

Elysium Healthcare Limited

# Spring Wood Lodge

## Inspection report

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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

### Ratings

#### Overall rating for this location

Good



Are services safe?

Requires Improvement



Are services effective?

Good



Are services caring?

Good



Are services responsive to people's needs?

Good



Are services well-led?

Good



# Summary of findings

## Overall summary

Our rating of this service stayed the same. We rated it as good because:

- We undertook a focussed inspection of the safe and well-led key questions and found that the previous ratings for the service continued to reflect the quality of care provided.
- The service demonstrated that governance processes mostly operated effectively at ward level and that performance and risk were managed well. Leaders had good understanding of the services they managed, and were visible in the service. Managers had effective oversight of the service and they took effective and immediate remedial action in response to concerns raised by the inspection team. Managers were aware of the cultural issues faced by the service and they were acting to make improvements.
- We found good practice in the specific areas of the effective, caring and responsive key questions we reviewed during this inspection.

However:

- We identified a breach of regulation in relation to recording observations and reporting incidents of restraint and issued the provider with a requirement notice. The provider's breach of regulation limited the rating for the safe key question to 'requires improvement'.
- Both prior to and during the inspection staff told us that there was divisive culture in the service and shared their concerns about the services approach to balancing patients' risks and restrictions. Staff did not consistently feel respected, supported, valued and able to raise concerns without fear of retribution. Managers were aware of the cultural issues faced by the service and they were acting to make improvements.

What people who use the service say:

- We received mostly positive feedback from people who used the service. Most patients told us that they felt safe in the service and that staff were supportive and caring. Some patients knew the details of their care plan and told us how their access to items depended on their risks which staff individually assessed. Patients were less positive about the food offered by the service and some patients told us that they would like the service to offer more activities.

# Summary of findings

## Our judgements about each of the main services

### Service

**Long stay or rehabilitation mental health wards for working age adults**

### Rating

**Good**



### Summary of each main service

Our rating of this service stayed the same. We rated it as good because:

- We undertook a focussed inspection of the safe and well-led key questions and found that the previous ratings for the service continued to reflect the quality of care provided.
- The service demonstrated that governance processes mostly operated effectively at ward level and that performance and risk were managed well. Leaders had good understanding of the services they managed, and were visible in the service. Managers had effective oversight of the service and they took effective and immediate remedial action in response to concerns raised by the inspection team. Managers were aware of the cultural issues faced by the service and they were acting to make improvements.
- We found good practice in the specific areas of the effective, caring and responsive key questions we reviewed during this inspection.

However:

- We identified a breach of regulation in relation to recording observations and reporting incidents of restraint and issued the provider with a requirement notice. The provider's breach of regulation limited the rating for the safe key question to 'requires improvement'.
- Both prior to and during the inspection staff told us that there was divisive culture in the service and shared their concerns about the services approach to balancing patients' risks and restrictions. Staff did not consistently feel respected, supported, valued and able to raise concerns without fear of retribution. Managers were aware of the cultural issues faced by the service and they were acting to make improvements.

# Summary of findings

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# Summary of this inspection

## Background to Spring Wood Lodge

We inspected Spring Wood Lodge because we received information giving us concerns about the safety and quality of the services.

Spring Wood Lodge is an inpatient rehabilitation service provided by Elysium Healthcare Limited. The service provides care to a maximum of 21 female patients. There are two wards; Bronte and Byron.

- 9 bedded high dependency inpatient rehabilitation (Bronte Ward)
- 12 bedded inpatient rehabilitation (Byron Ward)

Spring Wood Lodge has been registered with the Care Quality Commission since October 2016 to carry out the following regulated activities:

- Assessment and treatment for persons detained under the Mental Health Act 1983
- Treatment of disease, disorder or injury
- Diagnostic and screening procedures

The Care Quality Commission last carried out a comprehensive inspection of this service on 9 January 2019. At that inspection we rated the service as 'good' overall with ratings of 'requires improvement' in the safe key question, and 'good' in the effective, caring, responsive and well-led key questions.

The provider was in breach of one regulations of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014:

- Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment: Care and treatment was not provided in a safe way for patients because staff did not adhere to infection prevention and control guidance in relation to the wearing of nail varnish and false nails. The clinic room was cluttered and was being used as storage for a number of items and cleaning of the clinic room varied in regularity with records not stipulating how often clinic rooms should be cleaned.

We found that the provider had taken action to address these areas of concern. However, we identified new areas of concern which meant that the provider continued to breach Regulation 12.

## How we carried out this inspection

You can find information about how we carry out our inspections on our website: <https://www.cqc.org.uk/what-we-do/how-we-do-our-job/what-we-do-inspection>.

During the inspection we visited both wards, looked at the quality of the environment and observed how staff were caring for patients. We spoke to patients who were using the service. We spoke to staff providing care and managers responsible for leading the service. We also reviewed patients' care records and range of policies and procedures and other documents relating to the running of the service.

## Areas for improvement

### Action the provider must take to improve

# Summary of this inspection

- The provider must ensure that care and treatment is provided in a safe way for service users. The provider must assess the risks to the health and safety of service users of receiving the care or treatment and do all that is reasonably practicable to mitigate any such risks. This includes ensuring staff complete and record patients' continuous observations and staff report all incidents involving the use of restraint. (Regulation 12)

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

- The provider should ensure action is taken to improve culture in the service to ensure that all staff feel respected, valued and able to raise concerns without fear of retribution.
- The provider should ensure staff consistently document the use of de-escalation in incidents involving the use of restraint.
- The provider should work to reduce the use of agency staff to support safe staffing levels through continued recruitment of permanent qualified and non-qualified staff.

# Our findings

## Overview of ratings

Our ratings for this location are:

	Safe	Effective	Caring	Responsive	Well-led	Overall
Long stay or rehabilitation mental health wards for working age adults	Requires Improvement	Good	Good	Good	Good	Good
Overall	Requires Improvement	Good	Good	Good	Good	Good

# Long stay or rehabilitation mental health wards for working age adults

Good 

Safe	Requires Improvement 
Effective	Good 
Caring	Good 
Responsive	Good 
Well-led	Good 

## Are Long stay or rehabilitation mental health wards for working age adults safe?

Requires Improvement 

Our rating of safe stayed the same. We rated it as requires improvement because:

- We identified a breach of regulation in relation to recording observations and reporting incidents of restraint and issued the provider with a requirement notice. The provider's breach of regulation limited the rating for the safe key question to 'requires improvement'.
- Staff did not consistently follow good policies and procedures for use of observation. Staff did not consistently record patients' continuous observations in line with the provider's policy, so it was unclear whether staff were consistently undertaking observation as they should.
- Staff did not consistently recognise incidents of the use of restraint and report them appropriately. Patients' continuous observation records showed examples of incidents of the use of restraint which staff had not reported using the electronic incident reporting system.
- Whilst the service ensured safe staffing levels, there were a high number of vacancies for qualified nurses. The high numbers of patients requiring continuous observations meant that the service had a high number of vacancies for recovery workers to support these observations. The service relied on agency staff to support the number of patients requiring continuous observations.
- The use of restraint had significantly increased since the last inspection. The service specification had changed since the last inspection which meant that the service now admitted patients with high risk of self-harm. Staff said they used restraint and rapid tranquilisation only after attempts at de-escalation had failed, however restraint records did not consistently include evidence of the use of de-escalation techniques.

However:

- All wards were safe, clean, well equipped, well furnished, well maintained and fit for purpose. Clinic rooms were fully equipped with accessible resuscitation equipment and emergency drugs that staff checked regularly. Staff maintained equipment well and kept it clean. Ward managers took immediate action to rectify minor issues identified by the inspection team in the clinic rooms. The service had introduced a lead role for ensuring ongoing infection prevention and control including monitoring staff use of personal protective equipment and regular cleaning of frequent touchpoints and equipment. Staff had easy access to alarms and patients had easy access to nurse call systems. Nurse call alarms were appropriately checked and maintained.



# Long stay or rehabilitation mental health wards for working age adults

Good 

- Staff had received basic training to keep patients safe from avoidable harm. Staff were up to date with appropriate mandatory training including training in how to respond with life support in emergency situations, manage violence and aggression, and infection prevention and control.
- Staff managed risks to patients and themselves well. Staff did a risk assessment of every patient on admission and updated it regularly, including incidents. Staff consistently demonstrated an awareness of individual patients' risks and how to manage risk. Our review of risk management plans showed that staff implemented restrictions as part of patient care based on individualised risk assessment.
- The ward staff participated in the provider's restrictive interventions reduction programme which focussed on reducing the use of rapid tranquilisation. Data provided by the service showed that since April 2020, staff had significantly reduced incidents involving the use of rapid tranquilisation and almost eliminated the use of prone restraint.
- The wards had a good track record on safety. Staff understood how to protect patients from abuse and the service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it. Data provided by the service showed that staff ensured safeguarding concerns were reported to the local authority.
- Staff had easy access to clinical information. The service used systems and processes to safely prescribe, administer, record and store medicines. Staff regularly reviewed the effects of medications on each patient's physical health. Medical staff took immediate action to rectify minor areas of concern in relation to patients' medication charts.

## Are Long stay or rehabilitation mental health wards for working age adults effective?

Good 

Our rating of effective stayed the same. We rated it as good following our inspection in January 2019. We did not inspect all of our key lines of enquiry within the effective key question in this inspection. However, we found the following good practice:

- Staff assessed the physical and mental health of all patients on admission. They developed individual care plans, which they reviewed regularly through multidisciplinary discussion and updated as needed. Care plans reflected the assessed needs, were personalised, holistic and recovery oriented.

## Are Long stay or rehabilitation mental health wards for working age adults caring?

Good 

Our rating of caring stayed the same. We rated it as good following our inspection in January 2019. We did not inspect all of our key lines of enquiry within the caring key question in this inspection. However, we found the following good practice:

- Staff treated patients with compassion and kindness. They respected patients' privacy and dignity. They understood the individual needs of patients and supported patients to understand and manage their care, treatment or condition.

# Long stay or rehabilitation mental health wards for working age adults

Good 

## Are Long stay or rehabilitation mental health wards for working age adults responsive?

Good 

Our rating of responsive stayed the same. We rated it as good following our inspection in January 2019. We did not inspect all of our key lines of enquiry within the responsive key question in this inspection. However, we found the following good practice

- Staff planned and managed discharge well. They liaised well with services that would provide aftercare and were assertive in managing the discharge care pathway. As a result, patients did not have excessive lengths of stay and discharge was rarely delayed for other than a clinical reason.

## Are Long stay or rehabilitation mental health wards for working age adults well-led?

Good 

Our rating of well-led stayed the same. We rated it as good because:

- Leaders had the skills, knowledge and experience to perform their roles, had a good understanding of the services they managed, and were visible in the service. Managers were aware of issues in the service in relation to the staff culture and were acting to make improvements. Local managers had sought support from regional managers to work with staff to understand their concerns and their responses to the staff survey and make improvements.
- Our findings from the other key questions demonstrated that governance processes mostly operated effectively at ward level and that performance and risk were managed well. Managers took effective and immediate remedial action in response to concerns raised by the inspection team. Managers had a clear understanding of the risks faced by the service and the control measures in place. Managers ensured good governance through regular monitoring of key performance indicators.
- Ward teams had access to the information they needed to provide safe and effective care and used that information to good effect. Information governance systems included confidentiality of patient records. Team managers had access to information to support them with their management role. This included information on the performance of the service, staffing and patient care.
- Managers had a clear understanding of the vision and purpose of the service in line with the new service specification.

However:

- Not all staff felt respected, supported and valued. Staff criticised the service's approach to providing opportunities for career progression. Not all staff felt able to raise concerns without fear of retribution. Staff told us that there was divisive culture in the service. Some staff shared their concerns about the new service model, particularly the services' approach to balancing patients' risks and restrictions.

This section is primarily information for the provider

## Requirement notices

### Action we have told the provider to take

The table below shows the legal requirements that were not being met. The provider must send CQC a report that says what action they are going to take to meet these requirements.

#### Regulated activity

Assessment or medical treatment for persons detained under the Mental Health Act 1983

Treatment of disease, disorder or injury

Diagnostic and screening procedures

#### Regulation

Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment

**The provider did not ensure that care and treatment was provided in a safe way for service users. Staff did not consistently complete and record patients' continuous observations. Staff did not consistently report all incidents involving the use of restraint.**