

**Powys teaching Health Board  
Dignified Care: Action Plan**

This Improvement Plan sets out the actions to be taken to improve the care provided to Older People in Hospitals. The action plan has been developed in response to the Older Peoples Commissioner Report: Dignified Care? The plan will be monitored by the Board of Directors and through the Improving Patient Involvement and Experience Committee reporting to the Boards Quality & Safety Committee.

Ref.	Action	Lead	Timescale	Progress
<b>Recommendation 1: Stronger ward leadership is needed to foster a culture of dignity and respect</b>				
1	Commitment to continue the development of nursing leadership and management within the organisation, as demonstrated through the Nurse Directors personal objectives.	Nurse Director	March 2012	
2	Complete the appointment of the dementia care nurses; ensuring clarity of role in support of hospital wards within Powys.	Director of Planning	Dec 2011	
3	Complete the review of ward staffing including key support staff such as ward clerks etc. Implement and then evaluate agreed changes.	Nurse Director	Oct 2011	
4	Develop a system to ensure that the ward sister/charge nurse is actively involved in every recruitment process to their ward.	Nurse Director	Sept 2011	
5	Review the monitoring arrangements that ensure ward sisters/charge nurses are supported to achieve their agreed personal development plan.	Nurse Director	Sept 2011	
6	Improve, where necessary, each wards system for achieving 100% compliance with appraisal/review, ensuring a clear plan exists and that allocated	Nurse Director with Dir of Workforce/OD	Oct 2011	

Ref.	Action	Lead	Timescale	Progress
	time to complete the reviews is set aside.			
<b>Recommendation 2: Better knowledge of the needs of older people with dementia is needed, together with improved communication, training, support and standards of care</b>				
1	Complete the appointment of the dementia care nurses; ensuring clarity of role in support of hospital wards within Powys.	Director of Planning	Dec 2011	
2	The Dementia Care Specialist Nurses will, as a priority, develop core competencies for staff working with patients with dementia and ensure that appropriate training and development opportunities exist as a result.	Director of Planning	Feb 2012	
3	In implementing the Carers Measure, ensure that carers looking after those with dementia are targeted for improved involvement in care and decisions, information and support.	Nurse Director	March 2012	
4	The programme for improvements in environments specific to the needs of those with dementia will continue to be rolled out throughout 2011/12.	Nurse Director	March 2012	
5	The learning from the 1000 Lives Plus Programme pilot site (Brecon Hospital) will be gathered and will inform the roll out of the programme to all other sites during 2011/12 and into 2012/13.	Medical Director	Dec 2011	
6	The adaptation of the audit tool on Dementia Care in Hospitals will be completed and used to understand the baseline position in each community hospital in Powys.	Medical Director	Dec 2011	

Ref.	Action	Lead	Timescale	Progress
<b>Recommendation 3: Lack of timely response to continence needs was widely reported and is unacceptable.</b>				
1	<i>A Care for Continence Programme will be launched that clearly articulates the commitment of the tHB to a positive proactive approach to improving patient outcomes and enhancing patient experience, with a zero-tolerance approach to poor practice.</i>	Nurse Director	Nov 2011	
2	The audit results in relation to continence care will be reported widely and the development and implementation of an action plan will guide the further improvement to be made.	Nurse Director	Oct 2011	
3	The Transforming Care Programme will continue to be rolled out across the organisation, including essentially the skin and continence care bundles; and intentional rounding.	Nurse Director	March 2012	
4	As part of its capital programmes, the tHB will ensure that opportunities to improve the environment of care, specifically in relation to en-suite facilities, are taken.	Director of Planning	July 2011 and annually thereafter	
5	A more detailed plan will be developed and implemented that seeks the views of patients in relation to the continence care they receive.	Nurse Director	Nov 2011	
<b>Recommendation 4: The sharing of patients' personal information in the hearing of others should cease wherever possible.</b>				
Ref.	Action	Lead	Timescale	Progress
1	As part of its capital programmes, the tHB will ensure that opportunities to improve the environment of care, specifically in	Director of Planning	July 2011 and annually thereafter	

Ref.	Action	Lead	Timescale	Progress
	relation to single rooms, are taken.			
2	The organisation will identify a quiet room on each ward designated for private discussion/conversations with patients and relatives/carers.	Nurse Director	Sept 2011	
3	<i>The tHB will set its expectation that all conversations involving personal information will be carried out in private 'as the norm'; and arrangements such as observations of care and feedback from patients, relatives and carers used to report compliance against this standard to the organisations Information Governance Committee.</i>	Medical Director	Nov 2011	
4	As part of its governance arrangements, the Board via its Information Governance Committee will be presented with a status report on the issue of privacy of information at ward level; and a resultant action plan for improvement will be implemented.	Nurse Director	Oct 2011	
<b>Recommendation 5: Too many older people are still not being discharged in an effective and timely manner and this needs urgent attention</b>				
Ref.	Action	Lead	Timescale	Progress
1	Evaluate the new services provided, e.g. PURCH, extended District Nursing, to understand their impact on patient experience of discharge.	Nurse Director	Oct 2011	
2	Complete the roll out of our reablement services across Powys.	Director of Therapies with Head of Adult Social Services	Dec 2011	

<b>Ref.</b>	<b>Action</b>	<b>Lead</b>	<b>Timescale</b>	<b>Progress</b>
3	Consider the efficacy of having named social workers attached to ward teams, with potential for being based within the hospitals.	Nurse Director with Head of Adult Social Services	Nov 2011	
4	Complete the review of documentation (Unified Assessment) and make improvements as a result.	Nurse Director with Head of Adult Social services	Oct 2011	
5	Review the current mechanisms for gaining feedback on the patient experience of discharge, including discharge from DGHs.	Nurse Director	March 2012	

**Recommendation 6: The appropriate use of volunteers in hospitals needs further development, learning from successful initiatives.**

<b>Ref.</b>	<b>Action</b>	<b>Lead</b>	<b>Timescale</b>	<b>Progress</b>
1	The Volunteer Bureau scheme in Brecon Hospital will be evaluated and considered for roll out to other Powys hospitals.	Nurse Director with Director of Planning	Oct 2011	
2	Mechanisms will be developed and implemented that enable the Patient Experience Committee to consider the use of volunteers in schemes where positive impact has been achieved	Nurse Director	Jan 2012	

**Recommendation 7: Staffing levels have to reflect the needs of older people both now and in the future**

<b>Ref.</b>	<b>Action</b>	<b>Lead</b>	<b>Timescale</b>	<b>Progress</b>
1	The organisation will complete the ward staffing project that is currently underway.	Nurse Director	Oct 2011	
2	The Transforming Care programme will continue to be rolled out across all ward areas in order that the early benefits that	Nurse Director	March 2012	

Ref.	Action	Lead	Timescale	Progress
	have been reaped can be afforded to patients in all areas.			
3	The organisation will agree and move toward a minimum 'supervisory' time for Ward Sisters/Charge Nurses.	Nurse Director	Oct 2011	
<b>Recommendation 8: Simple and responsive changes to the ward environment can make a big difference</b>				
Ref.	Action	Lead	Timescale	Progress
1	The tHB will develop as part of its core ways of working an approach to environmental improvements that include representatives of patients and staff to guide the design of the ward area.	Nurse Director with Director of Planning	Nov 2011	
2	<i>Specifically, the tHB will directly and proactively engage with people with dementia, patients, carers, and representative organisations to aid improvements in the environment of care specific to their needs, and will also extend this approach to those with sensory loss. The tHB will not restrict its improvements to wards but will extend its environmental improvements to all areas including outpatients.</i>	Nurse Director with Director of Planning	Dec 2011	
3	A programme of 'simple' improvement to ward environment, such as the coloured doors and special clocks will be rolled out across all hospitals within Powys to ensure consistency in approach; and that good practice and innovation is shared and becomes standard.	Nurse Director with Director of Planning	Nov 2011	

Ref.	Action	Lead	Timescale	Progress
<b>Recommendation 9: Effective communication can raise patient expectation and involvement and can improve their hospital experience</b>				
1	Complete the review of information sharing processes (including the permissions form) and implement the changes, supported by an awareness raising programme.	Medical Director	Sept 2011	
2	<i>The tHB will review its advocacy arrangements to ensure that it meets the patients needs and that staff, patients and carers are aware of its availability.</i>	Nurse Director with Planning Director	Oct 2011	
3	The tHB will seek to identify ways in which greater emphasis on the UN Principles for Older People can be achieved. Furthermore, the standard against which the organisation measures its own performance will include the key principles.	Chief Executive with all Director	Nov 2011	
4	The tHB will implement the Carers Measure seeking to prioritise the areas of care planning, care delivery, support for self-care or carers, and the evaluation of services.	Nurse Director	March 2012 and into 2012/13	
5	<i>Within the Fundamentals of Care improvement plan the need to make improvements for patients with sensory loss had been identified and the tHB is committed to ensuring that these improvements are made consistently across the tHB area.</i>	Nurse Director	Nov 2011	
6	A formal mechanism for evaluating the involvement of patients and families/carers	Nurse Director	Nov 2011	

Ref.	Action	Lead	Timescale	Progress
	in the discharge process will be developed and implemented in association with carers groups and patient representatives.			
7	The implementation of specific training for multidisciplinary teams will take place throughout Powys, in line with the training and development programme developed by the NHS Continuing Healthcare National Programme.	Director of Workforce and OD	Dec 2011	
8	The tHB will revisit its core standards in relation to patient preferences of choice of name, language and communication method; and its ability to implement these standards consistently will be tested and as appropriate action taken for improvement.	Nurse Director	Oct 2011	
<b>Recommendation 10: The experience of older patients, their families and carers should be captured more effectively and used to drive improvements in care.</b>				
Ref.	Action	Lead	Timescale	Progress
1	An evaluation of the Board Patient Safety/Experience item will be undertaken.	Nurse Director	Oct 2011	
2	The work programme and associated progress report of the Improving Patient Involvement and Experience Committee will be presented to the Board directly at least 6 monthly.	Nurse Director	Sept 2011 and 6 monthly thereafter	
3	Work will be undertaken to explore, determine and establish mechanisms for ensuring patient/public are aware of the changes being made to services as a result	Nurse Director	Jan 2012	



Ref.	Action	Lead	Timescale	Progress
	of their experiences and feedback.			
4	<i>Preparation and support for Board members will take place to enable them to fulfil their commitment to engage directly with patients, relatives and carers as part of their hospital visits/leadership walk rounds. Clear feedback mechanisms will enable issues raised to be dealt with in a timely manner.</i>	Chair of Quality & Safety Committee with Nurse Director and Medical Director	Oct 2011	
<b>Recommendation 11: Good practice should be better identified, evaluated and learnt from to bring about improvements in care.</b>				
1	Complete the review of learning mechanisms, develop and implement a revised approach to Learning in order that good practice is both shared and adopted.	Medical Director with Nurse Director and Director of Workforce and OD	Feb 2012	
2	Continue the roll out of the Transforming Care Programme as a vehicle for adopting positive change.	Nurse Director	March 2012	
3	Continue the growth of the Faculty for Quality Improvement, reporting of utilisation and the breath of participants.	Medical Director	March 2012	
4	Progress the 1000 Lives Plus Programme areas, ensuring that the results of these are communicated more widely with patients and the public.	Medical Director	March 2012	
<b>Recommendation 12: All those working with older people in hospitals in Wales should have appropriate levels of knowledge and skill.</b>				
1	The commitment of the organisation to ensure staff receive performance review	Director of Workforce and OD	March 2012	

Ref.	Action	Lead	Timescale	Progress
	and development plans will be delivered as part of the Corporate Plan to meet the needs of the population served.			
2	<i>A training and development programme specifically aimed at supporting staff from across the tHB (including hospital ward staff, staff who visit wards to provide care/services and staff who work with older people in other departments such as outpatients) care for older people and their needs will be developed and implemented. Whilst there will be specific focus on the care of people with dementia, other areas including continence, nutrition, the Rights of Older People, communication and involvement/engagement will form part of the education and training plan. A decision will be taken by professional heads (and equivalent for other staff groups) on the practical approach to achieving higher standards of knowledge/practice for improving outcomes and patient experience.</i>	Director of Workforce and OD with Director of Planning	Feb 2012	