



**South London  
and Maudsley**  
NHS Foundation Trust

# Welcome

## Information for patients

### Lambeth Hospital

108 Landor Road

London

SW9 9NU

Phone: 020 3228 6000

[www.slam.nhs.uk](http://www.slam.nhs.uk)

This booklet is for you if you are a patient on a mental health ward.

**Your name:**

**Ward name:**

You can speak to any member of staff if you have any questions or concerns. These are your main contacts:

**Your primary nurse:**

**Your consultant:**

There is space for your notes and any special arrangements at the back of this booklet.

## About us

We are South London and Maudsley NHS Foundation Trust. We provide:

- mental health services for adults and children in Croydon, Lambeth, Lewisham and Southwark
- substance misuse services for people who are addicted to drugs or alcohol, and
- specialist services for people from across the UK. These include mother and baby services, and services for people with eating disorders, psychosis and autism.

# Welcome

This ward is a mental health service. It is part of South London and Maudsley NHS Foundation Trust.

We want to help you:

- Feel better so you can leave hospital as soon as possible.
- Plan for any changes you want in your life after you leave.

Being on this ward may feel strange and daunting. It can be easier if you know what to expect. This pack can help answer your questions. You can also speak to us if you have any questions, comments, complaints or concerns.

All our staff members have agreed to:

1. Be kind, caring and polite.
2. Be prompt and value your time.
3. Take time to listen to you.
4. Be honest and direct with you.
5. Do what they say they are going to do.

We call these our **five commitments** and this is how you can expect to be treated by everyone involved in your care.

# Contents

<b>Your care and treatment</b>	Why are you in hospital?	3
	When you arrive	3
	Practical help	4
	What will happen while you are on this ward?	4
	Can you leave the ward when you want?	5
	Who on works on the ward?	6
	Who will be involved in your care?	7
	Involving your family members and carers	8
	Your individual needs	9
	What will your assessment cover?	9
	Your care plan	11
	The ward round	11
	Medication	12
	Your records	12
	Moving on – next steps	13
<b>Ward routine</b>	Time to talk to your nurse	14
	Checks by staff	14
	Therapy and activities	15
	Community meeting	15
	Meals and drinks	16
	Visits	16
	Your religious and spiritual needs	17
	Facilities	17
<b>Keeping the ward safe</b>	What do the alarms mean?	18
	Our expectations of you	18
	Personal safety	19
	Mobile phones	19
	Smoking	20
	Alcohol and drugs	20
	Restricted items	20
	Your feedback	24

# Your care and treatment

## Why are you in hospital?

You are here because we think it is the best place for you to get the help you need right now.

Some people need to stay on the ward for a few days. Other people need more time to feel better.

## When you arrive

When you arrive we will greet you and show you to your room. We will check on you regularly to make sure you are safe and getting the support and treatment that you need.

We will also show you where the toilets and bathrooms are, how to get a hot or cold drink, the sitting room where you can watch TV, and how you can make a phone call.

If you smoke, we will speak to you about our smoke free policy and the support we can provide for you (see page 20).

You can leave your personal belongings in your room, and ask for any valuables to go in the ward safe. We ask you to keep your bedroom locked and only bring essential items to the ward as there is not much safe storage for your property.

We will ask you to give us anything that could make you, or others on the ward, unsafe. This includes alcohol, drugs, sharp items and so on (see pages 20 to 21).

When you feel well enough, we will introduce you to the other people on the ward.

You may find that some of the other patients on the ward are openly upset and distressed. Please talk to staff about this if you are concerned.

## Practical help

If you have come into hospital suddenly there may be things that you need to sort out or people you need to contact. We will ask you about these things so we can help you:

- Arrange for someone to care for your children or relatives while you are in hospital
- Arrange for someone to look after your pets
- Arrange for someone to secure your home. (Lock doors and windows, turn off heating, cancel deliveries)
- Get clothing or personal items that you might need while in hospital, or arrange for things to be taken home
- Arrange to pay bills
- Provide medical certificates to your employer or the Department for Work and Pensions (DWP)

## What will happen while you are on this ward?

We will work with you to help you feel better. We need to understand what will help. We do this by talking with you and checking how you are. This is called an **assessment** (see page 9).

We will then work with you to make an individual plan to help you with the issues that brought you to hospital. This is your **care plan** (see page 11). As far as possible, your care plan will include your wishes and preferences.

If you have been detained in hospital under the Mental Health Act, there might be things in your care plan that we think are necessary to improve your condition. If you do not agree with your care plan we can discuss this with you.

## Can you leave the ward when you want?

Like most hospital wards, the ward you are staying on is locked to help keep patients, staff and visitors safe.

- **If you are an informal patient** (also known as “voluntary”) you can leave the ward, although we do have a legal duty to keep you safe called a “duty of care”. You will be given more information about this.

We might ask you to stay on the ward for your first few days so we can assess your needs. If you want to leave the ward at this time, we will ask you to talk to a nurse or doctor first.

If you are feeling vulnerable, you might have agreed to an escort when you leave the ward.

This means a member of staff goes with you, until you feel more settled and confident. This will be in your care plan.

- **If you are a detained patient** (also known as “sectioned”) you will need permission from your consultant to leave the ward and you may need an escort to keep you safe. This is called ‘Section 17 Leave’.

We know this can be upsetting. When you arrive and during your stay we will give you more written and verbal information, explain your rights, and answer any questions.

You have the right to speak to an independent mental health advocate or a solicitor. Please ask nursing staff for more details.

- **If you need an escort to leave the ward**, we will provide this as soon as we can.
- **If you go out on leave**, we ask you not to drink or take drugs. Do not bring drink or drugs back to the ward.
- **When you return from leave**, we may need to search you and your possessions to make sure you do not bring any restricted items onto the wards.

## Who works on the ward?

Various **mental health professionals** work on the ward. This includes the consultant psychiatrist, the ward doctor, nurses, occupational therapists, and nursing assistants or support workers. There might be student doctors and student nurses working on the ward.

**Other professionals** come to the wards to work with people, such as social workers, psychologists, activity coordinators, benefits advisors and pharmacists.

There is also a drugs dog that visits wards with its handler.

**The ward manager** helps to make sure everything runs smoothly on the ward. They work with health and social care professionals to provide your care and treatment, and with **the housekeeper** to make sure the ward is safe and supplied with everything it needs.

You can ask to see the ward manager at any time they are on duty. They normally work 9am to 5pm Monday to Friday.

**Administrators** support healthcare professionals and are based in the ward office. They update patient records, organise meetings and welcome visitors.

**Domestic staff** clean and tidy the ward, and **hostess staff** help with mealtimes.

## Who will be involved in your care?

A trained nurse is in charge of every shift. They oversee the way the nursing team provides your care and treatment day and night.

### **Primary Nurse**

Everyone has a primary nurse. They are trained and qualified mental health nurses who offer care, support and advice around any aspect of your mental health.

Your primary nurse is the link between you and other professionals involved in your care.

They work closely with you and (if you agree) people important to you, to understand what will help and to develop and review your care plan. You can approach them at any time if you have any questions or worries.

When your primary nurse is not on duty, another nurse will be allocated to look after you.

The name of your allocated nurse will be put on the board near the nursing office.

Your nurse will approach you at the beginning of each shift to introduce themselves and confirm your plans for that period, such as activities schedule, appointments, and when they will sit down with you to review your care plan and progress.

You can of course approach any member of staff at any time.

### **Doctors**

The consultant psychiatrist is the doctor in charge of your care while you are here. Together with other professionals, they review your care and treatment with you. They can also provide medical certificates to your employer or the DWP.

Your consultant will see you every week. For day to day concerns, you can see a junior doctor. They work with the consultants and are on the ward every day.

## **Occupational Therapist**

The occupational therapist uses activities to promote wellbeing and recovery. They can work with you to help you achieve your treatment goals, and in your daily life outside hospital. This can happen as part of the ward group programme or with you as an individual.

## **Psychologists and Therapists**

Psychologists and therapists provide individual and group therapies to help you understand and cope differently with mental health problems.

## **Social Worker**

The social worker can help with benefits and housing issues as well as offering practical and emotional support and advice to you and your family.

## **Pharmacist**

The pharmacist is the medication expert. Every ward has a pharmacist who visits weekly and can be phoned by staff for information and advice.

You can also ask to speak to the ward pharmacist who will answer any questions you have about your medication and supply written information.

## **Involving family members and carers**

Your family and/or friends can often help your recovery. If you want them to be involved in your care, we will involve them as much as we can.

We have a duty to listen to their concerns and to give them general information about our services and how we work.

We can't give them any private information about you without your consent.

We will ask you how best to involve people around you. There is a handbook with helpful information for family members and carers and other information at [www.slam.nhs.uk/carers](http://www.slam.nhs.uk/carers)

## Your individual needs

Everyone is different. We will identify if you have any language or communication difficulties when you arrive and make sure that support is organised to help you understand things. Tell us if there are specific things we can do to help with communication, food, or anything else. Some examples:

- We can arrange an interpreter to come to the ward if you find it difficult to understand or speak English.
- We can give you information by talking rather than written information, if this works better for you.
- We can repeat information if you find it difficult to remember things.
- We can arrange meals that fit your individual dietary, cultural or religious needs.

Please tell us what would help you at any time, or during your one to one session.

## What will your assessment include?

While you are on the ward, we will monitor your mental health, physical health, general wellbeing, medication and general interaction with staff and other patients on the ward. We will also ask you about your life in general

### Your mental health

- Your mood, thoughts, feelings and symptoms.
- If you have had similar problems in the past and used other mental health services.
- If you have been unwell before, what helped you get better? Did you make a plan in advance, in case you became unwell again?
- Are there any signs that your stress is increasing? Do you have a crisis management or a keeping well plan?
- Any behaviour that might make you or others unsafe.
- How you get on with other patients and staff.

## **Your physical health**

We will:

- Ask you about any physical health conditions such as diabetes, high blood pressure, asthma or heart disease.
- Ask you about any problems you have with your digestive system such as, vomiting/heart burn, opening your bowels.
- Ask you about any problems with mobility, hearing, or sight.
- Check your height, weight and waist.
- Check your blood pressure, pulse and oxygen levels.
- Check your temperature.
- Ask you to give urine and blood samples so we can test for diabetes, cholesterol, HIV and hepatitis B and C.

Please tell us if you have any worries about your physical health or about the tests we are offering.

If you have a physical examination we will make sure there is a staff member of the same sex as you present.

## **Medication**

- Medication. Your view on this and any side effects you have experienced.

## **General wellbeing**

- Your sleep and whether you feel refreshed after you have slept.
- Your eating and drinking patterns.
- How you take care of your personal hygiene and health.
- Your use of drugs and/or alcohol and cigarettes. Drugs, alcohol and smoking can interfere with your physical and mental health and your medication.

## **Your life in general**

- Any specific needs you have in relation to disability, food, religious or spiritual practice.
- How we can involve people close to you and how you would like us to share information.

- Your situation outside hospital, for example your finances, including benefit concerns, debt worries, housing and employment situation.
- Your particular talents, strengths, and hopes and plans for the future.

## Your care plan

Together, we will make a plan to help with the issues that brought you to hospital. We call this your care plan.

It includes things to help with your mental and physical health such as medication or emotional support.

It also includes things that help with practical problems such as money or housing.

You and your primary nurse will develop your care plan.

You can talk with them about what you think will help and what should be included in your plan.

We will offer you a copy of your care plan. It might change during your stay. We will discuss this with you and give you an updated copy. You might like to think about:

- What you would like help with
- What support you think the ward team can give you
- What has helped you in the past
- What staff can do to help you
- What you can do to help yourself

## The ward round

Your care plan will be discussed at a **ward round**. This is a meeting with you, a consultant, a ward doctor, a nurse and other members of the ward team.

Someone from a community mental health team might attend so you can be supported at home, after you leave the ward. Your family members or carers are welcome to be there too.

You will usually be invited to a ward round on your first or second day on the ward. During your stay, you will have regular ward rounds to review your progress.

We encourage you to contribute as much as you can. You can tell us how you feel, what helps you most and how you like to be treated.

If you feel uncomfortable being in a meeting with more than one professional, the consultant may be able to see you on your own, or an independent person (sometimes called an advocate) can attend with you.

## Medication

As part of your care plan, you may be prescribed medication. We want you to benefit from any prescribed medication and experience as few side effects as possible.

Nurses can give you information about your medication. You can also ask to speak to the ward pharmacist who will answer any questions and supply written information.

If you experience side effects please speak to a member of staff. They can speak to the ward pharmacist and make sure you get the support you need.

**Medication Times:** 9am, 1pm, 6pm and 10pm.

## Your records

Details of your stay with us are held on our computer system. We have a legal duty to keep your information confidential within the team.

To provide you with the best quality care we may need to share information about you with your community mental health team, or other health care providers such as your GP. You have a right to object to this.

If you want to see your records, you can write to the ward doctor or contact the Data Protection Office. While you are in hospital the nurses can help you with this. You have the right to see any

letters we send to your GP or other health professionals. If you want a copy of this please ask a member of nursing staff.

Ask us if you would like a leaflet with more details about how we use your personal information.

## Moving on – next steps

Everyone's care is different. Some people move on to other specialist units and others go home or to their previous accommodation.

Whatever your next step, we will plan with you how to support your recovery.

This could include

- Support from the Home Treatment Team
- Updating your General Practitioner (GP)
- Talking to your care coordinator in the local Community Mental Health Team. They are responsible for your care and treatment once you have left hospital.
- Talking to those close to you, such as family or friends.
- Making a crisis plan for if you get unwell and informing you about our 24 hour mental health crisis line - 0800 731 2864 (Option 1) [www.slam.nhs.uk/crisis](http://www.slam.nhs.uk/crisis)

Sometimes we need you to move on from the ward more quickly than we expected. If this happens, we will still make sure you get the support you need.

# Ward routine

## Time to talk to your nurse

There are nurses on duty 24 hours a day. They work in three shifts. The shifts start at:

Morning shift: 7am

Afternoon shift: 1pm

Night shift: 8.30pm

There is a staff meeting at the beginning of each shift so we can hand over any important information about patients. There will always be a nurse or member of the team available outside the handover room.

**Your allocated shift nurse will talk to you during each shift.**

The nurse will ask you about how you are feeling and review your care plan with you.

We call this **one to one time**. This is a chance for you to tell your nurse how you are feeling and to raise any worries you have about being on the ward, or with your care and treatment.

## Checks by staff (also known as observations)

You may notice that nursing staff check on you, especially when you are in your room. We do this both day and night to make sure that you and others are safe. The checks are most frequent in the first 24 hours after you arrive. We do our best not to wake you if we check on you at night.

There may be times when we feel you need more care, for example if you are feeling particularly vulnerable.

In this case, your nurse may spend more time with you. This could mean checking your wellbeing frequently or it could be being within arms-reach of you at all times. This is called 'enhanced observation'. The level of support you need whilst on

the ward will be discussed with you and will be part of your care plan.

For the first three days, we check your physical health, for example your blood pressure, twice a day. This is to make sure that you are physically healthy.

## Therapy

During your admission, you will have a personalised therapy programme (see your care plan, page 11). This could include:

- Individual sessions with various team members
- Group sessions that you are referred to
- Meetings such as the ward round (see pages 11-12) or goal setting meetings.

## Activities

Taking part in therapeutic activities, such as exercise or talking groups, is an important part of your care. We encourage you to plan your own time between your therapy sessions.

Check the group timetable on the ward noticeboard and/or in this pack for details of group activities such as cooking, music, art or gardening.

If needed, we can help you plan your time in a way that matches your therapy goals.

## Community Meeting

Every week there is a “community meeting”. This is an opportunity for patients to come together to discuss issues on the ward, to find out what activities are happening and to raise concerns.

A senior member of the staff team is present at the meeting and this may help you to discuss any concerns about your experience in relation to the ward environment, ward routines and general advice. It may help your confidence to attend these meetings.

## Meals and drinks

The menu for each day is displayed in the dining room. Let us know if you have any special dietary requirements or preferences. Feel free to give us suggestions or feedback about the meals and we will do our best to act upon them.

Breakfast:	8am to 9am
Lunch:	about 12pm
Supper:	about 5pm

## Tea, coffee and other drinks

Ask us if you would like tea, coffee or water. We will either bring you a drink or show you where to get one.

## Visits

Visiting times are as follows:

Weekdays from 2pm to 5pm and from 6.30pm to 8pm

At weekends we can be more flexible, but please talk to staff if you would like a morning visit on a Saturday or Sunday

We ask that

- no more than two people visit at a time so that the ward remains calm for other patients
- all visits take place in the communal areas or quiet room and not in the bedrooms

We might want to supervise your visits. If we do this, we will explain why.

**If you want children under 18 to visit**, please tell us so we can arrange a safe and private place for the visit to happen.

We know how important it is to see your children while you are in hospital, but to ensure their wellbeing, visits need to be planned in advance.

## Your religious and spiritual needs

We will respect your cultural, religious and spiritual beliefs.

If you want, someone from our Chaplaincy Team can visit you. They come from a variety of faith backgrounds and work together to offer spiritual care to people of all faiths, as well as those with no faith tradition. You can also ask for a representative from your own tradition/background to visit you to offer support. Ask us if you need help with this.

There is a room on the hospital site where you can go and pray, be quiet or use for personal reflection. Ask us for details.

You can ask to talk to a chaplain when you see one on the ward or you can phone them. See the pack page for details.

## Facilities

**Activity Room** - most wards will have an activity room where you will find games, art materials, books and other resources. Groups will sometimes meet in this room.

**Bedrooms** - all bedrooms are single rooms. You can lock your door from the inside when you are in it, and ask a member of staff to lock it if you are not in it.

**Day Areas** - we encourage you to spend time in the lounge and other communal areas.

**Garden** - if the ward has access to a garden, it may help you to get fresh air and time away from the ward. You may need an escort to go to the garden. If this is the case, a nurse will try to organise it as soon as possible. Please be patient if we cannot immediately organise this during busy times.

**Laundry** - laundry facilities are available and your allocated nurse each shift can help you to use these.

**Shop Run** - one of the nurses will do a shop run once or twice a day. The times will be put up on the board near the nurses' office so that you can tell us what you need in advance.

# Keeping the ward safe

## What do the alarms mean?

Sometimes you will hear a high pitched alarm on the ward. This usually means urgent help is needed for someone on the ward. Unless we ask you, there is no need for you to do anything, staff will look after the situation. If there is a fire alarm, we will help you move somewhere else until it is safe to return.

## Our expectations of you:

We want the ward to be a safe, therapeutic and respectful environment. To do this, we ask you to:

1. Respect others - their space, privacy, beliefs and feelings. This includes:
  - People's personal space and belongings
  - People's right to confidentiality
  - Our noise levels
  - Our language
  - Our use of mobile phones
2. Keep our environment clean and tidy, including your room
3. Keep the ward free of alcohol, drugs, tobacco and other restricted items (see pages 20-21)
4. Participate in your care as much as you can, and give feedback that could help improve the service

If you feel that people are not meeting these expectations, please tell us.

## Personal safety

We hope that you enjoy the company of other people on the ward and we encourage you to socialise. People on the ward are vulnerable and so we have some rules that help to keep everyone safe.

### Confidentiality

To protect your own confidentiality:

- Keep your care plan safely in your room, if you have your own copy
- Use a private space, such as your room, to take personal phone calls
- Think very carefully before sharing personal details such as phone numbers with other people

To protect other people's confidentiality:

- Don't take photos, unless it is with staff as part of your treatment plan

### Keeping safe

- Keep your property safely in your room.
- Don't lend, share or trade your property or money.
- Encourage people to talk to staff if they need anything.
- Keep socialising to the communal areas, not in your bedroom.
- No touching – this can sometimes be misinterpreted.

Please tell a member of staff immediately if you experience or witness behaviour that you feel is bullying, harassment or discrimination.

## Mobile Phones

You can usually keep your mobile phone with you. Staff will charge your phone when requested. Using your mobile phone to record others or take pictures can cause difficulties for staff, patients and carers. If you are considering doing this please talk to your primary nurse or allocated shift nurse. For more

information about mobile phone use, ask to see our mobile phone policy.

## Smoking

We have a duty to protect everyone's health so smoking is not allowed on the hospital site.

Staff are not allowed to store tobacco or escort patients to smoke outside the hospital.

We can help you cut down or quit smoking using treatments such as nicotine replacement therapy or e-cigarettes. Ask staff on the ward for more information and to see the tobacco dependence specialist.

## Alcohol and drugs

We know that some people admitted to hospital will be drinking alcohol and/or taking drugs. We are committed to helping you with this, even if you don't want to stop.

We use drug dogs to help keep our premises safe and free from alcohol and drugs. Staff can answer any questions you have about them.

## Restricted items

To keep everyone safe, these items are restricted:

- Prescribed drugs- including ointments, creams, over-the-counter medicines and supplements.
- Illegal drugs and any other drugs that have not been prescribed by a doctor
- Alcohol
- Cigarettes and tobacco
- Solvents-and other toxic/hazardous substances.
- Glass
- Any sharps-knives, scissors, razors etc.
- Pottery/ceramic items.
- Firearms and ammunition
- Lighters/matches.

- Stereos/speakers (except personal stereos with headphones)
- Photographic equipment
- Laptops
- Any other items which are judged to compromise the safety of the ward.

We may need to search you, your possessions and your room to ensure that there are no restricted items on the ward.

## Your feedback

Your feedback helps us improve our services for everyone.

### Linkworkers

Linkworkers are people who use or have used mental health service themselves. They come to the ward for a couple of hours each week to listen to people talk about how they are experiencing ward life. They tell managers how things could be improved and what is working well for patients. There is a leaflet available with more information about Linkworkers.

### Feedback questionnaires

You can give your feedback about what it is like on the ward by filling in an anonymous questionnaire. The feedback you give will not affect the care that you receive and your response won't be seen by ward staff. You can give your feedback while you are on the ward or after you have left. Ask staff or Linkworkers for more information.

### Concerns, complaints and compliments

If you have a concern, complaint or compliment, please speak to the ward manager or your nurse. This is usually the quickest and easiest way to resolve any issues.

You can also contact our **Patient Advice and Liaison Service (PALS)**. They can help with information and advice as well as helping if you want to make a more formal complaint. Their details are on the back page of this booklet.

For more information, ask for our complaints leaflet or visit [www.slam.nhs.uk/complaints](http://www.slam.nhs.uk/complaints)

**Your notes and any special arrangements**





# Useful Contacts:

## Advocacy

The advocacy service is not part of the hospital. It offers free and independent help if you feel your views are not being heard. Advocates come to the ward, or you can contact them directly.

Community Support Network South London

Phone: 0207 274 4490

email: [info@csnsl.org.uk](mailto:info@csnsl.org.uk)

[www.csnsl.org.uk](http://www.csnsl.org.uk)

## Chaplaincy Service

Our chaplaincy service can help if you have any religious or spiritual needs (see page 17 of this booklet)

Phone: 020 3228 6210 (Please leave a message and a chaplain will get back to you.)

## Patient Advice and Liaison Service

Our Patient Advice and Liaison Service (PALS) can help to sort out concerns or problems before they become serious. They can also give general advice and information, and pass on complaints and suggestions.

Freephone: 0800 731 2864 (Option 2)

email: [pals@slam.nhs.uk](mailto:pals@slam.nhs.uk)

[www.slam.nhs.uk/pals](http://www.slam.nhs.uk/pals)