



Enter and View Report: Sidcup Care Centre

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 Sidcup Care Centre, 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.

Detai	ls of	the	visit:	

Name and address of premises visited	Sidcup Care Centre, 2/8 Hatherley Road, Sidcup DA14 4BG	
Name of Service provider	Bupa Care Homes	
Nature of service	Residential and Nursing	
Registered Manager	Sandra Verrell	
Date and time of visit	29 th April 10am-12pm.	
Authorised Representatives	Nicola Rigby, Gill Davies	

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. Information about residents was also obtained, such as people with hearing, vision and learning disabilities to be made aware of.

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 seven residents about their experience of living at Sidcup Care Centre, of which one was male and six 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.

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 Sidcup Care Centre

The majority of residents (n=6) told us they like living at Sidcup Care Centre, with comments relating to "I like everything, it's like home", "staff very good and put themselves out", "quite comfortable" and "don't want to move". Other comments related to having more independence, not being able to join in due to hearing loss and a lack of oranges at breakfast.

All of the residents told us they have happy with the care they receive from staff and the majority of residents call on staff if they cannot sleep at night and feel supported.

2. Personal choice

Six out of seven residents reported choosing what clothes to wear each day, with one person saying that the carers helped them. Most of the residents get help from a family

member to buy new clothes, with one person who gets help from staff/carer. One commented on not being there long enough to know.

All the residents use the in-house hairdresser.

All of the eight residents said they choose what time they go to bed, with six residents saying they are able to choose when they get up in the morning. One resident felt they did not have a choice when to wake up.

Just over half of the residents (n=4) reported being satisfied with the food. Three of the residents were not happy with the food, comments included '....not cooked well' and 'disgusting'. All of the 7 residents were happy with the food choices on offer. Six of the residents said the portions were large enough. All of the residents stated they are able to get food and drinks outside of mealtimes should they wish to.

All the residents said there was entertainment provided on a regular basis with six residents saying the enjoyed what was on offer and one resident said they only enjoyed it sometimes. One residents expressed a wish for a discussion group

3. Access to community networks and facilities

The residents predominately go out of the care home with family/friends. One resident attending church with a church member.

Four of the residents get support from family when buying birthday and Christmas cards including presents. Two residents do not buy cards/presents. One resident keeps a box of cards in her room.

Six of the seven residents stated they had hobbies before moving to the care home with four residents saying they are not able to continue with their hobby in the care home. The hobbies mentioned were music, drawing, knitting, tapestry and spending money.

Four of the residents stated that they currently attend church/religious services. One resident stated they do have services there, yet they have never attended. Another resident mentioned they would like a service or a songs of praise.

Additional feedback

The residents were given the opportunity to reflect on any changes they would like to see at their care home. Six residents said they were happy with how things were, although one respondent said they had not lived at Sidcup Care Centre for long enough to say. One person requested a wish for more independence, whilst another expressed a concern as cannot join in everything because of impaired hearing. Two residents had concerns over the food. One resident mentioned how the home needed more staff.

The residents were asked how it was decided that they should come and live at Sidcup Care Centre and in four cases it was due to an increased need of care, a decision made by the resident. One resident made the decision as his wife was already in residence at Sidcup Care Centre. The decision of two residents was made by a social worker. The residents were asked to describe their life at Sidcup Care Centre and how they felt about living there. Four of the residents comments included 'alright, happy', 'everyone is kind' and 'good'. One resident mentioned how to some staff it is just a job. Another expressed concerns of boredom and would like a discussion group set-up.

General observations

The overall impression of Sidcup Care Centre was good.

Residents were clothed in a dignified manner and facilities were clean and odour free. The Staff were well presented and spoke to the residents in a respectful/friendly manner by coming down to the residents. There appeared to be enough lounge chairs to accommodate the number of residents. No activities were taking place during the visit however, residents informed AR's that activities did take place regularly and that any residents that did not wish to participate could sit within the lounge area, quiet area or stay in their room.

The staff spoken too seemed to have a clear knowledge of the resident's needs.

Items for consideration

- 1. Review current food offer and how it is cooked, to ensure residents are satisfied with the meals served.
- 2. Regular feedback collection from residents to highlight additional needs and wishes, including meaningful activities.

Feedback from Sidcup Care Centre

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

Healthwatch Bexley April 2016