



The **Regulation** and
Quality Improvement
Authority

RQIA

**Mental Health and Learning
Disability**

**Patient Experience
Interviews Report**

**Killead Ward, Muckamore
Abbey Hospital**

**Belfast Health & Social Care
Trust**

25 June 2014



informing and improving health and social care
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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 the day of the visit the inspectors met with any patient (or in specific cases, their representative) who had indicated that they wished to meet with the inspectors. Discussions led by the patient, and semi-structured interviews were undertaken. The Inspectors 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.

Where required, relevant recommendations were made in a Quality Improvement Plan which accompanies this report. 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.

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

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

2.0 Ward profile

Trust/Name of Ward	Belfast Health & Social Care Trust
Name of hospital/facility	Killead Ward, Muckamore Abbey Hospital
Address	1 Abbey Road Muckamore BT41 4SH
Telephone number	02895042080 02895042079
Person-in-charge on day of visit	Assumpta Cullinan
Email address	assumpta.cullinan@belfasttrust.hscni.net
Number of patients and occupancy level on days of visit	22 beds: 18 patients on ward, 4 on trial leave (fully occupied)
Number of detained patients on day of inspection	Two patients
Number of patients who met with the inspectors	Five patients
Date and type of last inspection	20 & 21 January 2014 Announced Inspection
Name of inspectors	Wendy McGregor & Audrey Woods

Killead is a male treatment ward situated on the Muckamore Abbey hospital site. The purpose of the ward is to provide treatment to patients with a learning disability who have an enduring mental illness. Patients on the ward are transferred from the Cranfield admissions ward following a period of assessment.

The inspectors were informed that there were 16 patients on the ward who had completed their period of assessment and treatment and were therefore delayed in their discharge from hospital. Four patients from the ward were on trial leave. Two of the 18 patients on the ward on the day of the inspection were receiving active treatment.

Six patients were on enhanced observations on the day of the inspection.

Patients within Killead ward receive input from a multidisciplinary team which incorporates psychiatry, nursing, psychology, behaviour support and social work professionals. 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. Two 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.

One patient highlighted that there was no quiet area on the ward for them to sit. The patient detailed that they can hear noise from the ward even when in their own bedroom. The ward manager stated that they would liaise with the patient regarding quiet areas and discuss the use of room adjacent to the main entrance to the ward with other professionals to see if it would be feasible for the patient to have access to this room on occasions.

A recommendation has been made in relation to this.

Direct Observations

Ward environment

On the day of the inspection Killead ward was bright, clean and clutter free. The main day area is a large integrated dining / lounge and there are also some smaller day rooms for patients use. The inspectors found the atmosphere to be relaxed and welcoming. Patient's bedrooms were individualised, airy, and fresh smelling. Inspectors observed patients moving freely around the ward. There was a photograph of each patient on their bedroom door for improved way finding.

There was an area for visitors to meet with patients in private and visitors also had the option of meeting their relatives in their own room if they chose.

A kitchen was also available for patients to encourage independent living skills and prepare patients for their move into the community.

One area of the ward had been converted into an individual living area for one patient who was assessed as requiring their own space. The patient was on enhanced 2:1 observation on the day of the inspection. The area included a living and dining room, bedroom and bathroom. The area was adapted to

meet the patients' individual needs. Information in relation to the patient's schedule was displayed in an easy read format.

The entry and exit door to the ward was unlocked during the day. Patient's bedrooms were open and patients could hold their own keys. One patient chose to keep their bedroom door locked. Patients could freely access a large well maintained garden.

There was clear signage on entry to the ward and on the internal doors indicating the purpose of each room. Information leaflets were displayed on the notice board which included information on how to make a complaint. Information was also displayed on who was on duty and what daily activities were available.

There was also information displayed in easy read format which detailed various options available to meet the patient's spiritual needs. Inspectors also noted pictorial information in relation to healthy eating.

The ward had pictorial food charts with makaton signs and words to assist the patients in choosing what they wanted to eat each day. It was good to note that staff assisted patients with communication difficulties to make their daily meal choice.

Staff and patient interactions

The inspectors noted that communication between staff and patients was open and on a first named basis. Patients presented as at ease within their surroundings and the atmosphere within the ward was calm. The inspectors noted staff to be respectful and courteous and encouraged patients to engage in discussion regarding their experience of the ward.

Interviews

Responses to questions 1 - 1d

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

Two patients interviewed were detained in accordance with the Mental Health (Northern Ireland) Order 1986. One patient stated they were "not sure" of the role of the mental health tribunal. This was discussed with ward manager and the patients care documentation was reviewed. There was evidence in the care documentation that the patient's right to apply to the mental health tribunal had been explained to them on 28 April 2014. The ward manager agreed to revisit this with the patient.

Responses to questions 2 - 2c

Four of the 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. These four patients also stated they had spoken with staff about their illness and their medication had been discussed with them. Patients stated that they had attended their multi-disciplinary meetings and they were aware of the plans for their future.

Inspectors reviewed care documentation in relation to one patient who had stated they had not been involved in their care and treatment and no one had spoken with them about their medication. The care documentation evidenced that the patient's care plan had been explained to them on a number of occasions by their named nurse and the doctor on the ward. There was also evidence of the patients named nurse and doctor on the ward having had discussions with the patient regarding their medication.

Responses to questions 3 - 3a

All five patients interviewed knew what an independent advocate was and all patients had used this service. Patients stated that this service was "very useful", "a good help" and the advocate was described as "dead on".

Patients on the ward had access to independent advocacy services through a referral system. One patient on the ward was a member of the TILII group which is a service user led advocacy group. Information in relation to advocacy services was displayed on the ward and included in the ward information leaflet.

Responses to questions 4 - 4b

One of the five patients interviewed had been subject to physical intervention. This patient stated the reasons had been explained to them and that they had not been hurt during the physical intervention. The patient stated the reason why they were subject to physical intervention was because "I was angry and hit out". The patient reflected that they had no concerns regarding the care and treatment they had received on the ward stating "staff are good to me".

Responses to questions 5 - 5c

All five patients interviewed stated they had never been put into a room on their own (seclusion).

One of the five patients interviewed stated they currently have staff stay with them all day but not during the night (enhanced observations). This patient stated the reason they were on enhanced observations was explained to

them. They stated that they “get cross” and “I sometimes fight with other patients” and need “timeout”.

Responses to question 6

Four of the five patients interviewed stated they felt safe on the ward. The patient that did not feel safe stated that they had been hit by another patient and they did not like the noise on the ward. Inspectors reviewed care documentation and there was evidence that this incident was investigated through the vulnerable adult process, a protection plan was in place and that the patient has been given support and reassurance at the time of the incident.

Responses to questions 7 - 7b

All five patients interviewed stated they did not have any items removed from them.

Responses to questions 8 - 8a

All five patients interviewed stated they were allowed time off the ward and had full access to the garden area. Patients were given the opportunity to attend day care which is on the hospital grounds outside of the ward. Patients stated they also take part in activities off the hospital site such as going for trips on the bus, out to the local coffee shop, going for walks, going to the cinema and going into the local town.

It was good to note each patient had an individualised and person centred recreational and therapeutic activity schedule. Activity plans were assessed to promote each patients independence. A number of patients had the opportunity to purchase their own groceries to make their lunch or dinner either independently or with staff support.

One patient stated that their friend calls to take them out in the car and they would sometimes visit their mother or go to the shops. This patient has their own mobility scooter which they use to go into town to get their shopping. A number of patients have entered pool competitions and have been attending various different events in the community.

Responses to questions 9 - 9b

All five patients interviewed knew who to speak to if they were unhappy or something was wrong. Three patients had spoken to the staff when they felt something was wrong and were happy with the outcome. One patient stated they had never had a reason to speak to anyone about concerns.

One patient stated they were not happy with the outcome of their complaint. When this was discussed further with this patient it became clear that there had been an issue around this patient's resettlement into the community. The patient's concerns were discussed with the ward manager who advised that the patient was upset that their placement had not been successful. All professionals involved have discussed this with the patient and there was evidence that plans in place to source an alternative placement.

Responses to question 10

All five patients interviewed stated they were happy with the quality of care they receive on the ward. Some comments made about the quality of care and treatment include, "Brilliant care, very good", "very good treatment", "I love it here", "love all the staff", "staff are good to me", "they do the right thing, they always explain things to me".

Additional areas discussed during the visit

No additional areas were discussed

4.0 Conclusions

The inspectors met with five of the 22 patients who were in Killead ward. Two 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 experience of the ward and their view of their treatment and care.

There was one recommendation made from the interviews with the patients and the direct observation.

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	Hospital	Ward			
Facility Details:						
Date of Interview:		Carried out by				
Patient Type:	Detained <input type="checkbox"/>	Voluntary <input type="checkbox"/>	Patient Age:		Child <input type="checkbox"/>	
			Adult <input type="checkbox"/>			
Patient Accompanied?	Conducted on behalf of patient <input type="checkbox"/>	Unaccompanied <input type="checkbox"/>	NoK <input type="checkbox"/>	Advocate <input type="checkbox"/>	Other <input type="checkbox"/>	<i>If Other, please state status</i>

Begin with a preliminary introduction to patient and explanation of reasons for questionnaire

	Yes	No	No Answer	N/A	Notes <i>(for use during interview only)</i>
1 Do you know why you are here in this hospital?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1a Do you know what you are allowed to do?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1b Do you know what you are <u>not</u> allowed to do?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1c Do you have anything that you would like to talk to us about?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Please explain:

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

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

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

Killead Ward, Muckamore Abbey Hospital

25 June 2014

The issue identified and recommendation made during the patient experience interviews were discussed with the ward manager at the conclusion of the visit. The timescales for completion commence from the date of the visit. The progress made in the implementation of these recommendations will be evaluated at the next inspection visit.

Recommendations

No.	Recommendation	Reference	Number of times stated	Details of action to be taken by ward/trust	Timescale
1	It is recommended the ward manager ensures all patients have access to a quiet area in which to relax during the day.	5.3.3	1	All patients have a single room and break off areas for relaxation.	25 July 2014

NAME OF WARD MANAGER COMPLETING QIP	[Assumpta Cullinan]
NAME OF CHIEF EXECUTIVE / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	[Martin Dillon]

Inspector assessment of returned QIP				Inspector	Date
		Yes	No		
A.	Patient Experience Interview Recommendations to Ward Manager response assessed by inspector as acceptable	✓		Wendy McGregor	11 August 2014
B.	Further information requested from provider				