

Colchester Hospital University NHS Foundation Trust Colchester General Hospital

The Challenge

Care of the Elderly is provided at Colchester General Hospital, Cognitive impairment does not only exist on elderly medicine wards and quite often, long stay care of the elderly is found on our Orthopedic Wards as well as others. We were witnessing episodes of social isolation and poor communication on Fordham Ward and felt that we wanted to explore ways of improving this and also reducing distress and anxiety in the elderly that were on the ward for lengthy periods.



Colchester Hospital University NHS Foundation Trust has two main sites: Colchester General Hospital and Essex County Hospital. The Trust provides healthcare services to around 370,000 people from Colchester and the surrounding area of north east Essex and south Suffolk.

The Solution

The prevention, diagnosis and treatment of illness in older people, with the aim of being able to restore the patient to a level of optimal ability and return them to an independent life at home is our priority. This in turn supports our Directors vision to make the Trust become the most caring health care provider.

We decided to deploy The My Improvement Network Technology on Fordham Ward as a way of removing isolation in patients and

The Solution

- improving the levels of engagement. It was clear to see that this had an immediate impact, as patients showed interest in the various plethora of activities that the technology was able to provide in a very compact station. We were able to use this at the bedside as a way of encouragement for those that had showed little interest in becoming involved and also to help those that had mobility issues following procedures.

The positive results we have been able to witness, is patients have tapped on the table to the beat and hummed along with the music. It brought a big smile to this patient's face. The relatives have also commented on how they appeared to be more stimulated.

Another instance was where we recorded a visiting session with the patient and the visiting relatives. We did this to help with their disorientation and distress at night. We were able to play the recorded session to the patient when she became distressed as a means of calming her down. We were also able to use this content as a contribution towards the building of a Life Story Book for the patient with the family.

The patient's family felt that that the staff had used an excellent tool and strategy to pre-empt her distress and were delighted with our attempts to try and alleviate this. Eventually, this patient began to sleep well during the night and reduce the risk of falls. It negated the need for us to use this again for the time being.

The family, however, were delighted with the knowledge that we had this 'fallback' position for her in the event that this was required and it offered a lot of comfort for them all.

We have designated two 'Champions' to further this initiative and I am quite sure that we shall continue to see the ongoing benefits through its continued use on our wards.

