



Healthwatch Lambeth Enter and View King's College NHS Foundation Trust Paediatric Ward Visit Report

April 2019

About Healthwatch Lambeth



**Healthwatch
Lambeth is the
independent health
and social care
champion for local
people.**

We work to ensure your voice counts when it comes to shaping and improving services. We address inequalities in health and care, to help ensure everyone gets the services they need. We are a charity and membership body for Lambeth residents and voluntary organisations.

There are local Healthwatches across the country as well as a national body, Healthwatch England.

About Enter and View Visits

Our Enter and View programme involves visiting publicly funded health and social care services in Lambeth to see what is going on and talk to service users, their relatives and carers, as well as staff.

Every local Healthwatch has a legal responsibility to carry out an Enter and View programme. However, we are not inspectors. Instead, we focus on what it is like for people receiving care. We provide extra eyes and ears, especially for the most isolated and vulnerable. Our visits are carried out by trained and police checked volunteers.



Visit overview

Service Adults' Emergency Department, Paediatric Short Stay Unit, and Katherine Monk. All services are based at King's College NHS Foundation Trust, Denmark Hill, London SE5 9RS

Registered provider King's College NHS Foundation Trust

Date of visit Thursday 18th October 2018 between 4:00 and 6:00pm.

Enter and View Team Natalia Sali (Healthwatch Lambeth) and 15 young people authorised representatives:

Chelsea Thompson
Chidimma Nwankwo
Fatima Ahmed
Jasmine Reynolds
Lydia Jarram
Maab Ezeldin
Manuela Goodman
Martina Grace Nassozi
Matin Alapafuja
Mausam Shah
Mia Cooper-Ueki
Naomi Kolawole
Neha Palihawadana
Victoria Odubote
Zoe Munoz

Service liaison link Dr Hannah Baynes,
Paediatric Consultant



Executive Summary

Fifteen (15) young people visited three wards at King's College Hospital (KCH) on 18 October 2018. They visited the Adults Emergency Department; Paediatric Emergency Department and its waiting area; and Katherine Monk Ward where young people aged 16-19 years old are assessed. They interviewed 12 people (5 staff, 5 relatives, and 2 patients) as well as observed the environment, facilities, and information and communication materials.

Relatives and patients said that the quality of services is of good quality. They said that the staff are easy to talk to and are approachable, and that they don't hesitate to ask them questions. They also felt they are respected and listened to. Whilst care is of good quality, it was found that during busy times, there could be shortage of staff. It was also found that they find the waiting time for blood tests very long, which could be up to two hours.

The staff said that they are happy with teamwork with colleagues and also work with other hospitals. They said that they feel they are listened to and their suggestions on how to improve the service are being considered. They also said that young people need to be heard and be given opportunity to have their inputs in how the services are provided and that young people's engagement should be embedded in service provision such as being consulted on their care and how the environment could be improved.

Patients and relatives said that sometimes there were mixed messages from different professionals and that whilst information is available at the outset, they felt that they could be more informed especially on what will happen next in terms of treatment/care.

The overall environment was found to be welcoming, safe, and well maintained. Basic necessities are being provided and there is a wide range of activities for young children.

There is also access to interpreters who can be booked, or staff who can speak other languages. There is a good system for children with special educational needs and disabilities.

However, it was felt that the focus was on younger children and that there was nothing for older children, teens, and parents. For example, in children's waiting area, all toys were for very young children (under 5). At the time of the visit, there were a few older children who appeared to be bored. It was suggested that age-appropriate activities be provided such as a sofa and computer or DVD player, and a variety of games (e.g. cards, board games).

In addition, it was recommended that young people from 15 years old should be provided a separate ward so that they can socialise with their own age range. Similarly, it was felt that it could be intimidating and scary for young people to be in the adults' ward. Young people suggested a separate ward or a bay so they can be with the same age group.

Lastly, there was a wide range of leaflets in waiting rooms. It was recommended to include information materials that convey the message that the hospital is there to help regardless of the patients' situation or condition. These could be general messages aimed at different patients including those with mental health issues and people from the Lesbian, Gay, Bisexual and Transgender (LGBT) community.

In summary, it was found that the overall experience of care and staff attitude are of good quality. There are things to be improved in communication, engagement, and entertainment.

Purpose of visit

The visit was aimed at understanding how 'youth-friendly' the services at King's College Hospital from the perspective of young people interviewers, patients and their families, and staff. As most families in Lambeth use the hospital, we feel that it is important to ascertain their views in order to influence improvements and eventually have better experience of KCH services.

Location

The Denmark Hill site of King's College NHS Foundation Trust is located in Camberwell, South London. It is well served by public transport.

About the services

Emergency Department

King's College Hospital's Emergency Department is open to anyone who needs urgent hospital care because of an illness or accident. It is also often known as Accident & Emergency, A&E, or Casualty.

Paediatric Short Stay Unit

The Children's Outpatient Department is a purpose built department where children and young people are seen in the clinic setting by specialists from all across Child Health. It is open 09:30am - 5:00pm Monday to Friday. There are a wide range of clinics run from this department, including specialist clinics (such as neurosurgery) that would not be run in local hospitals.

This unit is located adjacent to Kings' Emergency Department and is a part of Ambulatory Paediatrics. It has five bed spaces and one cubicle. The Unit admits children and young people aged 0 - 16 years for acute medical and surgical disorders which are likely to require less than 48 hours admission such as vomiting, breathing problems and fractures.

Katherine Monk Ward:

Katherine Monk Ward is a 26-bed ward which provides care for patients having surgery. We usually see patients who have been admitted through the Emergency Department.

In the ward is the newly-established King's Adolescents Outreach Services (KAOS) which has a youth worker who assesses the needs of young people from 16 to 19 years old as they are admitted on adult wards. The aim is to provide a specialist, holistic service to young people, acknowledging that they have social and emotional needs.

Methodology and participants

15 young people who all reside in Lambeth attended a day's training on how to conduct an Enter and View visit. They designed the interview guide for patients and relatives as well as an observation checklist. The checklist was based on Department of Health's 'You're Welcome' quality criteria for young people friendly health services.

Permission to conduct the visit was sought by Healthwatch Lambeth in conjunction with the lead patient engagement officer who also notified all relevant staff members of the scheduled visit.

On the day of the visit, the 15 young people met at the main entrance at the helpdesk in Jubilee Wing at 4:00pm. The engagement lead for KCH accompanied them as they walked from Jubilee Wing to the Emergency Department. They had the opportunity to reflect on what it is like to come to the department on foot. At the Emergency Department, they were met by KCH staff who led each group to their respective wards.

The young people were led to a room to meet KCH staff who facilitated a 15-minute briefing. They discussed the different wards to be visited and informed the young people interviewers of health and safety measures that need to be observed. The Healthwatch representative also explained the purpose of the visit which was mainly to ascertain the youth-friendliness of the wards.

The young people were divided into three groups and each group was supervised by hospital staff. In order to conduct interviews, the young people approached patients and relatives at the waiting area to seek

permission. It was found that most, if not all, were willing to be interviewed. However, young people were also cautious and sensitive as the patient and relatives might not be willing to be interviewed. In such cases, they respected their views.

One group observed the ambulance arrival and also had a peek at the adults emergency department. The same group of young people observe the children's waiting area and were shown the different rooms in the paediatric emergency department.

Another group visited the Katherine Monk ward and observed how 16-19 years old young people are supported on adult wards by the staff of King's Adolescent Outreach Service (KAOS). Katherine Monk Ward provides care for patients having surgery who have been admitted through the Emergency Department. The third group visited the adults emergency department.

They had enough time to observe how services are given to patients and the interaction between relatives and staff, in addition to observing the environment of all the three wards, the information available and IT facilities.

The wards became busy halfway through the visit so it was decided to end the interviews. The young people and staff convened for half hour where young people shared their findings. It was also an opportunity for the staff to give their views or update young people of the current developments and future plans related to the findings.

Findings

Access to information

The waiting room had leaflets and posters, but none were in other languages. There were no leaflets specifically for young people. There was no poster on HIV once you come into the A and E. There were no suggestion boxes.

Recommendation 1

There should be a general message to young people that the hospital can help and that it does not matter who they are, particularly in relation to mental health and self-harm.

There should be a clear welcome to young people from LGBT communities. Signages should be in different languages and made bigger so that they can be seen well.

Patient Engagement

Staff said that what matters to young people is honesty and being treated as individuals. Young people also want to be heard and approached like peers. Staff said that some of their colleagues don't appreciate how much young people want to be involved and how much inputs they can give.

Recommendation 2

There should be opportunities for young people to share their views about the care they receive and decisions on their treatment. They can also input their views on how the environment can be more youth-friendly.

Space, waiting area, and room environment

There is decent amount of space but could be quite packed during busy times. There were not enough chairs to sit and wait. Some found that the chairs are not comfortable enough. There was no information on waiting times which would be helpful for patients and relatives.

There were no books, free Wi-fi, and entertainment for older children. Phone

charging sockets were available but not clearly signposted.

Day room has decent colour though not that colourful and can be a bit dull. There were stickers and decors on ceilings and bubble machines which help lighten up the mood, as it is appreciated that being in a hospital could be scary for both patients and relatives. The environment was generally welcoming but not for teens.

The room smelled clean but could do with some more bins. At the time of the visit, there was a spillage on the floor.

There were lot of beds on the corridor leading from the main A and E ambulance entrance to the ward.

Recommendation 3

The waiting areas can be improved with more windows. Paintings can be hung on the wall to make it more relaxing for patients and relatives. The room temperature should also be monitored as it could be too warm. The beds along the corridor from the ambulance arrival are to the ward should be cleared.

Recommendation 4

Add some colouring books and new toys for children; computers and sofas for young

people; and some games to play - e.g. board games and playing cards.

Introduce some activities for parents as well as older children such as groups for socialisation so that they won't get bored.

Safeguarding and confidentiality

Staff were aware of their safeguarding protocols where all safeguarding issues are referred to the senior officers. Relatives and patients felt that the environment is safe and generally mindful of confidentiality.

For young people's mental health one to one session, it was felt that it might be better to have it as a group, not necessarily to talk about mental health but more general topics.

There were curtains but conversations could outside so there is lack of complete privacy.

Recommendation 5

Allocate more private rooms for patients to discuss their issues.

There should be a different ward for 16 to 19 years old as it could be scary for them to be in adults wards.

Staff interaction with patients and parents

Communication from staff was clear and understandable. Staff are also very friendly and inviting towards young people and generally respectful and caring. In triage, they communicate well and engage with parents.

However, it was said that patients and carers were given mixed messages by different health professionals. For example, they are told of the health staff who will see the patient but the information is limited and they don't know what will happen next or what the treatment will entail. They then ask questions but it could be through the next

staff who was not involved in the initial briefing.

Recommendation 6

Improve the verbal communication with patients and relatives by informing them of the details on the treatment/care, tests to be done, health staff to see, and how long it will take. Staff should also encourage them to ask questions or clarify things.

Toilets and sanitary

Signs were visible but for some, they were not clearly seen. The toilets were relatively clean

but could be cleaner. There were long queues in the main toilet downstairs. Sanitary items were available at every location.

Recommendation 7

Add some more cubicles and maintain cleanliness of the toilets. As they are frequently used, they should be cleaned regularly during the day.

Spiritual room/chapel

No chapel or spiritual room that is in clear sight, or if there is one, it is not promoted enough. It should be peaceful place for patients to connect with their faith.

Recommendation 8

Improve the information and signage so people know where the spiritual rooms are.

Refreshment

The food served to patients is nice. There is enough free water. There are refreshments in the main waiting area and none in the children's waiting area though it is close to the main waiting area. There is no vending machines.

Recommendation 9

The food is good so keep it up. Add some vending machines.

Recommendations & Responses from KCH

Three young people presented the findings and recommendations to KCH staff and KCH came back with the following responses to the recommendations.

Recommendation 1

There should be a general message to young people that the hospital can help and it does not matter who they are, particularly in relation to mental health and self-harm.

There should be a clear welcome to young people from LGB&T communities. Signages should be in different languages and made bigger if possible.

Response

The team in the Emergency Department is currently reviewing the literature/information available for young people that visit the hospital and department. This will include improving information about mental health and other general health and wellbeing topics. We will also include more information about where to go for help in the community.

There is a plan to survey young people attending in the form of an "adolescent health questionnaire" to capture more widespread views on areas needed for improvement.

A number of the Paediatric (Children's Doctors and Nurses) and Adult team members are already wearing the NHS Rainbow badge and there is a plan to roll this out across the trust

Recommendation 2

There should be opportunities for young people to share their views about the care they receive and decisions on their treatment. They can also input their views on how the environment can be more youth-friendly.

Response

We already have several opportunities in place to hear the views of young people about the care they receive including:

- Friends and Family survey on inpatient wards and in the Emergency Department
- Completion of feedback on iPad or comment card for those young people visited by the King's Adolescent Outreach Service (KAOS) team on adult wards
- A young inspector's programme working with local schools
- Weekly school visits to the Emergency Department by local schools

We would like to develop a programme of regular sessions for young people where they can share their views on care they receive throughout the hospital and help make services more age appropriate. We hope to work with Healthwatch Lambeth in taking this forward.

Recommendation 3

The waiting areas can be improved with more windows. Paintings can be hung on the wall to make it more relaxing for patients and relatives. The room temperature should also be monitored as it could be too warm. The beds along the corridor from the ambulance arrival to the ward should be cleared.

Response

The waiting area is being redesigned with new chairs. Also, information on waiting times is available from clinical staff when requested as we can explain why the delays are happening. We will explore ways to make it clearer why patients are having to wait. The issue regarding beds in the corridor will be fed back to the facilities department.

Recommendation 4

Add some colouring books and new toys for children; computers and sofas for young people; and some games to play - e.g. board games and playing cards.

Introduce some activities for parents as well as older children such as groups they can go to socialise so they don't get bored.

Response

We are considering more IT based options to keep young people occupied whilst waiting, as well as posters suggesting suitable health-based apps to try. King's Charity is funding free Wi-fi to patients and visitors which is launching shortly and will make it easier for patients across the hospital to use their phones.

Recommendation 5

Allocate more private rooms for patients to discuss their issues.

There should be a different ward for 16 to 19 years old as it could be scary for them to be in adults wards.

Response

The adolescent room in the Paediatric Emergency Department is currently being redesigned to make it more user friendly. We are keen to get the input of young people in doing this. There are rooms on some wards and in the Emergency Department that can be used for more private conversations

In the future we are hoping to have a young person's ward (16-19 year olds) in our new Children's Hospital.

The KAOS service is designed to support 16-19 year olds on adult inpatient wards and this service is already running with good feedback

Recommendation 6

Improve the verbal communication with patients and relatives by informing them of the details on the treatment/care, tests to be

done, health staff to see, and how long it will take. Staff should also encourage them to ask questions or clarify things.

Response

The team in the Emergency Department already aim to engage young people throughout their care. However, staff's understanding of the need to share information with young people does need to improve and this will be discussed with the team. We will aim to improve our explanations to young people about who is caring for them and the different treatment and care they receive.

The Emergency Department is in the process of developing two forums to discuss how to improve the experience of young people in the department. One to look specifically at those young people attending with mental health issues and the other to look at overall experience

Recommendation 7

Add some more cubicles and maintain cleanliness of the toilets. As they are frequently used, they should be cleaned regularly during the day.

Response

Housekeeping services are provided 24/7 within the Emergency Department and we ask visitors to alert us to any problems as soon as they find them

Recommendation 8

Improve the information and signage so people know where to access it.

Response

We will make the signs bigger and more visible so they can be clearly seen. We can produce other information about our chaplains and how to speak to someone. At the moment, if we identify that a young person needs to pray or see one of our chaplaincy team we can arrange this 24/7.

Recommendation 9

The food is good so keep it up. Add some vending machines.

Response

We are waiting for vending machines to arrive in the Emergency Department that will supply healthy snacks and drinks.

Conclusion

Three important things were identified and these relate to care, communication and engagement, and entertainment.

First, patients and relatives found the care satisfactory. They appreciate the attitude and helpfulness of staff. Relatives are happy with the care being received and the respectfulness of all staff.

Second, relatives and patients said that the staff communicate with them. However, it appeared that this has to improve. For one, patients and relatives should be fully informed about the care/treatment including what to expect and how long it will take.

In terms of participation, staff said that young people can be engaged better. They said that young people could input on how services are provided and how to make the wards more youth-friendly.

Lastly, whilst there were enough activities for young children in the waiting area, teens tend to get bored as there is nothing for them. They felt that they could interact more with people of their age. They also suggested a separate waiting area where they can socialise with other teens.

Whilst we could clearly see the effort that had been made to make the physical environment child-friendly, we felt that more could be done to cater for the needs and preferences of young people. These were particularly in relation to how information is presented and made appealing, the choice of entertainment available and changes to the décor of the adolescent rooms to make them more youth friendly.

Acknowledgement

Healthwatch Lambeth would like to express sincere thanks to the 15 young people who took part as interviewers and observers. They have shown professionalism and diligence and have contributed their insights to this piece of work.

Thanks to:

Chelsea Thompson
Chidimma Nwankwo
Fatima Ahmed
Jasmine Reynolds
Lydia Jarram
Maab Ezeldin
Manuela Goodman
Martina Grace Nassozi
Matin Alapafuja
Mausam Shah
Mia Cooper-Ueki
Naomi Kolawole
Neha Palihawadana
Victoria Odubote
Zoe Munoz

Thank you to the schools of those young people:

Christ the King Sixth Form
Dunraven Sixth
La Retaite Roman Catholic's Girls School
South Wimbledon High School
St. Martin's School

We thank the staff of King's College Hospital for the cooperation and their openness and genuine intention to engage young people in order to improve services.

Thanks to:

Daisy Robson, Staff Nurse
Katherine Monk Ward and KAOS link nurse

Dr Fleur Cantle
Consultant in Emergency Medicine and Major Trauma

Dr Hannah Baynes
Paediatric Consultant
Chair, RCPCH Start Executive Committee

Lucy Hamer
Patient Engagement and Experience Manager
King's College Hospital NHS Foundation Trust

Michelle Sayers-Jones
Paediatric Emergency Department
Urgent Care, Planned Care & Allied Clinical Services

Healthwatch Lambeth

336 Brixton Road
London, SW9 7AA

Tel 020 7274 8522

Text 07545 211 283

info@healthwatchlambeth.org.uk

www.healthwatchlambeth.org.uk/enterandview

Registered charity no: 1153444

Registered company in England and Wales no: 8430436

