

You said, We did 2017-18

You said

The wooden seating in the emergency department waiting area is too hard and uncomfortable.

We did!

As part of the refurbishment of the emergency department, the wooden seating is being replaced with wipeable cushioned seating which will be much more comfortable, together with bariatric, high and low chairs.

You said

The emergency department reception desk is too high for wheelchair users.

We did!

As part of the refurbishment of the emergency department, a lower, wheelchair-friendly reception desk is being installed.

You said

Privacy could be improved in the Petter Day Treatment Unit at North Devon District if the whole of the door window linking the waiting area to the ward area was frosted, rather than just half of it.

We did!

The whole of the door window was frosted so that no-one can see through into the ward area.

You said

Sandwiches given to patients in the emergency department are not labelled, resulting in distress and waste. (Pathfinder Urgent Care)

We did!

Sandwiches given to patients in the emergency department are now labelled.

You said

Some patients on Fortescue Ward were not aware of the availability of physiotherapy.

We did!

A daily exercise group at 11am was already in place, with volunteers assisting. Laminated notices were produced for each bay and reception area to inform patients and relatives that this takes place and to increase understanding that this is part of physiotherapy. Although the exercise group does not take place at weekends, there is a weekend physiotherapy list, details of which are now included in the laminated notices.

You said

More visitor car parking spaces are needed at North Devon District Hospital.

We did!

Thirty additional visitor car parking spaces have been created.

You said

More nursing staff are required in the Surgical Assessment Unit at North Devon District Hospital.

We did!

The Surgical Assessment Unit has taken the Surgical Emergency Clinic nurse staffing 'in house', leading to increased flexibility in the usage of nursing staff numbers and skill mix.

You said

The waiting time in the Endoscopy Suite at North Devon District Hospital is too long.

We did!

Staff have been reminded to keep the whiteboard, where expected delays are displayed, up to date. Although the appointment letter explains that the arrival time into the unit is not the time that the patient will be seeing the consultant, this can get confused and patients are reassured that it is normal to be waiting, sometimes for up to an hour, pre-procedure.

You said

Food served on the inpatient wards at North Devon District Hospital is not always hot enough.

We did!

Plate covers were introduced for food service to help keep food hot.

You said

Relatives were commenting that, although the Pathfinder Team did full assessments on patients to place them in nursing and residential homes, they then had to wait in hospital for the home to come out and assess them. This meant that they were often left waiting in North Devon District Hospital for quite a few days, especially if it was over a weekend.

We did!

Pathfinder worked with the care homes to create Trusted assessor paperwork to enable the home to accept our referrals without the need to come and assess patients themselves.

You said

Bicycle storage facilities at North Devon District Hospital require improvement.

We did!

Sheffield bike stands were installed at the front entrance to improve cycle storage.

You said

Side rooms 5 and 6 on Glossop Ward are in need of refurbishment.

We did!

Both side rooms have been refurbished, including putting in new windows and showers.

You said

Could it be made easier to speak to a member of the endoscopy team, not just leave a message?

We did!

The telephone portal information was changed so that patients are now directed straightaway to the most appropriate team for their query.

You said

The Endoscopy Unit at North Devon District Hospital is difficult to find.

We did!

The information letter that includes directions to the unit was reviewed and improved.

You said

A healthy post-procedure snack should be provided in the Endoscopy Unit at North Devon District Hospital as an alternative to biscuits.

We did!

Fresh fruit was introduced as a post-procedure healthy snack.

You said

A coffee machine is required in the Seamoor Unit at North Devon District Hospital.

We did!

A hot drinks vending machine has been installed.

You said

Drinking water should be made available for patients at Barnstaple Health Centre.

We did!

Notices were put in place in the waiting areas for patients to ask staff if a drink of water is required. Staff in each patient area have jugs of water and reception has bottles of water available for patients.

You said

Parents of newly-born infants have found it very difficult to come back into the paediatric ward following discharge for blood tests for jaundice.

We did!

– Three transcutaneous bilirubinometers have been obtained. This means that babies can be checked for jaundice without a blood test in their home or on the postnatal ward.

– A new pathway for jaundiced babies has been created. New clear evidence-based guidelines have been approved. Fewer babies will have to leave their homes for blood tests or be admitted to the paediatric ward.

Neonatal, paediatric and maternity services are all working together to start this new initiative which is planned to commence in early July 2018.

You said

It was identified that children and young people on Caroline Thorpe Ward who are stressed and agitated do not have a specific area for care.

We did!

A calm room is being developed where children and young people can 'chill out'.

You said

Parents and young people with long-term health conditions and those that have protracted length of stay on Caroline Thorpe Ward said that it would help if there was a specific room decorated on the ward that felt less clinical.

We did!

The Caroline Thorpe Ward charity 'Care for Kids' will be funding the decoration of a cubicle to help with the wellbeing of these patients. Work will commence at the end of Jul-18.

You said

In the Special Care Baby Unit parental experience survey, parents are asked if they have had as much kangaroo (skin-to-skin) care with their baby as they wanted. Some patients responded as follows:

- *'Skin-to-skin was limited but this was due to my baby's needs'*
- *'I didn't at the beginning due to all the machines he had to have.'*

We did!

- *The skin-to-skin guidelines have been updated, enabling mothers to stay with their babies 24/7 and use reclining chairs for skin-to-skin.*
- *Staff are using new documentation and record daily if the parents provide skin-to-skin care.*
- *Stickers are being sourced for parents to use to help them identify how much skin-to-skin care they are providing.*
- *The staff are having further training.*

You said

It would be good if there was more explanation about car parking charges and that weekly charges are cheaper etc. (Caroline Thorpe Ward / Special Care Baby Unit)

We did!

- A process has been put in place for all admissions to Caroline Thorpe Ward (CTW) to receive the ward welcome leaflet.
- Staff give parents details about parking on admission to CTW and the Special Care Baby Unit (SCBU).
- Details about car parking have been put up on the ward and in the parent facilities.
- SCBU is creating ward contact cards with parking details for each parent.
- CTW will be updating their next welcome booklet to have more specific details.

You said

A welcome leaflet would be an idea, setting out information about food times, visiting rules, the playroom, the parents' room and shop opening. (Caroline Thorpe Ward)

We did!

There is an existing up-to-date ward welcome leaflet available on the ward. To ensure that all parents receive the leaflet going forward, a leaflet will be put ready on the locker when a bed is prepared for the admission of a patient.

You said

Parents on the Special Care Baby Unit identified that often discharges from the ward were hurried and not planned as well as they could be.

We did!

- Discharge planning now begins from admission to the ward to prepare new mums and dads for taking their baby home.
- Weekly discharge planning meetings are held with parents supported by the neonatal outreach team and ward staff, doctors and other members of the multidisciplinary team, if required.
- Documentation has been changed

You said

Some inpatients at North Devon District Hospital said they would like more help to eat meals.

We did!

The Trust recruited a team of mealtime companion volunteers to provide additional support at mealtimes, motivating patients to eat [Privacy & Cookies Policy](#) g staff

| *to spend additional time with patients who need more assistance.*



Last updated: June 6, 2019