

Enter and View Report January 2015

Visit to Arabella Drive residential care home for adults with learning disabilities

A current strategic priority for the use of our Enter and View powers is to visit care homes that do not provide nursing. We feel that these homes get less scrutiny than other health and social care services.

About the home

Address: 185, Arabella Drive, Roehampton, London SW15 5LH

Management: Arabella Drive is managed by London Care Partnership (LCP), which specialises in residential support for young adults (aged up to 35) with severe learning disabilities, including in particular autism, mental health needs and behaviours that challenge. It is one of 4 LCP homes which are autism-accredited (apparently the only homes so accredited in London). The staffing ratio is correspondingly high: normally 7 day staff for 9 residents. There are early and late shifts, and a night shift with 2 waking staff and one sleeping in. The Manager, Frith O'Connor, has worked for LCP for three and a half years and has been manager at Arabella Drive since July 2014. She is supported by 3 senior care workers who act as team leaders for their shift.

Residents: The home itself has capacity for 8 residents but there is a separate self-contained flat (in a converted garage) with a ninth older resident. There are 8 residents in the home itself aged between 19 and their late 20s, 7 young men and 1 young woman. All are physically mobile but one resident is physically frail and requires more help. The residents are funded by a number of Councils, including Wandsworth, and 2 by NHS on a continuing care basis.

Description/layout: The home is two-storey former children's home located on the edge of a large housing estate. It was converted to its present use and fully refurbished four and a half years ago. The ground floor, to which access is by a single security door, contains a small entrance hall, an office, two large lounges, a computer room, a toilet, a laundry room and a well-equipped kitchen leading into a spacious dining room fitted out with four small tables, each with two or four chairs. There are blinds to the sizeable windows but the residents apparently prefer these not to be drawn. There is a bright, airy, uncluttered look throughout. Upstairs are the residents' bedrooms, all with en-suite facilities. The room we saw was spacious and well furnished. There is also a staff bedroom and a "sensory room" carpeted and fitted with light and sound display systems which can be adjusted to meet residents' wishes for a controlled environment.

At the back of the building there is a garden accessible to residents (under supervision) but apparently not much used at this time of year.

Meal arrangements: Meals are eaten in the dining room, largely prepared by staff with limited assistance from some of the residents. Breakfast is flexible according to individuals' needs. Lunch is usually prepared between 12 and 2 pm for a minority of the residents, others being out on activities, visits, or meals out. The evening meal, served around 6 pm, is the main meal of the day. Meals follow a rotation of 3 menus each covering a week's meals, although there may be ad hoc variations.

Activities: LCP's basic residence charge contains a larger allowance for the provision of activities than most other care homes, perhaps recognising that this particular category of residents do not fit easily into organised group activities. Some residents' condition is such that continuous one to one attention is needed to ensure emotional stability and avoid harmful behaviours. A range of activities are organised meeting the variety of the individual residents' needs.

Quality of care – information collected by the home

LCP has a quality assurance programme involving periodic visits to the different homes. One resident at Arabella Drive is employed on an "expert by experience" basis as an assistant quality checker and takes part in such visits. An "easy to read" questionnaire is being used during these visits to allow residents to express their satisfaction or otherwise with 5 different aspects or their experience of their home. This has not yet been used systematically at Arabella Drive.

LCP also distributes a Quality and Compliance Review Questionnaire to a range of possibly interested individuals. This offers the opportunity to score satisfaction on a 5-point scale with 4 broad aspects of the home's performance, as well as to submit qualitative comments. In 2014 responses for Arabella Drive have so far been received from only 2 family members or carers. These indicated that the respondents were "very happy" with all aspects of the home.

Other views of the quality of care at the home

Care Quality Commission (CQC):

Arabella Drive received a routine CQC inspection in October 2013. It was judged to have met the 5 key standards inspected: Respecting and involvement; Care and welfare; Safety and suitability of premises; Staffing; Complaints; and Records.

Enter and View report January 2015 - Visit to Arabella Drive Residential Care Home

About our visit

Two members of the Healthwatch Wandsworth Enter and View Team visited the home on 21 November 2014 between 4 and 6.30 pm. This was a planned visit and we had previously met with Frith O'Connor, the home's manager.

Most of the residents at Arabella Drive have difficulty or limited ability to communicate verbally, as well as anxiety about interacting with strangers. The majority of the residents present in the home at the time of our visit were not amenable to verbal communication or only to a very limited extent. The two residents judged more able to communicate verbally were not able to speak with us that evening. We attempted with staff help to engage 3 other residents in basic conversation during the evening but with only limited success.

We were able glean a certain amount from simple observation of the home and its daily life during the relatively short time we were realistically able to spend there. But in the circumstances we were more than usually dependent in this visit on the help of the manager and her staff for much of the information we obtained and for the extent to which we were able to interpret some of the interactions which we observed.

We have also been able, with the consent appropriately obtained of the residents concerned, to speak to 2 relatives subsequently to our visit and obtain their views

Healthwatch Wandsworth would like to thank the home manager, residents, relatives and staff of 185, Arabella Drive for their contribution to the Enter and View programme.

Findings from our visits focusing on the quality of individual care and the responsiveness of services to individual residents' needs

Personal Care and Health:

+ve: We were told that all the residents, with their varying profiles of ability and disability, needed some help, support or encouragement with completing daily tasks of personal care. We were unable to obtain any comment from residents on this aspect but their dress, hair and general appearance attested to the home's success in maintaining residents' dignity, individuality and motivation.

We were given by the manager ample anecdotal evidence of the home's concern for the

residents' general health and the good links maintained with the relevant services. Most residents are registered with the same GP in Roehampton Lane. A number of residents are supported by a psychiatrist from the Community Learning Disability Team. Dentistry is obtained at the specialist clinic in Wandsworth. Speech therapy is provided under a contract held by LCP: priority for residents' needs is regularly allocated on a "traffic light" system.

Two of the residents' rooms and the separate flat have monitors installed which relay sound to the office, mainly for night-time use.

The manager also told us of the home's emphasis on working with residents towards overcoming their disabling disorders of mood and behaviour, including by setting measurable goals, and on significant progress achieved over time (again confirmed by relatives - see below). While we were aware of some minor manifestations of anxiety possibly caused by our presence, we were struck by the generally relaxed and informal (if noisy) atmosphere in the home and the distinct absence of interpersonal tensions.

The home maintains an array of colour-coded personal folders containing care plans and risk assessments covering a variety of aspects of individual residents' personal and health care. These included a communication profile for the individual. Staff contribute each day to a daily log for each resident.

-ve: Some residents seem to have less involvement than others with their personal records and care plans.

Food and drink:

+ve:

Our impression from the meal that we witnessed, the week's menu displayed and what we were told by staff and a relative that the residents at Arabella Drive eat as well and as healthily if not more so than most other young adults.

The preparation of the meal occasioned an accompanied shopping trip (to get the pizzas) for one resident who was praised on return, involved at least one resident in assisting a staff member cut up the vegetables for the salad, while some others sat in the kitchen to watch proceedings. In general the meal generated a collective focus of attention and anticipation which engaged most residents.

Residents ate unaided but one had a special plate and cutlery and there was a watchful staff presence throughout.

-ve:

Activities:

+ve: On the evening of our visit staff accompanied one resident to go out and sing in a choir, another to go for a drive and supper out in his "motability" car. One resident had been paid for work sweeping up leaves and was enjoying planning how to spend it. Another went shopping (as mentioned above). We saw 3 residents playing computer games or watching videos (one using a computer to replay short video clips in a repetitive way that was evidently found soothing). All of these appear to us to demonstrate a policy of matching residents' individual needs and wishes within an orderly framework involving a sustainable level of involvement with the local community.

We were told that activities organised that week had included swimming, walks in Richmond Park, bowling, a gym session at Roehampton Gym, a visit to an LD adventure playground, a Zumba class and music therapy, as well as lunches out and visits with family.

Two of the residents have "motability cars" and the home has 3 "people carriers" of its own. We were told that for some residents going for a drive represents an important opportunity to sit still and relax which they otherwise find difficult.

We saw some striking examples of constructive activity by individual residents. In particular, one has charge of an "exhibition" in a corridor off the entrance hall of his own and other people's drawings of aspects of life in the home or visits out. Another resident maintains a pictorial notice board advertising the date, the weather, the staff on duty, the activities of the day and other aspects of the life of the home: he changes this regularly twice a day and has done so for four years.

-ve

Staff attitudes:

+ve: We were impressed by the respect for individuals and the high level of attunement to their idiosyncratic styles of communication demonstrated by the manager and the staff team generally, most of whom have been working at the home for a significant period of time.

All the staff we saw seemed to have a positive attitude to and engagement with the residents and the work of the home.

We were told that providing one to one support to some of the residents can be an exhausting process and that staff are rotated in these duties every few hours.

-ve:

Views of relatives

+ve:

The relatives we spoke to by telephone were entirely positive in their comments on the home which they visited regularly. Their young people had been at Arabella Drive for a number of years and had benefitted significantly from their time there. These relatives were confident of standards of personal care and nutrition and of the home's approach to general health issues. They were pleased with the activities provided and the way these were tailored to individual needs and preferences. The manager and staff were very good and made an effort to keep them informed.

-ve:

Our conclusions

We were very favourably impressed by what we saw and heard at Arabella Drive, while recognising how difficult it is for untrained outsiders, visiting for only a short time, to fully understand all that goes on there. Our overall impression, probably reflecting the particular needs of the residents, was of a very complex ongoing dance between chaos and regularity. The manager and her staff team seem to be achieving considerable success in engaging the co-operation of a group of young people with very complex needs and potentially highly challenging patterns of behaviour, involving them in an orderly and mutually respectful communal lifestyle and exposing them to the extent possible to the conditions of life in the wider community. Standards of care seem high and the general atmosphere in the home relaxed and informal.

We were inclined at first to wonder whether the home's commitment to openness and informality might lead to a slackening of necessary boundaries of privacy and confidentiality for individuals. After discussing this with the manager, we are satisfied that she is aware of this dilemma and is clear where the boundaries lie.

Our recommendations

We recommend that:

1. The home continues to keep at the forefront of its work the need to maximise the potential of its young adult residents for social and personal development with a

view to enhancing their opportunities to the extent possible at later stages in life.

2. It continues to give priority to encouraging residents to take as much responsibility for themselves as possible, including involving them to the extent possible in their individual care plans.
3. It continues to attend to the balance between informality and necessary boundaries of privacy and confidentiality for individuals.

The Home's Response to this Report:

The home have now told us that they consider this report accurately represents the home and that they are committed to its recommendations.

Disclaimer: Please note that this report relates to the findings of the Healthwatch Wandsworth Enter and View team. It may not be a representative portrayal of the experiences of all residents and their relatives.