



Enter and View Report

Bradley Apartments & Complex Care

Wednesday 28th November 2018

healthwatch

North East Lincolnshire

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Report Details

Address	Bradley Apartments and Complex Care, Bradley Road, Grimsby, North East Lincolnshire, DN37 0AA
Service Provider	Elysium Healthcare
Date of Visit	28 th November 2018
Type of Visit	Announced / Unannounced (See methodology on page 5)
Representatives	Karen Meadows, Freda Smith & Tracy Slattery

Acknowledgements

Healthwatch North East Lincolnshire would like to thank the service provider, residents, visitors and staff for their contribution to the Enter & View Programme.

Disclaimer

Please note that this report related to findings observed on the date listed above. Our report relates to this specific visit to this service and is not representative of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

This report is written by the Research and Reporting Officer for Healthwatch North East Lincolnshire using the information gathered by the Enter and View Authorised Representatives named above who carried out the visit on behalf of Healthwatch North East Lincolnshire.

What is Enter and View?

Part of the local Healthwatch Programme is to carry out Enter and View visits.

Enter and View visits are conducted by a small team of staff and trained volunteers, who are prepared as “Authorised Representatives” to conduct visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement.

Enter and View is an opportunity for Healthwatch North East Lincolnshire to:

- Enter publicly funded health and social care premises to see and hear consumer experiences about the service
- Observe how the service is delivered, often by using a themed approach
- Collect the views of service users (patients and residents) at the point of service delivery
- Collect the views of carers and relatives
- Observe the nature and quality of services
- Collect evidence-based feedback
- Report to providers, the Care Quality Commission (CQC), Local Authorities, Commissioners, Healthwatch England and other relevant partners

Enter and View visits are carried out as “announced visits,” where arrangements are made between the Healthwatch team and the service provider, or if certain circumstances dictate as “unannounced visits.”

Enter and View visits can happen if people tell us there is a problem with a service but equally they can occur when services have a good reputation - so we can learn about and share examples of what they do well from the perspective of people who experience the services first-hand.

Purpose of the Visit

- To engage with service users of the named service and understand how dignity is being respected in the care home environment
- To observe the care provided at this home, looking at a number of key themes; Food & Drink, Safeguarding, Staffing, Personal Care and Medication
- To observe residents and relatives engaging with the staff and their surroundings
- Capture the experience of residents and relatives and any ideas they may have for change

Methodology

This visit was an announced/unannounced Enter & View visit.

An announced/unannounced is when the care home is aware that we will be conducting an Enter & View in the near future but the establishment are not aware of the exact date the Enter & View Team will be visiting. A letter will be sent to inform the establishment of the pending visit, along with a Manager's questionnaire.

Summary of Findings

The Manager was open to our visit although our Questionnaire and notification of pending visit had not been received at Bradley Apartments and Complex Care prior to our visit.

- The service is currently going through a phase of de-institutionalisation, with positive changes being made for all residents.
- Staff were knowledgeable about the individual needs of residents.
- Staff interacted positively with residents in a way which was supportive and fostered good relationships.
- Use of physical interventions is discouraged and new approaches were being adopted to lessen the need for them.

- New and alternative therapies were being trialled or were being pitched to management to aid resident and staff wellbeing.

Our Previous Visit

Healthwatch North East Lincolnshire has not previously visited Bradley Apartments or Bradley Complex Care.

Details of Visit

Bradley Apartments and Complex Care are two separate services. However the current service provider, Elysium, is in the process of downgrading and refurbishing the Complex Care unit from a Low-secure Hospital. This means that both services use the same staff and communal facilities, as such we will treat both services as a single entity in this report.

The Enter and View Team were greeted warmly and were able to view all communal areas as well as a recently vacated apartment in the complex care building. The team at Bradley were very helpful in answering questions, were supportive towards the Enter & View Team in general and supported residents to feel confident to speak to the Enter & View Team about their experiences. Members of the Management Team and staff at Bradley asked relevant questions to the Enter & View team, wanted to know how Healthwatch North East Lincolnshire worked, the role we play and they were actively promoting the rights and choices of residents to us.

At the time of our visit the manager was away on maternity leave so the Enter & View team spent time with Dawn, who is a Service Lead. We also spoke with a number of other staff about their areas of work as-well as their thoughts and opinions of the service.

Environment

The Complex Care service can accommodate 20 residents over two floors in a range of 1, 2 & 3 bed apartments. Those residents with more demanding care needs are located on the ground floor.

The Apartments can accommodate up to 12 residents and have a separate entry point.

The service was recently taken over by Elysium Healthcare, who are currently taking the service through a phase of de-institutionalisation. This includes removing airlocks and locks on link corridors as-well as taking down physical barriers. On top of this the service is promoting 'Good News' stories about residents who achieve levels of independence. The service also provides assistance to residents in accessing local amenities and activities.

At the time of the Enter & View visit, the service was roughly halfway through its transition to a locked rehabilitation service. The team were able to see the positive changes which were being made by viewing two visitor's rooms, one of which had not yet been renovated and another which had.

The changes that were seen are substantial, visitors' rooms were much more welcoming and comfortable, providing an indication of the future direction of the service. The service certainly seems focused on improving the overall implementation of the aims of the service to being positive and rehabilitative rather than clinical and restrictive.

We found communal areas to be very neat and tidy, though some places did still feel clinical rather than residential. Healthwatch North East Lincolnshire accept that this is to be expected as the service transitions from a low-secure facility, though we are optimistic about the changes we were able to see at the time of the Enter & View.

Individual flats were decorated and arranged to best suit the needs and wants of the resident. For example one resident liked to re-arrange their room so it was more minimalist, and suited their tastes. When entering the service residents are able to choose the colour scheme for their room. We also saw that each

apartment had use of its own garden.

Food and Drink

Service users were encouraged to plan, shop for and - where they had the ability to - prepare their own meals too. Apartments were fitted with working kitchens which were utilised by residents or staff depending on the care needs of the resident.

We saw that residents had access to snacks and drinks throughout the day.

Safeguarding, Concerns and Complaints Procedure

Safeguarding and complaints procedures are in place. Staff that we spoke to advised they were aware of the procedures and had attended the necessary training. We were made aware that staff attend both in-house and external training which build upon existing skills.

Residents are encouraged to provide constructive criticism and feedback to the provider. They were able to do so face to face or in writing. The service used a communications board to detail the issues which had been raised by residents and the actions that were taken to address those issues.

Staff

The Enter & View Team were able to speak to several members of staff. Many of these had been at the service as a low-secure hospital under the previous provider.

Staff all appeared happy and content working with the new provider and gave us positive feedback:

“I feel well supported...management is more personal and approachable” and “There is a greater focus on staff wellbeing.”

We were told that inductions were now held in house and that there were 18 new members of staff who were to go through the training. The process discouraged the use of Agency Staff which improves continuity of care and boosts staff morale.

We saw that residents who displayed more challenging behaviour had assigned key workers and there were 'core teams' of staff to assist where necessary.

The team saw staff interacting with residents in a positive and professional manner. There clearly existed a good relationship between staff and residents, staff were empathetic and displayed a good knowledge of individual needs of residents.

Promotion of Privacy, Dignity and Respect

The Enter & View team noted that the entrance to the service displayed a banner reading "Proud to see the person, not just the diagnosis." This ethos clearly shone through with the care we saw administered and the service given to residents who needed it.

After speaking with one resident we saw that emphasis was placed on rehabilitation and working with residents to improve their health and increase their independence.

Recreational Activities

Residents were all encouraged to maintain active lifestyles and this was well catered for at the service. Residents have access to an onsite sports hall which has sporting and fitness equipment for residents to use. The service also provided a computer room for residents to learn new skills and develop their ability to use technology productively.

The service is currently awaiting internet access to be installed and activated before assessing whether independent internet access is suitable for individual residents.

Management confirmed that unless a member of staff is suddenly or unexpectedly off work all planned activities go ahead. Any pre-planned leave is now properly covered to prevent it impacting on resident's activities. This had been a previous concern of the CQC.

Residents advised us of outings they had recently been on including to a wildlife park and to garden centres. They also told us that the service helped them be

independent by using local services and assisting in doing their shopping at the supermarket and catching the bus.

The Enter & View team spoke with the clinical psychologist who is keen to include more musical and art therapy for residents as well as bringing in therapy dogs.

It was encouraging to see that multiple avenues were being explored to increase activities and resident well-being.

Care plans assist staff in identifying activities which were appropriate for each individual resident.

Medication and Treatment

We found that medication is securely locked away and staff encourage residents to take their medication as required. Care records are also locked away securely.

Residents had monthly health checks with a visiting GP, the service was also attended monthly by external nursing staff to ensure any health issues are dealt with.

Residents

The Enter & View team were able to speak at length with one resident who told us they are happy at the service, spoke fondly of the trips and activities on offer and told us that staff are great at helping them meet up with relatives.

The same resident told us they enjoyed being able to cook for themselves and the other resident they shared an apartment with as well as their keyworker. We were told by the resident that they don't like being restrained by staff. Upon asking further questions they advised us that they knew why the restraining was necessary (to prevent the resident from self-harming) and had a very open chat with us and their keyworker as to why it happened. The resident then said that since the changeover they were being helped by staff to manage their anxiety and control themselves much more effectively. As such they were able to talk about their issues in a calm and controlled manner which had directly lowered the necessity of any physical interventions in recent months.

Staff also advised us that two residents had made such marked improvements within the service recently that they had been discharged to live outside the service with more independence.

Relatives and Friends

Unfortunately during our Enter & View the team were unable to speak to any friends or relatives though we left questionnaires with staff to be handed to family and friends.

Recommendations

- We would like to see more pictorial signage throughout the service. Particularly we would like to see an increased use in Makaton to aid and assist residents.
- Continue with the refurbishment of the service to the same high standard we have witnessed on our visit.
- To consult with and include residents in making decisions about the service and their care.

Service Provider Response

We have not yet received a formal response from the service provider, however they have advised that they are pleased with the report and will provide us with a complete response in the New Year.

Distribution

This report has been distributed to the following:

Healthwatch England

Care Quality Commission

Caroline Barley (Contracts manager for HWNEL)

Jan Haxby (Director of Quality and Nursing at NELCCG)

Marie Oxley (CQC Inspector - Adult Social Care)

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