

Inpatient Survey Summary Report

July 2021



Accessible Formats

This report is also available in Welsh.

If you would like this publication in an alternative format and/or language, please contact us.

You can download an electronic copy from our website:

<https://swanseabaychc.nhs.wales/>

Or ask for a copy by contacting our office. Contact details can be found on page 23.

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About Swansea Bay Community Health Council (CHC)

Swansea Bay CHC is the independent watchdog of the National Health Service (NHS) within Neath Port Talbot and Swansea. We encourage and support people to have a voice in the design and delivery of healthcare for their families and local communities.

Swansea Bay CHC works with the NHS, inspection, and regulatory bodies. We provide an important link between those who plan and deliver NHS services, those who inspect and regulate them and those who use them.

We hear from the public in many ways. Before the coronavirus pandemic, we regularly visited NHS services to hear from patients while they were receiving care and treatment. We spoke to their families and carers too. We also heard from people at local community events and by talking to community representatives and groups.

We had to change our ways of hearing from people because of the coronavirus pandemic. We did this by using surveys, social media and using videoconferencing apps such as Zoom, Teams and Skype. These apps have made it possible to attend virtual engagement events too. We continue to hear from people through enquiries and our complaints advocacy service. Swansea Bay CHC represents the “patient and public” voice in Neath Port Talbot and Swansea.

Background and Introduction

Swansea Bay CHC wanted to collect feedback from patients who were currently on a ward or had been in hospital within the Swansea Bay area recently. Prior to Covid-19, CHC members would have visited the wards to talk to patients to collect their experiences of being in a hospital bed.

Throughout the pandemic visiting patients on the wards was stopped. We needed to find ways of collecting this feedback without our members being on the hospital site.

What we did

It took us a while to get our surveys to the wards. Firstly, we asked the Health Board to put up laminated posters on each of the wards; this gave patients the opportunity to scan a QR code and complete our survey online. This method did not deliver a lot of feedback, but during this time, Welsh Government had a no paper policy, so we were restricted in how this information was fed back. We relied more on the public seeing our surveys via social media, including Instagram, Twitter, and Facebook, which provided direct links to our online surveys.

We shared our engagement messages promoting the survey on social media and by email, with many local groups and stakeholders in an effort to reach as many people as possible, including:

- ċ Council for Voluntary Service (Neath Port Talbot & Swansea)
- ċ Local Area Coordinators
- ċ Swansea Bay University Health Board
- ċ Local community groups, including Covid-19 support groups
- ċ Seldom heard groups
- ċ Local and national charities

We picked up feedback in other ways too, e.g., through our enquiries and complaints advocacy service, local community networks, community representatives and groups, and monitoring of health board activities, including feedback and complaints.

As restrictions lifted, we worked with the hospital Patient Advice and Liaison Service (PALS) to distribute hard copy surveys on wards. This report covers the period of April - June 2021.

We asked people across the Swansea Bay area to share their views and experiences of a current or recent stay in hospital (within the last 12 months). Our questionnaire covered six areas of inpatient experience: admission to ward; ward staff; care and treatment; ward facilities; mealtimes and inpatient experience during the Covid-19 pandemic. These questions would help us understand more about the quality of services and what needs to be improved.

Who we are hearing from

Here is a snapshot of the people who shared their views and experiences with us through our local survey.

21 members of the public shared their experiences with us.

Of those patients that answered our survey, 9 were female patients, 5 male and 7 did not wish to disclose their gender

All shared their views in English

Around 71% identified as Heterosexual

More than quarter (28%) had a long-standing injury

Around 19% had a long-standing illness

Around 62% were White (British, Welsh, English, Scottish or Northern Irish)

Age Range Categories

Around 33% were aged 45 – 60

Around 24% were aged 60 – 75

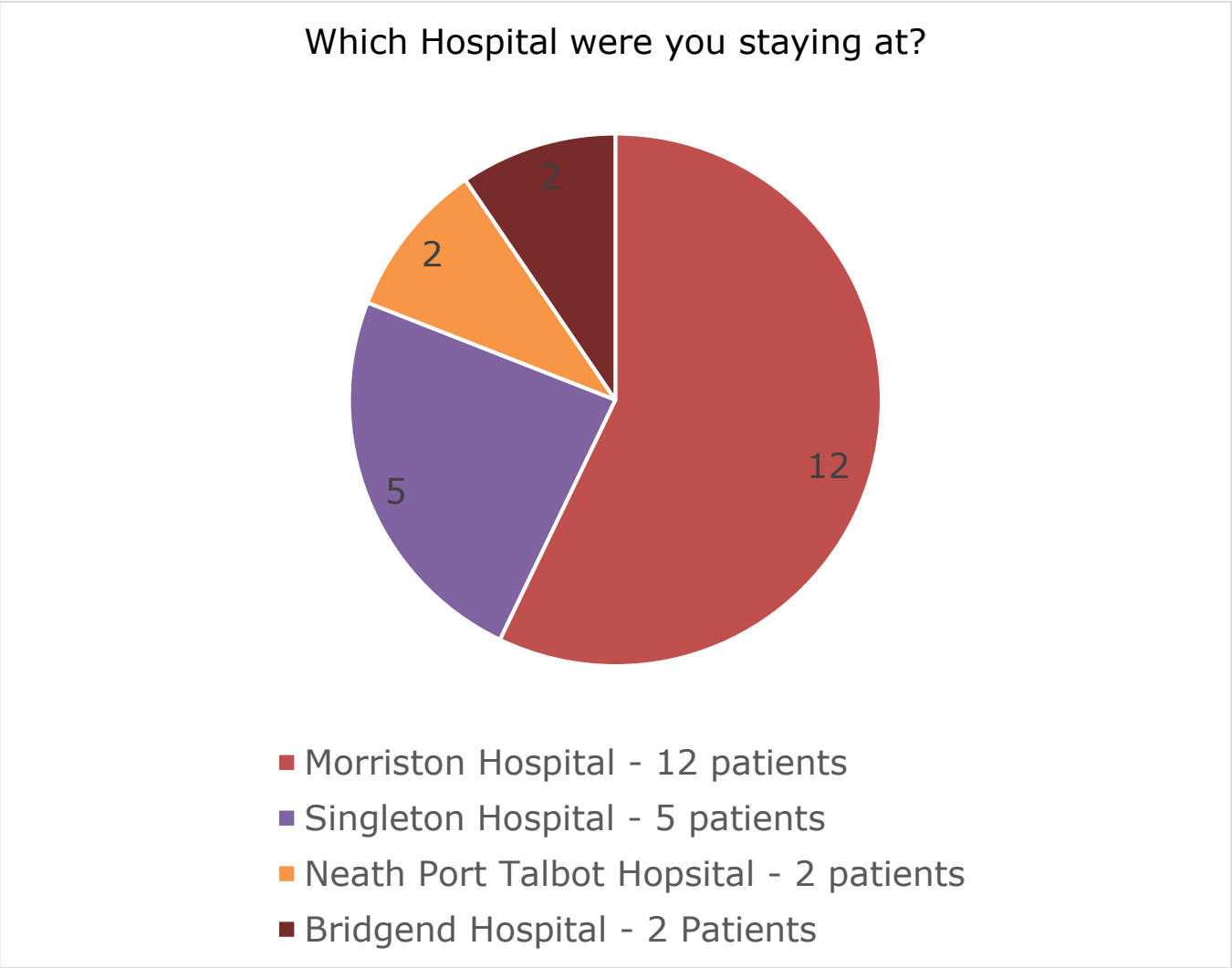
Around 14% were aged 26 – 44

You can find out from our [Equality Plan](#) what we are doing to hear from different groups of people so that we can better represent the diversity of the communities we serve. You can find our Equality Plan on our website: www.swanseabaychc.nhs.wales/

What we heard

Out of the 21 members of the public who shared their experience with us, 6 were from the Swansea area and 9 from Neath and Port Talbot. 6 did not share their location.

Our survey asked a number of questions about experiences as a patient staying in hospital in the Swansea Bay area. A copy of our survey is available on request.



Key Findings:

Of the 21 people who shared their experience with us, 20 told us about a recent stay in hospital (in the last 12 months). We have grouped the feedback into themes.

Information

More than 3 quarters (76%) told us they were not given a patient information leaflet

76% told us they had some communication issues on the ward

More than half told us they were unhappy with the visiting hours on the ward

Communication

All patients were able to communicate in their preferred language

More than half said the staff introduced themselves before providing any care

61% felt staff listened to them or their relatives/carers when making decisions about care and treatment

51% felt staff were discreet when discussing care/treatment with them

Staff Attitude

67% felt that staff were friendly and helpful

Staffing levels

67% felt staff numbers were adequate to meet their needs during the day

54% felt staff numbers were adequate to meet their needs during the night

On the Ward

86% told us they could reach their buzzer

All patients told us their buzzers were working

Around three quarters of patients (76%) felt their buzzer was answered in a timely manner when they used it

Just over a quarter of patients said they were encouraged to get up and move around safely during their stay

Personal Hygiene

The majority (81%) felt comfortable during their stay

Just over half (57%) of patients felt able to shower/wash as often as they would have liked

57% also stated they were able to wash their hair as often as they would have liked

81% were able to keep their teeth and mouth clean as often as required with or without assistance

71% were able to use the toilet as often as needed with or without assistance

Ward Admission

We asked people if they had been provided with a patient information/ward leaflet when they were first admitted to the ward. The purpose of this booklet is to answer some of the questions patients and their family/friends may have about the hospital stay.

Some patients told us they received verbal information rather than a leaflet while others told us they did not receive any hardcopy or verbal ward information.

"Any information given was by word of mouth when required"

"Verbally from nurses and doctors. I was transferred from intensive care"

"I wasn't told anything"

"No information, taken from recovery to short stay gynaecology"

"It wasn't [provided]"

Ward experience

We invited people to provide us further feedback about the ward. We have grouped feedback in to themes as follows:

Staff attitude

"I was an inpatient on Ward 2 from 14th August for three nights. The staff were very professional, friendly, and helpful.

"Excellent wards and staff. Happy moral was felt."

Communication with family

It would have been good if someone from the ward could have rung my husband to let him know that I was out of surgery and back on the ward [ward 2]

"I was in a coma so couldn't be given information. However, my parents & partners were given regular updates by phone of my status & wellbeing due to lockdown & unable to have visitors"
[ITU & Gower]

"The ward was quiet as surgery had only just started back up after Covid. No visiting was allowed due to Covid"

"The ward was very clean which was reassuring. My only complaint (which seems quite trivial) was that the Seagulls were so loud from about 4am that it was very difficult to rest and get sleep and having had an operation rest is very important"

"Nurses stood outside my room when door was open discussing a family member who was due to have an operation and they were discussing that she would be better going to another hospital and Hope not this hospital with the state it was in"

"Despite nurses only being allocated a single bay of up to 6 patients they were absent for the majority of the day and only really interacted when responding to the buzzer. Really needed them to introduce themselves when they come on shift"

The bathrooms are dated and lacking basic facilities such as mirrors"

Care and treatment.

3 People told us about times when care and treatment fell way below the standards expected and when calls for help and support were ignored.

"I am writing this on behalf of a patient who was terminally ill and contracted Covid on this ward and died. His care was substandard. I was told I could not have a video call with him by one of the staff. The consultant insisted he stay before Xmas when he was Covid negative as he wanted him to have physio and subsequent contracted Covid and pneumonia and died 2 weeks later. When I was called in, he was unresponsive and had not been given fluids or pain relieve for 24hrs. Without my interjection he would not have received this. Good job I am a nurse myself and knew what to ask for. He was under the care of a newly qualified nurse who had not been signed off on IV's and she did not know to ask for his medication via a different route. I was given his washing and was given 2 bags of someone else's clothes!!! When I pressed the buzzer, we waited more than 20mins before someone came to see to his needs. He was a 59year old man and unable to use his left-hand side but was not assisted"

"After a hysterectomy left in the same bloody sheets for three days. By my own means I unplugged the pain relief and got myself to the toilet as when asked for help was left"

"I know it was a difficult time due to COVID-19. My biggest complaint is that my analgesic medication was given at irregular

Impact of Coronavirus

Some people shared their experiences of Coronavirus measures in place on hospital wards across Swansea Bay.

"Lockdown due to covid-19 had made everything difficult but the staff of all levels did their utmost to look after me. I am still under investigations & waiting for Endocrine & ENT, but due to backlogs unsure when I will be seen. Physio in the community did not materialise but I'm still very grateful to the NHS for how I was looked after during my 3 week stay"

"I was in a private room so do not know about communal areas or activities available. Plus, as it was during lockdown, visiting hours were not applicable"

"Cardiac ward so not much for leaving bay area but was comfortable more than happy plus covid restrictions in place"

"These were shut due to Covid"

"Due to covid it was not a normal admission."

"Because of Covid visitors were not allowed on the ward. This, I feel, is something that should be considered long term for security and hygiene reasons. I personally would rather see visitors in a meeting area rather than in the wards."

"Due to being covid ward had to use commode weren't allowed to leave room to go to bathroom/shower"

One person felt that new dads needed to be involved right from the start, to help support new mums and care for the baby

“Dad’s need to be allowed into the ward for visiting hours. New mothers need the 1-1 personal support that you cannot get from busy ward staff. If dads could come in for 2 hours, then mums can shower etc. without worrying about the baby or staff not being available to look after an upset baby.”

Mealtimes – Summary of findings

Quality of the food: 10% stated it was very good, 19% felt it was good 48% advised us the food was okay, a further 19% found the food to be very poor

Temperature of the food: 14% felt it was very good, 19% told us it was good 33% of patients said it was okay and 10% advised it was poor

Presentation of the food: 14% said it was very good, 24% said it was good, 48% felt it was okay and 5% felt it was very poor

Portion sizes: 14% said they were very good, 48% felt they were good and 38% said the portions were okay

Choice of food on the menu: 14% stated it was very good, 19% said it was good, 43% felt it was okay and another 14% advised the choices were very poor

62% of patients said they were not encouraged to use hand hygiene facilities before meals

62% of patients did say they always receive the meal that they had ordered

62% said they did not have access to snacks during the day and night

81% of patients were not given a choice of where to eat

86% were happy with the level of support they received to eat and drink

67% did felt their water jug was changed often

Some patients felt that there was little choice at mealtimes

"I wanted toast in the mornings but not available - no cooked breakfast either. Meals were extremely poor"

"Less carbs and more veg! A lighter lunch option would be good"

Another told us how meals did not meet patients' dietary needs

"I'm on a medical diet but they couldn't give me food that didn't make me unwell"

One person told us about an occasion when another patient on the ward was not given any help to eat at mealtimes

"No assistance to eat even though he was unable to use his left side due to the brain tumour"

Others were unclear about the availability of snacks during the day.

"I'm not sure about access to snacks...I did ask for something once and got food"

"Once you got to know the staff on the ward, especially the HCAs, you could ask for second helpings and snacks.

Another patient advised that they needed to buy their own water because the jugs of water "were often not replenished when empty."

Positive Feedback

Many people spoke highly of the staff on their ward

"Staff were amazing"

"Even though nursing staff were very busy they could make time to talk to you were helpful with any problems or issues"

"The staff were very pleasant, professional and helpful. This has been a very tough time for NHS staff, and I cannot praise them enough"

"The nurses were lovely"

"Some staff were amazing"

Other feedback provided by patients – need to finish this sentence

I actually enjoyed my time there! But not the ward I attended after my operation!

Not so positive feedback

Staffing levels

One patient felt sympathy for nurses when staff numbers were low

"The nurses were under a lot of pressure and would have been better if more nurses available"

One patient voiced their fears at being in hospital during the pandemic

"It was frightening due to COVID-19"

At night

3 patients told us that their patient experience of care was poorer at night, leaving them feeling their calls for help were ignored.

"When I was transferred to the after-op ward I felt neglected, miserable, and never slept a wink. If it wasn't for a young nurse on night shift, I think I would have gone crazy! She saw my despair and invited me to join her and a few other nurses for a chat, a cup of tea and biscuits, I was so grateful. I couldn't sleep at all. In the night it was terrible there."

"In the night the nurses didn't like answering the buzzers and were happy to let any warning signals from machines be ignored."

"Evening bank staff were very poor and inefficient. Seemed to have no clue handling covid patients and administering tablets. One nurse gave me 10 tablets in a pot one evening and I advised I only take 2 she was really rude but did go and check and came back with my 2 no apology- lucky I didn't just take them. 1 nurse left me choking and walked out of the room and only came back when 4 other patients pressed buzzer but a long delay."

"I found visiting stressful at times as it was noisy. I wanted my curtains closed but a nurse kept opening them without checking why I wanted them closed. I ended up having a breakdown and she was much nicer then. I had a window next to my bed, so they could see I was safe"

Learning from what we heard

Feedback from this period of engagement was mixed with many people reporting a positive experience, which included positive feedback about staff, being comfortable on the wards, ward facilities were good and being able to maintain their personal hygiene.

In a minority of cases, issues were raised about information about the ward they were on not being shared, dietary requirements not being catered for, lack of assistance when eating and drinking, and a lack of clarity around visiting rules during the current Covid-19 pandemic.

We were told communication issues were experienced from admission throughout their hospital stay.

Some patients felt staff did not introduce when talking to them. Some said they did not always feel listened to by staff when discussing care and treatment.

Whilst the majority of patients were happy with the meals provided some were unhappy with the available food options and lack of lighter meal choices. We received mixed comments about food temperature, presentation, and the quality of food.

Recommendations

1. Explore ways of safely and consistently providing patients with information about the ward. Explain visiting rules to new patients, and update patients when these change. Virtual communication options should also be explained.
2. Remind staff of the requirement to introduce themselves before they speak to patients and/or their families
3. Look to include what patients and their families have to say when discussing future care and treatments plans. Try to be discreet when discussing personal details with a patient and family, use an office if available
4. Remind staff to remind patients of the hand wash facilities before all mealtimes, and help those who cannot get out of bed to do this themselves
5. Ensure all patients can maintain personal and oral hygiene frequently during their hospital stay
6. Advise all patients of what facilities are available for patients on the ward, and whether they are able to access Newspapers, TV/Radio's, tablets etc. during their stay








Thank you

We thank everyone who took the time to share their views and experiences with us about their recent hospital stay, and for sharing their comments about the service they received. Highlighting what is working well – and to act where required as quickly as possible to make things better.

Feedback

Swansea Bay CHC would love to hear what you think about this publication, and any suggestions about how we could have improved it, so we can use this to make our future work better.

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If you write to us in Welsh, we will answer in Welsh. This will not lead to a delay in responding to your correspondence.

We welcome telephone calls in Welsh.

**Swansea Bay
Community Health Council**