

Evaluation of the impact of the Ward Family / Carer Liaison Worker on George Earle Ward

**AUTUMN 2023** 

## Background to Ward Family / Carer Liaison Worker

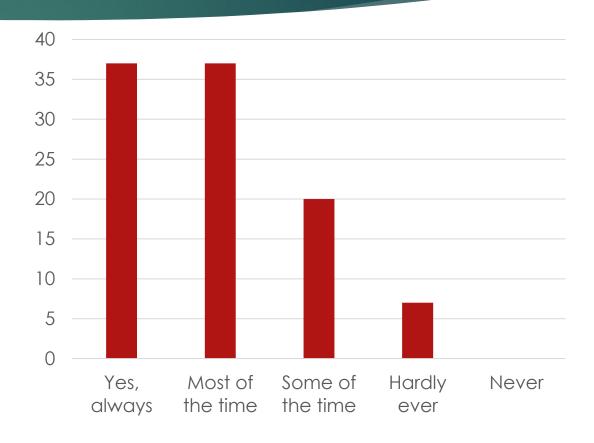
- ▶ The Acute Stroke Unit was an outlier in complaints and concerns
- A best practice review was undertaken
- The agreed model was to have a Communication Worker based on George Earle Ward
- The Ward Family / Carer Liaison Worker role was co-designed with a Carer
- Worker supported up to 94 family members / Carers per month (up to 185 contacts per month)

# Evaluation method:

- Face-to-face questionnaires for staff on George Earle
  - Option to complete online / anonymously
- Carer Evaluator made phone calls to family / Carers
  - ▶ 28 out of 30 completed with Evaluator over the phone
  - ► Two completed the questionnaire online
  - 76 contacts in total (39% response rate)

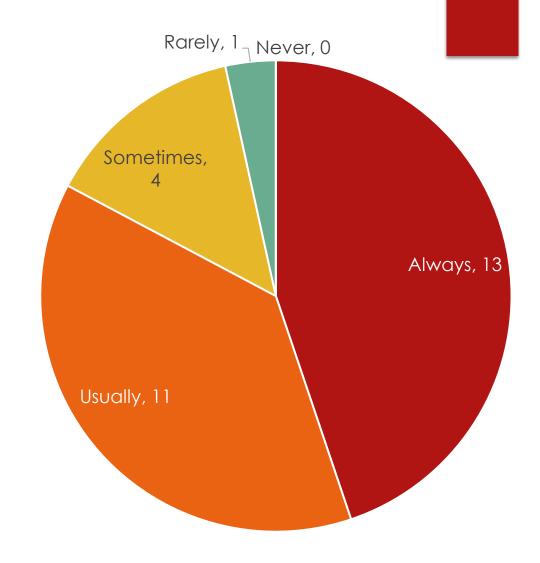
# Were you involved as much as you wanted to be in decisions about the care and treatment for the person you supported on the ward?

Most Carers felt involved in decisions on George Earle (73% always or most of the time). There were no family / Carers who said they were never involved.



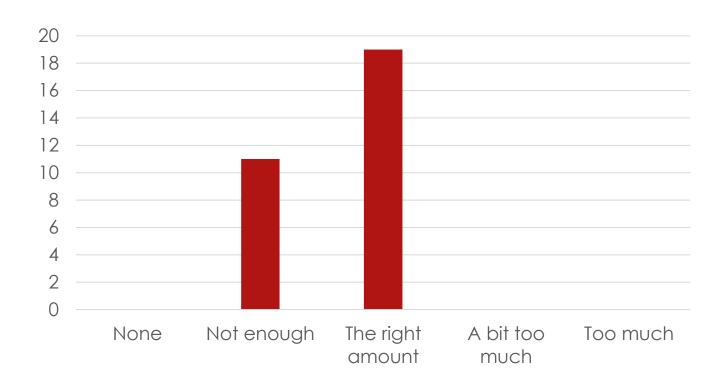
## Getting important questions answered:

- ➤ On George Earle family / Carers usually had their important questions answered (45% always, 38% usually).
- For the eleven who had issues with these important questions, the worker helped seven with getting the right person to talk to and helping them to understand.



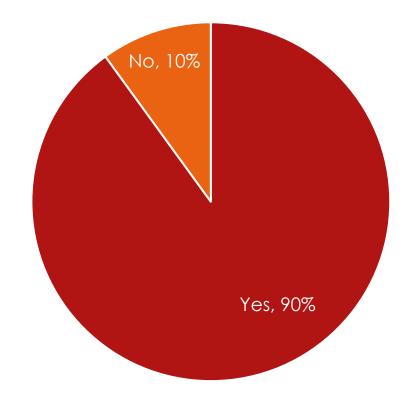
# How much information about the person you are caring for's condition and / or treatment was given to you?

Family / Carers of people on George Earle either received the right amount of information (63%), or not enough information (37%).



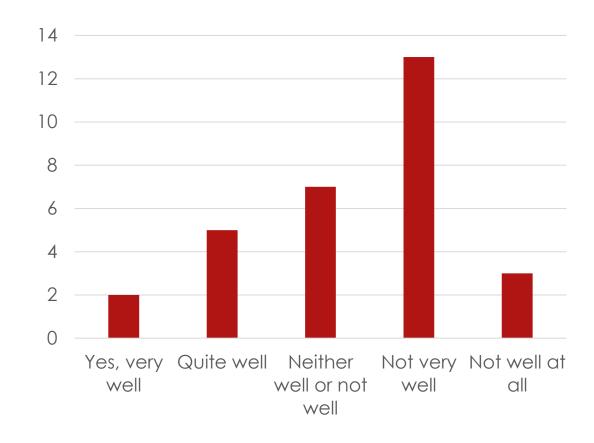
## If you had any worries or fears, did you find a staff member to talk to?

- ▶90% of people with worries or fears found a staff member to talk to.
- Sixteen (62%) of those that had worries or fears found the Ward Family / Carer Liaison Worker to talk to. Of those people, 67% reported that they were extremely helpful, with 30% saying they were quite helpful.



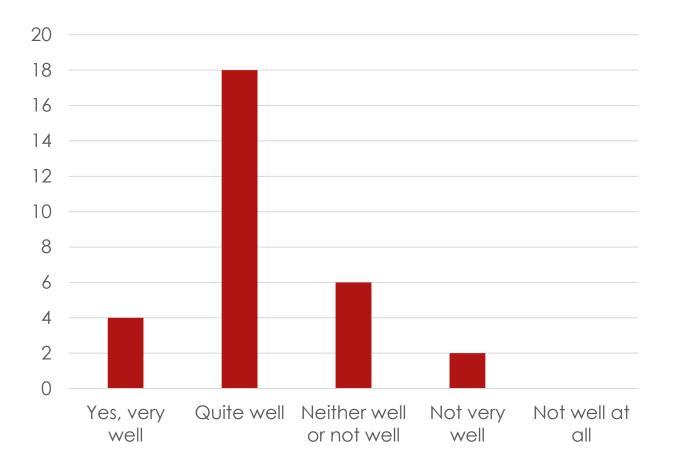
## How well did you feel the discharge plan was communicated?

Respondents on George Earle highlighted dissatisfaction with the way the discharge plan was communicated, with thirteen (43%) saying it wasn't communicated very well and a further three (10%) saying it was not communicated well at all.



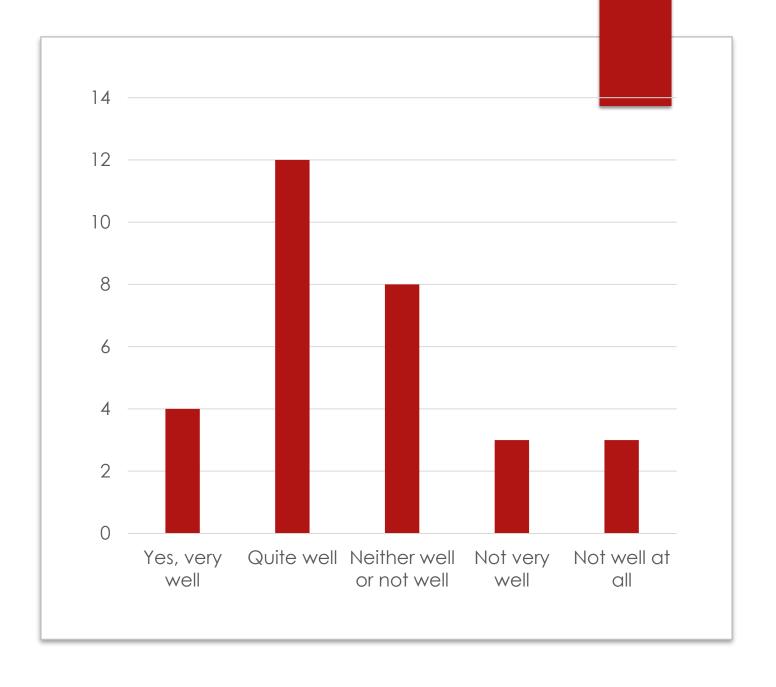
# Did you feel you were listened to on the ward?

Family and Carers answered "quite well" in 60% of responses.



#### Did you feel that staff on the ward respected your needs as a Carer?

While more than half of responses were positive, there were three who said their needs were not very well respected and a further three who said they weren't respected well at all.





#### Conclusion

- ► Feedback on the Ward Family / Carer Liaison Worker was positive from both family / Carers and staff on George Earle Ward.
- ▶ Staff felt the role had a positive impact on communication, but that further training is needed to ensure there is no duplication or inconsistency with messaging.
- ▶ The worker made most people feel more welcome on the ward, (56% extremely welcome and 25% quite welcome) and the role was valued for getting answers from medical staff.
- The evaluation serves as a useful baseline for future work on Simpson and Cheetham Hill wards.

### Next steps

- The Ward Family / Carer Liaison Worker's role will be extended to Cheetham Hill and Simpson Wards.
- Issues highlighted with discharge, shared decision-making and respect will be looked into further by ward management.
- ► The Trust has introduced 'What Matters to You?' for patients and Carers within the nursing assessment.
- The impact and value of the role will continue to be assessed to establish whether it can continue.