

## Enter and View – Visit Report

Name of Supported Living Scheme: Brianwood House, 3 Salmon Street, Brent  
Scheme Provider Voyage Care  
Acting Field Supervisor: Doris Rice  
Email: [DorisRice@voyagecare.com](mailto:DorisRice@voyagecare.com)  
Cc: Alister Mc Harris [Operational Manager]  
Email: [allistermcharrie@voyagecare.com](mailto:allistermcharrie@voyagecare.com)  
Website: <https://www.voyagecare.com>

Date of visit: 4.07.2019

Healthwatch Brent Ibrahim Ali [Projects Officer Healthwatch Brent]

Authorised representatives: Nisha Gohil & Mary Oyemade [Healthwatch Brent Volunteers]

Author Ibrahim Ali

### Introduction and Methodology

This was an announced Enter and View (E&V) visit undertaken by Healthwatch Brent Project Officer & authorized Enter & Volunteers, as part of a planned strategy to look at a range of health and social care services within the London Borough of Brent to obtain a better idea of the quality of care provided. Healthwatch Brent E&V authorized representatives have statutory powers to enter Health and Social Care premises, announced or unannounced, to observe and assess the nature and quality of services and obtain the views of the people using those services. The aim is to report the service that is observed, to consider how services may be improved and how good practice can be disseminated.

The Healthwatch Brent team visit the service and record their observations along with the feedback from residents, relatives, carers and staff. The report is based on observations and interviews with residents, relatives, carers, staff - with recommendations. The Report is sent to the registered Scheme Manager for comments, corrections and responses to the recommendations. The final version is then sent to interested parties, including the Head Office of the managing organisation, the Health Overview and Scrutiny Committee, Adults and Safeguarding Committee, CQC, Brent Council and the public via the Healthwatch website.

DISCLAIMER: This report relates only to the service viewed on the date of the visit, and is representative of the views of the staff, visitors and residents who met members of the Enter and View team on that date, and those who completed and returned questionnaires relating to the visit.

### General Information

## **Introduction**

Half of the population of adults with learning disabilities in England live with their families, most of the remainder (33%) live in residential care. Only 15% of adults with learning disabilities have a secure long-term tenancy or their own home. [1] Supported living assumes that all people with learning disabilities, regardless of the level or type of disability, are able to make choices about how to live their lives even if the person does not make choices in conventional ways.

The Healthwatch Brent Social Isolation Report - 'Staying Well in The Community' [May 2019], has concluded from surveys conducted that there was a rise in respondents living in Supported Housing and Care Homes reporting dissatisfaction with their social contacts. As a result of this, we were particularly interested in monitoring levels of social interactions available to the residents of Supported Living Schemes. We were particularly keen to find out more about the ability of residents to engage in activities based on their own individual preferences, monitor the skills and abilities of staff, and gain knowledge of any innovative good practice. The questionnaires used were similar to those previously used, however, we were particularly interested in the four main themes of -

1. Staff development & Clinical Input
2. Emotional and Psychological Well-being
3. Social Inclusion and Meaningful Activities
4. Organised Person-centred Holidays and Days Out

## **Background**

The aim of Supported Living Schemes is to deliver alternatives to residential and nursing care and to ensure that individuals' needs are met, giving people more independence, choice and control. The desired outcome is that by providing services in this manner will enable clients to live independently in the community, promoting well-being and alleviating social isolation.

The contract for Salmon Street Supported Living Scheme was taken over by Voyage Care in October 2018. The contract was previously held by Dimensions UK Ltd. The current residents are vulnerable adults who have lived together in a residential scheme at Peer Close for over 20 years and have built close and enduring friendships. The Local Authority believed that there would be an adverse impact if this group was separated. It was believed that it would create unnecessary anxiety and distress and likely increasing the level of support each individual would require.

The Local Authority awarded Voyage Care with the contract as an expert provider who has the necessary experience, skills and knowledge to meet the needs of this vulnerable group of adults and has experience of managing change for people with autism. In total there are six residents at the Scheme: 5 residents are non-verbal, while one has the ability to verbally communicate. All the residents are mobile and can move around with ease.

Each resident has their own en-suite room with personal decorations such as family and holiday photos, own drawing - the room were of a high standard of decoration being adapted to each resident's taste.

## **Staff Development & Clinical Input**

The HW Enter & View Team were keen to explore whether the following or similar were provide: Physiotherapy, Learning Disability Nurse, Occupational Therapist, Speech Therapist, etc. The Team also carefully observe the level of each staff member.

The Acting Field Supervisor, Doris Rice, was able to give us a tour around the Scheme and introduced the Healthwatch Brent Team to the residents and staff. The Scheme has a large garden and an external activity building. Each of the rooms were neat and nicely furnished.

The 6 residents are supported by 4 Support Worker during the day along with the Acting Field Supervisor. Staff were interviewed by the HWB Team, to gain further knowledge about their experience of working within a Supported Living Scheme.

HWB Team found all the Staff to be very polite and open. There were some important issues that came to light when Staff were interviewed individually. When asked about training, Staff members gave examples of training they had completed - these included Equality, Diversity, and Health & Safety. They said that these courses had helped them in their job, but they wished to have more training so that they could understand more about disabilities. One Staff member described their job as “very emotional.”

All Staff interviewed were asked what could improve their job - the answer from them all was a request for more training; with a preference for class-based training - and not online courses.

When asked if anything could make residents time at the Scheme better, some stated “more Staff, more activities, and more focus on individual needs.” The Staff interviewed were struggling with the challenging behaviour of the residents. They believed that there was not enough Staff employed at the Scheme. They all stated that they wanted more support in their job - so that they could cope better with challenging behaviour.

Staff mentioned that they have undergone MAPPA online training, but they requested training on how to deal with severe autism and learning difficulties.

Staff wanted more diverse activities and suggested having specific new Staff to help coordinate new activities for the residents.

Staff stated that meeting are held quarterly for Staff; however, they sated that there were no appraisal meetings. Staff understood safeguarding and it was mentioned as the most difficult part of their job due to the challenging behaviour. The last safeguarding alert was 2 months ago, this involved one resident scratching another. The Acting Field Supervisor said, “It’s better to be safe than sorry. We add details notes to the system.” Aspire online care management system is used for training and for recording very detailed information - every time a course needs completing by staff, the system will give an alert.

The Acting Field Supervisor described the improvement seen in some residents since Voyage had taken over the contract from Dimensions UK Ltd. One resident was described by Staff as being more assertive compared to previously.

### **Emotional & Psychological Well-being**

(e.g. ability to tune into non-verbal cues as to what the person is feeling and wanting)

Staff were very open and honest about their difficulties coping with challenging behaviour. They all requested class-based training and were very dissatisfied with online training. "They need training - individual one to one, online training is not good enough," said one Staff member.

Staff requested more person-centred positive behavioural support training to them cope with triggers and the resulting challenging behaviour. Challenging behaviour is used by people with learning disabilities as a way of communication or an attempting to get a need met - a sensory need or aversion to a stimulus such as getting away from a noise or physical contact [2].

One resident enjoyed keeping his radio on because the sound kept him calm.

Staff helped residents with personal shopping. "We encourage them to do this (Shopping) and we encourage using the dishwasher, taking out the bins, etc., helping them be more independent."

All the residents were clean and with smart clothes. All residents were well groomed and seemed happy in at the Scheme.

Every Sunday a "mini meeting" is held, during which residents choose a menu. This is flexible and residents sometimes change their minds - pictures of food are clearly displayed so that residents have their preferences listened to.

### **Social Inclusion & Meaningful Activity based on individual preferences**

The Scheme encourages family and relatives to maintain contact with the residents. Currently there are 3 families who come to visit and are active. "We ask relatives to come at least once a month and encourage them to phone every 2 weeks.

The internet has not been introduced yet, however, one resident has his own phone.

One support worker was observed with 2 residents counting cars - some were playing on the trampoline, and other were playing football with the staff.

There was a modern activity building in the garden which would be ideal venue for activities if it was fitted with equipment for the residents. This would reduce some of the pressure felt by the Staff and would provide new meaningful activities for the residents. The garden was large and accommodate a large trampoline. However, there were no flowers and no sensory equipment/tools - studies show that sensory gardens teach non-verbal individuals how to participate in a cooperative effort and it helps develop their non-verbal communication skills.

We were informed that the garden would soon have some flowers planted.

### **Organised Person-centred Holidays & Days Out**

(do they pro-actively support the resident to access person centred and carefully planned holidays and days outs – based on the resident's preferences. What evidence is there?)

When asked if residents have a regular schedule of activities, we were told that residents get a chance to go out every day if they desire. Sometimes the residents go out for lunch and holiday trips are organised. Two residents were scheduled to go out on Tuesday. One resident likes to go to church regularly.

All the residents had pictures of them enjoying outings and holidays on their cupboards.

The HWB Team observed an Activity Plan prominently displayed on the wall - examples were art & craft, puzzles, darts, keyboards, swimming, etc.

## **Compliments/Complaints/Incidents**

### **Complaints**

- Staff were united in their complaint about the training offered - they all requested class-based training on challenging behaviour so they could improve their skills and provide a better service to the residents.

## **Recommendations for Voyage Care**

1. To provide class-based training on challenging behaviour and autism so as to deliver support that promotes community inclusion.
2. To review the challenging behaviour care plans and strategies in light of Staff complaints.
3. Increase Staff levels so that current Staff feel better supported in their role.
4. To have more frequent appraisals so that Staff feel they have a chance to give structured feedback.
5. To use 'The Inclusion-Web Tool' which would enable the providers to quantify the impact of new practices around community inclusion.
6. To provide more activities with a more person-centred approach and with outcome focused planning.
7. To make better use of the external activity 'Hut' / building in the garden, so that residents have more person-centred activities at the Scheme.
8. To make better use of the garden by planting flower – and explore the possibility of creating a sensory garden for the residents.

## **Comments from Voyage Care**

**Allister McHarrie Operations Manager**

I am the Operations Manager that looks after Salmon Street and have been heavily involved with supporting this service and the regular update meetings at Brent with Martin.

Can you give me 24 hours, to get to the bottom of this? Also, can I ask that moving forward you keep me in the email loop with any correspondence to Salmon Street.

**From Doris Rice Acting Field Supervisor at Brianwood House Salmon Street Scheme**

What we have put in place for staff to able to deal with challenging behaviour, We have booked classroom training such as Active support training, MAPA training, Autism training.

The people we support have also been referred to behaviour therapy . I do hope this will answer your question.

**References**

[1] Supported Living – Making the Move Developing Supported Living options for people with learning disabilities, Alicia Wood and Rob Greig, NDTi, September 2010

[2] [www.frontiersupport.co.uk/challengingbehaviour](http://www.frontiersupport.co.uk/challengingbehaviour)