

Russell Villa - Enter & View Report March 14th 2017

| Service | Russell Villa |
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| Provider | Care Tech Community Services Limited |
| Address | 7 Russell Hill, Purley CR8 2JB |
| Manger | Margaret Isodo-Joseph |
| Date and time of visit | Tuesday 14th March 2017 10.30 to 12.00 |
| Status of visit | Announced |
| Healthwatch Croydon Enter & | Vanessa Hosford, Michael Hembest, Gillian Khalighi & |
| View team - Authorised | Agnes Tye |
| Representatives | |
| Lead Authorised Representative | Vanessa Hosford |
| Healthwatch Croydon contact details | Healthwatch Croydon, 24 George Street, Croydon, CRO 1PB |

Acknowledgements: Healthwatch Croydon would like to thank Margaret Isodo-Joseph the Manager of Russell Villa and her staff and residents for their co-operation during the visit.

Purpose of the visit: To observe and assess the interaction between staff and Service Users, assess the activities undertaken in relation to the Service Users and how behaviours were managed.

Healthwatch Croydon carries out Enter and View visits as part of its overall remit. On this occasion four Authorised Representatives (ARs) carried out tasks that included: observations; speaking to residents and staff. Local Healthwatch representatives carry out these visits to health and social care services, to find out how they are being run and make recommendations where there are areas for improvements. The Health and Social Care Act allows Healthwatch Croydon representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. The visits can happen if people tell us there is a problem with a service but equally they can take place where services have a good reputation, i.e. where homes are run effectively in meeting the needs of their Service Users.

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 Croydon's Safeguarding policy. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit. In addition, if any member of staff wishes to raise a

safeguarding issue about their employer they will be directed to Croydon Council's Safeguarding Team.

General Information on the service:

Russell Villa is run by Care Tech Community Services and can accommodate 10 people with learning disabilities, autism and challenging behaviour. Currently there are 8 Service Users and all are male but there are female staff as well as male staff. Not all Service Users are from the borough of Croydon.

The Manager explained that there were two self contained flats as each end of the building. These were for individuals who required 1-1 support.

We saw the manager, Margaret, in her office and she gave us a brief overview of the home.

N.B. On the day we visited there were 3 Service Users (SUs) at home, the others were out on activities. The home uses 'Person Centred Plans' for all its SUs as their needs are individual and very different and therefore this way of designing activities around the 'person' works best for them.

Only one Service User was willing/able to take part in an interview and so this visit was focussed on observations rather than Service User input

Observations

Entering from the road we paused briefly to take in the home in general before going in. It was noted that the bushes around the entrance were overgrown restricting the steps to the front door. The home is situated in a residential street up a fairly steep hill about a ten minute walk from Purley town centre. The access by wheelchair appeared narrow and sloped downward towards the front door restricting entrance by the front door by wheelchair users. There was a small mini bus in the drive which we were told was used for journeys as many of the Service Users found public transport difficult to manage.

The front door bell was answered quickly and in a welcoming manner. The door was answered by a Support Worker and two of the Service Users were about and we introduced ourselves. (Due to the level of disability and communication difficulties of the Service Users and their specific conditions, added to the concern expressed as to why we were there, it was not possible to build trust and a meaningful two way dialogue and therefore our interaction with service users was limited).

We were then taken upstairs and introduced to the Manager. She appeared quiet but answered our questions openly and she was welcoming and pointed out that she had only recently been appointed (8 days). She told us the Service Users are registered with different Croydon GP Surgeries. The Psychiatrists are either from Croydon or they have input from other sources. The Service Users have local Psychologists to work with them on their behavioural problems and there is access to 'in house' support too. From the start we were aware of the need for tight security on all doors to keep the residents safe. Most doors had key pads to gain entry.

Reception/Entrance area: As this was a large house rather than a purpose built home the entrance area was a small hall with a fireplace. It was bright, clean and welcoming and there was a small seating area near the fireplace. On arrival we were asked to sign in the visitors' book. In

the hall area there was a wipe-board which noted down where Service Users were and another board for comments. We later found out the comment board was mostly by staff if they had ideas about activities.

Lounge: There were several areas/rooms that were interlinked on the ground floor which seemed to give space and different areas for different activities including painting, pool table, TV etc. These were clean and bright and staff said they worked well. These mainly looked out over a garden which we were told was used in the summer months for BBQs etc.

Tidiness: All areas visited were clean and tidy. The Manager explained that all members of staff are responsible for the environment and some Service Users like to dust and wipe down tables.

Odour: There were no odours in the home in general however we were invited to view the flats on the ground floor - one was being refurbished and the other was vacant on the day of our visit. A strong smell of urine was noted by one of our visitors in the occupied flat.

Noise: The televisions were not on and there was no music playing. The general feel in the home was one of calm, it felt appropriate for the SUs who lived there.

Information displayed: Pictorial menus and written menus were displayed. These were well organised, up to date and clear.

Choice of food and refreshments: Menus were on display and indicated that most meals were at the Service Users choice. The Service User we spoke to was confident he would be given his choice. He was taken to the kitchen to make his coffee with his carer and again, confidently asked the carer to put extra milk into his coffee.

Staffing: From what we could observe staffing levels seemed appropriate.

At night there were four waking night staff on duty when fully occupied, the one to one's needing a carer each and two being based in the main house.

Activities: There were a number of activities on the day we visited and these were marked up on a whiteboard. On the day of the visit two Service Users had gone plane spotting at Gatwick airport. Another service User was going for a walk. Two Service users were attending a day centre. One Service User had been taken to visit his sister in Kent over the weekend prior to our visit and another had been taken to see horse racing at Epsom - just watching from the rails on the Downs.

Levels of interaction: From our observation there was good interaction between staff and residents. Staff spoke to residents in a friendly and respectful manner and we were told about the use of person-centred planning for individuals. Staff showed a real understanding of the Service Users. Two were having a coffee with a member of staff within the seating area.

Faiths: None of the current Service Users attended a place of worship but we were told that they would be supported if they wanted to.

CQC Rating: The last CQC inspection was carried out on December 14th 2016 and all areas were marked as 'good'

With the help of the Manager we then proceeded to make arrangements to speak to the staff and residents. We were able to talk to one resident and two staff members.

| Resident (1) | Comments |
|---|--|
| Due to the level of understanding and possibly | The gentleman we spoke to said that he likes the carers. He had been taken to see his sister, in Kent, and this had obviously been a special thing for him. |
| uneasiness of 'why we were there', (one | One other Service User seemed to disturb him but he felt supported and safe when his carer was with him. |
| Service User thought we were doctors and was | He feels well at the moment. He is supported when he has to go to medical and dental appointments. |
| very anxious | If needed the staff will call the GP for him. |
| about us being there) and to get the most we | Yes, he refers to his carer for support, the carer then encourages him to answer rather than answering for him. |
| could from | His favourite thing is eating chocolate cake and ice cream. |
| interviewing the Service User a | He likes to go to Tesco which is local to the home. |
| member of staff was present | Yes the staff do know the Service Users likes and dislikes but do refer back to the Service User to confirm that is what they want. |
| during the interview. It was not possible to | There are a number of activities and all appear to be designed for the Service Users likes. |
| ask the full range of questions we would have liked | Reviews are held but they would be in a relaxed manner to meet the Service Users needs. |
| to so we took a slightly different approach | Staff knew he wanted mashed potatoes and meat which he was going to have. Service Users have their own choice of food at mealtimes. |
| | Service Users get up when they want to and a programme for the day is arranged around their needs. |
| | There was an obvious bond between the Service User and the member of staff who was present and who was his key worker. The Service User was very relaxed with all staff he was observed having contact with. |
| | |

| Staff (1) | Comments |
|------------------|--------------------------------------|
| What do you like | The atmosphere and the Service Users |
| most about | |

| working here? | |
|---|---|
| | |
| From what you know is there anything that doesn't work so well and if so what? | No problems were voiced |
| STAFF ROLE – do you feel you are able to look after the health and social care needs of the residents? | Yes, I can care for the Service Users and I'm able to meet their social needs and feel supported to do so. Feels that being able to respond to the Service Users change of mood is important. Also said ensuring Service Users are able to maintain contact with their family is very important. |
| What do you think is important in caring for people? | |
| YOUR VIEWS – are you asked for your views on things in the home? What you like doing for example | They are allowed to make suggestions about the home. The member of staff has suggested the garden should be more accessible but this also has health and safety issues as the garden has a steep incline but they are looking at ways around this. |
| Qualifications - | NVQ2, studying for NVQ3. All statutory training updates are on line. |
| Tell me about your qualifications/skills | |
| 1. Tell me how the management support you/ how often you have Supervisions and Appraisals, training sessions etc. How is further training identified by you or your manager? | Supervisions are bi monthly. Appraisals twice a year. If required they can request extra training at supervision sessions and it is always considered. Feels he can raise issues at supervision and they will be considered and acted on where possible and feels training is seen as important. He feels that the company will support staff to progress in their careers. He has been with the company for 3 years, and has been a senior carer for 2 years. A colleague has been with the company for 7 years |
| Staff (2) | |
| YOUR VIEWS – are you included in | The Key Worker system works well and they are included as a member |

| the reviews of residents in your care? | of reviews and the care of the Service Users |
|--|---|
| How often do these take place? | |
| SOCIAL LIFE – How do you go about finding out what residents enjoy? | Social life is important and the Service User is always asked what they would like to do and where possible, these needs are met. There is a blow-up pool full of plastic balls because one Service User likes this. A pool table was purchased as he was keen on playing pool. Service Users pay for their own activities. Last year a trip to Butlins was arranged and they had higher staffing levels to support those who went. |
| FOOD – what is the food like? Are you able to give the residents choices at meal times? | The choice of what and when meals are served is led by the Service Users. The Carers prepare the meals to meet the requests of the Service Users. |
| MORNINGS AND BEDTIMES – how is getting up and going to bed arranged for the residents? | These are flexible to meet the Service Users moods and needs. |
| Comments: Please tell us anything you want about the home, the care provided the staff etc. that has not been covered in the questions. | There's a good staff team, there is new manager, only days in post, but the last manager was very supportive. |

| Staff(2) | Comments |
|----------------|--|
| Comments: | The member of staff has worked for the organisation for 11 years and |
| This member of | recently moved from working as a general Support Worker within the |

staff spoke about her role which we felt was valid in the context of understanding a home which caters for people with significant levels of autism and some challenging behaviour home to a one to one Support Worker. She has been doing this for three years. The member of staff is one of a team of three who provide 24 hour one to one care to a Service User.

The one to one Service User she supports attends a day centre but is at home for the weekends.

Due to the Service User's specific condition items such as toothpaste, plastic items, paper items etc. in the flat, must be locked away to protect him from eating non-food substances. Also sharp or potentially harmful items must be locked away. This means the member of staff must be vigilant at all times.

The Service User uses Makaton sign language but has his own version at times, the member of staff has some knowledge of signing and knows what he means.

Knowing him well she is able to recognise his likes and dislikes, she uses a recipe book with him so that he can choose his meals, pointing to pictures. He is able to make his own drinks with supervision. He has very sensitive hearing but likes listening to his music on earphones but cannot stand babies crying, dogs barking or loud noises. If he becomes agitated the member of staff has to move away and try and calm him.

If she is not in visual contact, i.e. in another room she has a monitor in the sitting room so she can pick up on his activities.

Clearly she knows him well and is aware of his safety, personal hygiene, nutrition and the importance of helping him to exercise his choices. Also the need to support him when he is very anxious and how best to do this.

Conclusion and recommendations

Healthwatch Croydon Enter and View team would like to thank the staff team for accommodating the visit. The Authorised Representatives could understand the need to work in a person-centred approach to meet the needs of the individuals at the home. It was clear from the activities happening on that day that different activities were planned.

- Healthwatch Croydon would recommend that the downstairs flat is given a deep clean due to the odour of urine present on the day of the visit.
- The need for person centred activities and specific support for individuals was very evident and it was encouraging to hear from staff that they had worked in the setting for several years which clearly provides continuity of care.
- Below is a comment made by Russell Villa in response to our report. In the interests of fairness we have included it here.

Response from the manager of Russell Villa:

While we respect your report, we wish to insist that the current occupied flat has no odour of urine. I say this because the parents of the client who occupies the current flat are very much involved in his wellbeing such that if there were to be a hint of odour of any sort in his flat, they would have raised concerns verbally and in writing.

Disclaimer:

This report is representative of the views of the residents and staff that Healthwatch Croydon spoke to within this timeframe and is not representative of all the residents and staff at Russell Villas. The observation made in this report relate only to the visit carried out on Tuesday 3rd March 2017 from 10.30 to 12.00 mid- day.