

Healthwatch Kent Report : Care Home Series

Barnes Lodge, Tonbridge

May 2018

Across the country, Independent Age has been working with Healthwatch to explore what people are looking for when choosing a care home.

They have identified 10 key indicators that they feel make a good Care Home, for example, they highlight the important areas of dignity and choice. For example, residents being able to continue their hobbies and have an input into the running of the home.

Many Healthwatches already use the Independent Age indicators when visiting Care Homes and we have decided to adopt this approach here in Kent.

We have visited 24 Care Homes in total in recent months, two per District. It was important to us that we visited a range of homes from every area in Kent. Although we selected them at random we did check with the Care Quality Commission, Kent County Council and the seven Kent Clinical Commissioning Groups to ensure we didn't clash with any visits they already had planned.

This report details the findings from our visit. We have already published a report which summarises the findings from all 24 visits. We have of course shared our findings with the Care Home but also the Care Quality Commission, Kent County Council and the Clinical Commissioning Groups as each of them have a role to play in inspecting and commissioning care homes in Kent.

We will be following up with each home to check their progress against our recommendations and will publish an Impact report detailing their improvements.

If you have an experience of a Care Home in Kent that you wish to share with us (good or bad) do get in touch. Call our freephone Helpline on 0808 801 0102 or complete a feedback form on our website www.healthwatchkent.co.uk

Steve Inett

Chief Executive, Healthwatch Kent

What were we trying to achieve?

Using the 10 key indicators, as set out by Independent Age, we wanted to talk to Care Home residents, family and staff about their experiences of living and working in the home.

How did we go about it?

We visited Barnes Lodge in Tonbridge on 7th February 2018. **Our authorised visitors were David Morris, Ray Fairburn and Jo Pannell.** We talked to the manager, two members of staff and five residents. We received one questionnaire from a staff member by post, but did not hear any feedback from family members, which makes this report a less balanced than we would have liked.

We were seeking to answer the following statements.

A good care home should.....

1. Have a registered manager in post.
2. Have a stable workforce
3. Have staff who have the right skills to do their jobs.
4. Have enough staff on duty during the day and night
5. Be clear about how they will be able to meet residents' needs both now and, in the future,
6. Offer meaningful activity and enjoyment to suit all tastes
7. Enable residents to see a GP or other health professionals like a dentist, optician or chiropodist, whenever they need to
8. Accommodate your cultural and lifestyle needs
9. Show that they're always looking to improve
10. Provide nutritious food, plenty of fluids and a pleasant environment for meals

Overview: What did we find?

The home

- is set in a rural position just outside of Tonbridge. It is a new purpose-built facility
- has 101 bedrooms over three floors all with en-suite wet rooms. At the time of our visit the home had 70 residents, 35 on each floor
- interiors are tastefully decorated with a dining room and several lounges on each floor with multiple seating areas, a hair salon, therapy room and landscaped gardens.
- has local amenities close by with shops and bus services
- is owned by Abbeyfield
- accommodates people aged 65 and over.

The home had their last CQC inspection on 19th December 2017. The overall rating was 'Good' in all areas of safety, effective, caring, responsive and well-led. Please click on the link to view the latest report <http://www.cqc.org.uk/location/1-2687454718>

This is what we found....

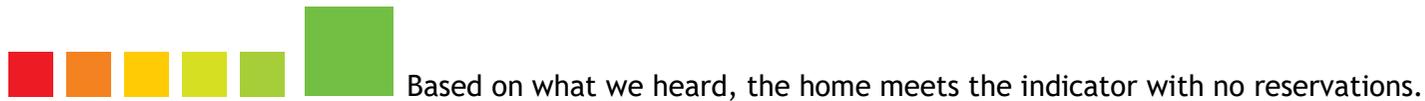
A good care home should...

1. **Have a registered manager in post.** The registered manager is the most important staff member in a care home - and the one responsible for ensuring quality standards and residents' needs are met. They should be visible within the care home, provide good leadership to staff, have relevant experience of the health and care system and qualifications to help them do their job.

The registered **manager** had been with Abbeyfield for 10 years, working her way up from a carer. She had previously managed two care homes in Gillingham and Gravesend. She enjoyed being with the residents and supporting families during some difficult times. She told us that every day was different and that she has the ethos that all workers are key to the successful running of the home.

Staff told us that the manager was supportive and was always there for them regardless of the issue. The manager operates an open-door policy and is easy to talk to.

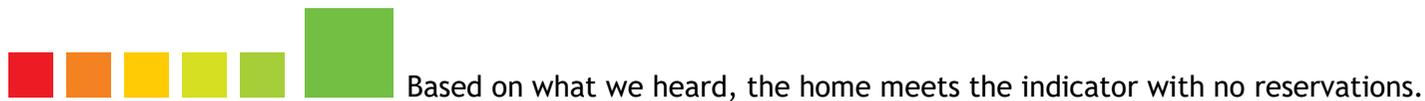
Three of the **residents** knew who the manager was and said that she was “wonderful” and “easy to talk to”. The other two residents couldn’t remember her name but knew her by sight.



- 2. Have a stable workforce.** Care homes with knowledgeable, experienced staff who get to know residents can make the difference between an institution and a home. Where turnover of staff is very high, these qualities can be lost. It may also be a sign that staff are not happy working in the home.

The **manager** told us that a lot of the staff had been at the home for some time and they only used a few agency staff.

The **residents** knew all the staff in the home or appeared to know them.



- 3. Have staff who have the right skills to do their jobs.** Well-informed, skilled staff who are valued and developed as employees are vital to a smooth-running care home. All care homes should have a clear, comprehensive training scheme to ensure staff have the knowledge they need.

The **manager** told us that training was key to the successful running of the home. All staff wore different colour polo shirts so that residents could identify what role they did

The **staff** told us that they are currently doing their NVQ's in social care, with one completing level 2 and the other on level 3. They had also recently had medication training. They commented that: *"our manager encourages us to do further training". "we can sign up for lots of courses that are provided in house or we can sign up for them online"*.

 Based on what we heard, the home meets the indicator with no reservations.

4. **Have enough staff on duty during the day and night.** Many homes have a lower proportion of staff on during the night, but if the ratio falls too low - at any time of day - response times can be too slow.

The **manager** told us that there was one manager, five care staff and one team manager on each floor during the day time and three night staff and senior carers on each floor during the night.

1 member of **staff** told us that they had enough time to care for residents, with the other saying that *"we are short staffed things could run late, but when fully staffed things are fine"*. Another told us *"sometimes we are pushed, I would like to do more one to one sessions with the residents"*.

The **residents** we spoke to all agreed that the staff were very good and that they had the time to stop and chat with them

 Based on what we heard, the home meets the indicator with no reservations.

5. **Be clear about how they will be able to meet residents' needs both now and in the future.** Many residents will develop more care needs as they get older - particularly if they have a condition like dementia. It is vital that homes can spot changes to their health and respond appropriately - consulting other health professionals where necessary - to provide the right level of care and prevent residents from having to move again.

The **manager** told us that she undertakes a pre-assessment with potential residents and their family members and they have a 4-week trial at the home to start with. If the manager could not meet all the needs of the prospective resident, she would not offer them a place. A care plan is completed with residents and family members and 'this is me' stories about each resident with memory boxes in and outside each resident's room. A diet sheet is updated continuously and filed with the care plan.

Staff told us that a senior member of staff talks to each resident, family and friends to find out their likes and dislikes and records this into the care plan. Each member of staff spends time with any new residents to get to know them. Care plans are updated weekly, with any concerns dealt with immediately. Carers also give any feedback from residents to senior carers for action.

The **residents** that we spoke to knew all the staff, if not by name, then by sight.



Based on what we heard, the home meets the indicator with no reservations.

6. **Offer meaningful activity and enjoyment to suit all tastes.** Care homes should not be boring places - they should offer an interesting range of activities and entertainment that match the tastes and preferences of their residents, including individual activities. Homes should take steps to stop residents from becoming isolated or lonely while respecting their privacy and choice.

The **manager** told us that Tonbridge Lyons club attends the home every other Sunday from March to October to take residents out in the mini bus, an external entertainer comes in and there is an activity co-ordinator on site 5 days a week. Two additional co-ordinators have recently been recruited. There are exercise classes and local school children come into the home regularly. The staff spend one

to one time with each resident and all residents are encouraged to join in the activities or they can watch, but it is their choice to join in or not

Staff told us that they encouraged residents to join in the activities, but it was their choice to join in. They told us that there was an activity co-ordinator who organised music therapy, board games, (which were happening during our visit) baking, quizzes, skittles, bowls, pamper sessions, football shoot out, reminiscing and visits out in the minibus.

Two **Residents** told us that it was easy to join in the activities, two weren't interested and the other was not sure. When asked if they went on trips outside one said "yes", three said "no" and one resident hadn't been there for very long.



Based on what we heard, the home meets the indicator with no reservations.

7. Enable residents to see a GP or other health professionals like a dentist, optician or chiropodist, whenever they need to.

Residents should have the same expectation to be able to promptly see a health professional as they would have when living in their own home. Care homes should be able to explain the relationship they have with their local NHS services - does a GP visit regularly? Can they call a GP out in an emergency? How easy is it for residents to see a dentist, optician, chiropodist or physiotherapist, either for a check-up or in an emergency?

The **manager** told us that there was an annual visiting optician offering annual check-ups, residents were taken to external dentists and there was a visiting chiropodist.

The **staff** told us that residents have regular check-ups and that staff or family members take residents out to hospital appointments.

The **residents** we spoke to told us that they had seen an optician within the home and the chiropodist. They go out for dentist appointments. One also told us that they had their nails and hair done in the home.



Based on what we heard, the home meets the indicator with no reservations.

- 8. Accommodate your cultural and lifestyle needs.** Care homes should be set up to meet your cultural and lifestyle needs as well as your care needs and shouldn't make you feel uncomfortable if you do things differently to other residents. They should also be proactive in finding out what your needs are, so that they can accommodate them.

To cater for any cultural, religious or lifestyle needs the **manager** discusses these with residents and families at the pre-assessment. St Michael's Church attends the home weekly.

The **staff** told us that a Chaplain comes in frequently to talk to residents and asks them if they would like to go to church. There is also a regular communion service on a Sunday.

All the **residents** told us that their religious and cultural needs were respected at the home.



Based on what we heard, the home meets the indicator with no reservations.

- 9. Show that they're always looking to improve.** You should be able to find out what current residents, their families and friends think about the home. The care home should be happy to help you do this - for example, by putting you in touch with a residents and relatives group or allowing you to speak to residents and visitors in private. They should also have support in place for people who wish to make a complaint any time, and there should be a healthy culture of challenge and feedback between residents, relatives and staff.

The **manager** said that she had an open-door policy and that there were residents' meetings and a satisfaction survey. If a complaint is received the manager sends a letter of response to the person and informs the care team of the complaint. The manager listens to staff comments about the running of the home, these come out in supervision sessions, the satisfaction survey or weekly care team meetings

The **staff** told us that there was a complaint box, or they would talk to the manager. They both felt that they would be listened to if they had ideas about the home.

We asked the **residents** if they would change anything about the home: one said they didn't know, two residents said they liked the way things were so would not change anything, another told us about frequent resident meetings and one said that another resident tells her where to sit. When asked if they would make a complaint if they needed to: one resident didn't know and the others all said that they would speak to the manager or staff if they need to.



Based on what we heard, the home meets the indicator with no reservations.

10. Provide nutritious food, plenty of fluids and a pleasant environment for meals

The **manager** told us that there is a cooked breakfast available as well as toast and cereal. Tea, coffee and juices are available throughout the day as are snacks. There are three main lunch options and a hot and cold choice for tea.

The **staff** told us that family and friends were actively encouraged to come into the home and often spoke to the manager, there was also resident and family meetings where they can have their say. We asked the staff about mealtimes. They told us that juices are available in each of the lounges and fluid charts are kept. Residents have a choice of two hot main meals a day, with snacks served mid-morning and afternoons with all residents encouraged to eat in the dining rooms, but they can have their meals in their rooms if they prefer. The dining rooms have tables with four chairs, soft music is played at meal times and staff sit with residents to chat with them or assist them to eat.

The **residents** we spoke to had a mixed view of food, some said “It is perfect”. “It is good, we don’t have set seats”. “It’s brilliant”. The others told us: “It is ok, we do get a choice” and “it is alright but not great, it can take time”. Two of the residents we spoke to didn’t enjoy mealtimes, but the others all did.



Based on what we heard, the home meets the indicator with no reservations.

What have we recommended?

- Continue to provide the welcoming and caring environment for your residents that we saw during our visit.
- Build on, and maintain, the support of relatives who value the services provided.

Disclaimer

Please note this report relates to the findings on the day stated at the beginning of this report. Our report is not a representative portrayal of the experiences of all staff, residents, family and friends, only and account of what was contributed and observed during our visit on that day.

Healthwatch Kent

Healthwatch Kent is the independent voice for local people in Kent.

We gather and represent people’s views about any health and social care service in Kent.

Our role is to understand what matters most to people and to use that information to influence providers and commissioners to change the way services are designed and developed.

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