

**RQIA**

**Mental Health and Learning  
Disability**

**Patient Experience  
Interviews Report**

**Tobernaven Upper Ward,  
Holywell Hospital**

**Northern Health and Social  
Care Trust**

**21 May 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 (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;
- 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 the day of the visit the inspector met with any patient (or in specific cases, their representative) who had indicated that they wished to meet with the inspector. 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.

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

## 2.0 Ward profile

Trust/Name of Ward	Northern Health and Social Care Trust
Name of hospital/facility	Tobernavene Upper ward, Holywell hospital
Address	60 Steeple Road Antrim BT41 2RJ
Telephone number	028 94 465211
Person-in-charge on day of visit	Janette Acton
Email address	Manager.tnu@northerntrust.hscni.net
Number of patients and occupancy level on days of visit	24 bedded ward 24 patients admitted to the ward
Number of detained patients on day of inspection	Eight patients detained
Number of patients who met with the inspector	Three
Date and type of last inspection	10 December 2013 announced inspection
Name of inspector	Alan Guthrie

Tobernavene Upper is a 24 bedded mental health admission ward situated within the Holywell hospital site. The purpose of the ward is to provide care and treatment to patients with acute mental illness.

The ward's multidisciplinary team consists of nursing staff, health care assistants, an occupational therapist and a consultant psychiatrist.

### **3.0 Outcomes of interviews**

#### **Number of patients interviewed**

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

#### **Specific issues raised by patients/representatives**

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

One patient reported that they was unhappy that some of the patients within the ward were using illicit drugs. The patient detailed that they had noted the smell of what they suspected to be cannabis in several locations within the ward during their stay. The inspector discussed this with the ward manager and was assured that the ward followed the Trust's procedure when dealing with suspected illicit substance misuse. This included staff contacting the Police.

#### **Responses to questions 1-1d**

Patients who met with the inspector detailed that they knew why they were in hospital and that they understood what they were allowed and not allowed to do during their admission.

The patients detailed that they understood the purpose and role of the Mental Health Review Tribunal.

#### **Responses to questions 2- 2c**

Each of the three patients explained that they had been given the opportunity to be involved in their treatment and care and they had been able to involve their families. Two of the three patients reported that their doctor and nursing staff had spoken with them and discussed their medication. One patient detailed that staff had not discussed their medication with them. Further exploration of the patient's situation revealed that the doctor was continuing to review the patient's condition and further assessment was ongoing.

#### **Responses to questions 3 & 3a**

Patients' relayed that they understood the role of the ward's independent advocacy service. One patient reported that they had previously contacted and met with the advocate and the service had been "good" in terms of the support provided by the advocate.

#### **Responses to questions 4 - 4b**

None of the three patients interviewed had experienced restraint during their admission.

### **Responses to questions 5-5c**

All three patients reported that they had never been subject to seclusion. Two of the patients had experienced having a member of staff stay with them all the time to make sure they were safe. One patient detailed the experience had "...made them feel safe" the other patient detailed they felt the experience had "...not been nice" however they indicated that the continuous observations had been conducted "...with respect".

### **Responses to question 6**

Two of the patients stated that they felt safe within the ward. One patient relayed that they felt both safe and unsafe. The patient explained that "...most of the time I feel safe but sometimes the ward can be scary". When explaining why they felt scared the patient detailed that some patients had been very unwell and the patient was concerned that "...something might happen". The patient detailed that staff had been supportive.

### **Responses to questions 7-7b**

Each patient who met with the inspector reported that items had been removed from them upon their admission to the ward. Items that had been removed included mobile phones and a razor. Patients relayed that they understood why items had been removed and staff had explained why some personal items were retained by the ward. Each patient reported that they could access their items upon request.

### **Responses to questions 8 & 8a**

Patients reported no difficulties or concerns regarding the ability to access time off the ward. The ward's courtyard area was accessible from the main corridor and patients' stated they could access the courtyard as required.

### **Responses to questions 9 -9b**

Patients reported no concerns regarding their ability to speak with staff or to report any concerns they might have. The inspector noted positive responses from patients regarding their contact and communication with staff.

### **Responses to question 10**

Patient comments regarding their overall treatment in the Tobernaveen Upper ward were generally positive patients. Patients reported that:

“It’s been good...a few issues...overall staff have been approachable and easy to talk too”;

“Care and treatment is tremendous”;

“My experience has been a really good one”.

#### **Additional areas discussed during the visit**

The inspector was informed that the ward’s four mobile phones for patient use were all broken. A recommendation has been made.

#### **4.0 Conclusion**

The inspector met with three of the 24 patients who were on Tobernaveen Upper ward. Patients presented as relaxed and at ease and they detailed general overall satisfaction with how they had been treated within the facility. It was positive to note patient comments regarding their overall treatment and care within Tobernaveen Upper.

Patients reported no use of restraint and appropriate use of close supervision and observation. Each patient explained that they had been involved in their care plan and they understood the reasons why they were in hospital. Patients relayed appropriate understanding and knowledge of the ward’s rules and the role of the ward’s advocacy service. Patients reported that they could access time off the ward as required and the ward’s patio area remained accessible throughout the day and early evening.

One patient expressed a concern regarding their experience of other patients’ alleged use of illicit substances within the ward. The inspector discussed the patient’s concern with the ward manager. The manager detailed that staff implement the Trust’s policy in relation to addressing illicit substance use. The manager indicated that there were a number of challenges faced by staff when addressing illicit substance use. The inspector was informed that the Hospital’s senior management team were continuing to liaise with Police regarding this issue.

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



## **Appendix 2 –**

### **Patient Experience Interview Questionnaire**



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