| Quality Indicators.C1 Staff          | Documentation.Letter from |   |
|--------------------------------------|---------------------------|---|
| attitude                             |                           | But never once was anyone less than kind and caring towards him.  |
| Quality Indicators.C1 Staff          |                           |   |
| attitude                             |                           | I received such kindness and help from all the staff at all times.  |
|                                      |                           |   |
| Quality Indicators.C1 Staff          |                           | Everyone was so years bind and some to him in both Decidely, and Droud wonds  |
| attitude                             |                           | Everyone was so very kind and caring to him in both Daedalus and Dryad wards.   |
| Quality Indicators.C1 Staff          |                           |   |
| attitude                             |                           | I felt that the Nursing Care itself was excellent and much appreciated.   |
|                                      |                           |   |
| Quality Indicators.C1 Staff attitude |                           | Sunday 2nd August- Code A was in his wheelchair in the garden. Code A noticed that  |
| uttitude                             | Code A                    | Nat's ankles were swollen. Mr Pitthard took code A back inside immediately and approached   |
|                                      |                           | Nat's ankles were swollen. Mr Pitthard took code A back inside immediately and approached the three nurses that were around the nurses' station. But Code A said that the nurses did pay attention to Code A concerns about code A ankles, but there was no immediate response, they just continued their conversation. That evening when Code A returned |
|                                      |                           | response, they just continued their conversation. That evening when Code A returned bandages were present on Code A ankles.   |
|                                      |                           | oundages were present on instruments.   |
| Quality Indicators.C1 Staff          |                           |   |
| attitude                             |                           | Waited 40 minutes for nurse to come asked to step outside - not happy   |
|                                      |                           | usked to step outside not happy   |
| Quality Indicators.C1 Staff          |                           |   |
| attitude                             |                           | Staff attitude a problem - very uncaring  |
|                                      |                           |   |
| Quality Indicators.C1 Staff attitude |                           | In QA had really good relationship <b>Code A</b> helped feed ?? etc   |
|                                      | <del></del>               | 1 OUG A 1   |

| Quality Indicators.C1 Staff attitude  Quality Indicators.C1 Staff attitude  Quality Indicators.C1 Staff attitude  Mother worried to raise  | er had left - and had been talking about her  |
|--|---|
| Quality Indicators.C1 Staff attitude  Scared to speak out in or speak out in o |   |
| attitude Mother worried to raise  Quality Indicators.C1 Staff  | case take it out on Dad when they were not there  |
| 1  | e concern in case nasty to her again.   |
|  | as lovely and he had no complaints against the staff.   |
| Quality Indicators.C1 Staff attitude  Code A  Lump a certain age grown rehabilitated for a week  | up as no hopes - each patient individual care - try to keep   |
| Quality Indicators.C1 Staff attitude  One lovely nurse on Dr   | ryad - went to say hello to every patient before even got coat off.   |
|  | erise everyone - my husband was not incontinent - heard lots of e toilet. Nurse said it was done mostly to save time. |
| Quality Indicators.C1 Staff attitude  Staff seemed to concern ignored sicker patients.   | trate on room where patients who were recovering were and   |
| Quality Indicators.C1 Staff  |   |

| attitude                             |        | Very concerned re mixed ward clothes and bed trolleys because of risk of infection.  Agency nurses always blamed for mix-up.   |
|--------------------------------------|--------|--|
| Quality Indicators.C1 Staff attitude |        | Main concern is culture on Ward especially manner of staff with patients and relatives   |
| Quality Indicators.C1 Staff attitude |        | Asked for nurses help in taking Mr D to toilet 3 separate occasions – did not recieve help for a long time and staff complained.   |
| Quality Indicators.C1 Staff attitude |        | On one visit Mr D wished to use commode – nurse refused & became irritated saying that he's asked 5 or 6 times. Mrs D came close to tears 6/8 Feb told off for using buzzers |
| Quality Indicators.C1 Staff attitude | Code A | 9 Feb - rang ward to ask if she could visit and take clothing, phone was slammed down  |
| Quality Indicators.C1 Staff attitude |        | Had promised to leave cards at reception - they weren't there Told that she would have to go and collect them herself  |
| Quality Indicators.C1 Staff attitude |        | I was made to feel an inconvenience & nuisance because we asked questions - seen as a threat   |
| Quality Indicators.C1 Staff attitude |        | Staff never introduced themselves to or wore name badges   |
| Quality Indicators.C1 Staff          |        |  |

| attitude                             |        | Links with three concerned wards was through PDF -Clinical Governance- input into wards to raise awareness and give examples amongst staffFacilitated annual away days, which would result in looking at patient care, may have a remit of wards 0 (Reflective Practice) |
|--------------------------------------|--------|--|
| Quality Indicators.C1 Staff attitude |        | One or two nurses excellent  |
| Quality Indicators.C1 Staff attitude |        | Whoever picked her up from fall - didn't do anything about it  |
| Quality Indicators.C1 Staff attitude |        | Doctor leaned on wall and said next thing chest infection and that will be it.   |
| Quality Indicators.C1 Staff attitude | Code A | Staff Attitude Put meals on tray, walk away and came back and took untouched food away.  |
| Quality Indicators.C1 Staff attitude |        | Staff Attitude Got feeling had dementia and therefore her feelings didn't count.   |
| Quality Indicators.C1 Staff attitude |        | Staff Attitude   |
| Quality Indicators.C1 Staff attitude |        | Staff at GWM had difficult time in coping with arrival of greater number of acutely ill patients with serious mobility problems; found it difficult to get patients up and moving around; some of the staff were not used to being assertive with patients               |

| Quality Indicators.C1 Staff attitude           |        | Staff Attitude<br>Hospital is brilliant   |
|--|--------|---|
| Quality Indicators.C1 Staff attitude           |        | Staff Attitude Good relationship with wards, Sultan, Daedalus and Dryad.                          |
| Quality Indicators.C1 Staff attitude           |        | Staff Attitude Very favourable impression. Very kind and caring.                                  |
| Quality Indicators.C1 Staff attitude           | Code A | Staff Attitude Received 100's of letters and donations full of praise.                            |
| Quality Indicators.C1 Staff attitude           |        |   |
| Quality Indicators.C1 Staff attitude           |        | Staff Attitude Nurses are kind to them.   |
| Quality Indicators.C1 Staff attitude           |        | Staff Attitude Is cared for well.   |
| Quality Indicators.C2 Effectiveness & outcomes |        | Code A was catheterised- Code A seemed agitated by catheterisation - so Code A was sedated during |

|   |        | this procedure.   |
|---|--------|---|
|   |        |   |
| Quality Indicators.C2<br>Effectiveness & outcomes |        | Within the next 24hours his health deteriorated.  |
| Quality Indicators.C2 Effectiveness & outcomes    |        | Mr (Code A and wife were happy with his condition that even considering that he had, had two sedations.   |
| Quality Indicators.C2 Effectiveness & outcomes    |        | Code A was placed in a private room, which was near the nurses' reception. Mr Code A spoke about how appeared comatose and there was a do not disturb sign on his door. |
| Quality Indicators.C2<br>Effectiveness & outcomes | Code A | Code A felt that Coole A should have received Rehabilitation, but no attempt was made to renaminate Nat.  |
| Quality Indicators.C2 Effectiveness & outcomes    |        | Lump a certain age group as no hopes - each patient individual care - try to keep rehabilitated for a week.   |
| Quality Indicators.C2 Effectiveness & outcomes    |        | They seemed to catheterise everyone - my husband was not incontinent - heard lots of patients ask to go to the toilet. Nurse said it was done mostly to save time.      |
| Quality Indicators.C2<br>Effectiveness & outcomes |        | three month project to improve, and raise awareness of why people fall  |

| Quality Indicators.C2 Effectiveness & outcomes |        | There was also a research and development day to show the good and bad types research assuring evidence based practice  |
|--|--------|---|
| Quality Indicators.C2 Effectiveness & outcomes |        | Evidence based practice was welcomed generally.   |
| Quality Indicators.C2 Effectiveness & outcomes |        | This was passed around and Pharmacy at Q & A adopted the findings and utilised them in age prescription.  |
| Quality Indicators.C2 Effectiveness & outcomes |        | The fall policy was another example of how networking happens.  |
| Quality Indicators.C2 Effectiveness & outcomes | Code A | Is this bad practice. Does this pre-empt way patients treated by nurses.  |
| Quality Indicators.C2 Effectiveness & outcomes |        | Code A aid that Dr Barton is said to have a good reputation locally in palliative care  |
| Quality Indicators.C2 Effectiveness & outcomes |        | Continence was used as predictor of outcome and was considered a reliable indicator: if a patient could achieve 7 full days of continence, full recovery would be predicted, all others were classified as 'slow streamers' |
| Quality Indicators.C2 Effectiveness & outcomes |        | Effectiveness & Outcomes Hospital is brilliant  |

| Quality Indicators.C2 Effectiveness & outcomes |        | Effectiveness and Outcomes Received 100's of letters and donations full of praise.   |
|--|--------|--|
| Quality Indicators.C3 Access to services       |        | Physio good when go it, but patchy access  |
| Quality Indicators.C3 Access to services       |        | GP recommended that Code A receive physiotherapy care, get up and move around. Four days wait for a physiotherapist - no treatment for bursitis on elbows and knees (except for an armrest) - physio not given for fear his swellings would burst with subsequent harm to him. |
| Quality Indicators.C3 Access to services       | Code A | Otherwise aware of only 2 staff at any one time at night only one  |
| Quality Indicators.C4 Organisation of care     |        | Named nurse, but very rarely seen.   |
| Quality Indicators.C4 Organisation of care     |        | Catheterisation - Next time saw her straight away had catheter in.   |
| Quality Indicators.C4 Organisation of care     |        | 16:30 - patients weren't up and washed, they had not been fed. Gents toilets were said to be very dirty and unkempt.   |
| Quality Indicators.C4 Organisation of care     |        | What nourishment was she given at GWMH? Mr P thinks she had none and became dehydrated when, he believes, was the true cause of her death  |

|  | <u> </u>   |  |
|--|--|--|
| Quality Indicators.C4 Organisation of care |  | She was mobile before transfer, alert and capable of feeding herself.  She certainly was not in pain prior to transfer to GWMH   |
| Quality Indicators.C4 Organisation of care |  | Otherwise aware of only 2 staff at any one time at night only one  |
| Quality Indicators.C4 Organisation of care |  | Code A had no physio-therapy at War Memorial.  |
| Quality Indicators.C4 Organisation of care | Code A   | Noted inconsistent practice & care between nurses. Told me reason was that different nurse did things differently                |
| Quality Indicators.C4 Organisation of care |  | Kidney failure - asked nurse to change catheter bag - solidified gunge in bottom of bag - can't change it unless full.           |
| Quality Indicators.C4 Organisation of care |  | Organisation of Care No named nurse  |
| Quality Indicators.C4 Organisation of care | Statutory Stakeholder.Community Health Council.txt | Amount of morphine and lack of care and treatment  |
| Quality Indicators.C4 Organisation of care | Statutory Stakeholder.Community Health Council.txt | Patients not getting fed ad properly cared for also complaints about relatives dying suddenly after they had appeared quite well |

| Quality Indicators.C4<br>Organisation of care | Statutory<br>Stakeholder.Interview with Dr<br>Warner.22.1 | All GPs employed by community trust (41) have admitting rights to Sultan ward  |
|---|---|--|
| Quality Indicators.C4 Organisation of care    | Statutory<br>Stakeholder.Interview with Dr<br>Warner.22.1 | Gosport-area GPs have always worked together on GWM LMC to develop and agree protocols on admitting to Sultan ward   |
| Quality Indicators.C4<br>Organisation of care | Statutory<br>Stakeholder.Interview with Dr<br>Warner.22.1 | GPs/LMC don't have much to do with Dryad and Daedalus wards except that they will have patients in those wards under consultants' care   |
| Quality Indicators.C4 Organisation of care    | Statutory<br>Stakeholder.Interview with Dr<br>Warner.22.1 | GPs/LMC don't have much to do with Dryad and Daedalus wards except that they will have patients in those wards under consultants' care  Patients in Sultan ward don't need intensive or high dependency care; most of them need physiotherapy or respite care; also occasionally used for patients with MS or even children. Patients also admitted for tests  |
| Quality Indicators.C4 Organisation of care    | Statutory<br>Stakeholder.Interview with Dr<br>Warner.22.1 | All three elderly wards at GWM 'have been used to offload patients from Haslar and QA'; not appropriate in Dr W's view to move very ill patients there (ie 'offloads' from Haslar and QA): 'they are not designed to be strip-down beds. Patients should not require too much medical or nursing carethe beds on the wards have been abused because of district bed crisis. It results in more work than the GWM staff can cope with. 'It's the source of less than perfect care' at GWM |
| Quality Indicators.C4<br>Organisation of care | Statutory<br>Stakeholder.Interview with Dr<br>Warner.22.1 | When LMC is made aware of such referrals, tend to complain to consultant at QA   |

|  |   | There is a clear admitting protocol, at least for GPs; try to admit patients before 12 to allow instructions to be given to nursing staff   |
|--|---|---|
| Quality Indicators.C4 Organisation of care | Statutory<br>Stakeholder.Interview with Dr<br>Warner.22.1 | There's no reason why terminally ill patients can't go in to GWM. I would put elderly patients in there who live on their own if they didn't need intensive care or IV drip, if their only requirement is getting basic medication, some nursing care and diamorphine if they have pain   |
| Quality Indicators.C4 Organisation of care | Statutory<br>Stakeholder.Interview with Dr<br>Warner.22.1 | Sultan is the busiest of the three wards (nurses there are always very busy); the other two wards have a calmer ambience. (re Dryad and Daedulaus): 'it's a little bit out of sight, out of mind'   |
| Quality Indicators.C4 Organisation of care | Statutory<br>Stakeholder.Interview with Dr<br>Warner.22.1 | Under current proposals recommended by LMC, one third of GWM beds willl be for GPs and a third for consultants (with GP permission) and remainder consultant -controlled  |
| Quality Indicators.C4 Organisation of care |   | * 'we were quite frustrated as we wanted to discuss outcomes of care and the views of patients'; however those issues weren't the agenda for health authorities at the time   |
| Quality Indicators.C4 Organisation of care | Code A  | in early 90s when Nicky started working ther, the trust was very spread out and fragmented (St Mary's, QA. GWM); there was separate nurse manager for each site: 'it was very difficult to achieve commonality among different hospitals'; allocation of patients to different hospitals depended on acuity of illness and prospects for recovery and rehabilitation; 'retrievable' patients were sent to GWM |
| Quality Indicators.C4 Organisation of care |   | Dryad & Daedalus: they had 8 or 9 stroke beds for 'slow stream stroke patients'   |

| Quality Indicators.C4 Organisation of care |        | Continence was used as predictor of outcome and was considered a reliable indicator: if a patient could achieve 7 full days of continence, full recovery would be predicted, all others were classified as 'slow streamers'   |
|--|--------|---|
| Quality Indicators.C4 Organisation of care |        | A consultant was in the lead for multi-disciplinary group working on elderly wards (sister in charge, nurse from each ward, AHPs from different services)   |
| Quality Indicators.C4 Organisation of care | Code A | GP beds often 'misused' for non-clinical care (especially respite: GPs would place elderly patients on wards when family on holiday); Sultan beds also often used for younger patients with chronic progressive conditions like MS: there were no real care plans for such patients |
| Quality Indicators.C4 Organisation of care |        | Daedalus was designated 'geriatricians' ward for patients referred by consultants; Dryad designated continuing care ward  |
| Quality Indicators.C4 Organisation of care |        | Staff at GWM had difficult time in coping with arrival of greater number of acutely ill patients with serious mobility problems; found it difficult to get patients up and moving around; some of the staff were not used to being assertive with patients                          |
| Quality Indicators.C4 Organisation of care |        | we're attempting to join up a very complex set of targets for NSF and local modernisation review -it's about improving practive to national standards rather than criticising local services  |

| Quality Indicators.C4                  |          |  |
|--|----------|--|
| Organisation of care                   |          | Aspect of care really under valued in Code A iew is basic care to patients                 |
|  |          | Taspoot of care roam, under various in the case care to patients                           |
|  |          |  |
| Quality Indicators.C4                  |          |  |
| Organisation of care                   |          | Type of patients in wards has changed recently much more dependent much more sickness      |
|  |          | on wards for longer  |
|  |          |  |
| Quality Indicators.C4                  | -        |  |
| Organisation of care                   |          | Organisation of Care   |
| Organisation of care                   |          | Nurses good and take him through notes and care plans. Notes good.                         |
|  |          | That been good talk talke film through notes and care plants. Thoses good.                 |
|  |          |  |
| Quality Indicators.C5                  |          |  |
| Humanity of care                       |          | Unable to summon help - unable to press buzzer   |
|  |          |  |
| Quality Indicators.C5                  | Code A   |  |
| Humanity of care                       | Code A   | Majority of time on her own, couldn't reach buzzer and not shout                           |
| Tumamity of care                       |          | wajority of time on her own, contain treach ouzzer and not shout                           |
|  |          |  |
| Quality Indicators.C5                  |          |  |
| Humanity of care                       |          | On ward on own - being sick - had sick bowl - hair and clothing wet - sweat plastic chair. |
|  |          |  |
| 0 1'4 1 1' 605                         |          |  |
| Quality Indicators.C5 Humanity of care |          | Commode behind curtain, should be able to be taken to the toilet got a and told able to    |
| Tumanity of care                       |          | do in the bed - even when said wanted commode  |
|  |          | do in the oca - even when still wanted continued   |
|  |          |  |
| Quality Indicators.C5                  |          |  |
| Humanity of care                       |          | Day room sling - no underwaear - exposed. Asked please make sure blanket around her -      |
|  |          | there were plenty free, rarely had cover on legs.  |
|  |          |  |
| Quality Indicators.C5                  | -        |  |
| Quanty mulcators.C3                    | <u>L</u> |  |

| Humanity of care                             | Wife in chair - water out of reach and too heavy.   |
|--|---|
| Quality Indicators.C5 Humanity of care       | When go to Daedalus - couldn't reach anything. Wife wouldn't raise with nurses. Very reserved.  |
| Quality Indicators.C5 Humanity of care       | Moved trolley table away and not put back.  |
| Quality Indicators.C5 Humanity of care       | Wife never incontinent until went into Daedalus. Emergency button never able to reach so wet herself and then put pads on and now permanent.  |
| Quality Indicators.C5 Humanity of care  Code | I was quite horrified by lack of care.  |
| Quality Indicators.C5 Humanity of care       | Patients put in very uncomfortable chairs in lounge and just left.  |
| Quality Indicators.C5 Humanity of care       | On another occasion left alone in lounge for hours.   |
| Quality Indicators.C5 Humanity of care       | They were never in their own clothes.   |
| Quality Indicators.C5 Humanity of care       | Mrs D told that he would be permanently disabled, staff were very kind and supportive – provided excellent care – he was making good progress, spent several weeks there (St Marys) |

| Quality Indicators.C5<br>Humanity of care |        | 19 Feb – When he was transferred, he was naked from the waist down apart from piece of padding            |
|---|--------|---|
| Quality Indicators.C5 Humanity of care    |        | Ambulance crew drew her attention to it and said how mortified they were – nursing staff at Haslar agreed |
| Quality Indicators.C5<br>Humanity of care |        | Alert bell inaccessible left hand paralysed and could not reach bell to operate it                        |
| Quality Indicators.C5<br>Humanity of care | Code A | Fold that she was not allowed to go into ward while treatment in progress                                 |
| Quality Indicators.C5<br>Humanity of care | Gode A | Put outside one day though he didn't want to go   |
| Quality Indicators.C5<br>Humanity of care |        | Not allowed to wear own clothing even though he had plenty  |
| Quality Indicators.C5<br>Humanity of care |        | No right to make a choice   |
| Quality Indicators.C5<br>Humanity of care |        | Other people's relatives weren't asked to leave room during treatment of Mr Deedman                       |
| Quality Indicators.C5                     |        |   |

| Humanity of care                          |        | Asked to leave ward when Code A was eating as it made other patients embarrassed to have                 |
|---|--------|--|
|   |        | her there  |
| Quality Indicators.C5                     |        |  |
| Humanity of care                          |        | 'The attitude was that these are old people who've had their life, they're taking up beds, so            |
|   |        | what does it matter any more what happens to them?'  |
|   |        | Totally uncaring atmosphere, totally cold  |
| One lite In directors C5                  |        |  |
| Quality Indicators.C5 Humanity of care    |        | Transferred on a sheet back to GWMH - no poles to transfer. Like a sack of potatoes -                    |
|   |        | imagine position of hip - started to scream with pain  |
| Quality Indicators.C5                     |        |  |
| Humanity of care                          |        | Didn't die as would have wished - death as a result of what happened to her - last thoughts              |
|   | Code A | of terrible pain.  |
| Quality Indicators.C5                     |        |  |
| Humanity of care                          |        | Kidney failure - asked nurse to change catheter bag - solidified gunge in bottom of bag -                |
|   |        | can't change it unless full.   |
| Quality Indicators.C5                     |        |  |
| Humanity of care                          |        | Basic care lacking in last few days eg moistening mouth - clean pillow cases                             |
|   |        |  |
| Quality Indicators.C5<br>Humanity of care |        | Aspect of care really under valued in Pats view is basic care to patients                                |
|   |        |  |
| Quality Indicators.C5                     |        |  |
| Humanity of care                          |        | Humanity of Care Patients from GWM all physically well - clean and tidy and well enough to be discharged |
|   | 1      |  |

|   |        | to nursing home.   |
|---|--------|--|
| Quality Indicators.C5<br>Humanity of care |        | Humanity of care One of patients given a bell - expected him to ring with teeth.                                     |
| Quality Indicators.C6 Environment         |        | Unable to summon help - unable to press buzzer   |
| Quality Indicators.C6<br>Environment      |        | "An old ladies smell"  |
| Quality Indicators.C6<br>Environment      | Code A | 16:30 - patients weren't up and washed, they had not been fed. Gents toilets were said to be very dirty and unkempt. |
| Quality Indicators.C6<br>Environment      |        | As a whole the ward was lovely and he had no complaints against the staff.   |
| Quality Indicators.C6 Environment         |        | The place was clean and tidy   |
| Quality Indicators.C6<br>Environment      |        | Told standing by of bed and left her. Stained floor not cleaned up - did smell. Told was an old stain.               |
| Quality Indicators.C6<br>Environment      |        | I was quite impressed with all their decor -   |

| Quality Indicators.C6<br>Environment  | Code A   | Tea making place in lounge in Daedalus and café etc.   |
|---------------------------------------|--|--|
| Quality Indicators.C6<br>Environment  | Code A   | Was surrounded by curtains drawn so unable to attract attention  |
| Quality Indicators.C6<br>Environment  | Statutory Stakeholder.Community Health Council.txt | So impressed by atmosphere at GWM "conversation clusters of patientsö  |
| Quality Indicators.C6<br>Environment  |  | Any discussion of quality of care to patients at GWM were relatively superficial and about physical facilities and environment     |
| Quality Indicators.C7 Pos patient exp |  | She has nothing but praise for the care and attention her mother was given.  |
| Quality Indicators.C7 Pos patient exp | Code A   | Letter 'Service with a Smile three cheers for the NHS' Generally has a v. positive feedback concerning his wife and his treatment. |
| Quality Indicators.C7 Pos patient exp |  | My husband could not have had better treatment if he had been in the most expensive nursing home.                                  |
| Quality Indicators.C7 Pos patient exp |  | We would like to say a big thank you for the excellent care and attention that was given to him.                                   |

| Quality Indicators.C7 Pos patient exp    |        | I was entirely satisfied with the treatment that they both received.  |
|--|--------|---|
| Quality Indicators.C7 Pos patient exp    |        | No nursing home however good or expensive could have given him better care or attention.  |
| Quality Indicators.C7 Pos<br>patient exp | Code A | Always looked clean and bed made  |
| Quality Indicators.C7 Pos patient exp    |        | Positive Patient Experience Patient feedback - generally positive - patients often say can I go with War Memorial - quiet, cleaner, v comfortable, food seems reasonable, staff constant. |
| Quality Indicators.C7 Pos patient exp    |        | Positive patient experience Nothing but praise for hospital - happy place.  |
| Quality Indicators.C8 Neg patient exp    |        | Nat wanted to go home he was not happy in hospital.   |
| Quality Indicators.C8 Neg patient exp    |        | GWMH - most miserable and wretched time she'd ever spent - miserable  |
| Quality Indicators.C8 Neg patient exp    |        | Told Dr Reid take Code A home - not happy with care. Dr Reid took note and said not happen again.   |

| Quality Indicators.C8 Neg patient exp |  | Care 200% better than at Dryad.   |
|---------------------------------------|--|---|
| Quality Indicators.C8 Neg patient exp |  | Upset by treatment at Daedalus - got careless - had 2 falls - one not sure they knew about.   |
| Quality Indicators.C8 Neg patient exp | Code A   | I definitely was not happy about lack of care in hospital.  |
| Quality Indicators.C8 Neg patient exp |  | 19 Feb – When he was transferred, he was naked from the waist down apart from piece of padding  |
| Quality Indicators.C8 Neg patient exp |  | Mrs. R.s daughters stayed at hospital constantly until she died so had a good opportunity to see nursing care which Mrs M describes as 'very poor",' they were having real difficulties and didn't know how to handle the situation'  Dealt mostly with Code A and an agency nursed called Code A for whom Mrs M has very high praise |
| Quality Indicators.C8 Neg patient exp | Statutory<br>Stakeholder.Community<br>Health Council.txt | Drugs admin and care and treatment  |
| Quality Indicators.C8 Neg patient exp | Statutory<br>Stakeholder.Community<br>Health Council.txt | Information problems and poor communication with relatives resulted in all 3 complaints   |