



The **Regulation and  
Quality Improvement  
Authority**

**RQIA**

**Mental Health and Learning  
Disability**

**Patient Experience  
Interviews Report**

**Donegore Ward, Muckamore  
Abbey Hospital**

**Belfast Health and Social  
Care Trust**

**6 May 2014**



informing and improving health and social care  
[www.rqia.org.uk](http://www.rqia.org.uk)

## **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	10
	Appendix 1: Patient Experience Interview Questionnaire.	12

## **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 the day of the visit the inspector met with any patient who had indicated that they wished to meet with the inspector. Discussions led by the patient, and semi-structured interviews were undertaken. The inspector also completed a direct observation of the ward using guidance from Quality of Interaction Schedule (QUIS). Verbal feedback was provided to the ward manager at the conclusion of the visit.

There are no recommendations made following the patient experience interviews.

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

## 2.0 Ward profile

Trust/Name of Ward	Belfast HSC
Name of hospital/facility	Donegore Ward Muckamore Abbey Hospital
Address	1 Abbey Road, Muckamore, BT41 4SH
Telephone number	02894 662836
Person-in-charge on day of visit	Rhona Brennan
Email address	Rhona.brennan@belfast.hscni.net
Number of patients and occupancy level on days of visit	No of beds - Nine No of patients - Nine
Number of detained patients on day of inspection	Seven
Number of patients who met with the inspector	Three
Date and type of last inspection	Announced 16 September 2013
Name of inspector	Wendy McGregor

Donegore is a nine bedded ward situated on the Muckamore Abbey Hospital site. The purpose of the ward is to provide care and treatment to female patients with a learning disability who present with challenging behaviours.

On the day of the patient experience interviews there were seven patients who were detained under the Mental Health (Northern Ireland) Order 1986. On the day of the patient experience interviews; there were three patients whose discharge from hospital was delayed, three patients who were on the Primary Target List (PTL) for resettlement into the community and three patients who were receiving care and treatment. The inspector was informed by the ward sister that resettlement meetings are held monthly. These meetings were coordinated by ward staff.

Patients within Donegore ward receive input from a multidisciplinary team which incorporates psychiatry; nursing; occupational therapy, psychology and behavioural support. Patients can access dietetics, podiatry and speech and

language therapy by referral. Patients have access to on-site day care services. A patient advocacy service is also available.

### **3.0 Outcomes of interviews and / or direct observation**

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

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

There were no specific issues raised.

#### **Direct observation of the ward**

##### **Ward environment**

On the day of the visit the inspector noted the ward was welcoming. The ward was well lit, well maintained, clean and fresh smelling. Signage to the ward was clear. The ward was well organised and clutter free. Information in relation to who was on duty was clearly displayed in the patient area.

Details on how to make a complaint and how to access advocacy services were available throughout the ward. This information was also available in an easy read version. There was a separate room for patients to meet with their visitors in private.

Each patient on the ward had their own bedroom with en suite facilities. The patients' bedrooms were noted to be individualised and person centred, and contained personal photos and belongings. It was good to note bedrooms reflected the patients' choices, hobbies and interests.

The ward had separate day spaces, this structure promoted the privacy and dignity of patients who had the potential to display behaviours that challenge. The design of the environment was also noted to promote the safe management of individual patients who were displaying challenging behaviours. One patient was assessed as requiring an individualised day space at times due to the nature of their challenging behaviours; the patient could be supervised at a distance; whilst maintaining the patients' and others safety, independence and dignity. This environment reduced the likelihood of physical interventions and promoted a least restrictive approach.

A variety of ward based activities was noted and available to patients on the days they do not attend day care and the evenings and weekends. Activities were both individualised and group based. Activity plans were appropriate to

the gender, age profile and interests of patients on the ward and promoted active and meaningful engagement between staff and patients. The inspector was impressed with the value and importance placed on activities as a means of promoting the patients overall wellbeing and reducing the potential incidence of problem behaviours. It was good to note patients were encouraged to take part in activities that promoted physical activity. Activities of the hospital site were also available to patients and included outings to the shops and cinema. Where assessed as required, patients had access to specialised one to one therapeutic sessions provided by psychology.

On the day of the patient experience interviews patients were noted to be dressed appropriately to age, gender and weather conditions.

### **Ward environment / staff and patient interactions**

On the day of the visit the inspector observed staff and patient interactions. There were a number of patients on enhanced observations, the inspector noted the staff were discreet and ensured the patients' dignity was maintained, and the patients were not stigmatised.

All of the patients on the ward were engaged in either individual or group activities with staff. The inspector noted staff addressed patients by their names, were respectful and courteous. Staff sat at eye level and beside their patients and actively listened. Staff adapted their verbal communication to meet individual communication needs of patients. The inspector observed staff using patients' individual interests to actively engage with each patient. Patient and staff interactions were noted to be friendly and warm. Patients were observed to be at ease and comfortable when engaging with staff.

The inspector observed staff's interactions with a patient who was anxious and repeatedly seeking reassurance about the time of their visitors arriving. Staff were patient and understanding, and answered the patients' questions in a clear, consistent and empathetic manner.

The inspector noted the interaction between a staff member and a patient who experienced a seizure; the staff member was observed to reassure and remain with the patient while promoting the patients dignity.

### **Outcomes of interviews**

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

The three patients interviewed stated they knew why they were in hospital. All of the patients stated they knew what they were allowed to do on the ward, and two patients stated they knew what they were not allowed to do on the ward. One patient did not answer the question.

Two of the patients interviewed were detained in accordance with the Mental Health (Northern Ireland) Order 1986. Both patients were aware of their right to apply to the Mental Health Tribunal.

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

All of the patients interviewed stated they had been involved in their care and support. Patients knew who their named nurse was and informed the inspector their named nurse had discussed their care plans with them. The patients all stated they were offered the opportunity to attend their multi-disciplinary meetings. Patients informed the inspector that prior to the multi-disciplinary meetings the named nurse will explain the content of the meeting and asks the patients what they would like discussed at the meetings. If a patient chooses not to attend patients stated they are informed of the outcomes of the meeting. One patient stated they have scheduled one to one time to meet with their named nurse. Where appropriate, patients have been given the opportunity to involve their family in decisions about their care and treatment. The three patients interviewed stated both the nurses and the doctor had spoken to them about their condition and the medication they were given.

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

All of the patients interviewed stated they knew what an advocate was. Patients were aware of how to access advocacy services. Two patients stated they have used advocacy services, one patient chose not to answer.

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

Two of the patients interviewed stated they had not been restrained on the ward. One patient interviewed stated they had been restrained. The patient indicated they were fully informed of the reason for the physical intervention and explained to the inspector why it was necessary. The patient was also able to articulate the procedure followed after a physical intervention ie the forms completed

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

All of the patients interviewed stated they had never been forced or put into a room of their own (seclusion).

Two of the patients interviewed stated they had members of staff stay with them all day and all night (enhanced observations). One patient informed the inspector the reason for the enhanced observations had been explained to them. One patient did not answer the question.

### **Responses to question 6**

The three patients interviewed stated they felt safe on the ward. One patient stated

“there is always plenty of staff around to call on if you are anxious.”



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

Two of the patients interviewed stated items had been removed from them on admission. Patients were aware of and understood the reasons items were removed from them. Patients stated they can access the items when required and with staff support and supervision. The patients stated they were fully aware of the reason for this restriction.

One patient stated they did not have any items removed from them.

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

All of the patients interviewed stated they got time off the ward. Patients stated they went on social outings of the hospital site to go shopping, went for walks with the staff and went to day care. Patients also enjoy had access to the ward garden.

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

The three patients interviewed stated they knew whom to speak to if something was wrong or making them unhappy. Patients referenced they would either speak to the ward sister or their named nurse.

### **Responses to question 10**

All of the patients interviewed stated they were happy with the care and treatment they received on the ward. Two patients indicated they had a good relationship with their named nurses. Patients described the care as “good” “staff were nice” and one patient stated “I really love it here”.

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

The patients commented on the environment stating;

“the sofas are warm and cosy”

“the ward is nice and cosy”

“the ward is clean”

Patients stated they felt their personal property was safe.

## **4.0 Conclusions**

Donegore ward provides care and treatment to patients with a learning disability who present with challenging behaviours.

On the day of the Patient Experience Interviews there were three patients whose discharge was delayed and three patients on the Primary Target List (PTL) for resettlement.

Three patients agreed to complete the patient experience interview. Direct observation was also used on the ward during the visit.

There are no recommendations made from the interviews with the patient and the direct observation.

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.**



The **Regulation** and  
**Quality Improvement**  
**Authority**

No requirements or recommendations resulted from the Patient Experience Interviews of **Donegore Ward, Muckamore Abbey Hospital** which was undertaken on **6 Amy 2014** and I agree with the content of the report.

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

<b>NAME OF REGISTERED MANAGER COMPLETING</b>	Rhona Brennan
<b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING</b>	Colm Donaghy

<b>Approved by:</b>	<b>Date</b>
Wendy McGregor	26 June 2014

## Appendix 1 –

### Patient Experience Interview Questionnaire



Q14  
PatientExperienceQues