

Announced Follow-Up Inspection

Dignity and Essential Care

Cardiff and Vale University Health Board

University Hospital of Wales

Ward A6

Date of inspection 16th April 2014

HIW Follow-Up Inspection: Ward A6, University Hospital of Wales

Inspectors: HIW Clinical Service Advisor and Clinical Inspector (Peer).

Health Board Staff:

Ward Manager (inspection and feedback session) and Staff of Ward A6 (inspection)

Senior Nurse (inspection and feedback session)

Senior Nurse Professional Regulation and standards (initial on site meeting and feedback session)

Clinical Board Nurse

Assistant Director of Nursing (initial on site meeting)

Communication Via: Health Board Executive Director of Nursing

Background and Schedule of follow-up:

The initial inspection took place on 7 February 2013. The Health Board was asked to provide their action plan outlining the progress they had achieved related to the findings and subsequent recommendations made in the initial HIW draft report.

On the 16th April 2014 HIW undertook an announced follow-up inspection against the recommendations of the initial report..

During the follow-up we discussed and gained evidence from the Ward Manager and Senior Nurse as to the Ward's progress against the recommendations. We then spent time on the Ward speaking to patients and staff, observing care and reviewing documentation of care provided.

Focus of Follow-Up Inspection:

The follow-up inspection focused on the findings of the Dignity and Essential Care inspection of February 2013 and the progress which the Ward and the Health Board had made since February 2013 against the following areas:

- The ward environment
- Staff attitude and behaviour
- The management of patients with confusion, dementia care needs and complex needs
- The documentation of care, including care planning and provision
- Medicines management
- Fluid and nutrition
- Pressure area care
- Personal care and hygiene, including toileting needs
- Communication
- Discharge planning (More complex discharges).

During the inspection we looked at the overall standard of patient experience and the standard of management and leadership of the clinical service.

We were presented with evidence which supports the conclusion that the Ward has achieved most of the recommendations made during the initial inspection. We noted that the Ward was progressing well towards achieving all other recommendations (See table below).

Inspection Assessment and Findings:

Ward A6 is the Regional Spinal Injuries Unit. The Ward caters for both male and female patients who have a suspected or actual spinal injury in the acute, recovery and rehabilitation phase. The Ward is a highly specialised area and has 19 beds serving the whole of Wales.

The staff have up to date skills in the care of patients with a variety of clinical conditions and aspects of care. However, the Nursing team predominantly specialises in spinal injuries nursing and trauma care.

Staff are experienced in dealing with a variety of patient and relative emotions including acute emotional upset, distress and anxiety, as well as frequent challenging behaviour including untoward verbal communication. It was noted that patients appreciated the ability of staff to deal with numerous difficult distressing situations. We were told by patients and relatives that staff are very sensitive to individual patient needs and that staff are kind and considerate. Patients and relatives stated that they were well informed by Medical and Nursing staff about their care and treatment and that they found staff approachable at all times.

We observed staff assisting patients with the use of head phones and replacing call bells after providing care to them. Staff were also observed demonstrating the TV so the patients could use the system independently. Staff were observed to be interacting well with patients, explaining what they were going to do, such as recording their blood pressure and making pleasant conversation as appropriate. Refreshments were brought around the ward about 3.30pm and patients were assisted as required.

Staff moved around the ward in a professional manner and there was good evidence of team work and strong leadership. The Ward Sister did not have concerns about staffing levels, although the area is highly specialist and patient acuity is high. Most patients require up to six staff at the bedside to assist turning to maintain safety in the case of spinal care and treatment. The Ward sister and senior staff were happy with the agreed establishment although the Sister was included in these numbers on all but one day a week when she concentrated on administration and management. The ward was noted to have a good standard of cleanliness although general housekeeping around tidiness was noted to be an area where improvement was required.

Progress since initial Inspection:

The Ward Manager and Senior Nurse provided evidence of the work that has been undertaken against the recommendations from the initial inspection. There appears to have been good progress against most recommendations, which is outlined in the Ward's dignity and essential care action plan. There is on-going progress against two of the initial inspection recommendations.

Most of the recommendations have been led and achieved from within the Ward team, led by the Ward Manager, supported by the Senior Nurse Manager and Divisional Nurse.

Some recommendations have been further assisted by divisional and Health Board wide initiatives which have supported the Ward's own action plan including an emphasis on compassionate care and dignity. The ward has drawn on Clinical Nurse Specialists and other Health Board wide services in support of the implementation of the Ward action plan including the dementia care nurse. There is work ongoing on the implementation of the butterfly scheme, the change management of which is which is being led by the Ward Sister, supported by a link nurse.

The Ward team are highly specialised in their area of practice and it was evident that they took pride in their service and were highly confident in their work. Throughout our discussion it was evident that staff pay due attention to the Fundamentals of Care for individual patients, most of which are highly dependent on the Nursing staff to assist them with activities of daily living.

The monitoring of quality and safety within the Ward and the directorate was described and includes Patient Safety At a Glance (PSAG) Boards, intentional rounding and a focus on quality care and patient safety led by the Senior Nurse and Ward Manager. There was notably good evidence of the practice of effective real time documentation. There was evidence of multi-professional team working within the Ward and a supportive senior nurse team. The involvement of the senior nurse team in on call support to other areas was noted to be beneficial in bringing learning from other areas back to the directorate.

Overall, it was noted that the ward had made good progress against the recommendations of the initial inspection and was continuing to progress the areas of care planning. Staff were attentive to patients needs and were sensitive in their approach. Patient dignity was respected and there was a focus on the individual needs of all patients. Although highly specialist in spinal injury and trauma care, staff were noted to be further developing their skills and knowledge in the care of patients with dementia and their skills in complex discharge.

HIW Announced Follow-Up Inspection Record 16/04/14 Ward A6 University Hospital of Wales

Initial Inspection Finding	HIW Follow-up Finding	Health Board Action	Responsible Officer	Timescale
Patient Experience				
During the follow-up Patients were observed to be well cared for. Patients told us that they received good care and attention. This included attention to their individual personal care needs. Adequate information was given about their care and treatment. We found evidence of written patient information and health promotion.				
<p>The Ward Environment:</p> <p>Male/Female signage on toilets/washrooms</p>	<p>HIW follow-up noted that this recommendation had been broadly achieved.</p> <p>Signage for male/ female toilets/ washrooms has been actioned.</p> <p>We observed some general housekeeping being required to maintain tidiness of stored items.</p>	<p>The ward and the Health Board is required to maintain the standard of patient experience.</p> <p>The ward must maintain a high standard of general housekeeping in relation to the tidiness of stored items.</p>		

Delivery of Fundamentals of Care				
We observed that the Ward had achieved improvement in all recommendations of the initial inspection and was making progress in the area of more complex discharge planning. We observed during the follow-up that the ward was delivering a good standard of the fundamentals of care.				
Staff Attitude and Behaviour.	Achieved – standards observed as being met at time of follow-up inspection	The Ward and the Health Board is required to maintain the Fundamentals of Care Standards		
Ability to carry out dignified care	Achieved – standards observed as being met at time of follow-up inspection	The Ward and the Health Board is required to maintain the Fundamentals of Care Standards		
Care planning and provision	Progress is being made.	Ward to continue to complete to full implementation		
Fluid and Nutrition	Achieved – standards observed as being met at time of follow-up inspection	The Ward and the Health Board is required to maintain the Fundamentals of Care Standards		
Pressure Area care	Achieved – standards observed as being met at time of follow-up inspection	The Ward and the Health Board is required to maintain the Fundamentals of Care Standards		
Discharge Planning	Progress being made. It was recognised that this is work in progress to fully achieve for complex discharges.	Ward to continue to complete to full implementation		
Medicines Management	Achieved – standards observed as being met at time of follow-up inspection	The Ward and the Health Board is required to maintain the standards		

Management and Leadership

During the follow-up we noted effective leadership from the Ward Manager and that the Ward Manager and staff were well supported by senior nursing staff. The Ward Manager described that there were adequate staff for the demands of the specialist clinical care which required above average staff ratios for safety and accuracy when moving patients with spinal injury. The ward described that there was an escalation procedure in the event of increased patient acuity and that this resulted in the required additional staff being made available.

The Ward and the Health Board is required to maintain the standard of management and leadership observed during the follow-up inspection.

Quality and Safety

Although we observed notably good practice in real time documentation. Patients had speciality based care plans which did not include completely individualised plans of care inclusive of core fundamental care areas. Although care given was well documented in real time, this did not achieve complete systematic evaluation of care provided.

We noted that work had progressed to improve the documentation of individualised care. There was good evidence of real time documentation. All patients had a comprehensive nursing assessment. Most patients had a care plan, these were speciality specific. Care plans were not fully individualised with patients' names written on the care plan. The Ward recognised that this work is in progress and they are further developing their nursing care planning and nursing documentation.

The Ward is required to maintain the momentum of progress and to achieve full improvement of individualised care planning and nursing documentation.

The Health Board is required to maintain the standard of quality and safety observed during the follow up inspection.