

'Enter and View' Report

West Middlesex University Hospital – Marble Hill 2 Ward

Twickenham Road, Isleworth, TW7 6AF



Healthwatch Hounslow
8th November 2017

Service visited:	West Middlesex University Hospital (WMUH) – Marble Hill 2 (MH2)
Address:	Twickenham Road, Isleworth, TW7 6AF
Date and time of visit:	8 th November 2017, 11am – 3pm
Status of visit:	Announced
Healthwatch Hounslow 'Enter and View' Authorised Representatives:	Sangnuma Rai, Cynthia Roshi, Francis Ogbe and Mystica Burridge.
Lead Authorised Representatives:	Mystica Burridge
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Healthwatch Hounslow (HWH) has the power to 'Enter and View' services in the borough of Hounslow. 'Enter and View' visits are conducted by teams of trained 'Enter and View' Authorised Representatives.

Purpose of the visit

The Health and Social Care Act allows HWH 'Enter and View' Authorised Representatives to observe service delivery and speak to patients, residents, staff, relatives, friends and carers. The visit can happen if people tell us there are concerns, but equally, the visits can take place when services have a good reputation. We can therefore learn from shared examples of what they are doing well from the perspective of the people who experience the service first hand.

'Enter and View' visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with the HWH Safeguarding Policy. If at any time an Authorised Representative observes a potential safeguarding concern, they will inform their lead. The lead Authorised Representative will then end the visit. In addition, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the Care Quality Commission (CQC) and Hounslow Council's Safeguarding Team.

On this occasion, four 'Enter and View' Authorised Representatives (two HWH volunteers and two HWH staff members) attended the visit. The Authorised Representatives spoke with patients, staff and visitors. Recommendations have been made on how to improve the service and good practice has been highlighted. HWH had liaised with the CQC, Clinical Commissioning Group (CCG) and the Local Authorities (LA) to create an 'Enter and View' Programme. A number of health and social care providers were selected to be visited. There wasn't a particular reason for visiting MH2, the visit was part of HWH's remit.

Acknowledgements

'Enter and View' Authorised Representatives: Sangnuma Rai, Cynthia Roshi, Francis Ogbe and Mystica Burrige.

Thanks to Vanessa Sloane, staff, patients and visitors.

Background

Marble Hill 2
Ground Floor
Marjory Warren building

Speciality – General

Observations about MH2

Ward area

Patient beds were clearly labelled with bed number, their full names and their allergies on a white board just above each patient bed. Generally ward was clean, well-lit with hand sanitisers available at the entrance of the ward, near each side room's entrance and also at each bay. Gloves were also available at the front side of the bays. The ward consists of 4 bays for endocrine patients. There are separate bays for male and female patients.

Information displayed

There's a large notice board right after the entrance with staff positions and details of the staff working in the ward with their name and photograph. Details of number of staff on duty for morning, afternoon and evening shift were also written on the notice board. They've included audits in the notice board as well; results of Family & Friends test of the month for October. Daily monitoring of patient's safety is on display as well. Visiting times to the wards are on display at the entrance to the ward. Visiting time is from 2pm – 8pm. A poster of John's Campaign was also on display at the entrance to the ward stating that family members or carers with John's Campaign card can visit any time outside the visiting hours.

Fire safety

Fire safety manuals were on display at the entrance. Fire exits were clearly marked and there were extra fire escape door right after the entrance. Fire extinguishers were placed at the middle of the ward between 2 bays.

Odour and Environment

Environment was pleasant, temperature of the ward was suitable for patients. There weren't any unpleasant odours present.

Accessibility to toilet

There were toilets available for patients at the front of each bay.

Dignity and Appearance of resident

Dignity and appearance of patients were well-maintained.

Signage

Most signage were clear and concise. Toilets at each bay were labelled in big and bold fonts. Reception was labelled in big and bold fonts.

Interview with Head Nurse (HN)

Induction process

HN said the induction process is usually 2 weeks where new staff are under supervision of senior staff. After that they begin their work. However, if they require more training or support, the induction process may be slightly longer to ensure they have a good grasp of the role.

Safeguarding procedure

HN said all members of staff undergo safeguarding training. HN said they follow the safeguarding rules strictly.

Supervision and Appraisal

HN said they are always supervised by senior staff. HN said she has regular supervisions and appraisals which are carried out by the senior matron.

Staff meetings

These take place once a month and they try to have it as regular as possible.

Handover Procedure – Discharge notes

HN said when patients are discharged back to their nursing/residential home, they provide them with the discharge notes and medication administration notes as well.

Involvement of family members

HN said that they do discuss and listen to feedback from the patient's family members with regards to the patient's care.

Staffing levels

In terms of HCA's (Healthcare Assistants), there isn't a shortage. However, there is a shortage of qualified nurses.

Support from management

HN said they are supported by management. HN said an example would be a shortage of staff, which was highlighted as an issue to management and they've begun advertising for more qualified nurses.

Patient interview

Patient said that they felt very comfortable in the ward. They were very confident in the ability of the staff to look after them and they said that they find the doctors and nurses very approachable. The patient said that staff treat them with respect by closing curtains for privacy during treatments and asking for permission. They feel that there are adequate food choices and they don't have any negative feedback on it.

Conclusion

Overall the visit was positive. The ward was clean, accessible and the leaflets available on the ward were reflective of the illnesses of patients in the ward. The patients were looked well after, adequately clothed and comfortable. However, the wards had a security system gap, with the doors being open to everyone but with little to no checks on who was coming and going out of the ward.

The matron also mentioned that there has been increase the use of data from the past few years in dealing with admissions and discharges especially to relief winter pressures. Last year's stats were used to see admissions/discharges. The matron also highlighted that WMUH have great links with HRCH and other organisation.

Recommendation

Recruiting qualified nurses – Matron explained that she has been to a few trips to recruitment fairs and a trip to Dubai is planned for near future recruitment.

Disclaimer

This report is a representative sample of the views of the staff members that Healthwatch Hounslow spoke to within the time frame. This does not represent the views of all the relatives and staff members at CW. The observations made in this report only relate to the visit carried out on the 8th November 2017.