



Enter and View Report: Marlborough Court

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 Marlborough Court, 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	Marlborough Court, 7 Copperfield Road, London SE28 8RB
Name of Service provider	Four Seasons Healthcare
Nature of service	Residential, Dementia and Nursing
Registered Manager	Marcos Meanger
Date and time of visit	17 th March 2-3pm and 22 nd April 9.30-11.30am.
Authorised Representatives	Lotta Hackett, Imogen Murray-Smith, Gill Davies, Kim Dhadda

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 15 residents about their experience of living at Marlborough Court, of which two were males and thirteen were female.

General observations were also made by the ARs, 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.

NB. Not all residents responded to all the questions, which means the total number of responses will not always equal 15 (100%).

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 Marlborough Court

The majority of the residents (n=10) stated that they like living at Marlborough Court, with some residents not having stayed for very long and felt unsure. Two residents said they didn't like it living here.

Eight residents felt they get enough support by the staff and comments related to staff being "marvellous" and "very nice". One person said they did not feel they get enough help and said "some staff appear resentful".

The majority of residents said they call on staff if they cannot sleep at night and feel supported when there is a problem at night.

The majority of residents said there was entertainment provided on a regular basis with five residents saying they enjoyed what was on offer, particularly the bingo. Two residents said they do not like the entertainment and are not interested in Bingo.

2. Personal choice

All of the residents said they choose what clothes to wear each day. Half of the residents said they get help from a family member to buy new clothes, whilst one person said they don't need new clothes and another resident said they had not been in care home long enough to need new clothes/

The majority of residents told us they use the in-house hairdressers/barber to get their hair done, or they do it by themselves or gets help from a family member.

Most residents (n=13) said they choose what time they go to bed and one person said they do not choose.

Eight residents told us they choose what time to arise in the morning, whilst four people stated they had no choice. One residents said they get woken up at 5.30am for a bath and other said they wake up when staff come around, but felt there was little choice over what time.

Most residents (n=12) said they were satisfied with the food, portion sizes and food choices on offer. One person said there was "too much sugar" and two people felt portion sizes were too large. Seven residents said they are able to get food and drinks outside of mealtimes should they wish to, with seven declining to answer as had not needed to and one residents stating that you cannot get food and drinks outside of mealtimes.

3. Access to community networks and facilities

Five of the residents we spoke to had not been out of the care home recently. Four residents said they had been out with family members recently, with one person saying their family lives too far away. Six of the residents said they have been out of the care home recently, citing Mother's day, Christmas and days out with daughters as reasons for going out.

Seven residents told us they had hobbies before moving to the care home with five residents saying they are not able to continue with their hobby in the care home. Sewing, dancing, line dancing, gardening, handiwork and watching sport on TV was stated as the most common hobbies.

Two residents told us they get help from family members when buying birthday and Christmas cards. Other comments related to not needing to buy them anymore and that they give money instead of cards and presents.

Three residents said they attend church/religious services occasionally, whilst ten residents said they do not. One residents stated they would like to attend church services and one person said they were not sure if they were able to.

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 have more active exercise classes and two residents expressed a wish to go out more. One person would like to be able to smoke in their own room and another residents said they would like to attend church and be able to do dancing.

The residents were asked how it was decided that they should come and live at Marlborough Court and in most cases it was due to an increased need of care, decided by a family member or a social worker.

The residents were asked to describe their life at Marlborough Court and how they felt about living there. Eleven residents answered this question and the question received mixed responses. The positive comments left were "very happy", "alright", "not bad", "pleasant" and "coming to like it". The negative comments were "very little to do, boring", "terrible, not happy" and "very difficult". One person expressed a wish to be able to attend church but does not know if there is an opportunity to do this.

General observations

The team made two visits to this care home as the first visit yielded a very low response rate (n=4).

Residents were clothed in a dignified manner and facilities throughout the residential ward were clean. There was a strong odour present during both visits, on both the ground floor and the second floor. There was no activity during our first visit and the residents were seated in the lounge area, most of whom were asleep during our visit. On our second visit, there was Bingo provided by a local charity and of the fifteen residents in the communal area, about six took part. The residents who took part in Bingo appeared to be engaging and enjoying the activity.

There was very little interaction observed between residents and staff on our first visit and there were no staff visible in the corridors, so the team were unable to comment on this. During our second visit, the entertainment lady briefed the team on the activities and

general information about the care home, which was very helpful. There were some interaction observed between staff and residents on our second visit, as the staff got residents ready to come into the communal area.

The main concern noted during both visits were the strong odour present on both wards we entered. Additional observations related to notice board not being kept up to date and residents were left in the dining area following breakfast whilst waiting for staff to come and help them.

Items for consideration

1. Regular feedback collection from residents to highlight additional needs and wishes, including access to religious services.
2. Review morning routine so that residents have a greater say in when they can get up
3. Review activities provided to ensure they are suited to the residents needs and wishes

Feedback from Marlborough Court

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