

Enter and View

Report of Visit to 120 Besley Street Supported Living Scheme on 10 May 2016

Purpose of the Visit

A current strategic priority for the use of our Enter and View powers is to visit extra care and supported living housing schemes. We feel that tenants in such schemes get less chance to express their views compared with users of other health and social care services.

Having visited three extra care schemes for older people in 2015, we decided to look at a number of supported living schemes for adults with learning disabilities in the first half of 2016. We discussed this in December 2015 with Mike Abel, then Wandsworth Council's commissioning manager for services for people with learning disabilities, who recommended to us a selection of schemes to visit and suggested some issues to look out for. This was the first of those visits.

About the Scheme

Address: 120, Besley Street London SW16 6BD.

The premises: A two storey, double-fronted brick built house in a residential street, where Wandsworth borders on Streatham. It was purpose built in 2003 as a residential home for people with low care needs. There are 6 bedsitters with en-suite facilities. Five are upstairs on the first floor. The bedsitting rooms vary from large to adequate size. On the ground floor is a small entrance hall leading on one side to a lounge/dining room with a large screen TV, sofas and a dining table. From there you arrive at a fully equipped kitchen, and on the other side is a small office which also serves as a staff bedroom, a toilet and right at the back the 6th bedsitter. Between this and the kitchen is a laundry/utility room with a door opening to a small, paved rear garden.



Management: The building is owned by Wandle Housing Association and managed by Metropolitan, who collect rent from tenants' Housing Benefit. There are no housing staff on-site.

Care and support to tenants is provided by Brandon Trust under Supported Living contracts with Wandsworth and other borough Councils. The care and support service is managed by Brandon Trust's locality manager, Bridget Moedu, who has been in post since 2009 and manages 4 other schemes in her locality.

Bridget is registered with CQC for the provision of personal care services under Brandon Trust Supported Living. Earlsfield covers the London area and includes a total of 16 Supported Living schemes in Wandsworth. These schemes were registered individually as care homes until 2012 when they converted to Supported Living.

We were told that Besley Street, along with 3 other Brandon Trust schemes in Wandsworth, is specifically managed with the support of Wandsworth Social Services as a "stepping stone" to greater independence in contrast with other schemes which explicitly aim to provide a home for life. Tenants are accordingly selected for their potential to move on to greater independence; particular efforts are made, including through one-to-one support, to promote life skills and tenants are normally expected to stay at the scheme for a limited period of between one and four years. Tenants who have moved on but require a continuing support service can opt to obtain this from the Besley Street team, as is currently the case with two or three former tenants.

Tenants: Besley Street has in recent years been effectively reserved for male tenants. On occasion female tenants have been put forward by Social Services for vacancies but following consultation with the current tenants these applications have been refused. There are currently 4 tenants, aged between 21 and 46. All have learning disabilities with relatively low support needs and the ability to travel more or less independently. One tenant has been at Besley Street since 2006, one since 2010 the other two for shorter periods. Two rooms are currently vacant.

Care arrangements: Before tenants are referred to the scheme they receive a social care needs assessment from Social Services. Prospective tenants are invited to visit the scheme and meet staff and the existing



tenants before a final decision is taken on their suitability for the scheme. Support needs are assessed by the scheme and embodied in an individual support plan. The tenant and their family, if desired, are involved in the preparation of the support plan and a series of statements of needs and preferences are drawn up in the tenant's name. Support plans are kept in a personal folder along with personal information, assessments of need, and reviews. A daily support log is also maintained. There is a regular monthly tenants' meeting chaired by one of the tenants with staff support.

Staffing: The scheme has a whole-time team leader who reports to the locality manager. In addition, there are a total of 6 care staff, some of whom work part-time. Staff have a minimum hours guarantee but can sign up for additional hours on a "bank" basis. The shift pattern ensures 2 staff members on duty in the morning and in the evening with 1 staff member sleeping in. One member of staff acts as shift leader when the team leader is absent. Individual staff members are assigned delegated co-ordinating responsibility for specific aspects of the scheme.

After 5pm staff have access to an on-call manager; this function is taken in rotation for a week at a time by the 9 locality managers.

Each tenant is assigned a member of staff as a Key worker with whom they have a regular allocation of one-to-one time each week. This is partly devoted to skills training and to the monitoring of personal goals, problems and preferences. Key workers feed back to a monthly team meeting.

Clearly, present arrangements ensure good continuity of care. We were told that plans are in hand to change the staff contract so that staff can recruit for the locality rather than just the scheme. This would allow more rotation of staff around the schemes in the interest of broadening people's experience and sharing good practice, but, as the locality manager recognises, it will be important to maintain an adequate level of continuity.

Healthcare: Three tenants are registered with the same nearby GP practice, while one is registered with a Balham practice. They all get regular eye and dental checks. Two of the tenants are on regular medication.



Meal arrangements: Tenants are expected to shop and prepare meals themselves in the communal kitchen with staff support (but see our findings below).

Activities: All four tenants have daytime activities away from Besley Street, funded separately from the Supported Living arrangements. Three go to day centres for a variety of activities, including sports and swimming, and one to college. Some activity, shopping or other trips out are incorporated into individual tenants' one-to-one time with their Key worker. In addition, one member of staff has delegated responsibility for activities and organises a monthly event or outing for the whole group if they want this. Recently, for example, three tenants went on a trip to Brighton.

Tenants save up for holidays for which they pay the expenses of accompanying staff. Last year one tenant went to Florida with a relative and a member of staff.

A volunteer comes one evening a week to take one tenant out under a volunteering scheme run from the Earlsfield office.

Relatives: The scheme encourages tenants to maintain regular links with family members. Relatives are involved in annual care reviews subject to the tenant's agreement. The scheme hosts an annual get-together for the tenants, their friends, families and staff; this is a combination of a social event and an open forum. In addition, Brandon Trust organises an annual care quality checkers' day with selected topics and action points, to which families involved with all the schemes are invited, along with commissioners.

Complaints and Safeguarding: We were assured that there is a complaints procedure and that complaints can be discussed at tenants' meetings. We were also assured that safeguarding procedures agreed with Wandsworth Council were in place. We were told about a past problem on which safeguarding procedures had been invoked (see our findings below).



Other Sources of Information about the Scheme

Tenants' satisfaction survey: Brandon Trust has recently introduced a tenants' satisfaction survey. Responses are sent to the Earlsfield office for analysis and the results fed back to the scheme. The first returns have gone in but no analysis of the results is yet available.

Care Quality Commission: Brandon Trust's registered London area office was formerly in Battersea but moved to Earlsfield in December 2015. The Battersea office was last inspected in June 2014 when the service was judged to have met the standards for respect, meeting people's needs, safety, staffing and management. The inspectors spoke to some service users but did not apparently visit Besley St.

About Our Visit

This Enter and View visit on behalf of Healthwatch Wandsworth was conducted by two members of the Enter and View team, Martin Haddon and Lisa Nilsson. In accordance with our previous practice we began by contacting Brandon Trust's locality manager, Bridget Moedu, and meeting her on 4 April 2016 at 120, Besley Street to obtain preliminary information about the scheme (as set out above) and to make arrangements for the Enter and View visit proper. We arranged to visit on 10 May 2016 at 5pm, when the tenants were likely to have returned after their daytime activities. With Bridget's assistance we sent each tenant a short letter with our photographs introducing ourselves and explaining the visit. We also supplied a poster announcing the visit for the information of relatives and any other visitors to the scheme.

On 10 May, as agreed, we carried out the visit. We found three of the four tenants at home and were able to speak to each of them. The interviews were informal and tailored so far as possible to the individual's capacity and interests, while trying to cover a range of issues about their experience of the supported living scheme and its responsiveness to their needs. With each tenant's agreement we subsequently telephoned a close relative to obtain their perspective on the scheme.



Acknowledgements: On behalf of Healthwatch Wandsworth we would like to thank the scheme's managers, tenants, relatives and staff for their welcome and for their contribution to the Enter and View programme.

Our Findings

The following is based on our interviews with three tenants and their relatives and our observation at the time of our visit.

We found that the communal spaces appear well maintained and decorated and the general atmosphere is bright and airy. But the open plan arrangement can make it difficult to achieve any degree of privacy except in people's own rooms. We had the impression that, if all 6 tenancies were taken up and the tenants at home simultaneously with staff on duty, the house would feel quite crowded.

While two of the relatives were clearly aware of the provider's policy of using the Besley St scheme as a step towards greater independence, one seemed not to be and two of the tenants we spoke to seemed to view Besley St as their permanent home. We have not sought to explore the underlying legal position, but it seems to us that any lack of clarity about the goals of the scheme could cause difficulty in some circumstances.

We were warned that there had been increased tension between two of the tenants over a period and occasional outbursts of aggressive speech and behaviour. We witnessed an instance of this during our visit. It was well handled by staff who intervened to defuse the situation and prevent any escalation. Clearly the safety and well being of vulnerable adults has to be carefully protected in conformity with established procedures and we understand that steps are being taken in consultation with Social Services to resolve the problem. But we were left with a concern that the ongoing level of tension and the anxiety which it inevitably generates for staff may be adversely affecting, not only the general atmosphere at Besley St, but also the work of the scheme in developing skills and encouraging greater independence for all the tenants.

In particular, one tenant made clear to us that he found the tension and noise disturbing and that it adversely affected his current view of living at Besley St. This was also a concern to his relative. Moreover, the present



situation if not resolved, together with the limitations of space, seems likely to limit the capacity of the scheme to take on additional tenants.

Subject to these reservations, those we spoke to were mostly positive about the care arrangements at Besley St and complimentary about the staff.

Personal care and activities: The tenants, who needed little help with personal care as such apart from being woken in the morning, enjoyed the degree of freedom, privacy and independence afforded to them within the house and seemed to be happy with the amount they went out and the activities they pursued, partly with the help of the Besley St staff. We were satisfied that a key working system was in place involving one to one time between individual tenants and an identified staff member with the aim of helping to develop skills and pursue personal goals although one tenant felt that he needed more support from his Key worker; similar concern was expressed by his relative. Another tenant, according to his relative "had come on leaps and bounds" since joining the scheme.

Healthcare: Tenants' healthcare needs seemed to be well cared for. One tenant needed urgent hospital care and specialist assessment in the past year. Two take regular medication, which staff keep for them. Staff assist tenants make and keep appointments with their GP or other health professionals. Two of the tenants recently had eye tests. One relative was concerned that a tenant had put on weight through poor diet and lack of exercise but another relative told us that staff had helped a tenant overcome bad eating habits and get his weight under control.

Meals: Arrangements for meals at a scheme like this one clearly pose tricky issues of balance between potentially conflicting factors, such as concern for independence and the interests of good nutrition. We noted that the tenants were all involved in choosing and shopping for their food with appropriate staff support. Staff were also on hand in the evening to assist with, or carry out, meal preparation.

But we had a couple of specific concerns. First, we were told that the oven in the kitchen had not been working for several weeks, which tended to restrict meals to microwaveable processed food, which we observed made up the bulk of the items being stored at the time of our visit. Secondly, we noted during our visit that, while one of the tenants prepared his own meal with some staff support, e.g. setting the microwave, another



watched TV while his meal was prepared for him, with little effort apparently made to involve him other than in choosing what he wanted to eat.

More generally we felt, and this was confirmed by one of the relatives, that not enough was being done to encourage tenants to eat more healthily, to include more fresh food, including fruit and vegetables in their diet and to develop the necessary skills to achieve this.

Property management: As well as the problem of the oven, a tenant told us that the shower in his upstairs room was leaking (he was currently sleeping and showering downstairs).

Families: It was clear that the scheme continues to help tenants keep in touch with their families and the three relatives we spoke to seemed, on the whole, to be being kept well in touch with developments. But we were told of two past instances when communication with relatives had not been adequate.

Our Recommendations for Improvement

- The scheme is already engaged with Social Services in trying to address the problem of aggressive behaviour and tension between some of the tenants. But we would like to be assured that while this is happening the individual needs of each of the tenants, including those apparently not directly involved, are fully considered and addressed.
- 2. It is clearly important in the present situation that a particular effort is made to keep relatives as involved and as well informed as possible.
- 3. Until the current problem is resolved, we think it could be unwise to admit further tenants to 120 Besley St.
- 4. We would also suggest that the provider's policy of using the scheme as a "stepping stone" to greater independence, assuming it is continued, should be very clearly explained to any new applicants and their relatives and kept to the fore in annual reviews.
- 5. The scheme should consider how more encouragement might be given to tenants to cook and eat more healthily, including the use of fresh produce, and in some cases to take a more active part in preparing their own meals.



- 6. To this end the oven in the kitchen needs to be repaired or replaced as a matter of urgency.
- 7. A leaky shower in an upstairs room may also need attending to.

Drafted: 2 June 2016 Revised: 11 August 2016

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