



healthwatch
Greenwich

Enter and View

169 Lodge Hill care home

July 2018



169 Lodge Hill, Abbey Wood, SE2 0AS

Telephone: 020 8311 1139

Manager: Bimbo Sosanya

1. What is an Enter and View?



Part of the local Healthwatch programme is carrying out Enter and View visits. Local Healthwatch Authorised Representatives visit health and social care services to discover the patient and service user experience and make recommendations for improvement. The Health and Social Care Act (2012) provides local Healthwatch the right of entry to observe service delivery and talk to service users, patients, their families and carers in any publicly funded health and adult social care service (including hospitals, residential homes, GP practices, dentists, optometrists and pharmacies). Enter and View visits help us to identify issues and share good practice from the perspective of people who use the service.

1.1. Our approach

To collect information, our Authorised Representatives complete an observation form and speak to residents, service users, patients, and staff as appropriate. We emphasise to all 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. We follow our safeguarding policy at all times.¹



1.2. Disclaimer

Our reports relate to findings observed on specific dates and are not necessarily representative of the experiences of all patients, 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 and staff for their contribution to the Enter and View programme. Healthwatch Greenwich would also like to thank the Healthwatch volunteers who assist with the visits.

¹ Our safeguarding policy can be accessed here:
www.healthwatchgreenwich.co.uk/safeguardingconcern

2. Visit details

Date and time of visit	9 August 2018
Authorised Representatives	Anna Jones and Steve Wheeler
Service provider	Royal Borough of Greenwich (RBG)
Number of beds	The home is a six bed long-term residential care home for adults with mild to severe learning disabilities. The residents are of mixed genders and ages (between 18 - 65). Currently, the home has two male and four female residents. Four residents are fully Greenwich council-funded and two are co-funded by Greenwich council and NHS Greenwich Clinical Commissioning Group (CCG).
Staffing levels	There are three staff on shift during the day. At night there is one waking staff and one sleeping staff on duty. Although some staff have been in post for a long time, the home also uses RBG bank staff to cover shifts where necessary
Who we spoke to	We had a preliminary meeting with the care home's manager on the day of our visit. We also spoke to one resident on the day with the support of his care workers.

2.1. CQC Findings

The Care Quality Commission (CQC) carried out an unannounced visit to 169 Lodge Hill care home on 14 June 2016.

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



169 Lodge Hill care home is situated in a quiet and leafy part of Abbey Wood. It is within a ten-minute walking distance of numerous local bus routes, which take you to Plumstead or Abbey Wood train stations in under fifteen minutes. It is an attractive neighbourhood, with lots of open green spaces as well as wooded areas. There is a small parade of shops and facilities nearby, which includes a salon, food outlets and newsagents.



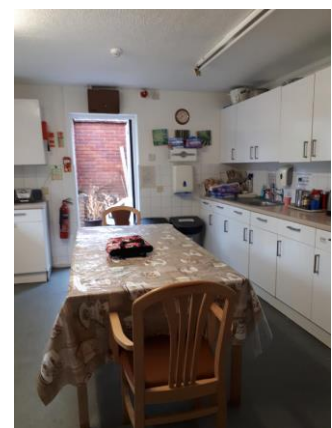
The care home itself is based within an ex-NHS owned estate, which has multiple other buildings on-site including another care home next door (167 Lodge Hill) and a district nurses office. There is a map at the entrance to the estate which clearly signposts where the care home is. Although there are obvious benefits to being placed so close to other services (such as a hydro-pool on site which the residents can use), and the estate itself is attractive and well-kept, it did have a somewhat clinical feel when entering.

The home itself is a small, attractive building at the front of the site. It had secure call bell access, which was answered in a prompt and friendly manner by the home's manager. We were asked to sign a visitors' book on arrival.

3.2. Communal spaces

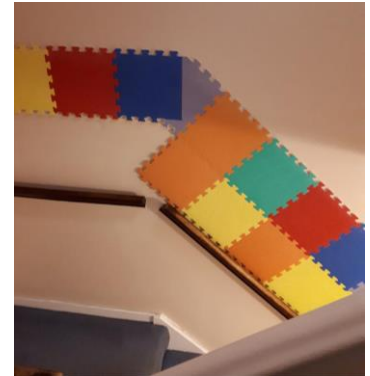


On the ground floor of the home is a communal living room, with large comfortable armchairs and sofas which can accommodate all residents. The space clearly took into account individuals' needs, as there was a tailored chair and a padded mat for use by two individuals in particular. It was a homely space with a tv, seating placed in a circle in a way which would prompt social interaction and photos of the residents hung on the walls. The resident we spoke to said



that he would like a larger sofa in the lounge area, although he had his own preferred armchair.

The home has a large open plan kitchen/ dining area, which was clean and tidy when we visited. We saw residents being supported to eat breakfast on the day of our visit, and they appeared to be comfortable and at home in the dining area. The home also has a back garden; this was a large space with outdoor seating and a swing, which could be accessed via the kitchen or one of the bedrooms. It was predominantly an attractive and clearly well-used area, although it would benefit from some tidying and emptying of what appeared to be unused equipment and furniture.



There were multiple bathrooms in the home; one was situated on the first floor and another two were at ground level. These were clean and tidy, although one of the shower rooms on the ground floor did feel slightly cramped.

The corridors in the home were all lined with colourful padding. We were informed that this was because one of the residents could sometimes hit their head on the wall. We thought the padding was well thought-through and added colour to the hallways.



Some of the notice areas and boards in the home would benefit from restructuring and re-organising. At times it was not clear if information on display was meant for staff, service users or visitors, and some areas looked slightly untidy due to lots of notices having been pinned up. Some displays also needed updating, such as the menu board, and another display which had pictures of which staff were on shift.

3.3. Personal spaces



There are six bedrooms in the house, one of which is en-suite. Two are on the first floor of the home and four are on the ground floor. All the rooms we saw were very spacious and tidy, with lots of natural light. The rooms had clearly been

personalised for each individual, as we saw evidence of decorations, pictures and murals in each room which were linked to individuals' interests and hobbies. Rooms were well-furnished and had their own tv's and lots of personal belongings and photos, and most of them had photos of the occupier on their bedroom doors.

3.4. Activities



We were told that most residents attend nearby day-centres on varying days of the week, except where they have expressed a preference not to go (one resident at the moment prefers not to attend, and therefore has a keyworker support them 1:1 at home). Other activities are also on offer within the home, often provided by trained specialists, including: aromatherapy sessions, music sessions, cooking and baking, and sensory reading (interactive reading sessions). Activities are individually tailored to the interests and needs of individuals, and all residents have their own personal schedules. The resident we spoke to had three befrienders who came to visit him.

Staff also organise regular walks around the local area for service users, and daytrips further afield, such as a recent trip to Kew Gardens. As the home has their own minibus, staff and residents are able to go on outings which have not been pre-organised if service users decide they would like to go somewhere on the day. The manager informed us that residents are also supported to observe their religion and visit their places of worship, and celebrate religious occasions such as Easter, Christmas or Eid, where they wish to.

The home is open to visitors at any time (so long as a visit does not impact on the interests of the other residents). We were told by staff that most residents' family members are involved in their lives and most receive visitors regularly.

3.5. Meals



We were told that meals are prepared and adapted by staff according to the needs and tastes of individuals, and residents assist in cooking as and when

they wish to. For instance, although staff might prepare fish and chips for all residents, the presentation and portioning of the meals are adapted to individuals based on their needs. Menus are planned jointly with residents and food shops are done weekly once meals have been decided.



We were also informed that meals are planned with health and nutrition in mind, and we saw evidence of this around the home. We were also pleased to see a pictorial food board in the kitchen area, although we noticed that this did need updating to the correct day, as it was three days out of date.

The service user we spoke to on the day told us that some of the meals he liked and some he did not; he appeared to feed this back freely and openly to his support worker who was assisting with the interview.

3.6. Staff and resident relationships



We did not observe or speak to many residents in the home as most had gone out for the day when we arrived. We were also unable to communicate with more than one resident about their relationships with the staff; the person we did speak to described the staff as 'nice' and when we asked if the staff did or did not support him he replied that they did (staff members were in the room at this point, as they were helping us engage and communicate with the resident). Nonetheless, from our limited observations, residents seemed comfortable and happy when interacting with staff members. Staff appeared able to communicate with and understand residents well, including their body language and personalised Makaton signs.

3.7. Feedback and service user involvement



Staff in the home hold 'best interest meetings' with individual service users, their family members and other professionals involved in their care. These look at issues which may be affecting the individual's quality of life or health and wellbeing. The regularity of these meetings depends on the needs of the individual. We were also told that service



users' wellbeing is monitored in an ongoing way by the staff who know them best, by monitoring verbal and non-verbal cues such as their mood and body language. The manager explained that this was supported by the fact that staff who had been at the home for a while knew the residents well and had formed strong relationships with them.

We were told that family members' feedback is gathered through the provider's centralised yearly survey. We were also assured that the home operates an 'open door' policy when it comes to family members and any concerns they may have, and the manager was able to provide recent examples of where he had listened to family members' feedback in an informal way and acted upon them quickly (for instance, purchasing new blinds for a resident's room to help with the heat).



We were told by the care home manager that they do not hold regular residents' meetings.

4. Overall summary

The home was generally well-kept and had a warm and welcoming atmosphere. Staff appeared to know the residents well and the manager spoke passionately about creating a home which promoted independence and fully felt like 'home'. We were unable to gather any extensive service user feedback, but from our limited observations the residents appeared to be well looked after.



5. Recommendations

Recommendation 1: Reorganise notice boards and signposting

There was a lot of useful and interesting information on display around the home. However, we would encourage staff to organise such material in a clearer way and to update noticeboards regularly (such as the meal planner and the staff on duty boards).

Recommendation 2: Introduce residents' meetings in the home

Although not all residents may wish to attend regular house meetings, these can be a valuable means of gathering service user feedback and sharing information. We would encourage the home to hold regular meetings and share minutes with the residents and their family members.

Recommendation 3: Tidy the garden

The garden was a large, clearly well-used space. However, we would encourage staff to remove furniture or equipment which is currently not being used and to tidy the lawn.

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.

Response from provider:

“Thanks for the report. On the aspect of service user’s regular meeting. This is particularly difficult due to communication issues with most of the service users, as such a regular 1:1 meeting (keywork meeting) is held with individuals using their preferred communication tools e.g. communication passport, object of reference, signs etc. in day to day decision making.

“Attached is a copy of the agenda for keywork session. This list may vary depending on individual’s need and support required.

“**Keyworker meeting**

Agenda

- Shopping trips
- Evenings out
- Activities/Trip to the Orchard Theatre (Dartford)
- Room decoration and maintenance
- Diet and menu’s / weight
- Sensory and audio / visual stimulation
- In house activities
- Current health and wellbeing
- AOB

“As highlighted on the day of the visit, we would hold best interest/review meetings involving individual’s circles of support, next of kin, parent or guardian to support the individual in making decisions that may affect their quality of life.”

Bimbo Sosanya, House Manager

7. Contact us

Address: Gunnery House, Gunnery Terrace, Woolwich, London SE18 6SW

Telephone: 020 8301 8340

Email: info@healthwatchgreenwich.co.uk

Website: www.healthwatchgreenwich.co.uk

Twitter: @HWGreenwich

If you require this report in an alternative format, please contact us at the address above.

We know that you want local services that work for you, your friends and family. That's why we want you to share your experiences of using health and care services with us - both good and bad. We use your voice to encourage those who run services to act on what matters to you.

We are uniquely placed as a national network, with a local Healthwatch in every local authority area in England.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

© Copyright Healthwatch Greenwich 2018