

## TRUST BOARD PART I – SEPTEMBER 2012

 Agenda Item Number: 156/12  
 Enclosure Number: (10)

<b>Subject:</b>	<b>Patient Safety Walkabout (August 2012 position)</b>
<b>Prepared by:</b>	Fiona McNeight, Head of Governance and Patient Safety Tracey Stenning, Governance Compliance Manager
<b>Sponsored by:</b> <b>Presented by:</b>	Julie Dawes, Director of Nursing Julie Dawes, Director of Nursing
<b>Purpose of paper</b> <i>Why is this paper going to the Trust Board?</i>	Regular Reporting For Information / Awareness
<b>Key points for Trust Board members</b> <i>Briefly summarise in bullet point format the main points and key issues that the Trust Board members should focus on including conclusions and proposals</i>	The Board are asked to note the key findings of the visits to the Cancer and MOPRs Clinical Service Centres.
<b>Options and decisions required</b> <i>Clearly identify options that are to be considered and any decisions required</i>	Nil decisions required.
<b>Next steps / future actions:</b> <i>Clearly identify what will follow the Trust Board's discussion</i>	Ongoing reporting of safety walkabouts
<b>Consideration of legal issues</b> (including Equality Impact Assessment)?	Considered – None.
<b>Consideration of Public and Patient Involvement and Communications Implications?</b>	Considered – None.

Two patient safety walkabouts were undertaken in August 2012 within the Cancer and Medicine for Older People, Rehabilitation and Stroke (MOPRS) Clinical Service Centres. The walkabouts highlighted the following:

## **Cancer**

### **Oncology Day Unit**

- Recognition of difficulties in recruiting chemotherapy trained nurses. Actions are being taken to maintain patient safety and experience. These include the use of temporary workforce, in-house training of oncology nurses to provide chemotherapy and cross-cover by chemotherapy trained nurses who are working in other areas of the Trust.
- The day unit looked bright, open and calm despite activity levels.
- Patient waiting room in the day unit is small with no entertainment facilities. This results in overcrowding at times of high patient through-put. Patients stated that the care was excellent however, the waiting times were long. Patient feedback suggested provision of reading material which is changed regularly and the possibility of having pagers so they can leave the department without fear of missing their appointment time. Provision of a TV in the waiting room to also be considered. This would improve patient experience whilst waiting for their treatment.
- Patients raised the issue of privacy in the open day unit and noted that the chairs were uncomfortable when used for long periods of time. These issues are being explored further.
- Excellent emergency ward area for patients having serious problems in the Oncology Day Unit and very good safety features for treatment.

### **Radiotherapy Unit**

- State of the art Radiotherapy Unit noted.
- Actions are being taken to reduce the number of agency radiotherapy radiographers.
- Highly advanced control and patient safety in the facilities noted.
- Staff are very enthusiastic.

## **MOPRS**

- Overall, the walkabout was very positive and the improvements made since the last walkabout were noted.
- There were good communications observed in relation to falls through handover and documentation.
- A patient raised concern over communication and this was addressed immediately by the Matron.
- There have been improvements in ward tidiness.
- The delivery of stock was noted to be a potential trip/fall hazard as the stores are being left in the corridor. This is currently being addressed.
- The new call bell system was noted which has addressed the patient safety issue raised at previous walkabouts.