*”

Healthwatch authorised representatives undertook a visit to Mandarin A Ward. We spoke with patients, visitors and staff about their experiences of the ward. The focus was on the three areas of nutrition, the management of personal hygiene and the interaction between staff and patients.
What we found...

- Overall patients were satisfied with the meals provided. However, the lack of hot drinks was raised as an issue. Patients told representatives that if their food arrived whilst they were sleeping nursing staff or catering staff did not wake them up.

- In general, patients were satisfied with the choice and quantity of food. Diabetic patients felt there was not enough choice and patients staying for longer than a week felt the menu got repetitive.

- Patients were happy with the way they are treated on the ward. However, it was noticed that staff during the day are more caring than those on the night shift. Most patients reported that they did not wait long when they used the call buzzer.

- The majority of patients told Healthwatch representatives that staff explained medical procedures to them, and they were able to ask questions.
What we recommended...

❖ Senior staff to examine if there is a difference in the quality of care, and the attitude of staff on the night time shifts on Mandarin ‘A’ ward

❖ The Ward Manager to explore the possibility of hot drinks being provided to patients later in the evening.

❖ The possibility of more food options for diabetic patients.

❖ Feedback to Healthwatch on the staffing issues on the ward.

❖ Ward staff to ask patients early in the day if they would like to be woken up at meal times, or if they would prefer to remain asleep.

❖ Some provision to be made for patients who have slept through a meal time so they are not hungry.
Responses from the Hospital Trust included these Outcomes...

- Discuss with Sodexo the possibility of an extra hot drinks round on the ward, supported by volunteers
- Discuss the possibility with Sodexo to include more diabetic food choices on the menu
- To aid recruitment and retention of staff to Mandarin ‘A’ Ward, the division to participate in recruitment events
- Senior leaders to provide unannounced night checks on the ward
- Monitor the ‘Friends and Family’ and ‘I want Great Care’ surveys and feedback. Act on it accordingly
- The ward team to put in place a robust process regarding whether patients wish is to be woken at meal times or not. Include on patients information board
- Work closely with volunteers service regarding meals and drink support
- Monitor patient safety thermometer data on a monthly basis
- Senior leaders to review all actions, carry out spot checks to ensure they are being implemented.
Enter and View Visit to Bennetts Castle Care Centre
What we did...

- Healthwatch was told by relatives who visited the care centre that the quality of care was not always as high as they would have expected and were concerned about the times when they were not there and what kind of care was being provided.
- We went in to engage and speak with residents; relatives and staff to find out from their feedback where the service is working well and which areas may not be. We wanted to address the concerns raised that prompted the visit.
- Healthwatch sought feedback and views about the following criteria: How Caring; Safe; Responsive and Effective is the Service?
What we found ...

❖ Overall, from feedback and observations made during the visit, it was evident that the needs of residents were being met.
❖ There were no recommendations made by Healthwatch for this visit.
❖ A response was required from the provider to clarify issues raised at the time.

Some findings from the visit:
❖ The people that Healthwatch spoke with had varied opinions about the food – some were satisfied, others not so satisfied.
❖ Healthwatch were informed that the care centre’s usage of agency staff is low and has been put in place for a couple of residents whose require one to one care.
❖ Representatives were satisfied that the wellbeing of the residents they met was being considered; however, from discussion with some people, at times they felt lonely; especially those who had no one to visit them.
❖ At the time of the visit, the centre was having work carried out to improve the living areas. This had been carried out on the ground floor and was due to start on the 1st floor. It was noticeable to all representatives that there was a smell of urine on the 1st floor.
❖ Staff were mainly positive about doing their job and felt supported in their role.
❖ The centre manager holds regular meetings with relatives and representatives to enable them to raise issues of concern.
The provider’s response...

- Overall this was a positive report.
- We ensure the same staff are provided on a permanent rota to ensure consistency for the resident.
- The centre only uses “agency” to cover sickness when all other avenues have been exhausted (such as our bank of in house staff available to cover).
- The centre has an exceptional team of loyal and long serving staff which provides stability and a family orientated atmosphere.
- The service employs a counselling psychotherapist two days a month. This service is accessible by staff and relatives of residents free of charge.
- With regards to the report of a residents medication being on the floor on some occasions, this was one occasion where the resident in question began to hide their medication.
- There was to be a total re-decoration of the Care Centre, due to be completed by February/March 2017 – this includes replacing all flooring and furniture.
- We take great pride in our efforts to reach out to and provide an inclusive environment in which people everyone’s opinion matters and is listened to.
Questions?