



# Healthwatch Greenwich Enter and View:

## The Oaks Care Home

February 2018



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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 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	23 <sup>rd</sup> February 2018 10am to 12pm
Authorised Representatives	Clive Mardner and Eve Oldham
Service provider	Speciality Care EMI Limited
Admission information	Care home with nursing facilities. For those aged 65 or over, with alzheimers, dementia or other mental health needs
Facilities and services	Physiotherapy / Separate dementia care unit/ Own GP if required / Own furniture if required/ Pets by arrangement/ Close to local shops/ Near public transport/ Minibus/ Lift / Wheelchair access / Gardens for residents / Residents kitchenette / Television point in own room
Number of beds	93 over six units. When we visited there were 87 residents.
Who we spoke to	We were unable to speak to many residents on this visit. The report is a record of our observations and conversations with staff and relatives.

#### 2.1. CQC Findings

The Care Quality Commission (CQC) carried out a focused inspection of the service on 6<sup>th</sup> July 2017, following an unannounced inspection on 21<sup>st</sup> and 22<sup>nd</sup> of February 2017, in which significant legal breaches were reported. Although the CQC inspection found that these breaches had since been addressed, it was felt that these had not been in place for long enough to ensure consistent and sustained good practice. The home was resnspected by the CQC on the 11<sup>th</sup> May 2018 and is waiting for the report at the time of publication.

Overall rating for this service	Requires Improvement
Is the service safe?	Requires Improvement
Is the service effective?	Requires Improvement •
Is the service well-led?	Requires Improvement



## 3. Our findings

#### 3.1. Arriving at The Oaks

The external environment is well-kept, and the gardens are well cared for. There is ample carparking facilities for visitors and staff.

There was a signing in book to gain entrance to the home. It took some time to be greeted, as we were not expected. This was because the manager had changed since Healthwatch Greenwich had sent notification of its visit. Once this was resolved the manager and her staff were very helpful and made every effort to make our visit very welcoming.



#### 3.2. Our observations

The Oaks provides spacious accommodation comprising of en-suite bedrooms which look out onto either the gardens or a central courtyard, and communal lounges with TV, DVD and music facilities, along with several quiet areas. The home is divided into six separate units over two stories and benefits from an on-site laundry facility, catering and extensive garden areas. The layout of the building is somewhat maze-like, with lots of small sections both on the ground and first floor. Although fire exits were clearly marked, from our observations the number of notices needs to increase and to be larger in size, in part due to the complicated lay out of building. We would suggest that these signs should also be dementia friendly. The fire policy is on display at the entrance and is accessible for all visitors. There are also copies on every unit and by the Laundry.

From our overall observations The Oaks appears clean and bright, with lots of wall decorations. When we visited we found many residents in bed asleep midmorning. As a result we were unable to determine whether they are able to take part in any regular activities.

The rooms were clean and had no bad smell. The nature of the client group means many residents are likely to be both washed and fed in bed. One resident in bed requested a cup of tea. We were pleased to see several residents sat up in chairs in the lounges, sometimes with support. The assisted bathroom was extremely clean which was good, and on asking we were informed that it was used daily.



The cafe and eating areas were bright. The hairdressing room again was bright and clean, and all residents looked physically well cared for.

healthwatch

We did not observe any residents walking around, as everyone we observed was either in bed or sat in chairs. It is common for physically able people with dementia to wander (depending the stage of their dementia). One idea to increase the likelihood of the residents moving around would be to have small colour coded patches at hand height along the corridors, or perhaps patches of different kinds of material, e.g. fur, pebbled, so residents can find their way around.

The rooms are individually furnished, and services users are encouraged to bring their own personal possessions to ensure they feel at home. We would also welcome management develop a policy on the implementation and use of memory boxes for the dementia patients or the personalisation of residents' door display.

We did speak to a family who had raised issues and complaints about the care and support of a relative. We asked them to contact us to outline their concerns, and a detailed list was provided. Although most of the concerns have since been resolved, there were several that relate to the delivery of services and the homes practice and procedures. As a result, we have raised the issues with the Royal Borough of Greenwich who are in discussion with the home.

## 4. Summary

The residents we observed seemed to be happy and well looked after, although due to the particular needs of the client group, many were silent and unresponsive. The building was well maintained, clean and with good facilities. Staff were helpful and responsive to our visit.





### 5. Recommendations

## Recommendation 1: Ensure all signage is dementia friendly

Signage around the home ought to include pictoral representations which would make the home more dementia friendly. This would enable residents to be more independent in navigating the home. More information on creating pictoral signage and its purposes can be found here: <a href="https://www.enablingenvironments.c">https://www.enablingenvironments.c</a> om.au/signage.html.

Recommendation 2: Explore the possibility of introducing memory boxes for clients with dementia

Memory boxes can improve clients' familiarity with their environments

and assist with their navigation around the home. We would encourage the home to consider implementing these.

Recommendation 3: Increase the physicality of residents, discuss the possibility of using colour coded or textured patches

Using textured patches on the wall can encourage patients with dementia to walk around more. It can also help with resident's recognition of where they are.



## 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.

"On page 5: there is reference to issues and complaints which were reported to Royal Borough of Greenwich. These have been investigated, and unsubstantiated, by RBG. However, I am continuously monitoring the situation"

"Page 6: Recommendations: Dementia Friendly signage: We are looking to refurbish the Home over the next 12 months and have our Dementia Lead attending on the 8<sup>th</sup> July. I will certainly discuss with her your recommendations.

"Memory Boxes: we are currently reviewing all Care Plans to make them more Person Centred and reflective of Equality & Diversity, part of this will be to involve relatives/significant others, who we hope will provide more information than currently held to develop more meaningful activities, including Memory Boxes.

"Use of texture: As mentioned above, I will discuss this with our Dementia Lead at her visit"

**Una Court - Care Home Manager** 

The service provider also responded to our draft report with some factual amendments which have been reflected in this final version of the report.



#### Contact us

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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.

#### **Acknowledgements**

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