

North East London NHS Foundation Trust

# Wards for older people with mental health problems

## Quality Report

Sunflowers Court  
Goodmayes Hospital  
157 Barley Lane  
Goodmayes  
Ilford, IG3 8XJ  
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Website: [www.nelft.nhs.uk](http://www.nelft.nhs.uk)

Date of inspection visit: 20 October 2015  
Date of publication: 26/01/2016

## Locations inspected

Location ID	Name of CQC registered location	Name of service (e.g. ward/unit/team)	Postcode of service (ward/unit/team)
RATY1	Sunflowers Court	Stage ward	IG3 8XJ

This report describes our judgement of the quality of care provided within this core service by North East London NHS Foundation Trust. Where relevant we provide detail of each location or area of service visited.

Our judgement is based on a combination of what we found when we inspected, information from our 'Intelligent Monitoring' system, and information given to us from people who use services, the public and other organisations.

Where applicable, we have reported on each core service provided by North East London NHS Foundation Trust and these are brought together to inform our overall judgement of North East London NHS Foundation Trust.

### **Mental Health Act responsibilities and Mental Capacity Act / Deprivation of Liberty Safeguards**

We include our assessment of the provider's compliance with the Mental Health Act and Mental Capacity Act in our overall inspection of the core service.

We do not give a rating for Mental Health Act or Mental Capacity Act; however we do use our findings to determine the overall rating for the service.

# Summary of findings

Further information about findings in relation to the Mental Health Act and Mental Capacity Act can be found later in this report.

# Summary of findings

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# Summary of findings

## Overall summary

The previous inspection of services for older people with mental health problems at Sunflowers Court was carried out in December 2014 under our previous inspection regime. Consequently, the service was not rated.

This inspection, carried out on 20 October 2015, focused on whether North East London NHS Foundation Trust had made improvements in relation to those areas where the service was previously non-compliant with health and social care regulations. We did not make any judgements about ratings.

Services for older people with mental health problems will be rated at the next comprehensive inspection of North East London NHS Foundation Trust.

This inspection found:

- Staff knew how to access emergency equipment, such as ligature cutters, in an emergency.
- Staff had developed individual plans to manage the risks to the health and safety of each patient.

- Relatives reported that staff cared for patients safely.
- Staff treated patients with kindness and respect.
- Staff supported patients to participate in activities.
- Patients and relatives on both wards were able to access information about how to complain and advocates visited the ward.
- Overall, staff involved patients and their relatives in planning and reviewing their care and treatment.

However:

- Where patients lacked mental capacity, staff had not fully involved relatives in making decisions about their family member's care and treatment.
- Minutes of community meetings did not always explain how staff would address the complaints and concerns raised by patients.
- Patients were not supported to make advance directives about their care and treatment.

# Summary of findings

## The five questions we ask about the service and what we found

### **Are services safe?**

We have not rated this service yet. We will fully report on this question and provide a rating after the next comprehensive inspection of the service.

This focused inspection found:

- Staff knew how to access equipment, such as ligature cutters in an emergency.
- Staff kept risk assessments up to date but they did not always fully explain how risks were managed in patient care records.
- Relatives reported that staff cared for patients safely.

### **Are services effective?**

We did not inspect the service in relation to this question during this focused inspection. We will report on this question and provide a rating after the next comprehensive inspection of the service.

### **Are services caring?**

We have not rated this service yet. We will fully report on this question and provide a rating after the next comprehensive inspection of the service.

This focused inspection found:

- Staff treated patients with kindness and respect.
- Overall, staff involved patients and their relatives in planning and reviewing their care and treatment.

However:

- Where patients lacked mental capacity, staff had not fully involved relatives in making decisions about their family member's care and treatment.
- Patients were not supported to make advance directives about their care and treatment.

### **Are services responsive to people's needs?**

We have not rated this service yet. We will fully report on this question and provide a rating after the next comprehensive inspection of the service.

This focused inspection found:

# Summary of findings

- Staff supported patients to participate in activities.
- Patients and relatives were able to access information about how to complain and advocates visited the ward.

However:

- Minutes of community meetings did not always explain how staff would address the complaints and concerns raised by patients.

## **Are services well-led?**

We did not inspect the service in relation to this question during this focused inspection. We will report on this question and provide a rating after the next comprehensive inspection of the service.

# Summary of findings

## Information about the service

Stage ward is a service for older people with mental health needs that cares for up to ten men, who are deemed to be frail. Admitted patients are usually aged over 65, although younger adults may be admitted when appropriate, typically with early onset dementia.

The service works with people who have either organic or functional mental health problems, which are complex enough to require a period on inpatient treatment. Functional mental illness describes conditions

of acute psychiatric illness such as depression, anxiety or psychosis. Organic mental illness mostly describes dementia as well as other conditions which result from brain injury. Some may also be frail and have other medical conditions.

The multi-disciplinary staff on the ward includes a consultant psychiatrist, nurses, psychologists and occupational therapists.

## Our inspection team

The team that inspected Stage ward consisted of five people: two CQC inspectors, an inspection manager, a

nurse specialist advisor, a pharmacy inspector and an expert by experience. The expert by experience is a person who has developed expertise in relation to health services by using them.

## Why we carried out this inspection

At our previous inspection of services for older people with mental health problems at Sunflowers Court in December 2014, we found the service was not compliant with all the required health and social care regulations. We identified that regulations were not being met because:

- There was a lack of risk management planning, which put people who use the service and others at risk.
- Patients' views and experiences were not taken into account in relation to their care and treatment and sometimes staff did not treat people with respect.
- People were not provided with appropriate information in relation to their care.
- There was a lack of appropriate opportunities and support for people in relation to activities and promoting their autonomy.

We asked North East London NHS Foundation Trust to make improvements. We carried out this focused inspection on 20 October 2015 to check whether the trust had taken effective action to ensure the service complied with the required standards.

We carried out the December 2014 inspection of wards for older people with mental health problems at Sunflowers Court under our previous inspection regime. Consequently, we did not rate the service.

This focused inspection, carried out on 20 October 2015, checked whether North East London NHS Foundation Trust had made improvements in relation to those areas where the service was previously non-compliant with health and social care regulations.

We will rate services for older people with mental health problems at our next comprehensive inspection of North East London NHS Foundation Trust.

# Summary of findings

## How we carried out this inspection

This inspection was focused on checking whether the service was meeting the required standards in relation to:

- How staff managed risks to patients.
- Patient involvement in planning their care and treatment.
- Patient access to activities.

During the inspection visit, the inspection team:

- Visited Stage ward.

- Read five patient records on Stage ward.
- Spoke with five patients on Stage ward.
- Spoke with two relatives of people using the service.
- Spoke with the manager of Stage ward.
- Spoke with the matron responsible for the ward.
- Spoke with two other nurses.

## Areas for improvement

### Action the provider **SHOULD** take to improve

- The trust should ensure that the minutes of community meetings explain how staff will address the complaints and concerns raised by patients.
- The trust should ensure patients are supported by staff to make advance directives about their care and treatment.
- The trust should ensure that where patients have been assessed as not having capacity to consent to their care and treatment their relatives should be involved in decisions regarding their care.

North East London NHS Foundation Trust

# Wards for older people with mental health problems

## Detailed findings

**Name of service (e.g. ward/unit/team)**

Stage ward

**Name of CQC registered location**

Sunflowers Court

# Are services safe?

By safe, we mean that people are protected from abuse\* and avoidable harm

\* People are protected from physical, sexual, mental or psychological, financial, neglect, institutional or discriminatory abuse

## Our findings

### Safe and clean environment

- At our previous inspection in December 2014 we found that patients were at risk because some staff did not know the location of ligature cutters to use in an emergency.
- The trust told us that, since our previous inspection, staff have received additional training and supervision in relation to accessing emergency equipment. At this inspection, we found the trust had mitigated this risk. We spoke with three nursing staff. They all knew the location of the ligature cutters.
- Records confirmed that staff checked emergency equipment each day to ensure it was readily accessible and well-maintained.
- The ward manager explained to us the measures which were in place on Stage ward to mitigate identified ligature risks. For example, staff kept locked those rooms with identified ligature risks. They risk assessed each patient's access to these rooms to make sure patients were safe.

### Assessing and managing risk to patients and staff

- At our previous inspection, in December 2014, we found that staff had identified and reviewed the risks to each patient but had not developed management plans to ensure that these risks were minimised.
- Following that inspection, the trust management team told us they had taken action to improve the way staff managed risks to patients. At this inspection, we confirmed that managers checked how nursing staff were completing records during monthly supervision

sessions. We read a record of a recent supervision meeting. During the meeting the ward manager had reviewed a nurse's recording and made suggestions to ensure the nurse appropriately updated care plans.

- A nurse showed us how they completed a weekly audit of care records. We noted that these audits checked whether documents had been completed and updated. They did not look for evidence of good practice or areas for improvement. We spoke to the matron responsible for the ward about this. They showed us a new monthly audit form which had been introduced in September 2015, which aimed to identify quality issues. We saw that the ward manager followed up identified issues with individual staff.
- At this inspection we confirmed that the multi-disciplinary team had made arrangements to manage risks to people. Staff told us they reviewed the current risks to each patient during nursing handovers (three times each day) and management handovers (with the ward doctors once each day).
- We read four care records. Staff had made appropriate plans to manage individual risks. For example, staff had increased the observation of a patient who had fallen on the ward. In the case of another patient staff had noted that they could be aggressive to staff when they supported them with personal care. However, there was nothing in the patient's care records about how staff should interact with the patient to minimise the risk of aggression.
- The ward manager told us that staff on Stage ward were due to have training on care planning in the next week.
- We were unable to speak with patients about whether they felt safe on Stage ward due to their complex mental health needs. Two relatives told us they were involved in discussions about managing risks and felt patients were cared for safely on the ward.

# Are services effective?

By effective, we mean that people's care, treatment and support achieves good outcomes, promotes a good quality of life and is based on the best available evidence.

## Our findings

We did not inspect the service in relation to this question during this focused inspection. We will report on this question and provide a rating after the next comprehensive inspection of the service.

# Are services caring?

By caring, we mean that staff involve and treat people with compassion, kindness, dignity and respect.

## Our findings

### Kindness, dignity, respect and support

- At our previous inspection of Stage ward in December 2014, patients told us that staff did not always treat them with respect. They said that whilst some staff were working on the ward they spoke to each other in their native language and used their mobile phones.
- At this inspection staff told us that since the last inspection, their managers had reminded them of how they should behave in a way that was respectful to patients. We saw the directions staff had received on this.
- We observed that staff were friendly and caring towards patients whilst we were on the ward. Two relatives, who visited the ward frequently, said they had always found staff to be courteous and respectful towards them and patients.

### The involvement of people in the care that they receive

- At our previous inspection of Stage ward in December 2014, patients told us that staff did not always treat them with respect. They said that whilst some staff were working on the ward they spoke to each other in their native language and used their mobile phones.

- Due to their complex mental health needs we were unable to ask patients on Stage ward if staff had discussed their care and treatment with them. Two relatives told us staff had invited them to attend ward rounds and multi-disciplinary meetings to discuss patient care and discharge plans. However, they told us staff had not asked them to read a copy of the patient's care plan or comment on it.
- We looked at the care records of two patients who staff had assessed as not having the mental capacity to consent their care and treatment on the ward. In each case, staff had not recorded how they had involved the patient's relative in the development and review of the care plan or whether the relative had received a copy of the patient's care plan.
- We noted that care records did not include any advance directives from patients in relation to their wishes about their care and treatment. A senior manager told us that, although the trust had a policy on advance directives, there had not been an associated implementation plan to promote their use. Staff had not been trained to promote the use of advance directives and consequently, they were seldom used by patients.

# Are services responsive to people's needs?

By responsive, we mean that services are organised so that they meet people's needs.

## Our findings

### **The facilities promote recovery, comfort, dignity and confidentiality**

- At our previous inspection, patients told us they did not have somewhere secure to store their possessions. At this inspection, we found that patients had a safe for valuables in their bedroom.
- At our previous inspection we were concerned about a lack of available activities. During this inspection, we observed staff supported patients to engage in activities such as playing board games. Relatives told us they thought there were a suitable range of activities available for patients.

### **Meeting the needs of all people who use the service**

- At our previous inspection, we found a lack of readily accessible information on display in the wards for

patients. For example, in relation to how people could make a complaint or contact external services, such as advocacy and the Care Quality Commission. At this inspection, we found that this had been rectified and appropriate information about making a complaint was available to patients on the ward.

- Additionally, at our previous inspection we found there were no signs on the exit to inform people, not detained under the Mental Health Act 1983, of their right to be able to leave the ward. At this inspection, we saw that this had been rectified.
- There were notice boards on the ward for staff and relatives. The two relatives we spoke with said they had received information about the ward and knew how to make a complaint if they wished to.
- We read brief notes of community meetings which took place on the ward. The notes included a section on complaints and compliments. It was not from the notes how staff supported patients to make complaints and how these were followed up.

# Are services well-led?

By well-led, we mean that the leadership, management and governance of the organisation assure the delivery of high-quality person-centred care, supports learning and innovation, and promotes an open and fair culture.

## Our findings

We did not inspect the service in relation to this question during this focused inspection. We will report on this question and provide a rating after the next comprehensive inspection of the service.