

Report into Warwickshire Mental Health Services

July 2017

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We would also like to thank the staff from Coventry and Warwickshire Partnership Trust for their hospitality and support during our visit.

Special thanks go to Sue Eato, Gemma Hickman, Janet Kenworthy-Harvey and Jaspreet Singh from Coventry and Warwickshire Partnership Trust for their support in facilitating our visits.

We would also like to recognise the contribution of our volunteer Authorised Representatives, without whom, our Enter and View activities would not be possible.

This report is available on our website:

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Disclaimer

The information contained within our report relates to the information shared with Healthwatch Warwickshire during November and December 2016 and our findings observed on the specific dates within our report. The report is not a representative portrayal of the experiences of all service users, their relatives, carers and staff, only an account of what was observed and contributed at the time of our visits.

Executive Summary

Inpatient Ward Visits

Healthwatch Warwickshire visited the five inpatient wards at St Michael's Hospital, Warwick and the two inpatient wards at Manor Site, Nuneaton.

Overall, Healthwatch Warwickshire did not find any areas of concern at either site in relation to;

- Atmosphere
- Facilities
- Signage

Cleanliness

We identified several concerns about the level of cleanliness on Hazelwood ward, Pembleton ward and Stanley Ward. The main concerns focused on the level of cleanliness of the communal bathrooms, shower rooms and toilets. A total of seven recommendations have been made to address these concerns.

Decoration

Overall the decoration throughout St Michael's Hospital and Manor Site was in good condition. Three areas were identified on Ferndale ward, Rowans ward and Pembleton ward as in need of refurbishment. Three recommendations have been made to this effect.

Fixtures and Fittings

Healthwatch Warwickshire identified several concerns with the fixtures and fittings on Ferndale ward, Rowans ward, Pembleton ward and Stanley ward. The majority of the concerns related to the communal bathrooms, shower rooms and toilets. We also identified that the nets and curtains on Stanley ward were in poor condition. A total of six recommendations have been made for these areas.

Flooring

Throughout St Michael's Hospital the internal floor was in good condition with no slip or trip hazards identified. We have recommended that a deep

clean of the bathroom and shower rooms is completed on Hazelwood ward to remove staining which is present.

We also identified several raised paving slabs in the Rowans ward communal garden which we have recommended to be re-laid.

Although a concern about the flooring on Stanley ward was identified, Healthwatch are satisfied that there is already a plan to replace this flooring in January 2017.

Furnishings

Healthwatch Warwickshire observed that the majority of furnishings on both sites was

clean, functional and in good condition. We have made two recommendations to address an issue identified on both Hazelwood ward and Rowans ward.

Lighting

Overall the lighting provision at both sites during our visit was good. We identified a few faulty lights during our observations and have made two recommendations to address this for Larches ward and Pembleton ward. We have also recommended that the lighting provision in the communal toilets on Stanley ward is assessed as we identified that the lighting was dim in these areas.

Privacy and Dignity

Most of our observations about privacy and dignity at both sites were positive. We have made two recommendations to this effect, one for Willowvale ward and one for Pembleton ward.

Storage

Healthwatch Warwickshire only identified one concern in regards to inappropriate storage on Stanley ward. We observed that there was a lack of storage facilities for sundries on the ward and the communal toilet was being used for this purpose. We have made a recommendation to this effect.

Other

Three recommendations have been made to address concerns identified on Larches ward.

One recommendation has been made to assess if there is a need for grab rails on Pembleton ward due to the health condition of its patients.

We have recommended that the provision of suitable toilet facilities for staff on Stanley ward is addressed as a matter of urgency.

Outpatient Service Visits

Stratford Healthcare - 30th November 2016

Healthwatch Warwickshire received 20 responses during our visit to Stratford Healthcare.

Questions 1-4 asked participants to rate areas of the service as Excellent, Good, Average or Poor. We received only two Poor ratings in response to question one relating to the referral system.

Questions 5-7 asked participants to agree or disagree with positive statements about the service they receive. Most respondents either Strongly Agreed or Agreed. We received only 4 responses which neither agreed or disagreed.

Manor Court Avenue - 14th December 2016

Healthwatch Warwickshire received 7 responses during our visit to Manor Court Avenue.

Questions 1-4 asked participants to rate areas of the service as Excellent, Good, Average or Poor. We received only one Poor ratings in response to question one relating to the referral system.

Questions 5-7 asked participants to agree or disagree with positive statements about the service they receive. Most respondents either Strongly Agreed or Agreed. We received only 2 responses which disagreed and one response neither agreed or disagreed.

Healthwatch Warwickshire do not have any recommendations on how the Outpatient Service could be improved based on the feedback of service users.

Have Your Say Day

Healthwatch Warwickshire conducted a Have Your Say Day at St Michael's Hospital on 15th November 2016. Our staff and Authorised Representatives spoke with patients, relatives, carers and staff about their experience of St Michael's Hospital. We received a total of 20 responses.

Overall, the feedback from participants was very positive about the care that they, or a relative, had received at St Michael's Hospital.

The themes from the 20 participants' responses fall broadly into the following six areas;

Activities

Participants felt that there were not enough activities for patients to do outside of the ward. The 'Coffee and Chatz' café was well utilised but the opening hours were limited.

Two recommendations have been made to address these concerns raised.

Carer and Relative Involvement and Expectations

It was apparent from our discussions with relatives and carers that there was a level of expectation about how much they could be involved and informed about the care, treatment and progress of their relative. Unfortunately, this is not always possible due to patient confidentiality; however, it was not clear if this had been explained to the relatives and carers.

Two recommendations have been made to improve the communication and involvement which relatives and carers receive.

Physical Health

Several participants raised concerns with us about the management of their physical health conditions whilst an inpatient of St Michael's Hospital.

Their concerns originated around delays in accessing medication or referrals to specialists in addition to a lack of understanding about physical health conditions.

Healthwatch Warwickshire has made two recommendations to consider the option of identifying staff to become experts in long term health conditions and providing more information to patients and staff.

Facilities

The main concern raised about the facilities at St Michael's Hospital was in relation to the unisex communal toilet in the main foyer area.

Healthwatch Warwickshire have made two recommendations in relation to this to improve the service user and visitor experience.

Staff Feedback

Healthwatch Warwickshire spoke to five members of staff during the Have Your Say Day.

The main themes arising were;

- The no smoking policy and impact on resources
- High staff turnover
- Lack of visible presence from senior managers
- Uncertainty about the future

Staff were very positive about their colleagues and work environment.

Healthwatch Warwickshire made a recommendation to enable staff to complete a staff satisfaction survey to pinpoint specific areas for Coventry and Warwickshire Partnership Trust to work on.

Staffing

We received praise for staff members from relatives and carers. Some patients felt that staff were too busy and therefore they did not always receive the level of interaction they required.

Healthwatch Warwickshire has recommended that the 'listening clinics' which currently run, are championed to allow patients, relatives and carers an opportunity to have their voice heard.

Admission and Discharge Process

On 23rd November 2016 members of staff and volunteer Authorised Representatives from Healthwatch Warwickshire met with members of staff from Coventry and Warwickshire Partnership Trust to discuss the current admission and discharge process.

During the meeting, it was agreed that the Coventry and Warwickshire Partnership Trust and Healthwatch Warwickshire would work together to ensure that the admission and discharge process is service user friendly.

Two recommendations were made;

1. That Coventry and Warwickshire Partnership Trust produce a user-friendly pathway/flow chart to show the various stages of the admission and discharge process from a service user perspective. Healthwatch Warwickshire will work with the Coventry and Warwickshire Partnership Trust to review the pathway and ensure that it is user friendly.
2. That Coventry and Warwickshire Partnership Trust share the current Patient Information Packs that are issued on admission with Healthwatch Warwickshire. Healthwatch Warwickshire will convene a group of staff and volunteer Authorised Representatives to review the packs for missing or incomplete information and user friendliness and make recommendations on how these can be improved.

Introduction

Healthwatch Warwickshire is the independent consumer organisation for users of health and social care services throughout Warwickshire.

Healthwatch Warwickshire's Vision is to: Work to give the people of Warwickshire an effective voice in improving health and social care.

Healthwatch Warwickshire's Mission is:

- To be the 'consumer association' for those who use health and social care services in Warwickshire;
- To enable those who are seldom heard to have a real say and an effective voice in the decisions that affect them;
- To be a critical friend to those who provide health and social care services in Warwickshire.

Our core functions are:

- To collate and communicate your views to the people who make the decisions about health and social care services;
- To promote and support your involvement in the commissioning of health services and provision of social care services;
- To provide or signpost you to advice and information regarding access to services.

Healthwatch Warwickshire has the statutory power to Enter and View any premises within Warwickshire which provides Health and Social Care services funded by the public purse.

The purpose of an Enter and View visit is an opportunity for our Authorised Representatives:

- To see and hear how health and social care services are provided;
- To collect the views of service users, relatives and carers;
- To observe the nature and quality of services;
- To report findings and associated recommendations.

Purpose of the Report

For some time now Healthwatch Warwickshire has been hearing concerns about local mental health services from both service users and carers. We have been told that there are delays in accessing services, that the service is unresponsive to carers who tend to be “kept out of the loop”, that follow up support is inadequate and that those with a mental health condition are left isolated following their discharge from a service. We have also been told that some GPs do not understand mental health services and, thus, are unable to provide the support that patients and carers say they need.

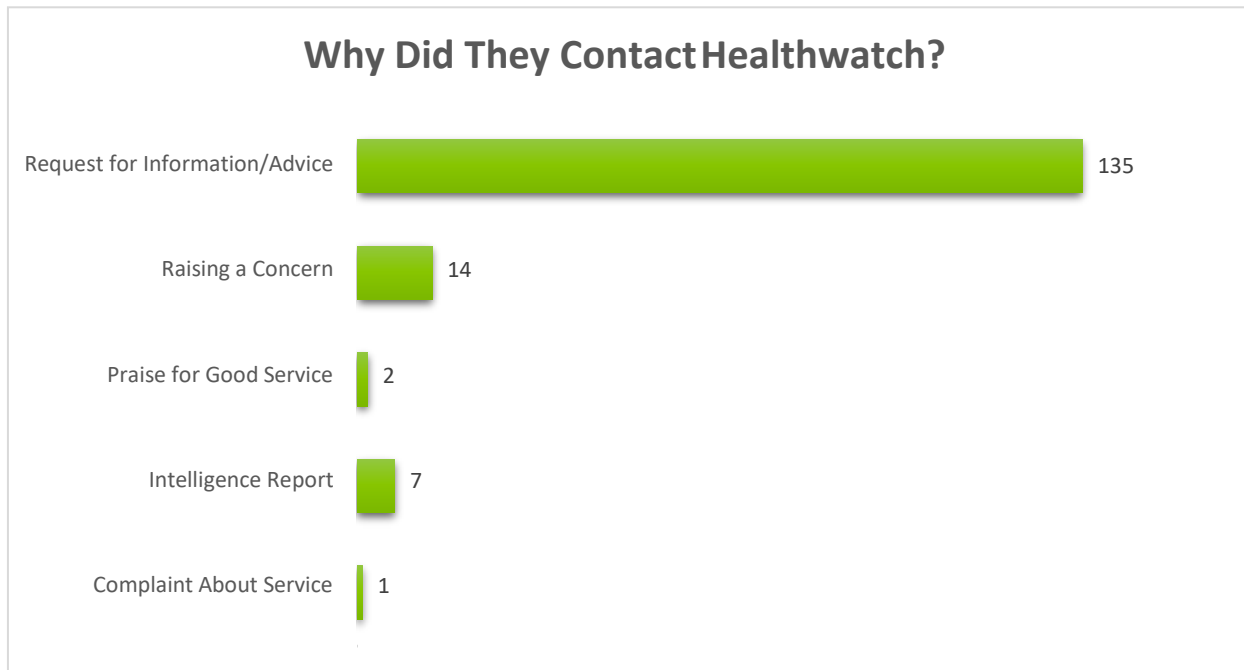
At a national level, we know that there is a crisis in mental health service provision. In 2016 the CQC published their report “Monitoring the Mental Health Act 2015/2016”. The CQC found that;

- For 12% (515 out of 4,344) of patients interviewed on our visits in 2015/16, there was no evidence that they were informed of their right to an Independent Mental Health Advocate (IMHA).
- There was no evidence of patient involvement in care planning in 29% (1,214 out of 4,226) of records that we examined. Similarly, 10% (452 out of 4,407) of care plans showed that patients’ needs had not been considered.
- Only half of the wards the CQC visited had provided staff with any training on how they should support and help patients.

The CQC recommended the following Priorities for Change;

- Providers must demonstrate stronger leadership making sure they can train and support their staff on the revised Code of Practice and how patients should be involved in their care from admission and onwards.
- Commissioners should consider how to ensure the best approach to commissioning, procuring and delivering services locally that is based on the needs of people who use services.
- The Department of Health and national agencies should work together to focus on early intervention to reduce detention rates.
- The experiences and views of detained patients should be a routine part of local MHA monitoring.

Since April 2016 Healthwatch Warwickshire has received 159 contacts about mental health.



During 2016 Healthwatch Warwickshire conducted a ‘call for evidence’ about mental health services across Warwickshire. Guided interviews were carried out with service users and their carers and the evidence was published in a report in October 2016. This report primarily focused on community based services.

To enable us to capture the views of service users and their carers of inpatient mental health services, Healthwatch Warwickshire decided to plan a programme of Enter and View activities around inpatient services.

The purpose of this report is to share the views and experiences of Warwickshire mental health service users, their relatives and carers and staff members.

Healthwatch Warwickshire will also, when necessary, make recommendations on changes which could be made to improve the experience of service users, their relatives and carers.

Methodology

Preparation

Members of the Healthwatch Warwickshire team met with the Matron/Patient Manager Inpatient Services and the Associate Director of Service User Carer Involvement in July 2016. This meeting was to discuss the proposals for the Healthwatch visit and explore the practical considerations of such a visit.

The schedule for the visits was agreed in advance in conjunction with Coventry and Warwickshire Partnership Trust.

Activities

The Enter and View activities were split into four areas:

- Inpatient Ward Visits
- Have Your Say Day
- Outpatient Visits
- Admission and Discharge Process

Inpatient Ward Visits

We visited St Michael's Hospital, Warwick on Monday 14th November 2016 and Manor Site, Nuneaton on Wednesday 16th November 2016 to conduct Inpatient Ward Visits. The purpose of these visits was to observe the care environment with a view to making recommendations which will improve the experience for service user.

Two teams of four Authorised Representatives attended St Michael's Hospital on Monday 14th November 2016. Each team consisted of two members of Healthwatch Warwickshire staff and two volunteer Authorised Representatives.

Team one visited Hazelwood, Rowans and Ferndale ward. Team two visited Larches and Willowvale ward.

One team of four Authorised Representatives attended Manor Site on Wednesday 16th November 2016. The team consisted of four members of Healthwatch Warwickshire staff.

The team of Authorised Representatives visited Pembleton and Stanley Ward.

Have Your Say Day

On Tuesday 15th November 2016, a team of staff and volunteer Authorised Representatives was present at St Michael's Hospital to listen to the views and experiences of service users, relatives, carers and staff. The team was present from 9.30am until 9.00pm, based within the main reception area. Members of the team also visited the individual wards to speak with service users.

All conversations were anonymous and confidential and participants were encouraged to share both positive and negative experiences of St Michael's Hospital. This was not a guided interview and participants could speak freely about any experience of St Michael's that they wished.

Outpatient Visits

We visited Stratford Healthcare on Wednesday 30th November 2016 and Manor Court Avenue, Nuneaton on Wednesday 14th December 2016 to speak to service users about their experiences of outpatient services in Warwickshire. We asked service users to complete a short questionnaire.

Admission and Discharge Process

Two members of staff and a volunteer Authorised Representative from Healthwatch Warwickshire met with a team from Coventry and Warwickshire Partnership Trust on 23rd November 2016. The purpose of the meeting was for the team from Healthwatch Warwickshire to be 'walked through' the different stages of admission and discharge so that we could identify any gaps in the process from a service user or carer point of view and make recommendations on how this could be improved.

Recommendations

For each area of our activities we have made recommendations on how the experience could be improved for service users, their relatives and carers.

Healthwatch Warwickshire will work with Coventry and Warwickshire Partnership Trust to address these recommendations.

Inpatient Ward Visits

Healthwatch Warwickshire’s inpatient ward visits focus on the communal areas of the ward such as dining rooms, lounges, bathrooms and toilets. We do not have the statutory power to visit staff only areas, view care plans or medication records or enter a service user’s own room, unless invited.

Healthwatch Warwickshire base their ratings on what was observed on the day of our visit. We rate each area of the ward individually and then combine these ratings to give an overall picture of the ward.

The ratings are:

Green	At least 80% of our observations were positive.
Amber	At least 60% of our observations were positive.
Red	Less than 60% of our observations were positive. This rating is also used if safeguarding issues are identified or hazards which have the likelihood of causing harm.

The areas that Healthwatch Warwickshire focused on during the inpatient ward visits were:

Atmosphere

Decoration

Fixtures and Fittings

Furnishings

Privacy and Dignity

Storage

Cleanliness

Facilities

Flooring

Lighting

Signage

Other areas not covered

St Michael's Hospital - Ferndale Ward

Date of Visit: 14th November 2016

How do we rate our observations?

Green	At least 80% of our observations were positive.
Amber	At least 60% of our observations were positive.
Red	Less than 60% of our observations were positive. This rating is also used if safeguarding issues are identified or hazards which have the likelihood of causing harm.

Physical Description of the Ward

Ferndale is a 16-bedded male Physical Psychiatric Complexity Unit (PPCU) located at St Michael's Hospital.

Each single room has a washbasin located within it. There are also four communal bathrooms and two separate toilets on the ward.

There are several communal rooms located on Ferndale including;

- 2 dining rooms
- Family and visit room
- 3 x communal lounge
- Art and Activity room

Patients have access to the internal garden from the main corridors on the ward.

Area of Observation	Rating (RAG)	Evidence
Atmosphere	Green	Calm, quiet atmosphere on the ward. In the communal toilet 0135 a strong smell of urine was present. In the dining room 0109 there was an unpleasant food smell which had remained in the room.
Cleanliness	Amber	In the communal toilet 0135 the extractor fan was observed to be covered in dust and the sink was stained. In the communal toilet 0108 urine was present on the floor; this room was locked when identified to the ward manager. In the dining room 0109 there was food debris located around the room and a greasy stain on one of the units.
Decoration	Amber	The communal bathrooms 0105, 0119 and 0139 were all observed to have damage to the walls and bathroom 0139 also had a crack on the ceiling. In the quiet room, we observed Polyfilla in holes on the wall and the walls were marked under the whiteboard. In dining room 0137 we noted a water damage stain on the ceiling.
Facilities	Green	All facilities we observed were in good condition and working order.
Fixtures and Fittings	Amber	In communal bathroom 0105 the edging under the radiator was peeling away from the wall and the sealant around the bath had peeled off. In communal bathroom 0139 a screw was hanging loose out of a panel on the ceiling. Throughout the communal corridors, many of the ceiling tiles were damaged or stained. In the garden, it was observed that several paving bricks were loose.
Flooring	Green	The internal flooring was in good condition and no concerns were observed. In the communal garden, it was noted that there was steep access which may cause difficulty for patients with restricted mobility.
Furnishings	Green	In the family/visitor room one chair had loose mesh underneath.
Lighting	Green	No concerns were observed with the provision of lighting or the condition of the lighting units.
Privacy and Dignity	Green	We did not observe any concerns with regards to patient privacy and dignity.
Signage	Green	All signage was very clear and easy to read.
Storage	Green	We did not observe any inappropriate storage on the ward. All storage areas were locked and inaccessible to patients.

How do we rate our observations?

Green	At least 80% of our observations were positive.
Amber	At least 60% of our observations were positive.
Red	Less than 60% of our observations were positive. This rating is also used if safeguarding issues are identified or hazards which have the likelihood of causing harm.

Physical Description of the Ward

Hazelwood is a 12-bedded locked male rehabilitation ward located in a separate building on the St Michael's Hospital site.

Each single room has a washbasin located within it. There is also a communal bathroom and three communal shower rooms on the ward.

There are several communal rooms located on Hazelwood ward including;

- 1 Laundry Room
- 1 Dining Room/Multipurpose Room
- 2 Client Kitchens
- 1 Telephone/Quiet Room
- 1 Communal Lounge

Patients have access to the outdoor space through the dining room or communal lounge. The outdoor space houses several outdoor exercise stations.

Area of Observation	Rating (RAG)	Evidence
Atmosphere	Amber	During our visit a PIT (Personal Infrared Transmitter) alarm was continually sounding in the main corridor. The alarm fault had been reported and was awaiting repair. This was audible in all patient areas.
Cleanliness	Amber	In the shower room 00.022 the toilet was stained and marked. We observed toilet paper strewn across the floor and overflowing bins. There were numerous dirty marks across the shower room. In the communal bathroom 00.006 there was a visible ingrained tide mark around the bath. Again, the toilet was dirty and stained. The bin was also overflowing onto the floor. In the communal lounge, there was visible dust and debris located around the skirting boards. In the quiet room, there was debris evident including a used ear bud and used tissues. We observed that the cookers within the communal kitchens required a deep clean. In bedroom 00.010 one light fitting had numerous dead flies within it. In the communal lounge, all light fittings contained dead flies.
Decoration	Green	In bedroom 00.010 there was visible staining behind the patient's bed. In the dining room, some marks were visible on the walls due to previous fixtures.
Facilities	Green	All facilities we observed were in good condition and working order.
Fixtures and Fittings	Amber	In bedroom 00.010 it was observed that the sink was discoloured and in need of replacement. It was observed throughout the communal bathrooms and shower rooms that the sink and toilets were discoloured, stained and in need of replacement. The bath in communal bathroom 00.006 was also in need of updating. We observed that a curtain was missing from the window in the dining room. In the outdoor space the Ciglow point was loose from the floor.
Flooring	Amber	The internal flooring was mainly in good condition with no slip or trip hazards. In the communal bathrooms and shower rooms it was observed that the areas around the toilets were stained - it was unclear if these stains could be removed with a deep clean. In the communal lounge, there were large scratches visible across the floor.

Furnishings	Amber	In the communal lounge one sofa was stained. We observed some concerns with the furnishings in the dining room. One table was damaged and two chairs were ripped with foam protruding from them. One of the armchairs had worn arms.
Lighting	Amber	No concerns were observed with the provision of lighting. A third of the lighting was not working in the dining room. This had been reported and was awaiting repair.
Privacy and Dignity	Green	We did not observe any concerns with regards to patient privacy and dignity.
Signage	Green	All signage was very clear and easy to read.
Storage	Green	We did not observe any inappropriate storage on the ward. All storage areas were locked and inaccessible to patients.

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How do we rate our observations?

Green	At least 80% of our observations were positive.
Amber	At least 60% of our observations were positive.
Red	Less than 60% of our observations were positive. This rating is also used if safeguarding issues are identified or hazards which have the likelihood of causing harm.

Physical Description of the Ward

Larches is a 20-bedded male treatment ward located on the second floor of St Michael's Hospital.

Each single room has a washbasin located within it. There is also a communal bathroom, a disabled access bathroom, a shower room, a wet room and 2 separate communal toilets located on the ward.

There are several communal rooms located on Larches including;

- 2 dining rooms
- 1 TV room
- 1 Gym
- 1 Pool room
- 1 Communal Lounge

Patients have access to the outdoor space which is shared with Willowvale ward. There is no direct access from the ward to the outdoor space.

Area of Observation	Rating (RAG)	Evidence
Atmosphere	Green	Calm, quiet atmosphere on the ward. No unpleasant smells. No concerns were observed.
Cleanliness	Green	In the main communal bathroom, it was observed that a metal plate of the ceiling was covered with what appeared to be toilet paper. A used towel was also observed in this room.
Decoration	Green	In the pool room, it was observed that the walls and ceiling showed damage and marks caused by pool cues.
Facilities	Green	All facilities we observed were in good condition and working order.
Fixtures and Fittings	Green	All fixtures and fittings were observed in a good working order.
Flooring	Green	The internal flooring was in good condition. We observed some scuff marks present in the pool room.
Furnishings	Green	All furnishings were observed to be clean and in good condition.
Lighting	Green	In the Treatment Room one of the strip lights was not working. In the communal corridor by the disabled bathroom the light was not working and this caused the area to be quite dark.
Privacy and Dignity	Green	We did not observe any concerns with regards to patient privacy and dignity.
Signage	Green	All signage was clear and easy to read.
Storage	Green	We did not observe any inappropriate storage on the ward. All storage areas were locked and inaccessible to patients.
Other Observations	Red	We observed some additional concerns whilst visiting Larches ward. The Treatment Room was a small space and we observed that it was tightly filled with medical items. This created a small area to move around which may impact on the patients experience of being examined/treated. In the pool room, it was noted that a mobile phone charger and lead was left unattended on a windowsill. This may be a ligature risk. In the communal corridor by the nurse's office a fire extinguisher was observed to be free standing and not wall mounted.

St Michael's Hospital - Rowans Ward

Date of Visit: 14th November 2016

How do we rate our observations?

Green	At least 80% of our observations were positive.
Amber	At least 60% of our observations were positive.
Red	Less than 60% of our observations were positive. This rating is also used if safeguarding issues are identified or hazards which have the likelihood of causing harm.

Physical Description of the Ward

Rowans is a five-bedded female Psychiatric Intensive Care Unit (PICU) located at St Michael's Hospital.

Each single bedroom has a washbasin located within it. There is also a communal bathroom with toilet and a separate toilet which are located off the main corridor.

Patients have access to a dining room, activity room, conservatory and a walled garden on the ward.

Area of Observation	Rating (RAG)	Evidence
Atmosphere	Green	Calm, quiet atmosphere on the ward. No unpleasant smells. No concerns were observed.
Cleanliness	Green	All areas observed displayed a good level of cleanliness.
Decoration	Red	The communal toilet required refurbishment. In the activity room, we observed marked walls and patches of different coloured paint. In the dining room two areas of the wall had been damaged and plaster was missing.
Facilities	Green	All facilities we observed were in good condition and working order.
Fixtures and Fittings	Red	The sink located within the bedroom was discoloured and in need of replacement. This was also our observation in the communal bathroom and toilet. In the communal bathroom, the bath was discoloured and the tap unit had a visible crack in it. The mirror was also cracked however this was a safety mirror so no risk to patients was present. The communal toilet was also stained and in need of replacement.
Flooring	Green	The internal flooring was in good condition and no concerns were observed. In the walled garden, several paving slabs were raised which could be a trip hazard for patients.
Furnishings	Green	In the activity room, all the six chairs have visible dents in them. In the dining room the dresser was observed to have a chip missing from the unit.
Lighting	Green	No concerns were observed with the provision of lighting or the condition of the lighting units.
Privacy and Dignity	Green	We did not observe any concerns with regards to patient privacy and dignity.
Signage	Green	All signage was clear and easy to read.
Storage	Green	We did not observe any inappropriate storage on the ward. All storage areas were locked and inaccessible to patients.

St Michael's Hospital - Willowvale Ward

Date of Visit: 14th November 2016

How do we rate our observations?

Green	At least 80% of our observations were positive.
Amber	At least 60% of our observations were positive.
Red	Less than 60% of our observations were positive. This rating is also used if safeguarding issues are identified or hazards which have the likelihood of causing harm.

Physical Description of the Ward

Willowvale is a 16-bedded female treatment ward located on the first floor of St Michael's Hospital.

Each single room has a washbasin located within it. There are two communal bathrooms and a shower room located on the ward.

There are several communal rooms located on Willowvale including;

- A dining room
- 1 TV room
- 1 Family Room
- 1 Activity Room

Patients have access to the outdoor space which is shared with Larches ward. There is no direct access from the ward to the outside space.

Area of Observation	Rating (RAG)	Evidence
Atmosphere	Green	Calm, quiet atmosphere on the ward. An unpleasant stale odour was present in the TV room.
Cleanliness	Green	In the dining room a skirting board was observed to be dirty. In the shower room, it was noted that the shower tray had grime and mould present. The skirting board was also observed to be dirty in the shower room.
Decoration	Green	The ceiling outside the main bathroom had a water stain present.
Facilities	Green	All facilities we observed were in good condition and working order.
Fixtures and Fittings	Green	All fixtures and fittings were observed in a good working order.
Flooring	Green	The internal flooring was in good condition. We observed a water spillage in the communal corridor. This was immediately cleaned when staff were notified.
Furnishings	Green	All furnishings were observed to be clean and in good condition.
Lighting	Green	No concerns were observed with the provision of lighting or the condition of the lighting units.
Privacy and Dignity	Green	We noted that the communal bathrooms did not provide a sanitary bin for disposal of female sanitary items. It was not clear what the process was for patients in need of this facility.
Signage	Green	All signage was clear and easy to read.
Storage	Green	We did not observe any inappropriate storage on the ward. All storage areas were locked and inaccessible to patients.

Manor Site, Nuneaton - Pembleton Ward

Date of Visit: 16th November 2016

How do we rate our observations?

Green	At least 80% of our observations were positive.
Amber	At least 60% of our observations were positive.
Red	Less than 60% of our observations were positive. This rating is also used if safeguarding issues are identified or hazards which have the likelihood of causing harm.

Physical Description of the Ward

Pembleton is a 12-bedded female treatment ward for patients on the dementia pathway located on the ground floor at Manor Site, Nuneaton. Each single room has a washbasin located within it. There is also a communal bathroom, two shower rooms and a separate toilet located on the ward.

There are several communal rooms located on Pembleton including;

- 2 Dining Rooms
- 1 Main Lounge
- 1 Activity/Lounge Room

Patients have direct access to the outdoor space which is shared with Stanley ward.

Area of Observation	Rating (RAG)	Evidence
Atmosphere	Green	Calm, quiet atmosphere on the ward. No unpleasant smells. No concerns were observed.
Cleanliness	Red	We observed many concerns around cleanliness throughout the communal bathroom, toilet and shower rooms. Black mould was visible around the shower tray in shower room 8 and in shower room D4/1 this was visible around the sink area. In the communal bathroom, water remained in the bath, along with a wipe and the window area was observed to be dusty. In the communal toilet, the piping to the toilet cistern had a build-up of grime on it and the door frame was dusty. We saw visible cobwebs and spiders throughout the activity room, dining room and in the communal corridors. Dead flies were also observed in many of the light fittings within the dining room opposite the main lounge and shower room D4/1. In the communal corridor, the loft hatch was marked with black finger marks. The curtain on the main door within the activity room was stained.
Decoration	Amber	The ceiling outside the main bathroom had a water stain present. We observed damage to the walls from the chairs in the main lounge. In the dining room opposite the main lounge the skirting board had visible damage and the wall by the serving hatch was also damaged. In the communal corridor by bedroom 21 some damage was observed to the walls.
Facilities	Green	All facilities we observed were in good condition and working order.
Fixtures and Fittings	Red	We observed that the wooden boxing around the sink in the communal toilet needed repair. In both the communal toilet and shower room 8, the wooden boxing around the toilets was loose and could be moved. We also observed that a number of door frames around the corridors had visible dents and paint missing from them. All other fixtures and fittings were observed in a good working order.
Flooring	Green	The internal flooring was in good condition with no slip or trip hazards observed.
Furnishings	Green	We observed that a table in the main lounge had a damaged surface and one chair within the activity room was stained.

Lighting	Green	Overall the provision of lighting or the condition of the lighting units were in good working order. In the communal bathroom it was observed that the light was not working.
Privacy and Dignity	Green	We observed a member of staff not knocking on a patient's door before entering the room.
Signage	Green	All signage was clear and easy to read.
Storage	Green	We did not observe any inappropriate storage on the ward. All storage areas were locked and inaccessible to patients.
Other	Amber	We observed a raised lip on the external door to access the communal garden from the activity room. It was also noted that no grabrails were present in the corridors, which was a concern given the nature of the patient's condition.

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How do we rate our observations?

Green	At least 80% of our observations were positive.
Amber	At least 60% of our observations were positive.
Red	Less than 60% of our observations were positive. This rating is also used if safeguarding issues are identified or hazards which have the likelihood of causing harm.

Physical Description of the Ward

Stanley is a 12-bedded male treatment ward for patients on the dementia pathway located on the ground floor at Manor Site, Nuneaton.

Each single room has a washbasin located within it. There is also a communal bathroom, two shower rooms and 2 separate toilets located on the ward.

There are several communal rooms located on Stanley including;

- 2 Dining Rooms
- 2 Lounges
- 1 Activity Room

Patients have direct access to the outdoor space which is shared with Pembleton ward.

We were informed by the Ward Manager that new doors were being fitted on the ward during December 2016 and a new floor was being laid in January 2017.

Area of Observation	Rating (RAG)	Evidence
Atmosphere	Green	Calm, quiet atmosphere on the ward. In the patient's room we visited a strong smell of disinfectant was present.
Cleanliness	Amber	In both shower rooms, black mould was visible around the shower tray and by the sink. In the communal bathroom, mould was visible around the toilet base. We observed dead flies within the light fittings in dining room D8/1.
Decoration	Green	No concerns were observed with the decoration throughout the ward.
Facilities	Green	All facilities we observed were in good condition and working order.
Fixtures and Fittings	Amber	It was observed that throughout the ward the curtains and net curtains were in poor condition and in need of replacement. In the dining room D8/1 the net curtains were hanging off the rail and curtains were missing. We also observed curtains missing in the lounge opposite the dining room. There was no shower curtain in the shower room.
Flooring	Green	The internal flooring had some damage by the activity room and the nurse's office. This damage had been taped to prevent a trip hazard. We were informed by the Ward Manager that the flooring was due to be replaced in January 2017.
Furnishings	Green	All furnishings were observed to be clean and in good condition.
Lighting	Amber	It was observed that the lights in the communal toilets were dim which may influence patient's ability to use the facilities. A light in the communal bathroom was not working at the time of our visit.
Privacy and Dignity	Green	We did not observe any concerns with regards to patient privacy and dignity.
Signage	Green	All signage was clear and easy to read.
Storage	Green	We observed that storage boxes were in use in the communal toilet. We also noted that clean towels were stored within the shower room.
Other	Amber	There are no staff toilets available on Stanley Ward. Staff are required to use the communal toilets which the residents also use.

Recommendations following Inpatient Ward Visits

Atmosphere

Healthwatch Warwickshire have no recommendations for this area.

Cleanliness

1. Hazelwood Ward, St Michael's Hospital

- 1.1 The facilities team review the cleaning schedule and number of cleaning hours provided for Hazelwood Ward.
- 1.2 A deep clean of the communal bathrooms and shower rooms is completed as a matter of urgency.
- 1.3 That the cookers provided in the communal kitchens undergo a deep clean.
- 1.4 The light fittings within the communal lounge are cleaned to remove the dead flies.

2. Pembleton Ward, Manor Site

- 2.1 A deep clean is completed to remove the black mould observed in the communal toilets and shower/bathrooms.
- 2.2 The facilities team review the cleaning schedule on Pembleton Ward to ensure that high level areas such as ceilings, door frames and light fittings are cleaned on a regular basis.

3. Stanley Ward, Manor Site

- 3.1 A deep clean is completed to remove the black mould observed in the communal shower and bathrooms.

Decoration

1. Ferndale Ward, St Michael's Hospital

- 1.1 The damage observed to the communal bathrooms is repaired.

2. Rowans Ward, St Michael's Hospital

- 2.1 That refurbishment of the communal toilet is carried out.

3. Pembleton Ward, Manor Site

- 3.1 That the damage identified in the lounge, dining room and communal corridor is repaired.

Facilities

Healthwatch Warwickshire have no recommendations for this area.

Fixtures and Fittings

1. Ferndale Ward, St Michael's Hospital

- 1.1 The issues identified within the communal bathrooms are addressed.
- 1.2 That the ceiling tiles throughout the communal corridors are repaired or replaced.
- 1.3 The raised paving blocks within the communal garden are either removed or re-laid.

2. Rowans Ward, St Michael's Hospital

- 2.1 That the communal toilet and bathroom are refurbished to address the concerns observed.

3. Pembleton Ward, Manor Site

- 3.1. The wooden boxing in the communal toilets and bathroom/shower rooms is repaired or replaced.

4. Stanley Ward, Manor Site

- 4.1 Curtains and nets provided throughout the ward are replaced.

Flooring

1. Hazelwood Ward, St Michael's Hospital

- 1.1 A deep clean of the flooring in the bathroom and shower rooms is completed to remove the staining. If this is not possible then the flooring to be replaced.

2. Rowans Ward, St Michael's Hospital

- 2.1 The raised paving slabs in the communal garden to be re-laid to remove the trip hazard.

Furnishings

1. Hazelwood Ward, St Michael's Hospital

- 1.1 The chairs and tables identified as damaged are repaired or replaced.

2. Rowans Ward, St Michael's Hospital

- 2.1 An assessment is completed to decide if the damage to the chairs within the activity room pose any risk to patients. If so, then the chairs to be replaced.

Lighting

1. Larches Ward, St Michael's Hospital

- 1.1 The lights in the treatment room and communal corridor by the disabled bathroom to be repaired.

2. Pembleton Ward, Manor Site

- 2.1 The light in the communal bathroom to be repaired.

3. Stanley Ward, Manor Site

- 3.1 An assessment to take place to ascertain if the lighting provided in the communal toilets is sufficient.

Privacy and Dignity

1. Willowvale Ward, St Michael's Hospital

- 1.1 That the provision of sanitary bins in the communal toilets and bathrooms is reassessed. Alternatively, a solution is provided which does not impede on patient dignity.

2. Pembleton Ward, Manor Site

- 2.1 Issue a reminder to all staff to knock on a patient's door before entering their room.

Signage

Healthwatch Warwickshire have no recommendations for this area.

Storage

1. Stanley Ward, Manor Site

- 1.1 That the lack of storage facilities on the ward for sundries is addressed.

Other

1. Larches Ward, St Michael's Hospital

- 1.1 That the treatment room requires a declutter to improve the environment for service users.
- 1.2 Staff and patients are reminded about leaving items unattended which could be a ligature risk.
- 1.3 That the fire extinguisher by the Nurses office is secured to the wall.

2. Pembleton Ward, Manor Site

- 2.1 That Coventry and Warwickshire Partnership Trust assess if there is a need for grab rails throughout the communal corridors.

3. Stanley Ward, Manor Site

- 3.1 That the lack of provision for suitable toilet facilities for staff is addressed as a matter of urgency.

Outpatient Service Visits

Stratford Healthcare - 30th November 2016

Number of Respondents: 20

Question One

How would you rate the Outpatient Service on the referral system? E.g. waiting time for appointment, choices of dates etc.

Excellent	Good	Average	Poor
10	7	0	2

Additional Comments

1 person did not respond to this question.

“Waiting time very short.”

“Ridiculous waiting time for first appointment, but good now.”

“Very quickly.”

“Got me in straight away, no hanging around”.

“Hard to get appointments, clinic every two weeks”.

“Very good”.

“Took nine months for initial appointment”.

“Within a week”.

“Been amazing. Appointments sent monthly to see same person”.

Question Two

How would you rate the Outpatient Service on the ease of access? E.g. parking, public transport links

Excellent	Good	Average	Poor
11	6	3	0

Additional Comments

“Stratford traffic is difficult”.
“Building work is causing delays in Stratford”.
“Problems on road, so late”.
“Live locally, convenient”.
“Parking is expensive”.
“Close public transport links”.

Question Three

How would you rate the Outpatient Service on the punctuality of appointments?

Excellent	Good	Average	Poor
11	7	2	0

Additional Comments

“Only five minutes late - a miracle!”
“Good”.
“Sometimes have to wait, but usually good”.
“Always on time”.
“Tend to run on time”.
“Two previous appointments on time”.
“10 minutes wait, maybe”.

Question Four I feel that I have enough time at my appointment to discuss my needs				
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
8	10	2	0	0

Additional Comments
<p>“One hour goes by so quick. Always finish when in the middle of something”. “Adequate”. “Excellent”.</p>

Question Five I feel that I am listened to during my appointment				
Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
12	7	1	0	0

Additional Comments
<p>“One hour goes by so quick. Always finish when in the middle of something”. “Adequate”. “Excellent”.</p>

Question Six**I am confident that I understand the information discussed at my appointment**

Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
13	6	1	0	0

Additional Comments

“Very useful”.

Question Seven**I feel that I am involved with decisions about my care**

Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
11	7	2	0	0

Additional Comments

“From the person, I see, yes. From the overall pressure on the system, not so sure”.

Other Comments Received

“I come as part of a group event, so not really able to properly answer question. I feel listened to but obviously share the slot/time with others”.

“One hour is too short. Just get into something and the session ends”.

“Service is very good”.

“I’ve learned so much - wish I’d come years ago. Very enlightening”.

“Took a long time to diagnose - about six months to have an assessment from referral by GP. Had three appointments cancelled”.

“These guys are simply brilliant at what they do. Prepared, insightful, thoughtful, empathetic, skilled and clearly at the top of their game in all ways”.

“It just takes an age to get referred initially due to the demand”.

“Perinatal psychiatry team incredibly supportive, amazing. Taken things at my pace - been great”.

Manor Court Avenue - 14th December 2016

Number of Respondents: 7

Question One

How would you rate the Outpatient Service on the referral system? E.g. waiting time for appointment, choices of dates etc.

Excellent	Good	Average	Poor
5	2	0	0

Additional Comments

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Question Two
 How would you rate the Outpatient Service on the ease of access? E.g. parking, public transport links

Excellent	Good	Average	Poor
5	0	1	1

Additional Comments

Question Three
 How would you rate the Outpatient Service on the punctuality of appointments?

Excellent	Good	Average	Poor
3	3	1	0

Additional Comments

Question Four

I feel that I have enough time at my appointment to discuss my needs

Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
5	2	0	0	0

Additional Comments

Question Five

I feel that I am listened to during my appointment

Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
5	1	0	1	0

Additional Comments

Question Six

I am confident that I understand the information discussed at my appointment

Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
4	2	1	0	0

Question Seven

I feel that I am involved with decisions about my care

Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
4	2	0	1	0

Other Comments Received

“I don’t think it could be any better than it is”.

Recommendations following Outpatient Service Visits

Healthwatch Warwickshire do not have any recommendations on how the Outpatient Service could be improved based on the feedback of service users.

Have Your Say Day

On 15th November 2016 Healthwatch Warwickshire held a 'Have Your Say Day' at St Michael's Hospital. Healthwatch staff and volunteers were in attendance from 9.30am until 9.00pm based in the main reception area within the hospital. The team also visited the inpatient wards in the afternoon to speak to patients.

Healthwatch Warwickshire wanted to speak with service users, relatives, carers and staff about their experiences of St Michael's Hospital. We also invited people to contact Healthwatch Warwickshire directly about their experiences.

We received 20 accounts from people of their experiences of St Michael's Hospital. These accounts came from current and previous patients, relatives, carers and staff members. The themes from the 20 accounts fall broadly into the following six areas;

- **Activities**
- **Carer and Relative Involvement and Expectations**
- **Physical Health**
- **Facilities**
- **Staff Feedback**
- **Staffing**

Overall, the feedback from the participants was very positive about the care that they, or a relative, had received at St Michael's. We received comments such as "the care is first class, staff are angels", "Staff were exemplary" and "really good experience".

Activities

One of the people whom we spoke with expressed their concerns that there were not enough activities for patients to do outside of the ward. Many patients are allowed to leave the ward and it was observed by Healthwatch Warwickshire during our time spent at St Michael's that patients were often congregated around the main entrance or sat in the foyer area. The person we spoke to felt that a TV located in this area would be beneficial. The 'Coffee and Chatz' cafe was well utilised but it was highlighted to us that this facility is run by volunteers and therefore opening times are limited and often stock is low.

This was also raised by another person who said that they would like to see “more volunteers for the café” and they thought that volunteer befrienders would be a good addition to the hospital.

Another person with whom we spoke said that patients are “aimless and wandering” and it appeared to them that patients “lack a sense of purpose and direction”.

Recommendations

1. That Coventry and Warwickshire Partnership Trust consider the options for providing additional activities outside of the ward in the main foyer area. We would recommend that the trust speak with their current patient group to ascertain what activities the patients would like to have access to.
2. That the opening hours of the ‘Coffee and Chatz’ café are reviewed to meet the requirements of the service users.

Carer and Relative Involvement and Expectations

It was apparent from our discussions with relatives and carers that there was a level of expectation about how much they could be involved and informed about the care, treatment and progress of their relative. Unfortunately, this is not always possible due to patient confidentiality; however, it was not clear if this had been explained to the relatives and carers.

One person that we spoke to expressed concern that their relative’s mental illness was not diagnosed at the first opportunity and the response from Coventry and Warwickshire Partnership Trust was inadequate. The person was “very disgusted and appalled at their attitude”. It was not clear if the constraints of the Mental Health Act 1983 had been explained to the relative and why Coventry and Warwickshire Partnership Trust were unable to intervene further in their relative’s condition at the time.

Another relative raised concern about the pressure on the system and the knock on effect this was having on service users and their families. The relative described how a voluntary admission to St Michael’s was cancelled twice due to a bed shortage which left the patient confused about their situation and had an impact on the patient’s family.

We were also contacted by a relative who shared with Healthwatch Warwickshire their complaint they had made to the trust. One of their main concerns were that they felt that the patient's wishes were ignored and that they also felt that their voice was not listened to. The trust did respond to this complaint and the following recommendation was made;

“Staff to be reminded via a learning alert that listening to carers and relative's concerns should be routine in all areas of the organisation, and value should be given to the comments and concerns raised as an important part of the patients care pathway.”

Recommendations

1. That Coventry and Warwickshire Partnership Trust produce a Relative and Carer Information Leaflet to advise about rights when a relative is admitted as an inpatient.
2. The learning alert detailed above is re-issued to all areas of the organisation to reiterate the importance of listening to carers and relative's comments and concerns as part of the patients care pathway.

Physical Health

We had several participants raise concerns with us about the management of their physical health conditions whilst an inpatient at St Michael's Hospital.

We were informed about delays in accessing medication or referrals to specialists for their physical health conditions in addition to a lack of understanding about physical health conditions.

One person told us about their experience of not being listened to by a member of staff when they required assistance to manage their long-term health condition. The person told the member of staff what action was required but they were not believed and ended up requiring medical assistance from A&E.

We also received feedback from members of staff that they felt they would like to be able to assist with the physical health conditions and not just mental health.

Recommendations

1. That Coventry and Warwickshire Partnership Trust consider the option of identifying staff to become ‘experts’ in long term health conditions, such as diabetes, COPD, high blood pressure and allergies, to support patients to manage these conditions whilst they are inpatients at St Michael’s hospital.
2. That Coventry and Warwickshire Partnership Trust invite organisations into St Michael’s to provide information on physical health conditions to its patients and staff. For example, Diabetes UK, local pharmacy health checks and Allergy UK.

Facilities

We received several suggestions from patients, their relatives and carers and staff on how the facilities at St Michael’s Hospital could be improved.

One patient told us that they felt that the communal bathrooms on the ward could be improved and another told us that the vending machines in the main foyer were “expensive and unreliable”.

The communal toilet in the foyer area was highlighted to us as a concern by some of the participants. It is a unisex toilet and the patients do not always lock the door when using the facility. This could impact on the privacy and dignity of the service user. We also observed during our visit that the toilet was being used by smokers and needed refurbishment.

Another patient told us that they were unable to control the temperature of the heating in their own room, which left them feeling uncomfortable.

One patient did praise the facilities at St Michael’s, saying they were “very good”.

Recommendations

1. That Coventry and Warwickshire Partnership Trust consider the option of opening the disabled toilet in the foyer area of St Michael’s Hospital so that a male and female toilet is available.

2. That the communal toilet located in the foyer area is refurbished and fitted with appropriate smoke detectors to prevent misuse.

Staff Feedback

We spoke to five members of staff during the Have Your Say Day at St Michael's Hospital.

A common theme which arose was the NHS No Smoking Policy and the impact that this has caused on patients and staff. One member of staff told us that "escorting patients to smoke puts a massive strain on resources, the policy has caused more outbursts from patients". Another member of staff said that "the smoking ban has caused lots of issues, there has been two significant fires as a consequence".

We were informed that the staff turnover at St Michael's was high and that there were delays in recruiting for senior positions on the ward which placed pressure on existing staff to function fully. Several of the staff we spoke to informed us that they felt there were not enough Nurses on their wards. The reason for this was suggested to be because the e-rostering system is completed by non-clinicians who do not understand the clinical needs of a ward.

A member of staff told us that they felt there was a lack of communication from management and a visible presence from senior managers is needed. Another member of staff said that there is an uncertainty about the future of St Michael's amongst the staff caused by a lack of communication and consultation about moving services to the Caludon Centre.

The staff we spoke to were very positive about their colleagues and their work environment. One member of staff said "There is a good ethos, it's a nice place to work, it is a good staff team". Another member of staff said "It is a happy environment and good colleagues, we do the best with what we have".

Recommendations

1. That Coventry and Warwickshire Partnership Trust conduct a staff satisfaction survey to understand the concerns of staff members and work with staff to address these concerns.

Staffing

Many of the participants told us about their experiences of staff at St Michael's Hospital.

One relative told us "I have lots of praise for staff, I appreciate their flexible approach".

Another patient said "the staff are nice and will help you, but I feel most staff are too busy to talk to you".

Staff being too busy or unable to speak with patients was a common concern that was raised. One patient felt that "staff don't seem to want to help. I feel unable to talk and the ward rounds feel rushed". Another patient said that they felt "other patients receive more care". A further patient told us that they felt "not spoken to and left alone by the nurses".

One participant described the staff as "angels" and the care as "first class".

Recommendations

1. That Coventry and Warwickshire Partnership Trust work with the Patient and Carer Involvement Officers to champion the 'listening clinics' to all patients and their carers as a method to effectively resolve any concerns which they may have.

Admission and Discharge Process

On 23rd November 2016 members of staff and volunteer Authorised Representatives from Healthwatch Warwickshire met with members of staff from Coventry and Warwickshire Partnership Trust to discuss the current admission and discharge process.

Healthwatch Warwickshire were interested in receiving a 'walkthrough' of the process when a patient is subject to;

- Voluntary Admission
- Admission under Section
- Discharge from Voluntary Admission
- Discharge from Section

The purpose of the walkthrough was for Healthwatch Warwickshire to understand the process so that we could identify any gaps in the process from a service user or carer point of view and make recommendations on how this could be improved.

The Healthwatch Warwickshire team found the meeting very informative and learnt several things about the admission and discharge process including;

- Every patient and relative/carer will receive a patient information booklet on admission.
- Details of a patient's condition, treatment and progress cannot be shared with relatives or carers without the permission of the patient.
- On admission, the patient will be given a named nurse. They will be the first point of contact for any questions.
- Rights to access an Independent Mental Health Advocate will be explained at the time of admission and then on a daily basis to the patient.
- A daily orientation is provided to the patient.
- Each week the patient will have a multidisciplinary team meeting with their consultant and care coordinator to discuss their progress and treatment.
- A daily 15 minute one to one will be held with the named nurse. This will usually be informal.

It was agreed by the people in attendance at this meeting that it would be beneficial for Coventry and Warwickshire Partnership Trust and Healthwatch Warwickshire to work together to ensure that the admission and discharge process is service user friendly. This partnership work is detailed in our recommendations below.

Recommendations

1. That Coventry and Warwickshire Partnership Trust produce a user-friendly pathway/flow chart to show the various stages of the admission and discharge process from a service user perspective. Healthwatch Warwickshire will work with the Coventry and Warwickshire Partnership Trust to review the pathway and ensure that it is user friendly.
2. That Coventry and Warwickshire Partnership Trust share the current Patient Information Packs that are issued on admission with Healthwatch Warwickshire. Healthwatch Warwickshire will convene a group of staff and volunteer Authorised Representatives to review the packs for missing or incomplete information and user friendliness and make recommendations on how these can be improved.

Next Steps

Healthwatch Warwickshire met with Coventry and Warwickshire Partnership Trust on 27th January 2017 to present our initial findings and recommendations.

Coventry and Warwickshire Partnership Trust have agreed to produce an action plan in conjunction with Healthwatch Warwickshire to address the recommendations made.

Coventry and Warwickshire Partnership Trust and Healthwatch Warwickshire will meet on a regular basis to review progress.

Healthwatch Warwickshire would like to build on the success of this piece of work and work closely with Coventry and Warwickshire Partnership Trust in the future. Healthwatch Warwickshire would like to identify further work which could take place around community based services where the service user voice most needs to be heard.













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Appendices





















- a) Outpatient service questionnaire
- b) 'Have Your Say Day' prompt questions

CWPT Outpatient Services

How would you rate the Outpatient Service on the following areas?

		Excellent	Good	Average	Poor	Comments
1	Referral system? E.g. waiting time for appointment, choice of dates etc.					
2	Ease of access? E.G. Parking, Public Transport Links					
3	Punctuality of appointments?					

How much do you agree/disagree with the following statements?

		Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree	Comments
4	I feel that I have enough time at my appointment to discuss my needs						
5	I feel that I am listened to during my appointment						
6	I am confident that I understand the information discussed at my appointment						
7	I feel that I am involved with decisions about my care						

Appendix b

St Michael's 'Have Your Say'

Prompt Questions

- Tell me about your experiences of using/working at/visiting St Michael's hospital
- Was it what you expected?
- Were you told what to expect? What information did you receive?
- What was the admission process like? How could it have been better?
- What was the communication like? Did they explain things in a way you could understand? Were you able to ask questions?
- Did you feel respected?
- Were you informed of points of contact? (e.g. named person, contact details, role)
- Did you feel involved in your own care/care of relative?
- What was good about your experience of St Michael's?
- What did you find beneficial/helpful?
- What could have been improved?
- What recommendations can you make to improve the service at St Michael's?