

### **RQIA**

Mental Health and Learning Disability

Patient Experience Interviews Report

Carrick 1

**Holywell Hospital** 

Northern Health & Social Care Trust

25 June 2014



# **Table of Contents**

1.0	Introduction	3
1.1	Purpose of the inspection	3
1.2	Methods/process	4
2.0	Ward Profile	5
3.0	Outcomes of interviews	6
4.0	Conclusion	g

#### 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 (MHLD) 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 MHLD facilities, taking specific cognisance of the individual's perception of their care.

#### **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 patient experience interview visit RQIA forwarded notification of the visit to the Trust; this allowed the patients and the ward an opportunity to prepare for the interviews.

On the day of the visit the inspectors met with five patients who had indicated that they wished to meet with them. Discussions led by the patient, and semi-structured interviews were undertaken. Verbal feedback was provided to the ward manager at the conclusion of the visit.

Where required, relevant recommendations are made in a Quality Improvement Plan. Recommendations are made according to standards set out in the Department of Health, Social, Services and Public Safety; The Quality Standards for Health and Social Care; Supporting Good Governance and Best practice in the HPSS March 2006

There was one recommendation made following the patient experience interviews on this ward.

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

### 2.0 Ward profile

Trust/Name of Ward	Northern Health & Social Care Trust
Name of hospital/facility	Carrick 1, Holywell Hospital
Address	60 Steeple Road Antrim BT41 2RJ
Telephone number	028 94 413369
Person-in-charge on day of visit	Mary O'Neill
Email address	marybridget.oneill@notherntrust.hscni.net
Number of patients and occupancy level on days of visit	10 bedded ward 9 patients
Number of detained patients on day of inspection	None
Number of patients who met with the inspector	Five patients
Date and type of last inspection	25 & 26 February 2014
Name of inspectors	Wendy McGregor & Audrey Woods

Carrick 1 is a ten bedded, inpatient, addiction and treatment service situated within the main building of Holywell hospital. The ward provides care and treatment to male and female patients with alcohol and or drug addiction problems. The service provides a range of treatments including alcohol/drug detoxification, opiate substitute therapy and opiate stabilisation treatment. The ward also provides a daily psycho-social programme. Patients remain on the ward for approximately two weeks.

Patients within Carrick 1 receive input from a multidisciplinary team which incorporates a consultant psychiatrist, medical staff, a social worker and nursing staff. A patient advocacy service is also available.

#### 3.0 Outcomes of interviews

#### Number of patients interviewed

Five patients chose to meet with the inspectors on the day of the visit None of these patients had been detained in accordance with the Mental Health (Northern Ireland) Order 1986.

#### Specific issues raised by patients

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

No issues were raised by the patients on the ward.

#### Ward environment

On the day of the visit the ward environment was calm and welcoming. The ward appeared well maintained, clean and tidy. There was clear signage on entry to the ward. Information leaflets were displayed on the notice board which included information on how to make a complaint and the advocacy service available to patients. Information was also displayed on who was on duty and what activities were available on each day of the week. Patients also had access to an information leaflet which detailed services available to them on the ward.

The ward had three single rooms and one double room and there was also a four bedded bay area. In the four bedded bay each patient had a screen to maintain privacy and dignity. There was also a room for visitors to meet with patients in private. This room contained information for relatives, carers and patients. The visitors room was noted to be child friendly with a selection of toys available.

There was a small garden area which the patients could access at any time. It was very well maintained with a small grass area, plants and garden furniture.

There was a vending machine and water machine on the ward and patients could access an ATM machine on entry to the hospital. Patients could also purchase items from the hospital shop and canteen.

#### Staff and patient interactions

On the day of the visit the inspectors observed positive interactions between staff and patients. All of the patients were in a therapeutic group session when inspectors arrived to the ward and the atmosphere appeared relaxed and calm.

It was good to note that staff actively encouraged patients to meet with inspectors.

#### Responses to questions 1 - 1d

All five patients interviewed stated they knew why they were in hospital and they were aware of what they were allowed and not allowed to do on the ward. Patients stated that the ward manager had explained this to them when they were admitted to Carrick 1.

#### Responses to questions 2 - 2c

All five patients interviewed indicated they had been involved in their care and support and also had the opportunity to involve their family members if appropriate. Patients stated that the doctors and nurses had discussed their condition and medication with them.

One patient stated they were "well involved" and another patient stated that meetings were held in the evening to accommodate their family.

#### Responses to questions 3 - 3a

Two of the five patients interviewed knew what an independent advocate was and one patient had used this service. Three patients did not know what an independent advocate was. When this service was explained both patients felt they did not need this service at this time.

A recommendation has been made that on admission patients are informed of independent advocacy services.

#### Responses to questions 4 - 4b

All five patients interviewed stated they had never been subject to physical intervention.

#### Responses to questions 5 - 5c

All five patients interviewed stated they had never been put into a room on their own (seclusion) or had staff stay with them all day and all night (enhanced observations).

#### Responses to question 6

All five patients interviewed stated they felt safe on the ward.

#### Responses to questions 7 - 7b

Two of the five patients interviewed stated they had items removed from them on admission. The patients stated the reason for this was explained to them and they could get these items when they requested.

#### Responses to questions 8 - 8a

All five patients interviewed stated they were allowed time off the ward. Patients stated they can go for walks around the hospital grounds, attend the gym and recreation hall and go to the hospital canteen and shop. They also have the opportunity to attend to their spiritual needs. All five patients stated that they can access the garden area at any time.

#### Responses to questions 9 - 9b

All five patients interviewed knew who to speak to if they were unhappy or something was wrong. Patients stated they never had a reason to speak to anyone about concerns on the ward.

#### Responses to question 10

All five patients made positive comments regarding the care and treatment they had received on the ward staff. Comments included:

```
"staff are great",

"staff are 10 out of 10",

"excellent",

"great caring staff, no matter what level from the cleaners to the ward manager",

"couldn't praise staff enough",

"nurses are very good"

"very friendly",

"staff made my children very welcome",

"group sessions are great",

"brilliant staff",
```

"I learnt a lot about my illness"

"social worker has been great"

"all nurses are great even when you look sad they come over to you"

#### Additional areas discussed during the visit

Patients made positive comments regarding the the food on the ward. Comments included:

"far too nice",

"salads are beautiful",

"pancakes are left out at night to have with tea",

"good choice"

"can go to the canteen for a fry",

"lovely food",

"fine, great, no complaints".

Patients stated that the staff leave out pancakes, soda bread or scones for them to have with their tea at night. They also stated they had full access to the kitchen to make tea and coffee.

#### 4.0 Conclusions

Carrick is a ten bedded inpatient addiction treatment service situated within the main building of Holywell hospital. Five out of the nine patients agreed to complete the Patient Experience Interviews. Patients were complimentary of the staff, their overall care and treatment and the ward environment.

There was one recommendations made from the interviews with the patients and the direct observation of the ward.

From the observations of the ward on the day of the Patient Experience Interviews, the inspectors' 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.



# **Patient Experience Questionnaire**

	Trust	Но	spital			Ward		_
Facility Details:								
Date of Interview: Carried out		rried out by	,					
	Detained	Voluntary				Adult	Child	
Patient Type:				Pat	ient Age:			
Patient	Conducted on behalf of patient	Unaccompanied	NoK	Ad	Advocate Other		r If Other, ple	ease state status
Accompanied?								
Begin with a prelimi	nary introduction to	patient and explana	tion of reaso	ons for	questionn	aire		
					No			otes
			Yes	No	No Answer	N/A		otes g interview only)
1 Do you know wl	ny you are here in th	is hospital?	Yes	No		N/A		
-	ny you are here in th	•	Yes	No		N/A		
1a Do you know wl		to do?	Yes	No		N/A		
<ul><li>1a Do you know wh</li><li>1b Do you know wh</li><li>1c Do you have an</li></ul>	nat you are allowed t	to do? ved to do?	Yes	No		N/A		
<ul><li>1a Do you know wh</li><li>1b Do you know wh</li><li>1c Do you have an about?</li></ul>	hat you are allowed that you are not allow	to do? ved to do?	Yes	No		N/A		
<ul><li>1a Do you know wh</li><li>1b Do you know wh</li><li>1c Do you have an</li></ul>	hat you are allowed that you are not allow	to do? ved to do?	Yes	No		N/A		
<ul><li>1a Do you know wh</li><li>1b Do you know wh</li><li>1c Do you have an about?</li></ul>	hat you are allowed that you are not allow	to do? ved to do?	Yes	No		N/A		
<ul><li>1a Do you know wh</li><li>1b Do you know wh</li><li>1c Do you have an about?</li></ul>	hat you are allowed that you are not allow	to do? ved to do?	Yes	No		N/A		

				NO		Notes
		Yes	No	Answer	N/A	(for use during interview only)
1d	Do you know what the Mental Health Review Tribunal is?					
2	Have you been given the opportunity to be involved in your care and support?					
2a	Have you been able to involve your family in your care and support?					
2b	Has anyone spoken to you about your condition/illness or disability?					
2c	Has your doctor or nurse discussed your medication with you?					
3	Do you know what an advocate is?					
3a	Has anyone helped you by speaking on your behalf?					
4	Have you ever been restrained (Held-down, arms held)?					
<u>On</u> 4a	y ask if applicable: Have you ever been hurt during this?					
4b	Was the reasons for being held down explained to you after the incident?					
Ple	ase explain:					

			No		Notes
	Yes	No	Answer	N/A	(for use during interview only)
5 Were you ever forced or put into a room on your own?					
Only ask if applicable: 5a Was the reason for being put into a room on your own explained to you?					
5b Did you ever have a member of staff stay with you all the time night and day to make sure you were OK?					
Only ask if applicable:  5c Was the reason for this explained to you?					
6 Do you feel safe on this ward?					
Was anything taken off you on admission (money, cigarettes, phone, lighter, laptop, medication, dangerous objects)?					
Only ask if applicable: 7a Did the staff explain to you why these were taken off you?					
7b Can you get these items if you want them?					
8a Are you allowed time off the ward?					
8b Can you access the garden/courtyard etc.					
9 If something is wrong and making you unhappy do you know who to tell to get it sorted?					
9a Have you ever told someone that something was wrong?					
Only ask if applicable: 9b Were you happy how it was sorted out?					
10 Overall are you satisfied with the quality of your care and treatment as a patient?					

AREA FOR DISCUSSION	DESCRIPTION OF ISSUE
Delayed discharge	
Restrictive practices/safeguarding	
Care planning/MDT	
Access to services/Advocacy	
Problems with other patients	
Personal belongings	
Meals and menu choices	
Complaints	
Facilities and Maintenance	



# Patient Experience Interview Recommendations

# Carrick 1 Holywell Hospital

## 25 June 2014

The areas where the service needs to improve, as identified during the Patient Experience Interviews, are detailed in the inspection report and Quality Improvement Plan.

The specific actions set out in the Quality Improvement Plan were discussed with the ward manager on the day of the inspection visit.

It is the responsibility of the Trust to ensure that all requirements and recommendations contained within the Quality Improvement Plan are addressed within the specified timescales.

Recommendations are made in accordance with The Quality Standards for Health and Social Care: Supporting Good Governance and Best Practice in the HPSS, 2006.

# Recommendations

No.	Recommendation	Reference	Number of times stated	Details of action to be taken by ward/trust	Timescale
1	It is recommended that the ward manager ensures that on admission all patients are made aware of the advocacy service available on the ward.	5.3.3	1	A statement notifying the patient of the advocacy service has been added to the Patient Agreement form which is signed by each patient on their admission to the ward. The advocacy service is also discussed at the ward weekly community meeting.	Immediate and on-going

Recommendations are made in accordance with The Quality Standards for Health and Social Care: Supporting Good Governance and Best Practice in the HPSS, 2006.

NAME OF WARD MANAGER COMPLETING QIP	Mary O Neill
NAME OF CHIEF EXECUTIVE / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Larry O'Neill

Inspector assessment of returned QIP				Inspector	Date
	mopostor accocciment of retaining an		No		
A.	Patient Experience Interview Recommendations to Ward Manager response assessed by inspector as acceptable	<b>√</b>		Wendy McGregor	1 October 2014
B.	Further information requested from provider				