



**healthwatch**  
Bristol

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North Somerset

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South Gloucestershire

# Enter and View Silver Birch Ward

Enter and View: Silver Birch Ward, February 2024

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# Background

Avon and Wiltshire Mental Health Partnership NHS Trust (AWP) provides healthcare for people with serious mental illness, learning disabilities and autism in inpatient and community-based settings. AWP serves a population of around

1.8 million across Bath and North East Somerset, Swindon and Wiltshire, and Bristol, North Somerset, and South Gloucestershire. Their services include ward-based treatment at Callington Road.

Callington Road Hospital is a psychiatric hospital opened in 2006, providing psychiatric inpatient and community services for Bristol and the surrounding region.

Silver Birch is a nineteen bed all Female Acute Mental Health Ward located at Callington Road Hospital. Service users who are admitted to the ward can either be detained under the Mental Health Act or admitted for an informal admission.

The ward supports service users on the ward who require a period of assessment or treatment of their mental health whilst promoting recovery and working collaboratively with them in their care.

Silver Birch ward works within a multidisciplinary team. This includes Consultant Psychiatrist, Staff Grade Doctors, Junior Doctors, Pharmacist, Occupational Therapist, Dieticians, Dance and Movement Therapist, Psychologists, Registered Mental Health Nurses, Physiotherapist, Health Care Support Workers, Support Time Recovery Worker, Exercise team, Medical Secretary and Ward Administrator. Everyone works together to ensure that high-quality person-centred care is delivered on the ward.

At Silver Birch, the whole multidisciplinary team involves the service user and family/carers in co-producing care plans and other aspects of their care whilst on the ward. This includes weekly ward round review meetings and Care Plan Approach meetings. In these meetings we also invite their community teams.

Silver Birch has recently had new bedframes and new doors fitted around the ward and building work has started for a new de-escalation suite. Once this has been completed, the team will be using the original de-escalation room as a sensory room. This is an exciting development on the ward, and the plan is to include service users as much as possible in the design of the sensory room.

The Ward Manager met the team upon arrival and answered questions regarding both the visit and the ward itself. Safety procedures for the visit, including the issue of alarms and staffing arrangements were discussed, and the team were given an overview of the routines and procedures within the ward.

# Methodology

## The Visit

- The visit was planned two weeks in advance with assistance from AWP and the ward manager.
- A set of open questions based on intelligence about existing concerns were agreed as prompts and forwarded in advance to the AWP senior team.
- The visit was made by six Healthwatch Bristol, North Somerset and South Gloucestershire (BNSSG) Enter and View trained authorised representatives.
- Two hours were spent talking to service users and staff of Silver Birch Ward, Callington Road, Bristol.
- Seven service users and two staff were engaged in conversation.

## General observation

### Woodside Reception:

Access to the Callington Road site is open to the public, and the grounds are well maintained. There is helpful, but not obvious, signage for the wards and adequate visitor and permit parking. The doors to the main reception area at Woodside are not secured, but the desk is open and clearly visible and security staff are present. The reception area was clean and warm with comfortable and varied seating for visitors. Toilets, drinking water and hand sanitizer were clearly available. There was a good variety of posters, and information boards were easy to navigate, organized by subject matter. There was also a display cabinet of service users' artwork.

### Silver Birch Ward:

The ward was well lit and warm, and the Healthwatch team were issued with alarm equipment on arrival. The dining area was clean and clearly displayed the three menu options for each day along with a wildlife spotting chart near the window and patient activity information. The unit was well staffed with non-uniformed male and female support staff who interacted with the service users in a relaxed and friendly manner. It was felt that the ward manager was clearly trying to make the unit feel welcoming and support staff. The Healthwatch team was able to speak to seven patients for in-depth discussion lasting between 15 and 50 minutes each.

## Staff conversations

The Healthwatch team were welcomed by Silver Birch ward manager who was able to provide an overview of the all-female ward and answer questions. The ward houses a mix of service users with varied support needs, some of whom have been sectioned under the Mental Health Act, and others who remain on the unit on an informal basis. The latter group can visit home and spend time away from the premises. The length of stay for service users varies from a few days to over a year.

The Manager explained expected changes concerning de-escalation, which included a new sensory room being designed with the input and collaboration from ward service users. She described the current staff level as "good" and said that the permanency of staff has increased significantly in the last year. Bank staff are employed across the trust with some workers picking up full-time equivalence across multiple AWP wards. The Silver Birch unit is currently undergoing some construction work and has recently had new doors and beds.

# Thematic Analysis

## Service user conversations

### Care plans and family involvement

Four of the seven service users felt they were kept informed about their care.

One individual stated that her care had been discussed in detail. She was aware of her progress and how it related to her returning home when the team assessed her as ready to do so. She stated that she had not been sure at first how things worked and added, "I was in a bit of a haze at first and not taking anything in, but as soon as I could, the staff explained what would happen." She reported the feeling that she was a part of the care decisions.

One individual said her family were aware of her progress. She felt that the staff were open with her relatives when they visited and supported her family taking care of some practical issues at home.

Another individual said she had asked the ward to talk to her sister and her daughter, which they had done, but she is not sure how much they know about her care and said they did not know what medications she was taking. She noted there is a separate little room for when visitors come, or they can walk over to visit the adjacent Tesco Store Café.

Another individual had been in the ward for about one month after being transferred from another care facility because this ward is closer to her home. She has a care plan that staff tried their best to explain in detail, and she said her input was included.

A third individual who had been in the ward for three months had been transitioned to informal status. She felt that this was a support step, and, as she had recently had some setbacks, that there was no rush to send her home. She said she understands the process and feels free to ask questions but would rather not think too much about the future right now.

Another service user relayed that her mother is involved in her care. Whilst two others knew that their family was being informed but were unsure what information was shared.

A fourth individual who had been on the unit for several months said the staff try to keep her informed and communicate about her care, but she forgets easily and said she would like the care plan in writing.

Another individual was unclear how much her family knew but was sure they were in touch with the unit and spoke to staff when they came to visit. This

individual found herself spacing out because of the effects from prescribed medication which made her want to cry when talking about family.

Another service user had just very recently been admitted to the ward and was very pleased to be here and felt safe. She had just come from another care facility where she had had a difficult time. She had seen a provider and said she would be having an evaluation shortly to get things sorted. She said that if the doctor determined she needed medication she would take it.

Two of the service users were not confident about what was going on with their care.

One service user had expressed a desire to the staff that she did not wish her family to be informed regarding her care. Unfortunately, this request was not honoured by her Social Worker who stated that she had spoken to the staff regarding her concerns but nevertheless informed the individual's mother against her wishes.

One individual said she does not know about a care plan or why she is in the ward, though she thought it could be related to perimenopause.

One service user stated that she was unclear which next of kin were involved or if anyone was notified. She said, anyway she could not trust them. She said she had spoken to one of her two teenaged daughters, who was happy that her mother had come to a safe place. The service user said her mother has problems with alcohol and drugs and she does not get on with her. She talked about difficult family relationships and the impact of substance misuse.

Another service user had been on the ward for a month and was unsure about a care plan but understood the process of transitioning from sectioned to informal status.

**“We had been talking about going home but after my upset they said we should leave that a while because it upsets me to think about it.”**

## **Discharge**

One service user understood the discharge process and said there had been no delay. The process was slowly underway with consideration for her step-down plan regarding medication, which was due for a review the following week.

Another service user had been talking about discharge to staff but had asked for this to be postponed and said that the staff felt this was useful too.

Another individual said she is having short trial periods at home, away from the ward before she is discharged. She said she feels overwhelmed being at home as it is a mess.

One service user said she does not have a current discharge plan but there is a meeting next week to discuss her potential discharge. Her mother will be attending the meeting and is involved in the individual's care plan and attends the ward round. She is hoping she will be discharged soon and in the meantime is allowed to have home visits to see her mother and can walk around the grounds on her own. She is hoping to work in social care.

Two service users reported not knowing what was happening regarding their discharge.

One individual said she had no news regarding discharge and felt she should be told more about what is happening.

Another individual does not know how long she has been on the ward and does not know if there are any plans for her discharge. She does not know if she will be discharged as she has no home to go to.

One service user had very recently arrived at the ward. She talked about being homeless and sleeping on a park bench and did not provide any information about plans for her discharge.

## **Safety**

Five of the seven service users reported feeling safe throughout their time on the ward, crediting responsive staff and having their own room.

One individual said she felt safe and protected because the staff were vigilant, and she has her own room with a lock. She recounted an incident when she had recently arrived at the ward saying, "Another individual picked on me, and I was scared. But the fast response from the staff was really good." She added that the unit is a calm and relaxed place, and there is always someone to talk to. She enjoys her stay here and is happy to be getting better.

**"They allowed me a safe space, calmed me down and sat and talked to me for ages. They also dealt with the other person well - the incident didn't happen again."**

A second individual said she never felt afraid. At first, she spent time in her room but was slowly encouraged to be more present in the other areas. She was not afraid of any staff or individual and said although sometimes there was shouting, it did not bother her.

A third individual reported feeling safe in the ward and reassured by the staff's friendly faces. She had been in another care facility where she did not feel safe. She said she had needed night sedation and had seen a "very nice doctor."

A fourth individual feels safe on the ward and can go to her room if she feels unsafe. Although she does not want to talk to the staff as she is a private person.



A fifth individual feels safe on the ward and would go to a staff member if she did not feel safe. She said there is always staff around and she has her own room key so she can lock her room. If any unsettling behaviour does happen, she will get away from the situation.

One service user said that she had not felt safe at the beginning of her stay but that she felt better now because she realised the staff are just trying to help.

Another service user stated that she did not feel safe on the unit because she felt that the staff did not like her and tried to upset her at night. She said, "They stand outside my bedroom door, rattling their keys, making me upset so that I feel I am in jail." She said the staff on the ward were not nice and did not listen to her. She said the staff were a bit different from staff working in the outpatient clinic and found it difficult on the ward.

## Activities

All the service users reported there being many different activities available even if they did not participate themselves.

One individual said she does a lot of activities and that there is an Activities Coordinator on the ward who comes in every day. She has tried pottery and likes playing games. There is a gardening group that uses the garden outside, where service users are accompanied by an Occupational Therapist. The individual has not tried this yet.

Another individual said that since she had been feeling better, she had begun to take part in more activities and that she enjoyed playing board games with the staff or other service users. She said there was also the chance to be more creative and had particularly enjoyed the pottery session once a week. She liked colouring books because she felt this activity was calming.

**"I made a really nice colourful plate in pottery and XX (staff name withheld) says they have saved it for me so I can take it home."**

A third individual said there are several activities including making pom poms, games, like Scrabble, which she enjoys, Bingo and cooking sessions like making pizzas or apple turnovers. She said they sang carols at Christmas. She enjoys the gym, slots for which the patients need to book, and mentioned Tai Chi.

Another service user said there were available activities but that she was not interested in much. She said she could do yoga (with an instructor), basketball, visit the gym or play pool with a staff member if she asked. She could also go to the adjacent Tesco store with staff.

Another service user prefers her own company and loves being in nature when that is possible.

One service user stated that they sometimes have activities in the dining area, but she prefers to read in her room and does not get bored with reading. She spends a significant amount of time in her room because she is a very private and shy person. There is a room for art/painting that she can go to on her own if she wants to. She liked to do arts/crafts and painting when she was at home.

A further service user said that boredom was a big problem.

The Occupational Therapist provides a variety of sessions and on the day of the Healthwatch visit the group were going to make bread. She also said she could go to Tesco without the need to be accompanied by staff.

## Complaints

Though some service users reported being able to talk to staff equally, some expressed a preference for a particular person.

One individual stated that the staff were always there for you. She felt able to share her worries with them and that they took the time to listen.

**“You feel they really care about you, that is isn’t just a job to them.”**

Another individual relayed that all the staff were chatty and friendly and added that the patients supported each other too, which was an atmosphere encouraged by the staff. She said that if she had a problem or complaint she could speak to “Anyone here I felt comfortable with, in this ward.”

A third service user would usually speak to a nurse. She or the nurse could then mention the concern at ward round and report back. At first, she was given medication against her will and was unhappy about it, but now that she is better, she can see why they did that. She is good at speaking up for herself, and her parents advocate for her too.

A fourth service user said she would first talk to a staff member from an ethnic minority if she had any concerns until she gets to know the other staff better and stated that this approach was based on her experience in a previous care facility. She said there had been a lot of agency staff at the previous care facility and gave the impression of not feeling very confident with them, though she said this unit is better.

Three service users were less clear about who to go to with concerns.

One individual said that the staff made “some effort” to talk to her but would not know who specifically to go to if she had a problem.

Another individual does not want to talk to anyone. If she is not happy, she keeps to herself. She has trust issues.

A third individual said there is a community meeting once a week where service users can voice their opinions. She felt that this input was heard, for example, she requested that the coffee was labelled as to whether it was decaffeinated or regular. She said shortly after her request the coffee was more clearly labelled.

## Respect

Five of the service users reported feeling heard and respected.

One individual said that all staff members were good listeners. She said she did not want to talk much at first but “now they have trouble shutting me up.”

Another individual said there was always respect for people’s views and feelings and that staff took the time to sit down and hear what you had to say. She also felt staff were responsive to her needs and appreciated being asked if she wanted coffee or tea or felt hungry.

**“They give you some space so they are not like in your face, but you can always have a chat and think I can trust them.”**

A third individual said the staff do not intrude, and she likes it that way.

A further individual said she had seen the best doctor during her time on the ward and that the staff were very friendly. She felt supported by staff and said, “they don’t want you to be addicted to medication.”

A fifth individual felt heard and respected. Another service user said she did not feel listened to or respected.

**“I am lonely, they are homophobic, and they don’t listen to me, and they don’t like me.”**

## Staff interaction

All service users reported there being regular opportunities to talk and interact with staff.

Two individuals felt staff were approachable and said they had daily interaction with a variety of staff members.

Another individual said you could chat if they made time but not every day.

A fourth individual who had recently arrived at the unit said there were lots of opportunities to interact with staff and another added that she is aware that she

can talk to the staff and that others on the ward do, but she prefers to keep to herself.

A sixth individual explained that there are always people around, but sometimes she prefers to talk to a particular member of staff. She has a key member of staff and support worker. The staff approach the service users quite often as well. They are good at looking out for service users to make sure they are okay, but they will also give individuals alone time too.

A further individual said that staff are there to talk if you need them and are reassuring. She said at first, she found the staff frosty but came to find them friendly once she got to know them better; though she said her perceiving them as frosty may have been due to her state of mind when she first came to the ward.

**“There are regular meetings with staff where you can provide feedback.”**

## **Equity and fairness**

Four of the service users felt that everyone was treated fairly.

One individual said she had experienced racism in a nearby town and did not think the staff on the ward were racist.

Another individual felt everybody was treated the same and that those who were different in any way were not treated any differently. She felt people who were religious were supported in their faith.

A fifth service user could not really say about how other people were treated, but from what she has observed, they treat everyone with respect.

Another service user felt that some individuals in the unit demanded more attention and medication which could make the treatment of them feel like they were being favoured. But she had never been discriminated against because of her beliefs or lifestyle.

One individual said she felt that some individuals were better liked than others by the staff and so were treated better. She felt that the staff discriminated based on their favourites. She also felt they were homophobic and treated people poorly on this basis.

## **Cultural issues**

Most service users reported that staff are supportive of spiritual practices and beliefs even if they themselves do not have any specific needs.

One individual said, “We talked about religion once and they will help you with that if you want to go to church or worship.”

A second individual explained that she has been asked if she has any religious or spiritual practices that need to be met. She does not, but she has been asked if she wants to go to the church service that they hold on site. If she decided that she wanted to go to the church service, she would have to go with her mum and a member of staff.

A third individual said she is not religious but that she had been to a couple of church services during her time on the ward and found it to be a calming experience.

Another service user I who had recently arrived at the unit explained that she does not have one specific religious belief but rather a broad array of beliefs. She said she had not been asked specifically about her beliefs by staff but felt that staff would be accommodating if she had any requests.

**“I recently converted to Islam but still hold my family’s values too, and the staff are happy to allow me to pray and make time for that.”**

One service user simply said she does not have any spiritual practices that need to be met.

## **Nutrition**

Four of the seven service users reported the food being good.

One individual said, “the food is excellent!” and that the fish pie was a good choice and a particular favourite of hers. She also explained that they are free to make tea and coffee anytime, which she liked.

Another service user said that the food is quite nice and there is a good choice, but she does not eat it as she has no appetite.

A third individual said the food is nice and healthy and another stated that she liked the food, especially the pies, though she said there are people who want more diversity.

One service user said when she first came to the ward she did not want to eat, and the staff encouraged her gently to do so. She added, “when I wasn't eating, they kept a close eye on that, checking with me a lot and getting me things I really liked.” She stated that if you did not want any of the options they could try and mix and match things for you and that overall, the menu was quite healthy. But she added “I do always like pudding too!”

Another service user explained that over all the food was okay and said it was quite repetitive. It is brought in from off site. She recounted that on one occasion they had run out of the vegetarian option and offered to make her a sandwich but that she had wanted a hot meal like everyone else. The individual said that they can cater for different needs like vegan/vegetarian, gluten free, etc. She said her mum will also bring in snacks.

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“The staff asked my daughter what I liked and when she told them they made me cheese on toast specially.”

One service user said that she did not think the food was very good. She said there were three different meal options with a vegetarian choice always available but that she often preferred to purchase her own meals from the supermarket. She liked the fact that you could help yourself to biscuits and crisps and that the staff would always make you toast if you asked them.



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