

INNER NORTH EAST LONDON JOINT HEALTH OVERVIEW & SCRUTINY COMMITTEE

All Members of the Inner North East London Joint Helath Overview and Scrutiny Committee are requested to attend the meeting of the Committee to be held as follows:

Thursday, 12 February 2015 at 7.00 p.m.

Room 3, Assembly Hall, Hackney Town Hall, Mare Street, London, E8 1EA

SUPPLEMENTARY DOCUMENT.

Members			Representing
Chair:	Councillor Ann Munn	_	INEL JHOSC Representative for Hackney Council
Vice-Chair:	Councillor Dianne Walls OBE	—	INEL JHOSC Representative for Newham Council
Councillor Asma Begum		-	INEL JHOSC Representative for Tower Hamlets Council
Councillor David Edgar		-	INEL JHOSC Representative for Tower Hamlets Council
Councillor Mahbub Alam		_	INEL JHOSC Representative for Tower Hamlets Council
Councillor Ben Hayhurst		_	INEL JHOSC Representative for Hackney Council
Councillor Rosemary Sales		_	INEL JHOSC Representative for Hackney Council
Councillor Anthony McAlmont		_	INEL JHOSC Representative for Newham Council
Councillor Winston Vaughan		_	INEL JHOSC Representative for Newham Council
Councilman Wendy Mead		_	INEL JHOSC Representative for City of London
	or this body is the prese	nce	of a member from each of three of the four

<u>Contact for further enquiries:</u> Tahir Alam, Strategy, Policy & Performance Team, Tel: 0207 364 5064 E-mail: tahir.alam@towerhamlets.gov.uk Web:



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5. TRANSFORMING SERVICES CHANGING LIVES PROGRAMME - A CASE FOR CHANGE AND NEXT STEPS (Pages 1 - 4)

SUPPLEMENT

Joint statement from the North East London Local Healthwatch Organisations to the Inner North East London Joint Health Overview and Scrutiny Committee

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Joint statement from the North East London Local Healthwatch Organisations to the Inner North East London Joint Health Overview and Scrutiny Committee

This statement is from the North East London Local Healthwatch Organisations covering City of London, Hackney, Newham, Tower Hamlets, and Waltham Forest.

We have all read the Transforming Services Changing Lives Case for Change (The Case) December 2014. Having read The Case we welcome and agree with what it says. However we feel it is a missed opportunity. For some months we have been engaging with the Trust in a constructive manner in order to try and effect improvement in the patient experience at the Trust. We have fed back to the Trust concerns arising from what our members have been telling us about problems they have encountered with the Trust. Examples are attached to this statement these examples are broadly representative of what we have been told over a number of years.

The financial position at the Trust is accepted by us and we understand that this imposes some limits to what the Trust can do. However, the failure in The Case to bring forward any concrete proposals in order to deal with the identified issues is not a position that we can support as it means that our members and the patients in our communities will have to endure sub optimal services for longer that they should. It is noted that some of these problems go back to before the merger. Accordingly, it is a matter of concern that they persist three years later. Many problems raised by service users relate to compassionate care which does not have financial implications but does require change in corporate culture.

We remain committed to working with the Trust in an open and constructive way to find solutions to the problems it faces. However we do need a commitment from the Trust to redouble its efforts to resolve these issues in as short a time frame as possible.

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Patient Experience information

Dec 2014, Rowan Ward, Whipps Cross Hospital

Towards the weekend the Friday 12th Dec my mother has been introduced to solid food and unlimited water and off the IV Drip and mainly on Morphine. The Stoma she now has is working and as we expect and grateful to see a recovery as best we can expect in this situation. The staffing levels Friday 12th Dec and the weekend staffing attention has been negligent. 3 times my mother's colostomy bag has over filled and burst covering the bed and her body and most serious, her wounds. On Friday 12th on the evening after visiting hours had closed she complained for 2 hours that the bag needs emptying and nobody did it. Then it burst and she was left for 3 hours with the contents of her bag on the bed and on her skin. The second time the next day on Saturday 13th she asked 4 times can it be emptied and nobody did it. It burst again and this time her wounds were contaminated with faeces as the bandages were soaked with faeces. The nurse changed her bag and cleaned her skin but did not change her bandages. The faeces was left on her bandages on here open wound with staples for 3 hours. I received a distressing call from my mother telling me what had happened. I rushed to the hospital and demanded that the nurse attend to this have photographic evidence on my PC of this and the names of the immediately. senior staff on that shift. I was appalled with what I saw, it's very graphic. She was cleaned and re-dressed and had to help the nurse with applying the bandages as she didn't have enough staff to help her.

Yesterday I visited my mother and at that time her bad was full again and did need emptying soon. I was personally assured by the senior nurse in charge and the assisting nurse that within 30 mins it would be attended to. We received another distressing call that after being promised of attention that the bag had again burst open again.

This is not acceptable as her wounds will get infected; she is suffering emotional and mentally and extremely distressed.

Nov 2014, general inpatients, Whipps Cross, disabled male with

The whole time I was very distressed by my treatment and care.

Toileting - they told me to go in the bed one night. I have never had to do that before, they made me on this occasion. I was deeply distressed by this.

I have involuntary movement and one nurse told me to 'keep still'. If they had read my notes they would have known I have involuntary movements and cant keep my legs still. One night one nurse tried to feed me and pulled me over to the side of the bed.

One time they put a cup of tea on my bedside but no one came to help me drink it.

One day I didn't even get a wash.

I was scared to be there and I was made to feel guilty about my condition (cerebal palsy).

I feel guilty because it is a big ward and I know they are busy and I know I was only there for a chest infection but...

2014, Royal London, various

Patient received two letters for different appointment dates, one for a procedure she had already had, in one envelope sent to her parents address, where she does not live.

Patient told his heart condition meant he was unlikely to survive 5 years but his appointment postponed for 12 months.

Booked ambulance transport to arrive at RLH for 12pm, was asked to be ready for transport at 10am. Transport had not arrived by 11:30am. I kept phoning, not helpful at all. Transport arrived at RLH at 1pm.

She did not introduce herself or ask how I was feeling at any stage. She did not explain why I had to be connected to the monitor for so long which prevented me from sleeping. She laughed at my birth plan and when I asked for toilet paper at 2am she said 'That's not my job'.

I went to have my first ever breast screen in June 2014. The receptionist looked like she didn't want to be at work, there was no hello, all she said was 'take a seat'. I waited for 40 mins after my appointment time and when I got called, all the nurse said was, 'Take off your upper clothing and come and stand here', no explanation of what was going and what she will do. I had to ask my daughter to ask what are they going to do, even then the nurse said, 'your mother needs to stand here and I will use the machine to screen her breast'.

A resident of Tower Hamlets has given me some feedback on Royal London, Barts. 'It was a "catheter" problem: its extraction was delayed for some weeks and was eventually successfully taken out by a doctor on his day off. The procedure should have been done by nursing staff, but, apparently there are not enough of them.'

2014, St Barts, various

I had chemo treatment for cancer at St Barts - I was very shaken. My first chemo was dreadful, the nurse hadn't taken breaks. It was scary for me, they couldn't get a vein. I was itching all over my body and had to wait two and a half hours before having the

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chemo because none of my doctors were there. They had to get a doctor from another team. My daughter was told we couldn't have a carer. Now I have a carer to help my daughter - the City Councillors helped with that.

My husband had to go on his own by hospital transport to St Bartholomews. After a long tiring day he was booked a taxi - the taxi didn't arrive on time and he was pushed out into the street in his wheelchair onto the pavement in Giltspur Street and left on his own. He was in a vulnerable position and unable to move.

2014, Surgery, Newham, various

Patient waited 6 months for an appointment, had blood in urine. informed had to wait 11 weeks for an appointment. was sent an appointment patient never received. (Surgery, Outpatients)

Pt was referred urgently to NUH Colorectal OPD by GP on 03/07/14 but has not received an appointment yet (21/07). (Surgery, Administration Offices)

Patient awaiting surgery for colostomy reversal, had pre-assessment in July. Consultant was away so not given a date. consultant back now put on someone elses list. (Surgery, Office)