



ENTER AND VIEW

Unannounced Visit

Royal Wolverhampton NHS Trust (RWT) Outpatients Department - Fracture and Orthopedic Clinic, 21 March 2018

Part of the Healthwatch Wolverhampton remit is to carry out Enter and View visits. Healthwatch Wolverhampton Authorised Representatives will carry out these visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allows Authorised Representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Wolverhampton Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Wolverhampton safeguarding policy, the service manager will be informed and the visit will end. The local Authority Safeguarding team will also be informed.

Royal Wolverhampton NHS Trust

Service Address: Wolverhampton Road, Heath Town, Wolverhampton, WV10 0QP Senior Sister: Kirstie Blakemore

Acknowledgements

Healthwatch Wolverhampton would like to thank the Senior Sister, Deputy Sister, patients, visitors and staff for their co-operation during the visit.

Disclaimer

Please note that this report relates to findings observed during our visit made on **21 March 2018.** The report does not claim to be representative of all patients, only of those who contributed within the restricted time available.

Authorised Representatives

Shooky Devi (Lead) Marlene Lambeth Mary Brannac

Who we share the report with

This report and its findings will be shared with the Royal Wolverhampton NHS Trust (RWT), Care Quality Commission (CQC), Healthwatch England, and NHS England. The report will be published on the Healthwatch Wolverhampton website.

Summary

An unannounced Enter & View visit took place in March 2018. The visit was responding to intelligence received on the quality of care received within the Outpatients Department - Orthopedic and Fracture Clinic.

The ward was busy on arrival; we approached the receptionist and asked to speak to a senior member of staff. We were directed to the Senior Sisters office and introduced ourselves.

The following key observations and comments were made:

- There were two white boards visible displaying consultant in charge, estimated delays if any.
- Overall patients spoken to were happy with the service delivered by the clinical team.
- The clinic areas looked clean and clutter free.
- The commitment and drive of the Senior Sister to better improve the services of the department for the patients.

Background

Outpatients Department Orthopaedic and Fracture clinic is part of New Cross Hospital which is managed by Royal Wolverhampton Hospital Trust.

The staffing levels for the ward are as follows: Matron, Senior Sister/Department Manager, Deputy Sister, four staff nurses Band 5, two Band 3 Healthcare Assistants (HCA), six band 2 HCA, four band 4 plaster technicians and one band 3 trainee plaster technician. The departments within the Orthopaedic Clinic are x-ray, physiotherapy and Health Records which is managed by the receptionist. There are fourteen clinics however when there is maximum capacity with clinics running am and pm twenty eight clinics are in operation in one day.

What we did

Three Authorised Representatives visited the ward between 10.00am and 12.00pm 21 March 2018. We were signposted to the Senior Sisters office who welcomed us. We introduced ourselves and explained the purpose of the Enter & View visit. The Authorised Representative Lead spent time with the Senior Sister to better understand the work they do. The other two Authorised Representatives engaged with the patients in the waiting area.

Findings: Environment:

Time was spent observing the general environment of the Ward as well as spending time in the different bays.

On arrival, the Outpatients Department was busy with patients were seated and those arriving. Patients were observed reporting to reception and a member of staff asking the relevant questions to ensure personal details are correct. The patients are then waited to be called to their allocated to sub area. The Authorised Representative Lead was given a tour of the whole department by the Deputy Sister.

The Outpatients waiting area is held in a large room separated into different zones for the patients to wait. We saw two white boards for the Orthopaedic and fracture clinic, one fixed on the wall opposite and the other on the side of the room. At the point of observation one notice board stated a delay of forty minutes, it was felt many patients could not see the information due to the distance the notice boards are placed. The other notice board had no delay information however patients for that zone commented they had been waiting between twenty to forty minutes. We noted later on a member of staff had wrote on the board a delay of one hour.

The waiting area and corridors to the different treatment areas looked clean and clutter free. However, it was felt the waiting area looked tired, there was no facilities the patients could engage with whilst waiting to be called.

We saw sufficient leaflets and information displayed throughout the department. Mounted hand sanitisers were seen throughout the clinics. The department was well signposted to the various clinics and refreshment areas.

Outside the Sisters office was a Notice Board 'Welcome to the Trauma and Orthopaedic Fracture Clinic Department. The relevant information was displayed Names of staff members allocated to rooms for the day 21 March 2018. A4 Notice 'Resuscitation equipment' informing where the nearest resuscitation trolley is located.

The sub waiting area for the plaster room is located near the Sisters office with a children's play area. There was an A4 notice to patients 'if you have recently changed your name, address, telephone number or general practitioner, please inform the receptionist.'

Patient Experience:

We spent time with the patients gathering their experiences whilst they are staying within the hospital.

The Authorised Representatives spent time in the waiting area capturing patient experiences whilst they waited to be called. Approximately twenty to twenty-five patients were spoken to.

All patients spoken to were aware of how to report to reception and asked relevant questions by the receptionist such as address, name of GP and telephone number. Some of the patients commented they were not happy with the communication at reception and did not find the staff friendly.

Many of the patients did not know how they would be informed if there was a change with the consultant. Eight patients asked were new to the clinic.

Patients were asked how they are informed of any delays and waiting times. Five patients said they use the Notice board for information and the other patients said they are not informed.

Patients commented that Crutches are easily available for use however wheel chairs are sometimes difficult to find and hard to manoeuvre. One patient's relative said she brought her dad's own wheelchair to the hospital.

All patients were aware of the location for accessing refreshments.

Overall the patients were happy with their treatment and the doctors. Many knew the procedure when visiting the clinic and what to expect. They all knew what doctor to see and found the staff in general friendly.

A patient informed us he missed his appointment the previous day. However, he arrived at reception and told he would be seen at some point but no specific time given.

Staff *Staff information provided to the Authorised Representative Lead.*

The Authorised Representative Lead spent time with the Senior Sister to better understand how the department is run.

Patient appointments are prepared a day before and put in order for the day. The patient can be seen by anyone within the team however if the patient wants to see a specific consultant this option is available by informing reception on arrival and a member of staff will mark it against the file of the patient.

Information is recorded on the Notice boards. If there is a delay greater than thirty minutes, then a verbal announcement is made ensuring all patients are aware accommodating individuals with visual impairment and language barrier.

Wheelchairs are not stored within the department staff have to physically find wheelchairs within the hospital. If there is an issue with the maintenance of the wheelchairs then queries should be raised with the Estates Teams, Portering, or health and safety.

All nurses are responsible for the wellbeing of the patients.

A variety of invasive treatments are available for patients such as manipulation, casting, aspiration, steroids injections into joints, removal of k-wire used for the treatment of a bone.

Comments and Further Observations

We were welcomed by the Senior Sister and other members of staff on arrival. The Outpatients Department was very busy with clinics in operation.

We were informed the clinic is being refurbished with a special waiting room for children.

We fed back some of the patients spoken to had being waiting for over thirty minutes and during the point of observation the Authorised Representatives had not seen a member of staff attend to the patients informing of the delay.

There are two white boards within the waiting area and it was felt it was difficult to see information on the boards. We mentioned the introduction of a TV within the waiting area. The Senior Sister explained £400 has been raised and the process is currently on hold as the whole department is under configuration.

Recommendations and Follow - Up Action

The Authorised Representatives would like to suggest the following recommendations arising from the visit.

To give information to staff, patients and members of the public we suggest introducing clinic displays and waiting room signs. Once the department is refurbished to install a TV for patient engagement.

Set store of wheelchairs

Provider Feedback