

TRUST BOARD
24th September 2015

TITLE	Patient led assessment of the care environment (PLACE)
EXECUTIVE SUMMARY	<p>The purpose of this paper is to brief the Trust Board on this year's PLACE results, provide comparison to the national averages and propose some of the necessary works required to address low scoring areas.</p> <p>Food and cleanliness both scored above the national averages at our hospitals whereas privacy, dignity and wellbeing, plus condition, appearance and maintenance were below the national average scoring.</p>
BOARD ASSURANCE (RISK)/ IMPLICATIONS	<p>The Health and Social Care Information Centre (HSCIC) receive the results and publish the data. The data will be published as Official Statistics and in particular will be shared with the Care Quality Commission, DoH, NHSCB, CCGs (when requested) National Audit Office (when requested) and the HSCIC (for clinical quality indicators).</p>
STAKEHOLDER/ PATIENT IMPACT AND VIEWS	<p>Patients make up at least 50% of assessment team and representatives from Patients Panel, Public Governors and Healthwatch made up the team at this years audit.</p>
EQUALITY AND DIVERSITY ISSUES	None
LEGAL ISSUES	There are no legal issues.
The Trust Board is asked to:	The Board is asked to note the contents of this report
Submitted by:	Chris Bell, Associate Director of Estates and Facilities on behalf of Valerie Bartlett, Deputy Chief Executive.
Date:	September 24 th 2015
Decision:	For Assurance

Patient-led assessment of the care environment (PLACE)

1. PURPOSE OF PAPER

The purpose of this paper is to update the Trust Board on the outcome of the PLACE inspection that took place in March and April of this year.

2. INTRODUCTION

PLACE audits assess hospitals across a range of environmental aspects against common guidelines. It is recognised that hospitals vary in age and design; and sometimes this will limit their ability to meet the higher criteria. Whilst there may be nothing that the organisation can do about some of these issues, it is important that the assessment is based on standard criteria and no allowances should be made for such factors. The scores awarded reflect what was seen on the day, focus entirely on the care environment, and do not assess clinical care provision or staff behaviours. The assessment extends only to areas accessible to patients and the public (for example, wards, departments and common areas) and does not include staff areas, operating theatres, main kitchens or laboratories.

For the first time dementia friendly environment is included in the PLACE assessment alongside the other elements of privacy and dignity, food, cleanliness and general maintenance of buildings and facilities.

PLACE provides an invaluable resource in assessing the care environment. This will directly support the provision of a high quality service to patients and directly inform the Trust's future strategic priorities. The assessments take place every year, and results will be reported publicly to help drive improvements in the care environment.

PLACE assessments are voluntary and not a requirement. However, participation in the process will make an invaluable contribution to assessing the Trust's care environment.

3. THE PATIENT'S VOICE

The key feature of PLACE is the central role of patients in carrying out the assessments. At least 50 per cent of the team must be patients. The Trust has successfully recruited an appropriate number of patient assessors

Patient assessors can include patients, relatives, visitors and advocates as well as members of Healthwatch, Foundation Trust public governors and voluntary sector representatives.

The assessment period this year ran from February to June. This year's results were published on the 11th August 2015.

For practical reasons PLACE cannot be entirely unannounced and the Trust was given six weeks' notice of our assessment week by the Health and Social Care Information Centre (HSCIC), although the assessment team were able to pick a time in that week to do the assessment. Several assessment teams audited on the day and patients or their representatives made up of at least 50 percent of each team.

4. INSPECTIONS

This year's Ashford PLACE inspection was carried out on the 4th March 2015.

This year's St Peters PLACE inspection was carried out on the 29th April 2015.

The detailed scores for the areas inspected are:

Areas	Ashford Hospital	St Peter's Hospital	National Average
Cleanliness (of hospital areas)	99.23%	99.52%	97.57%
Food	93.29%	95.62%	88.49%
Privacy, Dignity and Wellbeing	75.66%	88.03%	86.03%
Condition, Appearance and Maintenance	87.39%	88.29%	90.11%
Dementia	70.98%	72.63%	74.51%

Appendix 1, Table of comparison against other local Surrey Trusts is attached for information

5. FINDINGS

The findings in the five key areas were as follows:

Cleanliness

Both hospitals scored above the national average for the second consecutive year. This assessment is supported by the recent comments from our CQC inspectors who were warm in their praise of cleanliness in our hospitals.

The Trust currently has an in-house Housekeeping team of 142wte who are well managed and motivated, and this is evidenced in the excellent staff satisfaction surveys, 95% compliance rates for mandatory training, and appraisal levels that are the best in the Trust. Sickness rates are 2.7% below the Trust average and particularly low for an ancillary workforce.

The Housekeeping team have also been shortlisted for the Building Better Healthcare Awards in the category of Facilities Team of the Year to be announced on the 4th November 2015.

Food

The excellent food score is consistent with previous inspections and reflects ongoing efforts to continuously improve the Trust's catering service. Recent improvements have included the updating of menus to ensure that dishes are seasonal, and the removal of dishes that are less popular. There have been no formal complaints over the last year, and the catering department regularly receives compliments.

NHS Standard Contract

Food quality standards are now included in the NHS Standard Contract – making them legally binding for hospitals. These standards include:

Hospitals should screen all patients for malnutrition on admission and patients should have a care plan that identifies how their nutritional needs are met;
Hospitals must take steps to ensure patients get the help they need to eat and drink, including initiatives such as protected meal times where appropriate;
Hospital canteens / restaurants must promote healthy diets for staff and visitors – the food offered will need to comply with government recommendations on salt, saturated fats and sugar;
Food must be sourced in a sustainable way so that it is healthy, good for individuals and for our food industry.

A draft Nutrition and Hydration strategy has been developed to address the above standards. This strategy aims to encourage healthy eating, high-quality food production, sustainability and excellent nutritional care.

Delivery of the strategic aims will be measured in part by PLACE. It is anticipated that the current format of PLACE will be amended to include a more detailed evaluation of how well hospitals are working to meet their objectives and the required hospital food standards

Privacy and dignity

Ashford Hospital performed less well than the national average in this area. Ashford Hospital patients do not have access to their own TV, or radio, or a private room on the ward where they can go for conversations and this is reflected in the below average national scoring. There are only fourteen questions in total in this section hence a few areas not meeting the specified criteria significantly impacts on the overall scoring.

Condition Appearance and Maintenance

Both hospitals scored marginally below the national averages. Our hospitals have been undergoing a programme of painting and refurbishment over the last couple of years. We continue to identify areas for improvement, have plans in place to carry out further works over the coming year, and are aware of the areas in need of refurbishing. Ward environment is an important part of the PLACE audit and the PLACE audit has identified environmental improvements that are required. The Trust has developed a 3 year priority list of ward upgrades and refurbishments. However, the lack of decanting facilities is impacting on the ability to deliver the programme. This has been raised as a risk and options / solutions are being developed with Divisional colleagues.

Dementia

The low national average score relates to this area being new and the standards only recently being developed. The Trust's dementia strategy identifies required improvements to the environment and sets out future activities - including designing an exemplar ward bay and the initial phases associated with colours, signage and basic amenities. These have been costed and are now progressing through the funding process.

Action Plans

Actions are already underway to address some of the public condition and maintenance issues such as public toilets, washing the cladding outside of Ashford Hospital, replacing some of the worn entrance mats and repainting some public areas.

The action plans were developed with the assistance of the patients and public governors who lead the PLACE inspections. ***These are attached as Appendices 2 and 3.***

6. GOVERNANCE

There are bimonthly meetings between estates and facilities, the infection control team, dieticians and clinical nurse leaders with a set agenda covering all the PLACE topics. The meeting has minutes and actions and reports to the Patient Experience Monitoring Group quarterly.

The Health and Social Care Information Centre (HSCIC) have received the results and published the data. The data will be shown in Official Statistics and shared with the Care Quality Commission, DoH, NHSCB, CCGs (when requested) National Audit Office (when requested) and the HSCIC (for clinical quality indicators).

The results illustrate how hospitals are performing nationally and locally. Trusts are required to publish their PLACE results and to produce a short local improvement plan, indicating how the PLACE report will be used to drive improvements. The improvement plan will be managed through the Patient Experience Monitoring Group.

7. RECOMMENDATION

The Board is asked to note and seek assurance from the contents of this report.

Appendix 1

ASHFORD AND ST. PETER'S HOSPITALS TRUST	Organisation Type	Cleanliness	Food	Privacy, Dignity and Wellbeing	Condition Appearance and Maintenance	Dementia
EPSOM AND ST HELIER HOSPITALS	EPSOM HOSPITAL	96.74%	87.93%	80.33%	90.05%	74.35%
EPSOM AND ST HELIER HOSPITALS	ST HELIER HOSPITAL	97.45%	80.61%	75.94%	83.57%	60.75%
FRIMLEY HEALTH HOSPITAL NHS	FRIMLEY HEALTH	98.24%	90.71%	84.21%	94.22%	79.65%
EAST SUSSEX HOSPITAL TRUST	EAST SURREY HOSPITAL	97.98%	85.56%	79.27%	86.67%	56.18%
ASHFORD AND ST. PETER'S HOSPITALS	ASHFORD HOSPITAL	99.23%	93.29%	75.66%	87.39%	70.98%
ASHFORD AND ST. PETER'S HOSPITALS	ST PETERS HOSPITAL	99.52%	95.62%	87.24%	88.29%	72.63%
ROYAL SURREY COUNTY HOSPITAL TRUST	ROYAL SURREY HOSPITAL	99.72%	92.24%	86.97%	95.15%	92.04%
NATIONAL AVERAGES		97.57%	88.49%	86.03%	90.11%	74.51%

Appendix 3

PLACE Assessment – Action Plan

Wednesday 29th April 2015
St Peters Hospital

Areas assessed

May Ward
Holly Ward
Birch Ward
Falcon Ward
Swan Ward
MSSU Ward
Ash Ward
Swift Ward
Maple Ward
Aspen Ward
Accident and Emergency Department
Outpatients Audiology / ENT & area 3
X-Ray
External Areas
Communal Areas

Area	Work Needed	Timescale	Responsibility	Progress
May Ward	<ul style="list-style-type: none"> Flooring outside of the bays is very damaged and in need of replacing Walls throughout the ward and back of beds damaged and in need of repair Ceiling tiles need replacing in central core of the ward Bath shower room being used as a storeroom convert to storeroom 	Schedule into Capital ward refurbishment program 2015/16	Andrew Grimes Head of Capital Projects	Access to ward areas not available due to bed losses. To be reviewed with Executive Team in September.
Holly Ward	<ul style="list-style-type: none"> Flooring inside of the bays is very damaged and in need of replacing Walls throughout the ward and back of beds damaged and in need of repair Bath shower room being used as a storeroom convert to storeroom 4C 07 	Schedule into Capital ward refurbishment program 2015/16	Andrew Grimes Head of Capital Projects	Access to ward areas not available due to bed losses. To be reviewed with Executive Team in September.
Maple Ward	<ul style="list-style-type: none"> Flooring throughout the ward is very damaged and in need of replacing Ceiling tiles need replacing in central core of the ward Walls throughout the ward and back of beds damaged and in need of repair Shower room being used as a storeroom convert to storeroom 	Schedule into Capital ward refurbishment program 2015/16	Andrew Grimes Head of Capital Projects	Access to ward areas not available due to bed losses. To be reviewed with Executive Team in September.
Maple Ward	The ward still has a few non wipe able chairs which require recovering or changing	1 st August 2015	Clinical Nurse Lead	Completed
Aspen Ward	Lower parts of the walls scuffed throughout the ward and could do with wall paneling to protect them	1 st September 2015	Graham Bigger Head of Estates and Infrastructure	Order to be placed for painting. Wall protection to be added later.
Aspen Ward	Large sections of the central flooring is cracking down the middle	Assess scale of work required 1 st June 2015	Andrew Grimes Head of Capital Projects	Access to ward areas not available due to bed losses. To be reviewed with Executive Team in September.

Swift Ward	Bay opposite nursing station has holes in the wall and clinical waste bin damage needs repairing and protective paneling	Assess scale of work required 1 st June 2015	Graham Bigger Head of Estates and Infrastructure	Order to be placed for repair and painting. Wall protection to be added later
Swift Ward	Shower room being used as a storeroom convert to storeroom and needs conversion of use	1 st September 2015	Andrew Grimes Head of Capital Projects	Access to ward areas not available due to bed losses. To be reviewed with Executive Team in September.
MSSU Ward	Large sections of the central flooring is cracking down the middle	Assess scale of work required 1 st June 2015	Andrew Grimes Head of Capital Projects	Access to ward areas not available due to bed losses. To be reviewed with Executive Team in September.
MSSU Ward	Toilet had a missing lock	ASAP	Keith Hayward Estates Manager	Lock replaced/Completed
Ash Ward	Skirting board damage on toilet 3c02	Assess scale of work required 1 st June 2015	Keith Hayward Estates Manager	Awaiting quote.
Ash Ward	Corridor Walls damaged by bays 4 – 5 needing painting and protective paneling	Assess scale of work required 1 st June 2015	Keith Hayward Estates Manager	Quoted order to be placed
Ash Ward	Wall opposite room 3c05 is damaged by water leak	Assess scale of work required 1 st June 2015	Keith Hayward Estates Manager	Quoted order to be placed
Falcon Ward	Window blinds throughout the ward are broken and need replacing to possible disposable curtains order through Maciel Vinagre Housekeeping Manager	1 st August 2015	Clinical Nurse Lead	Reviewing quotes for replacement blinds and fittings. In addition, will receive quotes in September for replacement of windows on Falcon ward.

Falcon Ward	Seating in the reception area is not wipe able and needs replacing	1 st August 2015	Clinical Nurse Lead	Will be renewed as part of the Bariatric service expansion project
Falcon Ward	Diffusers in the corridor are yellow and need replacing	1 st July 2015	Keith Hayward Estates Manager	New diffusers to be made. Material purchased
Falcon Ward	Toilet in bay D has a broken lock	ASAP	Keith Hayward Estates Manager	Completed.
Swan Ward	Some of the high chairs in the bays are not wipe able and need replacing i.e. carryout an audit of all patient visitor seating and change to wipe able furniture or arrange to have them recovered	1 st August 2015	Kelly Irvine Clinical Nurse Lead	Completed.
All Wards	<p><u>Dementia friendly environment</u> requires the following that was largely missing:</p> <ul style="list-style-type: none"> • Large faced clock with date and time in all bays. • Toilet doors in a distinctive colour with a pictorial toilet sign that can be seen from all areas of the ward. • Clear signage in the ward prominently displayed, showing the hospital name and ward name. • Toilet seats, flush handles and rails in a colour that contrasts with the toilet bathroom walls and floors • Mirrors that can easily be removed if required or fixed in a way that allows for them to be temporarily covered 	Work to commence on Swift Ward end two bays as a trial before being rolled out	Chris Bell Associate Director of Estates and Facilities	<p>The work has been estimated and costs submitted.</p> <p>Dementia lead to take forward and bid for funding.</p>

All Wards	Signage: Temporary signs were stuck to walls with either blue tac or tape. This damages the walls and makes the ward look untidy. All signs to be either attached to notice boards laminated if not in a glass frame or inserted into clip frames	1 st August 2015	All Clinical Nurse Leaders	Gradually removing all temporary signs but difficult because there is a lot of staff information such as clinical pathways, escalation processes etc that need to be easily accessible on walls.
Communal areas	Main entrance Ladies toilets needs a completed refurbish - damaged walls especially around sinks and flush handles	1 st September 2015	Andrew Grimes Head of Capital Projects	Quotes awaited
Communal areas	Lift signs damaged- inside most of the main entrance lifts and need replacing	1 st July 2015	Graham Bigger Head of Estates and Infrastructure	Quote awaited for new signage.
Xray	Ceiling tiles stained from previous leaks and need replacing	Assess scale of work required 1 st June 2015	Graham Bigger Head of Estates and Infrastructure	Complete
Xray	Disabled toilet sign on the wrong toilet- as the toilet doesn't have the hand rails review toilets and signage and place call on helpdesk	1 st June 2015	Andrew Moth Imaging and X-Ray	Completed
Xray	Waiting area chairs not wipe able and needs replacing	1 st September 2015	Andrew Moth Imaging and X-Ray	Completed
Xray	Loop Hearing aid- staff didn't know how to operate it	ASAP	Andrew Moth Imaging and X-Ray	Completed
A&E	Main reception needs repainting and red stripped floor markings need	Assess scale of work	Keith Hayward	The red stripped floor markings have been

	renewing in front of reception desk, plus old infection control floor sign needs removing outside of Peads entrance as damaged	required 1 st June 2015	Estates Manager	renewed.
Abbey Block	Ground floor ladies toilet needs refurbishing ground floor night entrance, plus review the amount of toilets available in the main reception	Assess scale of work required 1 st June 2015	Andrew Grimes Head of Capital Projects	Out to tender
Main Entrance	Main entrance fixed matt was reported as in need of replacement	Assess scale of work required 1 st June 2015	Andrew Grimes Head of Capital Projects	Following an assessment changing 2 of the three main entrance mats in September 2015

Appendix 2

PLACE Assessment – Action Plan

Wednesday 5th March 2015
Ashford Hospital

Areas assessed

- Main Entrance
- Car Parks
- Wordsworth Ward
- Chaucer Ward
- Main Outpatients
- Dickens Ward
- Fielding Ward
- Public Corridors & Toilets
- Jasmine Suite
- Eye Ward
- Infusion Suite
- External Areas

Identified Issue	Work Needed	Timescale	Responsibility	Progress
Hospital Cladding is very dirty	Cleaning of the hospital white cladding	1 st June 2015	Graham Bigger Head of Estates and Infrastructure	Cleaning in progress
Hospital front entrance plant pots some are broken and emptied	Repair or replace broken plant pots and paint and replant existing pots	1 st May 2015	Keith Hayward Estates Manager	Completed
Disabled parking signage	Some confusion of entry and exit into the disabled parking area to be reviewed to see whether it can be improved <i>(include in any planned signage review)</i>	1 st June 2015	Mark Ball Portering / Security Manager	Completed
Hospital Signage to Outpatients when entering the main entrance	Improve signage to Outpatients, X-Ray, Infusion Suit, Eye Ward etc when entering through the main entrance <i>(include in any planned signage review)</i>	1 st June 2015	Andrew Grimes Head of Capital Projects	Ongoing updates to support service changes
Main Entrance: Door sign	Entrance double doors signage peeling <i><u>I have a quote of £54 from bling if you want me to pass it over?</u></i>	1 st April 2015	Keith Hayward Estates Manager	Completed
Main Entrance: Telephone trunking near to the doors	Telephone trunking wires exposed needs repairing	10 th April 2015	Keith Hayward Estates Manager	Completed
Toilets: Main Entrance	Male toilet urinal water flow does not appear to be sufficient and Floor damage needs repairing <i><u>long standing issue that makes the toilets smell of stale urine</u></i>	10 th April 2015	Keith Hayward Estates Manager Andrew Grimes Head of Capital Projects	Floor damage repaired.

Chaucer Ward and all others: Toilet pull cords	Toilet pull cords several are soiled and need replacing Source new type of cords so could be wipe able	10 th April 2015	Keith Hayward Estates Manager Linda Towey Infection control and prevention consultant	Still trying to source suitable type of cords.
Chaucer Ward: Emergency exit	Emergency exit blocked by a trolley and chair	Completed	Diana Lashbrook Clinical Nurse Lead	Completed
Wordsworth Ward: Cleanliness	Review cleaning of raised toilet bowel/seats as some were soiled	Ward Closed		Ward Closed
Wordsworth Ward	Wall damaged Bay C and room D	Ward Closed	Keith Hayward Estates Manager	Completed
General Outpatients	Café signage in some areas temporary laminated around the area and should now be more permanent	1 st May 2015 Completed	Maciel Vinagre Housekeeping / Catering Manager	Completed
General Outpatients: Cardiology	Patients coming out of the main waiting area were finding it difficult to locate area D, and appoint letters not signing them as clear as the other Outpatient letters. Discuss with Diana Lashbrook who will explain	1 st May 2015	Marian Winsall Business Service Manager OPD	Completed
General Outpatients; Decoration	Few scuffs on walls and corners need making good <i>include in any other decoration works at Ashford</i>	1 st June 2015	Keith Hayward Estates Manager	Completed
Dickens Ward Decoration	Few scuffs on walls and corners need making good, plus blue tac on several doors <i>include in any other decoration works at Ashford</i>	1 st June 2015	Keith Hayward Estates Manager	Quoted order to be placed

Discharge Lounge off Dickens Ward	Discharge lounge in need of decoration and matching furniture. Looks like we have just gone into an empty bay without making it more welcoming	1 st June 2015	Diana Lashbrook - this was handed over to Kelly Irvine Dickens Clinical Nurse Lead	Being reviewed by Kelly Irvine
Fielding Ward: Toilet	Toilet 97F22 requires engaged sign. Toilet 97F12 has no working lock, plus dripping tap. Diana discuss with Estates to address	Ward Closed	Diana Lashbrook Clinical Nurse Lead	Ward Closed
Fielding Ward Bay A3 + A4	On the day of the inspection chairs very close together may have been moved by patients to check	Ward Closed	Diana Lashbrook Clinical Nurse Lead OPD	Ward Closed
Ceiling Tiles	Level 1 and 2 has long corridors and many of the ceiling tiles are old, chipped and bowed. To be captured in backlog maintenance programme.	1 st June 2015	Graham Bigger Head of Estates and Infrastructure	