

25.02.2020

HWH-07

**Patient Experience  
at  
West Hertfordshire Hospitals  
NHS Trust**

**Enter and View Visit Report**

**St Albans City Hospital**

**05 December 2019**

## Introduction

Healthwatch Hertfordshire (HWH) is the independent health and social care champion. Local Healthwatch is in place to gather the views and experiences of people accessing services, to use this information to influence decisions and to provide information and advice to the local community about health and social care services.

Legislation allows HWH authorised representatives to 'Enter and View' health and social care premises to see and hear for themselves how services are provided.

This Enter and View visit was conducted to provide feedback to West Hertfordshire Hospitals NHS Trust (WHHT) on specific areas of St Albans City Hospital prior to the anticipated Care Quality Commission (CQC) inspection in the New Year. The CQC rated St Albans City Hospital as 'Inadequate' in their report published in February 2019.

## Methodology

The focus for the visit was to speak to patients to gather first hand and current feedback on their experiences at St Albans City Hospital.

Our trained volunteers (Authorised Representatives) also made observations on the following key themes:

- Welcoming
- Well organised and calm
- Caring and involving
- Safe

It should be noted that Enter and View visits are not inspections but instead offer a lay person's perspective on service quality and provision.

The visit date was chosen by the Chief Nurse and Director of Infection, Prevention Control at WHHT, Tracey Carter, but the areas visited were chosen by the Healthwatch Hertfordshire Quality Manager, Jane Brown.

Volunteers were able to go unaccompanied by staff to the areas of focus and used checklists to record their observations and talked to patients using short tailored surveys asking them to score their experience from 1 to 10 where 1 is poor and 10 is excellent.

**Date of Visit:** 05 December 2019 10.30am -12.30pm



## Areas Visited at St Albans City Hospital

1. Beckett Ward
2. Minor Injuries Unit
3. Blood Tests (Pathology)
4. Outpatients:
  - a. Breast
  - b. Dermatology
  - c. Respiratory
  - d. Audiology
  - e. Rheumatology

## Visits conducted by Healthwatch Hertfordshire Authorised Representatives:

Meg Carter, Barbara Birch, Tim Sims, Colin Stodel, Pamela Rochford, Joan Twitchett, Adrian Lepper

## Acknowledgements

We would like to thank the patients and families and members of staff who we spoke to whilst on the visit.

## Disclaimer

This report relates only to specific visits (points in time) and the report is not representative of all patients (only those who contributed within the restricted time available).

## Summary Observations

We spoke to 27 patients at the St Albans City Hospital that were attending the Minor Injuries Unit, Blood Testing and Outpatients clinics and staying on Beckett ward.

Our overall first impression of the hospital was that it was calm, clean and organised. Staff were helpful and friendly but did not use the introduction of 'Hello my name is ..', a Trust recommendation, (this may be used more when clinicians interact with patients). However this did not affect how welcomed we felt by staff.

### Good Practice

- Patients were very complimentary of the care they received in all areas of the hospital by staff at all levels.
- Homely and welcoming atmosphere on Beckett ward.
- In the Minor Injuries Unit, patients rated the check-in service and triage as 'good'.
- Outpatients was clean and well organised.

### Areas for Improvement

- The layout and condition of the Breast Clinic waiting area.
- The use of space overall in the Outpatients area.
- The display of notices and information in Outpatients.

**See also Recommendations at the end of the report and the response from West Hertfordshire Hospitals NHS Trust on page 16.**

Further detailed observations and patient feedback is set out under each hospital area.

## St Albans City Hospital

St Albans City Hospital is West Hertfordshire Hospitals NHS Trust's elective care centre. It provides a wide range of elective care (both inpatient low risk surgery and day-case) and a wide range of outpatient and diagnostic services with in excess of 100,000 outpatient appointments. It has forty beds and six theatres (including one procedure room for ophthalmology) and a Minor Injuries Unit (MIU), open every day of the week from 9am to 8pm.

The Breast Care Unit was formed in 2005 from the centralisation of breast services across west Hertfordshire.

St Albans City Hospital is on Waverley Road, approximately a mile from the city centre.

### 1. Beckett Ward

Beckett ward is located in the Moynihan wing (level 4) of the hospital. Patients on this ward are either about to have an operation or waiting for packages of care to be in place before going home. Some of those preparing to go home have been transferred from Watford General Hospital. This helps alleviate the pressure on emergency admissions at Watford but St Albans City Hospital is also seen as having a calmer environment for those patients recuperating after their treatment.

On approaching the ward there were notices with information including visiting times, children on the ward, meal times procedure, same sex accommodation and hand washing.

We were warmly welcomed by the Reception staff who immediately found the 'nurse in charge'. The first impression of the ward was that it was clean and not full. There was a bit of 'clutter' (no hazards though) but overwhelmingly the impression was that there was a really good 'homely' atmosphere. Staff could be seen interacting with the patients and patients were smiling and chatting to each other. Everyone had hot drinks and biscuits.

The area was decorated for Christmas and there was music playing. There wasn't much evidence of activities for patients (A TV set was present on the ward but it was unclear how a patient could use it if they wished) though there is a 'trolley shop' that comes round for patients.

During our visit, a student nurse who hadn't seen us on arrival, checked who we were in a confident but friendly way (we thought this was well done and showed responsibility for the patients in her care).

We did not see any volunteers but there was a representative from a Watford care home visiting patients.

We spoke to 5 patients on the ward, all of whom were waiting for various care packages. One patient had arrived the day before from Watford Hospital and one patient had been on the ward for 9 days. Sometimes patients arrive in the evening from Watford and the ward is then unsure of whether the patient has had a meal. The ward cannot provide main meals in these cases though one patient said they had been given toast and butter on arrival, which they seemed quite happy about.

It was evident when talking to patients who had been transferred that it had been difficult to have a bath or shower at Watford Hospital and that this was something that was good about St Albans City Hospital. The 'nurse in charge' commented that patients often arrived with a bag of dirty clothes.

We asked patients questions about the timeliness of answering call bells, sleeping at night, attitude of staff, their involvement in their care decisions, discharge and the food.

**Call bells:** most patients had not needed to use the call bell that often. One patient said it was only slow when staff were busy and one commented that they had had to use the bell whilst in the toilet and it was answered very promptly.

**Sleeping at night:** all those we spoke to said they had no trouble sleeping at night - 'sleep like a log' was one comment and that 'it wasn't noisy on the ward'.

**Food:** Patients were happy with the meals that had been provided and commented that they got what they ordered and that food and drink was plentiful.

**Attitude of staff:** without exception patients said that staff were 'lovely'; 'very good and helpful'; 'everyone is kind'.

**Explaining what is happening and Involvement in care decisions:** responses to this question were mixed. One patient said that they have to ask the doctor and 'insist they respond', another said they mostly understood what was happening and another commented that they would be feel confident to ask questions. Some patients had family members who would be supporting them with care decisions.

**Discharge:** none of the patients knew when they were going home as they were waiting for things to be in place before they left hospital.

Information to patients about future treatments, transfer or discharge needs to be regularly provided so that patients are adequately prepared for the next stage of their recovery.

When asked about anything that could be improved or something they liked, comments included:

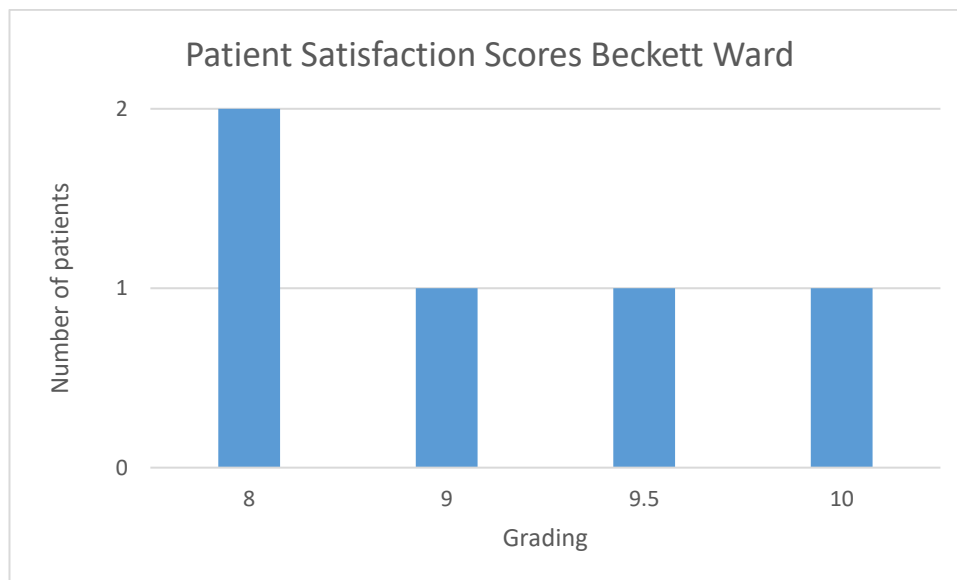
‘All Ok, not a lot could be better’.

‘Nothing I can think of’

‘More provision for left handed people’

‘They gave me a shower - seem to make the time for me here’

Patient feedback scores<sup>1</sup> ranged from 8 to 10 reflecting the high level of satisfaction with their care.



<sup>1</sup> Scores are only representative of the patients we spoke to during our visit.

## 2. Minor Injuries Unit (MIU)

The Minor Injuries Unit at St Albans City Hospital is located close to the entrance of the hospital and can be accessed directly from outside or accessed from the main hospital. It is a walk in service that is open 9am- 8pm every day with x-rays available 9am - 7.30pm , Monday to Friday. The unit can generally treat injuries like sprains, cuts, grazes, bites, stings, burns and scalds. It is a nurse led unit.

The first impression of the MIU was of a clean, organised area with good facilities such as a new children's play area and a free phone to call a taxi (at the time of our visit the TV was out of order). A sign (with picture) advises that water is available on request.

Staff were dealing with patients in a friendly and professional way.

We were welcomed in a pleasant and cheerful way by the Receptionist before we started talking to patients. We identified that the hearing induction loop was not working and reported it. (One of the HwH representatives uses a hearing aid and was unable to connect to the system). The Receptionist however, was unaware of the facility.

There is a sign in the reception signing-in area keeping patients notified of the waiting times (at the time of our visit, 2 hours) but some of the patients we spoke to hadn't noticed this but they had seen the standard sign in the waiting area which read that they could wait up to 4 hours.

We asked how staff understand someone who doesn't speak English well and we were told that they would probably use Google Translate which did not feel like sufficient provision for those with English as a second language.

Patient information included patient feedback on the unit, carer information, how to compliment or complain (this was a little difficult to access), sepsis recognition.

The staff sister on duty told us that they have direct access to the Watford Hospital Speciality Nurse and this gives them reassurance when they are presented with extreme or difficult cases. She also said that there had been an increase in the x-ray facilities which was also an improvement.

We visited the unit between 11.00 and 11.30 and 12.00 to 12.30 and spoke to 7 patients. We asked them questions about why they had come to the Minor Injuries Unit, whether they had been triaged and what their general experience of the process had been so far (note this was prior to receiving treatment).



## Choosing the MIU for treatment:

| 111 Service referral | No referral came direct | GP/ Clinician/ Other |
|----------------------|-------------------------|----------------------|
| 0                    | 3                       | 4*                   |

- \* 1. Advised by Pharmacist
- 2. Advised by school following an injury.
- 3. Called hospital prior to coming
- 4. Advised by GP Practice for a dressing change

Two patients came by bus and the other patients came by car as passengers. Only one patient found it difficult to find the MIU but most of the other patients had been there before. Six out seven patients rated the check in process as 'good' and one as 'fair'.

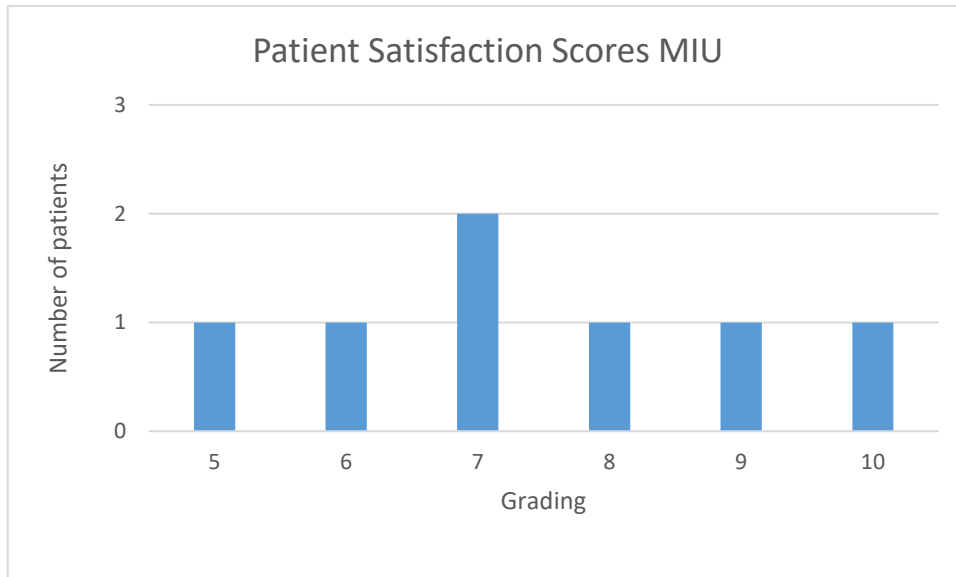
All patients that we spoke to had been triaged - some immediately or within a few minutes with the latest being triaged at 15 minutes after arrival. Patients were pleased with this level of service and a number were also offered pain relief (and water).

## Patient comments included:

'Very, very good - she was kind' (Receptionist and nurse)

'Good, very friendly - she asked a few questions, I was reassured a nurse would come soon' (Receptionist)

'All nurses I've seen have been good. Need more resources as a lot of people have been waiting quite a while to be seen'



*Low patient scores tended to reflect the length of time waiting <sup>2</sup>*

### 3. Blood Tests (Phlebotomy)

St Albans provides phlebotomy for GP and Hospital patients, anticoagulant clinics and a limited Laboratory service in support of on-site clinical services. It is a walk-in service for the majority of blood tests.

We were told that around 400 blood tests are completed in a day and Thursdays are usually busy.

#### Blood Clinic Opening Times

|                |               |
|----------------|---------------|
| Mon, Thurs Fri | 08.30 - 16.00 |
| Tues, Wed*     | 12.00 - 16.00 |

\* Warfarin clinics are held on these days between 09.00 and 12.00 for Warfarin patients only.

The clinic is situated next to the Pharmacy in a wide corridor on the walk through to other departments and wards. It feels a little bit 'out of the way' and can be draughty. We understand a recent PLACE (Patient Led Assessment of the Care

<sup>2</sup> Scores are only representative of the patients we spoke to during our visit.

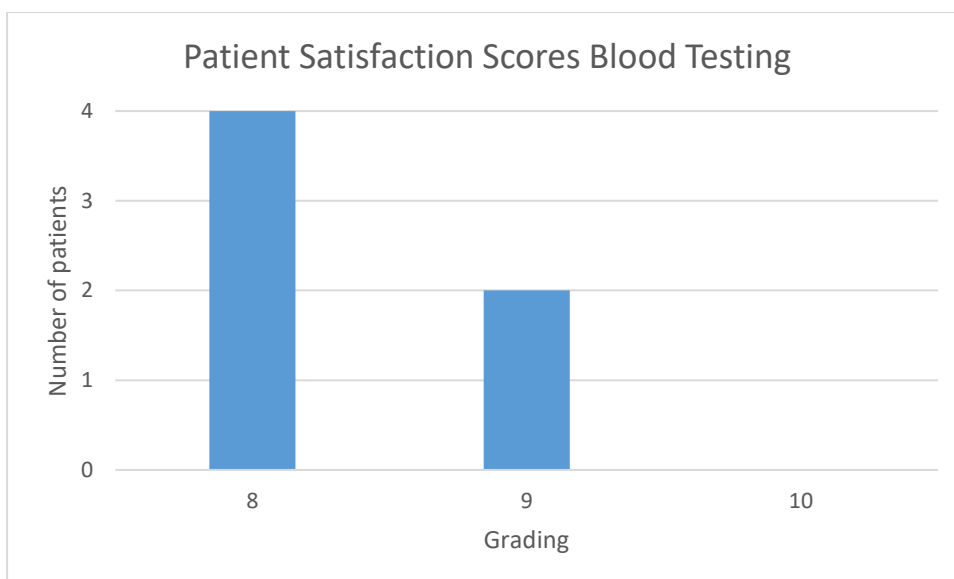
Environment) audit also made some recommendations around decoration for this area. Patients have a number which comes up on a screen to let them know where they are in the queue and when it is their turn for the blood test.

We visited the blood testing unit between 10.45am and 11.45am and spoke to 6 patients (4 female and 2 male patients). The patient wait was generally between 20 and 40 minutes.

All the patients we spoke to had used the service before and therefore had no trouble finding it. 5 out of 6 patients had chosen to come to St Albans Hospital as it was local and quicker to get the blood test done here.

We were able to speak to 5 of the patients we interviewed after they had had their test and all confirmed that they had been treated in a courteous and professional manner by staff.

Patients gave the service ratings of 8 and 9 and were generally positive about their overall experience.<sup>3</sup>



However patients we spoke to had not been asked to complete any feedback such as the Friends and Family Test though one said they had seen one and the patient having the test for their pre- operative assessment said they had received the feedback form at their pre- operative assessment.

<sup>3</sup> Scores are only representative of the patients we spoke to during our visit.

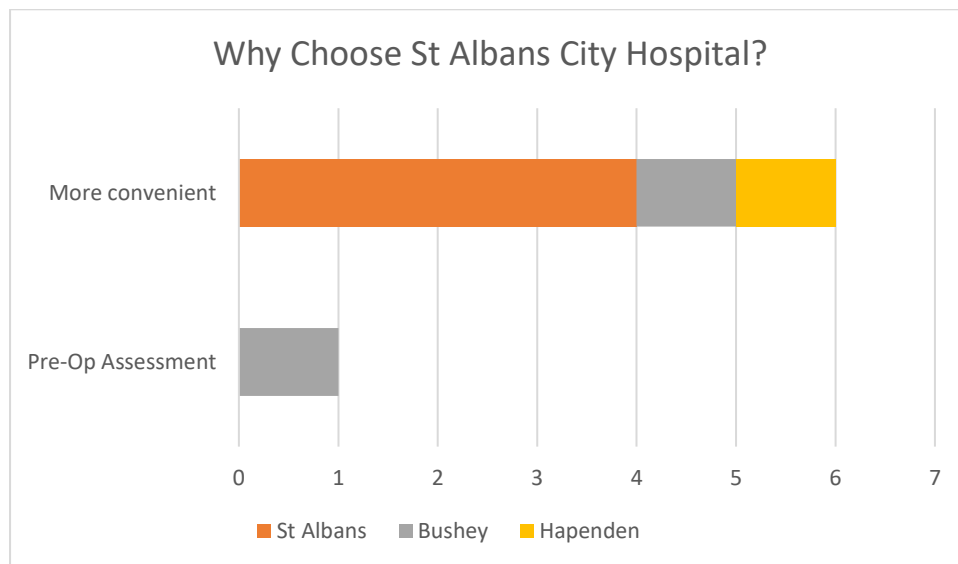
**Patient comments included:**

‘Lovely Hospital, long wait in car park though’

‘Good - fresher magazines’

‘Pay parking after the treatment’ (first 25 minutes is free but you don’t know how long the wait will be)’

**Reasons why patients come to St Albans City Hospital**



**4. Outpatients**

The Outpatients department is located on the ground floor In Gloucester Wing. We visited Outpatients between 10.30 and 12.00 and introduced ourselves to the ‘nurse in charge’ when we arrived.

The first impression of the main Outpatients is of a clean, bright and well organised area. It seemed on first sight that there was little activity as there were no queues (nurses were in the main nurse office). The staff we met were friendly and informative and were wearing clear name badges. They were keen to let us know of the improvement journey they have been on in Outpatients, for example trying to make the area more dementia friendly.

Basic signage is excellent but then there is too much detail. Similarly noticeboards contain a lot of information so appear ‘busy’. For example in the Breast clinic, how

to complain or compliment was located at the bottom right hand corner of the noticeboard slightly lost amongst the other information.

In the main reception the receptionist appears remote due to the way the area is designed - even allowing for staff safety, this could be off putting.

In contrast to the main area, the Breast clinic is in a much darker and cramped area with seating close to the walls. This is an area that could benefit from a re-design particularly as patients waiting in this area may be going through some very difficult treatment.

The Audiology 'drop in' clinic had a queue forming as this is in quite a small area. Several patients commented that the location of the ticket machine was 'unhelpful' as it was easy to overlook without clear instructions on how to use it and/or find it accessible. This resulted in some confusion in the queue.

The overall impression of the lay out of the outpatients area was of a wide open main space with one or two people waiting and then a series of smaller areas where different clinics were taking place, two of which were cramped (Breast clinic and Audiology 'drop-in' clinic).

Some of the toilets could also be improved with some redecoration and updating. In one toilet a clinical waste bin was sited under the basin and couldn't be opened (this was reported).

There is a poster that says that Outpatients is 100% compliant with hand hygiene which is based on a monthly audit. We were not sure that this was a valid statement using such a measure and perhaps this evidently good practice could be presented in a more meaningful way to reassure patients who probably assume that the Trust would be compliant anyway.

We spoke to 9 patients in Outpatients (2 each from the Breast, Dermatology, Respiratory and Audiology clinics and 1 from Rheumatology).

Most patients were attending for follow up appointments and only one patient had experienced a cancelled appointment during their treatment so far. Patients were generally happy with the information they had been sent, finding leaflets and booklets helpful. Several patients commented that they would have liked information by email as an additional method of communication.

#### **Patient comments about the clinics included:**

'Quite impressed overall' (Respiratory)

'Busy, reasonably well organised -passed on for minor op on same day'  
(Dermatology)

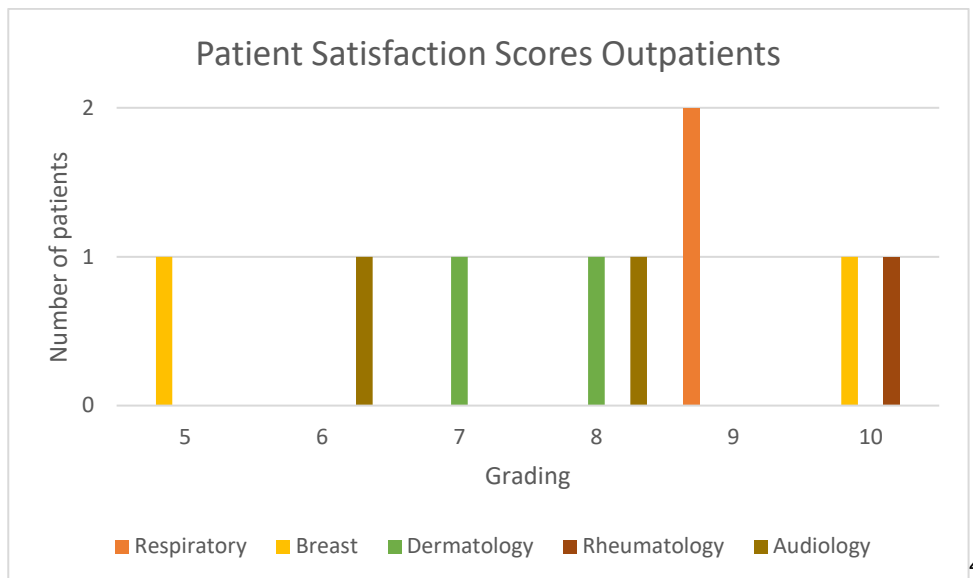
‘45 Minutes wait so far’ (Breast)

‘Very pleased with treatment and staff good’ (Breast)

‘Good, apart from time of clinic. Notified 11-12 in fact open 10.30-12’ (Audiology)

‘Organised - made to feel comfortable’ (Rheumatology)

‘Everyone does their best - the NHS is under pressure - why not allow tubes and batteries to be available via Boots etc’ (Audiology)



## Recommendations

### 1. Outpatients and Blood Testing:

- a. Rethink the use of space and decoration in the Outpatients area to make better use of the space overall so that more cramped clinics such as the Breast Clinic are made more welcoming and comfortable. (The siting of the Blood testing clinic could also be included in the review).

<sup>4</sup> Scores are only representative of the patients we spoke to during our visit.

- b. Review how notices and information are displayed to have a common system with key themes, taking into the Accessibility Information Standard.
- c. Brighten and refurbish the Reception desk in the main outpatients area.

### 2. Beckett Ward

- a. Look at ways to ensure patients are not being transferred late in the day from Watford General Hospital to Beckett ward. If it cannot be avoided, there should be clear procedures in place to deal with 'out of hours' arrivals, including ensuring patients are properly fed.
- b. Investigate if there is a reason why patients arriving from Watford General Hospital do not seem to have regular showers or baths before they arrive at St Albans City Hospital.
- c. Ensure that patients are regularly appraised of their situation with regard to treatment and discharge.

### 3. Minor Injuries Unit

- a. Confirm how staff support patients who do not have English as their first language in urgent and unscheduled appointments. (The Trust's website states they can book interpreters for appointments and meetings, but do they also use LanguageLine for example to aid communication when interpreters can't be booked)?
- b. Ensure equipment such as hearing loops are regularly tested so that patients can use them effectively.



## Enter and View Visit Report St Albans City Hospital 5th December 2019

### West Hertfordshire Hospitals NHS Trust Response

#### Introduction

The Trust welcomes the report and acknowledges the overall comments and recommendations.

#### Action Against Recommendations and Observations.

The following provides a response to the findings of the report.  
Overview:

- Staff did not use 'Hello my name is ...'

Staff are reminded in safety huddles each day to introduce themselves to each patient with 'Hello my name is....'

#### Beckett ward

- Non-hazardous clutter noticed

This observation has been communicated to the team. The team have addressed the issue and have decluttered the ward.



- **No evidence of activities for patients. There was a T.V. but it was not clear how a patient could use it if they wished too.**

There is an activities trolley located on Beckett ward for patients to access. The activities trolley includes board games, radios and colouring books. There is a T.V in the day room which is for the use of all patients. There is also a portable T.V. which can be rolled to the bed of a patient by the staff as required. Staff encourage patients to make them aware that they would like to access these facilities.

- **No volunteers seen**

There are three resident volunteers on Beckett ward who work to their availability. There is also an increase in young volunteers in the summer which has been actively encouraged.

- **No hot meals for late transfers**

Hot meals are made available to all patients during the day. However after six o'clock the kitchen is closed. Provisions are made for late transfers by storing snack boxes in the fridge. Tea and toast is also provided by the staff at any time.

- **Access to bathing and shower facilities whilst an inpatient at Watford General hospital.**

This was an area of concern when reading the report. Following investigation it was noted that on arrival to St Albans patients who do not have their own bathroom bag receive personal hygiene packs whilst on the ward. These personal packs include shampoo/conditioner/soap/toothbrush/toothpaste/facecloth/comb. Showers and personal hygiene facilities are fully available within Watford General Hospital ( limited baths available). We have reviewed this and have not had any feedback to indicate that access to these facilities was an issue. However, we are monitoring to ensure that patients receive full care and maintain their privacy and dignity.

Unfortunately patients will arrive with dirty laundry as there are no facilities on site for patients. It is anticipated that relatives will support the management of patient clothing where ever possible as this remains patient property.

- **More provision for left handed patients**

This has been raised with staff and discussed at the safety huddle. Staff are encouraged to holistically review the patient and recognise the specific individual requirements of a left handed patient e.g. bedside locker on the left side of the bed.

### Minor Injuries Unit

- **Hearing induction loop was not working**

Clinical engineers have reviewed the hearing induction loop and it is now working.

- **Waiting time sign at reception (up to date) but not seen by patients. The 4 hour waiting sign in the waiting area was observed by patients.**

The 4 hour sign at reception is a promise to all patients that they will be seen and discharged within 4 hours. This is their target for the patient's arrival to discharge, not waiting times. The team have recognised this and have made this clearer. The up to date waiting time is beside reception so that they can be alerted to the time as they check in. The staff will alert every patient of this up to date waiting time at each check in.

- **Staff did not know how to access language services.**

Following investigation the context of the observation may have been misunderstood. That is patients with English not as their first language present to the staff their mobile phone with google translate - this provides the English version of their symptoms e.g. I am in pain.

All staff when challenged clearly articulated that they would use language line. The appropriate route is to complete the request form on the intranet under PALS and email. An interpreter or language line will be then be organised. If it is out of hours the number for language line is available on the PALS answering machine. The form must still be filled out and sent to both PALS and language line.

- **Difficulty making a complaint.**

Complaints can be emailed to

<https://www.westhertshospitals.nhs.uk/about/contact.asp> and can be navigated on the WHHT website. To facilitate and raise awareness for patients the information will be captured on and displayed on a poster. Patients can also talk directly to PALS who will provide support in working through the process.

- **One out of six patients rated MIU 'fair'. Low scoring from patients was mostly to do with long waiting times. What can we do about this?**

The staff are aware that the waiting times can sometimes extend longer than usual due to a sudden fluctuation of patients into MIU at any given time. Staff are reminded in safety huddles that when this occurs to ensure open and honest communication with patients waiting for treatment. They ensure that the waiting time board is constantly updated and communicate verbally to all patients waiting.

### Phlebotomy

- **Location remote, draughty and in need of decoration**

Estates are aware that the area requires further decoration and it is part of the environmental development plan.

- **Feedback forms need to be more widely available.**

The blood sciences manager continues to remind their teams of the importance of feedback and taking the learning to improve the service.

### Outpatients

- **Notice boards need to be tidied and updated.**

Action has been taken and all boards have been up dated.

- **Breast clinic needs to be brightened up and bring the seating away from the wall. Bathrooms in waiting area need to be redecorated and an appropriate sized bin needs to be inserted.**

Estates are aware of these issues and have confirmed that the design plan for St Albans incorporates the above issues.

- **The ticket machine in Audiology needs to have clearer and more noticeable instructions.**

This issue has been raised to the team in St Albans and they are in the process of implementing clearer, more visible instructions.

**Sarah Hutchinson, Assurance and Governance manager, on behalf of Tracey Carter, Chief Nurse 05/02/2020.**

I would like to take this opportunity to thank the Healthwatch panel for working in partnership with the Trust to review the services we provide at St Albans City Hospital. Your comprehensive and detailed review has provided the Trust with valuable feedback into how we can improve services at St Albans City Hospital. I am pleased to note that in general you have had a positive experience.

Going forward, we will monitor the implementation of the recommendations where applicable, ensuring that the patient remains at the centre of the care we provide.

**Tracey Carter  
Chief Nurse and DIPS**