

## Healthwatch Kent Enter and View Care Home Programme 2014

Healthwatch Kent undertook a series of visits to care homes, as part of a Kent wide observation of care home provision within the county.

This report features three care homes visited in October and November 2014;

- Barnetts, residential care home in Tunbridge Wells
- Broad Oak Manor, nursing home in Dartford
- Sonia Lodge, residential care home in Deal

### About Healthwatch Kent

Healthwatch gives people a powerful voice both locally and nationally. In Kent, Healthwatch works to help people get the best out of their local health and social care services. Whether it's improving them today or helping to shape them for tomorrow. Healthwatch Kent is all about local voices being able to influence the delivery and design of local services. Not just people who use them, but anyone who might need to in future.

### What is Enter and View?

Part of Healthwatch Kent's remit is to carry out Enter and View visits. Trained volunteers carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows Healthwatch Kent authorised representatives to observe services and talk to service users, patients, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observed anything that they felt uncomfortable about they would inform their lead who would then inform the service manager, ending the visit.

In addition, if any member of staff wanted to raise a safeguarding issue during our visit, we would direct them to the CQC where they are protected by legislation if they raise a concern.

## **Acknowledgements**

Healthwatch Kent would like to thank all the Care Homes, residents, visitors and staff for their contribution to this Enter and View programme

## **Disclaimer**

Please note that this report only relates to what we observed during our visits. Our report is not a representative portrayal of the experiences of all residents and staff, only an account of what was observed and contributed at the time.

## **Purpose of the visits**

Healthwatch Kent undertook a series of visits to Care Homes, as part of a Kent wide observation of care home provision within the county. Care Homes were selected on the basis of a review of CQC reports in 2013 and 2014, that highlighted issues relating to resident experiences, particularly those with concerns raised about quality of care.

The visits aimed to;

- gather views from residents, carers/visitors and staff about their experiences in the named Care Homes.
- explore residents' views on the facilities provided in the named Care Homes.

This report features three care homes visited in November 2014;

- Barnetts, residential care home in Tunbridge Wells
- Broad Oak Manor, nursing home in Dartford
- Sonia Lodge, residential care home in Deal

## **Methodology**

This programme was based on a schedule of announced Enter and View visits. Contact was made with each Care Home before the visit and information was given to the care home about the role of Healthwatch. The dates for the visits were agreed with the Care Home managers.

A team of two trained Healthwatch Enter and View volunteers visited each Care Home. A set of questions and areas for observation were used by teams, as the framework for conversations during each visit (Appendix A).

At each Care Home, Healthwatch Kent checked with the provider if there were individuals who should not be approached or spoken to on the day.

All our observations have been shared with the Care Homes and each were given an opportunity to respond to our findings.

# Barnetts Residential Care Home

Name and address of premises visited	Barnetts Residential Care Home, 68 Frant Road, Tunbridge Wells, TN2 5LR
Name of service provider	Avante Care & Support
Lead contact	Beverley Seal and Jude Cochran
Date and time of visits	7 <sup>th</sup> November 2014
Authorised representatives undertaking the visit	Helen Stewart (Lead) and Paul Burchett

## Background Information

Barnetts provides accommodation, care and support for up to 39 people with Dementia. The current residents have an age range from mid-seventies to a lady aged 102.

A team of two Healthwatch Enter and View volunteers visited Barnetts on a Friday morning, arriving at 11 am and leaving at 2.30pm.

The team spoke with the service manager, a relative of a resident in the home and various staff as they cared for the residents during the day. During the visit the two members of the team spent time with a range of residents both male and female in the lounge areas, corridors, or in the restaurant during lunch time. They were also invited to talk with one resident in their room.

## Summary of observations

- The home was clean and welcoming.
- In general, decoration is a bit 'tired'.
- The residents were calm and happy and settled within their environment.
- Security around the building was effective and well signposted and, as incidents arose, staff on duty were seen to respond quickly and effectively.
- Staff delivered care to the residents with compassion.
- Residents have choices about their daily routine and activities.
- There was a wide range of activities provided to the residents, which supported them in their daily life within the home.

## Observations

### Environment

The team viewed all areas of the home on the ground floor, but did not visit the bedrooms on the first floor. However, a bedroom was visited on the ground floor. The room was clean and tidy and the current resident was sitting listening to her choice of music. She had risen late that morning and wanted to stay within her room. However, her door was open and staff and residents who passed by were stopping and either conversing with the resident or completing a task.



The corridors were clean and hazard free. The security on external doors and specialist areas was well signposted and effective. During the visit the alarms in several areas did go off, but the guidance both in signage and electronic boards around the building enabled the staff to see quickly which area required a visit and were observed responding effectively.

There were two main lounges where the residents were sitting, with several smaller lounge areas. The corridors and lounge areas were free flowing allowing the residents to 'wander' securely.

### **Privacy, Dignity and Respect.**

Overall, residents appeared happy and settled within their chosen area. Some residents were asleep and were not disturbed. The team spent time sitting with a number of residents in the lounge areas, where they talked to residents. Due to their dementia, residents were not asked detailed questions about the home, but team members talked to them about the weather, what they had for breakfast, what they were listening to on the radio and general topics of conversation.

### **Recreation, social and pastoral care**

Whilst the team were meeting with the home manager, a small group of residents were taken out by the Activity Co-ordinator in a mini-bus to a local garden centre for a morning activity. It appeared to be well organised and well supported by the staff who accompanied the group of residents on the outing. They returned to the home just before lunch at 1pm, with all the residents appearing calm and in a settled and relaxed mood.

The Activity Co-ordinator was seen to provide a range of activities, including using a separate kitchen area where residents were supported in a range of activities including cooking and crafts. The garden was also used by residents and some residents had planted plants in the garden this year supported by staff.

### **Food, daily routine and choice**

The lunch menu was clearly visible on a large blackboard within the main lounge for all residents to see what was available that day for lunch. Within the main lounge areas there was always one member of staff available, along with the resident's folders, which contained personal information. We did not view the content of these folders as it was not appropriate, but it was apparent that staff did use these folders to support the delivery of care to the residents.

These folders were also re-located to the restaurant at lunch time to support the delivery of care and recording of medicines being issued to the residents taking lunch in the main restaurant.

We also observed that residents could make a choice not to have lunch in the restaurant and staff supported them in their choice. A trolley service was provided to those residents who wanted to stay within the lounge area for their lunch that day.



## **Personal care**

Where we saw residents seemingly distressed due to their dementia that morning, they were well supported by the staff on duty, who took the time to address the cause of the stress which the resident was feeling.

Discussions were held with staff as they went about their daily tasks by both Enter and View visitors. They were observed to approach the delivery of care to the residents with compassion. They answered the care bells during our visit promptly.

Staff appeared to have a formal routine in respect of handover from one shift pattern to another and are allocated as a key worker for a number of residents for a shift; but that this does not heed them in supporting any resident should it be needed during the shift.

The staff were observed responding to the residents who experienced any distress in a calm and supporting manner, so that the resident's level of anxiety and distress was reduced.

## **Discussions with Visitors**

When we first arrived at Barnetts we had a short meeting with the unit manager. During that time there were two relatives visiting their family members. These were regular visitors, but we were not able to talk with them.

However we did meet with a relative who visits their family member every day. The relative provided the follow views:

- The staff were very caring with the residents.
- The rooms were clean.
- The residents were well looked after and the food was very good.
- The activities were varied, with onsite activities, gardening and cooking in the residents small kitchen.
- The hairdresser and chiropodists visited the home to provide services to the residents.
- The home had organised a Halloween event.
- The Activity Co-ordinator had organised PAT pets to visit and had also organised some residents to visit a nearby Llama Park.
- The visitor informed us that their relative had moved into the home from hospital and during that transfer, they had lost their glasses. The staff had quickly organised an optician to visit the home and get the residents glasses replaced so that they were able to see properly.



## Discussions with Staff

On arrival we meet with the Manager of the home and discussed a range of topics. The home had a gender balanced staff team and they tend to be split across appropriate shifts to ensure that the residents have a male / female carer if required.

There continues to be a shortage of permanent staff, mainly due to the economic / social environment in the Tunbridge Wells area. The home does use agency staff, but tends to use the same agency, so that residents become familiar with the agency staff as the same ones return often.

The home has access to support, guidance and training from an Admiral Nurse to support the residents where additional mental health issues arise and is included with the ongoing training being provided to staff.

We found that when asked questions about routines within the home, the staff were able and confident in explaining how the home functioned.

## Recommendations

- To continue with improvements underway following a CQC visit from June 2014 regarding record keeping.
- To continue to develop and deliver training programmes for permanent and agency staff with the current focus on supportive care and maintaining the dignity of residents.
- To ensure the most 'tired' areas of the home are improved within the next budget cycle.
- To progress the proposed change of use for some of the communal areas and further enhance the experience of residents.

# Response from Barnetts Residential Care Home

16<sup>th</sup> January 2015

To Healthwatch Kent,

Thank you for this report which I found was balanced and well written. It is an excellent testimony which shows the commitment of the all the staff.

You will be glad to know that we have started progress on the décor and have nearly completed the downstairs corridors, which are looking much more bright and colourful. Improvements will continue as they are integral to the wellbeing of our resident and staff.

Yours faithfully

Beverley Seal  
Manager



# Broad Oak Manor Nursing Home

Name and address of premises visited	Broad Oak Manor Nursing Home, Broad Oak Close, Arnolds Lane, Sutton-at-Hone, Dartford DA4 9HF
Name of service provider	Bupa Care Homes
Lead contact	Sandy Dodds (Home Manager)
Date and time of visits	Two visits by Healthwatch Kent authorised visitors on Wednesday 15th October 2014 and Saturday 18th October 2014
Authorised representatives undertaking the visit	Liz Allen, Chris Carter, Jenny Coombs, Marietta Ringer

## Background Information

Broad Oak Manor Nursing Home specialises in a range of personalised care including Parkinson's disease, as well as providing respite, palliative and convalescent care for up to 42 people.

A team of three Healthwatch Enter and View volunteers visited the service on Wednesday 15<sup>th</sup> October and again on Saturday 18<sup>th</sup> October.

Authorised visitors approached ten residents to informally ask them about their experiences of the home. They also spoke to six relatives, who gave informed consent. All residents, relatives and staff were left information about Healthwatch Kent including information on how to contact Healthwatch Kent in the future.

## Summary of observations

- The home was clean and welcoming.
- Staff were observed treating residents with dignity and respect.
- Residents and families raised concerns about staff response times and in particular the impact of this upon toileting.
- Residents reported some dissatisfaction with the presentation and variety of food.
- There was a wide range of activities provided to the residents which supported them in their daily life within the home.
- The Manager was honest and pro-active in discussing current improvement plans.



## Observations

### Environment

The entrance hall is a welcoming space and all parts of the home areas were wheelchair accessible. Three lounges on the ground floor are available for residents and often used for activities. Doors from the ground floor dining room offer access to the garden which is well used and enjoyed by residents.

The garden is used in summer months for celebratory events such as fetes and barbeques.

### Privacy, Dignity and Respect.

Most residents, with whom we spoke, were pleased that if they could no longer be in their own home they were in the care of Broad Oak. Some residents had been involved in choosing their accommodation, but most had relied on views of their relatives, friends, or from personal recommendation from previous residents.

A concern raised by two visiting relatives and one resident was the length of response time when residents requested assistance including when needing to go to the lavatory. This caused distress and embarrassment for all.

### Recreation, social and pastoral care

Broad Oak employs an Activities Organiser who arranges a varied and well-advertised programme for those residents who wish to take part. Some events are "in house" and others involve planned outside visits. These outside visits can involve extra cost to be met by the resident; however no-one is excluded due to cost.

Evidence of a range of planned activities was observed, including PAT Dogs visits, quizzes and board games, film shows and external trips to local theatres and shopping centres.

The local vicar visits regularly for a service and hymn singing in one of the lounges followed by coffee and refreshments.

Staff reported that residents are offered the opportunity to undertake activities on an individual basis as well as a group basis.

Some residents mentioned that a library service would be appreciated, but the Manager confirmed that there is in fact a library service in operation. The hairdressing service was mentioned as being well used and enjoyed by residents.

### Food, daily routine and choice

Residents are given the choice every morning of the planned menu. They have the option of either using the dining room or eating in their room. Some seem to "mix and match". Snacks and drinks outside mealtimes are also provided when requested and whilst there we observed this happening with kitchen staff delivering requests to resident's rooms.



Some residents who require their food to be pureed reported finding the presentation off-putting.

Most residents were happy both with the quality of food and portion size provided although some wished for more imaginative dishes.

Some families like to provide special food for their relatives which will then be individually cooked. Wine may also be taken with meals and cost covered by the resident.

The Manager said that they are aware that the quality, choice and presentation of the menu is sometimes not as varied as she and the residents would wish. She is in the process of taking steps to improve both choice and presentation of meals.

### **Personal care, interactions with staff**

Whilst the team were present at Broad Oak they observed the rapport between the residents, visitors and all staff. There appears to be a relaxed, open atmosphere and everyone is very welcoming. One resident mentioned that they would like to be able to 'do more for herself' but didn't expand upon this in the open communal area. A resident mentioned that communication with some staff for whom English is a second language was challenging for them.

The team observed that all the residents were suitably dressed in their own clothes and appeared well cared for. Clothes are washed and laundered in house, although one relative explained that their mother had developed a rash and they would now like to be able to launder the clothes themselves.

Routine medication is dispensed by qualified nursing staff-taken individually to residents and GP services are provided by a local practice which visit on a weekly basis and also on request.

Residents spoke positively of a Chiropody service that visits the home.

Resident's visits to hospital appointments are facilitated and residents feel in general that their healthcare needs are met.

### **Discussions with Visitors**

One visitor reported that their relative had lost a Hearing Aid and that, at the time of the interview, this had not yet been replaced. They added that this lost item was causing some anxiety for the resident concerned.

The relatives, with whom we spoke, were generally happy with the level of care, but did raise concerns regarding the level of menu choices.

They found the manager very approachable if they had any concerns. Positive comments from relatives included

*"Treated with exceptional dignity"*

*"Lovely atmosphere"*

*"Staff feel like part of the family"*



Two visitors mentioned that on moving to Broad Oak, their relatives medication had changed and that this had caused some concerns.

## **Discussions with Staff**

The staff were all dressed smartly and wore name badges. The manager clearly knew her staff well and was aware of the needs of the residents.

## **Our Recommendations**

- That the Manager investigates the residents and visitors comments regarding the length of time staff take to answer resident's bells. That the findings of this are shared with residents and visitors and actions to improve this are advertised.
- That the reporting and replacement of "lost" items is monitored and any required changes to the current process are implemented to improve the outcome for residents.
- That the existing library service is promoted to residents.
- To continue to improve the quality, choice and presentation of daily menu.
- That family are included in a review of residents medication on arrival at the home and any changes are explained

# Response from Broad Oak Manor Nursing Home

26<sup>th</sup> February 2015

To Healthwatch Kent

We would like to make the following responses to your report:

- New menu was introduced in January and is receiving favourable comments from residents
- The response time for call bells is monitored and recorded so anybody with concerns can review the time an individual called and if there was a delay why that occurred. Staff review the print out on an hourly basis and document and incidents of delays. This system has been in place for at least two years and resident or relative can review with the home manager or her deputy if they had concerns. There was no opportunity to explain this at the inspection as there was no feedback as to the concerns raised.
- Lost property .There is a system in place for the home to replace and follow in place I cannot comment over the individual concern as I have no details and no concern had been raised re any delay with the home manager.
- Medicines are not routinely changed on admission to the home and any change has most probably occurred in a hospital prior to admission.
- Change of medication..... this is primarily a medical decision in discussion with the resident If the resident gives permission or relative has the relevant power of attorney they can then contact the GP to discuss.

Yours faithfully

Sandra Dodds  
Manager



# Sonia Lodge

Name and address of premises visited	Sonia Lodge 5-7 Warwick Road, Walmer Deal CT 14 7JF
Service provider	Foxley Lodge Care Ltd
Lead contact	Manager:- Susan Sumbhoolaul
Date and Time	17 November 2014 2.00-3.30pm
Authorised visitors	Steve Mockett and Theresa Oliver

## Background Information

Sonia Lodge is a privately owned, 28 bed Care Home offering care for over 65's and people with dementia, but also has some residents with learning disabilities.

At the time of the visit there were 15 residents. The manager told us that staffing levels would be increased as more residents came in. There are 24 staff currently employed.

During the past year the home has had a new manager, new staff and has been re-named as part of programme to offer an improved level of care.

This report is based on conversations with staff, residents, and family members together with observations made during a one and half hour visit. In addition to the manager, we talked to five residents, one family member and three members of staff.

## Summary of observations

There was a strong team spirit within the staff with respect for the manager and senior team leaders. Staff treated residents in a caring way mindful of their individual needs and preferences. One resident said about the staff "nothing is too much trouble".

Residents and family members seemed to be happy and relaxed at Sonia Lodge with the home providing a good standard of care for their residents in a homely environment. Although we only spoke to one family member, the home had publicised Healthwatch's visit and invited family comments.



## Observations

### Environment

The home was clean and spacious with good lighting and at a comfortable temperature and no unpleasant odours. There was adequate space for movement of wheelchairs and walking frames and no obvious trip hazards. Furniture and decoration was generally in good order.

Although we didn't look at the bathrooms, the family member told us that the bathrooms and bedrooms were kept spotlessly clean.

### Privacy, Dignity and Respect.

The staff we spoke to felt that spending time talking to the residents was an important aspect of their work and that staffing levels enabled them to do this without pressure.

One resident said that she had specifically chosen to come to Sonia Lodge. Others were not able to answer the question.

Only two of the residents we spoke to were able to answer questions about using the bathroom and didn't have any concerns. From our observations the staff were very attentive to the residents and quickly responded to their needs.

The family member said that her relative was always dressed in his own clothes and one resident showed us her special lounge coat and said she had others of different colours.

### Recreation, social and pastoral care

A range of activities were available including external organisations coming in to provide various activities such as music, sing -a -longs and church services. The residents were taken out for shopping, walks, trips to local cafés and interest trips as well as to medical or dental appointments. We observed one resident listening to his radio, one making and putting up Christmas decorations and others doing crafts or chatting. Some were taken out for a walk while we were there. Staff told us that the afternoon was the residents own time and they could choose what they enjoyed doing.

Visitors could come in any time. Most residents had family who visited although some had no family, but were visited by care workers.

### Food, daily routine and choice

All residents questioned were enthusiastic about the quality of the food, saying that it was "excellent" and "the chef is really good". Two residents told us that if they didn't like something then they were able to choose something else.

Residents eat together in a communal area as the dining room is currently being renovated. The family member said she could come in and eat meals with her relative and had been invited to Christmas lunch.



The manager informed us that the home has an unprotected meal policy so that family members can come and eat with their relatives as this is an important part in maintaining their normal life.

## **Discussions with Staff**

Staff reported that there was sometimes an issue getting appropriate dental care for residents. On one occasion it had taken one member of staff five hours on the telephone to arrange emergency dental care for a resident.

## **Our Recommendations**

- The changes that have been implemented at Sonia Lodge over the past year seem to be providing a level of care that both residents and their families are happy with.
- The programme for upgrading facilities and decoration should continue.
- To maintain the support and dedication of the staff to ensure that there is opportunity for ongoing personal development or training.

## Response from Sonia Lodge

13<sup>th</sup> January 2015

To Healthwatch Kent,

Thank you for the report of your visit to Sonia Lodge in November 2014. I would however like to respond to the recommendation that you make about training.

All our training is up to date and all staff complete more than the expected mandatory units. We have in fact, just purchased another 3 new units.

All staff are signed up for NVQs at different levels so there is a very varied knowledge base.

All staff at Sonia Lodge are encouraged to share skills and knowledge and participate in training, myself, as the Manager, included.

Yours faithfully

Sue Sumboolaul  
Manager