

INDEPENDENT EXPERT REFERENCE GROUP -

# Dignity in Care Expert Reference Group

Table of Recommended Actions

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26/April/2011

## RECOMMENDED ACTIONS OF THE INDEPENDENT EXPERT REFERENCE GROUP:

in response to the Report of the Older People's Commissioner for Wales "Dignified Care? – the experiences of older people in hospitals in Wales" and the Patient's Association Report "The Lottery of Dignified Care"

### Table of Actions

#### Recommendation 1 - Stronger ward leadership is needed to foster a culture of dignity and respect

	Recommended Action	Responsible Body	Timescale
	Following on from Recommendation 31 of the <b>Free to Lead Free to Care</b> Report each Local Health Board should develop a ward sisters/charge nurses forum (with sub-groups for each major hospital) for peer support and information exchange. Chief Executives of LHBs should develop a mechanism (e.g. e-mail, report or face-to-face meeting) to communicate directly with this Forum to listen to concerns and experiences.	Local Health Boards	2012
	Ward sisters/charge nurses should have responsibility for the selection and appointment of ward staff	Local Health Boards	2013
	Providing dignified care to patients is an essential competency for health care support workers and health care professionals. This should be reflected in the NHS appraisal system. Appraisals should be annual. Ward sisters/charge nurses should have responsibility for the appraisals of ward staff	Welsh Assembly Government Local Health Boards	2012
	All Ward Sisters/Charge Nurses and all HCSW should have undertaken mandatory training in dignity the last two years or be required to take it. This training could be online (e.g. RCN learning zone module on dignity). Monitoring of uptake should be at Board level. This should encompass linguistic awareness.	Local Health Boards	2013

	Health care professionals should be reminded of their obligation to offer patients the opportunity to receive healthcare in the Welsh language and also to be mindful of other linguistic needs.	Local Health Boards	For immediate and ongoing action
	Investment in leadership programmes for healthcare staff must be maintained and include Health Care Support Workers and therapists.	Local Health Boards	For immediate and ongoing action

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**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>Recommended Action</b>	<b>Responsible Body</b>	<b>Timescale</b>
	Performance against the All Wales Dementia Plan must be managed through the Annual Quality Framework.	Welsh Assembly Government	2012
	A new model of care for Older People should be developed and rolled out across Wales. In this model the multi-disciplinary community team would act proactively to support the patient in their own home (with input for example from polypharmacy, therapy, district nursing etc) with support from a Consultant Geriatrician. As need increased, the individual patient might be managed on a 'virtual ward' basis. As need increased further, it might be necessary for the patient to attend a day hospital that had diagnostic facilities that would enable rapid accurate diagnoses to be performed without the need to admit as an inpatient. Where admission was required due to acute illness, this would be by referral from the geriatrician attached to the community network into a modern version of a geriatric ward that would have access to specialist opinion. In this ward, patients would be 'known' to the staff, who would have expertise in care of the elderly.	Welsh Assembly Government  Local Health Boards	2012 for development of new model  2014 for completion of roll-out
	The Health Foundation Training Programme is designed to support self-management by fundamentally transforming the interaction between patients and clinicians to partnership working to achieve the best possible health outcomes and quality of life. This Programme should be rolled out across the acute sector in Wales to all health professionals specialising in the care of Older People	Welsh Assembly Government	2014

**Recommendation 3 - Lack of timely response to continence needs was widely reported and is unacceptable**

	<b>Recommended Action</b>	<b>Responsible Body</b>	<b>Timescale</b>
	A Ministerial Letter is required setting a clear standard for the answering of buzzers where patients are requesting assistance with toileting.	Welsh Assembly Government	For immediate and ongoing action
	Local Health Boards should make it clear to all levels of staff that poor practice in this area should be challenged and make it clear to healthcare staff constructive and accessible ways of doing this.	Local Health Boards	For immediate and ongoing action
	A national policy on the use of continence pads in hospitals should be developed.	Welsh Assembly Government	2012
	Local Health Boards should regularly review continence management at Board level. The use of continence pads should be monitored.	Local Health Boards	For immediate and ongoing action
	Local Health Boards should review their provision of the following and demonstrate their consideration of <ul style="list-style-type: none"> <li>▪ the placing of buzzers for access</li> <li>▪ the use of 'rumble strip buzzers' (which get louder the longer they ring)</li> <li>▪ the purchasing female urinal products for ward use.</li> <li>▪ The ways in which ward staff and community staff can access continence advice</li> <li>▪ asking patient's choice of how they would like to be toileted.</li> <li>▪ Ensuring patients can ask for male or female assistance with toileting</li> <li>▪ Symbols instead of or as well as written signage</li> </ul>	Local Health Boards	2012

	Local Health Boards should make it clear to health care professionals and staff that toileting is a duty of care for all and not just nursing staff. If a healthcare professional is with a patient who requests toileting – it is that professional’s responsibility.	Local Health Boards	For immediate and ongoing action
	Each patient’s personalised assessment, and individualised care plan should consider management of continence. Healthcare staff need to be aware of this recommendation and not decide irrespectively to not wheel to toilet or rely on use of pads etc	Local Health Boards	2012
	Healthcare staff must assist other patients to leave the bay if one patient needs to use the commode in the bay behind curtains.	Local Health Boards	For immediate and ongoing action
	Ward Rounds should include consideration of continence management. This should be audited along the lines of hand hygiene audits.	Local Health Boards	For immediate and ongoing action
	Each clinical team to have a nominated continence lead during every shift	Local Health Boards	2012
	Training on continence, toileting patients and products should be available for healthcare staff	Local Health Boards	2012
	The Fundamentals of Care Audit should be developed to add questions to the ward sister charge nurse and the patient on their experience of continence management	Welsh Assembly Government	2012

**Recommendation 4 - The sharing of patients' personal information in the hearing of others should cease wherever possible**

	<b>Recommended Action</b>	<b>Responsible Body</b>	<b>Timescale</b>
	The design of new building should include discussion with health care professionals and consideration of the impact on privacy of the siting of nurses' stations etc.	Local Health Boards	For immediate and ongoing action
	Guidance should be developed on how to reform the traditional ward round to a system where the default is to take the patient in bed or chair to meet with the doctor in a private room. This should then be introduced by the Local Health Boards.	Welsh Assembly Government  Local Health Boards	2012 for development of new model  2014 for completion of roll-out
	Directors and other senior managers need to make sure that training in information governance is given greater prominence and importance, and that they are leading by example.	Local Health Boards	For immediate and ongoing action
	Every clinical team in clinical area should agree their own team rules for where and when discussions take place about patients and implement through poster / sign up on wall etc empowering staff, patients and relatives alike to say if they feel staff are breaching these agreed rules.	Local Health Boards	2013
	Patients arriving onto a ward should be given information on what they should expect in regards to their own personal information.	Local Health Boards	For immediate and ongoing action

**Recommendation 5 - Too many older people are still not being discharged in an effective and timely manner and this needs urgent attention**

	<b>Recommended Action</b>	<b>Responsible Body</b>	<b>Timescale</b>
	An All Wales approach to the adoption of the role of Specialist Nurse in Complex Care, with an All Wales standardised job description.	Welsh Assembly Government	2012
	A standard module on effective discharge planning in the pre registration nursing curriculum and a recognised All Wales educational qualification in the management of Complex Care, for example a post registration module in complex care	Welsh Assembly Government  Higher Education Institutions	2013
	LHBs to work with Local Authorities to plan the number of nursing and residential care places needed including provision for patients with dementia and to work with providers to ensure this provision exploring innovative models and ways of funding e.g. a residential or nursing care home for a temporary stay or commissioning a number of nursing or residential care placements on a long-term basis.	Local Health Boards Local Authorities	2013
	LHBs and LA's need to ensure that there is an identified social worker within all multidisciplinary teams	Local Health Boards Local Authorities	2012
	There should be mandatory training for all hospital nurses on the specific knowledge and skills for effective discharge planning.	Local Health Boards	2012



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

	<b>Recommended Action</b>	<b>Responsible Body</b>	<b>Timescale</b>
	The discharge plan needs to acknowledge the social elements of adjusting to life post-discharge. For example, that could mean ensuring that older people have access to community transport and befriending services so they are not left isolated or lonely. This is a challenge which can be met through working with the voluntary sector	Local Health Boards	For immediate and ongoing action
	<p>WAG to develop national guidance (working with partners such as WRVS) to outline the key principles of any expansion of ward-based volunteering (including the principle that volunteer schemes are supplementary to staff establishments, rather than replacing these) and LHBs to set out plans that identify how they intend to develop the use of volunteers, their role and how it will be managed.</p> <p>The national guidance should include consideration of:</p> <ul style="list-style-type: none"> <li>▪ The balance between helping staff and helping patients</li> <li>▪ Governance arrangements for volunteers and the boundaries around their role.</li> <li>▪ The required initial training and continuous development appropriate to their role.</li> </ul>	Welsh Assembly Government Local Health Boards	2012

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

	<b>Recommended Action</b>	<b>Responsible Body</b>	<b>Timescale</b>
	The Welsh Assembly Government should work with Local Health Boards to adopt a nationally consistent appropriate tool or tools to determine staffing levels, skill mix on wards in hospital settings.	Welsh Assembly Government Local Health Boards	2012
	Compliance with the staffing establishment figures resulting from the national skill mix model should be regularly reported by Directors of Nursing to Health Boards and the CNO	Welsh Assembly Government Local Health Boards	2012
	LHBs workforce plans submitted to NLIAH must demonstrate consideration of the needs of Older People	Welsh Assembly Government Local Health Boards	For immediate and ongoing action
	LHBs to apply active management of sickness absence such as that used by SALUS in Scotland	Local Health Boards	2012
	Consultant Nursing Posts in Dementia and Incontinence must be maintained and appointed to. Where such a post is approved but no appointment has been made training and education plans will be developed to support potential applicants. Similarly succession planning to replace individuals who move on from a post will be put into place.	Welsh Assembly Government Local Health Boards	For immediate and ongoing action

## Recommendation 8 - Simple and responsive changes to the ward environment can make a big difference

	Recommended Action	Responsible Body	Timescale
	National guidance on the design of wards (including access to private space for prayer or reflection and hearing loops) should be developed to guide new builds and refurbishments. (DR MS)	Welsh Assembly Government	2012
	Local Health Boards should involve patient groups and ward staff in all planning of changes to the ward environments, layout or set up etc.	Local Health Boards	For immediate and ongoing action
	Local Health Boards must make sure there is a prompt mechanism to respond to requests from ward leaders for low cost equipment such as signage, slippers, pans, pads, feeding aids or maintenance for buzzers or hearing loops as these actions have a high impact on quality of care.	Local Health Boards	For immediate and ongoing action
	Following on from Recommendation 11 of the <b>Free to Lead Free to Care</b> Report the storage of equipments, mattresses etc should be at a central and <i>easily accessible</i> location in the hospital and not on the ward itself	Local Health Boards	2012
	Each ward should have a Suggestions Box for use by staff, patients and relatives. These suggestions should be reviewed by the ward sister/charge nurse and fed up to the Nurse Director as appropriate.	Local Health Boards	2012

**Recommendation 9 - Effective communication can raise patient expectation and involvement and can improve their hospital experience**

	<b>Recommended Action</b>	<b>Responsible Body</b>	<b>Timescale</b>
	Board Members and Directors should ensure they regularly spend a day 'on the wards' to refresh their direct experience	Local Health Boards	For immediate and ongoing action
	Patients should have access to an advocate to communicate on their behalf.	Local Health Boards Community health Councils	2013
	Local Health Boards must make sure there is a prompt mechanism to respond to requests from ward leaders for communication aids such a picture charts, brail resources, large print size leaflets and interpreters.	Local Health Boards	2012
	A nurse should always be present on ward rounds to lead by example and improve effective communication.	Local Health Boards	2012
	The 'ten tips' (p 42) for patients provided in the "Lottery of Dignified Care" report is commended. A small working group including professionals, patient voluntary groups should be established to produce an advice leaflet for patients and relatives to empower them to ask about their care	Welsh Assembly Government	2012
	All ward staff to understand what information may be communicated to relatives and how to provide information and all wards to have member of staff who can provide such information available at all times	Local Health Boards	2012

**Recommendation 10 - The experience of older patients, their families and carers should be captured more effectively and used to drive improvements in care**

	<b>Recommended Action</b>	<b>Responsible Body</b>	<b>Timescale</b>
	An All-Wales Older People's Hospital Experience tool will be developed. This will focus on the team and include all occupational groups. It will ensure a minimum data set which facilitates sharing of best practice and learning	Welsh Assembly Government	2012
	Patient Experience will be reported to the Board. A framework for reporting stories will be developed so that appropriate levels of interrogation of the stories will result in learning which can be shared.	Local Health Boards	2012
	A virtual patient persona will be developed for use as a planning tool by those designing or reviewing services	Welsh Assembly Government	2012

**Recommendation 11 - Good practice should be better identified, evaluated and learnt from to bring about improvements in care**

	<b>Recommended Action</b>	<b>Responsible Body</b>	<b>Timescale</b>
	The results of the Fundamentals of Care Audit will be published and celebrated at both a Local Health Board level and also Welsh Assembly Government level.	Welsh Assembly Government Local Health Boards	2012

**Recommendation 12 - All those working with older people in hospitals in Wales should have appropriate levels of knowledge and skill**

	<b>Recommended Action</b>	<b>Responsible Body</b>	<b>Timescale</b>
	Every ward in which older people are cared for must have staff available with skills around dementia care and continence	Local Health Boards	2013
	LHBs should at Board level regularly monitor the uptake of mandatory training by healthcare staff including specific training in dignity, dementia and incontinence	Local Health Boards	2012

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