



DE MORGANNWG | SOUTH GLAMORGAN

CHC Visit Report
(Announced)

**Spinal Rehabilitation
Unit (Ward West 8 &
10),
University Hospital
Llandough**

25th July 2022

Accessible formats

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Your Community Health Council

Community Health Councils (CHCs) are the independent watchdog of NHS services within Wales and we seek to encourage and enable members of the public to be actively involved in decisions affecting the design, development and delivery of healthcare for their families and local communities.

CHCs seek to work with the NHS and inspection and regulatory bodies to provide the crucial link between those who plan and deliver the National Health Service in Wales, those who inspect and regulate it, and those who use it.

CHCs maintain a continuous dialogue with the public through a wide range of community networks, direct contact with patients, families and carers through enquires, our Complaints Advocacy Service, visiting activities and through public and patient surveys, with the CHC acting as the "Public & Patient Voice" within Cardiff and Vale of Glamorgan.

Visit Overview

In 2011, the CHC Executive Committee supported the UHB's proposals to transfer the neuro and spinal rehabilitation services from Rookwood Hospital to the UHL, following a public consultation, 'Making a Difference'. A number of caveats were put in place and agreed - full details of these caveats can be found on page 15 of this report.

In May 2021, the CHC were invited by the UHB to visit the new unit following its move from Rookwood Hospital to University Llandough. During the educational visit the following positive and negative findings were identified;

Positive Findings:

1. The unit was spacious and easily accessible for everyone, including those who require a wheelchair.
2. Modern facilities to promote rehabilitation such as Hydro Pool, gyms and kitchen areas. An excellent large pool which has hoists going across into the water with space for accommodating a large number of patients at the same time.
3. The Unit had a number of 4 bedded wards as well as single rooms which enable patients to support each other but offers the opportunity for isolation when needed.
4. A rehabilitation bungalow nearby where patients can stay with their families or carers prior to going home or into a new adapted place.
5. A garden which is being created for the benefit of patients.
6. It was pleasing to hear that the spinal and neuro patients had been consulted on the shape and facilities of the new Unit.

Negative Findings:

1. Members were of the opinion the unit needed to be more uplifting as colour was very clinical
2. Windows were small, which meant that some areas like the day room were dark and required artificial lighting. Views from the window were also unappealing.
3. Concerns around socialisation and, compared to the previous provision at Rookwood, lacked the community feel and accessibility.

Following the educational visit, a recommendation was put for the CHC to undertake a visit once the Unit had opened to patients, to hear first-hand what they think of the new Unit.

Three members of the CHC and two members of staff visited the Spinal Rehabilitation Unit (Ward West 8 & 10), Llandough Hospital on 25th July 2022 at 3pm. The purpose of the announced visit was for the visiting team to observe the environment, quality of service provision being provided on the Ward and to gather the views and experiences of the patients, carers and visitors whilst on the ward and wider site.

The CHC placed a number of caveats that would need to be implemented in response to the Public Consultation and key issues raised at that time, these caveats were agreed by the Health Board as part of the 2011 public consultation This is the first time that the CHC have been able to formally visit this new unit since its opening , as it is has taken a number of years for the unit to be built and for the service to be transferred across to UHL.

As part of the visit, members of the CHC were able to speak with the following NHS Staff:

- ❖ Senior Nurse, Spinal Rehabilitation.
- ❖ Ward Manager, Spinal Rehabilitation

Briefing Information

Management Arrangements

The Spinal Rehab Unit is commissioned by the Welsh Health Specialist Services Committee (WHSSC) and delivered by the Cardiff & Vale University Health Board.

The Spinal Rehab Unit (Ward West 8 & 10), University Hospital Llandough is a part of the Specialist Services Clinical Board and sits within the Neurosciences Directorate. The area is managed by a Senior Nurse.

Introduction

Spinal Rehab Unit provides specialist intensive spinal rehabilitation for patients who have traumatic and non-traumatic injuries. Patients will be tetraplegic or paraplegic depending on the level of the injury they have sustained.

Capacity

The Ward has 26 beds and is commissioned for 26 beds. The Ward is currently working at 26 beds plus the use of the Ty Hyfrd bungalow pre-discharge. The reason for the variance is if there remains a patient in the bungalow awaiting home.

Capacity can decrease due to infection or outbreak situations. There are concerns in relation to the current climate, we are seeing more patients survive very high-level traumatic injury and as a result may see an increase in demand for beds over the coming months and years.

Over the last 3 months the unit has been slowly increasing admissions in order to comply with Covid restrictions and the Multidrug-resistant organism (MDRO) outbreak the unit has experienced during the past 2 years.

Tertiary provision and repatriation for all Health Boards in the South-East and often West Wales areas.

The Ward experiences extreme repatriation difficulties to all Health Boards, this has been highlighted to WHSSC and has been highlighted at clinical Board and Executive level. These difficulties are often related to lack of staff training in other Health Boards to be able to provide specialist bowel and bladder care as an example.

Staffing

The Wards' nurse staffing levels are 21.68 registered nurses of different banding and 23.65 Health Care Support workers, however these figures are under review and a new business case is awaiting approval by WHSSC to increase these levels in line with the BRMS standards. Its' medical cover is two Working Time Equivalent (WTE) Consultants & 3 Junior Doctors.

The Ward is currently running with both nursing and medical vacancies that the unit has been unable to recruit into during the pandemic, however these are now almost all out to advert or in the recruitment process. The Ward uses bank agency and overtime to overcome and mitigate staffing issues.

In addition to the above core staffing, the Ward is also supported by bank, agency and overtime, but has had difficulties in fully staffing Wards and areas due to the unprecedented levels of vacancies and sickness during the pandemic.

The Ward is supported by volunteers from a number of charities such as the SIA, Aspire and Back up. Horatio's garden will soon be open in the new Centre and will have approximately 16 volunteers supporting patients in the garden 7 days a week.

The volunteers carry out teaching and training on life after injury. Training of wheelchair skills and general activities needed to negotiate life after injury. Horatio's garden volunteers will undertake gardening crafts, and other gardening activities within the garden area.

Opening/Operating Arrangements

The Wards' opening/operating arrangements are as follows:

- The Ward operates on 24-hour basis 7 days a week throughout the year.
- Mealtimes are generally operated 3 times a day, breakfast lunch and evening meal.
- Visiting times are normally between 4:00-8:00 PM in the winter and 4:00-9:00 PM in the summer. With these times extended on weekends to 3:00-9:30 PM.
- During Covid there have been restrictions to all visiting to the unit.
- The unit tries to encourage carers and relatives to avoid visiting during therapy times.

Environmental Improvements

This is a new building and was commissioned and ready for occupation in June 2021. This was a capital building work funded by Welsh Government. There is a snagging list which is being worked through with Wilmott Dixon Estates and Capital Planning.

Initiatives

Horatio's Garden, we feel, will have major benefits to the patient and staff. We hope this will be open for use in April 2022.

Concerns

We have realised since moving to the new area that the geography of the ward layout is vastly different to the old nightingale type ward in the Rookwood unit, and together with the previously mentioned staffing problems we are having to reconsider staffing levels and this is ongoing at present. We have also moved into a green zone area which has left the patients movement restricted in and out of the unit. We are hoping with the opening of Horatio's garden that this will improve the availability of outside space for the patients.

Supplementary Information

The Ward is supported by therapies, gyms, pool and an Outpatient Department. All of these are on the ground floor and could be visited if the CHC representatives would like to see them.

Patient Engagement

Ward 8

Members were able to speak and hear from a number of patients on the ward during their visit.

All patients spoken with were grateful for the care they received from staff. All patients appeared clean and tidily dressed, however all patients said they were keen to be discharged to care nearer to home where they would have the support of friends and family. For some patients, they said it was difficult for visitors to travel the long distance required to visit them.

Although the standard of food was ok, patients told us the menu was repetitive and could be boring.

Patients said they experienced a lack of privacy. There is a lack of private rooms, and we were told this was important to them as they were long stay patients.

Members were informed by patients that they would appreciate a greater range of activities, as boredom was a real problem for them.

Ward 10

Members were able to speak to a number of patients on the ward. These patients were present in the Ward for rehabilitation either after a Spinal Injury or illness. The majority of patients provided positive feedback of their experiences on the Ward.

Patients commented that the food was good. Staff were praised as was the Ward environment. It was also noted that patients felt that hospital visiting had improved.

There was some negative feedback provided on a number of different aspects. Patients commented that they felt that more staff were needed on the Ward, and one patient further suggested that staff would benefit from further training in respect to equipment handling, as it was explained they watched 3 members of staff try to work the hoist.

The CHC were told by a patient that the drainage in the shower and associated odors from that areas was a concern . Whilst the CHC did not view this area, this is of concern especially as it was a newly built unit.

Praise was given for the provision of the Horatio garden available to patients to use and wander, as part of their rehabilitation. Although children were not allowed to come onto the ward at the time, they were able to go into the garden so that they could visit their loved ones safely. One patient went on to say how they would eat their meals outside in the garden rather than inside. Nevertheless, patients also commented that they wanted improved access to the garden, as CHC Members and staff were told that Ward 8 has a larger part of the garden, but that Ward 10 patients were not welcome to use it.

Patients also commented on the length of their stay on the Ward. Patients felt they were being kept for too long on the Ward due to the length of wait required by patients for Care packages to be arranged and not being able to be transferred to somewhere closer to home

It was noted that all patients were eager to leave the Ward and return home.

Environment

Ward 8

The unit is on the first floor and sign posted from the main hospital corridor. The ward is accessed by a single lift which members were told is difficult to operate for wheelchair patients.

The ward is a locked area. There was a quiet and calm atmosphere in the unit, which was clean, there were not any odors, and the temperature within the unit was comfortable. The unit was tidy and corridors were clear.

Within the unit, signposting was poor, and there was a lack of differential colour coding with the decor. Members observed some puddles near the doors to the garden entrance. There is a small garden for patients, it is essentially a raised board walk with planters which overlooks the road and carpark and in the distance, Penarth Head. Patients congregated around the garden where they were able to make tea and coffee and relax.

There was a provision for a rehabilitation bungalow near the unit to facilitate rehabilitation in a homely environment. However, at the time of the visit the CHC were advised that the bungalow is not currently being used resulting in patients waiting for an extended period of time on the ward to be discharged as care packages are not in place in a timely manner.

Ward 10

On arrival to the ward, we had concerns raised regarding time taken to access the ward which is undertaken by ringing a doorbell. A number of Patients informed members the doorbell isn't always answered in the evening.

Ward 10 is a new Ward, there was a small day room and a larger day room. The smaller room is used for families to meet and the larger room has games, puzzles, tv, books and table tennis. Again, the room is new, extremely neat and tidy.

Each patient had their own tv above their beds so that they could keep themselves entertained.

On leaving the Unit, Members visiting Ward 10 were shown to a separate exit that led straight to the rear of the hospital and near the end of the hospital car park. The walk to this exit was flat and free from any hazards and was wide enough to allow wheelchair access. Had Members had known this entrance was there it would have saved them having to walk through the main hospital to get to the unit from inside. There was no exterior signage from the car park to suggest this entrance was nearby.

Interaction with Staff

Ward 8

Members were able to speak with the senior nurse on duty. They were informed that the unit was nearly fully staffed and didn't have any difficulty in providing a very good service to patients which included medical care, Nursing care, physiotherapy, and occupational therapies. However, care agency staff were employed occasionally.

Frequent Multi-Disciplinary Team's with Social Services were carried out to ensure patients could be discharged as soon as they were ready.

Ward 10

The visiting team spoke with the Ward Manager, who explained that there was a shortage of nursing staff, but they were able to get bank staff.

The visiting team were shown around the Ward and the gardens.

There was also a bungalow just outside the Ward which is being renovated for the patients to use before they leave the hospital, so they can be more confident to go home. CHC Members were told by staff that the Bungalow is not being used yet as it is being renovated

Members and staff raised concerns identified from patients around access to the garden. The CHC were informed a meeting was to be taken place a few days after the visit to hopefully address the issues on the garden.

Summary of Visit

General Findings

Positive Findings

1. Both wards were clean and had a positive environment
2. Praise was given to staff working on the wards

Negative Findings

1. Without exception patients wished their care to be provided from their local Hospital near to the support of family and friends.
2. Patients told us they are in hospital for too long as they're waiting for their care packages to be arranged.
3. Parking is situated away from the main building entrance and would be difficult for disabled visitors. At the end of the visit, some CHC Members and CHC staff were shown the dedicated entrance/exit to the Unit near to the rear car park, however there was no exterior signage from the car park to let patients know it was there.
4. CHC Members were told by staff that the Bungalow is not being used yet as it is being renovated

Ward 8

Positive Findings

1. Patients were clean and dressed
2. Most patients were able to access a small garden area

Negative Findings

1. Whilst the food was okay, patients said that the food menu was repetitive
2. Members were told that a lack of activities left the patients bored
3. Patients commented on the lack of single rooms, patients felt there was a lack of privacy when they needed it. Especially for those who were there for a long time.

Ward 10

Negative Findings

1. Patients told us that access via the doorbell to the ward isn't always answered, specifically in the evenings.
2. Patients from Ward 10 said they were told they couldn't access part of Horatio Garden as it was for only patients on Ward 8.
3. Patients on Ward 10 said there is poor drainage in one of the shower cubicles. Although the CHC did not view this area, it is a concern that it is a newly built unit.
4. Patients felt staff needed further training on handling certain medical equipment, as it was explained they watched 3 members of staff try to work the hoist.

Review of Caveats from previous Rookwood Hospital consultation, 2011

The visiting team took the opportunity to check against the caveats following the public consultation during this visit.

- The UHB to provide a hydrotherapy pool at the UHL for rehabilitation.

Completed. Members viewed this during educational visit in 2021.

- UHB to provide open, recreational spaces.

Partially Completed. Although recreational spaces are open and members have been shown these, such as the gym and garden area, members were told by some patients they couldn't access the whole garden and only a specific part of it. CHC would recommend this issue be resolved for the benefit of all patients, families and visitors.

- Transfer of older people services must be carefully and sensitively managed.

Completed.

- The UHB to provide assurances that services provided to amputee patients will be maintained.

Not discussed during visit. Assurance to be provided to the CHC by the Health Board

- Assurances are required from the UHB that the resources released from the sale of Rookwood Hospital site will be re-invested for these patients.

Not discussed during visit. Health Board to provide a briefing on the process followed in these circumstances so the public has a greater understanding.

- Transfer of patients to Cardiff Royal Infirmary (ward 6) to be undertaken at a convenient time – recognising the traumatic effect on patients who have been on the ward for a significant period of time.

Partially Completed. *Initially the public consultation indicated patients from Ward 6 would transfer to CRI however, this changed to St David's hospital however, the Health Board undertook an emergency closure of Ward 6 and these patients were transferred to the University Hospital Llandough site.*

- The UHB must engage effectively with patients and carers to prepare for the transfer, allay any concerns, to provide all necessary support.

Completed.

- Parking near to unit suitable for wheelchair users.

Not Completed: *Please see comments in main report regarding parking and the dedicated entrance to the Unit.*

- Improve accessibility within UHL to accommodate patients transferred

Not Completed - *Whilst accessibility was praised within the unit environment, concerns were raised, both in the previous educational visit and this visit, around access to the wider community facilities that were previously*

available at Rookwood Hospital to help as part of their rehabilitation. There was an agreement that community transport or a mini bus could be purchased to take patients from this unit out to the surrounding areas as part of their rehabilitation and reintegration. This has yet to be implemented.

Recommendations

The Health Board is asked to consider and respond to the recommendations of the CHC.

1. The UHB to consider its menu options for long stay patients; to make food options less repetitive in nature.
2. The UHB to look at providing a wider range of activities for patients, possibly with the help of volunteers or the third sector
3. The UHB to provide assurances that staff are fully trained in handling medical equipment such as hoists.
4. The UHB to address how they will ensure the ward entrance to Ward 10 is monitored efficiently
5. The UHB to ensure entrances to the garden are kept clean and free from hazards
6. The UHB to resolve the issue raised by patients from both Ward 8 and Ward 10 so both groups are able to fully access the whole garden.
7. The UHB to review the lift access for the most disabled patients.
8. The UHB to provide assurance of how they are working with local authorities and other Health Boards to enable patients to return home in a timely manner with care packages in place.
9. The Estates team to review the shower drainage in Ward 10.

10. Provide a timeframe when the bungalow is to be opened and used by patients as part of their rehabilitation.
11. The UHB to address issues of lack of privacy, with the possibility of offering long stay patients a single room.
12. The UHB to review and provide assurances for the outstanding caveats from the Rookwood Hospital Public Consultation 2011, noted on page 16 within the visit report.

The visiting team would like to thank the family members and carers who gave their time to speak with them during the visit. Thank you also to the staff for their time and assistance in an interesting and informative visit.