



Healthwatch Liverpool Enter and View report

Broadoak Unit, Mersey Care

October 2014

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Section A

Introduction to the Enter and View visit

Date and Time of Visit: Tuesday 30/09/2014, 12.30pm -3pm

Mersey Care's Broadoak Unit is an inpatient unit for people who are experiencing a deterioration or crisis in their mental health and who as a result may benefit from inpatient care. It is one of several Mersey Care mental health inpatient units in Liverpool.

Manager: Nick Wade (Interim at the time of visit)

The reasons for the Enter and View Visit

The Enter and View visit was part of Healthwatch Liverpool activities of:

- identifying whether, and how, local health and social care services could be improved
- identifying whether, and how, local health and social care services ought to be improved
- identifying recommendations to improve the standards of health and social care services

The Methodology of the Enter and View Visit

The Enter and View visit was undertaken in accordance with the remit of Healthwatch Liverpool and will assist Healthwatch Liverpool in carrying out its statutory functions under the Health and Social Care Act 2012.

The visit only entered communal areas and facilities. We did not enter any non-communal areas. We spoke with both staff and service users.

The visit was conducted by 2 authorised individuals from Healthwatch Liverpool, Mavis Morgan and Inez Bootsgezel. They displayed the requisite identification and provided proof of DBS clearance for the visit.

Healthwatch Liverpool classed this as an announced Enter and View, meaning that the service provider was given notice prior to the Enter and View taking place. This is a reflection of the fact that Healthwatch was not following up any specifically indicated quality issues, either positive or negative, regarding this service, and there would have been no advantage by conducting an unannounced visit.

During this visit Healthwatch was specifically interested in observing some aspects of the Trust's work and receiving patient / service user feedback. The information thus gathered assists Healthwatch in producing informed Quality Account commentaries and in grading the Equality Delivery System.

General parameters of a Healthwatch Liverpool Enter and View visit.

Healthwatch Enter and View visits are not meant to be systematic inspections of a health or social care service. Such inspections are carried out by the Care Quality Commission and by relevant service commissioners. The Care Quality Commission has the role of assessing and informing the public about the general standards of care provided by health and social care services.

Healthwatch conducts Enter and View visits in order to observe a service in action and where practicable, to hear the voices of patients. At best, such Enter and View visits can only offer a strictly time limited snapshot of a service. Healthwatch Enter and View representatives are not health professionals, and so undertake these Enter and View visits from the perspective of a lay person.

The Enter and View visit to Broadoak Unit

The Enter and View visit was facilitated by two Mersey Care members of staff, Modern Matron Andrew Monkman and Kim Guy, Patient Experience. They told the Healthwatch representatives about the work that is carried out at Broadoak Unit and responded to questions asked by Healthwatch.

In response to a question, staff explained that Mersey Care has more inpatient wards at other sites in Liverpool, including on the Mossley Hill site where care is provided for elderly people on Oak Ward, and on Acorn ward for dementia type

illnesses. Mossley Hill also has provision for patients with a brain injury, and a small ward for People with a Learning Disability who are experiencing mental ill health.

The two Mersey Care staff members told Healthwatch that Broadoak unit was opened in 1992 for Liverpool residents following the closure of Rainhill Hospital. The unit looks after adults over 18 years of age who are experiencing mental ill health. There is room for 66 patients / service users, divided over 3 wards; Harrington ward is a 24-bed all-female ward, Albert ward is a 24-bed all-male ward, and Brunswick ward is an 18-bed ward, with 12 men and a separate corridor for 6 women. Very rarely, due to a lack of child and adolescent beds elsewhere, someone below the age of 18 may be admitted to Broadoak Unit. Special arrangements are in place for minors, with an emphasis on ensuring safeguarding.

In response to a question, Healthwatch was told that the majority of patients / service users are admitted via the Community Mental Health Teams. The Community Mental Health Teams will try to help and support people to manage their mental health in their own home, but sometimes health can deteriorate which can lead to an admission to the wards. However, others may go to Accident and Emergency departments and be admitted via that route, and some are admitted after assessment following an emergency police holding powers section (Sec 136). There is a specific '136 suite' for people admitted via a police section at the Rathbone Hospital site.

The two Mersey Care staff told Healthwatch that demand for beds is high. There are some service users who may not have anywhere to live when discharged from the Broadoak Unit. This could lead to beds being occupied for longer than anticipated. Most service users are discharged to the care of Community Mental Health Teams, and some receive support from voluntary sector organisations, e.g. Imagine. Mersey Care in conjunction with Liverpool Social Services arranges support for service users who need to be re-housed in suitable accommodation.

In response to a question from Healthwatch about the Occupational Therapy (OT) services at Broadoak unit, staff said there had been changes to the services. Healthwatch was told that the OT service had become more integrated with the rest of staff on the wards compared to before. Mersey Care also runs recovery sessions at Broadoak Unit, delivered by service users alongside a member of staff. Various topics are covered in these sessions, including living skills.

The two Mersey Care staff explained that the nursing teams at Broadoak Unit aim to ensure that people feel safe on the wards, and may have to manage some of the interaction between people on the wards to ensure that everyone gets due care and attention. Staff added that they felt it was important to ensure that everyone is equitable in this respect, and to include those people who may not draw attention to themselves and may be overlooked.

Healthwatch was told that a family room is available at the Unit, so that when children visit their relatives there is a more pleasant environment to see them in.

Finally, the two staff mentioned that Broadoak unit has an Electronic Convulsive Therapy (ECT) suite available for treatment.

Staffing

In response to a question from Healthwatch Mersey Care staff said that staffing levels on the wards have improved compared to previous years; staff recruitment administration has been brought back in-house, and there are less staff vacancies now.

Staff explained how Mersey Care also recruits staff through an apprenticeship scheme it provides. The scheme runs for 12 months, in which time apprentices learn on the job, and complete an NVQ level 2. After the 12 months some may stay on; out of 17 apprentices from the past year 10 will continue to work at Mersey Care. Mersey Care also wants to employ peer support workers on the wards, and has started a project where people with lived mental health experience can train to become a peer support worker. The first course has finished, but there are no current vacancies.

There is one psychiatrist per ward who works with Broadoak service users, as well as psychology and Occupational Therapy staff. Additionally Mersey Care staff told Healthwatch that after concerns had been raised about street drugs and safety on the wards, and to ensure that the police would gain more insight about mental health and illness, Mersey Care decided to have an individual Police Officer employed on site. From Mersey Care staff's perspective this has been a success, although they did say it had been important to ensure that the message got across about why the policeman was on the wards.

The wards

Healthwatch visited all 3 wards in Broadoak Unit, observing the environment and speaking with service users and some of their relatives and friends, asking what they thought was good, and what could be improved.

All three wards are on the first floor. Communal areas were clean, and dining rooms had coffee and tea making facilities available. Each ward had a lounge area with comfortable chairs and a television.

'You said, we did' boards were displayed in the corridors, as well as patient experience feedback information. Information about the Independent Mental Health Advocate (IMHA) service was also displayed at various sites. On Harrington Ward a poster was displayed with questions about medication and information about which medications can be self-administered.

HARRINGTON WARD

On Harrington ward staff showed Healthwatch some of the dormitories and a single room. There are four 4-bedded rooms, one 5-bedded room, and 3 single rooms available. Although they were clean, space in the dormitories was limited, with beds separated by curtains. Although Healthwatch observed this may provide some dignity, it did not provide privacy. Each bed had a locker for personal belongings near it. Healthwatch was told that the dormitories on the other wards are the same.

There was only one interview room where service users could have a private meeting with advocates or solicitors when required on Harrington ward, resulting in people having to 'queue' for the one room, or having to discuss potentially sensitive issues in communal areas such as the dining room or lounge.

Healthwatch representatives were shown the bathroom and shower facilities. Not all bathrooms had facilities for people with a physical disability, however one bathroom did have bars. Maintenance work was being carried out on one bathroom, and another bathroom shown did not have a bath plug for the bath tub. Staff said the bath had overflowed several times in the past, but it was not clear to Healthwatch if the plug had been removed by staff or service users.

Healthwatch spoke with four service users and some of their relatives on Harrington ward. All said that the staff are nice, and that the place was clean. One person mentioned that the care had been good, and that it was possible to ask questions, although "staff are very busy so you might have to wait". When asked by the Healthwatch representatives, they did say they had a say in their care.

One service user mentioned that they would like better food, including food for people with coeliac disease, and that it would be nice to have menus, to know what the food options are.

Others mentioned they would like to have their own rooms, as there was no place for doing things privately, and that there was a lack of independence.

The Healthwatch representatives tried to have a conversation with one of the service users whose first language wasn't English. When asked how staff communicated with the service user, the ward manager said that interpreters are provided where necessary and that leaflets and other information can be translated. Healthwatch was shown that a leaflet for the interpreting services was displayed in the ward office.

ALBERT WARD

The Healthwatch representatives spoke with a couple of service users on Albert Ward. Both said that the staff are good. One said he sometimes needed to wait for

15 minutes for staff to accompany him if he needed to go out, but didn't think that was unreasonable.

However, comments about the environment on the ward included a lack of toilet, shower and bath facilities, with 24 adult men sharing one shower room and one bathroom, and not everyone leaving bathrooms clean after use. Additionally it was mentioned that the décor on the ward was "scruffy" and that the ward could do with a revamp, including adding more pictures on the walls, and that it would be great if the dormitories could be changed to single rooms.

One person said he hadn't tried the food on the ward, and didn't eat it, but instead got a take-out delivered once a day. Another mentioned they didn't like the plastic cups, but said the dining and living room were alright, and that it was good there was a Skybox in the lounge with the television. He said there were some activities, like bingo and a newspaper group, and that there is a garden downstairs. He did mention he would like to see more activities, and had some suggestions, and added that more books and magazines were needed, including about local history and autobiographies.

BRUNSWICK WARD

The Healthwatch representatives spoke with 2 service users and one visitor on Brunswick ward. Again, they mentioned that staff are good, but one person fed back they had expected more one-to-one attention from staff, and that staff hadn't explained what to expect during the stay on the ward. Another mentioned that there was a very noisy service user who was disturbing everyone else, and that that could be difficult.

The service users said the food was good, that there was a selection although "it's not me mum's cooking". One also mentioned that it was clean and that there were some activities through occupational therapists.

1. Conclusions

Healthwatch did not speak with a large number of service users and visitors during this visit. However, Healthwatch representatives were pleased to note that all service users they spoke with gave positive feedback about the staff at Broadoak unit. Several service users were also positive about the food provided, but there was a request for menus that clearly stated what options were available, including the suitability of foods for particular diets. Some did mention they would like to see more activities and/ or reading materials to be made available.

However, most service users gave negative feedback about the physical environment on the wards, for example the low number of bathrooms /washing facilities available, particularly on Albert Ward. On Harrington ward, due to a lack of a bath plug in one of the bathrooms, only the shower could be used in that bathroom.

On Harrington ward there was only one room available for service users to have conversations in private, e.g. with solicitors or advocates. Several service users on all wards said they would prefer to be in single rooms, and from Healthwatch's observations it was clear that the way Broadoak Unit's wards have been set up means that, though functional, they are not conducive to privacy.

Modern mental health inpatient units tend to have single rooms at ground floor level, with in many cases en-suite facilities. Whilst Healthwatch is aware that Mersey Care is building new facilities on other sites to more modern standards, it is not clear if any improvements are planned for the physical environment at Broadoak Unit.

2. Recommendations

- That Mersey Care provides food menus with information about the types of food available (e.g. vegetarian, suitable for people with Coeliac disease) for service users, to enable them to make an informed choice about what they eat.
- As the service users on the wards change continuously, that Mersey Care regularly consults with service users about which additional books and magazines can be provided on the wards.
- Additionally, that service users are asked regularly what kind of activities they would like to see on the wards.
- And, on a very practical level, that Mersey Care contacts the More Independent team to obtain bath plugs that will enable the service users to have a bath without the risk of overflowing on the wards.
- Finally, in order to improve privacy for service users, that Mersey Care looks for a long-term solution to either improve and upgrade, or fully replace the physical environment provided at Broadoak Unit.

3. Contact details

Healthwatch Liverpool is always keen to hear more from patients about services, whether those stories are about positive or negative experiences. Patient feedback helps Healthwatch to identify and acknowledge good practice, or issues that call for improvements.

To give Healthwatch further information, or to discuss this report further please find us using the contact details below.

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