



NOTES FOR COMPLETION

- Where possible send a photograph or illustration to accompany your case study for inclusion in the website / newsletter
- Ensure you have permission from those Involved to write and publish story/ pictures, alternatively, anonymise the story
- Case studies should be written in the third person
- It is recognised that not all sections will be relevant to all case studies – this template is designed to offer consistency across a range of case studies
- **Note:** A good Case Study will tell a story/ describe the journey, of how you worked together to solve an identified problem to improve lives for your Service User/s.

Involvement Case Study

Contact Details

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Summary (Max 100 words)

As part of my role as Acute liaison nurse for Learning Disability I ensure that reasonable adjustments are provided for patients with a learning disability when attending Altnagelvin and also educate staff in acute care regarding appropriate reasonable adjustments. As with all Emergency departments they are extremely crowded, busy and noisy. Space is also limited therefore it can be very difficult to provide reasonable adjustments for patients with a learning disability and they often find it difficult to cope in such environments. This often leads to the patient becoming very overwhelmed and frightened. Feedback from parents, carers and families since 2019 reported that they find this environment very stressful for both patient and carer. They also stated that the patient can become very anxious and agitated and often leave the Emergency department without having an investigations, care or treatment carried out.

In response to this feedback, in 2021, I worked in partnership with the emergency department in Altnagelvin and the Adult Learning Disability Involvement team to create a Sensory, Quiet room within the department, so that patients with a learning disability could wait and also have any relevant investigations or treatment carried. This room has calming lighting, projector with soothing images around the room, fibre optics and bubble tube. It also has a portable unit with sensory equipment to help keep the patient relaxed.

What was the issue?

The Emergency department can be a very busy and overstimulating environment which patients with a learning disability find very difficult to cope with and will often leave the department without the appropriate care. Therefore this can lead to poor health outcomes for this population.

What was your plan or goal?

To create a quiet/sensory room within Emergency Department in Altnagelvin for patients with a learning disability so that they will be able to tolerate waiting in order to have their care completed and also minimise transitions throughout the department to improve their outcomes in terms of both health and experience.

Who did you engage with and how?

Patients with a learning disability and their families/carers by meeting with them face to face and feedback forms.

Staff within the Emergency department Altnagelvin- Training sessions, meeting with managers and emails

What did you do?

Worked in partnership with Emergency department manager and senior management team to identify an appropriate space and negotiate access to this space.

Worked in partnership with Adult Learning Disability Involvement team to raise the issue and need and to identify resources

Met with Learning disability O/T regarding appropriate equipment to meet the needs of ALD population.

Viewed sensory rooms within other areas for ideas.

Worked with local suppliers for quotes and expert advice.

What difficulties did you face and how did you overcome them?

- Pandemic had an impact – Emergency department under severe pressure – difficult to secure room as all areas being used to full capacity.
- Time constraints of Staff very busy, difficult to organise meeting and get buy in from staff within Emergency Department. Difficult to build relationships with staff as they had other priorities
- I continued to lead and drive the initiative despite the challenges ensuring this work was kept on the agenda of ED manager and senior management team, and would be of minimal disruption to ED.

What difference has it made? Outcomes? Impact?

The room was complete in December 2021 and since then both myself and Emergency department staff have had very positive feedback from both staff, patients and their families/ carers. This has been received via social media, Face to face, verbal feedback, Care opinion and written feedback.

Family/ carers have said:

“Usually this would be the most stressful things in our lives but with the new sensory room it was brilliant”

“Has to be one the best ideas Altnagelvin has ever done”

“made a stressful situation more manageable”

“He was very settled throughout his time in Emergence department he loved it”

“We were in and out of Emergence Department in 4 hours with all care completed”.

The outcome of having this sensory room within Altnagelvin’s Emergence Department is that it will minimise stress/anxiety of both patient with a learning disability and their families/carers so that they receive timely, safe and effective care specific to their health needs.

Future Plans

Future plans is to continue to gather feedback from Staff, Patients and their families/carers.

Measure outcomes/ impact and usage of the room.

Roll this initiative into other departments within Altnagelvin (Daycase unit, outpatient department) and other Acute settings within the WHSCT (SWAH & Omagh hospital.)

Email case study to: Julie.mcginnty@westerntrust.hscni.net