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Pyrland ward 14 July 2016

	It is recommended that...	Comments from the service provider
5.1	<p>Ward 2 be refurbished to make it more welcoming and attractive. To include refurbishment and reorganization of the activities room to make it more inviting accessible and enjoyable.</p>	<p>We do recognise that ward 2 does require a degree of refurbishment and bringing up to the standards required of a modern dementia ward.</p> <p>The activities room has been created by staff following the reduction of beds and the availability of more space. It was thought at the time that it would serve as an alternate venue for patients to use for activities and one that equipment could be made readily accessible to staff on the ward. However, staff have found with the reduction of patients on the ward and severity of conditions most activities are taking place in our main lounge on a 1-1 basis rather than the activities room. This enables staff to provide individual activities to ward 2 patients that are tailored to the patient's needs at the time.</p> <p>We do encourage ward 2 patients to use the activities room when appropriate and regularly have relaxing and engaging sessions in there, often with music on. Patients are invited to do arts and crafts or sometimes just to socialise with the group.</p> <p>Often a lot of reminiscence happens in these conversations.</p> <p>As well as one to one activities, when appropriate group activities do take place on ward 2 for the patients who are able and are willing to participate.</p> <p>Activities and level of support required are adapted to suit the patients' level of functioning to enable them to participate.</p> <p>Regular Group sessions include</p>

		<p>Art, Flexercise, quizzes, gardening.</p> <p>Considerations are made for patients unable to focus, communicate or stay settled enough to remain in a group or to sit down long enough to complete an activity –this is when one to one is more appropriate.</p>
5.2	<p>more tactile and memory stimulating objects are provided around the ward would help to occupy stimulate and engage patients.</p>	<p>The ward Occupational Therapist does have a wide range of tactile objects used for patients with anxiety and dementia.</p> <p>It is not felt to be appropriate to leave objects around the ward due to infection control and choking hazards. Reminiscence objects are kept mainly in the activities room and sensory equipment is kept in the sensory room for this reason.</p> <p>We have discussed the idea of having scenic pictures from the local area/Somerset/ sea side on the walls to prompt reminiscence and this may be something we look into in the future.</p>
5.3	<p>the good practice examples activities list (See appendix 6.3 and 6.3.1) is discussed with staff and at ‘have your say meetings’.</p>	<p>Thank you for these helpful suggestions. The majority of activities listed are regular activities that take place on both wards and activities are an agenda item for the ‘have your say meetings’. Our activities organiser involves the patients in deciding what groups to run each week as often it depends on patients that are currently on the ward and their particular interests. Some patients also like the opportunity to share their skills. For example, earlier in the year we had a patient that was a sculptor artist and they gave a class in this to other patients and it helped them in their recovery also. However, there are some other suggestions that you have made that we had not considered which patients may enjoy or benefit from and the staff will explore these ideas and suggestions.</p>
5.4	<p>That the ward contacts Reminiscence Learning for support and advice for therapeutic activities. http://www.reminiscencelearning.co.uk</p>	<p>Our Occupational Therapist will look into this further. Thank you for the suggestion.</p>

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to thank Healthwatch Somerset for their visit and positive report.