

#### **Tivoli** ward information

#### Introduction

Welcome to our ward. We aim to make your stay with us as comfortable as possible. On entrance to the ward, you will find a welcome to Tivoli information board.

During your stay, please let a member of staff know if you feel that your needs are not being met or you have any concerns about your care.

#### Ward contact number:

Tivoli Ward 0300 422 3844 or 0300 422 3571

#### **Meals**

Times may vary slightly; hot drinks are served with all meals. Water jugs can be replenished at any time (please ask) and extra hot drinks can be made on request. Food is not able to be reheated.

Breakfast - 7:30am Lunch - 12:30pm

Dinner - 5:30pm

#### **Medication rounds**

Medication rounds take place at 8:00am, 2:00pm, 6:00pm and 10.00pm.

Please let your nurse know if your pain is not controlled as you may not need to wait until these times to have medication.

#### Times of nurse shift change over

Reference No. **GHPI1711\_08\_23**Department

Urology

Review due

August 2026

Early	7:30 am to 3:15 pm
Late	11:45 am to 7:45 pm
Night	7:15 pm to 7:45 am

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BEST CARE FOR EVERYONE



#### Ward rounds

Ward rounds start at 8:00am daily; this may vary at weekends. A consultant is on call for all emergencies every day of the week and will see you most days.

On the days you are not seen by a consultant you will be seen by the registrar who will review your treatment.

### Visiting times

You can have one person at a time to visit you. There is no limit to the amount of visitors per day. During unusual circumstances such as the pandemic visiting hours/time will be different.

Visitors may be asked to wait in our day room if care and procedures are being carried out not only to you but other patients in the bays. We hope that you and your visitors will understand and respect this.

If you would like to speak to the Sister-in-Charge or the doctor, please ask a member of the nursing staff for this to be arranged.

### Planning for your discharge

- Do you have any concerns about managing at home?
- Have your medications been explained to you and do you understand the reasons for taking them?
- Have you arranged for someone to take you home?

If you have any questions, please talk to your nurse, they can refer you to the relevant team. A member from the relevant team, for example physiotherapy or pharmacy will come see you before you are discharged from the ward.

Please consider returning home the way you came into hospital. If a friend or relative dropped you off, please ask if they are able to pick you up. If this is not possible, please consider booking a taxi. Ambulance transport is not available to everyone, a specific criteria needs to be met; this can be discussed further with the nurse looking after you.



Once a doctor has said that you are medically fit to be discharged a discharge summary will be completed. Any medication needed for you to take home will be ordered and dispensed. We will only give you a 7 day supply of medication to take home, please contact your GP for a prescription before these run out.

We no longer supply paracetamol for you to take home. If you think you will need paracetamol, please consider asking family or friends to get you some if you do not have any at home.

Your GP will be sent an electronic copy of your discharge summary on the day you are discharged from the hospital.

Other things we consider when planning your discharge are:

- Will you need help at home? Sometimes after assessments you may need a period of help at home or rehabilitation in another local hospital; our therapists will assess and discuss this with you.
- Your physical ability, such as your mobility, may have decreased while you have been in hospital.
- Let your family/carer know the estimated day of discharge so that they can plan your return home.

#### **Feedback**

Feedback is important as it helps us to improve our services. We would like to hear about your stay with us please ask for a feedback form before you are discharged.

#### **Enhanced Recovery After Surgery (ERAS)**

ERAS will reduce your length of stay, improve your in-patient experience and clinical outcomes which in turn will reduce our waiting lists to enable us to operate on more patients.



We will encourage you to get out of bed and mobilise as soon as you are able after your operation. You may be given 'goals for the day', for example:

	Day 1	Day 2
Breathing	Take 10 deep breaths	Take 10 deep breaths
excersise	every hour	every hour
Mobility	Walk to the end of the	Walk to the end of the
	bay	ward
	Sit out for meals	Walk to the bathroom
		Sit out for meals
Diet	Free fluids	Soup/ jelly/ ice-cream
Stoma care	Observe emptying	Empty bag
	bag	
Fragmin	Observe injection	Inject with supervision
Clothes	Wear your own	Wear your own
	clothes	clothes

### Whos who?







Register nurse associate



Health care assistant



Trainee nurse associate



**Physiotherapist** 



Occupational therapist



**Domestic** 



# Questions you should consider asking during ward rounds:

What happened during my operation?	
When can I go home?	
What restrictions will I have after surgery?	
When can I drive?	
When can I walk the dog?	
Is there any post operative advice I need to know?	



Patient	
Information	

Have you changed any of my medication?		
Do I need a follow up appointment?		

If you don't understand any medical terminology used, please ask a member of the team to explain.

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#### Making a choice

### **Shared Decision Making**

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



### **Ask 3 Questions**

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

- 1. What are my options?
- 2. What are the pros and cons of each option for me?
- 3. How do I get support to help me make a decision that is right for me?

Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the Patient Education and Counseling, 2011;84: 379-85







AQUA https://aqua.nhs.uk/resources/shared-decision-making-case-studies/