

Mental Health Services 2012

Inspection of Mental Health Services in Day Centre

EXECUTIVE CATCHMENT AREA/INTEGRATED SERVICE AREA	Waterford, Wexford
HSE AREA	South
MENTAL HEALTH SERVICE	Waterford
DAY CENTRE INSPECTED	Activation Therapy Unit (ATU), St. Otteran's Hospital, Waterford
CATCHMENT POPULATION	125,000
LOCATION	St. Otteran's Hospital, Waterford
TOTAL NUMBER OF PLACES	30
AVERAGE NO OF WEEKLY ATTENDEES	25-30 daily
DATE OF INSPECTION	26 June 2012

Summary

- The day centre provided a good range of activities for attendees.
- Some activities which included outings were severely hampered by the lack of staff.
- People attending the centre, including in-patients, had to pay to participate in some programmes.
- The two nurses attached to the ATU, who worked opposite each other, had recently completed a training programme in exercises for the elderly.
- The day centre was located in St. Otteran's Hospital and some areas, particularly the lavatories, were in need of up-dating.

Details

Service description

The ATU day centre was located in St. Otteran's Hospital in Waterford city and was managed by both the Rehabilitation and Sector teams. It was open Monday – Friday from 0830h to 1600h. Although most of the attendees had been attending for a long time, there were regular new attendees from the in-patient cohort in the hospital. One Clinical Nurse Manager 2 (CNM2) worked in the ATU at any one time.

Premises

The day centre was located in St. Otteran's Hospital which was built in 1835. The day centre comprised a nurse's office, two large activity rooms, a dining room and one smaller room for relaxation. In addition there was a garden where the attendees could engage in some gardening activities but the grass was in need of cutting. Lavatories were old fashioned and the window in one was cracked; there was a strong odour of urine in the toilet. There was one shower. The day centre was accessible by public transport and a hot meal was provided daily from the main kitchen in the hospital, free of charge.

Care Pathway

Most of the attendees had been attending for many years and came from community residences and some from private homes; a number of in-patients also attended. The service used a referral form which was completed by the referring team. The person was then assessed by the nursing staff of the day centre and a range of activities discussed with them. All staff wrote in the patient chart.

Staffing levels

POST	NUMBER	SESSIONS PER WEEK
Consultant psychiatrist	0	0
Nursing staff- CNM2	1 (2 x 0.5 WTE)	Full-time
NCHD	As required	
Occupational therapist	1	1
Psychologist	0	0
Social worker	0	0
Activities therapist	0	0
Other – Yoga therapist	1	1
Music therapist	1	1 x 8-week course

Range of services provided

The service offered a considerable range of activities. However, the ability of the service to ensure provision of this range of activities was curtailed by the fact that the only staff member present was one registered psychiatric nurse (two CNM2s who worked 0.5 whole time equivalents (WTE)). The day centre had gym equipment; one nurse had recently completed a course in Exercises for the Elderly and conducted an exercise programme with the people attending. Newspaper reading was done daily and the nurses had resourced two computers from donors which were freely available for attendees; one person was engaged in a typing course on computer. A pool table and table tennis table were available in one of the large activity rooms and were in use at the time of inspection. The nurses had begun a gardening programme where attendees planted vegetables and flowers from seed. There was a TV, DVD player and a range of books and jigsaws. A games console had been provided by the local Mental Health Association.

The Waterford Healing Arts initiative had conducted an 8-week art therapy programme in the day centre and a yoga therapist ran courses in yoga. A fee was charged for both these programmes, including to in-patients. The occupational therapist from the rehabilitation team did cooking courses on an ongoing basis.

Eight people worked in the laundry attached to the day centre and received a payment for their participation; the laundry catered for the personal laundry requirements of the in-patients in the hospital.

Outings were difficult to organise as the day centre was staffed by only one nurse.

Depot medication was not administered in the day centre and people attended an out patient clinic for follow-up.

Service user input

The inspectors spoke to a number of people as they conducted the inspection. Each expressed themselves happy with the service provided in the day centre.

Quality initiatives in 2012

- The Operation Healthy Steps Otteran's (OHSO) programme designed to highlight healthy activities had been introduced.
- Both nurses attached to the ATU had trained in providing Exercises for the Elderly.

Operational policies

Operational policies were those of St. Otteran's Hospital. Incident records were maintained. There was a system in place for people who failed to attend; there was an initial phone call but failing a response, a community psychiatric nurse carried out a domiciliary visit.

Planning

There was no specific plan for the day centre.

Conclusions

The ATU day centre in St. Otteran's Hospital, a 19th century building, had been in operation for many years and people attended from home, community residences and as in-patients of the hospital. There was a good range of activities for attendees, but outings from the centre were very limited due to there being only one staff member on duty at all times. People attending the centre received a small payment for attending and those participating in the laundry received an additional payment.

Despite the excellent attention and care attendees received, it was clear that having only one member of staff on duty to cater for 25-30 people was inadequate to facilitate a true rehabilitative process. Inspectors also discovered that a number of in-patients, who were availing of therapeutic services in the ATU, had to pay for these.

Recommendations and areas for development

1. Additional staff should be allocated to enable a more rehabilitative approach to the operation of the day centre.
2. If the service is to continue to use the building as a day centre, a programme of refurbishment, particularly of the lavatories should be undertaken.
3. In-patients should not be required to pay for a programme of activity which is presumably part of their recovery process.