

Enter and View Report

FINAL

Name of Establishment:	West Midlands Headway Services C/o Headway House Moseley Hall Hospital Moseley Birmingham B13 8JL
Date of Visit:	Friday 31 st October 2014
Time of Visit:	12.00 pm
Purpose of Visit:	To ascertain patient, carer and user experience and observe service delivery
Healthwatch Authorised Representatives Involved:	Nina Davis Mike Tye
Healthwatch Staff Member(s) Involved:	Claire Lockey
Date of Report:	7 th November 2014
Disclaimer:	This report relates to findings observed on a specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed during the visit.



1. WHAT IS ENTER AND VIEW?

1.1 Enter and View is part of the local Healthwatch programme to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand. Healthwatch Enter and Views Reps are intended to identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time, an authorised representative observes anything that they feel uncomfortable about, they need to inform their lead who will inform

the service manager, ending the visit. In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to CQC where they are protected by legislation if they raise a concern.

2. BACKGROUND

- 2.1 Headway House is a specialist service that is designed to give brain injured people the opportunity to relearn lost skills as well as prevent any further deteriorating or isolation. These services are available to people with acquired brain injury who will have usually completed their formal medical/clinical rehabilitation and are seeking ways to re-integrate back into the community, but who may at this time still require a lot of support and assistance.
- 2.2 All individuals are assessed and offered choices of activities best suited to their needs and desires. They provide various activity sessions from Monday to Friday and have two offices, one of which is Headway House based on the complex of Moseley Hall Hospital where we conducted our visit. The other premise is based at Headway West Midlands, Leighton House, 20 Chapel Rise, Birmingham Great Park, Rednal, Birmingham B45 9SN. Both organisations are funded by charity and receive limited funding.
- 2.3 We initially spoke to the Centre Manager who gave us a tour of the building followed by us observing three activity sessions and speaking to staff and service users to ascertain patient experience.
- 2.4 The service intake is 25 users per day at Moseley Hall and 19 users per day at the Rubery Site. Where necessary there is one to one support provided and in general, staffing ratios are 1 to 5.
- 2.5 There is currently no waiting list and the charity is looking at opening a further resource in the North of Birmingham in Erdington.

3. RESPECTING & INVOLVING PEOPLE WHO USE SERVICES

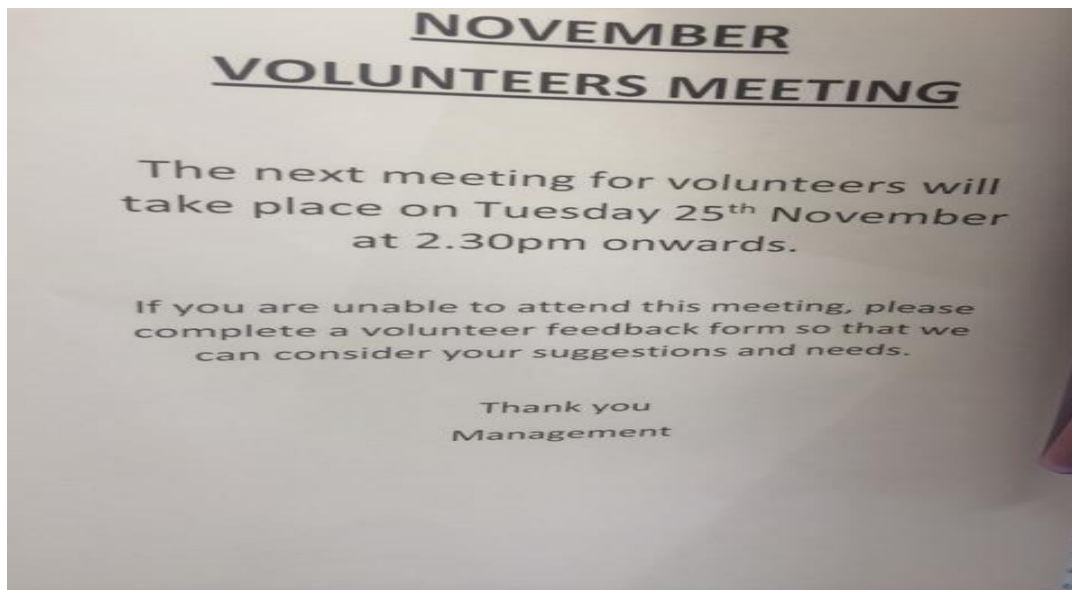
- 3.1 Our observations of staff interaction with service users during our visit; indicated that they were treated with respect, dignity and choice were given at all times. We did not observe any exchange that was inappropriate.
- 3.2 Headway Service offer a range of activities such as: brain injury rehab sessions, health and fitness/sports, education (e.g. learn or regain skills in literacy, numeracy and IT skills), new steps (entails specialist activities aimed at people at the next level of their development, focusing on more user led activities and moving into pre-vocational training), social opportunities, Daily Living Skills (i.e. provide training in all aspects of daily living, aiming to give the user greater independence in their lives at home or in the community). They also offer a free carer service for carers/families of brain injured people and other professionals working in this area or to a brain injured person who do not have a carer.
- 3.3 Upon referral a full person centre plan and risk assessment is completed to obtain as much details about the referrer as possible. Criteria is that they must be able to self-medicate and acquired a brain injury. Members can self-refer or via a professional e.g. GP, Carer, Social Worker etc whereby they can either self-fund or if eligible, receive city council funding.
- 3.4 Staff and volunteers all were very approachable and friendly. During the craft session we observed their caring approach of two staff who worked with five service users, some of whom required close attention due to their limited coordination. The close interaction was seen during the other activities during lunch break as well as outside where gardening activity was taking place.
- 3.5 During lunch it was observed that a volunteer helped a visually impaired gentleman with a PC search for a hand held illumination device.

4. SAFEGUARDING PEOPLE

- 4.1 Staff undertakes robust training including safeguarding that is reviewed and updated regularly.
- 4.2 It was observed a staff member reminding a service user who has epilepsy to take his medication and reminded that he was to stay close to the others and not walk ahead. He was not keen to do this but was reassured and made aware of the dangers if he did not cooperate. Client safety and wellbeing is given high priority.

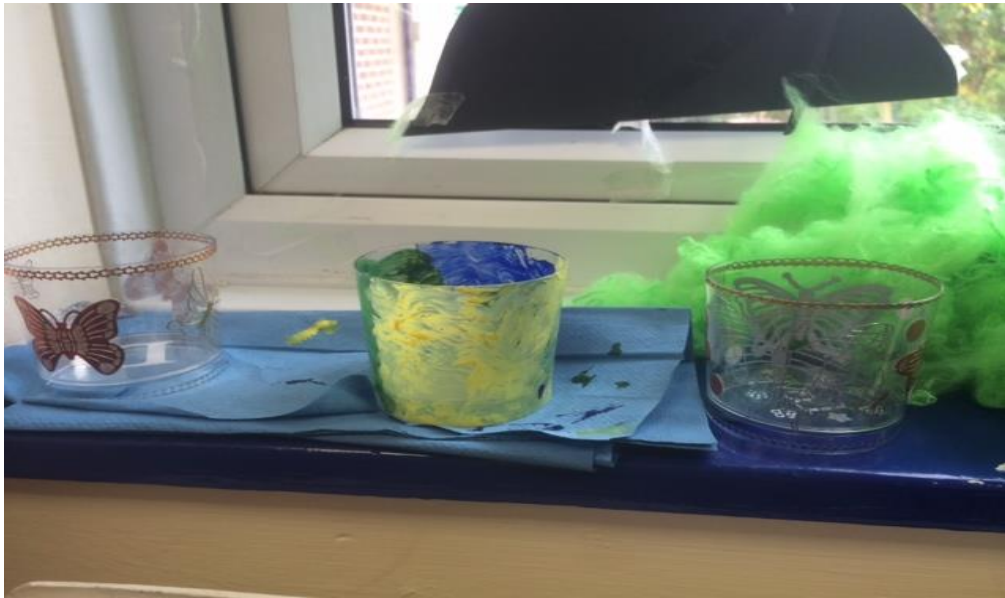
5. TRAINING PROGRAMME, INDUCTION OF STAFF & STRUCTURE

- 5.1 All recruited staff undertake, six week induction that includes first aid, manual handling, safeguarding and refreshers take place every three months.
- 5.2 Staff members are trained at various levels: work towards NVQ2 or skills trainer/coordinators must have a NVQ3 and NVQ4 in management for all managers.
- 5.3 Retention of staff is very good whereby the manager has been in post for 13yrs, Chief Executive for 22yrs and Deputy Manager for 10yrs.
- 5.4 There is 14 staff including the Manager and Deputy at the centre that work across both services.
- 5.5 The centre also has a number of volunteers and holds a regular volunteer meeting. This was visible during our visit:



6. ASSESSING & MONITORING THE QUALITY OF SERVICE PROVISION

- 6.1 All service user(s) progress is monitored for outcome and impact purposes that are noted on a star-tracker chart detailing each individuals goals set. This is shared with the individual and with service providers if they are being funded via Social Services to demonstrate the impact of attending this service.
- 6.2 We observed three sessions:
- 6.2a Halloween Arts and Crafts Activity: during our observations it was apparent that staff encouraged users to partake in the activity and where necessary assisted the individual but did not take their independence away from them. The arts and craft were themed around Halloween as it was 31st October. The atmosphere was very relaxed whereby every individual was engaging in the activity and presented with a manageable task to gain their confidence and increase their motor skills with appropriate stimulation. We observed a staff member inform an individual “good control, you are working very well” and encouraging them to use difference resources.



- 6.3 Gardening Session: observed service users engaging in different gardening activities such as: planting, pruning plants, turning soil over and planting seeds.
- 6.4 Music/Quiz Activity: this was themed around Halloween and the activity initially started with pass the parcel. When the music stopped the individual opened the parcel (assisted where required if they had mobility issues) and they would receive a prize and question that was based on Halloween e.g. name a film with a vampire in? Whilst, this was observed to be fun by all participants it was also a good memory game and encouraging movement for the service user to stretch and unravel the parcel. This was followed by a music quiz, again themed around Halloween and service users had to guess the song and artist.
- 6.5 All individuals interacted and appeared to be enjoying the activity.
- 6.6 Throughout all activities, there was diversity amongst the clients, resulting in an apparently harmonious group of individuals, some of which had profound difficulties with coordination as a result of their brain injury.
- 6.7 To evaluate activities that service users undertake, the below evaluation form is completed - see below example.

ACTIVITY EVALUATION FORM

Service Area.....

ABI..... Ref No.....

DATE	TYPE (of activity evaluated)	DETAILS	ACTION FOLLOW UP

NOTE: If the evaluation is with CLIENTS - add this Ref. No. - In the log in client feedback folder.

7. PATIENT, CARER & USER FEEDBACK

7.1 Service user forums take place monthly that involve all service users that involves discussion regarding trips, specific topics and communication. The poster detailing dates/times was visible during our visit - see below.



Headway House
USER FORUM DATES FOR 2014

Tuesday 22nd April	1.15-2.30pm
Tuesday 20 th May	1.15-2.30pm
Tuesday 24 th June	1.15-2.30pm
Tuesday 26 th August	1.15-2.30pm
Tuesday 21 st October	1.15-2.30pm
Tuesday 16 th December	1.15-2.30pm

Due to events such as Brain Injury Week, Summer Trips, Xmas meals-all dates may be subject to change.

7.2 Lunch time surveys also take place as hot and cold food can be purchased on site or individuals can choose to bring their own packed lunch. Moreover, satisfaction surveys take place for service user feedback and referrer feedback- see below examples.

Satisfaction Survey

Headway West Midlands are always looking to improve the service that we offer to clients and their families.

We would be grateful if you could please answer the questions below as honestly as you can, to indicate how you feel about the service we currently offer.

Score Guide: 5 = Excellent 4 = Good 3 = satisfactory 2 = unsatisfactory 1 = poor n/a = not applicable

Please circle one score only below . Use the score guide above to help with your answers.							ANY COMMENTS:
How would you rate the information provided about Headway services?	5	4	3	2	1	n/a	
How would you rate Headway staff?	5	4	3	2	1	n/a	
Do the staff treat you with dignity and respect?	5	4	3	2	1	n/a	
How would you rate the programme of activities?	5	4	3	2	1	n/a	
How would you rate the social period that runs during lunchtimes?	5	4	3	2	1	n/a	
How would you rate the choice of sessions?	5	4	3	2	1	n/a	
Do you feel that Headway listens to your individual needs and offers you support?	5	4	3	2	1	n/a	
How aware and supported do you feel regarding any issues of abuse?	5	4	3	2	1	n/a	
How would your rate the facilities in terms of building, resources and equipment?	5	4	3	2	1	n/a	
How would you rate the facilities in terms of accessibility for disabled people?	5	4	3	2	1	n/a	
How well are you kept informed of changes to the service etc	5	4	3	2	1	n/a	
How well are you involved in decisions regarding services you receive, and offered choices?	5	4	3	2	1	n/a	
Are you/your request and complaints listened to?	5	4	3	2	1	n/a	
Would you recommend the ABI service to others?	5	4	3	2	1	n/a	
Overall, how would you rate the service provided to you by Headway West Midlands?	5	4	3	2	1	n/a	

Any other comments:

Referrer Satisfaction Survey

Headway West Midlands are always looking to improve the service that we offer to carers and their families.

We would be grateful if you could please answer the questions below as honestly as you can, to indicate how you feel about the service we currently offer.

Score Guide:

5 = Excellent 4 = Good 3 = satisfactory 2 = unsatisfactory 1 = poor n/a = not applicable

Please circle one score only below . Use the score guide above to help with your answers.							ANY COMMENTS:
How would you rate Headway's referral process?	5	4	3	2	1	n/a	
How would you rate the information given to you by Headway West Midlands?	5	4	3	2	1	n/a	
How would you rate the review process?	5	4	3	2	1	n/a	
Are you happy with the amount of involvement you have with the service offered?	5	4	3	2	1	n/a	
Do you feel the service meets the cared for person's needs?	5	4	3	2	1	n/a	
How would you rate the choice of sessions on offer?	5	4	3	2	1	n/a	
How well do you feel HWM deals with confidential matters?	5	4	3	2	1	n/a	
Are your concerns/complaints listened to/dealt with?	5	4	3	2	1	n/a	
How would you rate the facilities in terms of building, cleanliness and comfort?	5	4	3	2	1	n/a	
How well are you kept informed of changes to the service etc	5	4	3	2	1	n/a	
Would you recommend the ABI service to others?	5	4	3	2	1	n/a	
Overall, how would you rate the service provided to the person you care for, by Headway West Midlands?	5	4	3	2	1	n/a	

Any other comments:

- 7.3 There was also a suggestions box that was also visible during our visit and complaints, comments and compliments literature available in the reception area.



- 7.2 During our visit we spoke to various service users:

7.2a Service User A - had been visiting the centre for 20yrs. He enjoys attending the service and said all staff members are nice. Previously attended five days per week but has now reduced to three days as he attends other activities.

7.2b Service User B - had been visiting the centre for 17yrs and is the only thing they look forward to. Really enjoyed the activities; staff are really good and has met a lot of people in coming here.

7.2c Staff Member A - initially started at the centre as a volunteer and is now working as a care assistant, training to be a skills trainer. Good to work with the clients and see their progression. Feels it is a very worthwhile job and has a great team with excellent support.

9. WORKING ENVIRONMENT

- 9.1 During our discussion with the manager in the staff room, we observed the dividing wall to this room and activities room was not very sound proof. The manager advised they rent the building as they are a charity and receive very little funding. Therefore this is out of their control.
- 9.2 Temperature of the working rooms were acceptable, furniture was clean and functional. Toilets area was clean and noted there is a disabled toilet available.
- 9.3 The building is all one level and therefore accessible for wheel-chairs.
- 9.4 A smoking area is accessible that is outdoors.

8. CONCLUDING COMMENTS

- 8.1 Headway Home is well managed that provides a range of services to people with acquired brain injury. We observed the staff team and volunteers being very supportive towards service users and having a good rapport.
- 8.2 It was apparent that service users are treated with dignity; respect and the service are positively supported by the Manager.
- 8.3 Some service users informed us that they wished they could attend the centre more days per week but this is not possible, due to lack of funding.
- 8.4 Overall the centre appeared to be a supportive and stimulating sociable experience for clients with complex needs, acquired from a brain injury.

9. ACKNOWLEDGEMENTS

9.1 Healthwatch Birmingham would like to thank the service provider, service users and staff for their contribution to the Enter and View visit conducted on this date.

10. FEEDBACK/COMMENTS FROM THE SERVICE PROVIDER

REGISTERED MANAGER / CARE MANAGER COMMENTS AND FEEDBACK

Please provide us with feedback on how well you felt the visit went and if there are any improvements we need to make:

We would like to take this opportunity to thank the staff who attended from Healthwatch.

We are pleased that we have had the opportunity to show what services we offer and promote awareness of brain injury and the support that is out there for individuals who have acquired Brain injuries.

We always appreciate feedback and strive to provide the best services possible.

If anyone has further question or requires support in the future we hope that they feel able to contact us at any time, and we will do our best to meet there requirements by providing a service or signposting them to another more suitable service.