

**Care in the ED Corridor Action Plan  
August 2017**

Information	Recommendation	Action Plan	By Who	Timescale
	All patients being cared for in the corridor of the A&E Department to be given the letter prepared by WRH explaining about being in the corridor.	Learning disability patients to have an easier read version and large print version for those who have visual difficulties.	Dilly Wilkinson	September 2017
	The WRH letter should be amended to briefly explain HWW role. The text for this can be supplied by HWW.	Letter re-drafted to include additional information and checked by Comms	Clare Bush	Completed 12.6.17
	All patients should be given a HWW leaflet so they are aware they can report their experiences to us independently of the hospital.	Ask for a supply from Healthwatch which will be made available to patients in the department wherever they are receiving their care.	Dilly Wilkinson	Completed July 2017
	The designated corridor nurse to be identified by wearing a specific coloured badge (similar to the Nurse in Charge badge) to clearly identify them to patients.	After discussion with the team who raised concerns about normalising corridor care and as CQC concerns it has been agreed to not have a corridor name badge	Clare Bush	Decision to not complete
	All staff to introduce themselves to patients by name, in line with the #hellomynameis campaign.	Comms team to create more information in the waiting room and more 'hello my name is' posters of ED staff.	Clare Bush Comms team	<ul style="list-style-type: none"> <li>Staff were reminded to introduce themselves to patients by name at the June staff meeting.</li> <li>Superseded by new signage which is on order for the ED as per reducing violence and aggression in Accident</li> </ul>

					and Emergency strategy Due Autumn 2017
	Photos of A&E/MAU staff making this pledge could be shared in the A&E areas, subject to Health & Safety considerations.	Comms team to create more information in the waiting room and more '# hello my name is' posters of ED staff.	Clare Bush	<ul style="list-style-type: none"> <li>Staff were reminded to introduce themselves to patients by name at the June staff meeting.</li> <li>Superseded by new signage which is on order for the ED as per reducing violence and aggression in Accident and Emergency strategy Due Autumn</li> </ul>	
<b>Patient Care</b>	<p>WAHT to ensure it is explained to all patients how to call for attention in corridor areas of the hospital, including the MAU where there are no call bells available.</p> <p>WAHT to consider whether patients who appear to be confused or living with dementia, or who have specific communication difficulties or sensory impairments should be nursed in corridor areas of the hospital.</p> <p>WAHT to provide reassurance that best practice on nutrition and hydration of patients on wards is being followed in corridor areas when patients are waiting for lengthy periods.</p> <p>Staff to check patients are able to reach food and drink placed at the end of the trolley and whether any</p>	<p>Laminated signage already in place but further signage to be put in place.</p> <p>No patient should be in the corridor, particularly those with dementia and/or frailty. All patients to be risk assessed as per SOP. Escalation as per process</p> <p>Formal meals and drinks rounds are in place with:</p> <ul style="list-style-type: none"> <li>Allocated HCA</li> <li>Snacks available</li> <li>Drinks machine and bottled water in corridor.</li> </ul> <p>Reminder to staff at staff meeting in May 2017. HCA training and action cards</p>	<p>Comms team</p> <p>Clare Bush Band 7 team</p> <p>Clare Bush Band 7 team</p> <p>Clare Bush Band 7 team</p>	<p>Complete August 2017</p> <p>Dynamic action</p> <p>Complete</p> <p>Dynamic action</p>	

	assistance with this is required.	introduced in May.		
	Consideration to be given to reinstating a refreshment trolley in the A&E corridor area similar to that in the MAU for patients and visitors.	There is one in place in the main department. Signage to ensure that patients and their relatives are aware of facility in place.	Clare Bush Band 7 team	Completed 12.06.17
	Refreshment trolleys to be easily identifiable to patients and visitors with clear instructions about their use.	A sign to be put in corridor in May 2017. ISS to top up supplies more regularly from May.	Clare Bush Band 7 team	Refreshment trolley topped up daily
	W.A.H.T to consider how signage could be improved to make this more visible to patients.	Briony Mills signage review. JF/CB to choose signs from company (reduce aggression in ED). Review original order	Clare Bush Comms team Briony Mills	Signage is on order for the ED as per reducing violence and aggression in Accident and Emergency strategy. Due Autumn 2017
	Patients to be routinely offered pillows and blankets when waiting on trolleys in the corridor areas.	Part of normal comfort and care. 200 pillows ordered a week Blankets to be always available	Clare Bush Band 7 team	complete
	Patients to be told the location of the toilets and how to ask for assistance if they require it.	Improved signage as part of the signage action.	Comms team Clare Bush Band 7 team	Way finding signage due Autumn 2017
	W.A.H.T to provide reassurance that procedures are in place to control patient's pain whilst they are being nursed in corridor areas of the hospital.	<ul style="list-style-type: none"> <li>All patients assessed &lt;15 mins from arrival which includes a pain score.</li> <li>2 -4 hourly comfort rounding for all patients on trolleys which includes pain question</li> <li>Global Risk Assessment Tool</li> </ul>	Clare Bush Band 7 team	In place

		(GRAT) used to assess patients if they remain in the care of the ambulance service at 60 minutes after arrival or 6 hours after arrival and then 2 hourly after this time. The GRAT includes a pain domain.		
WAHT to provide reassurance that procedures are in place to provide patients with their prescription medication when they are subject to extended waits in the A&E Department.	<ul style="list-style-type: none"> <li>Patients do not receive an in-patient prescription chart until they have been admitted by the speciality team.</li> <li>Drugs required in ED are written on the ED cas card.</li> <li>If seen by Dr and agreed, patients may self-medicate only where appropriate.</li> </ul>	ED team	Dynamic actions	
WAHT to provide information about how A&E and MAU staff will be clearly identified so that patients know who they can ask for assistance.	<p>Reminder discussion with team at staff meeting in June to included;</p> <ul style="list-style-type: none"> <li>Nurses to introduce themselves</li> <li>cultural work</li> <li>Uniform key chart for patients.</li> </ul>	Clare Bush Band 7 team	Complete	
WAHT to consider, in light of the findings and recommendations from this Survey, whether there is sufficient staff to care for patients in the corridor areas in A&E and the MAU throughout the 24hr period.	<ul style="list-style-type: none"> <li>Review staffing (workforce review 2016).</li> <li>Bench marked against other areas.</li> <li>NHSI workforce lead been reviewed in 2013, full recruited to posts</li> </ul>	Clare Bush	Completed	
Consider whether doors to the A&E Assessment corridor need to	<ul style="list-style-type: none"> <li>Doors need to stay open for health and safety reasons</li> </ul>	Clare Bush	Completed	

	remain open throughout the day, accepting that this may be the least disruptive option for patients.	<ul style="list-style-type: none"> <li>Patients and staff have report feeling isolated and forgotten when doors have been closed.</li> </ul>		
<b>The Environment</b>	<p>Consider whether doors to the staff toilets can be modified to prevent them from banging</p> <p>Relocate the electronic fob in the side corridor to the opposite wall to ensure patients are not disturbed by staff operating the doors into the hospital.</p> <p>Monitor staff movement from the hospital side of the doors into A&amp;E to reinforce the message that this should not be used as a short cut.</p> <p>Dim the lights in the corridor areas earlier at night to allow patients to rest and sleep.</p> <p>WANT to provide information about how noise will be controlled in corridor areas, particularly at night.</p>	<p>Estates to evaluate door for soft door closures. Matron to contact estates. Completed</p> <p>Completed</p> <p>Completed – a sign has been put up.</p> <p>This can be done when it is seen to be safe. To be discussed with staff at staff meeting with risk assessment shift by shift.</p> <ul style="list-style-type: none"> <li>Staff training and updates</li> <li>Ear plugs are available – use to be advertised.</li> <li>Trial of visual noise monitors to be investigated – wall based ‘ear’ that changes colour if the noise gets too high.</li> </ul>	<p>Clare Bush Engie</p> <p>Clare Bush</p> <p>Clare Bush</p> <p>Clare Bush Band 7 team</p> <p>Clare Bush Band 7 team</p>	<p>August 2017</p> <p>Completed</p> <p>Completed</p> <p>Completed</p> <p>In place</p> <p>Ear plugs available however dynamic environment. Staff turn down lights and try to reduce traffic at night only where possible.</p>

	<p>Provide secure storage space for patient valuables and belongings when they are being nursed for extended periods in the corridor area of the hospital.</p> <p>Consistently use private areas when providing patients with diagnosis or test results.</p>	<p>-Valuables locked away in safe if required.</p> <p>- Other property to be kept with patients and relatives (documented).</p> <p>'M' cubicles available for discrete conversations and all examinations. Staff to reiterate this to all staff and corridor nurses to challenge inappropriate practice.</p>	Clare Bush Band 7 team	Now available
			Clare Bush Band 7 team	In place
<b>Privacy and Dignity</b>	<p>Consistently use the reserved curtained cubicles within the A&amp;E Department when examining or treating patients.</p> <p>When it is unavoidable to discuss patient's personal information in the corridor areas ensure patients are screened and voices are kept as low as practicable.</p> <p>When it is unavoidable to examine or treat patients in the corridor areas ensure patients are screened sufficiently to protect their privacy and dignity.</p> <p>Provide patients with an indication of how long they might be waiting in the corridor area and provide reassurance to patients whilst they are being nursed in the corridor.</p>	<p>In place – cubicles M1 and M2.</p> <p>Reviewing portable screens. Current portable screens to be used as much as possible.</p> <p>Privacy and dignity reminder to all staff, use M1 and M2. Communicated to all Senior Practitioners – corridor nurse to challenge if inappropriate.</p> <p>Staff education to encourage honest conversations. Make patients expectations clear at start of journey and update regularly. Ensure patient has corridor letter</p>	Clare Bush Band 7 team	Complete
			Clare Bush Band 7 team	Complete
			Clare Bush Band 7 team	Dynamic actions
			Clare Bush Band 7 team	Dynamic actions
<b>Waiting Times</b>	Provide patients with a clear	A corridor letter has been created	Clare Bush	In place

	reason why they are waiting in the corridor area.	and given to all corridor patients.	Band 7 team	
	WAHT to provide information and reassurance to the public about the specific actions that are planned to ensure that WAHT is able to meet national standards for trolley waits, and the timetable for implementation. Provide basic facilities for relatives and visitors, including a seat and access to drinks.	Letter to be modified for the addition of 'actions'.	Clare Bush	Completed 12.06.17
	Visitors who are staying overnight should be informed of where hospital facilities can be found and offered blankets.	Chairs in corridor and access to drinks in the corridor where safe and appropriate. Drinks trolley in main department for visitors use	Clare Bush Band 7 team	In place
<b>Other Recommendations</b>	WAHT to provide reassurance that processes are in place to ensure patient records are accurate. Ensure that health and safety requirements in respect of the corridors are always complied with.	Staff to inform visitors: <ul style="list-style-type: none"> <li>Machines and facilities in waiting reception.</li> <li>Drinks machine and bottled water in main department.</li> </ul> Documentation audit - SNAP Monthly Environmental audit. Weekly fire alarm check and safety check by fire officer. Signage for staff (adhere to H&S)	Clare Bush Band 7 team  Clare Bush Band 7 team  Fire officer Clare Bush Band 7 team	Dynamic action  In place  In place

Key

	Completed
	Off plan and unlikely to deliver
	Off plan but will deliver
	On plan