

20 June 2022

**Our Ref:** RFI 44369

Dear

**Freedom of Information Act 2000  
Information in Relation to Training provided to Nursing and Medical Staff  
within Ward 2 of the Downe Hospital.**

I am writing to confirm that the South Eastern Health & Social Care Trust (the Trust) has now completed its search for information relating to above which you requested on 12 May 2022.

A response to each of the questions raised has been provided by the Hospital Services Directorate and is attached in Appendix A.

If you are unhappy as to how this request has been handled, you have the right to seek a review within the Trust in the first instance. You should write to the Information Governance Department, Lough House, Ards Community Hospital ([informationgovernance@setrust.hscni.net](mailto:informationgovernance@setrust.hscni.net)) within two months of the date of this response and your complaint will be considered and a response provided, within 20 working days of receipt.

If, after receiving a response, you remain unhappy, you can refer your complaint to the Information Commissioner at The Information Commissioner's Office –Northern Ireland, 3rd Floor, 14 Cromac Place, Belfast, BT7 2JB. It is important to note that if you refer any matter to the Information Commissioner, you will need to show evidence of having gone through the Trust's internal review procedure to try to resolve the matter with the Trust in the first instance.

If you have any queries about this letter, please do not hesitate to contact me. Please remember to quote the reference number above in any future communications.

Yours sincerely

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**Rebecca Manning**  
**Information Governance Assistant**

***I would like to know the details of training provided to the nursing and medical staff of Ward 2 Downe Hospital:***

**Q1. *Delirium inc Risk Assessment and Management.***

A1. a. Nursing Response

Delirium Training is learning module mandatory for all staff on ward. Topics included are National Institute for Health Care Excellence (NICE) guidelines, Northern Ireland Delirium Bundle, Delirium Assessment Form, Management of Delirium, Behavioural Changes, Communication and De-escalation, Interventions and the patient's experience.

b. Medical response

It is an integral part of the medical training of doctors to be knowledgeable about delirium, Deep Vein Thrombosis (DVT) and falls in terms of confirming the diagnosis, identifying underlying causes and triggers, and how best to manage these conditions.

The Trust has a detailed multi-disciplinary approach to risk assessments for vulnerable older people who are at risk of developing these problems and minimising the likelihood of harm arising as a result during their inpatient stay.

**Q2. *Deep Vein Thrombosis.***

A2. a. Nursing Response

DVT would be covered through nursing programme e.g. Queens University Belfast Nursing degree or staff equivalent depending on where trained. It would also be a condition staff would be familiar with through training including managing deteriorating patients, intermediate life support (ILS) and Alert. It would also be learnt from experience in a medical ward.

b. Medical Response

Consultant Physicians have the benefit of years of experience in managing deep vein thrombosis conditions that are commonly encountered on medical wards.

**Q3. Falls including but not exclusive to risk assessment****A3. a. Nursing Response**

Falls awareness covered on nursing induction. Every patient admitted has a falls risk assessment completed; this highlights areas for concerns and initiates actions to prevent falls. Risk assessments are updated weekly and following a fall.

One of the Trust's systems which records incidents (Datixweb) is completed following every fall and any learning noted is then shared with staff via email and at ward meetings.

If a patient sustains an injury from a fall a falls minimum data set is completed as well as shared learning from the event.

Patients with high risk of falls while an inpatient have a falling star icon on the cambio board and this is shared as part of safety briefing which takes place on each shift change over.

**b. Medical Response**

On-going educational activities (both in-house and at national educational events) keep our knowledge and skills up to date in a wide range of medical topics such as falls. Maintaining professional knowledge and skills is an annual requirement to maintain registration with the General Medical Council (GMC).

**Q4. Nutrition of the older person including but not exclusive to food fluid charts.****A4. a. Nursing Response**

Nutrition of the older person: Patient Nutrition/Malnutrition Universal Screening Tools covered in nursing induction programme. Dieticians regularly on ward and pts referred and reviewed for specific needs including high MUST or disease specific eg: high/low potassium, diabetic, etc. There is a nutrition folder available on the ward for staff use including information on Feeding tubes, MUST completion and actions needed if scoring, low potassium diet advice, gluten free diet advice and more. Patients who require assistance with eating and drinking have place setting icon on cambio board- this information shared with staff during induction to ward. Fluid balance chart- when current document rolled out training was provided to all staff since this we have had bespoke session run by the lead nurse. Staff also trained at ward level during induction period.

**b. Medical Response**

The Trust frequently engage with other specialists to help manage these conditions e.g. the mental health team when we suspect dementia is underlying the delirium, geriatricians or neurologists if an underlying movement disorder is suspected as contributing to falls, the dietitian for a full nutritional assessment if oral intake is poor and there is a risk of malnourishment, and speech and language therapists when there are nutritional concerns relating to impaired swallowing.

**Q5. Copy of any policies re the above.**

A5. Please see Attachments as listed below for Trust Policies and Risk Assessments:

- Attachment 1 - VTE Risk Assessment
- Attachment 2 - VTE Actions Interventions Medicine
- Attachment 3 - Prevention and Management of Patient Falls in Adult Care
- Attachment 4 - Supporting the Treatment of Delirium within Care Homes
- Attachment 5 - Food and Nutrition for Dementia Patients