

#TEXTPat Wilkin

Nurse8.01.02

#CODENC

Senior staff nurse 31/2 yrs - in GWMH. 17 yrs worked on ?? Surgical. Conversion?? 12 yrs ago E grade. ENB 941 Care of the Elderly. Counselling courses - bereavement any loss, Diploma in Health Care has had 18 months off as Intermediate care.

Line manager Philip Beed. Close working relationship. Does appraisals on all staff Team and ward meetings.

#CODEI2

Induction - was continuing care ward. Had continuing care & slow stream stroke. Now has fast stream stroke and general rehab. Take orthopaedic cases - fractured neck of femur & general rehab.

#ENDCODE

#CODEG1

Individual care - patient asked for views, patients & families involved.

Changed - system now being practiced. Patients involved with their care. Multi disciplinary team meet before a round. Home visits arranged. Care plans handed over from previous hospital. Handovers take place in dining area or quiet room. Fewer inappropriate referrals.

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#CODEK2

Risk forms received for falls, short staffed, (causing patient risk). Care plans raised for all patients. Patient centred.

#CODEJ2

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#CODEF1

Drug assessment Manual? - updated annually. The Shipman Inquiry Care has put back Palliative care. Afraid to use diamorphine now.

#CODEC3

Drug assessment Manual? - updated annually. The Shipman Inquiry Care has put back Palliative care. Afraid to use diamorphine now.

#CODEE4

No medical cover - can use health call out of hours - have to use diamorphine at times. Need 24 hour medical cover here.

#CODEC3

Staff feel vulnerable.

#CODEC2

Patient m/x has changed. More rehabilitation care needed.

#CODEE1

Transfer can occur both day and night. Get too many with dementia. Need for inappropriate refer meetings. Need to be looked at.

#CODEC1

Clinical Manager very good, looking at self medication 'self contained flat' in ward.

Continence - regular toileting. Continence pads supplied if needed. Catheterisation on

basis of clinical need.

#CODEB1

Clinical Manager very good, looking at self medication 'self contained flat' in ward.
Continence - regular toileting. Continence pads supplied if needed. Catheterisation on basis of clinical need.

#CODEC4

Help given with eating if needed.
Weigh them, offer help with eating and drinking by ancillary staff if needed.
Pain control reviewed "at any time".
Whistle blowing could ring consultants at Q&A.

#CODEC5

Weigh them, offer help with eating and drinking by ancillary staff if needed.
Pain control reviewed "at any time".
Whistle blowing, could ring consultants at Q&A.

#CODEJ2

Intermediate care places offered for patients stable for more than 6 weeks.
2 patients awaiting, nursing home 'residential care places'.
Mrs Mackenzie feels that a lot of the problems are guilt. Left presents for the staff etc.

#CODEI2

No communication courses attended by either her or colleagues.

#CODEC3

Need 24 hour Medical Cover.

#CODENC

Aware of Clinical Governance. Takes part in Self Awareness reflective practice.