











Person-centred care

- comfort, identity, attachment, occupation, inclusion
- ‘malignant social psychology’ (Kitwood, 1997)
- culture change
- patient space
- ward routine
- understanding distress
- recognising the individual

Name:
DOB:
Hospital/NHS no.:

Nottingham University Hospitals **NHS**
NHS Trust

About Me

There may be important things you can tell ward staff about your relative/friend. Filling in this form will help us understand them as a person, communicate with them better, and help them to feel secure while staying on our ward. Feel free to give as much information as you are able, but the more information we have, the better. It will be kept at the end of their bed.

I like to be called:

Significant people in my life:

Family: Friends:
Spouse: Pets:
Carer:

Life history:

My childhood:
My work:
Holidays:
Significant places:
Personal interests:

Things I like/dislike: (e.g. food and drink, music, hobbies, activities)

About Me. Draft 8. CR 2011.

Name:
DOB:
Hospital/NHS no.:

Important aspects of my daily routine:

Day time:

Night time:

How I respond to stress: (e.g. become quiet, pace around, shout out)

How I respond to pain:

What helps me to relax: (e.g. spend time alone, go for a walk, talk to someone)

About my relative/friend(s)

This form has been completed by:

Relationship:

During my stay in hospital my relative/friend(s) would like to be involved in my care by:
(e.g. assisting with meal times, out-of-hours visiting if required)

You can ring my relative/friend(s) when: (e.g. at night, to advise about care)

About Me. Draft 8. CR 2011.

We are here for you

Engaging with carers

Name:
DOB:
Hospital/NHS no.:

Nottingham University Hospitals **NHS**
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Caring Together

This form is for you, the relative/friend of a patient on our ward.

We recognise that we need to work together with the people who know our patients best, to provide the best possible care for them. We also know that hospital admission can be a very stressful and difficult time for those who are carers. Filling in this form will help us understand how best to partner with you to provide the best care possible. Feel free to give as much information as you are able. It will be kept at the end of your relative/friend's bed.

Who is the person who knows your relative/friend the best?

Is this you?

How are you usually involved in caring for your relative/friend?

Are there any legal issues we should know about? (e.g. enduring power of attorney)

How would you like to be involved in your relative/friend's care whilst they are in hospital? (e.g. assisting with meals, helping them to wash and dress, night times)

Would you be happy for hospital staff to call you to provide support if necessary? (e.g. if your relative/friend became distressed, they asked for you)

During the day:

During the night:

Name:
DOB:
Hospital/NHS no.:

Nottingham University Hospitals **NHS**
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What is the best way to consult you about decisions regarding your relative/friend's care?

We have memory boxes above patient beds, so that bed areas look familiar to our patients, and to prompt conversation. Would you be able to bring in some personal items (e.g. photographs or mementos) for your relative/friend's memory box?

Would you be happy to bring in some day clothes for your relative/friend (labelled with their name)?

Would you be interested in accessing carers support whilst your relative/friend is in hospital?
(e.g. Alzheimer's Society support)

Is there anything else you would like us to know?

Please do complete the 'About Me' form, which provides us with more information about your relative/friend. For free, confidential advice on the support available to you as a carer, including information about Carer's Assessment, contact Carers Direct on 0808 802 0202 or online at www.nhs.uk/carers

This form has been completed by:

Relationship to patient:

Caring Together: B47 Draft 2011.

TEAM: a clinical controlled trial

- Randomised from the Admissions Unit to 'MMHU' or 'standard care'
- Patient and carer recruitment
- Initial and 90 day outcome data
- Days at home
- Observational Study
- Interview Study

What carers are saying...

The care he received was excellent (...) It is not easy to care for elderly people who are very confused. My father was so happy there that he thought he was in a hotel (August 2011)

The staff on B47 are the most exceptional nursing professionals I have ever met. I sat with my father for nine hours and they were fantastic with me, my Dad, and the other men on the ward (July 2011)

Reality check

Distress

Night shifts

Falls

Staffing

Case mix

What staff are saying...

When we first became [the MMHU] I felt terrified... and I felt cross. I thought 'here we go again'. Now, I think we're doing a pretty good job. (...) We're a good team, we're chilled out... and that rubs off on the environment. (Staff Nurse)

I didn't know what to expect. I didn't know what 'delirium' meant. But we understand behaviour better – the training has been a big help. The RMNs help us. (Health Care Assistant)

There is a difference in the team now... attitudes have changed. (...) The way staff deal with highly stressful situations is far more tolerant... to meets the person's needs. (Mental Health Nurse)

What the patients are saying...

The ward is alright. (...) That [patient] just goes on and on about 'where is my wife?' a dozen times, every five minutes. It must be very hard for the nurses. They do their best, they try. There's no mickey-taking. ("Joe")

You have to take what comes. I'll give you a tip... This ward is a dicey ward. You don't know if the others will be friendly. I've seen trays thrown, water thrown... they can't help it 'cause they're ill. The nurses aren't quick enough to duck. ("Jack")

Conclusion

There are no quick fixes...
...but something can be done

Recommended reading

Development of a specialist medical and mental health unit (Discussion paper) : <http://www.nottingham.ac.uk/mcop/documents/papers/mcop-issn2044-4230-issue5.pdf>

Harwood et al. (2011) Evaluation of a Medical and Mental Health Unit compared with standard care for older people whose emergency admission to an acute general hospital is complicated by concurrent 'confusion': a controlled clinical trial. **Trials**.12:123

Waite J, Harwood R, Morton I, Connelly D. (2008) Dementia Care: a practical manual. OUP.

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The staff, patients and carers on B47 (MMHU)
Professional photographs taken by Hannah Fox

