



# West Middlesex University Hospital Adult inpatient wards Executive summary

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## Introduction

In October 2018, Healthwatch Richmond conducted a series of Enter & View visits to the adult inpatient wards at West Middlesex University Hospital. This document summarises the feedback we received from patients and staff, as well as the observations made by our team.

## Background & Method

West Middlesex University Hospital provides substantial services for patients in the London boroughs of Hounslow, Richmond and Ealing. Our primary aims were to find out whether the wards we visited were meeting the needs of their patients and, if appropriate, to make recommendations about how the service may be improved.

We carried out two day time visits and a late evening visit to each of the following adult inpatient wards: Marble Hill 1, Marble Hill 2, Crane, Lampton, Richmond and Syon 2. In total, we gathered usable feedback from over 100 patients and/or their relatives. We were also able to speak with 27 members of staff in a variety of different roles. We decided to base our conversations with patients around a list of pre-set questions, whilst also allowing them to raise other topics according to their individual experiences of the service.

## Overall experiences

When asked about their overall experience of the ward they were in, approximately 55 patients gave positive responses compared with only six who were clearly unhappy. In each ward, the majority of patients were positive - in many cases, very positive - about their stay.

## Staff attitudes

In each of the wards we visited, we received a large amount of positive feedback about the attitudes of staff and the care they provide. Over 75 people made positive comments about staff, repeatedly describing them as “kind”, “friendly” and “helpful”. A small number of patients across different wards made general remarks about staff they weren’t impressed by.

## Quality of care

With the exception of one ward - Marble Hill 1 - the overall quality of care was very good. Patients were generally very happy with the care they had received. We repeatedly observed staff working hard to provide a kind, caring and professional service in all the wards we visited. Staff were broadly observed to be engaging with patients in a friendly manner and seeking their consent prior to administering care.

Apart from Marble Hill 1, specific instances of poorer quality care did not appear widespread. We did however notice that staff were rarely able to spend time interacting with patients unless they were performing a specific care-related task; this was also commented on by a couple of patients.

## Dementia care

In general, patients with dementia appeared to be receiving good quality care. We observed various examples of staff providing good care to patients with dementia in both Crane ward and Marble Hill 1. However, it was clear that staff did not often have the time to provide the level of interaction that some

patients with dementia required to remain calm and comfortable. We also encountered a few examples of staff in Crane ward showing a lack of awareness towards the specific needs of some patients.

## Marble Hill 1

The majority of poor care that we encountered took place in Marble Hill 1. We received noticeably more negative feedback from patients and relatives, whilst also observing a higher volume of issues ourselves. The examples we encountered spanned a range of areas, including: inadequate support at mealtimes and the possible inappropriate provision of sugary food to a patient; issues with medication provision and patient hygiene; and a lack of support to help patients maintain independent functions.

This is not to diminish the efforts of the staff in Marble Hill 1, who were frequently observed to be working hard in a caring manner. Nevertheless, we raised our concerns with the hospital who provided us assurances about the quality of care being provided in the ward (see final section, *'Recommendations & response from the hospital'*).

## Quality and choice of food

We received very mixed feedback about the quality of food provided across all the wards, with similar numbers of patients providing positive and negative feedback. The volume and variety of the negative feedback we received indicates that there are definite improvements that could be made. We also received decidedly mixed feedback about the choice of food available to patients. All told, the strength and breadth of negative feedback highlights the need for the food to be improved, particularly for patients who are vegetarian or used to particular ethnic foods. Furthermore, constipation was clearly an issue for elderly patients and may, in part, be exacerbated by the types of food available.

## Help with food

We witnessed many examples of staff appropriately and thoughtfully supporting patients at meal times. We observed staff: serving food in a friendly manner; reminding patients of the menu options and checking what they had ordered; and positioning tables correctly to ensure that food and water were within reach.

Whilst we observed various examples of good practice in Marble Hill 1, we encountered some very poor food-related care in one particular bay that seemed disorganised and understaffed over lunchtime. We also came across a few minor issues in Crane ward.

Across all the wards, we consistently observed that patients were unable to wash their hands before eating; we did not observe any staff offering to help open patients' hand-wipes. We also came across a number of instances of patients not being told what food was available to them.

## Communication with patients

We received a lot of positive feedback from patients regarding the clarity of information provided by staff. Staff were repeatedly said to be providing clear explanations and making efforts to keep patients up-to-date on their care.

A relatively small number of patients gave more negative feedback about staff communication. Feedback from patients in Marble Hill 2 was especially mixed, with patients raising specific issues about the communication from doctors and the information provided regarding medications and scans.

## Privacy

The vast majority of patients felt that their privacy and dignity had been respected throughout their stay. We consistently observed staff using curtains appropriately to provide privacy whilst care was being administered. We did however notice that conversations could be heard through curtains. Furthermore, two patients expressed their embarrassment at being able to hear through the curtains when they were using a bedpan.

We came across a few isolated issues that related to patients' privacy and dignity. In Richmond ward, a staff member apparently told a patient that they could not close their curtain while getting changed, as this would prevent staff from being able to see other patients - the hospital said this was likely a miscommunication and have reminded staff to ensure that patients understand them - whilst the positioning of a side room window in Marble Hill 1 meant that a patient could be seen getting changed without them knowing.

## Ward environment

### General

Most patients were relatively happy with the general, daytime environment of the wards. While most of the wards were described as being busy at times, patients were generally unbothered by this. We were particularly impressed with the pleasant, dementia-friendly layout of Crane ward.

Patients in Marble Hill 1 raised the most negative feedback about the general environment, commenting that the ward was noisy due to other patients. In Richmond ward, we observed some issues with clutter in both the corridor approaching the ward and within the ward itself.

### Cleanliness

Throughout our visits, the wards themselves were consistently clean, as were the toilets and washroom facilities. We did however receive some negative feedback about unclean toilets in Marble Hill 2, where the issue was raised by four separate patients.

### Night time

Patients in Crane, Lampton and Richmond were generally more positive about the night time environment, whereas more negative feedback arose in Marble Hill 1, Marble Hill 2 and Syon 2. The issue of patients with dementia causing disturbances was raised across the wards, while a few patients - particularly in Marble Hill 2 - made comments about staff being disruptive during the night.

During our evening visit to the hospital, the atmosphere in Marble Hill 1 was noticeably more frantic than that of the other wards, which were calm and quiet. When we left Marble Hill 1 at 22:10, the lights were still on, most of the patients still required assistance and staff were very busy providing a wide range of care.

## Staff feedback

Staff were consistently positive about the teams they worked in and felt well supported by senior staff. However, we were concerned that 12 staff - across different wards - expressed concerns about staffing levels and the effect this has on the quality of care they are able to provide.

## Recommendations & responses from the hospital

The overall quality of care being provided was very good. Patients were generally very happy with the care they had received and staff were widely praised for their friendly approach.

Based on our findings, we made specific recommendations to the hospital that focused on: concerns around the quality of care provided in Marble Hill 1; isolated incidents of poor quality care in other wards; the quality and choice of food available to patients; communication issues in Marble Hill 2; dementia awareness among staff in Crane ward; concerns expressed by staff about staffing levels; and staff noisiness at night.

The hospital provided a response outlining how they would address the issues we raised:

- The staffing for Marble Hill 1 has been reviewed and increased. As of December 2018, the ward has recruited a new matron and an additional early-shift nurse.
- Our findings were shared among the Marble Hill 1 team. Reminders have been given to staff regarding the quality of their care, communication and mealtime support. The ward had seen a reduction in incidents and complaints over the last 3-6 months.
- Feedback about other wards was shared with ward managers and raised within their teams. Staff will be reminded of the need to communicate clearly with patients at all times. They will also be reminded not to use their mobile phones in patient areas.
- Audits of the food service have been carried out in some wards. The catering services manager has briefed catering teams to ensure they are clearly communicating to patients what food is available. They will also encourage their teams to be more proactive in obtaining feedback from patients after meals.
- Staff have been reminded of their responsibilities in preparing and assisting patients with meals, including opening patients' hand wipes.
- Feedback regarding doctors' communication was shared with medical leads and will be monitored through ongoing patient feedback. Nursing teams were also reminded to ensure that queries are addressed in a timely manner.
- Our dementia findings will be used by senior staff in Crane ward to identify further training needs among their staff and ensure that these are met.
- The hospital outlined how they have been working hard to recruit and retain nurses and HCAs; the hospital has the lowest nurse vacancy rate in London. A ward manager post in Syon 2 has recently been filled.
- Staff will be reminded to offer ear plugs to patients at night.

We would like to thank the hospital for all their support with this piece of work and for committing to improvements where necessary.