



Healthwatch Central West London

Dignity Champions Visit: 3 Beatrice Place

February 2019

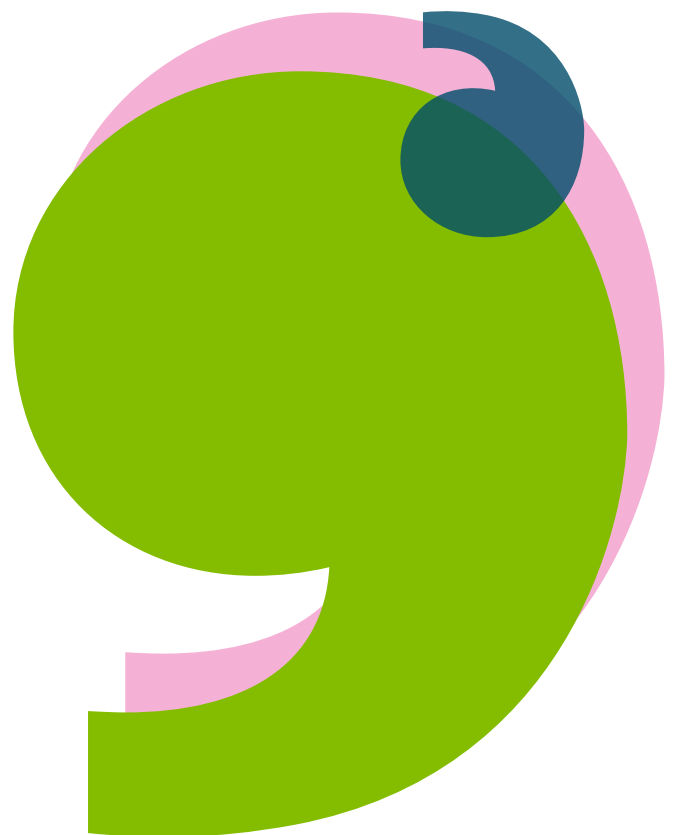


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1 Introduction

1.1 Details of visit

Details of visit:	
Service Address	3 Beatrice Place Marloes Road London W8 5LP
Service Provider	Central and North West London NHS Foundation Trust
Date and Time	2 nd November, 2018, 11AM-3PM 8 th November, 2018, 4.30PM - 6.30PM 17 th February 2019, 2PM till 4PM
Authorised Representatives	Aliki Myrianidi, Zivile Adulcikaite, Christine Vigards, Abdul Towolawi, Phillipa Shaw, Alexander Lawrence, Minna Korjonen, Jacqueline Ferguson
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1.2 Acknowledgements

Healthwatch Central West London would like to thank 3 Beatrice Place, patients, relatives and staff members for their contribution toward the Enter and View program.

1.3 Disclaimer

Please note that this report relates to findings observed on the specific dates and times indicated above. The Enter and View report is not a representative portrayal of the experiences of all service users and staff. It is only an account of what was observed and contributed through interviews at the restricted time of Healthwatch Central West London representatives' visits.



2 Executive Summary

Healthwatch Central West London (Healthwatch CWL) champions for better standards of care in health and social care services. Its team of Dignity Champions are volunteers, recruited from the local community, who work to improve standards of dignity in health and social care services. This report presents the findings of the Dignity Champions' Enter and View visit of 3 Beatrice Place that provides continuing care services to adults with challenging behavior. The Service is in the Royal borough of Kensington and Chelsea and is run by Central and North West London NHS Foundation Trust.

The most recent CQC inspection was on 20th May 2014 which was rated in most of aspects "met this standard". Care and welfare of people who use the service didn't met the standard and actions were needed. Services provider had till 25th July to comply and take actions. According to the provider action statement, the improvements have made.

The Enter and View visit to 3 Beatrice Place was conducted as part of Healthwatch CWL's ongoing work on access to and provision of health and social care services in West London. Healthwatch CWL carried out the Enter and View visit for first time to get a better understanding of the service provision.



3 What is Enter and View?

Healthwatch Central West London (Healthwatch CWL) works to ensure local people's voices count when it comes to shaping and improving local health and care services across the London Borough of Hammersmith and Fulham, the Royal Borough of Kensington and Chelsea and the City of Westminster.

Under Section 186 of the Health and Social Care Act 2012 Healthwatch has a statutory power to 'Enter and View' places that provide publicly funded Health and Social Care services¹. This may be unannounced or through prior arrangement to view and assess a service.

Enter and View visits can be a way for people to tell Healthwatch CWL if there is a problem with a service or equally if the services have a good reputation. The Dignity Champions learn about and hear examples of what service does from the perspective of people who experience the service first hand.

Enter and View visits can be carried out if one or more of the below reasons are identified by Healthwatch CWL:

1. As a contribution to a Healthwatch CWL programme work;
2. As a consequence of service user or public feedback;
3. As a strategy to explore good practice;
4. As a method for checking the responses of a service following an earlier Enter and View visit;
5. As a response to a request or recommendation by a professional from the health or social care service, who has involvement in the commissioning, contracting or regulation of that service.

The Healthwatch CWL authorised representatives who carry out Enter and View visits are a group of volunteers referred to as 'Dignity Champions'. They receive training on the Care Act 2014 as well as the duties and implications in the provision of care around respect, dignity, safeguarding vulnerable adults, and health and safety. All the Dignity Champions have a current enhanced Disclosure and Barring Service (DBS) certificate.

When carrying out Enter and View visits, the Dignity Champions follow the 10 standards set out in the Department of Health's 'Dignity Challenge':

1. Demand for services to have a zero tolerance of all forms of abuse
2. Support people with the same respect you would want for yourself or a member of your family
3. Treat each person as an individual by offering a personalised service

¹ Apart from Children's Social Services

4. Enable people to maintain the maximum possible level of independence, choice and control
5. Listen and support people to express their needs and wants
6. Respect people's right to privacy
7. Ensure people feel able to complain without fear of retribution
8. Engage with family members and carers as care partners
9. Assist people to maintain confidence and positive self-esteem
10. Act to alleviate people's loneliness and isolation

Moreover, when visiting care homes, the Healthwatch Representatives check whether the assessed place delivers the service in accordance to the Independent Age 8 Care Home Quality Indicators²:

1. Have strong, visible management
2. Have staff with time and skills to do their jobs
3. Have good knowledge of each individual resident and how their needs may be changing
4. Offer a varied programme of activities
5. Offer quality, choice and flexibility around food and mealtimes
6. Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists
7. Accommodate residents' personal, cultural and lifestyle needs
8. Be an open environment where feedback is actively sought and used

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch safeguarding policies.

3.1 Purpose of Visit

All Enter and View visits must have a clear purpose identified by Healthwatch CWL to ensure effective evidence gathering and reporting. The purpose of this visit was to assess the quality of the residents' experience against the Department of Health's Dignity Standards.

3.2 Strategic drivers

The last CQC inspection of Beatrice Place took place 20th May 2014. Overall, Beatrice Place met the standards except one service. In detail, Care and treatment, safeguarding and assessing and monitoring the quality of service provision were all "met the standards". However, care and welfare of people who use the services didn't meet the standards and required improvements. Healthwatch Central West London (HCWL) delivers an enhanced Enter and View programme every year. Several care homes and Centres have been selected to be visited as part of this programme

² <https://www.independentage.org/policy-and-research/our-8-care-home-quality-indicators>



in accordance with information received from the local public, service users, carers and monitoring authorities.

3.3 Methodology

The team of Healthwatch CWL Dignity Champions collected data using the following methods:

- The announced visits were set up to be carried out on Friday 2nd November 2018 and Thursday 8th November 2018.
- An introductory letter was sent to the Matron.
- A meeting was arranged with the Matron.
- During the meeting a member of Healthwatch staff and the Matron discussed the Enter and View visits.
- An observation check-list was devised to help the Dignity Champions to record their observations of the environment of the Dementia Resource Centre.
- Three different questionnaires were developed for (1) people using the service, (2) visitors to the service and (3) the clinical team.
- The Healthwatch CWL representatives talked to people using the service and the Ward staff who were willing to share their opinion. It was made clear that they could end the interview at any time.
- The majority of people using the service could not let the Dignity Champions know what they thought about Beatrice Place because they were unable to clearly verbally communicate.
- In total Healthwatch CWL representatives spoke to:
 - 1 patient
 - 4 relatives
 - 5 members of staff

3.4 Summary of findings

During the Enter and View visit the Dignity Champions observed the clinical team providing a very high standard of care in relation to dignity and respect. The team demonstrated evidence of delivering person-centered care and promoting patient's independence and choice. However, there were few areas of improvement. The Dignity Champions noted some considerations for Beatrice place regarding environment, communication with residents and support for Healthcare Assistants and family members.



4 Results of visit

4.1 Background

3 Beatrice Place (Beatrice Place) provides continuing care for older people who have cognitive impairment or severe and enduring mental health needs. It is a mixed ward with 8 bedrooms on the ground floor designated for male patients and 16 bedrooms on the first floor designated for female patients. At the time of the Enter and View visits, the ward had 20 people using the service - 14 women and 6 men.

The ward's multidisciplinary team consist of psychiatrists, mental health nurses, health care assistants, activity coordinators, occupational therapists, and art therapists. During the day 7 healthcare assistants look after patients- 3 members of staff work on the ground floor and 4 on the first floor. An additional member of staff is allocated to patients who require close supervision.

The Trust has recently appointed a new Matron who has the overall responsibility of running the ward.

4.2 Environment

During the Enter and View visit at Beatrice Place Healthwatch CWL Dignity Champions recorded observations regarding the environment of the ward. Some points were raised and discussed with the Matron:

- To access the ward premises the Healthwatch team had to cross a parking area that was fit for purpose and in good order.
- At the time of the first visit the Dignity Champions were shown around Beatrice place and they commented that in general the atmosphere in the home was warm and welcoming.
- Some flowers and pictures brought coziness to the communal areas. The Dignity Champions liked that the art made by residents, visitors and staff members were displayed on the wall.
- To keep the ward 'dementia friendly' the ward was not overcrowded with excessive decorations, yet the staff had managed to prevent the ward from appearing institutionalised.
- The Healthwatch team thought that a fish tank situated in a hall close to the entrance gave the ward homelike feel.
- Beatrice Place did not have much natural light. The blinds in the orangery blocked the daylight. Nevertheless, overall the Healthwatch team thought the lighting was adequate.



- To help people orientate themselves, the doors in the home were painted in contrasting colour to the walls. The doors to the bathrooms and toilets were left slightly open so people could see what was behind the door.
- The Healthwatch Representatives noted that the corridors were wide enough to accommodate mobility aids and had handrails.
- The ward flooring was non-slippery, non-shiny and did not have any dark carpeting.
- On the ground floor the home had a big dining area and lounge room that both male and female residents can use during the day time. A smaller dining area was available on the first floor for female residents only. All social areas were clutter free.
- Residents have access to a backyard garden that was secure, neat, and well kept. It was accessible and had appropriate seating areas.
- Although the home only provided residents' rooms with basic furnishing, people using the service and their families are allowed and encouraged to bring their own personal belongings and decorate the rooms to their liking.

4.3 Health and Safety

Throughout both Enter and View visits, the Healthwatch Representatives looked at whether the service followed good health and safety practices:

- The entry to and from the nursing home premises were restricted. Every visitor must sign in before entering and sign out before leaving the nursing home. At the time of both visits, the Dignity Champions were asked to sign in and out.
- At the time of the second visit, a member of staff noticed one of the Dignity Champions waiting in the hall next to the entrance and asked whether they needed any help. The Dignity Champion was pleased to see that the Beatrice Place team members were alert and question the identity of visitors.
- Key pad codes were installed on the doors to protect the patients from wondering into potentially dangerous places such as medicine storage room, cleaning cupboard, sluice room, etc. The Dignity Champions checked, and all doors were kept locked.
- A security code was needed to operate the lift.
- Call bells were situated in all the residents' rooms next to the beds and alarm call bells were accessible across the Beatrice Place.
- The Dignity Champions did not have any concerns regarding cleanliness, hygiene and infection control at Beatrice Place. The home was neat and tidy and the hand sanitiser dispensers were located at various points within Beatrice Place.
- All bathrooms and toilets were clean, odourless and were stocked with toiletries. Additionally, all bathrooms and toilets were equipped with well-maintained hoists and grab rails to assist people with movement difficulties.



- The Healthwatch Representatives noted that the home was not cluttered and no sharp objects were laying around. However, at the time of the first visit, the cleaning trolley was left unattended in a corridor on the first floor and the Dignity Champions thought it was a potential hazard.
- Through most of the nursing home there were no signs of unwanted odour, however, the Healthwatch Representatives noticed a very strong and unpleasant smell next to the lifts on the first floor. On the second visit, there were no signs of unwanted odour in any floor.
- All other safety measures were in place. All fire exits were clearly marked, and fire extinguishers and blankets were on site and visible.

4.4 Signage and Information

The Healthwatch Representatives assessed whether the signage and information through the ward made the environment supportive and enabling for the patients and visitors:

- The nursing home was clearly signposted from the road and easy to find.
- The Dignity Champions thought that indoor signage was sufficient. There was clear signposting to emergency exits and key areas such as dining room, lounges, toilets and bathrooms. The signs in the nursing home were ‘dementia friendly’ and had pictorial representation.
- The resident rooms were labelled with a sign with resident’s name and a picture the patient could identify with. Moreover, the residents could choose to display “I prefer to keep doors closed” or “I prefer to keep doors open” sign on their door.
- The Dignity Champions thought that two information boards, one with pictures, names and roles of the members of staff, and another board with names of people working on different shifts on the day, was handy.
- All members of the staff team wore name badges that were bright yellow which were easily identifiable and showed their names in a large print.
- The suggestion box was placed in the hall next to the entrance.
- ‘You said - We did’ board was placed in the corridor and was up to date.
- The new residents and their family members are given an information booklet that the Dignity Champions found informative. The booklet is available in different languages, large print, braille, and audio format. The Matron admitted that the booklet is not very dementia friendly and the Trust is currently looking into producing a more accessible version. Some other relevant information leaflets were available in the nursing home.



4.5 Care

As part of the Enter and View visits, the Dignity Champions paid attention to signs which show whether people were receiving person centered care and the service was promoting patients' dignity and choice:

- The Healthwatch team observed the team at Beatrice Place treating people in a caring, kind and respectful way. The residents seemed to be comfortable with the staff.
- The Dignity Champions thought that all members of staff on the shift had a good understanding of the patients they were supporting. When staff members spoke about the patients they had a genuine caring smile on their face. They demonstrated that they knew the people they were caring for, including people's personal histories and their preferences in relation to their care.
- The team made an effort to learn useful phrases in the resident languages.
- The care team supported individuals to have freedom of choice over their lives, such as when to go to sleep or have a shower.
- People were supported to access healthcare services. Although a GP visits the nursing home twice a week, residents who wish to continue receiving support from their GP were allowed and supported to do so.
- The only concern that the Dignity Champions noted was the inconsistency in how the staff members communicated with one patient about her deceased aunt. When the patient asked one staff member what time the aunt was coming, they responded with the truth that the aunt was not coming as she was no longer with us. However, another staff member tended to avoid upsetting the patient and told the patient that the aunt may come later.

4.6 Activities and Leisure Time

The Dignity Champions took note of what activities were available to the patients and what else was available during their leisure time:

- Beatrice Place runs a range of activities for patients. Three activity coordinators were responsible for organising activities in the nursing home. At the time of the visit a group of residents went out for a cup of tea and cakes in a nearby café.
- At the time of the first Dignity Champion visit the majority of the patients on the ground floor were seated in chairs in a semi-circle. They were either watching TV or sleeping in their chairs. Energetic classical music was played in the dining room upstairs. The Healthwatch Representative thought that the music was played rather loudly. A member of staff explained that they tried to keep the residents alert before the lunch.
- An updated timetable was placed on the wall in the hall next to the entrance and had a pictorial representation of the activities.



- Each resident had their own, individualised activities calendar hung in their rooms.
- Twice a week staff at Beatrice place runs sensory and physical programmes called Namaste and Sonas. An outing is organised once a week.
- There were one to one music activities run by a trained music therapist. The Dignity Champions observed one patient joyfully engaging in the activity and another one waiting impatiently for their turn.
- The nursing home has an arts and crafts corner where people can find clipboards with colouring designs and crayons.
- People are supported to maintain their spiritual and religious practices as there is a prayer room in the nursing home.
- People can carry on everyday activities that they enjoy. A member of staff mentioned that one of the residents enjoys doing her laundry and the team supports her in continuing doing that.

4.7 Food

During the first visit lunch was served to the residents and the Healthwatch team had a chance to see nutritional care provided at the ward:

- There were protected meal times in the nursing home. Exceptions were made for some relatives if their presence encouraged residents to eat.
- Breakfast is served at 8.30am lunch at 12.30pm, and supper at 5pm. Snacks are served at 11am and 3pm.
- People can help themselves with fruit and drinks at any time. There were signs reminding people to hydrate themselves.
- Catering in the nursing home is outsourced and provided by OCS Group UK.
- The menu was displayed on the wall and tables had pictorial representation of food served. The Healthwatch Representatives noted that the menu on the tables were very small and difficult to read.
- The menu had a good selection of healthy options including vegetarian and “soft” food.
- People in the nursing home were helped with the food options. The Dignity Champions observed a healthcare assistant helping a resident with their meal choice by showing different plates with food.
- The nursing home team said that most of the people using the service eat pureed food. The food items are pureed separately so the individuals could taste different flavours. The Dignity Champions thought that the pureed food looked appetising as they had vibrant colours.
- Staff were wearing aprons and gloves while handling food. Residents were helped as and when needed.
- People were given enough time to complete their meals. The Dignity Champion observed a member of staff, encouraging one patient to eat by holding their hand. Another healthcare assistant asked the person if they



needed some help while eating their dessert. The resident nodded their head and the healthcare assistant gently helped them to eat.

- People were asked whether they wanted to wear aprons or bibs during the meal time. The member of staff told the Dignity Champions that the residents were encouraged to wear either an apron or bib. One individual seemed to be unhappy about having to wear a bib.

4.8 What did Relatives Say

At the time of the second visit two Healthwatch Representatives attended a quarterly meeting for residents' family members. Two family members attended the meeting. The Dignity Champions spoke with the relatives about what they thought worked well and not so well at Beatrice Place.

- The relatives highly praised the team working at Beatrice Place. One relative mentioned that he was very anxious to leave his mother in someone else's care. He said he used to observe how staff members treated other patients:
 - "When I saw that the staff treated everyone with kindness, I relaxed, my mother was in good hands."
- The carers told the Dignity Champions that they received enough information regarding care their family members were receiving.
- The carers said they felt involved in decisions about their family members.
- Both carers had no difficulties in approaching a staff member if they needed to. They mentioned that staff listened to them and were attentive and responsive:
 - "There is always someone here to listen to you. I can ask anyone anything here".
 - "Matron is fantastic and always willing to listen able to make things done."
- The relatives mentioned that the transition to full-time care was very difficult. Both relatives said that initially they felt worried about leaving their family member at Beatrice Place. They mentioned that they wished there was more support provided to the family at the time of transition and suggested creating a peer support group for the new families. In total, Dignity Champions spoke to 4 relatives.
- When asked whether the nursing home could change anything to improve the service, the carers mentioned that:
 - The family members appreciated opportunities for their relatives to go out, however, they wished Beatrice Place had access to transport so residents could be taken a little bit further - to a park or even on a day trip.
 - The relatives mentioned that the food could be more diverse, and more minority ethnic options served.



- The carers wished there was a better access to the phone on the first floor. The possibility of arranging a mobile phone looked after by a healthcare assistant on the first floor was discussed.
- Relatives were concerned that sometimes there are only two people on the floor.
- Relatives have a concern that they need to wait for consultant's availability. Currently, Consultant is every Wednesday. A junior doctor is more often but can't make any decisions.
- Relatives would like a slightly better communication between staff and relatives as currently sometimes messages are not passing to the appropriate person.

5 Additional findings

Healthwatch representatives talked to three members of the Beatrice Place team to find out what they thought about the services they were delivering:

- The service is currently working on gaining the Accreditation for Inpatient Mental Health Service (AIMS) and had the assessment done the same week as the first Enter and View visit.
- The newly appointed Matron is currently getting to know people in the team, residents and family members as well as focusing in finding the right person to fill the manager position vacancy. On the third visit we found out that one member of staff got promoted and became the Manager.
- The Healthcare Assistants that spoke to the Dignity Champions said they really enjoyed working with elderly people and took pride in their occupation.
- The Beatrice Place team acknowledged that for most of the residents the nursing home was their last home. The team focused on making the residents feel as comfortable as possible.
- The staff members mentioned that they felt supported by the team. They stressed the importance of having a team of permanent staff who knew the residents very well. Until recently, the service used a lot of bank staff and it was very difficult to deliver person centered care. However, this has been changed. Staff told us that the team is mostly permanent staff who know well the residents and colleagues.
- The staff receive regular training, monthly supervision sessions and regular updates on “lessons to learn”.
- The members of the team mentioned that it would be very useful to be able to fill in the care plans on the go. Currently the Healthcare Assistants need to find the time to go to the office to update residents' care plans. They felt



that the time they spend in the office could be used to provide more attention to individuals receiving care.

6 Recommendations

6.1 Healthwatch CWL Recommendations

By listening to people and recording their experiences, Healthwatch CWL has formulated some recommendations designed to help the Beatrice Place management to improve patients' experience.

Based on the Enter and View visit to Beatrice Place, Healthwatch CWL recommends that:

Environment

- Staff to consider using daylight wherever possible and keep the blinds open to bring in light.
- Staff to ensure that cleaning trolley is not left unattended.

Care

- A Dementia friendly information leaflet about Beatrice Place should be produced for residents for use until the Service Provider produce new booklets.
- The care team to agree on consistency in communicating messages to patients.
- Service Provider to consider providing the care team with the technical solutions to fill in the care plans on the go.

Food

- The management to discuss with the food provider to arrange more ethnically diverse menu options.

Activities

- The management to consider the feasibility of getting or hiring transport for residents' outings.
- The management to consider using volunteers to come and keep a company to patients few hours as a measurement against isolation.

Relatives

- The management to consider setting up a carers support group.



6.2 Service Provider Comments

Area of improvement	Healthwatch CWL recommendation	Provider comment and action
Environment	Staff should consider having blinds open wherever possible to maximise natural light	The unit has been undergoing a rolling programme of redecoration, phase one of which has been completed i.e. dining room, doors, and conservatory. This has involved painting the walls and providing soft furnishings and paintings in dementia friendly colours. As a result, the unit appears much brighter. In addition, blinds have been replaced and kept open to maximise daylight. Phase two of the programme includes refurbishment of the lift, redecoration of further bedrooms and corridor
	Staff should not leave the cleaning trolley unattended	This has been addressed by the cleaning provider, OCS and raised with Beatrice Place staff to ensure compliance
Care	A Dementia-friendly leaflet about the service should be available to residents until new booklets are produced	Revised leaflet is in draft form and is due to be brought to the next carers' group for consultation



	The Care team should agree on consistent way to communicate messages to patients	This has been raised in team meetings in the learning lessons section that is noted in the body of the report
	Care team should be given technical solutions to fill out care plans on the go	System One was introduced in February 2019. This system has streamlined care planning and helped to integrate the planning of physical and mental health care. The Trust does not currently have a mobile technical facility for updating patient records, however there are fixed PCs available on each floor for staff to use for completion of contemporaneous records
Activities	Consider transport for resident outings	There are regular local outings as part of the activity programme. Specialist transport can be arranged as required for attendance at special events. For example, this was arranged for attendance at a concert.
	Consider recruiting volunteers to keep residents company	There are volunteers who offer their time to help with the activity groups. The team are also working with the CNWL volunteer co-ordinator to recruit more volunteers
Relatives	Consider setting up carer support group	A regular carers' group is in place. In addition, the Matron is reviewing the format in



		consultation with the current group of carers' and families
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