

Healthwatch Waltham Forest Enter & View Report

# Highcroft Care Home

Care Home Series 2014

Tuesday 24<sup>th</sup> June 2014

Sue Toole and Susan Henry

July 2014

## Visit Details

Service Address	Highcroft Care Home, 13-15 Rectory Road, Walthamstow, E17 3BG
Service Provider	Mr Divan Suresh Chand
Service Manager	Marie Gravesend
Service description	Accommodation for persons who require nursing or personal care, dementia, services for everyone, caring for adults over 65 yrs.
Number of residents	23
Reason for Visit	Part of programme. This is one of a series of visits to older people living in care homes in Waltham Forest. This programme is to introduce our Enter & View reps and develop their role. We wanted to talk with older people about their experience of living in care homes. We looked at 4 areas - meals, activities, staff responses and complaints
Status of visit	Announced.
Date and time of visit	24 <sup>th</sup> June 2014 at 4.30pm - 6.30pm
Authorised Reps	Sue Toole and Susan Henry
Declarations of interest	None

## Acknowledgements

Healthwatch Waltham Forest would like to thank the service provider, service users and staff for their co-operation and hospitality in hosting this visit. We welcome all contributions to this Enter and View programme.

## About Enter & View

Enter & View is a statutory power conferred upon Healthwatch by the Health and Social Care Act 2012. It gives Authorised Representatives of Healthwatch Waltham Forest the right to enter and observe publically funded health and social care services in the borough. Enter & View visits are visits and not inspections. Enter & View visits are used to get a lay perspective on the service concerned and are an opportunity for service users to talk about their experiences with the service. This takes place in the communal areas of the home, as our visits preclude talking to people on their own in their private rooms. A report of each visit is produced which includes any recommendations for change or improvement arising from the visit. This is shared with the service prior to publication. All Healthwatch Waltham Forest Authorised Representatives undergo training and background checks before joining the Enter & View programme.

**Disclaimer:** This report relates only to the service viewed on the date of the visit, and is representative of the views of the service users, visitors and staff who contributed to the report on that date.

### Summary of the visit

We visited Highcroft Care Home, on Tuesday 24 June, from 4.30pm - 6.30pm. This home had older people living there, all of whom had varying degrees of dementia. Some people were watching the World Cup match and others were reading or sitting in the garden. We saw tea being served and spoke with 7 people living there and 3 members of staff. There were no relatives visiting during our visit. The home was clean and friendly and we were made to feel welcome. We looked at the following 4 areas:

- *Catering*
- *Activities*
- *Staff responsiveness*
- *Complaints*

Our recommendations are based solely upon what we observed at the care home during our visit.

### Description of facility and overview of findings

The home, a converted and extended set of two houses, can accommodate 23 people, and at the time of our visit 20 people were living there. The outside of the home was pleasantly decorated with tubs of flowers and plants, which were blooming and there were flowers in the home and back garden. We were told a gardener comes in to maintain the grounds. The home was clean and odour free with a calm, friendly and relaxed atmosphere. We were introduced to the residents sitting in the communal areas and spoke to people in the main lounge, the dining room, the conservatory and the garden. We observed staff being responsive and people told us they got on well with staff, felt welcome and considered it their home. It was a hot summer day and the communal rooms felt a bit too hot, so fans would make it cooler. We observed a meal being served and that people had a choice about what they ate and where they ate it. Homemade cakes were available daily and were popular. We thought catering arrangements could be better with serviettes, encouragement to wash their hands before meals and sometimes providing a spoon, as well as a knife and fork, to help with eating meals.

Staff told us that 10 of the residents remained in their own rooms for all or most of the day due to their healthcare needs. We were not able to talk to these residents although we noted one of them came down for their tea and then went back to their room.

We had sent posters announcing our visit for public display, so that residents and their visitors had advance notice. However we did not see any of the posters on display or a resident/visitor notice board.

## Observations

### Catering

At the start of our visit, one resident went to the kitchen to help themselves to a piece of cake. Another resident mentioned that the cook made freshly baked cakes daily and these were popular. Several people told us there was a choice of food; for example, they could have a cooked breakfast if they wanted. One person said they liked steak and kidney pudding and that the food was “pretty good” in the home. Someone else said that they did not like fish on Fridays but were able to have another choice. People told us that staff reminded them to have drinks during the day and there were frequent tea breaks. The main meal is at mid-day with a lighter tea in the afternoon and snacks at suppertime. We were told that roast dinner on Sundays was popular with most people.

During our visit, tea was served. This was jacket potatoes and baked beans. People could eat anywhere in the home - some ate from individual lap tables in the main lounge where they were watching TV, several people ate in the dining room, and some people ate their tea in the conservatory, again with the help of lap trays. People were offered a choice of where to eat and staff appeared to know their preferences. Staff seemed to have a good understanding of individual likes and dislikes and of who needed help to eat. We saw staff assisting one person to eat in a way that was respectful and verbally encouraging several other people to eat. Two people said that they did not want baked beans again. For one person, the staff member made face to face contact and confirmed what the person wanted. She took the plate away, removing the beans and adding another jacket potato, and again checked that this was what the individual wanted. The other person was given time to change their mind but chose not to eat the food.

We did not see anyone being encouraged or assisted to wash their hands before eating and there were no serviettes with the meal. This was a problem for one person who had dropped their spectacles into their beans and did not have anything to clean them with. Everyone was given a fork and knife and we wondered if a spoon might have been helpful for some people, particularly when eating beans.

Large tumblers of squash were given out with the food and we heard several comments encouraging people to drink. Staff were aware of the need to keep people hydrated, especially in warmer weather.

After tea, another staff member gave out medication. This was done slowly and carefully and we observed that they talked each person through the medication they needed to take e.g. this is a tablet that you need to chew, now have this drink to wash it down etc.

### Activities

In the main lounge, 6 people were watching the World Cup football match and chatting. They were able to choose to have their meal in the lounge or get up and have it in the dining room. Just off the main lounge there was an additional smaller space with a TV screen and DVDs that residents sometimes watched. There were books and music available, and we were told the home has a visiting library.

Most people living here have TV's in their own rooms so can choose to watch TV alone if they prefer, one person told us they like to watch the news in the evening in their room.

It was a warm summer's day and the temperature in the home was a little too hot, the atmosphere, particularly in the conservatory was stuffy. Staff said they had electric fans but none were in use at the time of our visit, though there was a ceiling fan in operation in the conservatory.

Two residents were in the conservatory, one was reading a book and the other a newspaper. One person told us that they enjoyed sitting here and looking out of the window into the back garden. The TV was on in this room throughout our visit, although no-one was watching it and we wondered why it hadn't been turned off.

We spoke to one resident in the garden, who said that they really liked to be outside in the garden when it was warm and preferred to be on their own. They had frequent visits from relatives and went out 3 or 4 times a week.

Staff explained that it was hard to get one activity which suited everyone's differing needs, so their approach was to have short bursts of activities in small groups or individually. Staff told us this worked well as many residents have short attention spans and some memory loss.

One person told us that there were regular "chair exercises" sometimes using a ball and sometimes people watched a film together, "with popcorn, as if at the pictures".

Staff keep a daily record of the activities and brought this file for us to look at.

This recorded a variety of activities- story telling, watching films, hand and leg massage, and the use of a "conversation box" with items that got people talking about their memories.

### **Staff responsiveness**

Staff appeared to know the residents well and were able to respond individually. One person did not speak but was understood through their gestures, and staff explained that they kept a stock of apples for this person who would eat several every day.

Most of the people living here have memory loss and dementia, and sometimes can get agitated. This happened during our visit, with one person becoming very agitated and shouting at another resident, who, we observed, looked a bit frightened. Staff managed this by moving one person to another part of the home and trying to understand what had caused the agitation.

We observed staff making sure the person they were talking to could see and hear them clearly - speaking a little slower or louder if needed, and bending or sitting down so they were at the same height. The tone of voice and words were friendly and respectful.

Several residents told us that they got along well with staff, and that they were polite and courteous to family visitors.

We talked with one resident about the buzzer in their room. They confirmed there was one but they had not needed to use it. When others used their room buzzers it made a loud noise throughout the home which this resident found a bit annoying but they said it did not happen often.

### Complaints and comments

We spoke with one resident about complaints. Although they had not needed to make a complaint, they felt confident that if there were any concerns, staff would listen to them and act accordingly. When asked what was the best thing about the home, they said “you get a good welcome here; it’s your home, your own place.” We would agree with this comment, the home felt friendly and welcoming and staff were clearly working hard to support individuals to feel at home there.

### Conclusion and Recommendations

Overall, staff we observed were responsive to the various needs of the residents we saw in the communal areas and had a good knowledge of individuals likes and dislikes. They were friendly and respectful in their interactions. People living there said they found it friendly and welcoming and considered it to be their home.

We saw several things that could be improved and our recommendations are:

1. When residents are reading or sitting quietly in the conservatory, they could be asked if they want the TV on. If it were switched off when not in use, it would make for a quieter reading space.
2. Serviettes should be available with meals and residents given the option to wash their hands before having a meal.
3. Spoons should be available if they help residents to eat more easily, for example to eat a sauce.
4. Ways to maintain communal areas at an appropriate temperature - such as cool on a hot day - are needed.

## Service provider response

Thank you for your visit on 24/06/2014 and your report & feedback on the visit.

It was a pleasure to introduce to staff and service users and hope your visit was enjoyable as service users appeared to enjoy meeting and chatting about life at Highcroft and interacting with yourself and Sue.

As discussed on your visit Highcroft is having its annual summer party on 27/07/2014 and would love you to come along if even for a short time. Party starts at approx. 1pm to 6pm

In response to your recommendations:

- 1. When residents are reading or sitting quietly in the conservatory, they could be asked if they want the TV on. If it were switched off when not in use, it would make for a quieter reading space.*

We have turned off the television in the conservatory during quiet time however this is not the request of the service users or their families. Service users prefer to have the television on and one family member insists on the television remaining on through the day as her relative likes it that way

Unfortunately we cannot please everyone and must respect service users choices There is the option of sitting in the quiet room should service users wish to do so.

- 2. Serviettes should be available with meals and residents given the option to wash their hands before having a meal.*

During mealtime's serviettes are available however the home mainly uses wet wipes as this is the preference of service users when eating moist food like baked beans which you observed on your visit serviettes tend to stick to the hand and come away in small bits the home has found wet wipes to be popular as this not only cleans the hands but also keeps them smelling fresh and on a hot day wiping face and hands with a moist wipe keeps service users cleaner and feeling fresher after a meal There were wet wipes displayed in the main area of the lounge and were used by staff on the day of your visit

- 3. Spoons should be available if they help residents to eat more easily, for example to eat a sauce.*

Spoons are always available however Highcroft has taken on board your recommendation and staff will offer a choice of cutlery at each meal.

- 4. Ways to maintain communal areas at an appropriate temperature - such as cool on a hot day - are needed.*

You did mention this on your visit and were informed that fans were available but were in the basement. These have now been put into the main areas of the home and the temperature controlled to suit the needs of individuals.

If you have any comments on this report or wish to share your views and experiences of this or any other care home in the borough please contact us.

**Healthwatch Waltham Forest**

Unit 15, Alpha Business Centre | 60 South Grove  
| London | E17 7NX  
Tel 020 3078 9990 |  
info@healthwatchwalthamforest.co.uk



[www.healthwatchwalthamforest.co.uk](http://www.healthwatchwalthamforest.co.uk)

Company No 8395175 Registered in England.  
Registered Charity Number 1154603