



Enter and View Report : Baugh House

About Healthwatch

Healthwatch is made up of 152 local Healthwatch organisations that were established throughout England in April 2013, under the provisions of the Health and Social Care Act 2012. The dual role of local Healthwatch is to champion the rights of users of health and social care services and to hold the system to account for how well it engages with the public.

Healthwatch gives people a powerful voice locally and nationally. At a local level, Healthwatch Bexley works to help local people get the best out of their local health and social care services. Whether it's improving them today or helping to shape them for tomorrow. Healthwatch Bexley is all about local voices being able to influence the delivery and design of local services. Not just people who use them, but anyone who might need to in future.

About Healthwatch Bexley

Healthwatch Bexley is the independent health and social care watchdog and the voice of local people in ensuring that health and social care services are safe, effective and designed to meet the needs of residents, social care users and carers.

Healthwatch Bexley gives children, young people and adults a stronger voice to influence and challenge how health and social care services are purchased, provided and reviewed within the borough.

Healthwatch Bexley provides a signposting service for people who are unsure where to go for help. Healthwatch can report concerns about the quality of health care and social care to Healthwatch England, or directly to the Care Quality Commission.

What is 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.

Enter and Views are not intended to identify specific safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.

Acknowledgements

Healthwatch Bexley would like to thank Baugh House, including their residents and staff, for their valuable contribution and for participating in this survey.

Disclaimer

Please note that this report relates to findings observed on the specific date set out below. Our report is not a representative portrayal of the experiences of all patients, only an account of what was observed and contributed at the time.

Details of the visit:

Name and address of premises visited	Baugh House 19 Baugh Road Sidcup DA14 5ED
Name of Service provider	Gold Care Homes
Nature of service	Residential and Dementia residential
Registered Manager	Judith Boikhutso
Date and time of visit	12 th October 2016 2-4pm
Authorised Representatives	Gill Davies, Tanya Harris, Jayne Garfield Field

Methodology

This was an announced Enter and View visit.

Upon arrival, a member of management was approached and the authorised representatives (ARs) held a short and informal introductory meeting explaining the reasons behind the visit.

The ARs approached residents as they were seated in the communal areas and explained the reason behind Healthwatch visit. Residents were asked if they were willing to participate before the survey was conducted jointly between the AR and the participant. All participants were reassured of anonymity. The questionnaire generally related personal choice and to what extent residents feel in control over every day matters that are important to them. In total, the ARs spoke with 9 residents about their experience of living at Baugh House, of which 3 were male and 6 were female.

General observations were also made by the AR's, whereby checks of facilities, including toilets, communal areas and dining areas, in addition to resident information displayed on the notice boards. General observations of staff interacting with patients were also made.

Purpose of the visit

- To collect feedback from residents to assess to what extent they are satisfied with the service they receive
- Identify examples of good working practice
- Identify gaps in service provisioning
- Observe care home in operation
- Capture the experiences of residents and any ideas for change they may have

Summary of Survey

1. Satisfaction with staff and overall feelings of living at Baugh House

The majority of residents (n=6) stated that they like living at Baugh House, with one stating they had reservations. Two residents said they did not like living here.

Eight residents felt that they get enough support from staff and comments included "They say here to help if there is anything you need, but I'm independent", "They are lovely the staff here, you can have a laugh". One person said "try to do your level best not to ask for help, don't want a reputation as being a nuisance, and would rather go without". Two other

residents stated that they don't ask for much and wish staff would come sooner when they press the bell.

One resident said they call on staff if they cannot sleep at night or wait until a carer passes by. Two residents stated that they would just lay or sit in bed, with one citing "I sit on the edge of the bed and have been told to just get back into bed". Two stated that they do not have a problem sleeping, unless they are disturbed by other residents.

The majority of residents (n=7) stated that entertainment was provided, with three saying they enjoyed what was on offer, particularly the singers. Entertainment included community singing, bingo, crayon painting and playing with balloons. The regularity of entertainment seemed to vary from 'sometimes' to 'not every week or month'. Three residents said they did not enjoy the entertainment, with one resident citing "It is for the elderly".

2. Personal Choice

Two thirds of the residents (n=6) said they choose what clothes to wear each day, with three stating they are assisted by carers to make a choice. One resident said they felt they had no choice. Five residents said they got help from a family member to buy new clothes and one resident stating they shopped online.

The majority of residents told us they use the in-house hairdressers to get their hair done, one resident was unsure.

Most residents (n=7) said they choose what time they go to bed, two stated it would depend on the carer.

Four residents told us they choose what time they arise in the morning, whilst five stated they had no choice. One resident said they get up when they are ready, but don't mind if they have to wait for a carer.

Six out of the nine residents said they were satisfied with the food, one resident was hesitant and said they understood that there is a certain strictness with so many people to feed citing "They put things in front of you that you wouldn't want to eat". Eight residents said the portions were large enough, one declined to answer. Two residents said there was always a choice. Furthermore, three said there was no choice, one resident cited "There used to be a menu, but not recently". A third of residents did not like the choices, one citing "It's edible", another "If don't like It, I don't eat it". One resident who stated there was no choice said they would prefer a light lunch rather than a heavy meal at lunchtime every day, as it made him tired. If residents did not like the food choices, one person said they could ask for an omelette. The comments on food choices included "If I say I don't like it they will bring something else, but I don't like saying I don't like it", another resident cited "Just put in front of me, if I don't like it I don't eat it, no choice from staff and don't like to ask, "Wouldn't bother me if I didn't eat for a couple of days, don't force me to eat, don't encourage, we make our own choice". One resident said they would just eat their own food

brought in by family and friends. Six residents stated that they are able to get food and drinks outside of mealtimes should they wish to which comprised of tea, water and biscuits.

3. Access to community networks and facilities

Four of the residents (n=4) we spoke to had been out of the care home citing shopping, lunch with family or hospital treatment as reasons for going out. One resident stating they had gone out on their own. One person said "They ask do you want to go out today, but not every day". One resident stated that they used to go out quite frequently but this had not happened recently.

Seven residents (n=7) told us they had hobbies before moving to the care home with two residents saying they could continue with their hobby. Reading, listening to music, making model aircraft and knitting were stated as the most common hobbies.

Six residents told us they get help from family members when buying birthday and Christmas cards.

The majority of residents (n=6) said they did not attend church or religious services. One resident stated that they have a service in Baugh House now and again, with another person stating "I can go to a service if I want". Furthermore, one resident cited "Only go to Remembrance Day, not sure I could go to a service if I wanted to". Three residents stated they would like to attend a church/religious service with one citing "I did attend when I wasn't in the home, although they have had an informal church service in the past here, but not recently. I know a care home where the local vicar visits once a month".

Additional feedback

The residents were given the opportunity to reflect on any changes they would like to see at their care home. One resident would like to leave the care home occasionally. One person cited "I don't think so, all good, can ask anything, don't have to go out, it's all here", another resident cited "to come quicker if I press the bell, seems a long time and it does annoy me, feels like I have been forgotten, have to wear a pad just in case". With regard to the staff, one resident expressed a concern over needing more staff and another wished to change the Manager. Two residents expressed a concern over carers speaking in a foreign language within ear shot, they felt it was very confusing for them. One resident cited "It is not possible to change, need rules and regulation in an organisation like this, so need routine and plan".

The residents were asked how it was decided that they should come and live at Baugh House and in most cases it was due to an increased need of care, decided by family or a GP. One resident said they liked the look of the home before they moved in and another person

said they had been sent to Baugh House for rehabilitation 2 years ago and had ended up residing here.

The residents were asked to describe their life at Baugh House and how they felt about living there. Eight residents answered this question and it received mixed responses. The positive comments left were "As good as anywhere, never have a cross word", "Enjoy the company of the girls", "Quite nice really, peaceful, I like peaceful", " Very kind", "Satisfactory, life is jogging past" and " Quite pleasant, could be pleasanter, it's not like your own home though". The negative comments included "Lazy!", "Where else can I go?" and "Don't like living here". One resident expressed a concern of being moved within the building and now felt they were more isolated.

General observations

The overall impression of Baugh Court was unsatisfactory from an AR perspective and it was felt that a repeat visit may be beneficial.

Residents were clothed in a dignified manner and facilities were clean, yet there was a strong odour on entering the reception area which continued through the ground floor. There was very little interaction observed between residents and staff during the visit as the visit was carried out after lunch and quite a few residents were asleep, so the team were unable to comment on this. No examples of residents being asked their views and preferences were noted.

An activity of community singing took place for a short period of time, at the time of the visit, residents were noted to not really engaging and enjoying the activity with the exception of one resident. The majority of seats were occupied within the lounge area, but it should be noted that many residents were also residing in their rooms, due to personal choice and being confined to bed.

On entering the building there was a high number of staff on hand and a training session was taking place, yet when AR's were leaving it was difficult to find a staff member to clarify our departure, none were present within the ground floor lounge area. It was also observed that some family members were feeding their relatives lunch. One resident who appeared to be bed bound had no cot sides and plastic mats had been placed either side of the bed on the floor.

Additional observations included a menu board in the reception area, no menu was noted to be on display within the two resident lounge areas. An activity board was noted and activities were being promoted in very small lettering and the board mainly consisted of photos. It was observed there was no notification of the next family meeting within the home. Moreover, the manager stated that these meetings were well attended and she said family/friends felt they were kept up-to-date with the home through these meetings, yet

one relative said they were not informed of meetings and were not kept up-to-date. The manager also highlighted that a safeguarding issue was in place and the resident involved had handed in their notice of leave.

The main concern for the AR's was in regard to the fact that some of the residents were not getting their needs met.

Items for consideration

1. Review night time routine so that residents know they will be supported if they should wake
2. Regular feedback collection from residents to highlight additional needs and wishes, including care needs, use of pads, food choices and entertainment.
3. To provide a more homely feel to resident's rooms, to display more personal items.
4. To display a menu board within lounge areas for residents to be able to view their food choices.
5. Review how long it takes for staff to attend to a resident that has called for assistance.

Feedback from Baugh Court

Please use this box to add any comments, reflections or inaccuracies stated in the report.

2/11/16 No comments received from the Baugh House.