

PRESS RELEASE

**STRICTLY EMBARGOED UNTIL 00.01 AM THURSDAY 27th
August 2009**



For further information please contact the Patients Association on 0208 423 9111 or Kieran Mullan on 07980 541 946 or Katherine Murphy on 07779004898

PATIENTS ASSOCIATION RELEASES SHOCKING ACCOUNTS OF NHS HOSPITAL CARE

PA publishes *Patients Not Numbers, People Not statistics* -16 first hand accounts of patient care in hospital

The Patients Association has campaigned for many years to improve the quality of care provided by the NHS and throughout that time our efforts have been fuelled by the accounts we receive from patients and their relatives through our HelpLine on a daily basis.

As a consistent pattern of shocking standards of care has emerged we have decided to publish a number of these accounts to highlight the unacceptable experiences facing patients up and down the country on a regular basis. The Patients Association calls on Government and the Care Quality Commission to conduct an urgent review of the standards of basic care being received by patients in hospital and demands stricter supervision and regulation of hospital care.

Director of the Patients Association Katherine Murphy said “Whilst Mid Staffordshire may have been an anomaly in terms of scale the PA knew the kinds of appalling treatment given there could be found across the NHS. This report removes any doubt and makes this clear to all. Two of the accounts come from Stafford, and they sadly fail to stand out from the others.”

“These accounts tell the story of the two percent of patients that consistently rate their care as poor. If this was extrapolated to the whole of the NHS from 2002 to 2008 it would equate to over 1 million patients. Very often these are the most vulnerable elderly and terminally ill patients-it’s a sad indictment of the care they receive.”

“These accounts reveal patients being denied basic dignity in their care-often left in soiled bed clothes, being given inadequate food and drink, having repeated falls, suffering from late diagnosis, cancelled operations, bungled referrals and misplaced notes. There are also worrying instances of cruel and callous attitudes from staff towards vulnerable and sometimes terminally ill patients.”

“We hope this report is a wake up call for the Department of Health and the Care Quality Commission-we’ve made a number of recommendations to try and prevent these kinds of things happening to other patients. We hope this report also encourages other people to

get in touch with us and tell their stories-we plan to continue publishing accounts until we can be confident that every patient is secured dignity in their care. The people that have come forward for this report are incredibly brave and had one thing in common-they want it stopped.”

President of the Patients Association Claire Rayner said “For far too long now, the Patients Association has been receiving calls on our Helpline from people wanting to talk about the dreadful, neglectful, demeaning, painful and sometimes downright cruel treatment their elderly relatives had experienced at the hands of NHS nurses.”

“I am sickened by what has happened to some part of my profession of which I was so proud. These bad, cruel nurses may be - probably are - a tiny proportion of the nursing work force, but even if they are only one or two percent of the whole they should be identified and struck off the Register.”

“One Hospital Trust has raised the spectre of legal action if we publish this material, others have been unhelpful, not answering relatives’ letters and not investigating their complaints. The personal accounts given here are just a few of those brought to us.”

Extracts from the accounts:

Account 1: Leslie Kirk

“Toilets were not cleaned properly with faeces clearly left from several previous uses. My sister often had to clean them herself before she’d let my father use them.”

“At no time during my father’s stay on the ward did we feel there was anyone who cared for patients enough and who took responsibility for ensuring they got the attention they needed.”

Account 2: Pamela Goddard

“Upsettingly for my brother who visited her frequently, she was often found in her own faeces and urine when he arrived. He would need to prompt staff to come and wash and change her.”

Account 3: Florence Weston

“She was also told that, because of being unable to use the toilet facilities through being immobile, she should wet the bed. This was highly embarrassing for her. Even worse, on one occasion, a night nurse told her off for doing this severely enough to reduce her to tears and cause her to ask me if she could go home.”

Account 4: Oenone Hewlett

“When she arrived at Wexham Accident and Emergency following her stay at St Marks, the doctor thought she must have been at home alone and neglecting herself. We had to explain she had been in hospital. He couldn’t understand how she could’ve become so dehydrated.”

Account 5: Bella Bailey

“Confused patients often wandered around semi naked and some staff passed them by in the corridor without a care. Night time and weekends were the worst. Night time was often the

most busiest and noisiest. Staff squealed and giggled whilst patients tried to grab a bit of sleep in between their discomforts.”

Account 6: Thomas Milner

“The nurse also failed to provide incontinence pads as had been done during the evening and night before. He was bleeding rectally and he ended up laying in urine and blood. He also wet the floor and my elderly mother wiped this up while the nurse and assistant nurse watched on and did nothing to help. They did not even bring a mop and bucket afterwards to disinfect the floor.”

Account 7: Anne McNeill

“I remember on one occasion I [visited her and found her sitting in a chair with her own vomit all over her clothes. It was dried so it seemed as if it must have been left there for some time.](#) There was also dried vomit in bowl next to her. I looked up and down the ward and couldn't find a nurse anywhere.”

Account 8: Thomas George Dalziel

“When we were taken to his bed we were not prepared for the horrific sight of seeing him, eyes wide open with a resuscitation tube down his throat. This image has traumatised not only us but also my sister and brother in law for the rest of our lives!”

Account 9: Jayne Knowles Smith

“I used to pride myself on being a nurse and hopefully I was caring and thoughtful. I have had the misfortune of seeing nursing from another angle as a patient. It's a scary world out in the wards. I'm not sure if it's the training that's lacking, the basic skills or just understaffing.”

Account 10: Colin Richard Purkiss Smith

“That evening my husband wanted to go to the toilet. I needed help from staff to take him and so I asked staff for help. Over an hour later still no one had come and my husband had an accident in the bed. I went outside of the room to the nursing station to get one of the staff to get clean sheets for the bed and when I looked, I noticed that one of the staff on duty was surfing the internet.”

Account 11: John David Drake

“I then went to the Hospital and when we arrived at the Ward, we were both shocked to see the state that my Husband was in. My Husband appeared very de-hydrated and even more confused. My Husband had not been washed and neither was there water on my Husband's locker. I washed my Husband myself and gave him a lot of water to drink. It took some time as it was hard for him to swallow but with some patience and care he was able to drink plenty of water to quench his thirst.”

Account 12: Professor Leslie C Vaughan

“ I find it unacceptable that a man at this point so obviously close to the end of his life should be left alone behind a curtain on a busy ward. The staff had phoned us and knew we were coming so that they surely could have spared a sympathetic nurse to sit with him until we arrived.

Account 13: Margaret Bristo

“Often you would stand right in front of them (the nurses station) but staff would keep their heads down and avoid eye contact with you. All my brothers and sisters felt the same. One even said asked “am I invisible” after being ignored time and time again.”

Account 14: Alice Fowler

“I witnessed patients struggling to open plastic packages of sandwiches and/or fruit juice. Sometimes if patients weren’t awake during meal times their food was left uncovered without any attempt to wake them or encourage them to eat. The food would then be taken away untouched.”

Account 15: Barbara McVernon

“A few mornings after Mum’s admission, I arrived to discover a patient with dementia in her room, going through her belongings. When the old lady refused to leave and became aggressive, I rang the nurses’ bell but no one responded. I was reduced to shouting down the corridor. Eventually a non-uniformed woman came and led her away.”

Account 16: Patient A

“The toilet was disgusting. It was soiled and had a soiled toilet brush. The public toilets downstairs were bad enough, often dirty and blocked. It’s horrifying to see this in a hospital let alone on a ward. There are countries poorer than us yet their hospitals are clean and immaculate.”

Notes for editors

Along with the full report that includes our Calls to Action, the full detailed accounts, photos of those concerned and responses from a number of the Trusts involved also attached to this email are summaries of each account with further extracts.

A large proportion of the authors of the accounts are willing to speak to the media further and give additional interviews. Please contact the Patients Association to arrange this. Patients Association President Claire Rayner and Vice Chairman Michael Summers will also be available for interview.