

Waterloo Manor Independent Hospital - Leeds

Healthwatch Leeds reviewed the Care Quality Commission (CQC) inspection report dated 17 August 2015 that rated all 5 areas the CQC inspected as inadequate. A CQC inspection rating of “inadequate” always requires a written action plan and the CQC will undertake further compliance visits due to the rating to check that the actions are being implemented.

Background

Waterloo Manor Independent Hospital provides low secure and rehabilitation services for women with mental disorders and complex needs. It is run by a private company called the In Mind Healthcare Group.

The hospital consists of:

- Three low secure wards: Cedar (12 beds), Maple (13 Beds) and Larch (8 beds).
- Three locked rehabilitation wards: Beech (6 beds), Holly (4 beds), Hazel (8 beds).
- One open rehabilitation ward: Lilac (5 beds).
- The hospital has a total of 56 beds.

The service had been inspected three times since it was registered in October 2010. Every inspection has produced a list of standards that the hospital does not adequately meet.

Current concerns

The West Yorkshire Healthwatch network considered the Waterloo Manor report, together with two other reports of private hospitals in Bradford and Kirklees in their network meeting in October 2015. As all of the residents are commissioned from outside the Leeds or West Yorkshire area, the West Yorkshire HW raised a question about how quality was monitored with the NHS England Yorkshire and Humber Team. The NHSE team has acknowledged our concern and we know that activity to review the findings and other quality information has taken place including a meeting in December 2015.

The challenge from the Healthwatch perspective is that we hold no information on any carer, family member or patient ever raising a concern with any of us. Conversations with advocacy colleagues have not identified any support requests from patients in Waterloo Manor. Many residents remain in the hospitals for a number of years and most patients are commissioned by different commissioners. The patients have a very limited voice and the CQC report says that they do not believe their complaints and concerns are handled effectively. Review and inspection of such facilities requires knowledge and skills beyond the Enter & View capacity of Healthwatch, including specialist knowledge of appropriate detention and management of secure facilities, the Mental Capacity Act and rehabilitation pathways.

We have asked the NHS England team to review the quality and monitoring arrangements that are in place for the patients and to indicate how actions for improvement are monitored.

Tanya Matilainen

Chief Executive

18 January 2016