



The **Regulation and
Quality Improvement
Authority**

RQIA

**Mental Health and Learning
Disability**

**Patient Experience
Interviews Report**

Ward 27

Ulster Hospital

**South Eastern Health and
Social Care Trust**

16 June 2014



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1.0 Introduction

The Regulation and Quality Improvement Authority (RQIA) is the independent body responsible for regulating and inspecting the quality and availability of Northern Ireland's health and social care services. RQIA was established under the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, to drive improvements for everyone using health and social care services. The work undertaken by the Mental Health and Learning Disability team (MHLDD) is fundamentally underpinned by a human rights framework and the Human Rights Act (1998). Additionally, RQIA is designated as one of the four Northern Ireland bodies that form part of the UK's National Preventive Mechanism (NPM). RQIA undertake a programme of regular visits to places of detention in order to prevent torture and other cruel, inhuman or degrading treatment or punishment, upholding the organisation's commitment to the United Nations Optional Protocol to the Convention Against Torture (OPCAT).

1.1 Purpose of the visit

Patient Experience Interviews (PEIs) form an integral component of the RQIA inspection programme.

Aims

- To monitor the care and treatment of individuals detained under the Mental Health (Northern Ireland) Order 1986, taking specific cognisance of the individual's perception of their care;
- To monitor the care and treatment of any individual inpatients in MHLDD facilities, taking specific cognisance of the individual's perception of their care;
- To make relevant recommendations where required to improve the patient experience with line with the standards detailed in The Quality Standards for Health and Social Care (DHSSPSNI, 2006).

Objectives-

- To engage and consult with patients and their advocates;
- To ensure that patients are afforded due respect for individual human rights;
- To monitor the context and environment within which care is provided;
- To monitor the quality and availability of care;
- To make appropriate recommendations for improvement and to highlight any issues of concern in line with the escalation policy;

- To provide feedback on concerns/issues raised
- To inform the annual inspection processes.

1.2 Methods/Process

Prior to the inspection RQIA forwarded notification of the visit to the Trust; this allowed the patients and the ward an opportunity to prepare for the interviews.

On this occasion six patients wished to meet with the inspector to participate in the patient experience interviews. The inspector completed a direct observation of the ward using guidance from the Quality of Interaction Schedule (QUIS). Verbal feedback was provided to the ward manager at the conclusion of the visit.

No recommendations were made as a result of the patient experience interviews.

A copy of the interview questions is included at Appendix 1.

2.0 Ward profile

Trust/Name of Ward	South Eastern Health and Social Care Trust
Name of hospital/facility	Ulster Hospital, Ward 27
Address	Upper Newtownards Road Dundonald County Down BT16 1RH
Telephone number	028 90484511
Person-in-charge on day of visit	Catherine Gilmore
Email address	Catherine.Gilmore@setrust.hscni.net
Number of patients and occupancy level on days of visit	24 patients no vacant beds
Number of detained patients on day of inspection	seven
Number of patients who met with the inspector	seven
Date and type of last inspection	2 April 2014, unannounced inspection
Name of inspector	Alan Guthrie

Ward 27 is a 24 bed acute admissions unit located within the Ulster Hospital, Dundonald. Ward 27 is a mixed gender ward and it provides treatment and care to patients who have a mental illness and require assessment and treatment in an inpatient setting. Patients are accommodated in bays with four beds in each bay, segregated into male and female areas. There are also four single bedrooms.

3.0 Outcomes of direct observation and staff and patient interactions

Six patients chose to meet with the inspector on the day of the visit. Two of these patients had been detained in accordance with the Mental Health (Northern Ireland) Order 1986.

Specific issues raised by patients/representatives

Patients were asked if they wished to discuss any particular aspect or concerns about their care and treatment.

Patients did not wish to discuss any particular aspect or concerns about their care and treatment.

Direct Observations

Ward environment

On the day of the inspection the inspector noted ward 27 to be clean and fresh smelling. The ward was busy and the inspector found the atmosphere welcoming. Although the ward's bay areas were limited in space they presented as clean, airy and clutter free. Patients could access the ward's garden via a staircase located at the back of the ward.

Information in relation to who was on duty, the advocacy service, how to make a complaint and the patients' named nurses was available on the ward's main notice board.

Staff and patient interactions

The inspector observed interactions between patients and staff to be respectful, courteous and on a first name basis. Staff were available throughout the ward and were noted to be attentive and observant towards patients. Staff encouraged patients to share their experiences of the ward with the inspector.

Outcomes from interviews

Responses to questions 1-1d

All six patients interviewed by the inspector stated that they understood why they were in hospital and knew what they were allowed and not allowed to do. Two patients had been detained in accordance to the Mental Health (Northern Ireland) Order 1986. Both patients informed the inspector that they understood what the mental health tribunal was.

Responses to questions 2- 2c

Five of the six patients interviewed detailed that they had been given the opportunity to be involved in their care and treatment. The five patients also stated that they had been able to involve their families in their care and treatment and that ward staff had spoken to them regarding their illness and treatment. One patient did not provide an answer to any of the questions.

Responses to questions 3 - 3a

Four of the six patients interviewed stated that they understood the purpose of the advocacy service and the role of the advocate. One patient stated that they did not know what an advocacy service was. The inspector discussed this with the ward manager. The ward manager stated the patient had been informed of the advocacy service and the role of the advocate upon admission. The manager agreed to revisit the role of the ward's advocate with the patient. One patient did not provide an answer.

The inspector noted that information regarding the advocacy service, including the contact details of the advocate, was available on the ward's main notice board.

Responses to questions 4 - 4b

One of the six patients who met with the inspector detailed that they had experienced restraint during their admission. The patient relayed that they felt staff had treated them appropriately and the reason for the use of restraint had been explained. Four patients reported they had not experienced restraint and one patient did not provide an answer.

Responses to questions 5 - 5c

None of the patients interviewed had experienced being secluded during their admission.

Three of the six patients described their experiences of receiving enhanced observation during their admission. One patient stated that this "...had helped them get better quicker" and staff had explained the reasons for using observation. One patient reported no concerns regarding their experience of enhanced observations and stated that staff had explained the reason to them.

The third patient was receiving enhanced observations at the time of their patient experience interview. The patient did not provide an answer. The inspector observed that the patient presented as relaxed in the company of the staff member. Interactions between the member of staff and the patient were respectful and courteous.

Three of the six patients interviewed had not experienced enhanced observations.

Responses to question 6

Five of the six patients interviewed informed the inspector that they felt safe on the ward. One patient relayed that they did not feel “as safe as I should”. Through further discussion with the patient the inspector noted that the patient had been disappointed to have not been able to be admitted to a facility closer to their home. As a result the patient was not content on the ward as it was approximately 25 miles from their home. The patient was hopeful of being transferred in the near future.

The inspector discussed the patient’s response with nurse in charge (the ward manager was called to a meeting). The nurse in charge detailed that staff had been made aware of the patient’s feelings and the ward manager was continuing to try and secure a place for the patient in a facility closer to their home. The charge nurse agreed to ensure that the patient was kept informed.

Responses to questions 7-7b

Two of the six patients interviewed reported that they had items removed from them during their admission. Both patients detailed that the reason for this was explained to them and they could access the items as required.

Three patients detailed that they had not had items removed from them and one patient did not provide an answer.

Responses to questions 8 - 8a

Two of the six patients who met with the inspector stated they were not allowed unaccompanied time off the ward. Both patients relayed that staff kept them informed of the reasons why they could not leave the ward unaccompanied and that this was reviewed daily. Four patients could access unaccompanied time off the ward and all six patients reported no difficulties in being able to access the ward’s garden area.

Responses to questions 9 - 9b

Patients who met with the inspector detailed that they knew who they could speak to if something was wrong and making them unhappy. Two of the six patients stated they had made an informal complaint to the ward staff. One patient had been satisfied with the outcome and one patient detailed that their concern had not been dealt with “...as they (the patient) had suggested”. The patient explained that their request to be transferred to another facility had not been agreed. The inspector discussed this with the charge nurse. The charge nurse detailed that the ward manager had attempted to secure a place in the facility and had been informed there was no vacancy. The inspector was told that this was being reviewed daily and that the patient was being kept informed.

Responses to question 10

Five of the six patients who met with the inspector stated that they were satisfied with the quality of the care and treatment they had received in ward 27. One patient detailed they were not satisfied. The patient relayed that they felt “I have just sort of been left here”. As discussed earlier in the report the patient had requested to be moved to a facility closer to their home.

Other comments made by patients included:

“Staff are very good”;

“This is the best hospital I have been in”;

“Staff are first class”;

“Cleaners are great the place is spotless”;

“Nurses are approachable...but always busy”;

“It’s peaceful the staff have a big part to play in that”.

Additional areas discussed during the visit

No additional areas were discussed during the visit.

4.0 Conclusions

The inspector met with six of the 24 patients who were on ward 27. Three of these patients had been detained in accordance with the Mental Health (Northern Ireland) Order 1986. It was good to note the positive comments made by patients regarding their experiences of the ward and their views of their treatment and care.

From the observations of the ward on the day of the patient experience interviews, the inspector’s impression of the overall treatment and care on the ward was found to be in keeping with the five standards of respect, attitude, behaviour, communication privacy and dignity as referenced in the Department of health, Social Services and Public Safety; Improving the Patients & Client Experience, November 2008. Staff demonstrated respect in all contacts with patients. Staff demonstrated positive attitudes towards patients. Staff demonstrated professional and considerate behaviour towards patients. Staff communicated in a way that was sensitive to the needs and preferences of patients. Staff protected the privacy and dignity of patients.

The inspector would like to thank the patients and staff for their cooperation throughout the interview processes.



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No requirements or recommendations resulted from the Patient Experience Interviews of
Ward 27, Ulster Hospital which was undertaken on **16 June 2014** and I agree with the
content of the report.

Please provide any additional comments or observations you may wish to make below:

NAME OF REGISTERED MANAGER COMPLETING	<i>Catherine Gilmore</i>
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING	<i>[Signature]</i>

Approved by:	Date
<i>Clayton</i>	<i>20 OCTOBER 14.</i>