



Dignity and nutrition for older people

Review of compliance

York Teaching Hospital NHS Foundation Trust The York Hospital	
Region:	Yorkshire and Humberside
Location address:	Widdington Road York YO31 8HE
Type of service:	Acute Services
Publication date:	June 2011
Overview of the service:	<p>The York Teaching Hospital NHS Foundation Trust provides most of its health care services from The York Hospital. The hospital also manages two community rehabilitation hospitals, a total of 707 beds.</p> <p>Acute hospital services are provided for approximately 350,000 people living in and around the York area. There are also a range of specialist services, which are spread over a wider area of North Yorkshire, serving a total of approximately 500,000 people.</p>

What we found overall

We found that The York Hospital was meeting both of the essential standards of quality and safety we reviewed.

The summary below describes why we carried out the review, what we found and any action required.

Why we carried out this review

This review is part of a targeted inspection programme in acute NHS hospitals to assess how well older people are treated during their hospital stay. In particular, we focused on whether they are treated with dignity and respect and whether their nutritional needs were met.

How we carried out this review

We reviewed all the information we held about this provider, carried out a visit, observed how people were being cared for, talked with people who use services, talked with staff, checked the provider's records, and looked at records of people who use services.

Our inspection team was joined by a practising, experienced nurse and an 'expert by experience' - a person who has experience of using services (either first hand or as a carer) and who can provide the patient experience. During the course of the day, the team spoke with six patients, five staff from different disciplines, checked patient case notes for five patients and observed practices on two wards.

What people told us

The majority of patients told us that they were satisfied with the care and treatment they received at The York Hospital. They said they had been treated with courtesy and respect and that their privacy and dignity had been well protected. They said they were given clear information and had been involved in decisions about their care and rehabilitation. Their experience is captured in these examples of positive comments made to us:

‘Staff are exceptionally good and will do anything for you.’
‘Staff are ‘very polite’ and ‘always’ explain and ask if they can assist.’
‘They always ask how I would like things done and discuss options.’

Patients told us that their nutritional needs and dietary preferences were well met. They gave positive feedback about the quality, range and availability of food. People, who required assistance with eating or drinking, were complimentary about the way staff supported them. Observations on the ward also showed that staff were attentive when assisting people and they did this in a patient and professional way. Comments made included:

‘Food is nice, its well cooked and well presented.’
‘Food is lovely. No complaints.’
‘Food is hot. It’s a pleasant experience. We are all served together and eat together.’

What we found about the standards we reviewed and how well The York Hospital was meeting them

Outcome 1: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

- Overall, we found that The York Hospital was meeting this essential standard.

Outcome 5: Food and drink should meet people’s individual dietary needs

- Overall, we found that The York Hospital was meeting this essential standard.

What we found
for each essential standard of quality
and safety we reviewed

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*.

Outcome 1: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- Understand the care, treatment and support choices available to them.
- Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- Have their privacy, dignity and independence respected.
- Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant

Our findings

What people who use the service experienced and told us

We spoke to six patients, and five members of staff. We also observed the care provided to patients. Prior to making the visit we looked at the feedback provided by patients on the NHS Choices website, the York Hospital website, the findings of the Patient Environment Action Team assessment, patient survey results and information that we hold about the provider.

The majority of patients told us that they were satisfied with the care and treatment they received at The York Hospital. They said they had been treated with courtesy and respect and that their privacy and dignity had been well-protected. Hospital staff were described as 'very polite' by patients.

The atmosphere on both wards we visited was calm and welcoming. Personal care tasks were undertaken in private. Men and women did not have to share accommodation or bathroom facilities. There were signs in place to promote awareness. Call bells were left within easy reach so patients could easily summon help when required.

There was strong teamwork between nursing, medical and therapy staff in assessing individual needs and in ensuring the comfort and safety of patients. We saw that staff generally had enough time to talk to patients and reassured them to

put them at their ease.

Hospital consultants and ward staff provided clear advice and information to people about their health needs, risks/benefits and the management of their condition. They paid attention to listening to and explaining to patients what was happening, encouraged to dress in their day clothes and supported them to do as much as they could for themselves, in order to maintain their independence. Patients were encouraged to ask questions and to be actively involved in decisions about their care. Patients and staff told us that relatives had been kept well-informed where necessary and that their involvement had been welcomed where their input could benefit the patients' recovery.

Patients told us they had been asked what they wanted to be called on their admission to hospital; despite this not always being recorded, it was respected throughout their stay. None of the patients we spoke to had been asked to complete a survey before being discharged from hospital.

Other evidence

Prior to our visit we looked at the information we hold about the trust. This showed us that there was a very low risk that they were not meeting this outcome. Audits of health care practices, undertaken by the Trust, showed a strong performance by The York Hospital in respecting and involving people who used its services.

Hospital managers encouraged and supported the learning and development of their staff. They made regular checks to make sure they delivered the required standards of care through their leadership involvement. This included seeking suggestions from patients and staff about areas where changes and improvements were required.

Staff interviewed had a sound awareness of the standards of behaviour expected of them. They recognised individual patient needs and adapted their support accordingly. They had received training in the promotion of privacy and dignity either through professional nurse training or during their induction, if they were a health care assistant.

We reviewed five patient records and overall they were maintained to a satisfactory standard. Individual faith, ethnicity, personal preferences, mental capacity and home circumstances were recorded on admission to hospital. This information was then sensitively used to inform the delivery of care. There were clear systems in place to identify people who were physically or mentally frail. A variety of assessments were used to help ward staff understand and provide consistent support to people dependent on an individualised care plan. This shows an example of good practice in recognising risk and meeting an individuals needs in a holistic way.

Care and treatment plans focused on promoting patients' recovery and any ongoing concerns were closely monitored. The trust audits working practices and patient records as part of their ongoing commitment to raising standards.

There was a range of advice and information leaflets for patients. This included information on how to make a complaint and protecting privacy. There was guidance on help available at the point of admission and following discharge from hospital.

The Patient Advice and Liaison Service (PALS) were an important first point of contact in picking up any concerns as early as possible.

The privacy curtains around some beds, because of the way they are divided, meant that when closed, there was an open seam. Therefore when additional equipment was needed, for example, and the space was cramped the parting in the curtain widened and did not completely screen the bed area. This was acknowledged by the senior managers and was an issue they were already aware of.

Our judgement

The majority of patients were very positive about their experiences of care and treatment at The York Hospital. They told us their individual needs had been recognised, that they had been respected, and that they were well-informed about their care and rehabilitation arrangements. The trust had clear and effective staff development and performance management systems that supported listening to and learning from the experience of patients.

Overall, we found that The York Hospital was meeting this essential standard.

Outcome 5: Meeting nutritional needs

What the outcome says

This is what people who use services should expect.

People who use services:

- Are supported to have adequate nutrition and hydration.

What we found

Our judgement
The provider is compliant

Our findings
<p>What people who use the service experienced and told us</p> <p>Patients told us that their nutritional needs and dietary preferences were well met. They gave positive feedback about the quality, range and availability of food. People, who required assistance with eating or drinking, were complimentary about the way staff supported them. Observations on the wards showed that staff were attentive when assisting people and they did this in a patient and professional way. The environment on the wards at mealtimes was calm and relaxed. Ward staff had sufficient time to assist patients who required additional help. People who were recovering from a stroke particularly liked the way they were served their meals at the same time, and could eat together, therefore making it a 'pleasant experience'. Snacks were available on request and as required. However, hygiene needs were not being appropriately met prior to and after meals in all cases. The senior management team were informed of this and agreed to address this with immediate effect.</p> <p>The range and quality of food was rated as good by patients. Drinking glasses and water were placed on bedside tables; however this was not always within easy reach due to the position of tables at meal times.</p> <p>All but one patient said their food was hot when served. They all agreed it was well-presented. We observed that staff took care to make sure meals looked appetising. Staff sensitively supported people who were in pain or feeling nauseous and recognised the impact this might have on their appetite and overall levels of nutrition. Food supplements and thickened fluids were provided as required. Snacks were offered to people who had missed meals.</p> <p>Mealtimes were protected so that people were able to have their meals without interruption. However, the hospital also encouraged relatives to visit at meal times if this was felt to be of benefit to the patient. Adapted cutlery and crockery was</p>

available for people who required this. People with additional support needs were supported via a 'blue tray' system. We observed all people, who had been identified as requiring additional help, receive it.

Patients were encouraged to select the meals they liked and that promoted their well-being. Efforts were made to involve people with limited communication in making decisions about their food preferences by involving their relatives in some cases. People were asked if the meal provided was satisfactory, they said it was. We saw that portion sizes were appropriate for each person. Overall, there were only minor concerns around food or mealtimes.

Other evidence

The information we hold about The York Hospital prior to our visit showed that there was a slightly higher level of risk that they were not meeting this outcome.

Patient surveys indicated good levels of patient satisfaction with the way the hospital met their nutritional needs.

Ward staff told us they had received training in recognising nutritional risks and promoting a healthy diet. Staff recognised patients' dietary needs and preferences and made sure these were recorded. Weight loss and special dietary requirements were recorded at the point of peoples' admission to hospital. Care documentation clearly referenced mental capacity and whether an advanced care decision had been made. Food and fluid balance charts were routinely used. Staff were aware of patients who were not eating or drinking a sufficient amount. Swallowing risks were identified and appropriately recorded. No artificial feeding was evident on the wards visited. Patients about whom there were concerns were promptly referred to a dietitian or speech and language therapist for specialist advice. The patient records showed detailed information where multidisciplinary care was being delivered.

The Trust uses its own in-house developed tool for malnutrition screening. This is based on the Malnutrition Universal Screening Tool (MUST). Staff reported that using the MUST tool had assisted them in thinking a bit more about peoples' weight, risks, the amount they were eating and their social circumstances. This informed the development of additional support that may be needed during their stay and at their point of discharge from hospital.

The observations we had noted were reported to the senior management team at the end of the inspection. The Trust were asked to supply information about their policies on supporting people to eat and did so. This demonstrated they had correct procedures in place and agreed to reiterate the details to all staff.

Our judgement

The hospital gave a high priority to making sure people benefited from a good diet and had sufficient fluids. Staff paid attention to making sure meals were appetising and that individual nutrition risks and personal preferences were addressed. People who required assistance received the level of support they required.

Overall, we found that The York Hospital was meeting this essential standard.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Adult Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Dignity and nutrition reviews of compliance

The Secretary of State for Health proposed a review of the quality of care for older people in the NHS, to be delivered by CQC. A targeted inspection programme has been developed to take place in acute NHS hospitals, assessing how well older people are treated during their hospital stay. In particular, we focus on whether they are treated with dignity and respect and whether their nutritional needs are met. The inspection teams are led by CQC inspectors joined by a practising, experienced nurse. The inspection team also includes an 'expert by experience' – a person who has experience of using services (either first hand or as a carer) and who can provide the patient perspective.

This review involves the inspection of selected wards in 100 acute NHS hospitals. We have chosen the hospitals to visit partly on a risk assessment using the information we already hold on organisations. Some trusts have also been selected at random.

The inspection programme follows the existing CQC methods and systems for compliance reviews of organisations using specific interview and observation tools. These have been developed to gain an in-depth understanding of how care is delivered to patients during their hospital stay. The reviews focus on two main outcomes of the essential standards of quality and safety:

- Outcome 1 - Respecting and involving people who use the services
- Outcome 5 - Meeting nutritional needs.

Information for the reader

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