

A Review of our Dignity in Care Enter & View Visits to Adult Care Homes July 2015 - March 2016



A snapshot of what we observed or were told during our visits to 20 care homes in Buckinghamshire

April 2016



1. Executive Summary:

Introduction

Over a seven month period we spoke to 109 residents, 17 visitors and 80 staff and observed further 213 residents, 2 visitors and 95 staff in 20 adult care homes across Buckinghamshire.

Summary of key findings

All the care homes visited were rated 3-5 stars with no challenging behaviour seen or issues necessitating any calls to the Adult Safeguarding Board. There were some excellent examples of dignity in care together with a few poor ones. The latter were often as a result of low staff numbers or a high proportion of agency staff who did not know the individuals in the care home.

Impact

We have given 206 individuals an opportunity to tell us about dignity in care whilst living, visiting or working in a care home. Changes such as bespoke staff training being arranged, personalising doors in a learning disabled home and the heating thermostats being checked in another location have been immediately made as a result of our reports. Other changes, such as more activities being organised or refurbishment, have been acknowledged by care home managers as being as changes needed in the short term. One care home has also met with Buckinghamshire County Council's Quality in Care team to ensure that residents are encouraged to be as mobile as they are able to and ensure hoists are moved to the appropriate parts of the home when needed.

Our 20 reports are online and have attracted comments from others involved with the homes, enabling us to provide a more rounded view of each location, which we hope will help people make choices about the care they may need.

Overall Recommendations

Every home and its' residents are different and so most recommendations have been made in the individual reports. However, looking across all our visits this year we can recommend that:

- A consistent, preferably permanent, staff are employed
- Homes are encouraged to introduce more I-pads etc. which opens up the world via skype, accessing music or news or enhancing a hobby for residents
- More emphasis should be placed on enabling individuals to be as mobile and independent as possible
- Activities organised should be as personalised as possible to encourage participation
- More involvement by some homes with their local community

Lessons Learned

More electronic communication with care homes seems to generate better engagement and a quicker response so this will now be our preferred communication tool. We have also met fewer visitors than expected no matter what day or time we visited. In future, order to gather more of their feedback, we will ask care homes to put up a poster, encouraging them to contact us directly.

Next steps

We will aim to visit at 24 different adult care homes, using Enter & View, in the next twelve months endeavouring to build in any lessons learned and continue to collect the experiences of those living and working in care homes in the county. We will also endeavour to build on our pool of volunteers providing this lay perspective on Buckinghamshire care homes.



2. Background

Buckinghamshire County Council has commissioned Healthwatch Bucks to report on the way that dignity is considered where social care is provided in Buckinghamshire. The aims of the project are to:

- Give service users and their carers a voice about their views and experiences of dignity
- Make recommendations for improvements and highlight good practice
- Publically share information to help people make choices about the care they may need

3. How we have done this in 2014-15

Healthwatch Bucks recruited and trained thirteen volunteers, who, with the project manager, visited 20 adult care homes, chosen by Buckinghamshire County Council. These care homes are located across the county and range from those providing care for individuals with learning disabilities (3), physical disabilities (2),to others providing residential (7), or nursing (8) care for older people or those living with dementia.

Each Enter and View visit for this project was unscheduled in that Healthwatch Bucks only wrote to each care home up to 2 weeks prior to our visit. We notified them of our intention to visit but not the time and date in that two week period.

On arrival we asked to see the person in charge before we spoke to anyone in the care home and took their advice on whether any residents should not be approached due to their inability to give informed consent, or due to safety or medical reasons. Between 2-4 authorised representatives went on each Enter & View visit and reported what they saw and heard. We observed and talked to residents, visitors and staff, depending on who was around, about dignity in care. We explained why we were there and asked the manager to pin an explanatory form to the noticeboard subsequently. Healthwatch Bucks postcards were also left to encourage individuals to contact us about any health or social care experience. At the end of the visit, we discussed the findings with the provider if a senior member of



staff was available. We have ensured that views have been reported anonymously and where this was not possible we have not included the response in any report. A draft report was then sent to each provider, and 30 days given to respond prior to the final report being published.

You can see each individual report here http://www.healthwatchbucks.co.uk/dignity-care-reports-0. We have only reported what was seen and / or heard during the time of our visit and no CQC or other reports were read prior to any visit.

What is Enter & View?

Healthwatch Bucks was established in April 2013. It has a number of statutory functions and powers, one of these being the power to Enter & View publically funded health and social care services. The duty on providers, to allow us entry, only applies to the communal parts of care homes. As such, we did not see personal care being provided in individual's bedrooms although we did talk to some residents in their rooms where we were invited to do so by them.

Healthwatch Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they will be reported to Buckinghamshire Safeguarding Adults Board. None were raised in relation to any visit in this report.



4. What we found

During our visits to these 20 care homes, we talked to 109 residents, 23 visitors and 80 members of staff. We also observed a further 190 residents, 2 visitors and 95 members of staff.

We have summarised what we found across all these visits below, but a high level summary, by care home, can be found in Appendix 1.

How People are Treated

"the staff are ever so good"

On the whole, we found residents and staff were treated in a dignified way. Most addressed each other by name and the correct one of voice was used. In many care homes, we saw that staff had time to chat to the residents although in others this was not the case. Where there was a higher level of agency staff care, there seemed to be less interaction. It was in these homes where we were told statements like "the staff do their best". In 2 homes, there were no staff present for over an hour during our visits. In some homes however, we were told of examples of small extra requests or saw caring gestures which showed personal centred care in action. Several care homes also had regular meetings with residents and relatives which were appreciated. Only in one care home were we told of a reluctance to report complaints.

"they are open and constructive (meetings)"

"the food's smashing"

Personal Choice

There was a range of choices dependent on which home we visited. However, all provided options at mealtimes and most provided pictorial as well as written menus where appropriate. In some homes, residents were more involved than in others in choosing what was available to eat. There

were a range of drinks given in a variety of receptacles and many care homes encouraged their residents to participate as much as possible in the life of the home. In the homes where we saw I-pads in use, individuals were able to skype relatives, follow the news or watch films giving them a wide range of access to life outside the home without necessarily leaving it.

In some homes, residents chose to have breakfast in bed whilst in others residents, on the whole, chose not to come downstairs before lunch. Residents in all homes seem to have a choice about staying in their rooms or getting more involved in communal activities. The location of a home, in proximity to local transportation, often governed how involved the residents with the local community unless there was a minibus and or relatives / volunteers to help.

"I can have my room decorated how I like"

"My dad flourishes here"

"I help order food online"



Just Like Being at Home

Where we saw them, all bedrooms were personalised with furniture and or photos in every home. Most communal areas were warm with only one dining room that was too hot and two lounges which were cool. The gardens were all accessible and many had bird feeders, lakes with ducks as well as having their own birds, cats or rabbits or else encouraging pets to visit. In all homes except one, which did not have a dining area, residents would eat their meals around the table together or in small groups. In homes where individuals lived with dementia, we frequently saw memory boxes on or near bedrooms as well as nostalgic mementos in the corridors or in lounges. In 5 homes, we saw evidence of individuals being helped to maintain their independence for example, by being encouraged to walk rather than being pushed in a wheelchair, helping to fold napkins, laying the table or going out. However, some felt they did not have the flexibility they might have if they lived in their own homes. In 2 homes, there was a very strong smell of urine.

"I'm encouraged to do things; I do what I can."

"Some afternoons, we don't do anything, just sit here like zombies"

Privacy

On the whole, we saw good examples of privacy where medical conditions were not discussed in front of others, personal care was given behind closed doors and there was a mixture of bedroom doors open and closed in every home. However, in one home we were told that staff sometimes knock and enter immediately and forget to wait for a response before walking in. In another, clothes were not always well adjusted when individuals were being hoisted in the lounge.

Quality of Life



"the next pub lunch is in a fortnight."

Although we witnessed very few activities being undertaken during our visits, we were told of a wide range of opportunities available. Some people took up these whilst others were not interested in communal activities. Other residents sometimes perhaps needed reminding about what they might be able to do. Some care homes need to review periodically what they offer to ensure it appeals to as many of their residents as possible.

In one home though, a resident did say that the home seems to promise more activities than actually take place. In another, there was a concern about what activities were available when the day centres were closed in the school holidays and in another there were no activities in the morning. Others looked at each individual and tried to accommodate their interests and wishes. A couple of homes ensured that residents could go to a local gym. In another, we saw a member of staff playing four in a line with a resident, and others took individuals clothes shopping or to a café. The elderly ladies we talked to all liked having their hair and nails done.

"I am happy here"





5. Limitations

There were a few circumstances where we were unable to report certain evidence because the individual concerned would have been easily identifiable in any report. It is important that we maintain the anonymity of those who talk to us.

In addition, several care home managers chose not to respond to our draft report within 30 days so we have been unable to publish their feedback. They were all contacted again at the start of 2016 to ask if they would like to give us any feedback for this report but none of them responded. Although this was 25% of the managers, 2 of these homes were rated 5 star so perhaps the managers did not feel they needed to respond.

6. Impact

We have given 206 individuals an opportunity to tell us about dignity in care whilst living, visiting or working in a care home. Changes have resulted following our visits although some of these are small and some longer term. The immediate changes made, that we have been told about, include bespoke staff training being arranged, personalising doors in a learning disabled home and the heating thermostats being checked in another location. Other changes, such as more activities being organised or refurbishment, have been acknowledged by care home managers as being as changes needed in the short term. One care home has also met with Buckinghamshire County Council's Quality in Care team to ensure that residents are encouraged to be as mobile as they are able to and ensure hoists are moved to the appropriate parts of the home when needed.

Our 20 reports are online and have attracted comments from others involved with the homes, enabling us to provide a more rounded view of each location, which we hope will help people make choices about the care they may need.

7. Overall Recommendations

Every home and therefore the people who live and work there are different and so most recommendations have been made in the individual reports. However, looking across all our visits this year we can recommend that:

- A consistent, preferably permanent, staff are employed in every home to help everyone provide, and/or live in a place where, dignified care.
- Care homes should be encouraged to introduce more I-pads etc. to opens up the world via skype, accessing music, news or other apps. as well as enhancing or introducing a hobby.
- A higher priority should be placed on enabling individuals to be as mobile and independent as
 possible whether this is maintaining physical suppleness or remaining involved with the local
 community
- Activities organised should be as personalised as possible to encourage participation. This means that they need to be reviewed regularly and discussed with the homes' residents.
- More involvement by some homes with their local community. Some homes have found that not only does this benefit residents by getting them involved in outside activities but it can also bring them friendship and also volunteers into the home.





8. Lessons Learned

- Letters we sent often got 'lost' under paperwork or were not prioritised. Several managers or senior staff did not seem to recollect having seen any letters about our visit but all did allow us to enter the home on the day. Unfortunately, draft reports also seemed to be treated in the same way and several that we posted received no feedback from the manager in the following 30 days. We found that emailed draft reports did get to the provider and generated a response (often in less than a week). In future, all draft reports will be e-mailed and we will look to e-mail and post our initial letters notifying care homes of our forthcoming visit.
- We spoke to fewer visitors than expected because in some care homes there were none and
 frequently only one no matter what time or day we visited. Leaving postcards with freepost
 envelopes has increased comments after our visit and these have been posted on our website next
 to the relevant report. In future, we will send out a poster (as well as freepost envelopes &
 postcards) with the notification letter and ask managers to get visitors to feedback to us prior to our
 visit.

9. Next Steps

Our individual care home reports continue to be located on the Healthwatch Bucks website http://www.healthwatchbucks.co.uk/dignity-care-reports-0 They have been sent to various members of Buckinghamshire County Council, Aylesbury and Chiltern CCGs as well as the CQC. We also actively encourage GPs and their PPGs to publicise these via their noticeboards and / or websites. This summary report will also be sent to these bodies as well as to other interested parties.

We will continue to visit adult care homes, using Enter & View, in the next twelve months endeavouring to build in any lessons learned and continue to collect the experiences of those living and working in care homes. What about what we do with the overall recommendations – pass to QIC team, BCC? Get a response from them to include here?

10. Acknowledgements

We would like to thank all the residents, their visitors and staff in every care home we visited for sharing their experiences of care with us and allowing us into their home. Our thanks also extends to all thirteen of our Enter and View volunteers for their time, thought and all their hard work on this Dignity in Care project.

Please note that these Enter and View visits show a brief snapshot view of the home at a particular point in time, looking particularly at 'dignity and care '.Our reports are not a representative portrayal of the experiences of all residents and staff, only an account of what was seen and heard at the time. Healthwatch Bucks recommends that all potential beneficiaries and their families carry out a thorough personalised visit before making any decisions about a care home.





Appendix 1 - Summary of Findings

Care Home & date visited	Findings	Recommendations	Impact
Avondale 10.07.15	★★★★ -very high standards of care with regard to dignity -staff told us they enjoyed working there -visitors & residents told us of highly individualised care	-periodically suggest residents move to underutilised locations such as the garden and quiet rooms -regularly review the temperature in communal rooms	The manager agreed that the report was factually accurate and had no other comments to make.
Buckingham Road 25.01.16	 ★★★ -a calm relaxed environment which felt like a home -residents supported to participate in a wide range of activities 	-increase signage internally using pictures to identify toilets, the office, individual's bedrooms etc.	Manager's response: " during your visit we were redecorating our hallway so had removed all signage just while the paint dried. All of these are now in place. Since your visit though we have planned a project for the guys to individualise their bedroom doors"
Birchwood 02.07.15	-high standards of care with regard to dignity & respect -staff were patient and treated each resident as an individual -wide range of group and individual activities	-contact Choice Support to involve residents as Experts By Experience.	The manager said that the report was fair and objective. "The principles of person centred care underpin everything we do here and dignity is at the heart of our care. We strive to keep getting feedback and pride ourselves on improving as a result of it."
Cherry Garth 14.11.15	★★★ -few staff in communal areas so little interaction between staff & residents -extensive range of activities	-reassess the staffing levels for all floors of the home, to allow a more focussed 1-1 care for all residentseliminate the smell of urine from the ground and first floors.	Manager's response: " we will be looking at our budget in January to reassess our staffing hopefully our vacant hours will be filled in the New YearOur household team is working hard to eliminate any odours."
Cherry Tree 09.09.15	★★★ -needs were quickly anticipated by attentive staff -lots of movement between rooms by residents just like you	-replaces the plastic biscuit boxes with old fashioned tin ones and serve tea in crockery, rather, than plastic mugs, where this is safe to do so.	Manager's response: "due to infection control risk it has not been possible to replace the plastic biscuit boxes with old fashioned tin ones. Crockery is available in the



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	would at home		home, including facilities to prepare their own tea and coffee in the dining room"
Chesham Leys 07.10.15	★★★ -staff not always aware of individual needs -seems to be minimal interaction between staff & residents -high proportion of agency staff	-contact the Home Library Service & Calibre Audio Library to borrow audio books for those with limited or no sightprovide further support and training to improve person centred carerecruit volunteer befrienders & create links with local schools to increase social contact for those who would like it.	No response provided
Chiltern	****	None	No response provided
Grange 01.12.15	-wide range of activities and residents seemed well supported by staff to take advantage of these -staff have time to positively engage with residents		
Chiltern House 04.02.16	★★★ -personalised care provided by regular staff -independence encouraged -residents participation in external activities are dependent on volunteer availability	-staff should not walk into bedrooms univited -more menu variety -look for more volunteers to expand the opportunities for all the residents -follow up on residents suggestions at meetings -provide evening entertainment on an ad hoc basis	-residents regularly meet with kitchen staff to make changes -we have 58 volunteers at present -minutes from meetings are posted on noticeboards -the activities dept. organise an extensive variety of activities
Chiltern View 03.08.15	★★★ -residents seemed comfortable and staff had time to engage with them -staff we talked to were able to communicate well with all residents	-find other suitable meaningful activities when the day centres are closed for academic holidays	No response provided
Denham Manor 07.01.16	★★★ -staff seem to be caring and treat residents with respect -there are few activities to give residents, who are	-expand the range of home based activities e.g. bring in Pets As Therapy -involve some residents more in the home	Manager's response: "I accept the comments around activities but as outlined we have now recruited a new activity coordinator and hope that



	able, a reason to leave their bedrooms	through simple tasks to encourage independence -invest in a minibus to enable residents to go out more	the activities will flourish."
Gracewell of Maids Moreton 18.12.15	★★★★ -friendly, confident staff who give lots of encouragement and support -great communication -extensive range of options and activities	None	Manager's response: "It was a pleasure having you visit our family at Maids Moreton"
Holmers House 25.08.15	 ★★★ -a lot of interaction in one unit but not in another - a choice of drinks given in one area but not another -the home seemed well worn although comfortable 	-ensure all staff take time to talk directly to all individuals at eye level -encourage all staff to interact more on a one to one basis with residents -ensure all staff have an opportunity to attend dignity in care and person centred training -repair or replace items as soon as possible.	Manager's response: "our Person Centred Planning Trainer is scheduling some bespoke training for the staff to address some of the issues raised we had already started (to) improve our outdoor space. The unfortunate temporary odour of urine was in relation to one resident who was awaiting a move to a more appropriate environment."
Lakeside 24.09.15	 ★★★ -confident staff who provide care whilst supporting residents to be independent -a lovely environment where choice is encouraged 	-encourage residents to smoke in the garden or outside the front of home away from the balcony doors when open and food is being servedencourage elderly residents in wheelchairs to sit in some of the chairs in the communal areas rather than just in their wheelchairs.	No response provided
Mandeville Grange 18.11.15	-care staff spend a lot of time moving residents around and less time interacting more positively with them -8 out of 14 residents were hoisted in one lounge whilst we were there	-manage the temperature of the lounges in line with the weather outside -ensure residents maintain their independence and mobility as much as possible whilst ensuring	Manager's response: "Many of our residents' choose to have their door open even when they are in bed. This is in keeping with our home's policy on individual choice. This is also reflected in the way that the residents choose



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	-the activities we were told about were appreciated	staff and residents remain safe and healthy -obtain another hoist if so many residents are dependant being moved in this way	to be addressed. Residents, who are referred to in affectionate terms, have previously indicated to staff that this is their preference." No comment was made on the numbers hoisted but Buckinghamshire County Council's Quality In Care team subsequently visited Mandeville Grange in relation to hoisting and independence.
Micholls House 15.03.16	 ★★★ -many activities on and off site -high ratio of long term staff seems to result in good personalised care 	-murals/stencils on communal walls in flats where those living with autism dwell -ensure bereavement counselling is available	Manager's response: "We value all feedback we receive so will be looking at our practices and ways for improvement. Micholls House has a full redecoration plan which is due to start in the spring."
Penley Grange 04.11.15	★★★★ -staff were constantly engaging with residents as you would do in a family situation -the manager is very creative in her ideas for days out and ideas for sensory stimulation	None	No response provided
Rayners 24.02.16	★★★ -a bright cheerful home -residents seem very comfortable, physically and emotionally.	-provide books, magazines, games in the lounge	-several board games, jigsaws etc are stored within our library area & scrabble matches are a regular afternoon activity
St Leonards 22.07.15	★★★ -the staff seemed to have a very good rapport with the residents -residents are encouraged to help themselves and be independent	-post a standard daily written menu outside the Beeches dining room as well as having the picture version up on the board.	The manager said that the menu "is actually written in the dining room on a chalk board"
Swan House 24.02.16	★★★ -Staff are very good "we're just a happy family" -activities are person- centred and very community based	-refurbish the lounge in the residential suite as this is tired -look to cook meals on site -regularly book the minibus to take those who wish to go out on	Manager's response: -redecoration of the home has been budgeted to start in April 2016a full time cook on site is in the longer term plans -taking residents out in the minibus will be frequent



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		more trips	now activities coordinator has appropriate licence - will ask night staff to remember to put seat cushions back down once dry after cleaning
The Croft 14.01.16	→ ★ ★ ★ -very homely although one end of the first floor was cool whilst the other was a better temperature -residents seem very comfortable , physically and emotionally	-maintain a reasonable level of heat in all areas of the home.	Manager's response: " We would always endeavour to meet a residents wishes regarding going out independently but taking into account their safety. The garden is always accessible I will contact our maintenance service today to request that they check the heating thermostats for us We are regularly informed that the Home is too warm by visitors but I appreciate that our older residents feel the cold easily"