

Enter & View Report

Learning Disability Patient Experience

September 2024

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Report details

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| Details of Visit | |
| Service Address | Leicester Royal Infirmary, Infirmary Square, Leicester LE1 5WW |
| Service Provider | University Hospitals of Leicester NHS Trust |
| Date and Time | Wednesday 11 September 2024, 10am |
| Authorised Representatives undertaking the visit | Kim Marshal-Nichols, Dervis Duygun Fethi, Debra Watson and Dulna Shahid (staff) |

Acknowledgements

Healthwatch Leicester and Healthwatch Leicestershire would like to thank the service provider, patients and staff for their contribution to the Enter & View Programme.

Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all patients, service users and staff, only an account of what was observed and contributed at the time.

All comments included in this report are written verbatim to capture the tone and authenticity of the experience, therefore no editing of comments has taken place.

This report is written by volunteer Enter and View Authorised Representatives who carried out the visit on behalf of Healthwatch Leicester and Healthwatch Leicestershire.

Purpose of the visit

- To gather patient views of the service provided at Leicester Royal Infirmary.
- To observe the facilities and operation of the service.
- To observe the experiences of patients with learning disabilities during their time on the wards.

Methodology

This was a semi-announced Enter and View visit.

We had presented ourselves as Authorised Representatives from Healthwatch Leicester and Healthwatch Leicestershire to senior staff and we had access to communal areas during our visit.

The visit was observational, involving the Authorised Representatives observing the surroundings to gain an understanding of how patients engaged with staff and the facilities at the wards visited at Leicester Royal Infirmary.

To reach patients, we produced a survey for patients to share their experiences of being at the wards visited.

Summary of the findings

Summary

Access and Navigation:

- Wards are easily accessible from the main car park, with clear and readable signage suitable for patients with learning disabilities (LD).
- The hospital layout is user-friendly, with accessible lifts and clear pathways.

Ward Facilities:

- Wards offer comfortable rooms and lounge areas.
- Visual aids are used in signage, especially for toilet and shower facilities.
- Most wards provide private spaces for sensitive discussions, except Ward 44.
- Some wards lack suitable seating options like bariatric chairs.

Patient Support:

- The "Know Me Better" form is used to understand patient needs.
- LD team provides support by visiting wards, assessing patients and offering one-to-one support when necessary.
- Patients can choose their meals with visual menus available in some wards.

Accessibility:

- Ample parking for disabled patients.
- Clean and accessible toilets, but no breastfeeding rooms and limited availability of wheelchairs.
- No braille signage or hearing loops for visually or hearing-impaired patients.

Staff Feedback:

- Staff highlighted challenges in providing personalised care due to time constraints.
- Some staff unaware of the purpose of care bags meant for LD patients.

Patient and Carer Feedback:

- Carers reported dissatisfaction with communication and limited overnight stay options.
- Requests for more patient activities and improved support facilities were noted.

Results of visit

Wards visited: 24, 30, 31, 34, 42, 43 and 44

The wards visited were all located in the Windsor building except for ward 44 which was located in the Balmoral building.

Access to the wards from the main car park is good and easily accessible. There is signage for the wards on the wall by the lifts.

The signs are clear, easy to read and placed at appropriate heights for visibility by patients with learning disabilities (LD). Both the Windsor and Balmoral buildings feature signage that is accessible and readable for LD patients. The hospital unit is also easy to navigate, with clear pathways and accessible lifts, making it user-friendly for patients with learning disabilities.

The wards offer well-sized rooms and lounge areas that are comfortable and suitable for patients with LD, ensuring accessibility. Additionally, the lifts are generally accessible to all patients, including those with physical disabilities.

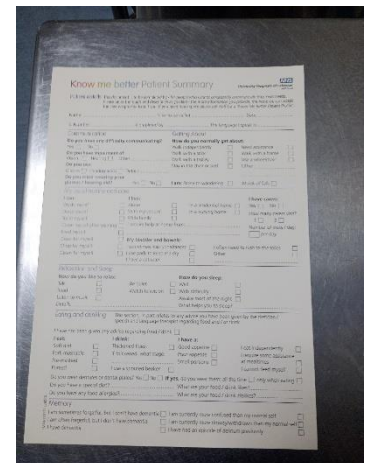
In the wards we visited, no queues were observed. Staff consistently strive to meet the needs of every patient, including those with LD and are trained in how to engage with LD patients. For example, they use simple and concise language and have added visual aids to signage, especially on toilet and shower facilities in certain wards. Additionally, the LD team visits regularly to interact with LD patients, carers are also encouraged to continue to support the patient in hospital, but patients are not always accompanied, it depends on their funding package. All wards feature a spacious reception area, with most providing private spaces for sensitive conversations such as family rooms, however at Ward 44, where space limitations prevent the ward having a family room/confidential area.

The waiting room areas of the wards lack suitable seating options, such as bariatric chairs. Based on our observations, armchairs are only available near the entrance to the waiting room.

Patients have 'Know me better patient summary' form, the form helps staff understand the need of the patient for example communication, medication, food likes and dislikes, relaxation, memory, cultural needs,

emotional support and things that are important in the patient's life. This form is filled in by next of kin/family members. We observed that all wards visited have the 'Know me better form' filled in for patients.

One staff member on Ward 43 said "A form is filled in by next of kin of how the patient is, we go through the form, and we care for them on their likes and dislikes. The Learning Disability team will come down and assess us, give support and one to one support. If needed they support of person hygiene, food (Nutrition) etc. Also more information is given my family members, they may give a meal plan and we will follow that accordingly."



One staff member spoke about how patients are supported who don't have a carer present, "Know me better form is filled and also during huddle, we inform staff of patient with learning disabilities who is here on the ward and that they may need one to one support.

The wards provide a calming atmosphere, with comfortable noise and light levels that are not overstimulating. While most wards do not feature background music, Ward 44 plays soft, soothing music. Lighting throughout the wards is gentle, with no harsh or dazzling lights. Additionally, the wards are free from disruptive noises.



In Ward 43, there are side rooms, bays, a reception area, toilets, shower facilities, sinks, and tables with chairs placed along the bays. Each bay has a nurse seated in front, with paperwork on the tables. Protective equipment (PPE), hand sanitisers, paper towels and noticeboards are also positioned along the corridor of Ward 43.

Within the ward rooms, there are yellow baskets to store belongings. Additionally, there are domestic waste bins and clinical waste bins placed in the rooms. Lighting is not too bright in both wards 43 and 42.

The signage of all wards are above the entrance doors. In all of the wards, there is a cleaning summary checklist.

In ward 42, the flooring is blue and they provide a private space which is called a "retreat room" where patients could have confidential discussions. They provide smiley face patient feedback forms in paper format and electronic format via an iPad.

In Ward 42, a staff member discussed the importance of providing meaningful activities for patients. To access these activities, patients must be referred to the Meaningful Activities Team, who then visit the ward to offer support and facilitate various activities. Additionally, we were shown an activities box created by the ward staff, which includes items such as games, books, and pop-its. **"We have created an activity box, it was not funded by the trust, and staff have done this using their own initiative. The Matron on this ward is all about inclusivity."**

In Ward 24 the ward entrance sign is positioned behind a vending machine. The lighting is bright and the corridors are spacious. The ward includes side rooms and bays, with PPE readily available. The noticeboard features information about hand hygiene, and there is a box where patients can leave messages for the matron. In the main corridor of Ward 24, there is a handwashing station with a sink, hand wash and paper towels. Toilets and shower facilities are also available along the corridor.

In Ward 31, the entrance is clearly marked with signage displayed above the door. The lighting throughout the

ward is bright. A designated “day room” is available for patients to engage in sensitive discussions. The noticeboard contains information relevant to end-of-life support. The ward also has an information folder specifically for individuals with LD, which we were shown. It contains easy-read materials and a visual aids booklet with images of items such as nurses and thermometers. We were informed that the LD team provides support as needed.

Ward 34 has entrance signage positioned above the door. The lighting is quite bright, and the corridors are clean and spacious. The ward includes both side rooms and bays, with visual aids present in the shower and toilet areas. In the corridor, there is a sink area equipped with paper towels, hand sanitiser, and PPE. A “day room” is also available, providing patients with a private space for conversations.

Ward 44 features clear signage above its entrance. The lighting is bright, and the corridors are impeccably clean. The ward includes a staff toilet, utility rooms, staff room, and storage room. Notably, Ward 44 is the only ward observed without side rooms, as its layout consists of bays. The noticeboard displays information on infection prevention and safety protocols, and hand sanitisers are readily available throughout the ward.

Sanitising stations are readily accessible to all patients within the wards.

Patients have a choice when it comes to food and drink. They can pick and choose from the food menu.

Accessibility

There are ample designated parking spaces for patients with disabilities, clearly marked for easy identification.

In each ward visited, the toilets are clean, easily accessible, and have a spacious design. They are equipped with emergency cords and are gender-neutral as signage on the toilet door is a picture of a ‘toilet’. Some wards also feature visual aids in the toilets. However, there are no breastfeeding rooms available within the wards.

During our observation in Ward 42, we spoke with a nurse about wheelchair availability. She explained that the ward contacts the Physiotherapy Department to request wheelchairs for patients without one, but families are generally advised to bring wheelchairs from home as patients may have their own moulded wheelchair.



In Ward 34, we observed portable wheelchairs provided for individuals with mobility challenges. Our observations also noted a lack of braille signage for visually impaired individuals and the absence of hearing loops for those with hearing impairments.

In Ward 44 we were told visual aids are used to communicate with patients with learning disabilities, they will use happy scales. They also provide a visual menu to help patients make their meal choices. One staff member said, **“The catering team come round, sometimes they just offer two things but when I am around I usually go through the whole menu. It happens to everyone.”**

Information available to patients

Notices and leaflets are displayed at accessible heights with large, easy-to-read fonts in the wards we observed. Ward 42, for instance, includes health information supporting people with autism. Other wards also provide health-related materials; in Ward 34, we noted leaflets covering topics such as dementia, blood clots, incontinence, and dermatitis. Additionally, it appears that Patient Advice and Liaison Service (PALS) leaflets are readily available and clearly displayed on all ward noticeboards.



Additional information for patients, including details on support services for those with learning disabilities, is available on UHL Connect. Appointment details, including out-of-hours care information, are also presented in an easy-to-read format on UHL Connect. Nursing staff informed us that the Carers' Charter and Data Privacy Notices can be found there as well. Information in other languages, along with simplified versions for individuals with learning disabilities, is provided to enhance accessibility. All of this information is accessible on the UHL Connect, additional support or information can be provided by the LD team.

The Friends and Family Test is clearly displayed and accessible in the wards, with easy-to-read versions available.

All wards provide materials in easy-to-read formats as well as in various languages.

Staff feedback

On Ward 44, we spoke with a staff member regarding the care bags. They mentioned that they were unsure of their purpose, as patients with learning disabilities typically did not bring them in. Staff on the ward do not know about the care bags. *"We have quite a few patients with Learning Disabilities, it would be good to have care bags."*

When asked about what the challenges are, one staff said *"It is time consuming, depends on the care, different than other patients but we do have one to one support. Also if patient does get aggressive there is one to one support given. Building a bit of rapport helps, we have to learn the way that is best for the patient, it is about adapting to the patient's needs."*

When asked how the ward is informed about a patient with a LD, we were told that the LD team flags this in the patient's notes, adds relevant information and visits the ward to provide additional support. An alert also appears on the Nurse Centre system, prompting the LD team to conduct an assessment and update the notes. Additionally, the unit uses a patient summary board with a traffic light magnet to identify patients with LD.

On ward 34 we had asked nurse in regards to offering space for carers to stay on the ward with LD patient, as one carer had spoken about not being able to stay on the ward overnight. We were told *"We have offered a roll out bed in the family room, carers cannot stay in a male only ward overnight."*

One staff member spoke about interaction with patients with LD and one to one support, *"We do try to interact with the patients, but the ward is busy, not always able to do that, also patient is supposed to have one to one support, not always able to allocate a staff member."*

Patient feedback

A survey was completed on the visit, where we asked if patients would like to take part in the survey. We received 5 responses with support from their carers. See Appendix 1 for the survey responses.

Recommendations

We recommend that University Hospital of Leicester NHS Trust (UHL) :

| | |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 | Ensure staff are informed about the care bags, their contents and their purpose. Additionally, provide care bags to the wards for use when needed. |
| 2 | Ensure essential equipment like hoists are readily available in all wards. |
| 3 | Explore options for allowing carers to stay overnight, especially for patients with high needs. |
| 4 | Ensure clear communication regarding meal options and enhance support for patients who may need assistance with food and drink choices. |

Service provider response

The report was agreed with the Service Provider as factually accurate. They have provided the following response to the report:

The Enter & View visit, has highlighted some areas of good practice for patients with learning disabilities and also some areas where staff knowledge can be improved. The recommendations are very helpful and will be implemented as part of the overall LD action plan for UHL, which is overseen by the UHL, Mental Health, Learning Disability and Autistic People Steering Group. Thank you for your visit and subsequent report.

Result of visit: Staff comment on 'Know me better form'

"We will work with staff to ensure that wards are not using the 'Know me Better' form for patients with learning disability, this is for patients with dementia. There is a specific communication passport for LD patients called 'Helping me in Hospital' book."

Staff feedback: carers support

"There should be no expectation that carers will provide support. NHS England (NHSE) is clear that any additional support is the responsibility of the hospital, but it is recognised that carers should be encouraged to stay if able, to provide reassurance and consistency to enhance patient care."

Distribution

The report is for distribution to the following:






- University Hospital of Leicester NHS Trust (UHL)
- LLR Integrated Care Board (ICB)
- Care Quality Commission (CQC)
- Leicester City Council (LCC)
- Leicestershire County Council (LCC)
- NHS England (Leicestershire and Lincolnshire) Local Area Team
- Healthwatch England and the local Healthwatch Network
- Published on www.healthwatchll.com

Appendix 1: Survey Findings

5 responses

Please note: The patients engaged with were all non-verbal, therefore their carers have supported them by providing feedback.





Q1. How well do the Doctors & nurses communicate with you?

| | | |
|------------------------------------------------------------------------------------|-----------------------------------------------|---|
|  | They are really bad at communicating with me | 1 |
|  | They are quite bad at communicating with me | 0 |
|  | They are ok | 0 |
|  | They are quite good at communicating with me | 1 |
|  | They are really good at communicating with me | 2 |

Unanswered: 1





One patient relative said "it is the relative that is spoken to rather than the patient".

Q2. Do the doctors and nurses try to talk to you before they talk to your family or carers about your care?





| | | |
|------------------------------------------------------------------------------------|-----------------------|---|
|  | Yes | 3 |
|  | No | 1 |
|  | Sometimes | 0 |
|  | Not sure / don't know | 0 |

Unanswered: 1




Q3. Do the doctors and nurses check that you understand what is happening?

| | | |
|-----------------------------------------------------------------------------------|-----------------------|---|
|  | Yes | 3 |
|  | No | 0 |
|  | Sometimes | 0 |
|  | Not sure / don't know | 2 |




Q4. Do the doctors and nurses seem to know what you need?

| | | |
|-------------------------------------------------------------------------------------|-----------------------|---|
|  | Yes | 3 |
|  | No | 0 |
|  | Sometimes | 1 |
|  | Not sure / don't know | 1 |

Q5. Do the doctors and nurses look at and use your communication passport? (Helping me in Hospital Book)?

| | | |
|-------------------------------------------------------------------------------------|-----------------------|---|
|  | Yes | 3 |
|  | No | 2 |
|  | Not sure / don't know | 0 |

Q6. Do the doctors and nurses try to get you to do things for yourselves?

| | | |
|-------------------------------------------------------------------------------------|-----------|---|
|  | Yes | 3 |
|  | No | 1 |
|  | Sometimes | 1 |



Q7. Do you feel you are given choices about your care?

| | | |
|-----------------------------------------------------------------------------------|-----------|---|
|  | Yes | 2 |
|  | No | 2 |
|  | Sometimes | 0 |

Unanswered: 1

Comments: One carer who answered yes also said "He doesn't understand, I help him, I know him well and what he needs, by his smile and eyes."




Q8. Did you receive a care bag during your stay?

| | | |
|------------------------------------------------------------------------------------|-----|---|
|  | Yes | 1 |
|  | No | 4 |



Comments: One carer who answered said "Didn't know about care bag"

Q9. Did you find the care bag useful?



| | | |
|-------------------------------------------------------------------------------------|-----------------------|---|
|  | Yes | 1 |
|  | No | 0 |
|  | Not sure / don't know | 3 |


Unanswered: 1

Q10. What could make the care bag better?

No comments were made




Q11. Do the ward staff give you plenty of time to help you?

| | | |
|-------------------------------------------------------------------------------------|-----|---|
|  | Yes | 2 |
|  | No | 1 |

| | | |
|-----------------------------------------------------------------------------------|-----------------------|---|
|  | Not sure / don't know | 1 |
|-----------------------------------------------------------------------------------|-----------------------|---|




Unanswered: 1

Q12. Do the ward staff help you to choose your food?

| | | |
|-----------------------------------------------------------------------------------|-----------------------|---|
|  | Yes | 3 |
|  | No | 0 |
|  | Not sure / don't know | 0 |






Unanswered: 2

Q13. Do ward staff tell you what food you can choose in a way that is easy for you to understand?

| | | |
|-------------------------------------------------------------------------------------|-----------------------|---|
|  | Yes | 2 |
|  | No | 0 |
|  | Not sure / don't know | 1 |

Unanswered: 2

Q14. Overall, how satisfied are you with the care provided here?

| | | |
|------------------------------------------------------------------------------------|----------------------|---|
|  | Very happy | 2 |
|  | Happy | 1 |
|  | Not Happy or unhappy | 1 |
|  | Unhappy | 0 |
|  | Very unhappy | 1 |

Q15. Is there anything else you would like to say about your care in hospital or anything that could make it better? Please note: The patients engaged with were all non-verbal, therefore their carers have provided feedback.

In Ward 42 carers for one patients provided their feedback: "Needs not met, needs better communication with doctors." They had spoken about how they are there 24 hours to care for the patient. They do everything for the patient for example the lifting, moving patient around. The ward does not have a hoist. The carers had said "no food is offered to us, staff, all they do is medication. Staff didn't know whether she had food or not."

One carer had commented on staying overnight at the ward, and what support should be offered: "At this ward, I wasn't able to stay the night which I found odd, he got really upset. His needs are high, I am always around him. Sometimes it is a struggle for carers, no beds, have to sleep on recliners, it is stressful." The carer then spoke about getting support for patients while at the ward, "Support while here would be good, like a play area, something to motivate them, make them a bit happier."

One carer said, "Doctors/ nurse will talk to him explaining next steps, like food, medication. They do encourage to do things himself."

One carer said, "when patient used to be in children's ward, patient had activities... person come here, there is nothing."

One carer said, "He is better here, no changes needed."



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