



Fresh eyes walkthroughs People in Partnership Hospice UK NHS Improvement 20<sup>th</sup> March 2019

### Background

- 51% of all UK deaths are in hospitals and hospices
- Dying, death and bereavement are everyday occurrence in acute hospitals and hospices
- It is important that hospitals and hospices provide good quality, compassionate care
- Understanding patient and carers' perspectives is crucial to improving care

We only have one chance to get this right ....

the experience lives on in the memory of the bereaved









# "Fresh eyes" walkthrough's aim

To improve the experience of family and friends whose loved one is dying in a hospital or hospice





### Fresh eyes walkthrough – our approach

- Adapted from the 'Fifteen Steps Challenge: Quality from a Patient's Perspective' and the 'Promoting Healing Environments' evidence and experience
- The method deliberately focuses on employing the senses of sight, hearing, smell and feelings with personal and professional perspectives to offer 'Fresh Eyes'
- Co-designed People in Partnership Forum and Hospice UK





# Fresh eyes walkthrough – our approach (2)

- Team of people- people with lived experience health care professionals
- Support for the people with lived experience
- Practicalities
- Feedback
- Reporting



# Public areas unaccompanied

• Car park and entrance from a car arrival and an ambulance admission

Fresh eyes walkthroughs visited areas

- Patient Advice and Liaison Service(PALS)
- Reception
- Coffee shop/Café
- Retail shops
- Restaurant
- Chapel/faith areas

#### Accompanied areas with help of on-site staff

- Emergency Department (ED)
- Clinical Decisions Unit
- Medical assessment unit
- Clinical assessment unit
- Mortuary
- Bereavement suite









### Impact of our 'Fresh Eyes' Walkthroughs

An evaluation showed the approach was effective and beneficial due to:

- The involvement and expertise of people with lived experienced of being a carer whose loved one died in hospital
- The expertise and independence of the whole team being objective and intentionally non-judgemental for improvement not inspection or regulation
- The participation of hospital and hospice staff in the walkthrough.
- The careful planning with the clinical teams allows everyone to be prepared and maximise the potential benefits
- The provision of same-day high-level feedback to the hospital and hospice team
- Timely written report





### **Example of local impact**



A relative's room in ED before / after a 'Fresh Eyes' walkthrough.

Oversized furniture that were difficult to get in and out of were replaced. The room is now more accessible and more spacious. The overall space feels appropriate with a neutral colour scheme. "The walkthrough gave us a new perspective that we could never see as staff it helped us to understand how things seem for the people using our services. The outputs gave us tangible changes to implement and also suggestions that provided us with the opportunity for rich discussions about subjects we may never have discussed." – Helen, Cambridge





# Walkthroughs identify areas of good practice

The 'fresh eyes' walkthrough provided an opportunity to celebrate and highlight good practice and for the hospitals and hospice teams.

True for all regardless of CQC rating.

Louise at Brighton "It was great to get some positive feedback about how polite, helpful and honest the staff that you came into contact was. It was even better to be able to share this with the staff who were pleased that people noticed."





# **Peaceful supportive facilities**



Family room in the acute admissions ward



Waiting area in the mortuary services ....



Quiet space in a multi-faith chapel

Comfortable chairs and resting areas in long corridors. Mobility assistance being available if needed. Pockets of calm.





#### **Careful consideration of faith and broad spiritual needs**



A multi-faith room communicating its role

GOING INTO GOING INTO HOSPITAL HOSPITAL Religious and piritual Care Christian Religious and Spiritual Care of Muslim GOING INTO WHILE IN HOSPITAL HOSPITAL you like to s Would it help to talk? Religious Spiritual Care

Leaflets for different faiths and spiritual needs for patients and families preparing to go in and whilst in hospital.



We are open. You are welcome. Anytime.

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### Bereavement



Memory tree in a hospital ward



A garden that people who are bereaved can visit next to mortuary visiting area

A dedicated visiting space for bereaved parents I



Property bag for loved ones belongings

A dedicated visiting space for bereaved people in / near the emergency department

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#### **Other areas**

Kind and friendly staff asking "can I help?" when you are trying to find your way. Helpful information leaflets, easy access to facilities and parking for relatives and friends when someone is seriously ill.

Clear feedback loops, and a sense of feedback being listen to and acted on.

Knowledgeable and compassionate staff in ED, wards, bereavement and mortuary areas - staff can answer our questions in way that conveys compassion and ensures dignity for the patient and support for relatives and carers.

"The porters know they are transporting the most precious cargo around the hospital when someone has died and the person's dignity and respect is paramount





### Walkthroughs identify areas for improvement

There were a range of issues from small, easy to address issues to bigger problems sometimes needing financial investment and / or cultural change.

Even organisations with outstanding CQC rating had areas for improvement Catherine at Wirral "As a result of the walkthrough it had made me think about what patients and families see I am much more aware of the physical environment and its effect on people when they are at their most vulnerable."





### **Examples**





An example of confusing

signage.



Washing facilities in a multi-faith area.

An unloved

corner of a

chaplain

to the

public.

area open



Uninviting corridor to both mortuary services and bereavement suites.

An 'unloved corner' opposite a bereavement office.

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### Some themes

- mortuary viewing areas
- waiting areas for bereavement suites
- corridors on the way to bereavement suites.
- chapels being expected to meet the needs of all, and not meeting the needs of anyone
- relative rooms with poor and/or outdated internal design

"I wanted to visit my husband after he died, as usual. Please don't invite me to view him." Person with lived experience









# **Encourage staff to think about carers, family and friends**

- see things from the perspective of someone who is distressed, disorientated and potentially bereaved
- be familiar with mortuary and bereavement areas
- consider the physical environment quiet spaces, calming and rest in different points of a potential journey
- consider practical support e.g. comfort packs, information, parking etc
- consider how the deceased belongings are handed over to the bereaved
- support information around what to do after death and understanding grief





# **Final considerations**

All organisations can improve carer, family and friend's experience The little things do matter and can make a big difference The environment and facilities can show that the organisation cares Consider needs of all (children, parents, faiths and no faiths, sizes, sudden and expected deaths) "Fresh Eyes" supports this improvement journey

Use with care and support for the reviewers





# **Finally words**

Lesley and Roberta









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