



Derbyshire Healthcare
NHS Foundation Trust



Derwent Unit

Inpatient guide

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Your name:

Your named nurse is:

Your named occupational therapist is:

Your consultant is:

Your named nurse is part of your care team. They may also involve other staff, to meet your needs.

Welcome to the Derwent Unit

The Derwent Unit is part of Derbyshire Healthcare NHS Foundation Trust.

It has three wards. Each one has a ward manager. They are:

Oak Ward – Sharon Trott

Sycamore Ward – Melanie Davies

Willow Ward – Jo Foster

All the team work hard to give you quality care and keep you safe. We want you to feel hopeful about your health and wellbeing. We will help you on your journey to feeling better.

We want to make your stay comfortable. We will give you the care we would want for our own families and friends.

Your family and friends

Your family and friends are important so we will ask you if we can involve them. They can help us understand the things you like, and how to help you.

Your care plan

We want you and your family to know why you are here. We also want you to understand your care plan. Please tell us about your goals so we can help you.



This booklet will tell you what you need to know about your stay. If you are unsure of anything, please ask one of the team.

Help us to help you

We always want to improve your care, so please tell us what we can do better.

- You can talk to our ward staff.
- During your stay, we will give you surveys to complete.
- You can send feedback by scanning the QR code or visiting [derbyshirehealthcareft.nhs.uk/contact-us/feedback](https://www.derbyshirehealthcareft.nhs.uk/contact-us/feedback).
- You can contact the Patient Experience team. Call free: **0800 0272128** or email: dhcft.patientexperience@nhs.net



When you arrive at the Derwent Unit

When you come to the Derwent Unit we will hold an admission multidisciplinary meeting (MDM).

We will usually hold this in the first two days of your stay.

At this meeting you will meet some of the people who will take care of you.

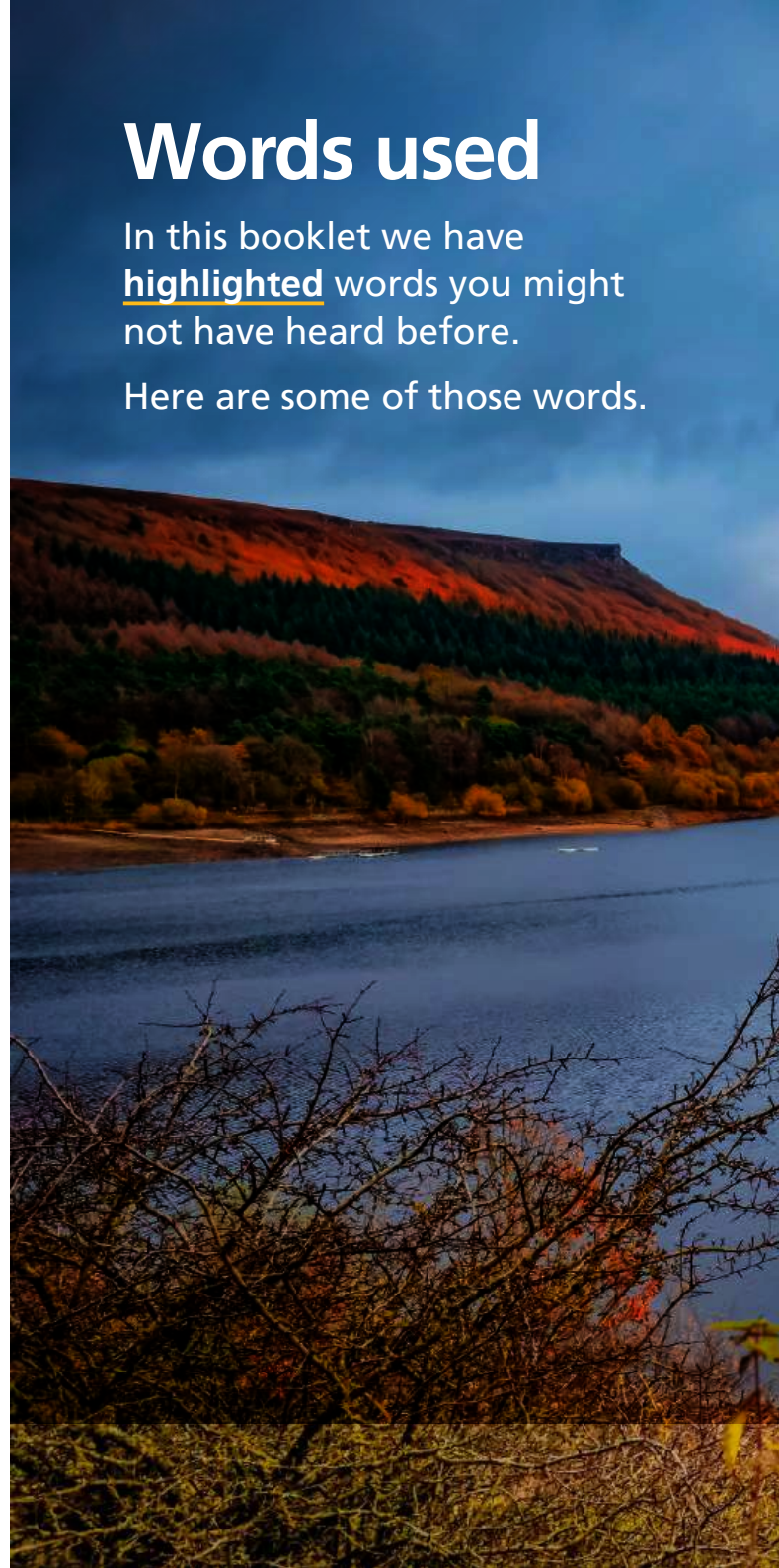
These may be nurses, psychologists, doctors, occupational therapists, and community teams. Your family, friends or carers may be there too, if you wish.

This meeting is a chance for you and your care team to talk. You can ask any questions about your care.

Words used

In this booklet we have highlighted words you might not have heard before.

Here are some of those words.



Named nurse

This is the main nurse who will look after you.

Care co-ordinator

This is usually a community psychiatric nurse (CPN). They make sure everyone looking after you knows what is happening and that you have what you need to get well. You may already have a care co-ordinator. If not, we may ask for one if needed.

Leave plan or discharge plan

We will make plans if you are going on leave or are being discharged. It will have details of any treatments and support we will give you, to help you get better. This will be written down in a leave plan if you are going on leave. If you are being discharged, this will be called a discharge plan.

Consultant

The consultant psychiatrist is an expert in mental health. They oversee the doctors and nurses looking after you. They will plan your treatment.

Care plan

This is a list of the treatments and support we will give you, to help you get better.

Multidisciplinary meeting (MDM) or ward round

At this weekly meeting you will meet the people taking care of you. We sometimes call this an MDM or a ward round.

Observation and engagement level

We will assess you. Afterwards, we will put you on Level 1, 2, 3 or 4. These levels tell us how often to check on you to keep you safe.

Occupational therapist (OT)

We sometimes call these OTs. They look at how well you can do tasks and help you meet your goals.

Ward doctors

Doctors look after you and look at your test results. If they need to, they will ask the consultant for advice.

Community meeting

Every week, there is a meeting of staff and patients. This is a chance to talk about any issues on the ward. Anyone can ask for the minutes of these meetings.

Reasonable adjustments

These are changes we can make to help you if you have physical health needs or a learning disability. We can also help if you are autistic. Please ask your named nurse.

Staying at the Derwent Unit

We hope we can help you relax so you can get better.

A. Ward routine

Staff will be in handover for about half an hour between shifts. This is when the staff going home talk to those who have just arrived. Handovers are at 7am, 2pm and 9pm.

These times may change but we will let you know.

Visitors

We hope visits from your family or carers will help you feel better.

Please talk to us if your visitors cannot come within visiting times. We will do our best to help you see them. Our contact details are on the back of this guide.

Please meet visitors in the **family room** and **dining room**. The lounge and bedrooms are for patients only. You may be able to leave the ward to meet your visitors.

You may meet visitors under 18 by appointment in the **family room**. Under 18s may not visit the wards.

Activities

Members of the care team will work with you on a one-to-one basis. They will help you meet the goals in your **care plan**.

We have a timetable of activities which you can join in. Please see page 21 for more about activities.

Community meetings

Every week, there is a meeting of staff and patients. This is a chance to talk about any issues on the ward. Anyone can ask for the minutes of these meetings.

We also have daily meetings to help you plan your day.

B. Food and drink

We serve the best food and drink to keep you healthy. We serve three main meals a day, with snacks in between.

A member of staff will help you choose from a menu each day.

We can cater for special diets and for cultural needs. Please speak to a member of your care team.

We will weigh you every week and keep a record. If you need extra help, a **dietician** or **speech and language therapist** (SLT) can visit you.

You may help yourself to cold drinks. If you would like a hot drink, just ask.



Ward times

Ward staff work times:

Early: 7am to 2.30pm

Late: 1.45pm to 9.30pm

Night: 9pm to 7.30am

Long day: 7am to 9.30pm

Medication times:

These are at 8am, 1pm, 6pm and 10pm. We can change the times to suit your needs.

Visiting times

Weekday visiting times:

- 4pm to 5pm
- 6pm to 8pm

Weekends and bank holidays:

- 2.30pm to 5pm
- 6pm to 8pm

Meal times:

Breakfast: 8am

Lunch: 12pm

Evening meal: 5pm

C. Personal items

Mobile phones

You may be able to keep your mobile phone. If so, please keep this with you. There is a charging station in the dining area.

Please do not take photos or videos. This is to keep you and other patients safe.

Don't have a phone? You can use one on the ward free of charge. Please ask a member of staff.

Toiletries

Please bring your own toiletries. These include:

- shower gel
- bubble bath
- shampoo
- shaving kit (we may need to keep this safe for you)
- toothpaste
- denture products
- hairbrush or comb.

Towels are provided in your bedroom.

Laundry

Please bring clothes which are easy to wash. We have a laundry room which you can use. Please bring washing powder, liquid or capsules. We will store these for you.

We keep a list of clothes you bring so we can keep them safe. Please help by giving your clothes to staff when you arrive.



- You will see our staff using mobile phones as part of their work. If you have any questions about this, just ask.
- We do our best to look after your things, but we cannot be held liable for lost or broken items.

Your care

We want to give you the best care and keep you safe.
We also want to make your stay pleasant and useful.

A. Care at Derwent



Quick read

We will always talk to you about your care.

We will ask you about your physical health and your mental health. We want to know how you are feeling and about any aches and pains.

We will talk to you before we do any tests. We will talk to you about any tablets you need to take. We will always talk to you before changing your care.

When it is time for you to leave the Derwent Unit, we will plan this with you. You can bring someone to meetings if you wish.

As part of your care, we will assess your needs and then involve you. You will:

✓ Help to make decisions about your care and treatment.

✓ Have a named nurse and named occupational therapist.

✓ Work with your named nurse to make a care plan.

✓ Have a copy of your care plan and safety assessment.

✓ Take part in reviews to make sure your care is going well.

Your care will continue after your stay at the Derwent Unit. If you go on leave, and when you are discharged, we will make sure you get the support you need.

B. Your assessment

Listening to you

We begin by talking to you. We will ask about your mental health needs.

What will we talk about?

- Why you have come to the Derwent Unit
- How we can work together to make things better
- Your mental health. Your thoughts and feelings
- Your physical health
- Your family and friends
- Where you live



- If you have enough money to live on
- If you look after anyone
- What you do during the day
- If you need help with anything such as shopping or looking after yourself.

When we know more about your health, we can give you the best treatment.

Your care will be tailored to you. This means we will respect:

- your race, religion and beliefs
- your background
- your gender and sexuality
- your age
- any disabilities.

We think about all of these when planning your care.

Physical health

Your physical health may be making you feel worse. This is why we ask you about it. We will always talk to you about any tests before we do them.

When you come to the Derwent Unit, the **doctor** will normally:

- measure your height
- weigh you
- take your blood pressure
- ask for a blood sample
- ask for a urine (wee) sample
- test your heart with an ECG (electrocardiogram).

If you are worried about any of these tests, please speak to a member of staff.



What matters to you?

Please tell us what matters to you. You can have someone with you if you wish.

Medication

The **doctor** will talk to you about any medicines or tablets you take. They will ask if you have had any side effects.

It is important you know what your tablets are for, and understand your rights.

If the **doctor** thinks you need to change your medicine or tablets, they will talk to you and explain why.

Our **pharmacists** can also help you with your medicines. They will tell you how much to take and talk to you about side effects.

Ongoing assessment

We will keep checking that your care is working so we can make changes to help you get better.

C. Your care plan



Quick read

The treatment you need will be written down in a **care plan**.

We will talk to you about the **care plan** and write it together. We will give you a copy of the plan.

You can talk about the plan at your weekly **multidisciplinary meeting (MDM)**. We sometimes call this an MDM or a **ward round**.

Together we will write about your treatment in a **care plan**. This will include information about:

- the treatment you need and what it is for
- your rights
- who will look after you
- your observation and engagement levels
- your family or carers, if they are involved
- social care if you need it.

We want you and your carers or family to be involved in your care. Your **named nurse** will talk to you and, with your help, write a detailed **care plan**. We will update the care plan regularly and talk to you before making any changes. We will give you a copy of the plan every time we update it.

The **ward doctor** will visit the ward.

Each week your care team will hold a **multidisciplinary meeting**. Sometimes we call this an **MDM** or a **ward round**.

The **MDM** is a chance for you and your care team to talk. You can ask any questions about your care and make plans to help your health.

You can meet your **psychologist, doctors, nurses, occupational therapist** and **pharmacist**. If you have them, we may also invite your:

- **care co-ordinator** or **community psychiatric nurse (CPN)**
- **support worker**
- **social worker**.

We will also invite your family if you are happy for us to do this.

D. Privacy and dignity

About the Derwent Unit

The Derwent Unit has three wards. These are called Oak Ward, Sycamore Ward and Willow Ward.

Each ward has 18 bedrooms.

You will sleep in a single bedroom and have your own toilet and shower.

You will be given a wrist band. This will let you unlock your door to enter your room. Other service users cannot enter your bedroom. Please note that members of staff can unlock your room but will respect your privacy.

You have the right to high quality care that respects your privacy and dignity.

We promise to:

- listen to you and help you tell us what you want and need
- treat you with respect and dignity
- treat you as a person and give you treatment tailored to you
- give you as much choice and control as possible
- give you privacy
- keep your details private
- involve you in your care, with the support of your family or carers
- keep you free from abuse.

If you feel we are not doing one of these, please talk to us. Tell your named nurse or another member of staff. **If you make a complaint, this will not affect your care.**



- People of a different gender to your own may come into your bedroom. These will include nurses, doctors and other staff.
- There are CCTV cameras in the Derwent Unit. This is to help keep you and others safe.

E. Your safety and wellbeing



Quick read

We want to keep you safe and well. This means:

- we lock the doors to the ward
- we do not allow smoking, alcohol or drugs
- we may decide you always need somebody with you
- we may need to keep some of your things safe until you leave.

We have designed the Derwent Unit to be the best place to care for you. All staff are trained to take care of you and meet your needs.

Locked door policy

We keep the doors to the Derwent Unit locked for safety.

Observation and engagement levels

You may hear staff talk about **observation and engagement levels**.

After assessment, we will put you on one of four levels. The levels tell us how to keep you safe both on and off the ward.

Level 1 means you always need someone with you. All levels mean your care team will check on you often.

A **nurse** or **doctor** will explain which level you are on. If you have any questions about your level, please ask.

Sometimes you may become distressed. If so, we will give you extra support as needed. We have different spaces available to help you. This includes your own bedroom, a sensory room and a de-escalation area.

Smoking, alcohol and drugs

The Derwent Unit and the Chesterfield Royal Hospital site are smoke-free zones. Patients and visitors must not smoke anywhere on the site.

We want to help keep you fit and healthy. If you would like to give up smoking, please talk to a member of staff as we can help.

We do not let you bring alcohol and non-prescribed drugs to the Derwent Unit.

If you leave the ward, we may search you and your bags when you come back. We do this to keep everyone safe.



If we need to search you, we will always respect you. Please ask if you have any questions about this.

Belongings

Please do not bring valuable or expensive items to the Derwent Unit. These include:

- jewellery
- expensive watches
- designer clothing
- sentimental items
- large amounts of cash (over £20).

We may need to take some of your items away to keep you safe. We will store them safely.

We can keep these in the hospital bank. We record them on a form which you will sign, or a witness can sign it for you. We will give you a copy of the form.

When you leave the Derwent Unit, we will give you everything back.

We may have to take certain things from you. This is to keep you and others safe.

These include:

- all knives, apart from cutlery at meal times.
- weapons (real or fake)
- alcohol
- illegal drugs
- medicines, including herbal products
- wire coat hangers
- heavy ornaments
- glass items such as bottles, drinking glasses or photo frames

- ceramic items
- plastic bags
- electrical cables
- electrical items such as console controllers
- USB devices or other storage devices
- telescopes and binoculars
- pornographic material
- flammable materials and liquids.

Some items can be given to you when you need them. These include razors and anything with a cable. We may need to supervise you while using them.

Controlled items

These items can only be used with staff support:

- metal cans
- cutlery
- scissors/cutting equipment
- sewing equipment
- razors (wet and electric)
- mouthwash with alcohol
- hair and beard clippers or trimmers
- spray deodorants and aerosols
- glues and solvents (for craft use only)
- glass items
- weight-lifting equipment
- cameras
- perishable foods, especially dairy produce
- matches, lighters, tobacco products and vapes/e-cigarettes. These can be stored in lockers
- high caffeine drinks (these can be provided on request, but care planning may be needed if we are worried you may be addicted)
- medical equipment such as CPAP and TENS machines, blood pressure machines, blood glucose monitors, bandages, sharps and biohazards etc
- perfumes
- standard size chargers (phone, tablet, handheld games consoles, Bluetooth headphones)
- musical instruments and equipment
- CDs, DVDs, Blu Rays.

These are not complete lists. Staff may take other items away to keep you and others safe. This will be discussed with you at the time.

Unacceptable behaviour

We follow the NHS Reduction of Violence Strategy.

When people are unwell, they sometimes behave in a different way to normal.

We want to keep everyone safe. If you ever feel unsafe, please tell a member of staff.

Please report:

- harassment
- verbal or physical abuse
- unacceptable behaviour by patients, visitors and staff.

Sometimes, to keep everyone safe, we must involve the police. We will let you know if this needs to happen.

F. Who will look after you?



Quick read

Lots of people will help to take care of you at the Derwent Unit.

Your **named nurse** and **named occupational therapist** will talk to you often and help plan your care.

Your **consultant** will decide what treatment you need.

Doctors look at your test results and can refer you to a specialist.

A **social worker** or **care co-ordinator** will help you plan for home or the next stage of your care. A care co-ordinator is a **community psychiatric nurse**. We sometimes say **CPN**.

A staff photo board will show you who is on the team.

A staff photo board will show you who is on the Derwent Unit team.

Named nurse

When you come to the Derwent Unit, you will be given a **named nurse** and **named occupational therapist**.

They will:

- have regular chats with you
- create a **care plan** with you
- co-ordinate your care while you are here
- make sure the nursing team know about your needs
- update your family or carers about your progress. This will only happen if you agree.

When your **named nurse** is not there, they will tell you who will step in. You can also speak to any other staff member.

If you want to change your **named nurse**, just ask. They won't mind.

Occupational therapists and assistants

An **occupational therapist** will assess you in the first five days of your stay. This may not be your named occupational therapist.

Sometimes we say **OT** instead of occupational therapist.

The **OT** will check how you look after yourself. They will check if you can complete certain tasks.

They will check your physical skills. They will test how well you can tell us things and understand us. They will check if you can do the things you want to do.

These assessments may be one-to-one or in group sessions.

Before you leave the Derwent Unit, **OTs** may make sure your home is safe. If needed, they will help to make it suitable for you.

Occupational therapy assistants work with OTs to help you.

Psychologist

A **psychologist** may help you and your care team to understand why you are at the Derwent Unit. They may work with you in a group or one to one. They may advise your care team on the best ways to help you.

Consultant psychiatrist

You will have a **named consultant** in charge of your care. They will diagnose your illness and plan your treatment.

The **consultant** also oversees the **ward doctors**.

Nurses

All our nurses work as part of our team. You can talk to any nurse at any time. It doesn't have to be your named nurse.

Healthcare assistants

Healthcare Assistants are sometimes called HCAs. They give you any support you need. They can help with day-to-day activities.

Ward doctors

Ward doctors oversee your day-to-day care. Nurses talk to the ward doctors about your progress.

Ward doctors review your test results. If needed, they seek advice from the consultant or a different medical specialist. They may refer you to a different clinic or specialist.

Ward doctors attend your weekly **multidisciplinary meeting (MDM)**. They will update the consultant on your progress.

Speech and language therapist (SLT)

The speech and language therapist (SLT) can help you if you have problems with eating and drinking. They can also help if you have difficulties with talking or understanding what people are saying to you.

Physiotherapist

A physiotherapist may help you if you have problems with your physical health. They can help you to exercise and to relax. They can help you manage pain.

Advanced clinical practitioner (ACP)

Advanced clinical practitioners are sometimes called ACPs. They look at your test results.

Social worker

A **social worker** may help you when you leave the Derwent Unit.

They can advise you on:

- where you can live
- care packages
- finances
- any benefits you can claim
- voluntary organisations, and more.

After you leave, they may keep in touch with you to review your care.

Care co-ordinator

A care co-ordinator is usually a community psychiatric nurse. We sometimes say CPN.

You may already have a **care co-ordinator**. If so, they will keep in touch while you are at the Derwent Unit.

If not, we may ask for one if needed. Your care co-ordinator may visit you at the Derwent Unit to find out what you need to get better. They will make sure everyone looking after you knows what is happening.

They may also help to plan for you leaving the Derwent Unit. They may attend a discharge meeting. This is to make sure everything runs smoothly when you leave. They may also visit you when you go home.

Crisis Resolution and Home Treatment Team

When you leave the Derwent Unit, you may need some help moving back into the community. If so, the Crisis Team can help you.

We will plan any leave carefully with you, your carers, family or friends, and your care team.

If you go home on leave, the Crisis Team can visit you to support you. The Crisis Team can also help you when you are discharged.

This means you can continue to get well in your own home. You may also be supported by friends, family or carers.

Who is in the Crisis Team?

The Crisis Team consists of doctors, nurses, occupational therapists, social workers, psychologists, pharmacists, and support workers.

Early Discharge Team

The Early Discharge Team is part of the Crisis Team. A member of the Early Discharge Team may attend your multi-disciplinary meetings (MDM) or ward round.

They can offer short-term support when you leave the Derwent Unit, if you need it.

Domestics

Domestics serve food. They keep the ward clean and tidy.

Catering team

You may meet members of the catering team. They will bring food from the kitchens to the Derwent Unit.

Reception team

This team welcomes visitors to the unit.





G. Pastoral care

Spiritual care

We have a chaplaincy service to support you during your stay. Our chaplains can also support your family and carers.

It does not matter what your beliefs are, our chaplains will support you. We will try to find a chaplain who shares your faith if we can.

If you need a quiet space for prayer, you may use your bedroom or the prayer room in the Derwent Unit.

Our chaplains can:

- listen without judgment
- offer bereavement support
- support with personal struggles
- provide a link with a church or other faith community
- offer prayer, spiritual and pastoral care.

If you would like to speak to a chaplain, ask a member of staff.

H. Are you autistic or have a learning disability?

Our inpatient wards are for everyone who needs them. Are you autistic or do you have a learning disability? If so, please talk to your named nurse. They will help other staff meet your needs.

These may include:

- how you like to communicate
- who you like to help you
- any sensory needs.

We call these **reasonable adjustments**. They help staff to give you the best care for you.

Your care team may need extra help to meet your needs. If so, they may ask the **Neurodevelopmental In-reach team**.

We will offer you a **Care and Treatment Review (CTR)**.

This meeting will make sure you are getting the right care and treatment. It will also

mean you can go home when you are well enough. You can choose whether you have a CTR or not.

When you leave the Derwent Unit, we may help you get support at home.

If you have a learning disability

The Intensive Support Team (IST) may help you for a short while.

If you are autistic and do not have a learning disability

The Specialist Autism Team (SAT) may help you for a short while.

We may refer you to other teams for long-term support.

I. Your family or carers

Do you get support from family or friends? If so, we can tell them where to find help and put them in touch with other carers.

Carers can feel overwhelmed and forgotten. Our carers' group may be helpful for them. It is for all carers, even if their relative is not in hospital. Please ask a member of staff about this.

If your family or friends give you a lot of support, they could get a carer's assessment. Your **named nurse** or **care co-ordinator** can help with this. Talk to them if you think your family or friends need help.

Sharing information with carers

If someone is caring for you, we need to share some information with them, if you agree.

We may share information about care plans and your medicines. We may also give them advice on managing a crisis. This may help them to deal with difficult situations until more help is available.

J. Activities

There are activities every day and in the evenings at the Derwent Unit. These include arts and crafts, games, bingo, karaoke, film nights and much more.

Please speak to a member of staff if there are activities you would like us to offer.

Gym

Each ward at the Derwent Unit has an outdoor gym with training equipment. There is also an indoor gym in the shared therapy suite.

A doctor will need to make sure you are fit and well enough to use the gym. A member of staff will need to be with you while you use the gym equipment.

Confidentiality and your information

We must record details of your medical care. We work hard to protect this personal information.

Data Protection Act 2018

This law means you are allowed to see any personal details we hold about you.

To find out more, please speak to one of the ward staff or email our Records Management Team: **dhcft.accesstohealthrecord@nhs.net**.

You can also leave a message for the Records Management team by calling **01332 389131**. The team will ask you to complete an application form.

K. Garden

Each ward has two outdoor spaces. One is the exercise area with gym. The other is a sensory garden with plants.

L. Food, drink and shopping

There are several places to buy food and drink in Chesterfield Royal Hospital. This is on the same site as the Derwent Unit. You may be able to walk to these with your visitors or a member of staff.

Cafe@TheRoyal

This café is in the main entrance of Chesterfield Royal Hospital. It sells hot and cold meals, drinks, cakes and snacks.

Opening hours:

Daily 8am to 8pm.

Stacked

This food kiosk is in the main entrance of Chesterfield Royal Hospital. It sells salad boxes, sandwiches, pizzas and wraps.

Opening hours:

Weekdays, 10.30am to 2pm.

Costa Coffee

This is in the main entrance of Chesterfield Royal Hospital at the back of Shop@theRoyal. It sells hot drinks and snacks. There is also a Costa Coffee vending machine for quicker service. You can pay with cash or a card.

Opening hours:

Daily, 8am to 4pm.

The Retreat

This is near the NGS Macmillan Centre at the back of Chesterfield Royal Hospital. It sells hot and cold food such as jacket potatoes and sandwiches. It also sells hot and cold drinks, cakes and snacks.

Opening hours:

Weekdays, 8am to 2pm.

Shopping

Shop@theRoyal is inside the main entrance of Chesterfield Royal Hospital. It offers:

- cold food and drink
- snacks and treats
- newspapers and magazines
- stationery
- Post Office services.

Opening hours:

Weekdays, 8am to 8pm

Weekends, 9am to 6pm.

Central Co-op

There is a Central Co-op supermarket on Top Road, Calow, just outside the hospital site.

Opening hours:

Daily, 7am to 10pm.



M. Getting ready to leave the Derwent Unit



Quick read

Before you leave the Derwent Unit, we will make plans with you at your **multidisciplinary meeting (MDM)**. Your family can come to this meeting if you want them to.

You may be going home or to the next stage of your care.

If you are going home, we may visit your home to check it is safe. We will work out if you need help at home and make sure you get this.

We will only send you home if it is safe. If it is not safe, we will talk to you about where you can go next. We will always listen to what you want.

Soon it will be time for you to leave the Derwent Unit. This may be for a short trial, or to go home or to another inpatient unit.

Before you leave, we talk to you about this at your **multidisciplinary meeting (MDM)**. This is your chance to tell us what is important to you. We would like your family and carers to take part but only if you are happy with this.

Your **named nurse** will work out what needs doing before you can go home. They will write down all the arrangements and who has been told.

If you are going on leave, this will be called a **leave plan**.

If you are going home, this will be called a **discharge plan**.

Both types of plan will tell you who to contact if you need someone to talk to.

We will talk about the arrangements and if you need any extra support once you are home.

Before you leave, the **OT** might visit your home to check if you need anything to help you and keep you safe.



Please fill in a family and friends survey before you leave. Please ask ward staff for details or visit **[derbyshirehealthcareft.nhs.uk/feedback](https://www.derbyshirehealthcareft.nhs.uk/feedback)**.



Are you worried about your care?



Quick read

If you are not happy with your care, please talk to a member of staff. If they cannot help, tell us at the **community meeting**. This is a meeting of staff and patients.

The **Patient Experience team** will help you if we cannot sort things out. You can phone them on **01332 623751** or **0800 027 2128**. We can call them for you if you wish.

We can get you more help if you need it. Please talk to one of the team.

If you are worried about something to do with your care...

1. Speak to any member of staff. We all work as part of a team.
2. If they cannot help, please talk to your **named nurse** or **care coordinator**.
3. If the issue is not solved, bring it up at the **community meeting**.
4. After this, if you still have an issue, please tell the ward manager.
5. If the ward manager cannot solve your issue, please contact the **Patient Experience team**.

A. Your feedback

We are always keen to improve what we do.

We want to:

- be open
- put things right
- get things right
- be accountable
- improve all the time.
- focus on you
- act fairly and proportionately

We do this by listening to you, your family and visitors. Please tell us what you think we do well and how we could improve.

You can do this by scanning the QR code or visiting derbyshirehealthcareft.nhs.uk/feedback. If you have problems with this, please speak to a member of staff.



B. Complaints

If your issue cannot be solved using the steps above, you may make a **complaint** to the Patient Experience team.

The Patient Experience team will listen to you and help you. They can tell you about other organisations who can help. They can help sort out any concerns you may have with any NHS service. Everything you tell them is confidential.

Please contact them by emailing dhcft.patientexperience@nhs.net or by calling **01332 623751** or **0800 027 2128**.

Or write to:

Patient Experience team
Derbyshire Healthcare
NHS Foundation Trust

Kingsway House (Room 160)
Kingsway Hospital
Derby DE22 3LZ

We want to know if we have got something wrong.

If you raise a concern, this will not affect your care.

C. Advocacy

If you need help speaking up for yourself, you can use our advocacy service.

Advocates do not work for Derbyshire Healthcare so are independent.

They can help you plan for meetings.

They will attend meetings if you wish.

Everything you tell them is confidential.

Advocates do not tell you what to do but will help you decide what you want.

Do you struggle to make decisions about your affairs? You can use an Independent Mental Capacity Advocacy Service (IMCAS).

Contact Cloverleaf Advocacy

01924 454875

Email referrals@cloverleaf-advocacy.co.uk

Find out more about your rights and our services here: corecarestandards.co.uk



Please fill in a family and friends survey before you leave. Please ask ward staff for details or visit

derbyshirehealthcareft.nhs.uk/feedback

Contact us

Derbyshire Healthcare NHS Foundation Trust



Derwent Unit
Chesterfield Royal Hospital Site
Calow, Chesterfield S44 5BL



01246 388760 - Derwent Reception
01246 388761 - Oak
01246 388762 - Sycamore
01246 388763 - Willow

The Derwent Unit is a 54-bedroom mental health adult acute unit based on the Chesterfield Royal Hospital site in Chesterfield.

The Derwent Unit has three wards called Oak Ward, Sycamore Ward and Willow Ward. Each ward has 18 single bedrooms for adults of working age.

If you would like this information in a different language or format, including Easy Read or BSL, contact dhcft.communications@nhs.net

Ak by ste chceli tieto informácie v inom jazyku alebo vo formáte, kontaktujte spoločnosť dhcft.communications@nhs.net

Pokud budete chtít tyto informace v jiném jazyce nebo ve formátu, kontaktujte dhcft.communications@nhs.net

Heke hûn dixwazin ev agahdariyê di zimaneke cuda an formatê bixwazin kerema xwe ji re têkilî bikin dhcft.communications@nhs.net

Si vous souhaitez recevoir ces informations en une autre langue ou un autre format, veuillez contacter dhcft.communications@nhs.net

Jeżeli chcieliby Państwo otrzymać kopię niniejszych informacji w innej wersji językowej lub w alternatywnym formacie, prosimy o kontakt z dhcft.communications@nhs.net

如果您希望以另一种语言或另一种格式接收此信息, 请联系 dhcft.communications@nhs.net

ਜੇ ਤੁਸੀਂ ਇਸ ਜਾਣਕਾਰੀ ਨੂੰ ਹੋਰ ਭਾਸ਼ਾ ਜਾਂ ਫਾਰਮੈਟ ਵਿੱਚ ਚਾਹੁੰਦੇ ਹੋ ਤਾਂ ਕਰਿਪਾ ਕਰਕੇ ਸੰਪਰਕ ਕਰੋ dhcft.communications@nhs.net

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