

Sunderland Royal Hospital TOPIC wards patient feedback November 2023

### **Background**

In July 2020 South Tyneside and Sunderland NHS Foundation Trust launched a new initiative which aimed to improve the care and experience of older patients in hospital.

The Older People's Improvement Collaborative (TOPIC) was developed due to the recognition that it is difficult to recruit and retain nurses into the speciality of older people's nursing.

The Trust has acknowledged that staffing shortages lead to poor patient care and that it needed something more than the standard recruitment campaign.

TOPIC aims for improvement in four key areas:

- the recruitment and retention of staff
- staff support, development and education (including clinical skills and QI capability)
- essential patient care
- patient experience

The Trust asked Healthwatch South Tyneside and Healthwatch Sunderland to support the TOPIC programme by obtaining patient, family and carer and staff feedback to provide valuable information that could aid the development of improvement initiatives in older people's care.

## **Brief and methodology**

The Trust commissioned Healthwatch South Tyneside and Healthwatch Sunderland to obtain feedback from patients, carers/relatives/friends and staff working in Care of the Older Person in-patient wards on two of the TOPIC programme's key objectives: patient care and patient experience.

To capture patient experiences of care, Healthwatch developed separate surveys to be completed by patients and family members / carers.

The questions focused on activities of daily living and the support given by ward staff to enable patients to complete these activities during their stay on two wards at South Tyneside District Hospital and six wards at Sunderland Royal Hospital.

#### Themes included:

- communication, understanding care and care planning, decision making
- bathing and hygiene
- nutrition and hydration
- movement/maintaining mobility
- dressing
- engaging in activity/entertainment
- sleep

A third survey was created for staff on the wards which asked questions designed to ascertain levels of workforce confidence, ward culture and barriers to delivery of interventions.

## **Brief and methodology**

On all three surveys, open and closed questions were used to gather quantitative and qualitative data.

Importance was placed on overall patient experience/perceptions of care but the patients requiring specific types of care, e.g. support to bathe/toilet, were also collected to give insight into findings.

Patient responses were gathered at patient bedsides by Healthwatch Sunderland staff and volunteers. Senior ward staff determined which individuals were physically well enough and with capacity to be invited to participate.

Participants were made aware that their responses would be recorded on paper and comments may be included in any report but fully anonymised to protect their identity. Participants verbally consented to this and were given the option to withdraw/stop the survey at any time.

Family member /carer surveys were given to people visiting patients to complete independently and staff surveys were distributed to senior staff on wards to encourage completion.

Family members / carers and staff could then either return survey via the survey return box on the ward, or in the SAE supplied to them.

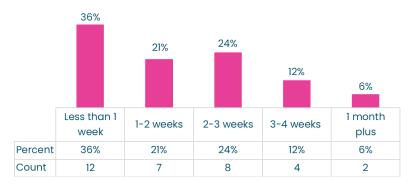
No personal or demographic information was collected.

## Findings – responses

In total we received 33 patients, 5 family / carer and 14 staff member surveys across all wards. The responses per ward is given below.

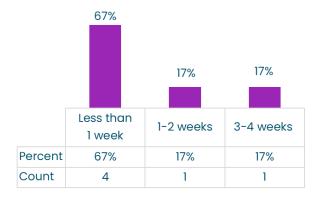
Wards	B21	E51	E52	E53	E56	F61	Total
Patient	8	5	7	7	3	3	33
Family member /carer	2	-	1	-	1	1	5
Staff	6	-	2	-	6	-	14
Total	16	5	10	7	10	4	<b>52</b>

Patients were asked how long they had been on the wards. The responses displayed below that most patients (36%) had been on the ward for less than 1 week followed by 24% who had been on the wards for approximately 2-3weeks.

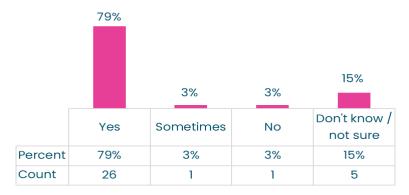


## Family member /carer responses

When asked how long their family member person they cared for had been on the wards most survey respondents (67%) stated less than I week.



Patients were asked if they felt staff on the ward communicated well with them and kept them up to date with their care. As seen below most patients (79%), responded positively.



Patients were asked to explain their answers further. Of those patients who gave an explanation, most gave positive responses, some of these included:

"They are very good and keep well up to date, know what is going on."

"Helpful and tell you what is what and what to expect."

"Talked through the process as I needed an infusion. Always thoroughly explained and they apologised for delays. "

Of those patients who responded negatively, the following responses were received:

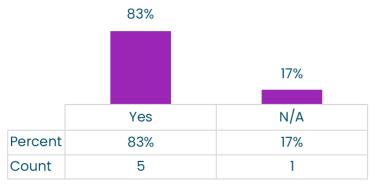
"Roughly know care, communication average, staff tend to pass things onto doctor"

"Not really. No one has asked how I am feeling. They haven't really spoken to me about my care."

"It varies, some don't listen to my concerns about my catheter ."

## Family member /carer responses

Family members/carers were asked if they felt staff on the ward communicated well with them and kept them up to date with their family members/ person they cared for care. As seen below most (83%) responded positively.



Family members /carers were asked to explain their answers further. Positive comments received included:

"I ask questions and the staff answer satisfactorily."

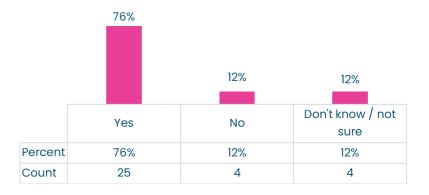
"They were very clear and willing to share details."

"They are fast to answer any questions or help with any needs."

We received one negative comment:

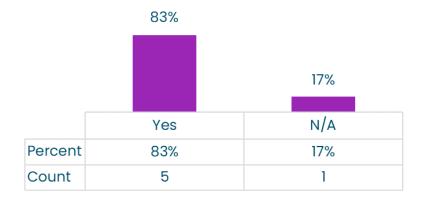
"No one ever talks to you. Whenever you phone the ward no one answers."

When asked if they were aware that staff will only tell their family/carers/friends what they consent (agree) to sharing, most patients (76%) were aware.

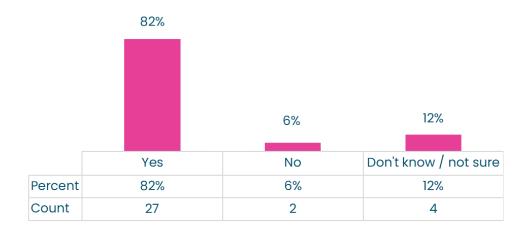


## Family member /carer responses

When asked, are you aware that staff can only tell you things that the patients has consented for them to share, the results show that 83% of family members / carers were aware.



Patients were asked if they feel comfortable asking questions about their care, challenging decisions and refusing treatment. Most patients (82%) responded yes to the question.



When asked to provide additional comments to this question, we received several including;

"Would ask if I had a point, if it affected me, I would challenge."

"Tend to go with the professional view. I am going to speak to my Oncologist to see whether to remain on chemo treatment."

"I would challenge them, but always let them do what they need to do."

"Didn't know I could ask/or feel confident to do so."

## Family member / carer responses

Family members/carers were asked "Thinking about the person you are supporting / visiting do you feel comfortable asking questions about their care and challenging decisions on their behalf? 100% of survey respondents replied yes to the question.

When asked to if they would like to provide additional comments, we received one;

"We ask questions about her care all the time. A couple times we have had to ask more than once."

Patients were asked if they needed help to wash, bathe and/or dress. 52% of patients replied yes and 48% they required no support.

Of those patients who did need support they were then asked if staff helped them. All but one patients replied yes. The one patient who replied not applicable, stated that they preferred their daughter to help them. Some of the comments we received included:

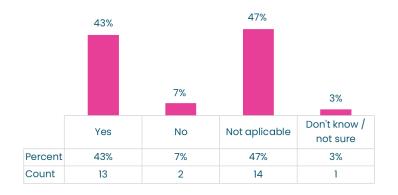
"Been for a shower a couple of times but someone is always around to help."

"Had a good wash this morning, sometimes staff are busy when they put you on the commode as other patients also need help."

Patients were asked if they needed help to eat and drink. 21% stated yes, they did and 79% replied no support was required.

Those patients who responded that they required support to eat and drink, were then asked if staff were there to help. 43% replied yes, 43% replied not applicable and 14% replied no.

When asked if help was offered at times other than set mealtimes 43% replied yes and 47% replied not applicable.



Some of the comments we received from patients included:

"Staff help to cut meat up for me."

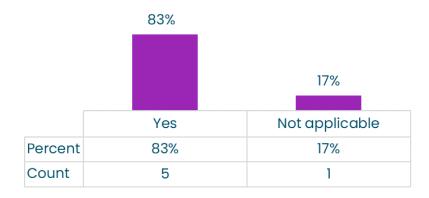
"I can sit up and eat with staff support."

"I ask them to cut some of my food and they do it for me. I can manage from there."

"I see staff helping others."

## Family member / carer responses

Survey respondents were asked if their family member / person they cared for needed help to wash, bathe and/or dress, 100% replied yes. Survey respondents were then asked if staff helped their family member / person they cared for with this. As display ed below 83% replied yes and 17% replied not applicable.



"They change her nappy and clothes daily."

Survey respondents were asked if their family member / person they cared for needed help to eat and drink, 100% responded yes.

When they were then asked if staff were there to help, 67% responded yes and 33% stated no.

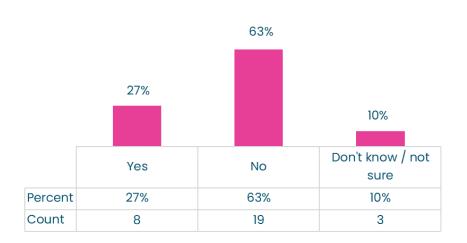
When asked if help was offered at times other than set mealtimes 67% replied yes and 33% replied they didn't know or were unsure

Some of the comments we received included:

"Yes, and I come in to assist for lunchtime when I can."

"I feed my dad as food would be cold if left for the nurses to help. They don't have time to help."

Patients were asked if they are encouraged or supported to clean their hands before mealtimes. Most patients (63%) replied no.



Some of the comments we received from patients included:

"I clean my hands, but no one tells me to. I brought in my own wipes."

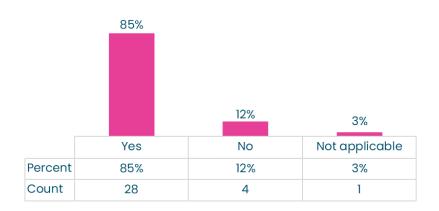
"They come and say time to wash your hands."

"I haven't noticed staff asking people to clean their hands."

Patients were asked a range of questions relating to the food and drinks on the ward. The first question asked, if there was enough food.

The responses show that most patients (85%), replied yes to the question.

Next patients were asked if food and drinks were available when they wanted. 76% replied yes to the question and 6% replied no.





#### **Mealtime observations**

During the Healthwatch team visit observations were noted about the lunch service on several of the wards.

We noted that very few patients were asked or encouraged to wash or clean their hands prior to their meal being served and this occurred across all wards visited.

On some wards the meal service was an efficient and calm process. On these occasions we witnessed staff presenting meal options to patients and supporting them to make choices, staff also supported patients to be sat up comfortably to eat their meal and continued to support patients with cutting of their food and moving tray tables etc.

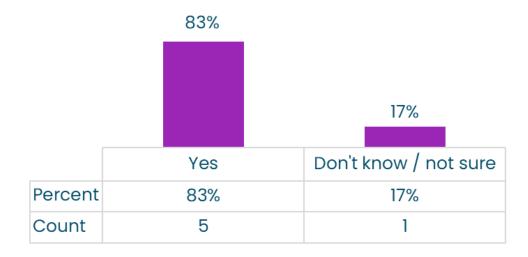
On others it was very rushed and an unorganised process. During these meal services we witnessed staff relaying menu option to patients too quickly or noting the wrong choices down, no support given to prepare or ready patients to have their meals and still giving 1-1 care to patients in bed which resulted in staff shortages to support the meal service.

Overall, we observed the meal service approach and quality differed across the six wards.

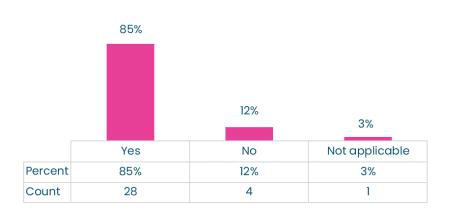
## Family member / carer responses

Family members / carers were asked a range of questions relating to the food and drinks on the ward. The first questions asked, "Is there enough for your family member / person you care for?" 100% of survey respondents replied yes to the question.

Next family members / careers were asked food and drinks were available when their family members those they cared for wanted it. As seen by the graph below, 83% replied yes to the question and 17% didn't know or were unsure.



The final question related to food and drink asked if there was enough choice. Most patients (85%) replied yes to the question.



When asked to provide additional comments on the food, from those who responded a mixed response was received. Comments included:

"I've never asked for food. Food is ok, it's what I'd expect."

"Too much repetition, no choice."

"You can have a cup of tea whenever you want one. I can't fault the food or drinks."

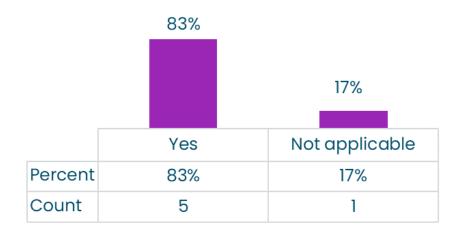
"I have no complaints about the food. It is similar to the food I would eat at home. I eat the food and it fills me up."

"Food could be improved. Meat tough and veg over cooked."

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## Family member / carer responses

When survey respondents were asked if there was enough choice of food for their family member / carer, 83% of replied yes to the question.



When asked to provide additional comments on the food, comments included:

"Three choices for both main course and dessert. Very Good."

"Food is hot and there is enough choice."

Patients were asked the question 'Do you need help to use the toilet?'. 39% of patients replied yes, they did and 61% replied no help was needed. Patients who required help were then asked if staff were there to help when needed. 100% replied yes, staff were there to help.

"My legs aren't good at the moment, so the staff here help me."

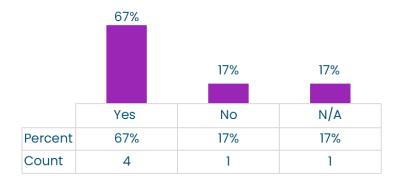
"Sometimes staff are busy, and they can't be in two places at once."

"Sometimes I need help due to my condition and staff are there to help with this. "

## Family member / carer responses

When asked did their family member / person they cared for need help to use the toilet, 67% of survey respondents replied yes and 33% replied it wasn't applicable.

Survey respondents were also asked if staff were there to help when needed. As displayed below, 67% replied yes, staff were there to help.

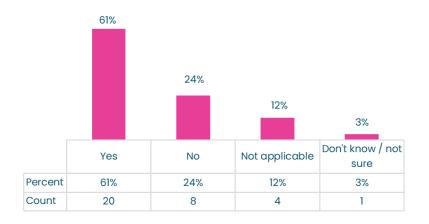


"Dad is incontinent, so he wears a pad continuously. The staff change pad appropriately."

"Obvious signs the ward is understaffed which has an impact on patient care."

"Patients have to wait, my dad waited over an hour."

Patients were asked if they were encouraged by staff/nurses to move around/get out of bed during the day. 61% of patients agreed that they were. Some patients commented that this wasn't applicable as they were too unwell, or it wasn't advised due to their health conditions.



Some of the comments received from patients relating to this question included:

"They don't like you sitting too long."

"Lying on top of bed today and told to get up, it's their rules."

"Yes, I've been encouraged to get up today."

"They ask if I would like to be up & in the armchair."

"Staff like patients to be up and sitting in the chair, I'm only in bed today as had a bad night."

"They tried but could not, as I felt faint."

## Family member / carer responses

Survey respondents were asked if their family member / carer were encouraged by staff/nurses to move around/get out of bed during the day. The response was split with 50% responding yes and 50% responding no.



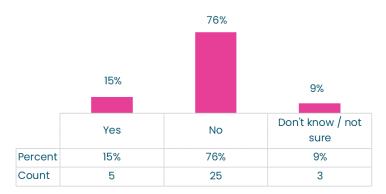
Some of the comments received from survey respondents relating to this question included:

"His mobility is the problem at the moment."

"He cannot walk on his own."

"No one has encouraged this because she can't walk because of her dementia."

Patients were asked if there was any activities during the day on the ward, most patients (76%) answered no to the question.



Some patients went on to provide additional comments to the question and these included:

"I have talking books which I bring in with me. The TV is free but it's on a morning and there is too much activity then with Drs and nurses treating people and changing them. It would be better being free on an evening after visiting."

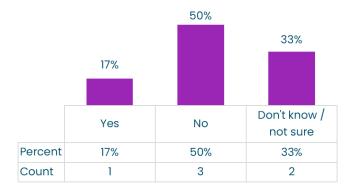
"Other than visitors there are no activities, you must think of things to do."

"I have been to the games room a couple of times - staff took me there."

"Plenty of books on ward."

## Family member / carer responses

When asked if there was any activities during the day on the ward, 50% of family members / carers answered no .

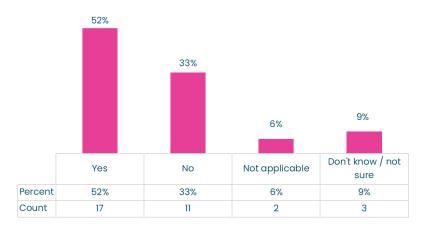


We received a couple of additional comments from family members / carers related to activities on the ward:

"I'm not usually around for long periods of time."

"No activities on wards, all of the patients are in bed."

Patients were asked if they were encouraged to change from nightwear into day clothes during the day. There was a mixed response to this question as seen below:



Patients were asked if they would like to provide any additional comments. Some informed that they are encouraged to change into day clothes, others explained they were too ill, and some stated it was up to a patient's preferences. Comments included:

"Change myself but nurses help."

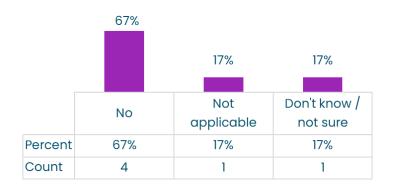
"Too ill at the moment, so I stop in my nighty."

"I prefer to be in my nightdress."

"Staff ask if you want to put your day clothes on."

## Family member / carer responses

When asked if their family member or person they cared for were encouraged to change from nightwear into day clothes during the day 67% of survey respondents stated no.

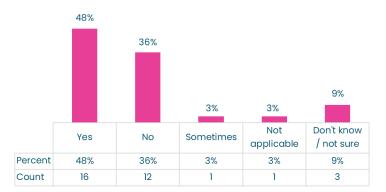


When asked to provide additional comments, family member /carers give the following:

"No one tells her or help her do it."

"Sometimes he's been wearing a t-shirt and sometimes pajamas - don't know the reason, he's in bed mostly."

When asked 'Do you sleep well on the ward?' we received a mix response from patients. 48% replied yes and 36% replied no.



Patients were asked if they would like to provide any additional comments. Some of the comments we received included:

"I don't sleep due to the activity, noises, beeps, other patients, screaming etc."

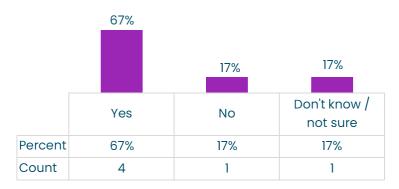
"I didn't sleep at all last night or the other nights, because of the noise from patients."

"I can't get to sleep due to ward activity. I won't miss it."

"I don't sleep due to the noise of the other patients shouting through the night and they are up and about. This goes on for hours."

## Family member / carer responses

Family members / carers we also asked if their relative or those they care for sleep well on the ward. 67% of survey respondents replied yes.



We only received one comment from family members / carers who commented that the ward was noisy.

#### **Observations - Staff interactions with patients**

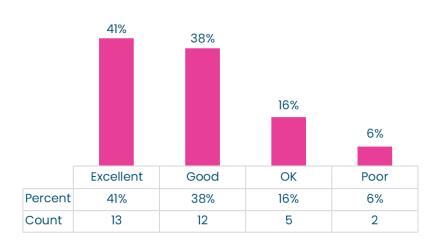
Whilst visiting the wards the Healthwatch Team made several observations of positive interactions between staff and their patients across the range of staff teams including Healthcare Assistant, ward managers and the cleaner.

We observed many staff who were kind, caring and responsive to patients and their needs. One example included a patient who was non-verbal and was communicating their needs with a nurse who took her time to understand them and then respond appropriately.

We also witnessed other interactions that were fewer in quantity, where staff appeared rushed, distracted or abrupt with the patients they were caring for.



Patients were asked to give an overall rating of how their experience was on the ward. Most either rated it as excellent (41%) or good (38%).



Patients were asked to explain the rating they gave, the following comments were received:

"I want to go home because of the food, lack of sleep and other patients."

"They dealt with illnesses quickly which is really good. They found an underlying condition and gave me antibiotics."

"I have been made to feel at home, staff are lovely, it's like being at home."

"Staff are good, that makes a difference."

"It is more or less what I expected, they do look after you."

"Can't think of anything, some nurses seem that they really care, could be their nature."

"I have been on 3 wards in the last 6 weeks and never had disruption through the night like this."

"Not nervous of asking anything, if you ask it's there immediately."

"I have no complaints. Staff treat everyone the same."

## Family member / carer responses

Survey respondents were asked to give an overall rating of how their experience was on the ward. There was an even split as from excellent to OK as seen below:



Family member / carers were asked if they would like to provide any additional comments:

"I was invited to be allocated a "carer passport" which means I can come in anytime (I choose to come at lunch to feed him) and this means other family members can visit at the visiting hours."

"People and patients should be banned from smoking at the building entrance and doors."

"Wheel on table is broken, scalding could happen if it tips over and has not been replaced! Broken equipment should be removed from ward. Dead bodies are removed from ward during visiting."

"It's difficult because my wife is in pain and some days her speech is poor because of that it's difficult seeing her like that."

Patients were asked to inform us what was good about their experience on the ward. We received several positive comments, some relating to the care and treatment they received, and others related to the environment and surroundings. An example of them is given below:

"They listen to me, come to me if needed quickly, staff spend time nothing is a problem."

"The nurses are good and the ward is bright and clean. The food is good too."

"Its spotlessly clean."

"After the operation I was glad to come back to ward as I know staff. Staff always do best and are dedicated to their jobs."

"Care was there all the time, never had to ask for anything which is great, encouraged to drink, water change twice a day, food has been fabulous."

"I'm in a safe place and treated well."

## Family member / carer responses

We received a few comments from family members or carers when we asked what has been good about the experience for their relative or those they care for, see below:

"Carer passport, helpful and informative staff."

"The staff and doctor Sophie at Ward E52 have been fantastic and deserve a reward for their diligence and commitment to their patients."

"Food was good."

"The nurses were kind and helpful."



Patients were asked to inform us what could be improved. We received several comments, some patients commented there was nothing that could be improved and others gave the following comments:

"Staff need a pay rise and the hospital need more staff. The food is tasteless, vegetables are ok as is the ice cream. There should be a free TV. "

"The food, it doesn't taste of much."

"Expect them to keep appointments and communication."

"The sleeping issue. It is not good for my mental health. The noise and moving around, it starts at 10pm through to 2am. I get no sleep then need to sleep through the day as I am tired."

"I would like TV on the ward."

"Sometimes it gets very noisy."

"I feel staff attitudes aren't helpful sometimes. The staff are under pressure."

"There could be a big TV for the ward. The ward clock needs a battery."

"Not being disturbed by other patients."

## Family member / carer responses

When asked what could be improved family members and carers gave the following responses:

"Keep a close and safe eye on personal belongings."

"More staff to assist with elderly patients."

"The food could be improved, The vegetables are undercooked and the meat was tough. More nutritious meals would be better."



#### **General ward observations**

The Healthwatch Team noticed discrepancies between levels of cleanliness tidiness across the wards visited.

Some wards were very clean and Domestic staff were present throughout the whole visit and on others we observed a strong malodour and some areas, particularly the corridors of some wards, which were cluttered and untidy.

Staffing levels across wards also appeared to differ. On some wards staff seemed to be stretched and commented on lack of support available to complete lunch service for example and on other wards staffing levels appeared good and the wards seemed calm and organised.

Patients were asked if they would like to provide any additional comments. We received the following:

"Very lucky to have such a hospital in this city and it's free, people need to appreciate it."

"I don't see doctor daily. I've been told I will have camera down every day but then it doesn't happen. I don't know what is happening."

"The girls are really good."

"I have no complaints."

"This is a fabulous ward."

"I have enjoyed my stay; it has been a change."

"No complaints about being in Hospital. I have been treated well but staff are busy."

## Family member / carer responses

When asked to provide any additional comments we received the following:

"Dad lost his lower dentures in the hospital which is quite annoying as it affects his speech and means he struggles to eat some of the food offered. I spent a lot of time going from ward to ward to try and find them. This was the only negative."

Staff were asked a range of questions that related to communication and care. In total we received 13 completed surveys, please see below the responses.

The results show that staff are most confident when determining a patient's personal preferences and least confident when giving information related to discharge and options on leaving hospital.

How confident are you to communicate with your patients and where appropriate family / friends/carers in relation to:		Yes		No		Not applicable	
		%	Count	%	Count	%	
Determining their personal preferences?	14	100%	-	-	-	-	
Explaining their care and options available to them?		79%	1	7%	2	14%	
Keeping them informed?		93%	-	-	1	7%	
Asking about consent in relation to information sharing i.e. Who to share information with and which aspects of care they are happy are disclosed?	11	79%	1	7%	2	14%	
Responding to family / friends/ carers when they ask for information?		93%	-	-	1	7%	
Giving information re discharge and options on leaving hospital?		43%	3	21%	5	36%	

Staff were asked a range of questions relating to the food and drink provided for patients. The results below show that 100% feel staff are available to support patients who need help or reminding to eat and drink but only 50% feel there is adequate access to food and drinks.

Thinking about nutrition and hydration	Yes		No		Don't know		Not applicable	
	Count	%	Count	%	Count	%	Count	%
Do you feel there is adequate access to food and drinks on the ward for patients?	7	50%	5	36%	2	14%	-	_
Are portion sizes appropriate for patients?	9	64%	2	14%	2	14%	1	7%
Are food and drinks (snacks) available between meals?	13	93%	-	-	_	-	1	7%
Is there good choice of foods available?	8	57%	3	21%	3	21%	-	-
Are staff available to support patients who need help / reminding to eat and drink?	14	100%	-	-	-	-	-	-
Do staff encourage / support patients to clean their hands before mealtimes?	12	86%	-	-	1	7%	-	7%

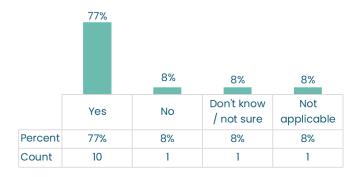
When asked if they actively encourage patients to get out of bed and move around, 100% of staff respondents replied yes. Staff were next asked if there was anything that prevented this from happening. The comments we received included:

"A lot of staff don't routinely do this -? lack of awareness -? can't be bothered?."

"Not all staff encourage this."

"Depends on the patients' strengths and what they are capable to do at the time."

Staff were asked if they actively encourage patients to change into day clothes during daylight hours, 77% of respondents replied yes and 8% replied no.



When asked is there was anything that prevents this happening, comments received included:

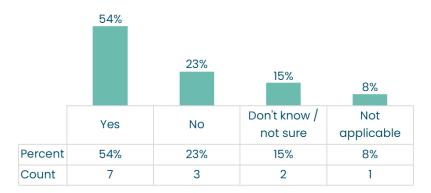
"Most patients come to the hospital with only one piece of clothing and most do not have people to bring in their clothes for them."

"Not all staff do."

"Sometimes patients prefer to be in their PJ's/nightie, as more comfortable, especially if unwell."

"Lots of times patients only come into the hospital with their night wear. Only a few come in with outing or house wear."

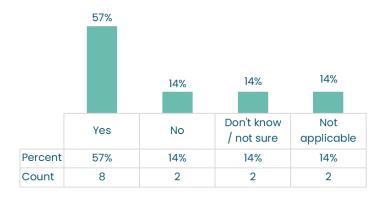
Staff were asked if there are activities available on the ward. The results show that 54% of staff replied yes and 18% replied no.



Staff were asked if patients need support to engage in an activity, are they able to support this. 64% replied yes and 29% replied no.



Staff were asked if they were confident in supporting activities. 57% of respondent's replied yes and 14% replied no.



"Due to demands of the ward we are too busy."

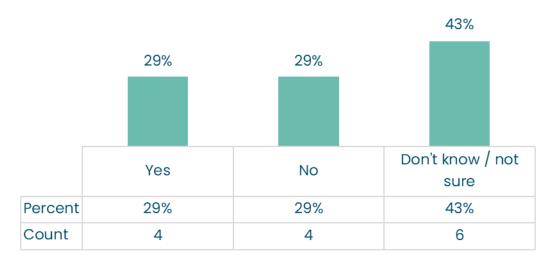
"Due to high work demands on the ward."

"There is not enough time or staff."

"Puzzle book same one all the time, cards, not enough time/staff."

"As long as I am trained and well experienced to support these activities, I will do my best to my capabilities."

Staff were asked if they thought patients sleep well on the ward. 29% replied yes and most, 43% didn't know or were unsure.



"Too noisy, constantly woke for observations /BM/Turns etc."

"The majority of patients are very verbal and active through the night. Most have dementia or body clock is back to front."

"Too noisy, confused patients (dementia and delirium ward)."

"Ward noisy due to confused patients."

Staff were asked to inform us what you think is working well on the ward. We received the following comments:

"Staff ensure as much as possible to look after patients and attend to all of their needs."

"Very organised and good staff."

"I think staff shortage is present CRND, because sometimes each RN is handling 13 patients. It is very difficult to manage the patients with system work. Some of the assessment is unnecessary and no need to repeat every shift."

"Very friendly staff. Helpful team. Good communication."

"Patient care."

Staff were asked if there is anything that you think could be improved on the ward. We received several comments with many relating to staffing levels and others relating to equipment and provisions for patients.

"Staffing levels on the ward."

"More staffing."

"We need more RN staff. Serving food is not a nurse's duty. We have a lot of work in a shift. I think the kitchen people and HCA can manage food serving."

"Ensure good staffing levels."

"Sleep masks and earplugs to be distributed to patients who need them, as I have been asked on more than one occasion for these items."

"More mobility aids and coloured railings on walls to stand out."

"More staff - we are a dementia and delirium ward, therefore have more challenging patients that require more time and more complex care. Lots of 1-1 patients, high falls risks, dependent for all care needs. We need to be staffed differently to other COTE wards!"

#### What is working well

#### Communication between staff and patients and their families and carers

Both patients and their families and carers indicated high levels of satisfaction when asked about communication about care, consent around the sharing of patient information and how comfortable they were around asking questions regarding care.

#### Food and drink

High levels of satisfaction were received from both patients and their families and carers when reporting back on the quality and quantity of food and drink on the wards, both during mealtimes and outside of those times. This was also the case for support available from staff during these times.

#### Staff support

Patients and their families and carers mostly stated that staff were available to offer them support if they needed to use the toilet.

#### Staff confidence

High levels of staff responses were received with regards to confidence levels on several aspects of communication and care, however some staff indicated they lacked confidence when it came to sharing information around discharge.

### What needs improving

#### Encouragement and support from staff

63% of patients stated that they were not encouraged or supported to clean their hands prior to meals being served on the wards. Observations from the Healthwatch Team during the visits, which all took place leading up to a lunch service, witnessed very few staff asking patients to wash or wipe their hands prior to eating their meal.

A third of patients and most of family and carer respondents stated that patients were not encouraged to change out of their nightwear during the day.

#### Activity provision on wards

High numbers of patients and family and carers stated that there were no activities available on the ward. 29% of staff also added that they aren't confident to support patients to take part in activities.

#### · Ability to sleep well

36% of patients stated they don't sleep well on the wards with many commenting that the noise levels of machines and other patients prevent this. 29% of staff felt the patients on the ward didn't sleep well, with 43% stating they were unsure about this. Some staff also commented that patients often request earbuds / sleep masks to support them to sleep better and would like these to be made available.

#### Staffing levels

Some staff indicated that there are low staffing levels on some of the wards which can affect their ability to best meet the needs of the patients. We also received comments from patients and family and carers stating that they had observed staff looking stretched and very busy on occasion.

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