

**15 Steps Challenge, Paediatric  
Department at Conquest Hospital**  
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# 15 Steps Challenge

## What is the 15 Steps Challenge?

The 15 Steps Challenge toolkits were originally developed in 2012 by the NHS Institute of Innovation and Improvement, in co-production with staff and service users to support patient and carer involvement in improving our health services.

The 15 Steps Challenge uses a variation on mystery shopping observational approaches to understand what service users and carers experience when they first arrive in a healthcare setting.

A small '15 Steps Challenge team' visit wards and other service user areas and take note of their first impressions.



# 15 Steps Challenge

## What we did:

We used a team of Healthwatch East Sussex staff, adult (over 21) and young (under 21) volunteers to undertake the 15 Steps Challenge in all three areas of the paediatric department at the Conquest: outpatients, the Short Stay Paediatric Assessment Unit (SSPAU) and inpatients (Kipling Ward).

Our team looked at the four key areas set out in the NHS 15 Steps Challenge Guide: **Welcoming; Safe; Caring and involving;** and **Well organised and calm.**

Our team then used a list of prompts, also taken from the NHS guidance, to structure their observations on what they felt worked well and what could be improved.



# 15 Steps Challenge

## **Why have we undertaken this activity:**

Healthwatch East Sussex (HWES) and ESHT decided to undertake this activity to see what improvements could be made to the paediatric department to improve patient experience.

Both parties were interested in gathering the views of young people (particularly those between 13 and 18) on the department, as the trust have had previous feedback, from patients and professionals, that the department is more designed to meet the needs of younger children.



# What we observed – Outpatients

## 1. Welcoming

### Our volunteers said:

#### What worked well:

- The outpatients reception area was clearly visible and well signed from the entry.
- The waiting area offered patients and their parents/carers seats in small clusters which allowed for some amount of space and privacy.
- There was an information board with pictures, names and job roles of the staff working that day.
- There was a choice of toys and activities for young children.
- There were stickers and art on the walls and floors (suitable for younger children).



# What we observed – Outpatients

## **What did not work well:**

- There were no activities for older children (over 10) and teenagers.
- The art/murals/stickers lacked a theme and felt haphazard; they were also not appealing to older children and teenagers.
- There was no 'Welcome' sign or sign with the name of the department visible.
- There was very little information for or reference to older children or teens visible.

**Young Volunteer (13) said:** I would feel out of place/uncomfortable as a young person. All the toys for younger children make me feel maybe the staff are more qualified for younger children.



# What we observed – Outpatients

## 2. Safe

### What worked well:

- The area appeared clean and tidy.
- There was information about infection control.
- There was a board with information filled in for the day, including staff levels and a "we heard/we did" section.
- Staff were clearly identifiable with scrubs and lanyards.
- Secure entry/exit system.

### What did not work well:

- No hand gel available in the waiting area.
- Signs on treatment rooms were very small and difficult to read.
- Cleaning board was not filled in.



# What we observed – Outpatients

## 3. Caring and involving

### What worked well:

- We observed good interactions between a nurse and a child who was reluctant to come into the treatment room: they offered toys, got down to the child's level and used a calming tone.
- There was visible signage regarding: violence to staff; patient complaints; safeguarding; photo permissions; cleaning info; PPE etc.
- Information board with "you said/we did" section showing how patients' views are listened to.
- There were chairs in varying sizes, for children and adults.



# What we observed – Outpatients

## **What did not work well:**

- There were no chairs with armrests (accessible chairs).
- There were no posters or signs with patient feedback or case studies.

**Young Volunteer (18) said:** There is a small poster about how to make a complaint, but not able to read at a distance.



# What we observed – Outpatients

## 4. Well organised and calm

### What worked well:

- Waiting area appeared calm and quiet. Doors to treatment rooms and other areas were kept closed.

### What did not work well:

- There were no visible signs for the toilets.

**Young Volunteer (13) said:** The waiting area feels a bit cluttered.

**Young Volunteer (18) said:** Appears calm and patients are moving around freely.

# What we observed – Outpatients

## **HWES Recommendations:**

1. The waiting area should be redecorated with a more cohesive theme and colour palette which could work for both younger and older children (for example, an under the sea theme could include cartoon images suited for young children and more abstract or realistic images for older children and teens).
2. Activities and information for older children should be added to the waiting area, such as books for young adults, posters on issues young patients may want to know about and a small breakfast bar with tablets to access games.
3. Hand gel should be made available for use inside the waiting area.
4. Patient feedback should be included in displays to show that what patients say matters to the department.
5. All rooms, such as treatment rooms and patient toilets should be clearly and appropriately signed.



# What we observed – SSPAU

## 1. Welcoming

### **What worked well:**

- Brightly decorated children's playroom next to entry, space for parents/carers to sit while young children play.
- Staff were friendly and helpful.

### **What did not work well:**

- The area felt very sparse and clinical, not welcoming at all.
- The reception area faces away from the entrance which felt confusing.
- No activities or areas dedicated to older children or teens; everything was aimed at under 10s.
- Display board was not filled in.
- No decorations, whole ward a 'sickly' yellow colour.



# What we observed – SSPAU

**Young Volunteer (13) said:** I feel scared.

**Young Volunteer (18) said:** It's not aimed at older children.

## 2. Safe

### What worked well:

- Cleaning information was shown on a board.
- All staff were wearing scrubs and lanyards and easy to identify.
- All equipment was stored appropriately, walkways were clear and tidy.
- Hand gel available.
- Waste bins were clearly marked.



# What we observed – SSPAU

## **What did not work well:**

- There was no information about staff and their roles.
- The main display board was not filled in.
- The sign for the bathroom was very small and hard to see at a distance.

## **3. Caring and involving**

### **What worked well:**

- Privacy curtains around each bed and a chair for parents/carers to sit.
- Staff were observed being attentive and friendly.
- Patients spread throughout the ward for privacy and infection control.



# What we observed – SSPAU

## What did not work well:

- There was very little information for patients or visitors available, such as opening and closing times, visiting times etc.
- There was no information about diverse or additional needs and how the staff could cater for these.

## 4. Well organised and calm

### What worked well:

- Although busy, staff and patients seemed calm and content.
- Patients were observed wearing their own clothes and playing with their own toys.
- Staff were observed being patient, kind and supportive to child and parent/carer.
- The reception area was well-organised with clear information on patient board.



# What we observed – SSPAU

## HWES Recommendations:

1. Repaint and decorate the reception area and bays to be more welcoming and less clinical. The space above patient beds could have wall stickers or art. All age ranges should be considered when decorating, so some bays or areas would be suitable for both younger and older children.
2. Staff should ensure the information board is filled in to put patients more at ease.
3. Make activities and entertainment available for older children and teens.
4. Toilets should be clearly signed.

# What we observed – Inpatients

## 1. Welcoming

### **What worked well:**

- Ward was decorated with a Disney theme appropriate for young children.
- Staff had decorated the ward for Halloween with seasonal decorations.
- All staff had uniforms and lanyards and were clearly identifiable.
- There were games consoles available for older children and teens.
- Observed sensory activities available.

### **What did not work well:**

- Decorations not suited to older children or teens.
- There was no sign with visiting times, meal times, round times etc.



# What we observed – Inpatients

**Young Volunteer (18) said:** Playroom has lots for younger children, but limited for older, an Xbox and Switch are the only signs that teens have been considered at all.

## 2. Safe

### What worked well:

- Hand gel was available at each door.
- Isolation rooms for infection control.
- Staff easily identifiable with scrubs and lanyards.
- Appeared clean, tidy and uncluttered.



# What we observed – Inpatients

## 3. Caring and involving

### **What worked well:**

- The ward appeared calm and clean.
- There was a room available for parents with kitchen equipment and storage space.
- Private rooms were available as well as bays.

### **What did not work well:**

- Reception is located quite far from the entrance, could be somewhat confusing.
- The décor is outdated and unsuitable for older children and teens.



# What we observed – Inpatients

## 4. Well organised and calm

### What worked well:

- Staff were observed being caring and supportive to child.
- The ward generally appeared calm and quiet.

### HWES Recommendations:

1. Re-decorate ward in a cohesive theme and palette which is appropriate and adaptable for all age ranges.
2. More activities and entertainment, such as books for young adults, available for older children and teens.



# Conclusion

Overall, our volunteers agreed that all the areas they observed were **safe**, that staff were actively **caring and involving**, and that the areas they saw were **well organised and calm**.

Our staff and volunteers were particularly impressed with the staff observed on the ward, who were clearly working very hard to ensure that patients had the best experience possible.

While they felt that there had been a real effort to ensure that **Outpatients** and **Inpatients (Kipling)** were **welcoming** to patients, all three areas (particularly **SSPAU**) could be made more welcoming with some basic improvements to the décor and signage.

We would like to thank all the staff at East Sussex Healthcare NHS Trust who supported this piece of work and the patients and their parents/carers who engaged with us.