

'Enter and View' Report

St Stephen's Road

38 – 40 St Stephen's Road, Hounslow, TW3 2AX



Healthwatch Hounslow

24th November & 8th December 2016

Service visited:	St Stephen's Road (SSR)
Address:	38 – 40 St Stephen's Road Hounslow TW3 2AX
Interim Team Manager:	Symone Reid (SR)
Date and time of visit:	Thursday 24 th November 2016, 3pm – 7.30pm and Thursday 8 th December 2016, 11am – 1pm
Status of visit:	Announced
Healthwatch Hounslow 'Enter and View' Authorised Representatives:	Keith Anderson, Kieron Cotter, Sangnuma Rai, Kusum Joshi and Mystica Burridge
Lead Authorised Representative:	Mystica Burridge
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Healthwatch Hounslow (HWH) has the power to 'Enter and View' services in the borough of Hounslow. 'Enter and View' visits are conducted by teams of trained 'Enter and View' Authorised Representatives.

Purpose of the visit

The Health and Social Care Act allows HWH 'Enter and View' Authorised Representatives to observe service delivery and speak to patients, residents, staff, relatives, friends and carers. The visit can happen if people tell us there are concerns, but equally, the visits can take place when services have a good reputation. We can, therefore, learn from shared examples of what they are doing well from the perspective of the people who experience the service first hand.

'Enter and View' visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with the HWH Safeguarding Policy. If at any time, an Authorised Representative observes a potential safeguarding concern, they will inform their lead. The lead Authorised Representative will then end the visit. In addition, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the Care Quality Commission (CQC) and Hounslow Council's Safeguarding Team.

On this occasion, five 'Enter and View' Authorised Representatives (two HWH volunteers and three HWH staff members) made the visit. The Authorised Representatives spoke to staff and

residents. Recommendations have been made on how to improve the service and good practice has been highlighted.

HWH had liaised with the CQC, Clinical Commissioning Group (CCG) and the Local Authorities (LA) to create an 'Enter and View' Programme. A number of health and social care providers had been selected for visiting. Commissioners had highlighted some services they said they would like HWH to visit. SSR was chosen since the contract of Hestia Housing and Support, the organisation running the service, was coming to an end.

Acknowledgements

'Enter and View' Authorised Representatives: Keith Anderson, Kieron Cotter, Sangnuma Rai, Kusum Joshi and Mystica Burridge.

Thanks to Symone Reid (Interim Team Manager), staff and residents.

Background

SSR is a vulnerable Young Persons' Hostel. The property consists of two residential houses that have been joined together. The freehold to the property is held by The Notting Hill Housing Trust (NHHT). The agency that currently provides the service of home care to vulnerable young adults is run by Hestia Housing and Support. They provide accommodation to young people who are at a high risk of becoming homeless. Hestia has been managing the hostel for the past 9 –10 years.

The premises consist of 8 self-contained rooms with toilet and hand basin and a shared bathroom. There are also 2 self-contained flats. The hostel has a communal lounge, laundry room, kitchen, I.T suite with 3 terminals and a garden.

All the hostel referrals are received from the Supporting Independence Service (SIS) of the London Borough of Hounslow (LBH) – a key partner agency with Hestia in promoting and supporting the wellbeing of young individuals at risk or in need of housing within the borough.

The SIS team receives referrals from Social Services or the Homeless Persons Unit (HPU) within the LBH, where all applicants (aged 16 – 21 years) are assessed to see if they meet the eligibility criteria for the St Stephen's Road project. Once the client has met the criteria for the SIS team, they are sent an assessment invitation letter to visit the hostel and meet the staffing team which consists of the following:

- 1 Manager
- 1 Senior Support
- 3 Full-time Support Assistants and
- 1 Part-time Support Assistant.

Observations about SSR

Reception Area

On entry to the hostel, the room on the right is an open plan staff room and reception area.

Information Displayed

There was a notice board in the entrance hall.

Dining and Lounge Areas

The lounge has 2 sofas, a dining table and 6 chairs. The lights were not working in the dining room.

Kitchen

The kitchen was equipped with a cooker, fridge, cupboards and table area. However, there were no visible signs of crockery, pots and pans or cooking materials. It was difficult to see when/if it was in use daily.

Laundry

The laundry was being used while we were conducting our visit. The room was very damp with mould on the walls. The air was extremely heavy with condensation and the ventilation was very poor.

Odour

No unpleasant odours.

General Decoration

The lighting throughout the building was very dim and the decoration looked dull and dated.

Overall feel of the place

The whole building was old and in need of refurbishment. We were told they were in the process of doing so and would be painting both the inside and the outside of the building. The kitchen floors were also getting refurbished. When asked about the inadequacy of the lighting, a staff member said that since the building belongs to Notting Hill Housing, they have to wait for repairs for up to 2 weeks. The staff member added that had the building belonged to Hestia, they would have carried out the repairs immediately.

There were broken bookshelves and lights that needed fixing. The toilet floor seemed very old and the communal toilet on the ground floor was not clean. Staff informed us that builders who are currently carrying out works on the building use the toilets. Otherwise the staff toilet would be locked. There were cardboard boxes that had been opened but had not been discarded.

Managerial staff/staff members

Kieron Cotter and Kusum Joshi spoke with Symone Reid (Interim Team Manager) about the service delivery of SSR (Thursday 24th November 2016, 3PM).

The current manager, Symone Reid (SR) has been in post at SSR for the past 11 months and was engaged from an agency. Although the hostel accepts 16 – 21 year olds, the majority of residents referred to them are 18+. All the referrals are from the LBH, HPU, SIS and LBH Social Services. The hostel does not accept anyone unless they have been assessed by LBH. The hostel is limited to accepting 10 residents and has a waiting list managed by the LBH SIS team. Current occupants are comprised of 6 male and 4 female residents.

Referrals

The referrals are mainly young adults (male and female) who have drug, alcohol, behaviour problems and/or are homeless, or have been the subject of sexual exploitation, human trafficking or mental health issues. The hostel can refuse admission if they believe the young adult referred to has been involved in violence, knife crime or drug-related issues that are serious.

Support Plan

The support for the residents is reviewed every week at a 'weekly key session' by their respective support assistant and is recorded in a 'support plan'. The subject matter of the meeting is about their daily activities, benefits received and social activity. All the 'support plan' records are available for all the staff to view.

Finance

Before a resident is accepted, they must be in possession of a passport, birth certificate and registered with national insurance. All residents must be resided within the LBH. The residents' rent (which includes heating etc. but not food), is received from them directly or from the Universal Credit rent allowance scheme. Residents can pay by cash or direct debit. Should the resident fall into arrears in the payment of their rent, they are issued with a letter every 2 weeks. There are different options available to residents to clear their rent arrears. Support is provided by the staff for residents who struggle to clear their arrears.

Activities and Support

A resident's individual support need is discussed at a weekly meeting. No resident can reside at the hostel without engaging in either education, employment, apprenticeships, outside voluntary work or being engaged in seeking employment. Every resident must have a daytime activity. If none of the above activities are engaged in, formal warnings will be issued to such a resident and unless rectified, it may result in their eviction. A last resort for residents who have many issues is to sign a 'ABC' contract which outlines the condition of their residence.

The hostel has a large kitchen for use by residents. We were informed that the residents had recently attended a 'cooking' session where they baked a cake. The ground floor also had a laundry with washing machines and tumble driers. The support staff said they were in the habit of inviting the Police, sexual health workers and any other relevant speakers to the hostel for discussion groups with residents. The Manager also receives reviews and advice on what to make available to the residents such as outside visits, photography classes or painting classes, but these are subject to the availability of funding.

'Moving on' Plan

When the resident starts approaching the upper age limit (21 years) for leaving the hostel, it is expected that members of staff of the hostel will assist residents with viewing the premises being offered by LBH and also help them to obtain any furniture they might require. After the resident has left the hostel, they are supposed to receive up to 6 weeks' support from their support assistant. Should a female resident become 'pregnant', then LBH Social Services are to be contacted so that 'Mother and Baby' suitable accommodation can be arranged for them outside of the hostel.

Before any resident takes up an occupation, staff ensure they are registered with a GP and dentist. Should they not have a GP or dentist, the hostel will assist them with registering with these professionals.

Staffing level, working hours and coping with staff shortfall

SR believes that the current staffing level in the hostel of having 1 Manager; 1 Senior Support Assistant; 3 full time Support Assistants; and 1 part-time Support Assistant is adequate.

Staff working times are 7.30am – 4pm and 1pm – 9.30pm. SR currently works 7.30am – 4pm. The hostel has night concierge staff who work 9pm – 8am on every day of the week.

Residents from all religions denominations are supported within the hostel. Each support assistant has responsibility for 2/3 residents and are assigned residents by SR and her senior support worker according to their experience. The support given by the staff to the residents is about 10 hours per week.

Whenever a need for additional support staff arises, for instance due to holidays or sickness, a list of 'pool staff' or agency staff from Retinue are contacted who can deputise for the hostel staff. Should no 'pool staff' be available, SR does have access to an outside staffing agency who will send her details of available bank staff.

In respect of staff qualifications, there are no specific qualifications required. There is currently no training available in the borough. However, Hestia provide in-house training such as e-learning and face to face training.

Guests

Family/Friends are allowed to visit the residents and they have to abide by the visiting times which are displayed in the lounge and notice board. No guest under 16 is permitted to visit unless accompanied by an adult.

Security

Should there be any security or criminal acts committed by residents, staff on duty will make the decision on whether to contact the Police. Members of staff have access to all the rooms in the hostel. If drugs are found, the police are called. Any action taken by the staff on matters of security is reported to the LBH Social Services. Guests are required to sign in and out in a log book.

Interviews with staff

Kieron Cotter and Sangnuma Rai spoke with Hestia staff about the service delivery of SSR (Thursday 8th December 2016, 11am). They spoke to MPe a senior support worker and S (2nd staff member present) a support assistant at St Stephen's Road.

Hestia staff member – MPe

MPe has worked with young people for the past 25 years. MPe has experience of working in children's homes occupied by children in residential care. MPe possesses an NVQ3 in health and social care. MPe has been employed by St Stephen's for 9 years and is currently a senior support worker.

According to MPe, the hostel is a place that offers medium to high support. The job description for the support worker's role is set by Hestia and it is now essential that potential candidates hold an NVQ level 3 qualification (used to be NVQ 2) or equivalent childcare courses.

Responsibilities

MPe's role involves dealing with referral forms sent by the local authority or SIS Team and inviting the individuals for an interview if their profile fulfils the criteria specified. These criteria are set by Hestia and the Landlord (Notting Hill) which MPe thinks is very flexible and helpful in choosing the most suitable candidate.

After the initial meeting, MPe has the power to decide whether they can accommodate the individual or if the individual would benefit from the place. An example of tenancy being denied, occurs if the young person has a record of incidents involving arson.

MPe does not personally have an allocated child/resident, but oversees the work of other key workers. MPe could, however, be approached by the residents at any time. Sometimes during the initial meeting, health workers or young offender's workers may be present as it is helpful in getting extra information from the young person which may not be disclosed if attended alone. Background on the new resident may not be fully disclosed when initially interviewed, or the resident may say something that only the health/young offender's worker can clarify.

Support

Each resident has a young person's file (YPF) and is allocated a member of staff as a contact key worker. Every 2 weeks the resident and their key worker have a meeting to discuss progress and lifestyle benefits. Residents have access to their YPF. The key worker also assists with claiming benefits, obtaining further education or claiming entitled benefits for the residents. Whilst at the hostel, the staff are the residents' legal guardian.

The residents stay at the hostel for a minimum of 4 – 6 months and a maximum of 2 years. There are rare exceptions, when accommodation cannot be found and the resident has to leave because they have reached the age of 18. When asked what she thought of mutual bonding between young residents and their key workers which could go beyond their limited time in the residential home, MPe expressed that she agreed and encouraged such relationships to be formed.

Where any reports are received in respect of a resident's behavior, such as drug-related matters, these are reported to the resident's key worker and any reported incident is recorded in the resident's YPF. Should the reported incident be considered as further assistance is required then

they may report this to the local police neighborhood watch officer. It appears that staff within the hostel have the option whether or not to inform the police of any incident. No standing instructions to staff were available.

Funding

All young residents are entitled to live up to a maximum of 2 years in the hostel, or if aged less than 16 years at the time of their tenancy agreement, they will be able to hold their tenancy until they are 18 years old.

SSR receives a budget of £600 for children's activities. MPE spoke about budget cuts and expressed it was quite difficult for them to plan activities for children with the level of funding available to them. Among the examples of activities, MPE mentioned a trip to Alton Towers. Although she fondly talked about Christmas dinners for the children and giving out birthday cards, the activities seemed to be very minimal and planned with frugality. The hostel does have a suggestion box for the residents.

Regular meetings/supervisions/assessment

Risk assessment and a support plan for each young person is reviewed every three months by MPE. There are fortnightly 1 – 2 hours' meetings with residents and key workers, for 6 months. Every 2 weeks the resident and Key Worker have a meeting to discuss progress and life style benefits. Residents have access to their YP files. The key worker also assists with claiming benefits, obtaining further education, or claiming entitled benefits for the residents.

Staff meetings take place every month and for permanent employees, there are 1:1 supervision sessions with their line managers.

Residents' leaving

Residents can leave in three ways. A resident can be evicted (on the basis of convictions or other offences); they can surrender tenancy in certain circumstances (e.g. incarceration for more than one month) or successfully move on from the service to procuring their own place and securing a job.

Should a resident be arrested for any offence which results in a custody, then their room is kept for one month. Thereafter, their tenancy would be brought to a close. They would obtain a signed surrender of tenancy document from the resident. Should the circumstances warrant that the resident be evicted from the hostel then the matter is dealt with by the Manager, SR.

Education/Employment

Residents will attend colleges, different educational institutions (BTEC), volunteering work/ apprenticeship or part-time work. A member of staff will also contact the resident every day between 8 – 9pm.

Safety Measures

The hostel has a number of safety measures in place:

- Photocopies of photo IDs of visitors (family members and friends)
- Signing in and out
- All the meetings and 1:1 meetings are also recorded
- Making use of safety phrase and safety answer when young person have gone to stay over elsewhere (such as to the home of a relative or friend)

- Residents are required to log in and out of the hostel for health and safety issues. The same rule also applies to visitors. Residents are permitted to have visitors in their rooms. However the visitors must provide photographic ID.

Hestia staff member – S

S is a support assistant and started as a temporary staff member and now is a full-time staff member since May 2016. S is currently studying Youth Justice BA (Hons). Her previous work experience was in an adult care agency.

Typical day at work

On commencing work each day, S engages with the night staff on any issues and checks her emails. She reports any issues brought to her attention to her line manager MPE. S checks the wake up resident roster on the office whiteboard and makes early morning calls to the residents.

S' daily routine is to make sure the residents have left the hostel to attend their work, college or social service appointments. If any of the hostel residents are found missing from the school after the attendance made at school, they will contact social services who will, in turn, contact the residential home.

S will chase up any matters outstanding with social service as well as benefit matters. S is also a family liaison contact and check with any employees if the resident is engaged in any apprentice schemes. S attends the monthly resident's meetings to discuss any matters/issues relating to the hostel. S also attends external training such as in first aid or drugs and alcohol/anger management which is paid by Hestia. When asked what S thought of the joint work with social services, S mentioned that the social workers were often seen to be favouring certain children over others.

Training

S had completed an external first aid course and an anger management course. Other courses S may wish to attend would depend on available funds from Hestia and the cost of the course.

Young resident's questions

<p>What do you do at the moment?</p>	<p>Resident 1: They said that they are a student.</p> <p>Resident 2: They go to school and study English, Music, Media, PE etc.</p> <p>Resident 3: They have been here for 2 months and say they have nothing to do at the moment. They said: 'I drink, go out and smoke weed'.</p> <p>Resident 4: They said that they applied for a plumbing course.</p> <p>Resident 5: They said that they go to college.</p>
<p>How long have you been living here for?</p> <p>How come you have been referred to the St Stephen's Project?</p> <p>Do you feel safe and secure here?</p>	<p>Resident 1: They said they have lived there for more than 6 months. They said that they moved from another place. They feel safe and secure. They mentioned that one person here has a curfew due to a police tag. They also said visitors have a curfew so have a sense of security.</p> <p>Resident 2: They said that lived here for under 2 months. They moved from temporary accommodation to here. They said that they feel safe and secure here.</p> <p>Resident 3: Didn't want to mention how long they have lived here for. They said that they had issues with their parent and didn't want to live with them anymore. They said they feel safe and secure.</p> <p>Resident 4: They said they had problems at home and were moved here. They said they feel safe and secure here.</p> <p>Resident 5: They have been living here for a couple of months and said they were referred here due to being involved in a number of incidents that have led them to being homeless. They said that they felt safe and secure.</p>
<p>Do you share your accommodation with anyone else?</p> <p>Are you happy with the accommodation you are staying at? In terms cleanliness.</p>	<p>Resident 1: They said that they have their own room. But have to share the kitchen and the bathroom. They said that they don't mind living here but maintenance is needed and the computers are outdated.</p> <p>Resident 2: They said that they have their own room but share a kitchen and bathroom. They wake up at 5 am, have a shower and walk for 2 hours to the college which is located in Ealing. They said they have an adult oyster.</p> <p>Resident 3: They share a bathroom with other residents. They are not happy about it and not happy about the state of the kitchen floor. They say no one cleans it and it's very dirty.</p> <p>Resident 4: They are happy with the accommodation.</p> <p>Resident 5: They said that they have their own room.</p>
<p>Is there anything you would like improve about the accommodation?</p>	<p>Resident 1: They said more funding is needed and newer computers. Thorpe park and a bike shed is needed. More activities are needed too.</p>

	<p>Resident 2: They said that they wished the oven wouldn't take so much time.</p> <p>Resident 3: They said that they would not want to share bathroom facilities.</p> <p>Resident 5: They don't want to share bathroom facilities with other residents.</p>
<p>Are you encouraged to interact and befriend other residents?</p> <p>Is there a sense of community here?</p> <p>If no to both questions, please suggest improvements.</p>	<p>Resident 1: They said the residents get on well with each other. They feel that there is a sense of community here. They said everyone wants to paint the rooms and would like to suggest that as an improvement and get more furniture.</p> <p>Resident 2: They said that they are encouraged to interact with others. They said it feels like a community here and they all feel like friends here.</p> <p>Resident 3: They said that they are introduced to staff and residents. They said that they speak to other residents already. They said it doesn't feel like a community here. It feels like everyone is separated from each other.</p> <p>Resident 5: They speak to some residents.</p>
<p>Do you have an allocated key worker or key person who you can speak to? How often do you meet with them?</p> <p>Are they available when you have to resolve any issues?</p>	<p>Resident 1: Yes, has an allocated key worker. But says they always change. They speak to their key worker every week. The key worker is available to resolve any issues.</p> <p>Resident 2: They have a key worker here and have a good relationship with them. They see them weekly and/or every other week. They help with life skills and benefits. They are normally available if there are any issues and is able to talk to them even if the key worker is not on site.</p> <p>Resident 3: MPE is their allocated key worker but only met them once in 2 months. They said MPE was on holiday. Sometimes the staff are available to speak to but only if it's related to issues in the home. They are not involved with any issues outside of this home. Such as family issues.</p> <p>Resident 5: They have a key worker but don't see them often.</p>
<p>Do you take part in any activities outside of the accommodation? If yes, what do you take part in? (E.g. art classes, physical activities etc.)</p> <p>Are you encouraged by staff to take part in activities?</p>	<p>Resident 1: They take part in swimming. They said that there is not enough activities going on.</p> <p>Resident 2: They play football with their friends. Take part in art work, photography, and keyboard and read short stories. They have only lived here for 2 months so haven't been encouraged to take part in anything yet.</p> <p>Resident 3: They don't take part in any activities. They said that staff mention that there is a cooking class but that's all.</p> <p>Resident 5: They don't take part in activities apart from attending college.</p>

<p>Did staff help you with finding a job/college/course?</p> <p>How long did it take?</p>	<p>Resident 2: They said they were already in school before coming to this place.</p> <p>Resident 3: They said staff do help them and they got an interview for an apprenticeship but they didn't go to it.</p>
<p>What kind of support do you receive? (E.g. Counselling, advice and support?)</p> <p>Do you feel that there is enough support from staff?</p> <p>Do you think they could do more?</p> <p>Do you feel that your views are being heard by staff?</p>	<p>Resident 1: They said that they receive counselling and advice. They also said 'Housing benefit cuts are fault of the system, people and staff are alright'.</p> <p>Resident 2: They said they receive counselling and advice. They feel that they receive enough support from staff and feel that they are being heard. They said staff can't do anymore.</p> <p>Resident 3: They said that they don't receive any other support. They said sometimes the staff here provide too much support sometimes and they said their views are heard by staff.</p> <p>Resident 4: They said they feel supported by staff and say their views are heard.</p>
<p>Do you access health and social care services?</p> <p>Do staff attend any appointments with you?</p>	<p>Resident 1: They access health and social care services and said sometimes the staff go with them to appointments.</p> <p>Resident 2: They said that they are going to transfer soon – they said there seems to be some sort of hold up. They have a social worker. They said they haven't had to attend any appointments with staff yet but if need be they will.</p> <p>Resident 3: They have access to the GP but have to go by themselves. Staff only attend if there is a serious incident/situation.</p>
<p>Do you have a 'move on' plan in place?</p>	<p>Resident 1: They said they have a 'move on' plan. But resident didn't go into detail.</p> <p>Resident 2: They said they haven't got a 'move on' plan yet. They feel positive and confident and seem to understand what the 'move on' plan is. They said: 'I can move on when I can fully take care of myself'.</p> <p>Resident 3: No 'move on' plan has been planned according to them.</p> <p>Resident 4: They said that they haven't got a 'move on' plan.</p> <p>Resident 5: They don't have a 'move on' plan and were unsure about that is.</p>

Additional notes that were highlighted by residents:

- Residents said that they are allowed visitors during the day and are pleased about this.
- Residents said there's not a strict curfew. Only one resident has a curfew as they are wearing a police tag and therefore need to be back at the home between 7 – 8pm.
- One resident commented that there is no continuity and there's always a new social worker or key worker. The resident said they requested for a bike shed to put their bike in but the staff refused due to 'lack of funding'.
- Residents have said there wasn't enough funding for them to do activities. They said that they were meant to go to Thorpe Park but it was cancelled due to lack of funds.

Recommendations

- Improve lighting, cleanliness (in the ground floor toilet) and brightening up of the rooms etc. with fresh paint in some pleasing colours and lively pictures or posters that will energise young people and alter the gloomy appearance of the atmosphere prevailing inside the building.
- Organise more activities for residents.
- Involve residents in cleaning, housekeeping, organising outings and take their wishes into consideration as much as possible so that they are drawn out of their rooms, become involved with each other and feel more valued.
- Secure/provide adequate funding for organising suitable activities for residents.
- Have some in-house activities such as cycling, weight lifting and gardening or landscaping in the hostel's back garden, some competitions such as drawing, painting, dancing, music etc., or film screening outings, if the residents are interested.
- Make sure social services treat all residents on an equal footing and do not favour some and treat others less favourably.
- Make sure staff are trained adequately and receive support.

Conclusion

We trust this report is an accurate summary of the services provided by the hostel and that our recommendations will serve a positive purpose towards improving services for vulnerable young people in Hounslow.

SSR Response

SSR have responded to HWH's recommendations.

Improve lighting – During the visit we were awaiting NHHT to complete repairs to the communal lighting in the lounge. All lighting issues have been resolved, however SSR are looking into additional lighting for some areas of the building that are still quite dull.

Cleanliness (in the ground floor staff toilet) – We had some issues with the toilet not being kept locked at all times and as a result it was being left in a bad state. We had put up a staff check list

to help identify any further issues (not cleaning schedule). Staff were asked to record the state of the toilet during building checks and report to management. Please also note that during this time we had to allow the workmen access to use the staff toilets.

Brightening up of the rooms with fresh paint in some pleasing colours – All reciprocal works have since been completed by the landlord, this included the painting of both the inside and outside of the building. Since the works have been carried out residents and visitors have commented on how much better the building looks. The residents have drawn up a list of other items they would like us to purchase, which we have ordered. We were also given some art work by a resident that moved out and this will be going up alongside another resident's art work. Residents have requested to do an art project but have yet to decide on what they would like to do. SSR has agreed to purchase supplies once they decide.

Lively pictures or posters that will energise young people – Residents have said that they would like to do an art project and display their work around the building, the project is planned for April and will be led by the residents. SSR has purchased inspirational word stencils that will be put up around the service such as 'If you believe in yourself anything is possible' and other inspirational quotes. SSR have asked residents to identify further picture or art work they would like to see around the building.

Organise more activities for residents – This is an ongoing topic at our resident meetings and residents have suggested cooking, pampering, BBQ, trip to a theme park, movie nights etc. All have taken place apart from trip to a theme park to date. Social work student, resident and staff activity representative have met to discuss further suggestions, which will be carried forward to the residents meeting. SSR have accepted offers from Barclays and HSBC to come in to run sessions for both staff and residents. To date HSBC have run a Money Management workshop which the residents enjoyed and requested for more sessions on financial literacy.

Involve residents in cleaning and housekeeping – All residents have weekly cleaning chores, which they have to complete. We also have a cleaner that comes in twice weekly.

Organising outings and take their wishes into consideration as much as possible – Residents are encouraged to come up with and help organise activities for the project. The main forum is the residents meeting, however residents now meet bi-weekly to plan activities.

Drawing residents out of their rooms – Residents use the communal areas regularly. When the weather picks up residents will start to use the garden again. They have requested for the trampoline to be replaced which has been done. Residents are also allowed to have guests, so will often spend time in their rooms for privacy. Residents also hang out in each other's rooms.

Become involved with each other – The residents form relationships as they get to know each other. All new residents are introduced to staff and current residents. They are also formally introduced in the monthly resident meeting.

Secure/provide adequate funding for organising suitable activities for residents – In terms of fundraising we have approached the major super markets for funding. So far we are awaiting feedback from Asda – community life campaign, Waitrose – community matters and Co-op – membership community fund. Barclays bank have offered to fund raise for residents activities. Hestia also has funding available up to £500 which we will be applying for.

Make sure staff are trained adequately and receive support – Staff are offered E-learning as well as face to face training. SSR also book staff onto training offered by Hounslow in subjects such as safeguarding.

Disclaimer

This report is a representative sample of the views of the visitor and staff members that Healthwatch Hounslow spoke to within the time frame. This does not represent the views of all the residents and staff members at SSR. The observations made in this report only relate to the visit carried out on the 24th November and 8th December 2016.