



C.51 3/02

Identification Ref. No. **G50/HF/7**

Court Exhibit No.

R. v.

Description
**OPERATIONAL BUCKET -
DRYAD WARD**

Time/Date Seized/Produced
0917 21/3/06

Where Seized/Produced
**INTERVIEW ROOM
FAREHAM POLICE STATION**

Seized/Produced by

Code A

Incident/Crime No.

Major Incident Item No. **X727**

Laboratory Ref.



PORTSMOUTH HEALTHCARE NHS TRUST

GOSPORT WAR MEMORIAL HOSPITAL

OPERATIONAL POLICY - DRYAD WARD (CONTINUING CARE)

1. Functional Content

This facility which will be known as Dryad Ward is a 20 bedded area and will provide accommodation for men and women over the age of 65 years requiring continuing nursing and/or rehabilitation care who are unable to meet the criteria to be placed in the Community or Private Sector.

The service will be provided on a 24 hour, 7 days a week basis for patients living within the catchment area.

The beds are arranged in 3 x 4 bedded rooms and 8 single bed rooms.

Shared care for the heavily dependant patients who are looked after at home and in hospital alternatively on a planned basis will be offered.

Facilities offered include day rooms, activity room, quiet room and essential clinical services to facilitate functioning of the nursing service.

The Ward will be served by the Hospital Support Services (Laundry, Cleaning, Portering, Catering, Administration).

The Ward will function within The Trust, The Hospital, Health and Safety and Control of Infection Guidelines.

2. Philosophy of Service

Our aim is to provide the highest standard of care possible within the resources available.

Dryad Ward will be regarded as the patients home which will be at the forefront when planning patient care. The team will recognise the prime importance of the social aspects of the patients lives, that their emotional, physical, spiritual and intellectual needs will vary and this will form the basis of the Wards philosophy.

A trained nurse will be nominated to co-ordinate individual patient nursing care, who will be known to patient, relatives and friends. The named nurse will ensure patients and/or relatives are involved with formulating care plans according to patients wishes.

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In carrying out nursing care staff will recognise each others skills, experience and abilities in meeting the needs of the patient. Nursing practice will be developed through research and education/training.

The service provided will be based on collaboration with all professionals involved with care, hotel and administrative services and from other agencies concerned.

The service will reflect the recognition of the patients rights to a high standard of care, dignity, respect and information about their well being.

3. Predicted Workloads

The occupancy of the 20 bedded area is expected to be 90%

4. Specific Exclusions

Patients known to be M.R.S.A. positive or patients who require specific barrier nursing.

Patients under the age of 65 years

Patients requiring specialised psychiatric care.

5. Operational Systems

Referrals

Patients will be referred to the Consultant Geriatrician by GP's or other consultants. On assessment the Consultant Geriatrician will agree priority on the waiting list.

The waiting list will be managed centrally at the Geriatric Office.

Admissions

The Ward will advise the Geriatric Office when a bed becomes available, the next suitable patient on the waiting list will be admitted to the Ward during the daylight hours.

Arrangements for admission are made by the Geriatric Office.

The Medical Records Department will provide the Patients Medical Records.

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Discharge

A Discharge Plan will be formulated for all patients the Consultant feels appropriate to be discharged to alternative accommodation. The procedure for patients discharge should be followed (see Appendix 1).

Should death occur action should be taken as outlined in Body Store Service.

Reception Procedure

Patients should arrive at the Hospitals Main Reception on admission where they will be directed and if necessary escorted, to the Ward. Here they will be welcomed by the nursing staff, shown the facilities and given information about their care and ward routines.

The Clinical Assistant, Geriatrics, will be advised of their admission.

A full nursing assessment will be undertaken and Care Plans formulated within 24 hours of admission. The Care Plans will identify the need for clinical input from professional and technical staff to ensure that the health needs of the patients are met.

The kitchen will be asked to provide meals to meet the patients nutritional needs.

Arrangements will be made for the patients clothing to be sent to the patients personalised laundry.

Diversional therapy appropriate to the patients needs/condition will be considered and offered.

All care will be delivered in accordance with approved nursing procedures and Control of Infection Guidelines.

Staff

Medical care will be provided by a designated Consultant Geriatrician, who will visit the Ward on a weekly basis. Day to day medical cover will be provided by a designated Clinical Assistant working 5 sessions per week.

Nursing care will be provided 24 hours a day as per nursing rota. There will be a trained nurse on duty at all times.

Clerical support will be provided by a part time Ward Clerk.in addition to administration back-up from the General Office.

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All nursing and clerical staff will have job descriptions agreed with the Portsmouth Healthcare NHS Trust Personnel Department.

A standard uniform and/or protective clothing will be issued for protection of patients and staff and will be worn as directed.

Training for staff will be co-ordinated by the Ward Sister as agreed with the Hospital Manager. Induction training and basic procedures will be maintained and the Ward Sister will ensure the training records of all service staff are maintained

Staff will use the central changing facilities on the first floor where male and female changing facilities are provided.

A dining room and coffee lounge are provided for use of all staff. The Hospital Smoking Policy will be strictly adhered to by staff at all times.

6. System Procedures

Transport - will be provided for patients in accordance to Patient Transport Contract.

Pathology - specimens will be collected from the Ward by Portering Staff on a scheduled basis and delivered to the Hospitals main collection point.

X-Rays - patients will be X-Rayed in the Imaging Department of the Hospital. A nurse will accompany patients if patients require skilled assistance or need to be transported in Kings Fund Bed or stretcher.

Pharmacy - A Pharmaceutical Service will be provided from Queen Alexandra Hospital Pharmacy on a regular basis in line with current arrangements.

Therapy Services - A Physiotherapist, Occupational Therapist and Speech Therapist will visit the Ward to identify treatment needs on request of the Medical Staff and/or Nurse in Charge.

Arrangements for treatment in the Rehabilitation Department will be the responsibility of the Therapist in collaboration with the Nurse in Charge. Rehabilitation goals for individual patients will be jointly agreed by the patient and multi-disciplinary team. Nurses will consult with Therapists in carrying out any rehabilitation elements of the Nursing Care Plans to give continuity and consistency of approach.

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Chiropody Staff - Will visit the Ward as requested by nursing staff according to the requirements for individual patients needs.

Dieticians - Will visit the Ward to advise on individual patients dietary requirements, as requested by the Nurse in Charge.

Dental Staff - Will visit the Ward according to the requirements of individual patients needs as requested by the Nurse in Charge.

Chaplain Service - Will be available to all patients. Services will be held in the Hospital Chapel or on the Ward by arrangements with the visiting Chaplain. Appropriate Chaplains will be routinely informed of admission in accordance to individual patients wishes.

Portering - General Porters will maintain a 24 hour cover in the Hospital. They will collect and deliver all stores, linen, mail, meal trolleys and other items as required and will transport patients by wheelchair, trolley or bed as required. They will be responsible for the general security of the Hospital including the locking of doors and windows outside of the Ward area. The security of the Ward remains the responsibility of the Nurse in Charge.

Domestic Services - Will be provided in accordance with the agreed specification in the current Competitive Tendering Contract (See Domestic Service Policy).

Catering Services - Will be carried out in accordance with the agreed specifications in the current Competitive Tendering Contract (see Catering Service Policy).

Administration - The General Office will provide General Administration, Financial and Patient Affairs Services. The office will be open from 8.30am to 5pm Monday to Friday excluding Bank Holidays. The Support Services Manager will be responsible for all activities within the General Office (see General Office Policy).

Medical Records Department - Will undertake the safe storage and provision of Medical Records and maintaining statistical information provided by Ward. The Medical Records Manager will be responsible for all activities within the Medical Records Department (see Medical Records Policy).

Fire - The Nurse in Charge in conjunction with the Hospital Manager will be responsible for ensuring all staff are aware of correct Fire Procedures to follow as advised by the Trusts Fire Officer.

Security/Keys

The Nurse in Charge will be responsible for the security of the Ward in regard to patients valuables and ward stores/equipment. The Ward security arrangements will form part of the whole Hospital Policy in regards to access to the building over the 24 hour period (see Security Policy).

Refuse - The Nurse in Charge will be responsible for ensuring adherence to Trust and Hospital Policies/Procedures for the use of correct colour coded bag system and waste disposal for all waste produced on the Ward

Infection Control - The Nurse in Charge in collaboration with the Geriatricians will be responsible for reporting any suspect outbreaks of infection to the Hospital Manager and for contacting the Control of Infection Team as per Control of Infection Guidelines.

Equipment - Both clinical and non-clinical equipment will be subject to the Trusts preference in regards to economy and maintenance and where applicable comply with the standards set by MECCLA and Control of Infection Service. The Nurse in Charge will be responsible for maintaining records of equipment at Ward level and assuming its safe use under Health and Safety Regulations.

CSSE/MSE items will be stored in the Clean Utility Room as per Control of Infection Guidelines. S.I.S. items will be provided by Material Management on a top-up basis at agreed levels. All other items will be ordered by Ward staff using agreed procedure (see Appendix 3).

Management - The Ward Sister will have responsibility for the management of the Ward including delegated Ward Budgets. Accountability for budget control will be in collaboration with the Hospital Manager. The Ward Sister will have clinical responsibility to the Trust and will work within the UKCC Code of Practice. The Ward Sister will have management responsibility for the Nursing Team in regards to recruitment, deployment of staff, training and communication.

The Ward Sister will have reporting duties and will be accountable to the Hospital Manager and will need to have working relationships with all Departments for the benefit of the patients.

There will be a sharing of clinical expertise with other Wards and Departments and where necessary Staff will be re-deployed to cover staff deficiencies in other areas.

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All trained Staff will be responsible for ensuring the service offered in the Ward will be of a high quality which can be measured within the Standards set by the Trust. Both nursing and medical practices will be audited.