



healthwatch
Greenwich

Enter and View

167 Lodge Hill Care Home

July 2018



167 Lodge Hill, Abbey Wood, SE2 0AS

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1. What is an Enter and View?



Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives 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 local Healthwatch authorised representatives to observe service delivery and talk to service users, 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.

1.1. Our approach

To collect information, our Authorised Representatives complete an observation form. Where possible we will also speak to residents, service users, patients, and staff as appropriate. We emphasise to all service users and patients that participation is voluntary. We always check with staff if there are individuals who we should not approach or who are unable to give informed consent.



1.2. Disclaimer

Please note that our reports relate to findings observed on the specified dates. Our report is not necessarily a representative portrayal of the experiences of all service users and staff, simply an account of what was observed and contributed at the time.

1.3. Acknowledgements

Healthwatch Greenwich would like to thank the service provider, service users, visitors, and staff for their contribution to the Enter and View programme. Healthwatch Greenwich would also like to thank the Healthwatch volunteers and representatives who assist with the visits.

2. Visit details

Date and time of visit	30 August 2018
Authorised Representatives	Anna Jones and Clive Mardner
Service provider	Royal Borough of Greenwich (RBG), Greenwich Living Options (GLO)
Residents	The home accepts referrals for people with severe learning disabilities and some additional needs, aged between 18-65 years old and mixed gender. There is space for six residents and four are currently placed at the home (two males and two females). Of the current residents, additional diagnoses include cerebral palsy, dementia and autism.
Staffing levels	<p>There are three support staff on shift during the day and at least one senior member of staff as well (an assistant manager and/or manager). At night there is one waking staff and one sleeping staff on duty. Additional staff are put on the rota when trips are planned, or when residents are going off-site with the need for one-to-one support.</p> <p>The home has five permanent support staff but also use RBG bank staff as and when necessary to cover sickness and annual leave.</p> <p>The home currently does not have an activities co-ordinator. Instead, it is the responsibility of all members of staff to support service users with activities. The home tells us they are in the process of developing ways of monitoring, recording and evaluating activities.</p>
Who we spoke to	We had a preliminary meeting with the care home's assistant manager on the day of our visit. We were unable to speak to any residents due to either them being at their day centre or communication difficulties. We were shown around the home by the assistant manager.

2.1. CQC Findings

The Care Quality Commission (CQC) carried out an unannounced comprehensive visit to 167 Lodge Hill care home on the 28th and 29th December 2016. This followed a previous comprehensive inspection on the 6th and 7th of August 2015, where they were found to be in breach of regulations regarding legal requirements around individuals who lacked capacity to consent. However, at their most recent inspection, the home had rectified this and was rated as ‘good’ overall across all areas.

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

3. Our findings

3.1. Arriving at the care home



167 Lodge Hill care home is a short walk from local bus stops, from which Abbey Wood and Plumstead train stations can be reached in under ten minutes. It is situated in a leafy part of Abbey Wood, next to local woods and open green spaces. There are is small parade of local shops, food outlets and hair salons nearby.



The building itself is on an ex-NHS site which has other health services based within it, such as a district nurse's office and the Royal Borough of Greenwich run care home next door at 169 Lodge Hill. The estate is well-kept and attractive. However, it does have a somewhat clinical feel, especially at the entrance where there are NHS signs very visibly displayed. Although 169 Lodge Hill is clearly signposted, we did not see any signs for number 167 and had to ask for directions on the day.

The home itself is a well-maintained, small bungalow with disabled ramps leading up to the front door. It has a large front lawn; the grass was slightly overgrown and needs some attention. There is secure access to the building as you press a call button to enter. On the day we visited the door was answered in a prompt and friendly manner by the assistant manager, and we were asked to sign in on our arrival.

3.2. Communal spaces



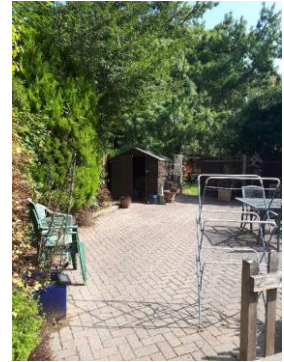
The building is rented from Hyde Housing Association, who are responsible for improvements and maintenance of the home. It has an open plan kitchen which felt homely, tidy and clean. There is space for residents to eat together around a large dining room table, and the furnishings and equipment appeared to be well-





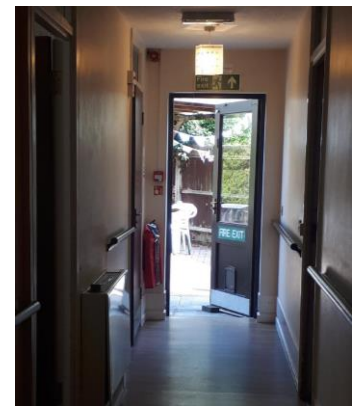
looked after and in good condition. The kitchen joins onto a living room area which was comfortable and well-furnished. There was an additional table area where residents could sit or eat together, as well as a TV and music system.

From the kitchen, residents can also access a large and pleasant communal garden. This was well-kept and had areas for residents to sit outdoors. The garden had a shed, lots of plants, and has direct gate access into the neighbouring house at 169. There was also a memorial in one corner of the garden for a resident who had passed away.



In the communal corridor between the bedrooms there was a large group photo of some of the home's former and current residents. This was a really nice feature, and we wonder whether an additional photo could be printed and displayed of all of the home's current residents.

In front of the reception hallway is a 'tenants' noticeboard'. Some of the information on this needed to be updated, such as the 'day opportunities timetable' and the 'staff on duty' board. However, we were glad to see the home had its CQC ratings displayed, and had additional information available for residents, such as examples of Makaton and British Sign Language.



One feature which stood out at 167 was their development of a 'sensory room'. As one of the bedrooms is currently empty, the staff are in the process of developing a space where residents can relax and use stimulation and relaxation tools, such as different sensory lights and smells. The room was not yet in use and was still partly being used as a storage space on the day we visited, but it did appear to have lots of potential. Our only concern was whether residents may be let down by its development if the home then need to turn it back into a bedroom once another resident is placed. We would encourage the home to think about the implications of this carefully, as well as the viability of using the room long term, or whether another space can be identified.



The corridors in the home were pleasant but needed some redecorating, for example where paint was chipped or worn away. The assistant manager recognised that the corridors were slightly too narrow for some models of wheelchairs and that this needs to be addressed. One of the radiators in the corridor outside the bedrooms had a broken guard; we were told that this had been broken and a report logged with Hyde Housing a few months previously, but that staff were still waiting for an engineer to visit the home.

There are two communal showers between the six rooms, and an additional single toilet. The toilet was well-stocked, but the floor was somewhat worn and there was a slightly unpleasant odour inside. It is in need of some maintenance work. The shower rooms again were well-equipped with hand rails but had a cluttered feel. There was signage around the communal areas, for instance on toilet doors, but again these needed refreshing as they looked quite dated in places.

3.3. Personal spaces



We were shown a couple of the residents' bedrooms on the day we visited. These were personalised, decorated individually according to personal tastes and well-equipped. There was evidence of personal belongings as well as photos of family members in some of the rooms. Rooms had pictures on the doors to show who their occupier was, and the rooms we saw were clean, odourless and tidy.

3.4. Activities



We were told that two of the home's residents attend day-centres; one currently goes two to three days a week, and the other three and a half. One resident was currently unable to attend due to her deteriorating health condition and because she was waiting for a new wheelchair to be delivered which would make her more mobile. Another resident had previously attended a day centre in her previous home in the Shared Lives scheme, but now found it difficult to leave the home for extended periods without becoming distressed. Staff told us they were currently supporting her to be able to attend external events in the future, primarily through building positive, trusting relationships between that resident and members of staff. The home also team-up with their neighbours at 169 Lodge Hill (who have their own

minibus) to organise trips out; for example, to Kew Gardens or the Tramshed in Woolwich (which puts on events such as karaoke, discos and movie nights).

In-house activities include ‘tasters’ (where staff prepare bite-size meals for residents to see what foods they enjoy and to encourage residents to try new things); listening to music and playing musical instruments; arts and crafts and reading sessions.

External agencies also provide activities in the home, such as a band who come in and play music on special occasions such as birthdays, aromatherapy (which has just started) and a scheme called ‘Weird Science’ (where different animals are brought in each time, ranging from rabbits to insects). Staff told us that most of the residents receive visits from family members regularly and may also visit their family members at their homes as well.

Although service users are largely non-verbal, staff organise activities around what they seem to enjoy as much as possible, or offer them two or three choices and ask for a yes or no response. Staff also told us that they are planning to introduce picture cards for activities similar to those used by the day centres, so that residents can choose activities non-verbally by pointing and prioritising the different activities.



We were told by staff that reorganising the activities schedule was a priority for the home over the coming months. They are planning, for instance, to implement an evaluation folder for activities, wherein a record will be kept of which activities residents enjoy (largely interpreted by their non-verbal body language as observed by staff during the activities). They are also working towards implementing a timetable whereby residents are involved in at least two activities a day, one in the morning and one in the afternoon.

Staff had put up a pictorial activities board in the communal area for residents. We felt this was a good initiative, although it needed some tidying and personalising for the individual residents.

3.5. Meals



The menu is set a week in advance jointly with service users and staff.

Although it is mainly the staff who prepare the meals, residents do join staff members in the kitchen when meals are being prepared. All staff are qualified to level 2 in catering.

3.6. Staff and resident relationships



We were told that some members of staff had been working at the home for over five years (including one person who had worked there for nearly thirty years) and had built strong relationships with service users. Although the home also uses bank care staff when the need arises, these staff are rotated amongst the nine Greenwich Living Option (GLO) homes and therefore tend to know the residents and the homes quite well.

We also asked whether residents had positive relationships with one another. We were told that communication was limited and most tended to keep to themselves, but they did have moments of non-verbal interaction.

3.7. Feedback and service user involvement



RBG centrally organise family questionnaires sent out annually.

The home itself conducts keyworker meetings every six weeks to gauge resident wellbeing and collect feedback, as well as monthly tenants' meetings. Where verbal communication is difficult, staff will use non-verbal clues or pictorial aids. Staff also help to support residents to feedback on the healthcare they are receiving from other services they use.



Currently the home does not organise family members meetings to gather feedback. We were told that they do communicate with family members regularly, on a one to one basis.

There is a newsletter which is circulated by GLO every six months. This updates service users on upcoming events, and key information they should know. We were told that the home normally pins this on their noticeboard, although they remove it as it becomes outdated. There was not one on display on the day we visited.



There was a complaints, comments and compliments book in the reception area of the home. However, there had not been any entrants for a number of months. Staff told us that they sometimes struggle to transfer feedback into the book when they received it, due to being busy. We would encourage staff to make the book more visible for visitors, as well as keep up to date with filling it in.

3.8. Other arising issues

The home supports residents with a broad range of complex needs, who need a significant amount of support and personal care. We were left somewhat concerned after our visit that support workers are being asked to carry out tasks additional to their role, which may fall further into the field of nursing care. We were also concerned that complex referrals may be being made to 167 Lodge Hill where they are not necessarily appropriate.

Staff also told us that although they feel they receive a lot of training to support residents with their needs, some of the training which is currently provided online would be better received face to face.

We asked management what the home's relationship with other health care professionals was. We heard that they felt well-supported by their local GP service, who have known most of the residents for years. It was felt, however, that it would be more useful if other healthcare professionals, such as dentists and opticians, would visit the home. Some residents find it very distressing to travel to appointments, and the thought of seeing a dentist or an optician can make them stressed or upset.

4. Summary

We felt that 167 Lodge Hill was a well-equipped and attractive care home with a comfortable, homely feel. Staff demonstrated to us that they were making clear efforts to make improvements for service users, especially in the areas of activities and on-site



facilities. There are still some areas of improvement which we have identified in our recommendations below, but overall, we were impressed with the general layout and environment, and the enthusiasm shown by the staff we spoke to on the day.

5. Recommendations

5.1. Recommendations for 167 Lodge Hill

Recommendation 1: Continue to make residents' activities a prioritised area of improvement in the home

We were pleased to hear that staff were focusing on improving the activities on offer to residents. We would encourage the home to:

Continue to expand activities on offer

- Put in place a monitoring log of individual residents and the activities they benefit from as soon as possible, as discussed by staff during our visit.
- Regularly update the activities noticeboard for the residents.
- Introduce picture cards to ensure resident input when deciding on activities as soon as possible, as discussed by staff during our visit.
- Designate an activities' co-ordinator who can organise and monitor activities in the home and implement the above actions. (If this is additional to their current duties as a support worker, they should be given protected time within their working hours to designate to this).

Review: 6 months

Recommendation 2: Improve the general maintenance of the home

In general, the home was well-kept and clean and tidy. However, there were some areas of general maintenance which needed attention. Specifically:

- The front lawn, which needed trimming.
- Painting and decorating in the communal areas, which needed refreshing.
- The broken radiator in the communal corridor.
- The flooring in the single toilet.
- We recognise that aspects of this fall under the remit of the landlord, Hyde Housing. Pressure should be applied on them to respond to logged requests, either at a management level or higher within Greenwich Living Options.

Review: 6 months

Recommendation 3: Update the signposting and signage around the home

We were glad to see a tenants' board, a staff on duty board and an activities noticeboard in the home. We would encourage staff to monitor these regularly and make sure they are up to

date. Signs on doors also need to be refreshed.

Review: 6 months

Recommendation 4: Consider the viability and long-term plan for the home's new sensory room

The emerging sensory room could be a fantastic feature of the home. We would encourage senior staff to create a longer-term plan for it. For instance, it may be that the home asks to keep the room blocked for that purpose, or that an alternative space is identified in either 167 or 169 and shared between the residents of the two.

Review: 6 months

Recommendation 5: Make better use of the complaints, comments and compliments book

Currently, the visitor feedback book is kept somewhat out of sight on a shelf above the sign in book. We would suggest this is left out more visibly, to encourage staff and visitors to fill it in more consistently. The home's senior staff should also monitor this more closely, and ensure it is being used regularly.

Review: 6 months

5.2. Recommendations for Greenwich Living Options

Recommendation 6: Consider the delivery method of some training modules

Staff fed back to us that some of the online training modules currently delivered by GLO would be more useful if they were delivered face-to-face. We would encourage Greenwich Living Options to consult with their staff and explore this as an option. If introducing more face to face training is not an option, we would encourage GLO to, as a minimum, offer their staff an explanation as to why.

Review: 6 months

Recommendation 7: Consider whether referrals to 167 Lodge Hill are appropriate for a residential care home

The needs of residents should be carefully considered both at the point of referral to the care home, and on an ongoing basis as personal needs change. Where residents' needs increase, GLO should be re-assessing whether the home is an appropriate setting for the resident, and whether staff are being asked to go beyond their reasonable duties in their care of the service user.

Review: 6 months

6. Service Provider Response

All providers are given the opportunity to review our Enter and View reports prior to publication, check for factual accuracy and provide a formal response.

“Thank you so much for your visit and inspection report. It was a shame that I missed your visit due to annual leave.

“It’s really helpful to have this to help us to improve our service and the way that members of the other professions see us. I have highlighted a few points:

- “There is room for 6 residents and we have taken advantage of the opportunity to use one of the empty rooms as a sensory room until Golden Lane come to put in changes at the Lodges - improvements to make it more fit for purpose. We are not sure what the plans look like at present but lots of the factors you have raised in your report are going to be addressed. We are hoping that an out building between 167 and 169 will be part of the plan and this will be a sensory room. All of the sensory items purchased are moveable with plan in mind. Very unfortunate that items have been stored in there as a temporary measure and I will address this issue with staff today.
- “There is a sign for 167 Lodge Hill at the bottom of the drive way. We will look to see if this can be better placed for visitors.
- “Unfortunately, the surrounding areas of the Lodges are not our responsibility and we are in talks with Hyde about who’s responsibility it is. The grounds are belong to Oxleas, but they will not maintain the areas around the Lodges. It is a shame that it impacts on the general appearance of the Lodges. We are continuing to work on who is going to take responsibility for the maintenance in the long term.
- “When you arrived at 167 Lodge Hill you were also asked to show photo ID. This is an expectation of all persons entering the building. (with the exception of family)

- “‘Tasters’ are given to the service user that has a Peg Tube feed. These are given following SALT intervention and are for a sensory experience and pleasure rather than as a meal.
- “WILD science (not WEIRD) come to 167 as a sensory/therapeutic activity. Chosen by the service users, they also request particular creatures that they like or are their favourites that have been noted by staff members.
- “Other professionals do come to the home to see service users following staff requests if there is difficulty with attending appointments, services such as Dentist and opticians do visit but obviously hospital appointments can become an issue for some people due to anxiety, but we work with other professionals to ensure that all medical treatments and investigations are carried out in a timely manner.”

Susan Sharp, House Manager, Royal Borough of Greenwich

7. Contact us

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