

# Southport and Ormskirk NHS Trust

Last rated  
15 Nov' 2016

## Surgery / Wards

### You said

### We listened

### We did

- Surgical wards did not always meet the needs of individual patients with dementia and other cognitive impairments. It was difficult to identify any obvious reasonable adjustments that had been made for these patients. There was no signage above beds to indicate to staff that such patients might require adapted communication techniques. No thought had been given to how patients with communication difficulties might communicate pain as indicated by the lack of a pain assessment tool for non-verbal patients.
- A surgical ward had a number of patients living with dementia on the ward, was not locked at the entrance to the ward. We observed a very mobile patient with an obvious cognitive impairment repeatedly walking towards the unlocked door.
- The Wards to take action to ensure that medically deteriorating patients are always identified as they deteriorate and are medically reviewed in line with trust policy.
- We observed that on one ward there were a number of patients on oxygen and only one of these patients had been prescribed oxygen. As oxygen is a drug it requires prescribing in all but emergency situations, with the target level of saturation identified when prescribed.
- The Wards MUST take action to ensure that all risk assessments are appropriately completed for patients and should ensure that all risk assessments are completed and kept up to date.
- It was noted that some staff reported that they did not receive individual feedback from incidents that they raised and commented that they would appreciate feedback.
- When we discussed complaints with staff, none of them could identify positive actions that had been taken as a result of a complaint. In addition none of them could give an example of a recent complaint. This was an illustration of a culture that did not take complaints seriously or use them as an opportunity to learn and improve the service delivered.

- *Trust Dementia Friendly Strategy Launched*
- *Clinical Team on Ward 14A / training and environmental plan in place*
- *Secure environment for patients with additional needs*
- *Visit to Chorley and Blackpool Hospitals completed.*
- *Abbey Pain Score circulated to all clinical areas. Training ongoing via Dementia Awareness.*
- *Wards lock doors centrally, regular spot checks carried out by Senior Staff*
- *Twiddle Muffs given to patients, the library has developed a memory box for use on wards*
- *Deterioration Patient Clinical Lead in Post*
- *Development of Deteriorating Patient Hub*
- *Sepsis Trolleys rolled out in Wards and A&E*
- *Compliance with National CQUIN and AQuA Benchmarking*
- *NEWS (National Early Warning alerts available on Vital Pac)*
- *Oxygen prescribing training now included at Trust induction*
- *Oxygen sticker by every oxygen outlet on*
- *Trust intranet Screen Saver and poster in place*
- *Planned Care pharmacist completing audits of compliance*
- *Monthly Matron's check list in place*
- *Vital Pac Add-Ons will include VTE and Dementia Assessments.*
- *The roll out of the Electronic Safety Huddle should ensure risk assessments are completed (falls, nutrition and dementia)*
- *Monthly CBU Quality & Safety Report Reports providing numbers, trends and severity initiated and provided to Ward Managers & Matrons for dissemination and regular meetings with relevant personnel and appropriate subject matter experts.*
- *Lessons Learned Leaflet developed and shared with all Trust staff*
- *Matrons names and contact details displayed outside each clinical area*
- *The CBU has a clinical complaints and governance manager in post and two Band 4 complaints and governance officers in post.*