

<p>Recommendation 1</p> <p>Healthwatch Kingston notes that whereas most patients engaged with during this Enter and View visit felt well communicated with (67%), some did not. It would be helpful therefore if the Trust continues to explore ways to ensure staff communication with patients attending Kingston Hospital is provided to a consistently high standard across all wards.</p>	<p>We have put plans in place to increase the number and diversity of Sage and Thyme communication facilitators at the Trust – incorporating clinical staff from a range of backgrounds. Sage and Thyme is an evidence-based programme focused on supporting staff working in health settings to use enabling communication strategies.</p> <p>Over the next 6-9 months we intend to gather and further collate existing evidence on communication challenges across inpatient wards as well as other settings with the objective of making a case to put forward enhancing communication as a Quality Priority for 2022.</p>
<p>Recommendation 2</p> <p>Healthwatch Kingston recommends Kingston Hospital continue to review how staff communicate care plans to patients, ensuring consistency, continuity and regularity when communicating.</p>	<p>We recognise that having systems, processes and training in place that enables Kingston Hospital staff to communicate with patients about their planned care and treatment is an area where continuous improvement is needed, and we welcome the feedback in the report on this and the opportunity to respond. Consideration of the examples cited in this report have led to us identify the following specific opportunities that the Patient Experience and Involvement Team together with clinical colleagues will act on:</p> <ul style="list-style-type: none"> - We will use a quality improvement project (QIP) to explore how we can more consistently communicate with patients on planned surgical pathways, focusing on the opportunity we have at the point of pre-assessment to inform and work in partnership with patients. - The Trust has an improvement programme to roll out a new generation of workstations on wheels (WOW) that provide enhanced WIFI connectivity and longer battery life. The Patient Experience and Involvement Team will work with the clinical lead for this initiative to ensure that training and support as part of this role out supports health professionals to use WOWs as an enabler of communicating and making decisions about care in partnership with patients at their bedside.

<p>Recommendation 3</p> <p>Healthwatch Kingston recommends Kingston Hospital explore how medication can be administered more responsively to meet the needs of patients. Also, patients need to understand why they are receiving their medications at certain times.</p>	<p>Medicines administration is a key part of a patient treatment and it is important that patients receive their medicines at the appropriately prescribed times to ensure treatment is effective, but this does need to be delivered with the informed consent of the patient involved. For medicines of critical importance to clinical management, ward staff are be duty bound to support patients to take prescribed medicines or establish why this cannot take place.</p> <p>Where a medicine is not administered or delayed, this is recorded in the patient’s notes with the reason or, if unintended, as a clinical incident report which is investigated to support future safe practice. Kingston Hospital gains assurance of appropriate practice through regular audits of “missed” doses that are carried out and reviewed by the Medicines Safety Group and reviews of key themes such as patient refusal and unavailability of a medicine. It can be the case that a patient will be woken up to take or have a medicine administered if it is considered essential to a patient wellbeing e.g. antibiotics. Other examples are analgesics such as slow-release formulations where a patient may be comfortable and not in pain but failure to administer the medicine on time may give way to pain later, at which point additional analgesia may be needed to “catch up” with the pain.</p> <p>As part of our work to gather and collate evidence of communication challenges we will explore how we can gather further evidence of patients experience of receiving information about medication during their hospital stay.</p>
<p>Recommendation 4</p> <p>Healthwatch Kingston recommends Kingston Hospital explore what additional steps can be taken to ensure the cleanliness of wards in the evening and how patients and staff are empowered to report this, and that appropriate action is taken.</p>	<p>As part of our COVID response significant action has been taken to ensure and monitor the cleanliness of wards across the hospital. All cleans have been elevated to enhanced cleans and PPE compliance and hospital cleanliness is audited weekly in very high-risk areas (monthly in other areas) and reported directly to the Director of Nursing and Infection Control, and EMC.</p>

<p>Recommendation 5: ward environment – visitor noise.</p> <p>Healthwatch Kingston recommends Kingston Hospital explore what additional steps can be taken to ensure that groups of visitors are mindful of noise levels in wards, and how patients and staff are empowered to report this, and action is taken.</p>	<p>As part of our COVID response to NHSE guidance on visiting we have introduced a booking system to coordinate the flow of visitors on hospital wards and a visitor contract that sets out our expectations of visitor behaviour and the steps that Kingston Hospital is taking to keep everyone safe. Visiting is limited to named individuals agreed with the patient. Additional visitors can be agreed on compassionate and also therapeutic grounds in adult wards, maternity and children’s services with the agreement of senior clinical staff.</p>
<p>Recommendation 6:</p> <p>Healthwatch Kingston recommends Kingston Hospital explore what additional steps can be taken to ensure adequate preparation of patients ahead of receiving their meals and that vulnerable patients have access to consistent assisted eating.</p>	<p>Infection control requirements throughout the pandemic curtailed the range of initiatives in under development and in place to support patients for mealtimes. Where possible ward staff have welcomed visitors to support their family member with meals, within the context of visiting guidelines.</p> <p>We look forward to welcoming back our 70 regular volunteering dining companions in July 2021. We are currently evaluating a pilot programme that extended the dining companion scheme to staff and will explore how this will be moved forward together with our ‘Supported Mealtimes’ initiative once the annual nutrition and hydration audit has taken place in August 2021. The Supported Mealtimes Initiative launched prior to the pandemic reduced clinically focused activity during mealtimes to enable staff to spent time with patients and offer support with eating and drinking where needed.</p>
<p>Recommendation 7:</p> <p>Healthwatch Kingston recommends Kingston Hospital explore what additional steps can be taken to ensure that patients are helped to choose their meals from a written menu, if they are capable and that hot food choices are serviced hot.</p>	<p>Since Healthwatch Kingston’s visits in 2019/2020 the hospital has implemented a patient meal ordering system PMOS. Hostesses have been trained to support patients to make meal choices, offer written menus and to use pictural aids to support decision making. Nurses are involved in meal choices for vulnerable patients unable to independently make a meal decision.</p> <p>Food temperatures are checked at every meal service, regularly monitored and also reviewed as part of the annual nutrition and hydration audit. Results have always been green.</p>
<p>Recommendation 8:</p>	<p>KHFT is committed to valuing and responding to staff views on how the working environment can be improved. We have a Health and Wellbeing Steering Group chaired by the Trust’s</p>

<p>Healthwatch Kingston notes that nurse to patient ratios at Kingston Hospital meet nationally agreed standards and supports continuation of this, but if hospital staff are at times needing to work longer than usual hours, then we recommend that hot food be made available beyond 3pm.</p>	<p>Deputy Director of Nursing tasked with listening to and putting actions in place that respond to staff concerns. We responded to staff requests for greater access to food on site by offering Kingston Hospital Charity funded evening meals from outside catering providers throughout wave 1 and 2 of the Covid Pandemic. Our onsite Costa is open until 7.30pm for a range of hot drinks and sandwiches and the Trust has a hot food at night steering group attended by clinicians that is exploring what more can be delivered on site, or facilitated for staff that would meet staff food preferences.</p>
<p>Recommendation 9: Healthwatch Kingston repeats our recommendation from our ‘What was leaving hospital like?’ report by recommending the Trust continue to explore ways to further improve staff communication so that all patients, those that help them at home (for example a friend or carer) and particularly people who have had unplanned stays in Kingston Hospital, feel more involved in the preparation of their discharge.</p>	<p>In terms of discharge planning, we recognise that this in area where continual improvement is needed, and we have a range of programmes in place to review and build on the learning from our experience throughout the Covid-19 pandemic that will address specific elements of the patient pathway. These include:</p> <ul style="list-style-type: none"> - a collaborative quality improvement project involving both acute and primary care practitioners, together with patients and carers, to improve the discharge summary documentation patients receive when they leave hospital. - work as part of the hospital’s Urgent and Emergency Care Board to implement the hospital’s discharge policy and further collaboration with community colleagues around discharge planning. Findings from the Healthwatch Kingston report ‘<i>What was leaving hospital like</i>’ are contributing to the patient voice in this project. <p>KHFT will report to Healthwatch partners on the progress of these programmes of work in Autumn 2021.</p>