

## 15 Steps Visit Outcomes 2018

Visit Date	Area	Team	Issues	Actions	Positives
March 12 Visits Planned					
12.3.18	Chest Pain Pathway: ED Reception Streaming AECU Resus and Majors	Paul Moore Stephanie Anstess Morgan Thanigasalam	Not enough seating in reception for volume of patients Confusing signage re red chair in reception Food/drink not readily available for patients One patient complained about not knowing what was happening to her Central control room in ED 'compact' and very crowded Concern raised re 'surface' available for patients at risk of PUs	Need more chairs in reception HON and TVNC to audit pressure area care in ED Availability of food discussed with Matron/HON	Staff very busy but helpful and welcoming across all areas Positive feedback from EMAS and patients Patients appeared comfortable and well cared for. Staff knowledgeable re chest pain pathway
13.3.18	Fractured Arm Pathway ED X-Ray	Kerry Beadling-Barron Trevor Hammond Sharron Adey	Information in ED reception out of date Confusing signage about red chair that does not exist Lack of wheel chairs for patient use No local resolution for immediate patient concerns in ED - referred directly to PALS Signage to X-Ray could be improved	PALS issue escalated to HON Signage issue escalated to HON	Staff professional and approachable Positive feedback from patients
13.3.18	ED/EAU Alcohol Pathway	Paul Robinson Tina Hymas-Taylor Sharron Adey	Confusing signage in reception with regard to which chairs to sit on Ward board not completed in ED Staff struggling to meet patient need in timely manner Long ambulance handover times observed ED not ideal area to manage patients under the influence of alcohol Difficult to maintain privacy and dignity in ED - additional trollies.	None identified due to pressures in the department Plan to visit again	Areas under extreme pressure especially ED - staff doing their best. EAU felt calmer
15.3.18	Radiology	John McDonald Phil Bolton/Carl Miller	Uniform policy not consistently adhered to Access to patient information and staff/patient learning boards could be improved Cleanliness of patient toilets not up to standard. Hand gel dispensers broken	Patient toilet cleaning to be addressed with Medirect Increase availability of information Broken hand gel dispensers to be repaired	Welcoming environment, clean and uncluttered, staff friendly, professional and helpful Positive staff/patient interactions observed - caring compassionate and in line with CARE values Positive feedback from patients. Receptionist singled out for particular praise.

19.3.18	PCI Pathway Cardiac Catheter Suite	Suzanne Banks Rosie Dixon	Unit chilly Magazines old in waiting areas	Explore possibility of use of patient warming systems Discuss provision of magazines with volunteers	Staff pleasant and helpful, area clean and well ordered Good safety culture noted in the dept. Positive staff/patient interaction observed
21.3.18	Day Case	Simon Barton Yvonne Simpson Sue Holmes	None identified	None	Staff friendly and welcoming Area clean, calm and tidy, Positive feedback from patients
21.3.18	ED Seizure Pathway	Andy Haynes Shantell Miles	Link seizure pathway to ED section on Intranet Check dosage of Phenytoin for adults and peds - only 1 strength available Flagging patients with a history of epilepsy and Learning difficulties	Seizure pathway linked on intranet	Clean, organised, calm. Staff friendly and welcoming Privacy and dignity maintained Staff knowledgeable with regard to seizure pathway
26.3.18	Woodland Ward/ED/EAU	Peter Wozencroft Penny Cole Angie Emmott	EAU entrance cluttered and door to kitchen propped open. Unsupervised access/exit to ED/EAU which may cause problems for confused patients Ward boards not up to date.	No specific actions identified	Staff in all areas warm and friendly. Evidence of good infection control practices on Woodland Privacy and dignity maintained in ED and EAU
26.3.18	AECU/ED	?	Resus checks not happening daily Linen trollies in ED entrance.	Issues escalated to NIC at the time of visit	Busy but calm and in control Patients appeared well cared for and gave positive feedback Staff welcoming and friendly
27.3.18	Ward 21 Pathway 22	Shirley Higginbotham Sarah Addelese Ann Mackie	Felt very clinical External door to corridor broken MDT room requires self closing mechanism TTOs hindering timely discharge	Door escalated to contract management team due to length of time it took to get it repaired. Signage and posters in process of being replaced following visit.	Staff welcoming and friendly Calm amend controlled Good staff/patient interactions noted ward board up to date and useful information displayed on the walls
<b>April 10 Visits Planned</b>					
8.4.18	Day Case	Simon Barton Yvonne Simpson Sue Holmes	Cluttered around nurses station Alcohol gel not easy to find Signage only in English Damaged chair in examination room	Issues discussed with ward leader and Matron	Area clean calm and orderly Staff welcoming and friendly Patients gave positive feedback Good teamwork noted
16.4.18	EAU	Neal Gossage Yvonne Christley	1 patient noted not to have call bell within reach and 1 patient was felt could have been more comfortably positioned. A set of weighing scales had been left near the nurses station making the area cluttered.	Ensure no clutter at nurses station All patients to have access to their call bells Ensure all patients are comfortably positioned.	Area clean and tidy. Staff welcoming despite the 'busyness' of the ward. Good interaction observed between staff and patients. An efficient and safe clinical handover observed between ED and EAU

17.4.18	Stroke Pathway ward 54	Tim Reddish Marie Sissions	None identified	None	Staff welcoming and happy to talk Positive staff/patient interactions observed. Environment clean and tidy Team passionate about delivering great care
23.4.18	Woodland Ward	Peter Wozencroft Penny Cole Angie Emmott	None noted	None identified	Clean calm and tidy. Staff warm and welcoming 'lovely touches to reflect patient need' Evidence of good infection control practices
24.4.18	Clinic 11	Julie Bacon Lynn Smart	Fans in the dept. needed cleaning. Xbox screen dirty Fabric chairs baby feeding room stained Dirty Utility not locked - unit of Milton made up Fridge monitoring in the weight room 5 days out of date	As per issues - no specific actions identified.	Clean and tidy. Staff welcoming. Age appropriate environment, décor and information available. Good safety and safeguarding culture observed. Parents very complimentary about the staff and service received.
<b>May 11 Visits Planned</b>					
3.5.18	Pre-Op Assessment	Shirley Higginbotham Sarah Addelese	Signage needs addressing - small, broken, in wrong place Paint needs refreshing in waiting areas TV information screens not working Sister had to purchase own padlock to secure patient records as procurement unable to provide alternative to the style that kept breaking.	Support to get TVs working Paintwork requires refresh Trolley/padlock security	Evidence of improvement culture and real patient focus Good work to reduce cancellations/DNAs Good teamwork observed described as a fabulous visit Praise for the leadership of the dept. Sister
11.5.18	Seizure Pathway EAU/Resus Ward 25 Ward 34 Ward 44	Andy Haynes Shantell Miles	EAU - out of date medication identified EAU- Critical Meds for emergencies not always timely Ward 44 and 34 - Unclear stock arrangements for IV phenytoin	Issues picked up by Ward leaders and HONs	Across all areas: Staff welcoming Staff demonstrated good knowledge of how to manage patients on the pathway Areas clean and tidy
15.5.18	Ward 41	Denise Smith Carly Rollinson	No visitor chairs - relatives sat on patient beds Ward board out of date Notes trollies unlocked	Highlighted issues to ward sister at time of visit	Warm welcoming feel to the ward Staff observed delivering caring, compassionate care Positive patient feedback given re care received Area clean and tidy Most patients up and dressed in own clothes
21.5.18	Ward 14	Claire Ward Clare Burton Ian Holden	Ward board out of date Entonox cylinders being stored on the corridor Anxiety among staff that empty beds on SAU area would be used for Winter medical patients again.	Request that Entonox be stored in a locked room Ward board amended Better if clear plan for future of the ward re closed area.	Ward clean and calm, generally uncluttered Commended re actions taken following a recent serious incident Staff all demonstrated a positive attitude and were welcoming and courteous

22.5.18	Radiology	Julie Bacon Lynn Smart	No cleaning record for cleaning of toys. Sharps bin in MRI not dated and signed. Lift regularly breaks down hindering patient access to MRI Kettle seen in the clinical area in main reception	Explore options of a slope to enable patient access to MRI during lift failure Other issues fed back to department lead for immediate rectification	Clean and tidy, staff friendly and welcoming. Child friendly and toys available even when no specific paed area. Staff had good knowledge and understanding of IRMER regulations
??	Ward 25	Julie Bacon Lynn Smart	Patient identifiable information left unattended in reception area Staff raised staffing levels as an issue Unlabelled urine sample left in sluice and old blood box in resus	Immediate actions identified at the time	Clean calm and tidy. Bright child friendly environment. Staff warm, friendly and welcoming. Staff reported feeling supported when issues were raised. Positive feedback from patients and family and noted that dads were kept involved.
<b>June 6 Visits Planned</b>					
11.6.18	Pathway 22 Hip and Knee School	Shirley Higginbotham Sarah Addelee Ann Mackie	Signage to hip and knee school could be improved Review of presentation to avoid duplication and to update in light of recent service changes	Discussed at the time as per issues	MDT approach to delivery Friendly and informal atmosphere provided. Positive focus on promoting wellness and independence Lots of practical tips for aiding own recovery post surgery
22.6.18	PANDA Meeting Maternity Ward Birthing Unit	Paul Robinson Tina Hymas-Taylor	None identified	None	Welcoming staff in all areas, very family, mother and baby focussed. All staff professional and reflected CARE values Clean environments
<b>July 9 Visits Planned</b>					
9.7.18	Ward 34 EAU ED-AECU	Richard Mitchell Alison Whitam	None identified	None	Across all areas: Staff warm, welcoming and professional Caring and compassionate care observed Busy but well organised, staff coping well despite pressures Clean
19.7.18	Oakham Lindhurst	Peter Wozencroft Penny Cole Angie Emmott	Entrance to both wards cluttered. Issue with storage of equipment and linen bags on both wards Staff reported hand over of patients not always reflective of their condition on arrival.	Matron aware of issues and actions taken to address	Busy but calm and in control Patients appeared well cared for and gave positive feedback Staff welcoming and friendly
<b>September 9 Visits Planned</b>					
13.9.18	Ward 34 EOL	Andy Haynes Shantell Miles	None identified	None identified	Clean, tidy and calm. Staff welcoming. No EOL patients on the ward but staff able to articulate their understanding of the EOL pathway.

19.9.18	ED	Julie Bacon Lynn Smart	1 Dynamap in an isolation room out of date for MEMD service. Sharps bin in resus not dated and signed.	NIC dealt with issues at the time.	Clean, tidy and calm - despite building work being carried out in the department. Staff welcoming and observed interacting with patients and carers in an appropriate manner. Identified issues dealt with immediately.
20.9.18	Ward 21	Kerry Beadling-Barron Trevor Hammond	Ward Board date incorrect Safety cross 1 week out of date	Discussed outcome with NIC	Clean, tidy and calm, staff observed to be keeping patients informed. Positive comments from patients re staff. Team challenged re being bare below the elbows.
25.9.18	Ward 23	Suzanne Banks Rosie Dixon	Noted that ward is on Nervecentre and CCU is not which may pose a potential risk when transferring patients between these areas.	None identified	Clean tidy and calm. Patients seen dressed in own clothes. Patients kept informed.
25.9.18	Stroke Unit	Tim Reddish Marie Sissons	Concerns raised by staff re capacity issues when medical beds are tight across the Trust. Staff expressed Datix feedback not meaningful. Staff felt ED Drs did not always understand the roles and responsibilities of the Nurse assessor, Acute Response Nurse and Specialist Nurse	Feedback given to ward sister Tim Reddish to feed back to Board.	Clean, tidy, calm. Staff welcoming. Good interactions observed between staff and patients. Patients appeared well cared for - dressed in own clothes.
<b>October 7 Visits Planned</b>					
2.10.18	Thrombolysis Pathway	Andy Haynes Shantell Miles	None identified	None identified	Over all positive visit and gave confidence the pathway was in place and is followed. Dept organised, calm and under control. Staff friendly and helpful. Privacy and dignity of patients observed being maintained. Discussions on length of stay and outcomes took place. All team very clear on expectations and clear plans of care and rehabilitation were evident.
11.10.18	Stroke Unit	Tim Reddish Marie Sissons	Ward board not up to date ward Sister highlighted that TTOs hold up discharges and create capacity issues	Ward board corrected immediately NED to feedback TTO issue to Board	Area calm and well organised. Staff warm and welcoming, caring and compassionate interactions with patients observed Patients in own clothes Good feedback from patients re care received.
16.10.18	Radiology - CT	Julie Bacon Lynn Smart	Dep't signage within corridor needs reviewing Review of staffing within CT escalate any concerns	None Identified	Well motivated staff Welcoming Environment Dept clinical areas were very clean tidy and calm Feedback from patients was excellent Staff were well motivated Staff were able to articulate learning from incidents and patient feedback . Using FFT patient feedback to identify areas for improvement

23.10.18	NICU, Maternity	Neal Gossage Yvonne Christley	NICU – hand gel was not immediately visible on the entrance to the unit.	This was discussed with the Ward Leader	We observed excellent interactions between staff, patients and family members. The entrance was uncluttered and welcoming. Notice boards displaying patient and visitor information was available and easy to access. We had the opportunity to talk to patients and relatives in both areas and all were very positive about their care experiences. Both environments were well maintained, tidy and clutter free. Information on improvements was prominently displayed as was feedback from patient and families.
25.10.18	Ward 34	Clare Ward Kate Wright	Some of the information displayed on the ward was out of date.	Informed NIC re out of date information.	Friendly staff, positive welcoming feel as we walked on to the ward. Area busy but felt calm and well organised. Clean environment-uncluttered, no safety issues noted. Good patient information displays on tissue viability and Flu. Lots of good information displayed. Good Friends and family response and improving month on month. Very positive patient feedback given about the ward and the staff, staff observed delivering compassionate care. Staff dealing very well with an ongoing difficult situation on the ward. Staff demonstrated CARE Values
30.10.18	Day Case Unit	Kerry Beadling-Barron Trevor Hammond	Linen trolley uncovered Some of the posters had out of date logos on them No challenge given to team re 'bare below the elbows'	Fed back highlighted issues to NIC at the time of visit	Over all very positive visit. Busy but calm and well organised Patients could not speak highly enough of the staff and care received
30.10.18	Chatsworth Ward	Denise Smith Carly Rollinson	Coffee cups at nursing station Fire doors wedged open Discharge planning could potentially include the patient more. Appeared cluttered due to the amount of equipment but due to the nature of the ward it is necessary – not enough storage space	Discussed with the NIC Cups removed Wedged removed and NIC informed More storage space needed – but not sure where	Ward appeared calm, good display in unit corridor, No call bells or telephones ringing. Evidence of safety checks, no medications unattended and patients all had ID bands insitu Staff appeared to display the trusts CARE values, privacy and dignity was maintained and patients that we spoke to were very happy with their care, most were dressed and out of bed, nursing staff were welcoming on arrival.
<b>November 9 Visits Planned.</b>					

13.11.18	Ward 32	Barbara Brady Sharon Baxter	Out of date information noted on information boards. No/very little acknowledgment or interaction with visit team from doctors and AHPs on the ward. Staff raised concern that nursing handover out of hours for patients outlying to other specialities, needs to reflect accurate patient needs e.g. 1-1	The need to review handover of out of hour transfers	Really welcoming ward , already enacting the winter plan . Staff were extremely positive and appeared not to be phased with regards to becoming a medical ward for the winter .Nursing staff came across passionate and enthusiastic . All staff asked had received their APR's which were meaningful and relevant . Staff felt happy to raise concerns and feel they will be listened to.
21.11.18	Stroke Unit	Tim Reddish Marie Sissions	None Identified	None identified	Ward welcoming, calm, clean and well organised. Board round observed involving whole MDT. Staff observed to be caring and compassionate, patient feedback good. No safety issues or concerns noted. Ward boards up to date. A very positive visit.
27.11.18	Ward 36	Simon Barton Meg Haselden Sue Holmes	New Bed management systems making it difficult to allocate beds in a sensible way Surge of admissions early evening problematic due to number of admissions night staff have to undertake Agency nurse who regularly works on the ward wearing very old, tatty uniform	Simon Barton to take forward bed management and early evening admissions issues. NIC and ward sister to address the uniform issue	Ward welcoming, clean and calm. Patients and family all happy with care, staff happy to work on the ward. Very impressed with the efforts the ward leader and her team are making to develop staff, recruit new staff and nurture students.
27.11.18	ward 12	Peter Wozencroft Penny Cole Angie Emmott	Minor issue - not all information boards were up to date.	None identified	Welcomed immediately onto the ward and escorted to Nurse in Charge. We were made to feel very welcome by all of the team. Nurse in Charge was knowledgeable about the ward and patients. We were impressed with the cohorting and able to spend time with these patients and their carer. Real variety of patient/staff/visitor info displayed throughout the ward. Evidence of wide staff involvement in high quality patient care.
28.11.18	Ward 11	Kerry Beadling-Barron Trevor Harding	Drug trollies found unlocked Ward boards not up to date	Issues addressed with the NIC and Matron at the time	Visit took place within an hour and a half of an arrest having taken place, however ward felt calm and ordered. Excellent feedback from patients re care received. Nurses visible on the ward.
			<b>December Visits</b>		

4.12.18	Welcome Treatment Centre	Stephanie Anstess Morgan Thanigasalam Becky Stone	<p>Do different pumps increase the risk of operator error?</p> <p>Would allocation of unisex toilets improve the experience of patients?</p> <p>Windows in main WTC area may contribute to patients feeling hot or cold</p> <p>Allocation of staff appeared based on tasks and not patients</p>	<p>Review of risk of having 2 types of infusion pumps</p> <p>Review of toilets to determine if possible to label toilets to support unisex toilets</p> <p>Identified that heaters are used if patients feel cold. Blankets available if needed from linen store in WTC.</p> <p>Consideration if allocating staff to specific patients might enhance individualised care</p>	<p>Welcoming environment with useful patient information clearly displayed. Clean and tidy. Staff clearly enjoyed working there and excellent patient feedback obtained with regard to the care they received on the unit. Volunteers seen to be working well with the ward team and adding significant value to the patient experience. Privacy and dignity maintained. A positive visit.</p>
4.12.18	Clinic 5	Julie Bacon Lynn Smart	<p>Explore issue relating to patients attending appointments not showing on the system</p> <p>Review signage from main corridor to clinic 5</p>	None Identified	<p>Well motivated staff</p> <p>Staff using Hello my name is to greet patients</p> <p>Clean tidy environment</p> <p>All medicines were stored safely</p> <p>Evidence of fridge and room temperature testing in place</p> <p>All equipment checks were complete</p> <p>Staff were well motivated and loved coming to work</p> <p>Staff were able to articulate learning from incidents and patient feedback .</p>
12.12.18	Ward 22	Andy Haynes Shantell Miles	None Identified	None Identified	<p>The ward was welcoming on arrival, appeared calm, tidy and organised.</p> <p>Patient privacy and dignity was maintained and most patients were up and dressed, the patients we spoke to had visible ID bracelets and spoke highly of the care that they had received, No medications was found to be unlocked.</p> <p>It was reassuring to witness the HoS and Sister speak highly of their service, aware of the ward and service priorities, harms and reacting tot unwell patients.</p>
12.12.18	Oakham Ward	Denise Smith Carly Rollinson	<p>cluttered but the Sister of the unit had tried to replace them previously.</p> <p>Limited staff facilities for dining and had to use the patient dining area – but there was no other area for them to use. ?</p> <p>Whether blinds could be put in to ensure privacy for staff and maintain a professional look for the ward.</p>	Discussed with Sister at the time of the visit.	<p>The ward was welcoming on arrival, appeared calm, tidy and organised. Patient privacy and dignity was maintained and most patients were up and dressed, the patients we spoke to had visible ID bracelets and spoke highly of the care that they had received, No medications was found to be unlocked.</p>





## 15 Steps Visit Outcomes 2019

Visit Date	Area	Team	Issues	Actions	Positives
<b>January</b>					
8.1.19	Ward 31	Shirley Higginbotham Meg Haselden Anne Mackie	None identified	None identified	Ward welcoming with lovely atmosphere. Staff demonstrated in discussion care and empathy for patients and colleagues. Positive staff/patient interactions witnessed. Patients spoken to were very happy with the care they were receiving. Privacy and dignity maintained. Ward was clean and tidy despite being busy. It appeared well managed and good supportive team work was witnessed. No safety issues identified. Staff felt supported by mngemnt team.
10.1.19	Ward 24	Lynn Smart Julie bacon Hannah Brown	Cleaners room containing chemicals left unlocked Hoover left in corridor  Antibiotic cupboard not locked in clinic room  Lamps in quiet room, radio in MDT room test and nebuliser in store room test date expired	Adressed at the time  Adressed at the time  Action agreed for ward leader to check expiry dates on equipment.	Very calm organised environment. Team were impressed with an HCA who was observed to challenge a doctor re potential IG issue. Learning from Datix and focus on boards used to share information with staff Excellent feedback from patients re staff and care recieved. Excellent feedback from student nurse and TNA placement and support offered from mentors and staff on ward
14.1.19	Ward 21	Tina Hymas-Taylor Paul Robinson	Several issues with regard to induction, on-going support and training for student nurses.  Staff nurse highlighted concerns re co-ordinating role of ward and the impact of this along with staffing issues  20 of the O2 points were not working.	Actions to address highlighted issues agreed with Ward Leader. Matron, HoN, HoS and Named Nurse.  HoS rased this with HoN on the day.  Staff were able to identify strategies to ensure safety during this time.	Visit combined with HoN CQC assessment. Ward staff were welcoming and accommodating despite being very busy and under considerable pressure - ward has transitioned form surgical to medical as part of winter plan. Excellent feedback with regard to the staff and care they deliver recieved from patients and volunteer. Students reported finding the ward welcoming.
16.1.19	Discharge Lounge	Sharon Baxter Barbara Brady	In discussion it came out that the bay area of the discharge lounge was being used by night staff as a rest area, as dirty cups and pillows had to be cleared away. Patients being given paper cups for hot drinks informed they were unable to use proper cups. Patient being sent to the DL first thing but not being picked up until 16.00hrs by her son, she lives alone. Staff were not able to provide her with a hot meal all day and before her discharge	This was discussed with the HoN and the matron for that area after the inspection. Chief Nurse made aware  Review opportunities for a hostess	The RN on duty was very pleasant, approachable and made us feel very welcome. Was able to demonstrate how the service was responsive to need. Expressed that the divisional management team were available, she felt able to raise concerns and was listened to. The unit was clean and tidy. Respectful and caring patient care observed. Patients were happy with the care they were receiving in the Discharge Lounge. Good IG practises observed.

21.1.19	Ward 11	Richard Mitchell Alison Whitam	None identified	None identified	Welcomed to the ward with Smiles and encouragement and instantly told re NIC. All questions asked were responded to promptly. All patients looked cared for and privacy and dignity needs were met. Housekeepers supporting the calm uncluttered feel on the ward. Some excellent information displays – falls, sepsis, C diff and safeguarding. Phones / Buzzers answered promptly.
21.1.19	Ward 22 (Perfect Ward Trial)	Phil Bolton Stephanie Anstess Morgan Thanigasalam	None identified	None identified	Welcoming staff, displaying CARE values Good feedback from students No safety issues identified Good information boards - up to date Patients treated with dignity
24.2.19	Ward 25 (Perfect Ward Trial)	Simon Barton Yvonne Simpson Sue Holmes	Winter plan changes not well articulated Cubilce requiring repair	Captured on action log for attention of COO	Ward welcoming and inviting, clutter free. Toys were clean and looked new. Board information up to date.
25.1.19	Ward 44	Carly Rollinson/Denise Smith	No signage for complaints / PET contact details	Ward Sister to reintroduce	Staff were welcoming on arrival, felt calm despite it being a busy time, Ward environment looked and tidy, patients looked well cared for and were positive about care received. Good notice boards. No safety issues identified
28.1.19	Ward 14 (Perfect Ward Trial)	Suzanne Banks Rosie Dixon	Safety crosses not up to date Staff not wearing name badges	Addressed with Sister at the time Infection Control Nurse to explore the continued availability of name badges	Lovely calm ward despite being busy. Welcoming staff. Patients treated with dignity No safety issues noted
28.1.19	Ward 25	Simon Barton Sue Holmes Yvonne Simpson	None identified	None identified	Positive visit, ward clean tidy and welcoming. Bright and cheerful. Good information boards and displays No safety issues identified CARE values evident.
29.1.19	Ward 34	John MacDonald Carl Miller Becky Stone	Issues identified for immediate action addressed at the time of the visit: Oversight and cleaning of CPR alcove; Review of content of falls cupboard; Review and removal of peeling posters and feedback to corporate team; Awareness of siting of buzzers/bottles for individual patients.  Longer term actions: Explore use of buzzer to ensure restricted access to ward; Estates review of tape on floor and to enhance drainage of shower; Identify Trust decision making on storage of patient records re nursing records stored outside cubicles on the ward corridor.	Ward Leader actioned at the time  Captured on action log	Positive visit, ward clean, tidy and welcoming. Good information boards. Good patient feedback re care received. Happy staff. Evidence of learning from complaints, concerns and incidents.
30.1.19	Ward 23	Peter Wozencroft Penny Cole	Immediate entry to the ward is not welcoming and untidy  Some issues with IT connectivity on the ward	Ward Leader to undertake local tidy up. Exec to explore if this can be addressed via 23/24 ward entrance redesign.  Feed back to NHIS to determine whether this is Trust wide or related to IT equipment in local ward area	Welcoming, positive and engaged staff. Consistently good FFT feedback. Good display boards with useful information. Evidence of learning from concerns and complaints

**February**

Visit Date	Area	Team	Issues	Actions	Positives
12.2.19	Newark: Sconce, Minster, Fernwood, Children's OPD	Sue Holmes Meg Haselden	None identified	None identified	Fabulous visit. All areas welcoming and keen to show us the work they were doing. Lots of innovative practice observed and staff going the extra mile to meet patient need. All staff spoken to were very positive about working at Newark and despite distance form KMH felt part of Sherwood team. All pateitns spoken to were very happy with the care they had received.
14.2.19	EAU	Peter Wozencroft Angie Emmott Penny Cole	None identified	None identified	The first 15 steps are challenging because of the built environment, however the signage is clear and any visitor has direct view of the nursing stations from either entrance. Overall the unit was calm, welcoming and professional with members of staff actively engaged with the 15 Steps process. The deputy charge nurse was knowledgeable about the ward assurance data and spoke enthusiastically about the ward team. The 15 steps team were impressed with the unit in view of the challenging clinical circumstances and fed this back to the team on duty.
18.2.19	ED	Julie Bacon Lynn Smart Mandy Toplis	Staff's main concern was managing patient safety when the department was over full  SFH News stand in main waiting area empty and logo Quality for All	No actions identified	Very clean calm welcoming environment. Staff were very friendly Information was clear and up to date. Good communication and interaction with patients observed. Feedback from patients in relation to care was excellent. Feedback from staff very positive, they identified strong team working and good morale. Staff felt well supported by managers Staff were able to articulate learning from incidents
19.2.19	Stoke Unit (Perfect Ward)	Suzanne Banks Rosie Dixon	The main concerns and actions required are around the displayed information and inadequate storage.		The overall impression of SRU is of a well run and caring environment. Friendly and caring staff. Committed to increasing knowledge and sharing learning from incidents. No safety issues identified.
19.2.19	Ward 52	Andy Haynes Carly Rollinson	The clinical treatment room was tidy and secure with no identified out of date medications, although there was a bag of used fluid in the sink.  Patients Medical Notes in the lockable trolley had been left unlocked and wide open, which was closed at the time by Dr Haynes and a further patient nursing notes was left unattended by a P.C, this again was removed and put in the Nursing Sisters office.	Both actions addressed at the time and discussed with the Ward Leader	Clean tidy environment with no clutter Warm friendly reception to ward by receptionist and all staff Excellent resources and information – emphasis on learning and improvement. Limited noise contributes to calm environment Feedback indicates patients happy with care delivered. Effective infection prevention and control.

19.2.19	OPD Clinics 1 and 3	Sharon Baxter Barbara Brady	Several issues highlighted - captured on Action Log	As per Action log	Staff friendly and welcoming - positive about working for SFH. Area clean and tidy, good information on walls for staff and patients - up to date. Good team work evident, prpud of new initiatives and recent nomination for BMJ award. Staff felt there was a stroing governance culture.No safety issues identified
20.2.19	Endoscopy	Shirley Higginbotham Meg Haselden Anne Mackie	Discussed the drawback of needing to use bank staff who are unfamiliar with the department – this can slow things down.	No actions identified	Very clean and tidy, staff welcoming and friendly. The department was well organised with good systems in place to ensure patient safety.Thank you cards were displayed on the walls which is impressive given that patients are actually in the department for such a short time.
21.2.19	Clinic 21	Marie Sissons Tim Reddish Jane Stubbings	Over running of clinics and patient waiting times, can be up to 3 hours. Not always communicated to patients.	Tim is going to raise with the Trust Board the best way to keep patients informed regularly about how long waiting times are. Maybe could utilise volunteers more.	All staff were welcoming and happy to chat to the team. Staff were friendly.Information boards noted in all areas. All environments were clean, tidy, organised bright and airy.Staff observed to be interacting with patients in a respectful manner. Good patient feedback re care received.
26.2.19	Ward 42	Graham ward Deb Elleston	Entrance to ward cluttered with walking frames. Water flushes not up to date Staff lockers had broken locks	All discussed with ward leader at the time for immediate rectification.	Good warm welcome from the Ward Receptionist. The ward felt well organised & under control. Strong sense of leadership. Excellent dementia display on the wall.Good patient feedback re care received.
26.2.19	Ward 51 (Perfect Ward)	Richard Mitchell Alison Whitam	Ward Board not completed	No actions identified.	Welcoming and friendly, clean and tidy, CARE Values evident. No safety issues noted.Staff noted to be supporting each other and the patients
28.2.19	WTC	Ian Holden Clare Burton	No ward assurance data displayed No digi lock on clinic room door Bank Staff not accessing NerveCentre training.	Sister to chase poster Sister to action - fluids and drugs moved with immedate effect to locked area.	Staff welcoming despite being very busy. Great team working observed.Welcome Treatment Centre (WTC) – busy infusion treatment area, well organised between two teams of staff from SFH and NUH. Pleasant environment with murals painted on the walls in WTC, patients some having long infusions (up to 9 hours in some cases) have relatives/friends with them for company.Excellent support to both clinical areas from specialist nurses / clinical psychology.

## March

Visit Date	Area	Team	Issues	Actions	Positives
1.3.19	Ward 41	Kerry Beadling Barron, Roz Norman, Trevor Hammond	Notes trolley in supervised area but unlocked Information Boards not up to date. Fridge checking, fridge been too warm for two weeks Bare below elbow not recognised	Discussed with ward leader at time of the visit.  To discuss with Matron	Positive feedback from two patients and two relatives, all very appreciative of staff. Wall display in relation to falls very impressive. One area seem very tidy uncluttered, particularly liked the bus stop in place to the end of the ward clearly a lot of thought of going to this.
4.3.19	Birthing Unit & Theatres	Graham ward Debra Elleston	Access to the Birthing Unit at the back door – we arrived at the back door and rang the bell – no one answered - accessed with pass. We walked the length of the unit without anyone seeing us.	Through discussion we wondered if the Birthing Unit should have the same access rights to staff as pharmacy for example. To discuss with deputy Chief Nurse.	Overwhelming feeling of calm & organisation on the unit Relevant information posters on the walls Positive efforts to ensure good communication & reduce anxiety for the expectant parents as possible Wonderful environment supportive of compassionate care. No safety issues noted.

7.3.18	Clinic 11	Neil Gossage Yvonne Christley	The area would benefit from having complaints/compliments information more visibly accessible.	None identified	A very well organised and efficient clinic that clearly put the needs of the children and their families at the forefront of their care delivery activities Welcoming. Ward information and signage clearly displayed. Very neat, tidy and uncluttered clinical environment. Learning form incidents evident. Good feedback from parents about thier experience of clinic
7.3.19	Ward 23	Barbara Brady Sharon Baxter	With the exception of the receptionist, when walking onto the ward we were not greeted or eye contact made by any member of staff unless we approached them. Notes left unattended when a Dr came out of the Notes room. Ward board not up to date Uniform Policy. Although staff looked very professional , staff were wearing their hair in ponytails but were long and not off their collar	Discussed with Charge Nurse at the time of the visit  Discussed with Charge Nurse at the time of the visit  Discussed with Charge Nurse at the time of the visit  Discussed with Charge Nurse at the time of the visit, captured on action log	Clean and tidy. The atmosphere was calm and relaxing. All patients looked clean , dignity was maintained and staff spoke to them respectfully. Patient feedback good. Good team work noted, staff supported each other and felt supported. No safety issues identified.