



## Enter and View Report

<b>Visit Date</b>	First visit: 27 April 2016 Second visit: 7 December 2016
<b>Authorised Representatives</b>	<p>First visit: 27 April 2016</p> <ol style="list-style-type: none"> <li>1. Julie Brown      Lead Authorised Representative</li> <li>2. Diana Lack      Authorised Representative</li> </ol> <p>Second visit: 7 December 2016</p> <ol style="list-style-type: none"> <li>1. Julie Brown      Lead Authorised Representative</li> <li>2. Eileen Page      Authorised Representative</li> <li>3. Deborah Judge    Authorised Representative</li> <li>4. Chas Lillystone    Authorised Representative</li> </ol>
<b>Service Visited</b>	Amblescroft South, Fountain Way, Salisbury.
<b>About the Service</b>	Amblescroft South provides specialist dementia hospital care and is managed by Avon and Wiltshire Mental Health NHS Trust. It primarily cares for people who need to be in hospital for a period of time because their dementia has become severe and they aren't able to stay where they are (either at home or in a care home). The aim is that they stay for about 6-8 weeks for assessment and treatment and then move either home or as close to home as possible with appropriate support in place. The unit has 20 beds and is divided into two separate areas for male and female patients.
<b>Disclaimer</b>	This report relates to these specific visits to the service, at particular points in time, and is not representative of all service users, only those who contributed. This report is written by the Lead Enter and View 'Authorised Representative' who carried out the visits on behalf of Healthwatch Wiltshire.

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## **Key Findings and recommendations:**

During both visits the visiting teams were welcomed by staff and patients who spoke openly about their views and experiences. The teams overall impression was that Amblescroft South was a caring and well managed service with a committed staff team.

The visiting teams found the environment to be clean, pleasant and generally well maintained. It was felt that there was potential to make the environment more 'dementia friendly' and the ward manager had already been looking into this. The majority of patients appeared to be content and relaxed during our visits and it was noted that their appearance looked well-presented and 'cared for'.

The people we spoke to said that they were happy with the care they received, felt they were well treated and thought that staff members listened to them. We observed a number of positive interactions between staff members and patients. People told us that they were given choices about what they ate, their clothes and how they spent their day. Some people told us they would like to be involved in more activities or have someone to talk to more often.

The visiting teams felt that staff demonstrated a caring and positive approach, good teamwork and a pride in their work. We were impressed with the approach of the ward manager and thought they were knowledgeable and showed a commitment to providing quality of care to the patients on Amblescroft South.

## **Recommendations**

1. Improving the ward environment would make it easier for people living with dementia and visitors to find their way around, for example by use of colour. Consider how bedrooms may be made more 'homely'
2. Continue with current efforts to gain funding for further dementia friendly equipment such as wall clocks, signage, IPads and door transfers.
3. Develop further activities that patients can be involved in during the day and aim to provide more opportunities for patients to 'chat', possibly by considering using trained volunteers.
4. To look at how the ward can further support patient's family and friends to be able to visit, perhaps by providing an information sheet about transport options.
5. To continue to work with other agencies to reduce any delayed discharge of patients.

## Purpose of Visit and how it was conducted:

Both visits were planned. The reasons for the visits were:

- Dementia is one of Healthwatch Wiltshire's priority areas. The visits formed part of our wider engagement programme of visits to organisations providing dementia services.
- Healthwatch Wiltshire facilitated the public consultation that resulted in the decision to permanently locate specialist dementia hospital beds at Amblescroft. We wanted to follow up with people who are using these beds and their family members. Following the consultation we said that we would monitor the issues people raised relating to this decision.

Information was collected from general observations of the unit, patients and staff, interviews with patients, staff, and the ward managers against a series of agreed questions, and completed questionnaires and comments from friends and/or relatives and patients, reference to the latest CQC report (27 May 2016) and final team discussions to review and collate findings.

### Visit Overview

The visits were planned and staff were expecting the Healthwatch Wiltshire team when they arrived. In both visits, we started with an informal interview with the Ward Manager and were then given a tour of the unit. We then spent some time talking to any patients and staff members who wanted to speak to us. On the first visit the team completed general observations and carried out informal interviews with 4 patients and 4 staff members. On the second visit the team completed general observations and carried out informal interviews with 6 patients and 2 staff members. They also spoke to a number of other patients and staff members informally 'in passing'.

We were unable to speak to any visitors during our visits. We asked the unit to distribute questionnaires and to patient's relatives and friends and received one reply. The ward manager also shared with us some cards and comments from patient's relatives.

### Observations and findings

#### Physical Environment:

On both visits we observed the environment to be very clean, well decorated and to be free of any unpleasant odours. Patients had their own bedrooms with en suite showers and toilets. The team felt that the bedrooms looked a little 'stark' and could be made

more homely with more use of pictures and colours. There were a number of small lounges which were comfortably furnished and had TV's or music playing. These appeared to be pleasant places to sit. There were some games, books and CD's available in these rooms and the ward manager said that they would like more of these. The visiting team felt that this would further enhance these areas. There was an enclosed garden which looked a safe and pleasant place for patients to get outside. We were told that one of the healthcare support workers maintained this on a voluntary basis and that it had been included in the AWP in Bloom competition.

There was appropriate signage on doors to different rooms which included some personal pictures to support patients to identify their rooms. The doors and handrails were in contrasting colours and therefore did stand out. However there was not a strong contrast between the floor and wall colours. The corridors were also painted the same colour and the visiting team found it hard to find their way around different areas, and on the second visit observed patients trying to find different rooms. We felt the use of different colours in different areas might help orientation for patients and visitors. The manager told us that they were looking for additional funding to purchase further dementia friendly equipment such as wall clocks, signage, iPad's and door transfers. We felt that these would have a positive impact on the ward environment for patients.

#### Interactions:

The visiting teams felt that the atmosphere on the ward was calm, safe and well managed. During both visits we observed a number of positive interactions between staff and patients. Examples of this include, on our first visit, a staff member responding to a patient who was upset in a caring and compassionate manner, and on our second visit, a cleaner interacting with patients in a friendly manner and addressing them all by name. On our second visit we also observed that patients responded positively to the ward manager and that they appeared to know them well.

On both visits staff members were polite, helpful and open in their interactions with our visiting team.

#### What users said:

The patients we spoke to were able to participate in our informal interviews to varying degrees, they all seemed to enjoy the opportunity to have a chat. The people we spoke to were positive about the care they received at Amblescroft South. They said that they thought staff treated them well, listened to them and talked to them nicely. Examples of what people said included: "Staff are wonderful, treat you nicely", "I've been treated pretty good" and "I know they are listening".

Some people we spoke to said that they would like the opportunity to talk to someone more frequently. On both visits, several of the patients we spoke to said that they would like more to do during the day. For example, we were told "It's boring - there's

not a lot to do here during the day”. People talked to us about their interests and said that they would like to be more do more activities in the day. Some people told us about the activities that were going on particularly gardening and planting which was spoken about at our first visit and said that they enjoyed them.

Most of the people we spoke to said that they enjoyed the food at Amblescroft and were given a choice. On our second visit one person said that they had found some of the food difficult to chew, however they said that when they asked for something else, they got it. The people we spoke to said that they were wearing their own clothes and could choose what they wore. People also said that they could chose when they got up and went to bed and how they spent their day.

What family and relatives said:

We weren't able to speak to any visitors during our visits. We have provided the questionnaires for the ward to give out to patients families who visit. We have only had one returned. This was positive about the care and staff team at Amblescroft but felt that the patients needed more 'stimulation'. The response said that it wasn't easy for family to visit as it was 100-mile round journey. Staff members also recognised that it could be a long way to travel for relatives and we were told that if families had difficulties visiting, they would advise them to contact the community team.

During our second visit, the ward manager shared with us anonymised feedback from patients during the community meetings and thank you cards and letters from patient's families. This was in general very positive.

What staff said:

The staff members we spoke to were generally positive about their work at Amblescroft South. They mentioned a number of things they thought were good for patients there which included: the bright atmosphere, positive staff, patients being treated with respect and patient's relatives being involved in their reviews. A staff member also noted that patients often gained weight and became more settled during their stay there. The main thing that staff thought should be improved for patients was the availability of more activities and more time to talk to patients. Staff also said that they thought there were occasions when patients stayed at Amblescroft South for longer than they needed to due to difficulties accessing the right care and support in the community. However, they said that they felt there had been improvements over the last year in reducing some of the longest stays.

Some staff members said they would like more training about dementia. The difficulties recruiting trained staff was also mentioned and the frustrations of having to use agency staff whose training and knowledge could be variable. Despite this the staff members we spoke to said that they were happy working at Amblescroft, that they felt there was good teamwork and strong leadership which they respected.

The ward manager told us about some of the new initiatives which have either recently started or are planned. These included holding regular Patient Community Meetings and plans to carry out the “Inspiring: Dementia Care in Hospitals” Quality of Care Checklist in January 2017. The visiting team felt that ward manager demonstrated a high level of commitment to the service and to providing the best possible support to the patients there.

### **Acknowledgements:**

The Healthwatch Wiltshire Enter and View team would like to thank Avon and Wiltshire Mental Health NHS Trust, ward managers, staff, patients, and their families for a friendly welcome and unlimited access to the premises and activities.

### **Provider response:**

Amblescroft South have responded to our report. They have said that it appears to be accurate, they have thanked the visiting team for their time and said that they very much valued the feedback.

## Control Sheet

Date submitted to HWW office as draft version	12/01/2017
Date sent to provider to check for factual accuracies	03/02/2017
Date response from provider due	20/02/2017 (Received on 06/02/2017)
Follow up actions	Further visit in late 2017 to continue to monitor as part of continuing dementia engagement.

## About Healthwatch Wiltshire

Healthwatch Wiltshire (HWW) gives people a powerful voice locally and nationally. At a local level, HWW works to help local people get the best out of their local health and social care services. Whether it's improving them today or helping to shape them for tomorrow. HWW is all about local voices being able to influence the delivery and design of local services. Not just people who use them, but anyone who might need to in future.

## What is Enter and View?

To enable Healthwatch Wiltshire to gather the information it needs about services, there are times when it is appropriate for Healthwatch to see and hear for themselves how those services are provided. That is why the Government has introduced duties on certain commissioners and providers of health and social care services (with some exceptions) to allow Authorised Healthwatch Representatives to enter premises that service providers own or control to observe the nature and quality of those services. Healthwatch Enter and View visits are:

- not part of a formal inspection process, neither are they any form of audit;
- a way for Healthwatch Wiltshire to gain a better understanding of local health and social care services by seeing them in operation
- carried out by Authorised Representatives who have received training and been DBS (Disclosure and Barring Service) checked
- a way for Authorised Representatives to observe the service, talk to service users and staff and make comments and recommendations based on their subjective observations and impressions in the form of a report.