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## Enter and View Report

### Care Homes - Brookfield

Service Address: 1 High Street, Somersham, Huntingdon, PE28 3JA

Service Provider: Janes Care Homes

Date and Time: Tuesday 4<sup>th</sup> August 2015 at 10:30am

Authorised representatives: Janice Ballard, Judy Allen and Kate Hales

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## Acknowledgement

Healthwatch Cambridgeshire would like to thank the residents, relatives and staff at Brookfield Residential Care Home who spent time talking to us about their experiences of living at the home or having family staying at the home.

Thank you also to the Manager of the home for helping us to arrange the visit and providing relevant information that was requested by Healthwatch Cambridgeshire.

Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time. This report relates to findings observed on Tuesday 4<sup>th</sup> August 2015 at 10:30am.

The visit also takes into consideration the fact that some of the residents spoken to will have a long term illness or disability, including dementia, which will have an impact on the information that is provided.

We recognise that providers are often able to respond to us about any issues raised and we will include all responses in the final report.



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# Introduction and methodology

## What is Enter and View?

Part of Healthwatch Cambridgeshire's work programme is to carry out Enter and View visits to health and social care services, to see and hear how people experience care. The visits are carried out by our authorised representatives. We can make recommendations or suggest ideas where we see 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. 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.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Cambridgeshire's safeguarding policies.





## **Our Care Home project**

Healthwatch Cambridgeshire made the decision to undertake a programme of enter and view visits to care homes in Cambridgeshire in spring-summer 2015.

Our visits are intended to:

- Find out what daily life is like in a care home in Cambridgeshire.
- Gather the opinions and experiences of residents, relatives/friends and staff.
- Raise awareness of the role of Healthwatch.
- Build relationships to enable those voices not often heard, to have a say about the health and care services that they receive.

Enter and view visits will also highlight (if applicable) what the team view as ‘good ideas’ and this will be collated and shared with all the care homes that we have visited at a later date.

The care homes to be visited are selected based upon a number of factors which include geographical spread across the county. Where possible we will ensure the visit does not conflict with other visits such as planned Care Quality Commission Inspections or visits by the local authority.

Following each visit a report will be produced and this will form part of a summary report highlighting good ideas and issues around access to health and care services.

## **Purpose of the visit**

The purpose of the visit is to find out what daily life is like for residents at the care home. We observe day to day life in the care home and talk to residents, relatives, staff and other visitors, to collect their experiences and opinions.

- We look at how residents are supported to make choices about their daily life, for example making mealtime choices or what to wear.
- We watch how staff interact with residents and other people in the care home.
- We find out what activities are available for residents at the home and in the community.
- We ask people what they think about the range and quality of their food.



- We find out how easy it is for residents to access local health and care services, for example GP, Dentist, Optician and Chiropody.
- We collate examples of good ideas and report on any issues or concerns that are raised.
- We talk to people about their experiences of living in the home, and any ideas they have for change.
- We tell people about Healthwatch Cambridgeshire and what we do.

### **Announced visit**

This was an announced Enter and View visit. It was undertaken by a team of three authorised Enter and View representatives, including one Healthwatch staff member and two volunteers. It lasted approximately one and a half hours. We wrote to the home explaining the purpose of the visit and inviting them to take part in the Enter and View project.

Confirmation included advising the names of those who would be taking part in the visit. Posters with details of the visit and Healthwatch contact information together with leaflets for display prior to the visit were sent the week before.

The visit was informal and involved a combination of observations and talking to residents, relatives and staff; all findings were logged. We were given a tour of the home and invited to walk around without an escort.

A large proportion of the visit was also observational, involving the authorised representatives walking around the public areas and observing the surroundings to gain an understanding of how the home works and to get a feel for the general environment.

Notebooks and questionnaires were used to record the information gathered.

The Enter and View team spoke with the Manager, who provided detailed information about the home and answered any queries raised.

Information was also given out about Healthwatch Cambridgeshire to residents, and the home was given copies of the latest newsletter, Information and Signposting bookmark, leaflets and posters to display in the reception area. To keep in touch with Healthwatch, the Manager signed up to receive both our newsletters.



## Brookfield

Brookfield is a two storey older style house that has been converted into a care home; an extension at the rear provides additional accommodation and a large dining room.

It is located in the village of Somersham on the outskirts of St. Ives, and is within easy reach of the local shops and public transport links.

This is a privately run home registered to provide care for older people and people with dementia. It has 14 places and the larger rooms can accommodate two people who wish to share. Some of these places are funded by Adult Social Care Cambridgeshire County Council.

On the day of our visit 13 men and women were living at the home. A further three people were there for day care; this is flexible dependent on the needs of the individual.



Front door

The entrance is accessed just off the main road, with car parking on the street. The home has a drop off point at the side of the property, however, this is not signposted or easily noticeable. The main door is locked and key coded.

The home has two lounge areas of differing sizes with televisions and armchairs. Both of these were clean and tidy.



## Summary of findings

- The home was welcoming and friendly.
- The home appeared clean and well maintained.
- At the time of our visit, the home appeared to be operating to a good standard of care with regard to daily life and the care of residents.
- The residents appeared well looked after and told us they were able to make decisions about daily life choices.
- Residents appeared comfortable, clean and content.
- Staff were observed to be positive, respectful, kind and friendly with residents.





# The Findings

## Accommodation and environment

The entrance to the home is key coded and we were let in by a member of staff. As you enter the home there is a resident's noticeboard which has details of their meetings, including posters with information about activities and outings. There is a signing in book which we were asked to complete. Hand sanitiser gel is available for visitors to use.

A photograph montage of the residents taking part in activities is used to remind them of their accomplishments and is also used as a memory prompter.

There is a 'Wishing Tree' near the front entrance and this is for residents to write a label about what they would wish for, for example a walk in the park or toasted cheese sandwich. The residents can make a wish and the home will grant that wish.

The communal areas are all on the ground floor and we saw most of the residents seated in the two lounges. The décor was light and airy and the atmosphere was welcoming and cheerful.

A relative was playing the piano in the quiet lounge and music was on low in the main lounge, where some residents were chatting with each other and staff. Refreshments were being served in both lounges.

Both lounges have comfortable seating and small side tables were being used by the residents for drinks and personal items. Larger reclining chairs were in use in the quiet lounge and some residents were having a rest.

The dining room is spacious and light and has a large clock face that is easy to see and read. There are doors and a ramp leading out onto the patio area that has tables and chairs.

The Manager told us *'On warm days the residents like to sit outside and enjoy the sunshine'*.



Two extra wide steps lead down to the covered pond and garden area. It was planted with bushes, trees and large shrubs.

The Manager told us that *'The residents grow their own herbs and salad which we do together in the dining room so they take part in gardening as it is difficult getting them involved in outside gardening'*.



We found the home to be clean and tidy and there were no unpleasant odours, some of the windows and side doors were open and the communal areas were all bright and airy.



**The garden**

The Manager told us that *'Residents can bring their own furniture and personal items to make their room more like home'*. The rooms were a good size, one being large enough for twin or double beds.

## Activities

The home has an Activities Co-ordinator, to organise activities for the residents; care staff join in and help residents with the activities and trips. The Manager told us *'they have a daily activities programme and this is displayed on the resident's noticeboard'*.

The activities include memory games, quizzes, exercise and jigsaws.

As part of the Duke of Edinburgh award students from the local college visit the home and spend time with the residents chatting, doing activities and reading.

We saw that the activities, games and jigsaws were stored in a cupboard which we were told is accessible at all times as well as activities being around the home. The manager told us *'at every residents meeting we ask them for ideas about activities and menus'*.

## Residents told us

*'We do some exercises'*



*'Would like to be taken out more'*

*'Would like to do more activities'*

*'It's alright sometimes and we have a good time'*

## **Catering**

The Manager told us that *'the residents requested to change their meals around; they now have a large breakfast, light lunch and a late afternoon aperitif before dinner'*. *The residents prefer to have their main meal later in the day'*.

We did not see a menu, however, we were told that fresh produce is used and meals are homemade. The Manager told us that *'different food options are available for residents to choose from, and we cater for people with special diets and soft meals'*.

We were told the residents are encouraged to take an interest in their food, are often asked what they would like to eat and do have input into deciding the menus.

Families and visitors are welcomed and invited to join the residents at meal times.

## **Residents told us**

*'The food is good'*

*'On certain days we have certain things'*

## **Care and help**

The residents we chatted with had no complaints about the care they received and they told us that the staff were always friendly and caring.

The residents we saw all looked well presented and content in their surroundings.

People wanting to come into the home are invited to come along and have a look around and if able to spend the day and meet the other residents.



This time enables the Manager and care staff to do a discreet assessment prior to carrying out the full assessment of needs.

### **The Residents told us**

*'Very nice and they do care about me'*

*'It is my home from home'*

*'I get good care from the staff'*

*'Prefer to be here than being at home'*

### **Staff attitudes**

We saw staff chatting to residents, showing patience and understanding. Staff were respectful and polite, making sure residents were comfortable. The staff knew residents very well and made the time to stop and chat. We watched staff interacting with residents, laughing and joking.

The Manager told us that they have a complaints policy and information is given to residents and families. We were told that complaints are taken seriously, so the home can learn and change accordingly.

### **Carers and Relatives**

We were able to chat with some relatives and they told us that they could not find fault with the care at Brookfield.

We were told that relatives and friends were welcomed at all times and they were invited and encouraged to visit and join in the meetings and outings.





## **Some relatives told us**

*'This is just like their home and better than being at home'*

*'Could not fault the care Mum receives, we looked at 14 care homes before we got here'*

*'It is friendly and welcoming, just like going into a B&B'*

*'Room size is good and Mum was able to bring some of her personal possessions'*

*'It is always clean and tidy'*

## **Access to health and care services**

The Manager told us they have built up a good relationship with the local GP Surgeries in Somersham, the residents receive regular visits and more when needed.

The residents go to audiology for their hearing tests; opticians, dentist and chiropody are arranged when required. A care staff member can accompany them if there is no family available.



## Good Ideas

- The Wishing Tree, which is a creative way for residents to tell the staff what they would like to do.
- Residents choice for meal times a big breakfast, light lunch and evening dinner.
- Double bed option available for couples.

## Ideas to take forward

We encourage care homes to develop ways to involve residents, their families, carers and staff in making decisions to improve care in the home.

We encourage a positive approach to managing complaints and learning from people's feedback about care in the home.

1. We ask all of the care homes we visit to help us promote residents' opportunities to feedback on their local health and care services by displaying Healthwatch Cambridgeshire literature in their home.
2. We suggest improving the signage for the drop off area at the side of the home.





## **Response to the report from Brookfield**

I enjoyed showing the home off as we are incredibly proud of the work we do here and am always open to ideas to enhance the residents quality of life.



## Contact Us

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