

# **Mental Health & Rehabilitation**

Experiences of patients at Riverside,  
Woodlands, and Colham Green  
2023-24

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## About Us

# Healthwatch Hillingdon is your local health and social care champion.

We ensure that NHS leaders and decision-makers hear your voice and use your feedback to improve care. We can also help you find reliable and trustworthy information and advice.



### Our vision

To bring closer the day when everyone gets the care they need.



### Our mission

To make sure that people's experiences help make health and care better.



### Our values are:

**Equity:** We're compassionate and inclusive. We build strong connections and empower the communities we serve.

**Collaboration:** We build internal and external relationships. We communicate clearly and work with partners to amplify our influence.

**Impact:** We're ambitious about creating change for people and communities. We're accountable to those we serve and hold others to account.

**Independence:** Our agenda is driven by the public. We're a purposeful, critical friend to decision-makers.

**Truth:** We work with integrity and honesty, and we speak truth to power.

# Foreword

**In 2022–23, the NHS reported a total of 2850 detentions under the Mental Health Act across North–West London of those aged 18 years and over. This was the highest amongst all the London regions.**

People with serious mental health disorders face poorer long-term health outcomes, with mortality rates in England that are 3.7 times higher and 15 to 20 years earlier than the general population due to poor physical health such as cardiovascular disease, respiratory disease, diabetes, and hypertension, and high rates of suicide associated with psychoses.

With demand for mental health support on the rise, and a drive in Hillingdon to ensure services provide the best quality, holistic support to improve long-term outcomes for patients, we welcomed the opportunity to work in partnership with the Central North West London NHS Foundation Trust (CNWL), to review in-patient experiences at the Riverside and Woodlands Centres, and Colham Green rehabilitation unit.

Largely positive, this report provides an overview of the conversations we held with patients, who are often unheard in society, and we hope the feedback we've presented provides useful learning for CNWL to enable the continuous improvement to the valuable facilities and care it provides to patients.

We'd like to give thanks to our Healthwatch Hillingdon volunteers who helped us to carry out this important piece of work, to the staff at CNWL for enabling us to access the wards safely, and to the patients and their Carers and family members who welcomed us into their lives to share their experiences.

# Background To The Review

**In August 2023, Central North West London Foundation Trust (CNWL) commissioned Healthwatch Hillingdon to research the in-patient experience across its acute adult mental health site in Hillingdon. We aimed to gather the views and experiences of current in-patients, their families, carers, and staff regarding various aspects of the care provided.**

CNWL provides a range of mental health and community services across the London Borough of Hillingdon, including in-patient care for those needing support for severe mental health difficulties or a mental health crisis. The trust hosts three sites in Hillingdon, which cater for adults over the age of 18: The Riverside Centre, The Woodlands Centre, and 2 Colham Green Road.

We conducted interviews in-person with patients who were either informal or formally detained ('sectioned') under the Mental Health Act (MHA). These personal experiences form the foundations of this review and the recommendations to the service provider to improve care and future service provision.

We thank CNWL for their commitment to improving the patient experience and for the opportunity to carry out this review that highlights the experiences of some of the most vulnerable and seldom-heard individuals in the Hillingdon community.

# Our Approach

We wanted to understand the various aspects of the in-patient experience within each ward, such as the **ward environment, provision of activities and meals, quality of care, communication with staff, involvement in care planning and preparation for discharge, access to information and visitors**, what's working well and areas for improvement. Our team of Healthwatch representatives were provided with interview training and guidance as well as basic safety training whilst visiting the wards.

In preparation for our visits, posters and leaflets were disseminated across all three units that explained who we are, our contact information and a QR code linking to our "Have Your Say" webpage. The posters would help patients become familiar with us and our role, so that they would be more open to speaking to us once we arrived, but also provided a means for patients, carers, and staff to provide feedback digitally, in case they preferred this method or wanted to share whilst we weren't present.

We began with the patient interviews, aiming to invite Carers and family members to participate in a focus group and offer staff either a one-to-one interview or a focus group as part of a second phase of the project.

Between September 2023 and February 2024, we interviewed forty patients and held group discussions with residents at Colham Green and Carers of family members with severe mental health disorders.

Following each visit, we held a debrief with the Healthwatch representatives and Head Occupational Therapist to share our feedback and identify any concerns.

## What Patients & Carers Told Us

# What Patients & Carers Told Us

**Providing effective services that support people to recover from acute mental health crisis and severe mental health conditions involves patients having a voice in their treatment and care.**

Severe mental health difficulties are most often due to a psychiatric disorder (or cluster of disorders) which severely alter an individual's perception, thoughts, mood, and behaviour. This can lead to a distorted sense of reality so debilitating that it can make daily life activities (including work) difficult to perform. In the interest of the health or safety of individuals affected by a severe mental health disorder, they may be formally detained (sectioned) under the Mental Health Act.

Psychiatric disorders manifest through symptoms like hallucinations, delusions, and disorganised thinking as well as social withdrawal leading to difficulties with social interaction. For this reason, it can be difficult for these individuals to communicate their views, and difficult for others to distinguish what's real or imagined, inadvertently leading to underrepresentation of the patient voice.



**"I feel like my views are not considered because of my mental health condition."**



# The Riverside Centre: Crane & Frays

# The Riverside Centre: Crane & Frays

The Riverside Centre is comprised of three wards; Crane (female), Frays (male), and Colne wards, which aim to provide a safe and therapeutic environment for people over the age of 18 with acute mental health difficulties, the majority of whom have been detained under the Mental Health Act.

Colne ward was not included in this review due to concerns around the safety of interviewers at the time.

# The Riverside Centre: Crane & Frays

## The Ward Environment

In general, the ward environment received negative feedback across both wards due to issues around safety, security, and privacy. Personal room doors weren't always locked when vacant, and so patients could move in and out of each other's rooms and belongings would go missing.

The lack of security for personal belongings, coupled with a lack of privacy due to the small "claustrophobic" nature of the communal space leaves patients feeling unsafe, especially while around other patients who may be aggressive at times, as a symptom of their mental health condition.



"It feels like a prison with every door locked behind you and in front of you, except your own door, so things go missing. Nurses don't have time to keep locking doors behind patients, and the safes in rooms don't work. When things are stolen nothing gets done about it and you see the person with your stuff."

# The Ward Environment

The wards are smoke-free under NHS rules. For those who smoke, they are provided with a vape (e-cigarette) and nicotine replacement therapy to support them during their stay. On entering the wards, we found the smell of vape overwhelming. Patients also agree that the smell is overpowering, and that this exacerbates the claustrophobic environment.

Other concerns that were raised included a lack of cleanliness (due to patients littering the ward), the lack of functional appliances (fridge, drinks machine), and lack of access to the outdoor space and a smoking area.

Interruptions to sleep due to noise and disturbances from patients was also a common issue amongst patients who told us that lack of sleep was affecting their recovery.

The few positive remarks made were about the showers, access to a laundry, and access to the gym facilities.



“Cleanliness of other patients is a big issue; the cleaners can’t keep up. So, I spend a lot of my time cleaning and tidying, which helps me pass the time. I feel claustrophobic on the ward and try to spend as much time in the garden, which I can only access a couple of times a day, if the weather’s ok.”

# The Riverside Centre: Crane & Frays

## The Provision of Meals

Overall, the feedback received from patients on Crane ward, and their Carers, was negative due to a lack of variety and limited 'healthy' options.

Whilst many of the patients told us that meal quality was good; they found the meals to be 'heavy'. When coupled with patients being generally sedentary on the wards this is leading to weight gain which, in turn, negatively impacts overall physical and mental health and wellbeing. The lack of variety was also an issue for many of the patients we spoke to who felt their dietary requirements or cultural preferences weren't catered for. Patients who had remained on the ward for an extended period told us they had become tired of eating the same food.

Patients would like to see healthier options and greater availability of fresh fruits, salads, and herbal teas. There were a few positive remarks, one being about the quantity, with several meals a day and seconds available if they wanted them.



"The food is good quality but it's not healthy, and with not enough access to exercise, it's fattening. If you're on the ward for a long time, the menu starts to get boring, so some greater variety of foods would be nice."

# The Riverside Centre: Crane & Frays

## Activities

Patients told us they generally enjoyed the activities offered, especially the Occupational Therapy sessions such as those incorporating movement as a form of therapy, and the pamper sessions (provided by a volunteer) on Crane ward. Outside these sessions however, patients explained how there wasn't much to do while on the ward. As a result, they would spend hours scrolling on social media, especially during the evenings and weekends.

Some patients, particularly those with social anxiety, find group sessions challenging and difficult to access, so tend to avoid participating. Consequently, some patients suggested incorporating one-to-one sessions or activities for individual participation into the activity programme.

Riverside patients benefit from having access to a gym on site with a fitness instructor. During the first few weeks of our visits, the gym was being upgraded, with no instructor available, which meant the gym facilities were restricted, and this would have affected the patient experience at that time. However, the gym received positive feedback across both the wards, and once a new gym instructor was appointed with a fuller timetable of activities, patient feedback was very positive and highlighted the importance of having this facility available.

Other activities are timetabled during the week, and include cooking, gardening and movement and creative therapies. Patients across both wards were generally positive about these activities and the outdoor space but remarked how there wasn't much to do on the ward itself.

# Activities

Patients told us they would like to see greater access to the gym and better TV programming, while others say they are bored of the gym and would like other options to stay physically active. Possible recommendations include activities such as:

- Reading, writing, and language skills
- Gardening skills
- Other forms of exercise through opportunities to walk locally or go swimming\*

\*However, these activities require supervision and as we learned through this review, capacity to accompany patients who have been granted accompanied leave is limited.



“There aren’t enough activities on the ward itself, so everyone sits around getting bored and just scrolling through social media and getting into arguments.

Though there are colouring books and pens available, people don’t tend to use them. I go to the gym twice a week, but only when the instructor is there and it’s usually at random times and last minute, I often miss out because I’m not ready.”

# The Riverside Centre: Crane & Frays

## Quality of Care & Involvement in Care Plans

Patient involvement in the planning and management of their care is crucial to their recovery. Patients should expect a weekly meeting with the member of staff responsible for their care on the ward, and a discussion to agree a plan that considers the individuals needs and which they are empowered to self-manage.

We asked each patient we spoke to if they had a care plan in place, and if so, did they feel involved in the development of their care and treatment plans. There were a few positive instances where patients were aware of their care plans or were involved in discussions concerning their care and medication. There was only one instance of a patient having both. Most patients were unaware of their care plan, even though they were taking medication, and felt that they were not involved in discussions concerning their care.



**"I'm listened to with regards to my pain and medication and treated with respect. But I feel misunderstood with my illness. If a doctor is asked for, there is a response. But when I raise concerns, I feel like I don't get the help from the nurses. What the psychologists tell me I need then differs from what nurses will do."**

Those that told us they had not been involved in their care plans said this had created distrust between patients and clinical staff. These patients also shared concerns about the medication they had been prescribed and that, in some cases, this has led to altercations with ward staff, and forced injections, leaving patients traumatised, and feeling disempowered in managing their health.



## Quality of Care & Involvement in Care Plans

On occasion, where the safety of the patient, other patients, and staff is at risk, ward staff can be required to restrain a patient and administer an anti-psychotic injection as a pacifier. Some patients, and their carers, shared their experiences of this with us. Feeling traumatised long after the intervention was a common theme, however there was also recognition from some patients that they may have been a risk to themselves and others at the time of the restraint.



**"I'm angry about being given a sedative injection because I didn't know why I needed it... My experience of the injection was traumatic. Five nurses held me down. I was angry at the time, but it felt like I had been abused."**

CNWL's policy is that when any type of restraint is used as an intervention, it is documented and debriefed, and patients are encouraged to express their feelings so that their mental health team can provide appropriate support, including an advocate if required.

Many of the patients we spoke to told us that they felt there was inconsistency between their understanding of the treatment they had been prescribed by doctors and the administration of treatment by the ward nurses, which also contributed to misunderstandings between patients and ward staff.

Carer and family member experiences suggest that communication from doctors could be better, with some appearing unopen to conversing with family members/Carers about the patient's condition and treatment. The impact of this is that some Carers/family members feel 'dismissed' and have 'given up' trying to communicate with professionals at all.

**"As the people who care for the patient, why aren't we better informed so we know how to care for them better?"**

# The Riverside Centre: Crane & Frays

## Communication with Staff

Generally, we received positive feedback overall from patients and Carers across both wards. We found many of the patients we spoke to sympathetic toward staff particularly with regards to aggressive behaviour from patients and the level of demand placed upon them. The experience of Carers is that most staff are amenable and sympathetic to the demands of very unwell patients in what can be a very 'chaotic' environment.

Most patients on Crane ward had positive remarks on their relationships with ward staff, explaining that they felt listened to when raising concerns and that they were treated with dignity and respect. Many patients told us they felt confident in raising concerns, but not confident that those concerns would be resolved, for example, with the issue of personal items being taken by other patients. Their understanding was that there "isn't much ward staff can do about it."



**"Communication with nurses is good, but they must be asked several times before something is done."**

# Communication with Staff

On Frays ward, patients explained how staff showed a lot of patience and respect towards them, listening to their concerns and taking the time to converse with them. However, some told us they felt there was a lack of empathy from staff and an inability to put themselves in patients' shoes.

One patient, whose first language isn't English, found communication with staff difficult without access to an interpreter. This often led to him feeling frustrated which was sometimes interpreted as aggression towards staff members and resulted in restraint practices being used.

In both wards, there was some mention of staff seeming exhausted, and this ultimately impacting their attitude towards, and relationship with, patients.



"I'm grateful that the nurses tolerated me while I was angry, the nurses are good and have good conversations with me."

# The Riverside Centre: Crane & Frays

## Access to Information & Support

When an individual is detained under the Mental Health Act, it is expected that they will be informed of their rights when admitted to hospital. Information should be provided in a way the patient understands, and if it cannot be understood or retained by the patient at that time, it is expected that staff will engage with the patient daily, to reinforce the information until the patient has a clear understanding. A significant right is access to an advocate who can support them to access the health and care they are entitled to, exercise their right to appeal a section, and communicate with health professionals about their needs.

We asked the patients we spoke to if they had a clear understanding about their rights under the Mental Health Act. Except for a few, most patients on Crane ward told us they did not know their rights, neither did they know what an advocate is or that they were able to access one. Patients on Frays ward appeared to have a better understanding of their rights, however there was also some confusion as to what an advocate is and their right to access advocacy, despite there being posters and leaflets about advocacy on the ward. Some patients reported to us that they had built a relationship with an officer who was helping them to appeal their sections, but they had not associated this person with advocacy.



**"I am not aware of my rights under the Mental Health Act. I was not aware that I could receive support from a mental health advocate, and I would be interested in that support if it's offered."**

# Access to Information & Support

When we asked those that hadn't used advocacy services if they would consider using them (once we explained the role of an advocate) most of them said yes. Therefore, we concluded from this that the advocacy role needs further explanation in simpler language for patients to be able to understand how an advocate could benefit them.

For those that have used an advocate, they told us they found it helpful in understanding their rights, and in better understanding their mental health disorders.



"I'm not greatly informed about my rights, I feel tired, too tired to fight and would like someone to fight for me. I have a lot of insight and lived experiences to offer which could help services, but the way things are right now I feel disempowered."

# The Riverside Centre: Crane & Frays

## Access to Visitors

Patients generally gave positive feedback across both wards with regards to visiting arrangements. Suggestions for how this could be improved included longer visiting times and better security for visitors whilst on the ward. We also noted from our visits, the limited secure and private spaces available for visitors to the ward.

## **The Woodlands Centre: Hawthorne & Oaktree**

# The Woodlands Centre: Hawthorne & Oaktree

The Woodlands Centre is comprised of two wards; Oaktree ward and Hawthorne Intermediate Care Unit (HICU).

Oaktree aims to treat older adults who may be:

- Over the age of 18 and may have a cognitive disorder
- Have a mental disorder and a significant physical illness (e.g. stroke, Parkinson's disease, severe Heart Disease, Chronic Obstructive Pulmonary Disease (COPD) or frailty)
- People over 70 or approaching end of life

HICU provides:

- Intermediate care beds for patients requiring a full multidisciplinary rehabilitation programme
- Step-up beds for short-term inpatient care and to prevent acute hospital admission.



# The Woodlands Centre: Oaktree

## The Ward Environment

Generally, this received positive feedback overall from patients due to the abundance of space in the ward, the privacy they have in their rooms, and full access to a courtyard garden. Given that the ward caters primarily for older people, and one patient's experience of a fall during her stay on the ward, it was suggested that bedrooms and communal areas would benefit from improved adaptations, such as hand and grab rails, to support patient mobility and prevent falls in the future.



"I like the ward space, I use the outdoor garden space to sit outside and do my exercises, and the rooms are very nice and of a good size."

"I have a constant fear of falling, including falling out of bed. I fell recently and hit my head on the skirting. I've lost confidence now, and I'm scared to move in and out of my room, and the rest of the ward space doesn't help as there are no handrails. The doors are heavy also, making it even more difficult."

# The Woodlands Centre: Oaktree

## Provision of Meals & Activities

The meals provided on the ward received positive feedback overall due to both quality and quantity. The negative feedback we received related to concerns about portion sizes and calories with one patient reporting she had gained, what she felt was, too much weight since being admitted on the ward. Food choice was another area that was mentioned could be improved, though most were satisfied with the varied menu.

The provision of activities received mixed feedback, with half of patients seeming content with the activities on offer. Patients told us they enjoyed the cookery sessions, board games, and activities in the outdoor space. Whilst others felt there isn't enough to do or don't find the activities on offer appealing. Some reported that whilst they had been granted Section 17 accompanied leave, there was often no staff availability to facilitate this.



"There isn't much to do, I watch TV and go to bed. I go out for walks and to the garden, and it feels good. I need assistance to go outside, and so only go when my family visits as the staff say no to taking me out."

## Quality of Care & Involvement in Care Plans

Due to the complex nature of patients' cognitive conditions, particularly of those with dementia, most of the patients we interviewed found this question difficult to answer.

Of those that could, half told us that they were aware they had a care plan in place, and that they felt well-informed and involved in their care planning. Half told us they weren't aware of a care plan but that they felt well communicated with by ward staff and doctors and that the care they were receiving was good.

The majority of those we interviewed had noticed positive improvements in their mental health since being admitted. One patient told us she had been waiting a long time for an update on a potential discharge to a care home, and that the length of time in between communications with doctors was causing her some anxiety.



"The ward staff and doctors are excellent, very thorough, caring, and understanding. They look after me well, always checking in to see if I'm alright, so I feel safe, loved, and constantly watched over. I'm comfortable raising concerns on medication, the doctors adjusted my sleeping medication dosage as I needed, helping me sleep without it eventually."

# The Woodlands Centre: Oaktree

## Communication with Staff

Most patients were very positive about their communication with ward staff, explaining how they were caring and understanding towards them, and that they felt listened to when raising concerns. Many patients said the ward staff and manager are friendly and do their best to accommodate their needs and requests.

Any negative feedback was related to the timeliness of staff responding to patient concerns, and one patient told us she had not had a positive experience with staff who had raised their voices to her a few times because she “struggles to hear what people are saying.”



“The staff are alright, they get on with the patients well, and I feel cared for. The ward manager is friendly and helps me with my finances, clothes, and walking with me to the shops.”

# The Woodlands Centre: Oaktree

## Access to Information & Support

Overall, patients gave positive feedback about the information provided to them about their rights under the Mental Health Act, and the right to an advocate. There was some uncertainty about accessing physical healthcare during their stay on the ward such as optical and dental appointments. We were assured that patients can make appointments for healthcare whilst on the ward.



■ "I was told my rights, and it was all put in action for me."

■ "I'm not sure if I could have appointments arranged to see opticians/dentists, I haven't had any check-ups since being on the ward."

# The Woodlands Centre: Oaktree

## Access to Visitors

All the patients we interviewed were satisfied with the visiting arrangements on the ward.

# The Woodlands Centre: Hawthorne

## The Ward Environment

Many of the patients we interviewed shared positive experiences overall of the ward environment due the comfortable temperature, spaciousness, privacy, and natural lighting, which created a “lovely environment.”

However, we also received negative feedback regarding television access (there is only one in the communal area), low water pressure in the showers, and the constant noise of the alarms echoing throughout the wards, which was felt to be an annoyance for patients and caused some interrupted sleep.



“I have my own room and can also sit outside my room. The area is spacious and receives a good amount of natural light. I’m also happy with the table on wheels, staff will wheel it to me wherever I decide to sit.”

“The ward space is good; I also like that it’s warm. But the ward echoes, making it hard to sleep, and the buzzer system sound is irritating and goes on for too long.”

# The Woodlands Centre: Hawthorne

## Provision of Meals & Activities

This received positive feedback overall. Patients told us that the food was of a high quality, and that in general the range of options was good. Some patients disagreed that the range of food was adequate and felt the menu did not cater for all dietary requirements stating that it could be “too spicy” and with limited other options.

Most of the patients we spoke to were positive about the activities provided on the ward, but some felt unable to participate due to issues of mobility or lack of motivation. One family member who contacted us to provide feedback felt there weren't enough activities on offer for patients who were staying on the ward for extended periods.



“The food is good, there's plenty of it, and if anything is needed you just need to ask, there's also snacks in between meals. There are plenty of activities, but I can't take part as I need help moving around. I enjoy the TV.”



# The Woodlands Centre: Hawthorne

## Quality of Care & Involvement in Care Plans

Most of the patients we spoke to had a good awareness of their care plans and were satisfied with the level of their involvement in their care planning and treatment. They praised the care that they had received on the ward from orientation on admission, to the attentiveness of the ward staff and specialists. Two patients we interviewed were awaiting assessments from occupational therapy to understand their readiness to be discharged back home or to care homes.

Some patients, who receive physiotherapy as part of their treatment plan, raised the frequency of physiotherapy as a concern. They feel there aren't enough physiotherapists, or physiotherapy sessions available and that with increased sessions per week this would enable them to return home sooner.



"Care here is excellent; I have a care plan and was involved in shaping it. I have high praise for the way my treatment was initiated, being shown around the ward, and orientated. Now I'm waiting just for an assessment and the arrangement of equipment at my home."

"I'm happy with the ward staff and feel able to speak up to the nurses, but I don't always get to speak to the physiotherapist, who I really want to speak to. I want to see the physios more regularly every day, so I can begin walking again and leave."

# The Woodlands Centre: Hawthorne

## Communication with Staff

This received positive feedback overall with comments about staff being approachable and caring. Patients told us they felt able to raise any concerns and felt that they were listened to and acted upon. However, due to capacity issues, consistency and regularity of nursing staff was raised as a concern with many patients telling us they felt they couldn't talk to ward staff as often as they would have liked because the staff didn't have time.



"I feel like more nurses are needed, understaffing leads to inconsistencies and it's why I can't always get a nurse when I need one.

My medication timing is not always followed, but I'm receiving rehab treatment every day after speaking up and requesting it. I feel listened too but feel like I need to speak up to achieve this."

# The Woodlands Centre: Hawthorne

## Access to Information & Support

Information regarding rights under the Mental Health Act were not relevant to this patient group.

# The Woodlands Centre: Hawthorne

## Access to Visitors

Generally, most patients and family members/Carers were satisfied with visiting arrangements, however one patient felt that the visiting times were too strict. This patient, who was in a private room, told us that his mother – his primary carer – was not permitted to visit during mealtimes and that he relies on her to help him eat. Both the patient and his mother felt that not only was this unfair for them (since his mother also works and can't always be flexible with visiting times) but led to greater demand on the nursing staff to support the patient with his meals, support his mother could provide.

One family member also raised concerns with us regarding visiting with children, and that it appeared this was an unusual occurrence that ward staff were unsure how to manage. In fact, the family's perspective was such that it felt children were 'unwelcome' on the ward to visit their grandparents, which they had hoped would be a positive experience for the patient.



**"I don't like that visitors aren't allowed at mealtimes. I rely on my mum during this time, and she has been asked to leave at mealtimes due to policy restrictions."**

## 2 Colham Green

## 2 Colham Green

2 Colham Green Road is a 15-bedded in-patient unit providing a specialist rehabilitation service for people with enduring mental health problems aged between 18 and 65 and living in Hillingdon. It is comprised of:

- 10 single en-suite rooms
- 5 self-contained studio flats

Usually the residents here have been 'stepped-down' from acute mental health settings following a detainment under the Mental Health Act and have relative independence with regards to their daily activities.

## 2 Colham Green

### The Ward Environment

The environment of the unit received overwhelmingly positive feedback from residents, with many telling us that compared to other similar units they've experienced, Colham Green is light, airy and peaceful, with a balance of private and communal spaces. This means residents have their independence but access to a community if they want it, and many felt that this was supportive to their recovery.

Residents were complimentary of the self-contained flats and private rooms, which they felt were comfortable and spacious. However, lack of space in the communal areas was raised as an issue with regards to having private space for visitors (who are not permitted to enter the flats or bedrooms), and not large enough to accommodate all the residents at the same time, particularly during mealtimes. There is a reasonably sized garden at the unit, with a summerhouse that residents can use for meetings and activities, and which provides some additional communal space.



"The environment is well lit and warm, and the flats make me feel more independent, but support is always there. I still spend time in the ward as I prefer to be around the other patients, and being there gives me a sense of purpose since retiring, like cleaning the kitchen.

The space available is quite small, making it difficult to have everyone in the kitchen during mealtimes, and making it awkward to have visitors."

## 2 Colham Green

### Provision of Meals & Activities

As the purpose of 2 Colham Green is to promote rehabilitation and independence, prepared meals are only provided for the residents 3 times per week. In-between times, residents are encouraged, and supported by staff, to buy and prepare their own food for which they can use the communal kitchen or their own if they have one of the flats.

Residents were generally positive about the meals provided, both in terms of quality and quantity, and the facilities available to prepare their own. Residents are also regularly asked for their feedback about the provided food, which is then used to plan future menus.



“Patients are always well fed. Meals are provided on some days, but I don’t enjoy most of them as they are bland or too spicy. Outside of this, all patients get involved in cooking their meals, with coordinators asking for preferences. Snacks, yoghurt, and fruit are also provided between meals. But with kitchens in their own rooms, patients often resort to buying foods that can be cooked easily.”

There are a wide range of activities available for residents to participate in such as art classes, a football club, cooking sessions, and regular outings and excursions. Some residents, particularly those that have been living at Colham Green for 6 months or longer, told us they would like to see greater variety of activities that promote physical activity. Patients told us they would like to have more involvement in the planning of future activities.



# Provision of Meals & Activities

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"I just moved into one of the flats but come to the centre often for the activities. I do find that some aren't really to my liking, but I enjoy going for walks and cooking in the centre. I would like to see patients have more say in the activities we take part in."

"Cook for yourself, gardening, art therapy, dance and movement therapy are all activities I take part in and find helpful. The drugs make you feel stiff, so the movement classes help you get back in touch with your body."

## 2 Colham Green

### Quality of Care & Involvement in Care Plans

Overall, residents were positive about their care and treatment and showed a high level of insight into their conditions and medications. When asked if they felt involved in their care planning, we received mixed responses, with many telling us that they would like greater involvement and more say in their plans to incorporate their individual needs and aspirations for rehabilitation and recovery beyond medication.



"I have a care plan in place, but I'm not sure if I had much say in it or can give any input. I want to be more involved in it, possibly through one-to-one conversations (instead of having just a sheet). I do feel they would have the time if I asked for a conversation."

## 2 Colham Green

### Communication with Staff

This received positive feedback overall with comments about staff being approachable and caring. Patients told us they felt able to raise any concerns and felt that they were listened to and acted upon. However, due to capacity issues, consistency and regularity of nursing staff was raised as a concern with many patients telling us they felt they couldn't talk to ward staff as often as they would have liked because the staff didn't have time.



"Staff have been good to me, I think they are fantastic, supportive, and helpful, and they are what makes this place good. I feel confident in speaking up and feel listened to."

## 2 Colham Green

### Access to Information & Support

Feedback was varied across the residents we interviewed. Where positive, patients were aware that information was available to them on posters around the unit and knew they could ask staff for more information at any time, in addition to asking nurses to contact advocacy services or talk to them when they come in to visit other patients. However, some patients felt that information regarding their rights was limited and not explained to them, relying on their understanding from previous experiences of using mental health services.



"I was told my rights and was given an information sheet with everything on it. I'm a bit unsure of advocacy but have seen it on the posters on the wall and feel like I have enough support, so advocacy is not necessary."

"I feel that access to information on rights is quite limited. I understand that upon arrival it might have been too much to digest. But I wasn't familiar with advocacy and POHWER, and feel that it would be useful."

## 2 Colham Green

### **Access to Visitors**

As this group of patients are granted unaccompanied leave, visiting arrangements were not of high concern, and most choose to meet with family members and friends elsewhere. Comments made were with regards to the lack of private space for visitors and limited visiting hours.

## Additional Comments

Whilst not a reflection of the mental health service itself, we feel it's important to highlight that a common thread across many of the interviews we held with patients in Colham Green (and Hawthorne) indicate wider systemic factors as negatively influencing their care planning, treatment, and rehabilitation.

Access to adequate housing was raised by patients, Carers, and staff on many occasions, with several patients we spoke to unable to be discharged from the units due to having no suitable accommodation to move on to, even though they had been assessed as ready for discharge. Several patients had been waiting 6 months or longer for housing, and for communication regarding their housing application status.

We understand from patients that the length of time and lack of communication (which can be for several months or longer) following a housing application leads to uncertainty, frustration, and a general feeling and perception of patients that they have either been forgotten or even discriminated against by the system due to their mental health challenges. We recognise that not only does this place significant stress on the mental health service's resources but also risks the successful integration of patients back into the community, and their ability to live independently.

## Reflections & Recommendations

# What's Working Well

Through our conversations with patients and our own experience of spending time on the wards, we identified many areas of good practice that we feel are important to highlight in this report.

## **The gym facility on Crane and Frays wards**

Access to physical activity was strongly highlighted by patients as a key factor for improving their mental health and supporting their recovery. We recommend that the gym is made widely available and accessible for patients when they wish to use it, with a full timetable of activities to help them maintain a healthy weight and improve their overall health outcomes whilst in residence.

## **Peer support**

On Crane and Frays wards we observed the positive relationships between patients and the peer support workers employed by the trust. We recognise the valuable role peer supporters, with lived experience, can have in providing insight to the service and practitioners, supporting communication with patients and enabling greater understanding between patients and staff.

## **The provision of meals**

Whilst this would benefit from some improvement, overall, the feedback we received from patients across all units was mostly positive regarding quality, quantity, and choice.



# What's Working Well

## Care and support from ward staff

Generally, staff across all the units we visited received high praise from patients regarding the care and support they provided, with patients telling us that the staff are friendly and helpful. There is no doubt that the attitude of staff has a significant influence on patient experience and in these cases, where patients may be detained or admitted for months (even as long as a year in some cases), fostering positive relationships between staff and patients is extremely important.

## The ward environment at Hawthorne, Oaktree and Colham Green

Patients told us the wards are, and we also found them to be, spacious, warm, filled with natural light, and with easy access to communal garden areas. The atmosphere in each of these wards was also calm and peaceful. In the units for older adults, the furniture and décor are dementia friendly and considerate to those with visual impairments. There were also handrails in the main ward areas in Hawthorne and Oaktree, and mobility aids in the Hawthorne unit.

# 1. Ward Environment

## Crane & Frays Wards:

### Vaping

The smell of vaping on both wards was overwhelming, and in an already cramped enclosed communal area, exacerbated feelings of claustrophobia. In-patients who choose to smoke told us that being unable to access outside space and a smoking area increased their anxiety on the wards. The NHS has to enforce smoke-free wards under legislation, in which case, providing vapes is the best alternative. For those who don't smoke, however, the vaping is overpowering and affects their comfort on the wards. We recommend a review of nicotine replacement therapy options with the aim of improving the ward environment.

### Security of personal items

Most of the patients we interviewed told us about personal belongings being taken out of their rooms by other patients. We recommend the trust review their current policy on individual room locks to protect patients' personal belongings, and privacy, which may also reduce some of the tension on the wards.

### Support to improve sleep and sleep hygiene

Sleep disturbance, due to patients entering each other's rooms during the night and general noise on the wards, was cited by many patients as having a detrimental impact on their mental health and recovery, leading to lethargy and lack of motivation to participate in activities during the day. As above, we would suggest that more could be done to protect patient privacy whilst enabling ward staff easy access to patient rooms when needed.

## Even Better If...

### **Increased access to the communal garden on Crane ward**

Whilst the garden is an asset to the ward, currently access to it is limited. Many of the patients told us that as the only outdoor space available to them, they would like more opportunities to use it, and be involved in cultivating and maintaining it, and that this would be beneficial to their mental health and recovery. Tools and guidance for gardening was suggested as a regular activity for patients that would support their overall health and wellbeing by giving them a sense of purpose and the opportunity to develop new skills.

### **Oaktree Ward:**

#### **Review interventions and adaptations to prevent falls and frailty**

The age range of patients on Oaktree ward is generally over 65 years, and the majority have impaired mobility. One patient told us her experience of falling because she found it difficult to manage the turn from the hallway into her bedroom. She told us a grab rail by the door would have made a difference.

## 2. Provision of Meals & Activities

### Crane & Frays Wards:

#### Activities that promote general wellbeing

One of the key things that our representatives observed, and heard from patients, was the limited number of activities available on the wards in the evenings and at weekends, that promote overall health and wellbeing, which we believe would not only support treatment but promote a person-centred approach to recovery and reablement. Some of the patients we spoke to enjoy creative writing, and others suggested activities they can do by themselves that promote mindfulness or learning would be helpful. An understanding of patients' hobbies and preferences would be beneficial in developing future activities outside of the existing therapeutic offer that can be accessed on the wards.

Whilst the gym and fitness instructor are a great asset to the wards, patients told us they would like to see a greater variety of physical activity offers such as yoga, and accompanied local walks.

### Oaktree Ward:

**Activities that promote strength and balance and prevent falls and frailty** Some of the patients we interviewed on Oaktree ward told us that due to being more sedentary since their admission, they were concerned they were becoming frail and losing their strength and mobility. For older people, maintaining their fitness is key to their rehabilitation and being able to live as independently as they can post-discharge.

# Even Better If...

## All Wards

### Review current food menus

Whilst in general, patients gave positive feedback about the food, the menus would benefit from a review of nutritional quality and balance, and cultural preferences. Encouraging patients to provide feedback on a regular basis would enable the Trust to ensure it is able to provide meals that cater for a broad range of dietary requirements and preferences.

### Review existing activities

Whilst we observed there are a wide range of activities on offer, we understood from many of the patients we spoke to across all wards that there was a lack of motivation to participate for reasons including mobility, lethargy, preference, and social anxiety when participating in groups. We would strongly advise seeking regular feedback on activities to ensure they meet patient need and provide a greater choice of activities (including physical activity) that patients can participate in on an individual basis, especially since we recognise there is a lack of capacity to accompany patients on section 17 leave.

### 3. Quality of Care & Involvement in Care Planning

#### All Wards:

Promote greater involvement of patients and their Carers/family members in care planning

A common theme from patients and the carers we spoke to is the lack of involvement in care planning and treatment, leaving room for misunderstandings between patients and professionals, and Carers unclear about how to best support their family members. Patients and Carers are partners in their care. Lack of ownership of care and treatment increases the likelihood of patients not adhering to their medication, in turn leading to further acute episodes.

The Triangle of Care, developed in recognition of the important role Carers play in supporting patients and professionals, provides a best practice guide to involving the patient and the Carer in the planning of care and treatment in hospital settings. We recommend that this be promoted across all of the acute settings, and that patients and Carers are informed of their right to be involved.

#### Plan care for the whole-person

Care plans are focussed on patients' mental health conditions and treatment via medication. Patients told us they would like more consideration given to their physical health requirements and concerns as part of care planning, with some telling us they've raised concerns about their physical health but feel they haven't been taken into account.

# Even Better If...

## Crane & Frays Wards:

Explore options to better facilitate Section 17 accompanied leave, or access to outside space

A common thread in what patients told us was the lack of opportunity to access outdoor spaces and take walks, which they believe would help to improve their overall mental and physical health whilst detained.

### Review restraint practices and emotional support following use of restraints

A concern of both patients and Carers is the, what can appear as, excessive force used when restraining patients who may appear aggressive and as a potential threat to staff and other patients. A significant number of the patients we interviewed (both acute and recovering) shared their experiences of this with us, and explained how the trauma can be long-lasting afterwards, affecting their rehabilitation and enduring mental health and wellbeing due to feelings of anger, powerlessness and loss of dignity, with one patient describing how the experience left him feeling “violated.”

### 4. Access to Information & Support

#### Crane & Frays Wards:

**Increase the visibility and communication of meaningful information about rights and access to support**

The patients we spoke to that demonstrated a good understanding of their rights under the Mental Health Act, were generally those that had been known to the mental health service for many years, with repeated admissions to acute settings. New patients showed a lack of understanding despite information being provided in the form of a patient handbook. We recommend a review of the information currently provided and further discussions with patients to understand how information can be made more accessible and presented in a meaningful and bespoke way that patients can understand.

**Improve communication and advice about medications, their purpose, and common side-effects**

Many of the patients we spoke to had been prescribed medication, but demonstrated a lack of understanding and clarity about why they needed it. Some patients told us that they felt so badly affected by the side effects of the medications that they refused to take them. Our recommendation is to provide opportunities for patients to learn about the medications they are prescribed and what side-effects to expect so they can better self-manage their treatment post-discharge.



## Even Better If...

### **Improve information and communication regarding advocacy and access to local advocacy services**

Many of the patients we spoke to did not know they had the right to access an advocate, nor did they have a clear understanding of the role of an advocate and how they could support the patient.

### **Improve the information provided to support preparation for discharge**

This includes information on medication and medicines management, emergency contact numbers, information regarding both statutory and voluntary sector support and health & wellbeing activities that are available for residents in Hillingdon such as community-based groups and sports and physical activity opportunities.

### 5. Access to Visitors

#### Crane & Frays Wards:

Improve security and privacy for visitors on the acute wards

Whilst feedback regarding visiting arrangements were generally positive, concerns were raised regarding the safety of family members and friends when visiting, in addition to the lack of private space.

### 6. The Importance of the Patient Voice

**Develop wider opportunities for regular and systematic patient feedback**

During our visits, patients told us how much they appreciated our contact and the opportunity to share their views and experiences confidentially. The systematic collection of feedback from patients can support the Trust to review what's working well and where improvements can be made in real time, enabling continuous improvement and monitoring of the service, ensuring it meets patients' needs. We recommend the Trust review its existing approaches to patient and Carer engagement and involvement to identify opportunities to gather and review feedback on a regular basis

# Next Steps

Our recommendations have been positively received by CNWL who have developed an improvement plan for Crane, Frays and Oaktree wards to be implemented from 2024 onwards.

The ward improvement plans include:

- Nutritional information and calorie content to be stated on food menus to empower patients to make healthier, more informed food choices.
- A review of Nicotine Replacement Therapies to reduce vaping (and the smell of vape) on the wards.
- A new fitness instructor, and structured exercise plan to promote and support physical activity on Crane and Frays wards.
- A sleep hygiene pack for patients, on admission to Crane and Frays wards.
- A review of room security to maintain staff access but reduce access to other patients.
- Strength & balance focussed exercise in Oaktree ward.
- A review of mobility aids and adaptations on Oaktree ward.
- Weekly information sessions on Crane and Frays wards with a pharmacist to discuss concerns around medication and side effects.
- A discharge pack with information about support in the community post-discharge.



# healthwatch Hillingdon

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