

Enter & View Visit to Runfold Ward, Farnham Hospital - Stroke
Pathway

Name and address of unit visited

Farnham Stroke Unit (Runfold Ward). Farnham Hospital. Hale Road. Farnham. Surrey GU9 9QL

Day, date and time of visit

10th December 2014 at 11.00am

Authorised Representatives

Gareth Jones and Jill Bowman supported by Jane Shipp

Contact

Healthwatch Surrey 01483 533043

Service Provider

Virgin Care

Met by Sue Deane, Matron.

Disclaimer

Please note that this report relates to findings observed on the specific date as above. The report is not a representative portrayal of the experience of all service users and staff, only an account of what was observed and contributed at the time

Purpose of the Visit

To revisit the provision of in-patient stroke rehabilitation in community hospitals as changes have taken place following the Stroke Pathway Report in 2012.



Pathway Activity Information

Activity year 2011/2012

49 patients received stroke rehabilitation
25 patients were over 65 years
24 patients were under 65 years
Patients were admitted from Frimley Park Hospital and from Royal Surrey County Hospital
36 patients went home, 8 to a nursing home, 4 to acute hospital & 1 unrecorded
The average length of stay was 35 days
11% of bed capacity is for stroke Patients.

Activity year 2013/2014

87 patients received stroke rehabilitation
69 patients were over 65 years
18 patients were under 65 years
Patients were admitted from Frimley Park Hospital and from Royal Surrey County Hospital
64 patients went home, 16 to other NHS hospital provider and 3 unrecorded
The average length of stay was 36 days
25% of bed occupancy is for stroke patients

First Impressions - access

By car, the parking is free. There is good public transport with a train station nearby and frequent buses which stop outside the hospital. The unit is in a modern building and the reception area was well lit, warm and clean. The Receptionist was very welcoming and was expecting the Healthwatch Volunteer Authorised Representatives. There is a small cafe in the reception area to serve hot and cold drinks and snacks.

The Runfold Unit.

Met by Sue Deane, Matron. The unit is on the first floor, with easy access via a lift or stairs. Well signposted. 42 beds are commissioned, 11 are for stroke rehabilitation. Visiting times are 2.00-4.30 and 6.30-8.00 with meal times protected. Medical cover is provided 24hours a day.

There is an OT kitchen and physiotherapy gym on another floor where there is also a garden. The ward is bright, well lit and well decorated, and all rooms are ensuite. There is a sitting room and separate dining room where patients are encouraged to eat their meals. The food is chilled meals chosen on the day, with an appropriate choice. There is a

Dementia friendly plan to put pictures of toilets on the appropriate doors, as well as a change of colour for the toilet seats to make recognition easier.

A good selection of information leaflets was available including leaflets from the Stroke Association. Each room has a welcome pack from Virgin Care which patients appreciated as well as an information folder with useful information but no pictures. This was felt to be not as user friendly as one previously seen in another unit.

There is an equipment store for home adaptations. The Stroke Association will be coming in each week to give information to patients, carers and families. This is a new service. A further new service is planned for 2015 with AGE UK coming in to offer befriending and visiting services, which will continue into the community. There are also therapy groups and a breakfast club currently running.

Observations

We noted the patients sitting together to eat their lunch, in the dining room with staff present.

Pathway Experience

Currently the Unit is fully recruited for nursing staff. There are 7 staff on in the morning 4 in the afternoon and 4 at night.

A comment was made regarding the change to Virgin Care, this has not brought any reduction in staffing, but it has brought more of a business skills and customer care focus.

Admission can be planned for 7 days a week, with the therapy provision 7.30am - 5.30pm, 5 days per week, Monday - Friday. Patients can have weekend leave as their care progresses. Currently there is no wait for a stroke rehabilitation bed.

Information on admission from the acute hospitals is different. RSCH has a sharing agreement for electronic discharge information whereas Frimley Park does not. Patients in Frimley Park Hospital who live over the border into Berkshire do not come to this unit routinely, but are commissioned on a cost per bed basis via the individual funding review process.

Patients receive 6 weeks of rehabilitation followed by OT follow up and a 6 month review by a Physiotherapist. Waiting time for Physiotherapist and SALT is less than 18 weeks.

There is 2.5 WTE SALT cover for the hospital, this is down by a third. Swallowing is the predominant issue as more patients are coming from the acute sector with PEG feeding tubes or NG tubes. They use SALT assistants and volunteers which helps with recruiting to these posts.

Social Services for Surrey is on site, which improves the organising of discharge packages and causes less delay. Hampshire Social Services is not on site. Discharge can be delayed when a package of care is required, depending on who is funding. Self-funding patients with family involvement have more choice.

There are problems for Stroke patients who live in rented accommodation as it can be difficult to arrange adaptations to the home.

Conversations with staff and patients

A female stroke patient who had been an inpatient for 4 months and had no sitting balance for swallow at first, will be discharged to a care home. She praised her stay in the ward as a good experience. She will be returning for weekly physiotherapy.

A male patient who came from Frimley Park Hospital has spent a month in the ward. He praised the nurses and therapists and said the experience had been a good one.

A female patient who had been in Frimley Park Hospital and St. George's Hospital prior to admission also felt it had been a good experience. She had no sitting balance at first but now was more mobile. She liked the single room and appreciated not having to mix.

A female patient had been in Frimley Park Hospital for a week, very happy there too. She was transferred to Farnham and been on the unit for 3 weeks. She had lost her balance, but now walks with a stick. She will be discharged home to the care of her husband, and has weekly physiotherapy at home arranged.

Example of good practice

Carers are also 'prepared for discharge', and asked to come into the discharge meetings.

Care homes can refer clients for community therapy and outreach staff will offer training on positioning and hoists for staff there.

Recommendations

- The transition from acute hospital to be made safer with better communication to improve the pathway experience for patients and carers.
- Hampshire council to follow Surrey and be on site to deal with discharge planning.
- Age UK and Stroke Association coming in to meet patients and carers to assist transition into the community to be replicated in all community hospitals

Response from the Service Provider Virgin Care (Susan Joyce)

Medical cover is provided via a Service Level Agreement with Frimley Park Hospital, and an out of hours service is in place.

The project with Age UK offering befriending and visiting services is funded by Virgin care and is running across all of the community hospitals as a pilot.

Report reviewed and authorised by:

Robert Hall

Enter and View Co-ordinator, Healthwatch Surrey