

Healthwatch Kent Report: Care Home Series

Maidstone Care Centre

May 2018

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 Maidstone care centre. 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

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 on 2nd February and on 13th February 2018. We spoke to nine residents, and three members of staff. We only heard from one family which means the input of families into this report is very limited and not what 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

The home

- o is close to the centre of Maidstone in a purpose-built building
- o has 57 rooms all with en suite facilities
- o has three floors with residential and nursing specialities
- o is clean, bright and spacious and is well decorated inside and outside.
- o is part of the Ranc Care company
- o has a large landscaped garden

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.

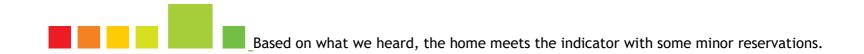
We spoke to the manager on the first occasion and the deputy manager on our second visit.

Two of the **staff** we heard from thought that the manager and deputy were very good and easy to talk to and they felt well supported. One member of staff thought that it was easy to talk to the managers but depended on the issues and who was involved.

Five of the **residents** either didn't know the manager or couldn't answer the question. Another thought she was good, and one didn't think they saw her. One resident said they couldn't remember the staff names.

One family knew the manager and thought that she was generally friendly and helpful when not stressed.

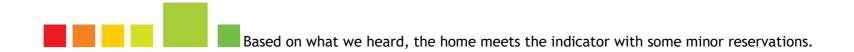




2. Have a stable workforce. Care homes with knowledgeable, experienced staff who get to know residents can make the difference between an institution and a home. Where turnover of staff is very high, these qualities can be lost. It may also be a sign that staff are not happy working in the home.

Staff felt that generally they did have time to care for residents although they did have to spend a lot of time doing paperwork, which restricted the time they could spend chatting to residents.

Four of the **residents** thought that the staff were good or very nice, and three thought they were alright. One **resident** didn't know the staff names and thought they didn't know his name.



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.



Three staff members said that they were encouraged to develop their skills in many aspects such as NVQ as well as mandatory training. Each floor had a Registered General Nurse who leads a team of carers so enhancing their management skills. The Activity Co-ordinator has been encouraged to do specific job-related training.

One **family** thought that the staff did have the time and skills to care for their relative saying "the Carers work very hard and are appreciated".

A resident said that the staff "were very nice, not abrasive in any way" others couldn't answer the question.



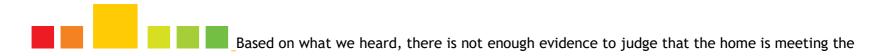
Based on what we heard, the home meets the indicator with no reservations.

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.

Two **residents** felt that they were not always taken to the toilet on time and one had recently wet themselves because of the delay. Another resident said that they are often told to be in bed by 7.00pm, which they felt was too early.

Seven residents thought that staff had time to stop and chat with them even though they were busy. One said that a member of staff had spent a long time chatting to them the day before. One resident said that staff don't have time to stop and chat as they are busy.





indicator, or the picture is very mixed.

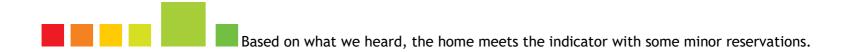
5. Be clear about how they will be able to meet residents' needs both now and in the future. Many residents will develop more care needs as they get older - particularly if they have a condition like dementia. It is vital that homes can spot changes to their health and respond appropriately - consulting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

Staff told us that they sit and talk with residents and are aware if their needs change. Also, there is a daily meeting for handover where any issues are discussed. Care Plans are regularly updated to reflect any changes. The staff we heard from all enjoyed talking to the residents, but don't always have the time as there is quite a bit of pressure on their time doing paperwork. In the CQC report social isolation of residents was highlighted, so some time is scheduled in to talk to, or do activities with every resident at least once every 48 hours.

Four **residents** thought that the staff knew their likes and dislikes. One resident said that staff didn't know what they liked and disliked and two others couldn't answer the question.

One resident said "they clean your clothes and you can have a bath when you want one"

One family said "they are quick to inform us if our relative's needs change"





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 the home employed an Activity Co-ordinator and two deputies. We spoke to the Activity Co-ordinator who showed us the weekly list of activities, which had a wide range of group and 1:1 activities including exercises, hand massage, arts and crafts, ball games, dance and quizzes. These run from Monday to Saturday and are changed weekly. We also saw a picture record of some of the themed activities such as Burns night, Chinese New Year, Westerns and street parties. The Activity Co-ordinator will listen to any special requests from residents and families and try and include those.

The home has twice won the Outstanding Activities competition for Care Homes with the certificates being displayed in the foyer.

The Activity Co-ordinator told us that she receives good support from the home's maintenance person especially with the themed activities. He has also built a toy shop frontage in the entrance hall which is decorated according to the seasons. We were told that there was an arrangement in place with Involve, the charity which supports many of the community groups in Maidstone, where, in exchange for parking their minibus on site they would provide transport for residents to have three trips out a year. One resident mentioned they went out to Sheerness. Staff encourage residents to take part and will bring them down to where the activity is taking place.

Seven **residents** told us they enjoyed joining in with activities some mentioned the weekly list which informed them what was happening. Quizzes, bingo, games and cooking were mentioned by residents with one person saying they liked going out in the garden and one said they enjoyed getting out and about. Five residents didn't really want to join in activities. Only one resident thought there was nothing to do and would like more activities.

One family said their relative has 1:1 activities in his room including music on tapes and records which he loves.



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 residents have access to an optician, dentist, chiropodist, dietician and a GP and community nurses visit regularly.

Six **residents** have had either a visit from the optician or dentist within last 6 months and two said they had seen both. Four couldn't answer the question.



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

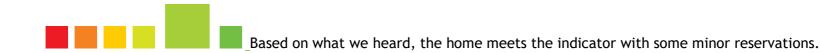
8. Accommodate your cultural and lifestyle needs. Care homes should be set up to meet your cultural and lifestyle needs as well as your care needs and shouldn't make you feel uncomfortable if you do things differently to other residents. They should also be proactive in finding out what your needs are,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

Seven **residents** couldn't answer the question, four said that there wasn't respect for their religion, with one saying that the person who used to take service had left. Another one said they might be interested in a service if there was one put on. Two thought there was respect for their religion with one mentioning a church service.

One **staff** member told us that they had a Greek Orthodox resident and a priest came in for that resident. No other mention was made of church services by the other staff. Special diets were catered for.

One family thought their relative's cultural or religious needs were catered for.





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 ant any time, and there should be a healthy culture of challenge and feedback between residents, relatives and staff.

Staff mentioned the suggestion box and the regular resident and relative meetings but there was no indication how much these were used or what action was taken.

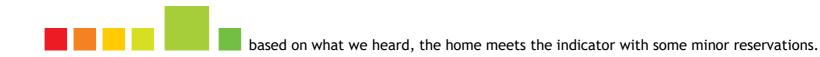
There are no set visiting hours

An example was given to us of residents **influencing the home**. Residents said they would like a pet, so the home brought in a budgerigar to each floor.

One **family** said they feel that they are welcome participants in the life of the home and contribute by liaising with the manager. They knew how to make a complaint.

One **resident** said that if they wanted to make a complaint "no one would listen". Five residents did not want to change anything about the home and either didn't answer the question or didn't know how to make a complaint. Three residents said they would talk to staff or the deputy manager if they had a complaint.





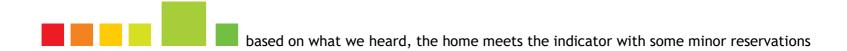
10. Provide nutritious food, plenty of fluids and a pleasant environment for meals

Four **residents** thought the food was nice, very nice or good and two thought it was alright. One resident said "it's not nice"

Five residents thought there was enough choice and said they enjoyed mealtimes. Two residents thought there was not much choice and one would like to have something different like curry sometimes.

Staff told us that they know what the residents like and they are offered a choice even if they can't feed themselves. They are offered an alternative if they don't like what is in offer.

The family thought that the choice and quality of food was "excellent" and that their relative was supported to eat and drink as needed.



What have we recommended?

- Sufficient staff must be available to provide a good level of care at all times and ensure that residents' dignity is not compromised.
- Investigate the use of Person Centred Software to reduce time staff spend doing administration. This should allow more time for social interaction with residents.
- Ensure a more robust method of involving and listening to families. Clearly highlight what action has been taken as a result of issues raised or suggestions from residents and families such as a You Said, We Did display.



- Explore links with the community such as local nursery, primary schools or church groups who might come in and interact with residents.
- Share the activities programme and the benefits for residents with other care homes as examples of good practice.

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.

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