

## Healthwatch Kent Report: Care Home Series

### The Withens Nursing Home, Southfleet

May 2018

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#### Foreword

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 important areas of dignity and choice such as 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 summarises the findings from our visit to the Withens Nursing Home in Southfleet. 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 in around six months' time.

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](http://www.healthwatchkent.co.uk)

Steve Inett

Chief Executive, Healthwatch Kent

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### 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 The Withens Nursing Home in Southfleet on 15 February 2018. **Our trained Authorised Visitors were Pat Still and Theresa Oliver.** During our visit we spoke to seven residents, two staff members, two families and the manager.

We were seeking to answer the following indicators.

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

### The home

- is in a quiet road in a modern purpose-built building.
- has 29 single rooms and 2 shared ones.
- accommodates 29 people but currently has 23 residents
- was clean tidy and well decorated both inside and outside with a light airy feel
- is privately owned by Ranc Care Ltd
- has a large landscaped garden

The home had their last CQC inspection on 12<sup>th</sup> October 2017. The overall rating was 'Good' for caring, safety, effective and responsive with 'well led' 'Requiring Improvement'. A copy of the report can be found by clicking on the link <http://www.cqc.org.uk/location/1-118093600>.

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### 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 **manager** had been in post for a few weeks at the time of our visit. She had been in the care sector for a long time, and told us she loves the role and interaction with residents and staff and finds it very rewarding. From our discussions, it appeared that she played an active part in the life of the home chatting to most residents and staff daily.

Three **residents** knew who the manager was, even though she was new. One said *“she stops and talks to me sometimes”* others either couldn’t answer the question or didn’t know her.

The **staff** said that the manager was *“pleasant and easy to talk to”* and that they received *“all the support they required”*.



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

- 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.

Of the two **staff** members we spoke to, one thought they had enough time in their current role to care adequately for the residents but the other felt strongly that they didn’t have enough time.

One **family** told us that staff know their relative very well and had time to talk to them but one family thought that although staff did stop and talk, they don’t know their relative very well.

Six **residents** thought that the staff were *“good”* or *“very good”* with one saying *“they are wonderful-always smiling”* and *“nothing is too much trouble”*.



Based on what we heard, the home meets the indicator with some minor

reservations.

- 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 the need.

The **manager** told us that Ranc Care have a comprehensive training programme consisting of online learning as well as other direct training.

Both **staff** had completed various training but one commented that they were not offered any external training that would incur a cost.

One **family** was unsure about the level of qualification that the staff had.



Based on what we heard, the home meets the indicator with some minor

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.

One **staff** member told us that they had time to care adequately in their current role, but one did not.

Two **residents** thought that staff didn't have time to do much chatting but did not have any issues around their care.

Both **families** thought that staff were adequately skilled



Based on what we heard, the home meets the indicator with some minor 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 - in order to provide the right level of care and prevent residents from having to move again.

The **manager, staff and family** members told us that care plans are regularly updated and shared with the family, nursing and caring staff inputting as necessary.

One **family** told us that pre-assessments and chats with the residents help to “*build a relationship*”. One family said that staff “*definitely*” noticed if their relative’s needs change.

Four **residents** said that staff knew what they liked and disliked with one saying: “*if I ask her to do something she always does it*” another said: “*yes they do but if they get it wrong I let them know*”.



Based on what we have 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 they have an Activity Co-ordinator who provides different activities every day. When the co-ordinator is not there, staff organise individual or group activities.

One **staff** member said that activities are planned in the garden in good weather. There is also a visiting Motivational Therapist who comes in once a week and was present during our visit. They told us they treat residents as individuals with different needs and abilities and adapt accordingly but encourage them to take part. There is also a programme of external entertainers who come in.

All the **residents** said they liked joining in with the activities. One person said “*especially the sing songs*” as she used to be in a choir. Another resident said, “*I join in with whatever is available*” and a couple said they liked the quizzes and games. They weren’t sure about activities outside the home, but one resident did tell us that went out to lunch once and another said they haven’t been out for a long time.

The **family** members we spoke to told us their relatives spent the day in bed and they weren’t aware if activities were provided for them.



Based on what we have heard, the home meets the indicator with some minor

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 the chiropodist comes in once a week, and dentists and opticians come in when needed.

**Staff** were not aware if there was regular access to dentists or opticians but knew that the GP comes in regularly.

Three of the **residents** couldn’t answer the question, but one said they had their feet checked that day but the dentist they saw “*was useless*”.

One **family** member said their relative had seen the dentist “*several times for routine check-ups*”



Based on what we have heard, the home meets the indicator with some minor 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.

**Staff** told us the pre-assessment should identify any specific cultural or religious needs. They told us that their current residents didn't have any cultural needs.

One **resident** said they have someone who visits to give communion, and another talked about the church they used to attend. Other residents didn't know or “*weren't bothered*”.

A **staff** member thought that the visiting priest was arranged by the family.



Based on what we have 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** told us they have regular residents and relative meetings but also an 'open door' culture is promoted so that people know they can come and discuss concerns or ideas at any time.

**Staff** told us that resident and relative meetings take place regularly. One staff member felt that the residents and relatives could have a say in how the home was run at the were regular meetings. However, they felt that staff ideas which would cost money to implement, were ignored.

The **families** felt that they were welcome participants in the life of the home, one said "*absolutely, often asked if relative needed anything*". One family said they would speak to the manager if they had a complaint. One family said they would speak to the social worker if it was a care issue. One family said that some time previously they had pointed out a problem with the furniture in their relative's room and it hadn't been fixed for a couple of weeks.

Two **residents** said that they would speak to senior staff or the manager if they had a complaint, but one said they didn't want to complain, "*it's very good here*". Others weren't able to answer the question.



Based on what we have heard, the home meets the indicator with some minor

reservations.

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

The **manager** told us that staff and the manager eat with the residents when possible to encourage them to eat and promote a social atmosphere, although a **staff** member didn't think was always possible due to work commitments. The chef and kitchen staff ask the residents their choice off the menu.

Three **residents** thought that the food was "very good" or "good" with comments like "really enjoy all the food", "nice menu with good choice" and "can always order something different if needed". However, one resident did say that they would like the plates to be hotter as the food was often not very hot. All the residents thought that there was enough choice. One resident didn't think much of the food and another said that they preferred more exotic foods. Three residents said that they enjoyed mealtimes with one saying she liked the company. One told us "the chef and kitchen girls are always merry and bright".

Both **families** said their relatives had pureed food in their room, but one did say the food was put into separate piles of different colours and another said their relative ate lots of desserts.



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

### **What have we recommended.**

- Investigate and provide quality external training courses to enhance the skills and development of staff and encourage them to expand their skill base.
- Ensure that the families are aware of the expertise of the staff and when staff have completed new training. For example, a photo wall in the entrance hall. This will help staff to feel more valued.
- Find a way to serve food when it is hot especially for residents who eat in their rooms
- Build relationships with local faith groups especially those who could offer a light universal service so that more people could join in if they wanted to.
- Determine if there are any local community groups who offer a befriending service who could come and spend some time chatting to residents.
- Ensure there is a robust complaints procedure in place and that residents and families are aware of this and that families and residents know what action has been taken.

### **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 an 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.

Our FREE Information and Engagement service can help you navigate Kent's complicated health and social care system to ensure you can find and access the services that are available for you. Call us on 0808 801 0102 or email [info@healthwatchkent.co.uk](mailto:info@healthwatchkent.co.uk)