

Care Home Provider:
Care Home Address:
Date and Time of Visit:
Authorised Representatives:

Epilepsy Society
 Chesham Lane, Chalfont St Peter, SL9 0RJ
 29.02.16 – 2.30 pm
 Alison Holloway, Joy Johns

Summary of findings



- Residents have access, regardless of disability, to many different activities on and off site
- High ratio of long term employed staff seems to result in good personalised care

The Visit

Micholls House provides residential care for 20 people who live with complex needs including epilepsy as well as learning and physical disabilities. We talked to 4 members of staff and 3 residents and observed another 12 residents and 8 staff in the two ground floor flats and one upstairs flat. Many residents have one-to-one care.

How people are treated



Staff generally seemed very confident and relaxed and many had worked at the home for several years. Most worked just in one flat with the 5 residents who lived there which meant that everyone knew each other well. Everyone was addressed by name and seemed to be treated as an individual. One resident was being helped write numbers in their room and another was joking with staff about who was “the boss”. However, we did not see much interaction with some residents. We were told that two had had seizures that morning and were tired or asleep. However, staff were trying to distract one resident in a way that reduced the chance of them having a seizure, whilst also encouraging another not to sit on a folding chair for their own safety. There were a lot of staff upstairs. We were told that was because we were visiting as the shift changed over.

We saw residents returning from an activity outside the flat being asked if they’d like a drink. There were also laminated notices, with pictures, in individuals’ rooms and communal areas about making complaints.

Personal Choice



We were told that residents get up and go to bed when they choose. Some might get up at 6.30am, others at 11am. Again the range of bedtimes was across a 5 hour time period. Residents and staff told us they had a choice of food; “if they don’t like it, they won’t eat it”. We were told of one resident who did not like the meal served and took a staff member to the kitchen. There they got out bread and humus and were able to explain that they wanted a humus sandwich which was then made. We saw pictorial menus in each flat and each had different menus. We saw two residents’ photos next to the menu as ‘chef’ for a specific day. The resident confirmed he enjoyed this. Staff told us that some residents can make their own toast, cup of tea or coffee. Many residents have access to an I-pad which they use to FaceTime relatives and play games on.

Dignity in Care Enter & View visit to Micholls House

Just like Being at Home



Each flat was decorated differently and decoration was dependant on who lived in each location. Downstairs there were murals/stencils of trees etc. on the walls as well as frames of photos of trips out to pubs or a picnic. Upstairs where many residents live with autism, pictures, made by residents, were on the walls but high up out of reach. The sofa in this flat was looking worn and there were bits on the carpet. However, every bedroom was personalised to each resident in terms of colour and photos, as well as in terms of need.

The flats were warm and in many bedrooms the windows were open as it was a sunny day. Several residents told us about the cooking they did. We saw photos of one making a chocolate cake and another told us about the Star Wars cake they'd help make the previous week. Some visit each other's' flats for a meal. One resident enjoyed listening to loud music in his room whilst others liked watching TV in their rooms or going out. Most residents seem to have family locally who visited at least once a week. A couple of residents were able to help with simple tasks around the home such as putting washing powder in a washing machine.

Privacy



We saw staff knock on doors before entering and ask residents permission for us to talk to them or visit their rooms. They also asked if they wanted their bedroom doors left open or closed as they left. Because of the high ratio of staff required in this home, there is some flexibility in terms of care and we were told that residents receive personal care from same sex carers.

Quality of Life



There was a list of activities up in each dining room and on some bedroom doors. That day a resident told us about the physio bike they had been on and how they enjoyed art and craft done at the home. They were also going bowling that evening, whilst another resident told us they'd been to the café. As we left, a game of musical bingo was just starting. On other days, some residents go swimming or horse riding whilst others enjoy spending time in the on-site sensory room. Most days, many residents go out for a walk in the extensive grounds. Carers take residents out to lunch or dinner, down to the town, to the supermarket or out to the park and there are day trips out in spring and summer with the minibus.

One resident, who had an injury, told us that the nurse had seen him every day.

Recommendations

We recommend that Micholls House:

- paint some of the murals / stencils, seen downstairs, in the corridors upstairs rather than just using blue tac to pin up pictures which are taken down by some residents. Also have photos of residents lower down the wall in a format that cannot easily be removed. We were told that the home was due a refurbishment in March.

- ensure bereavement counselling is available

Service Provider Response



We value all feedback we receive so will be looking at our practices and ways for improvement. Micholls House has a full redecoration plan which is due to start in the spring. The residents and their families will be fully involved in making individual choices around colours etc.

Acknowledgements

Healthwatch Bucks would like to thank the residents and staff at Micholls House for their contribution to the Enter and View visit as part of the Dignity in Care project.

Disclaimer

Please note that this report, on dignity in care, relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all residents and staff, only an account of what was seen and heard at the time.

Methodology

This was an unscheduled Enter and View visit in that the care home were given up to 2 weeks' notice of our intention to visit but not the time and date. Authorised representatives noted what they observed and were told.