

# Lavender House

<b>Service address:</b>	Lavender House, 17 Walsingham Rd, Hove BN3 4FE
<b>Service Provider:</b>	Contracted to Brighton and Hove City Council
<b>Date and Time:</b>	Tuesday 15 <sup>th</sup> March 2016, 09:30 - 13:00
<b>Authorised Representatives:</b>	Sue Seymour and Tim Sayers
<b>Healthwatch Address:</b>	Healthwatch Brighton and Hove Community Base, 113 Queens Road, Brighton, East Sussex BN1 3XG

## Acknowledgements

Healthwatch Brighton and Hove would like to thank the service provider, patients, visitors and staff for their contribution to the Enter and View programme.

## Who are Healthwatch?

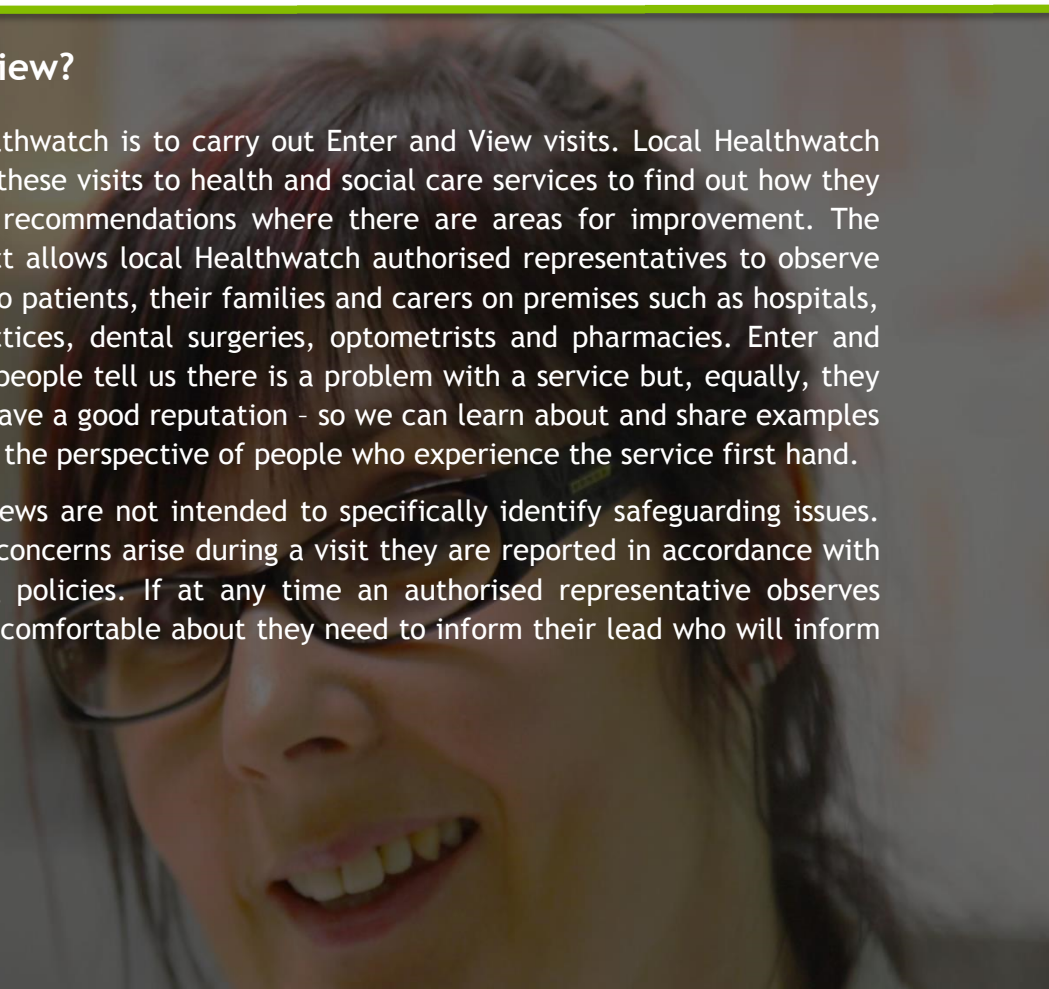
Healthwatch Brighton and Hove supports local children, young people, adults and their communities to influence the design, delivery and improvement of their local health and social care services, now and for the future. We enable people to make informed choices about their health and wellbeing by assisting them when they have concerns or complaints about these services.

Healthwatch Brighton and Hove is a part of the Healthwatch national network, established by the Government under the Health and Social Care Act 2012 to ensure local patients and users have a greater input to shaping and designing local services. There are 148 local Healthwatch organisations across England.

## What is Enter and View?

A part of the role of Healthwatch 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 patients, their families and carers on premises such as hospitals, potential 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.

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 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.





## Why is Healthwatch Visiting Care Homes?

Healthwatch Brighton and Hove undertook a programme of visits to adult social care services across the city in early 2016. In total we visited five services from across the city, with a range of different specialisations.

During our time in each service, authorised volunteer representatives spoke to patients, visitors and staff about their experiences of care and access to services, and recording what they saw in the service's communal areas.

Healthwatch wants to understand how people involved in the services feel about them, and make recommendations to ensure that the services are of a high quality. This set of visits was initiated through some concerns raised via our helpline about primary care in-reach in local potential services. We then consulted our partners at the Care Quality Commission, the Clinical Commissioning Group and Adult Social Care to create a list of services to visit in the first three months of the year, and to finalise the questions we would like to ask them.

## Methodology

Two Authorised Volunteer Representatives for Healthwatch Brighton and Hove visited Lavender House on Tuesday 15<sup>th</sup> March. The time and date of the visit were arranged in advance with the service. Both representatives were fully trained and supported by the Healthwatch office. They also completed a full Disclosure and Barring Service check prior to the visit.

Separate questionnaires were conducted for patients, relatives and friends of patients, and managers. The representatives also conducted an observation of the service in the communal areas. This allows us to triangulate the information we received about the service. We received six completed questionnaires in total, all of which were completed by patients. Our representatives also talked to members of staff. However, no friends or relatives were able to complete the questionnaire.

Healthwatch stresses that the Enter and View method is intended to be a snapshot of

patient opinion, and therefore may not capture the wider concerns of the service user population. Because of the specific requirements of some of the client groups we work with, we aim to spend time gaining quality information in an ethical way, rather than seeking a larger volume of responses.

## About the service

Lavender House is a residential home that provides care and support for up to 18 people living with mental health needs. The home mainly accommodates individuals who are under 65 years old.<sup>1</sup> The service is located in residential Hove, and is set over three floors, with three communal areas, a lounge, a kitchenette and a dining room that overlooks the garden. The back garden includes facilities for barbeques and table tennis, and there is parking available at the front of the building.<sup>2</sup>

# Results of the Visit

## GP services

Lavender house is a recognised service on a local GP's clinical register. Staff told our representatives that some residents choose to retain their previous GP when entering the service, but most chose to use the local GP. The majority of residents told us they did have their own doctor (5 out of 6). Some residents reported that they had not seen their doctor in years, and others that they saw their doctor fairly frequently. The most recent doctor's visit had been a few weeks previous to our representative's visit. The residents we spoke to were unsure as to whether they had received an NHS check-up or not, and the mechanisms through which regular NHS check-ups took place were unclear.

## Dental services

Dentists from a nearby practice attend Lavender House for check-ups, however management acknowledge that most residents choose not to attend check-ups. However, of the six residents our representatives spoke to, all said they had attended a

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<sup>1</sup> [Lavender House CQC report](#), 07.09.15, extracted 25.04.16

<sup>2</sup> [Lavender House NHS Choices Entry](#), extracted 25.04.16

dental check-up whilst at Lavender House. Staff told us they encourage tooth cleaning regularly. Dentures are cleaned by individual residents, but some residents will decline to do this. Residents confirmed this, and one resident said that they are sometimes reminded by staff about tooth brushing. Staff felt that loosing or mixing up of dentures was not a problem at the service, and no residents we spoke to on the day had experienced this.

## Pharmacy

The service is not currently registered for the electronic prescription service. The Electronic Prescription Service (EPS) is a service that allows a GP to send a prescription directly to a chosen pharmacy. Instead medicines are delivered by a local pharmacy on a monthly basis. Issues with medicine management were identified in a previous CQC visit (August 2014), which were resolved by their most recent visit in September 2015. So whilst two of four residents who answered felt that their medications had been mixed up or lost, this could be a reflection of before positive changes to the processes were made.

## Eye care and hearing care

Hearing checks would be referred to GPs as appropriate by staff. Staff informed our representatives that no residents required hearing aids on the day of the visit, so maintenance of equipment was not currently a concern for staff. Staff informed our representatives that if a resident was having problems seeing they would get an appointment through their GP, and if they are already registered with an optician, they would receive letters about check-up appointments.

No adaptations for deaf or hard of hearing residents in place on the day of the visit, because staff told our representatives that there is not currently a need for them. One resident is blind due to cataracts, but has declined surgery. The resident was given a pendant to wear, but this was lost, and not replaced. Those residents that wore glasses told us that they clean and maintain the glasses themselves, and no-one reported glasses being lost or mixed up in the past.

## Supplies and adaptations

On the day of the visit our representatives did not observe any adaptations for those with visual or hearing impairments. Staff informed our representatives that no-one at the home had mobility issues, so there were no adaptations currently. No-one at the service had need of personal care, and staff assisted residents with things like toenail cutting.

## Other important appointments and check-ups

Two residents have a diagnosis of diabetes. They manage their own insulin and blood tests, with support of a district nurse. All other residents have regular blood tests and checks. Cancer screening is requested through the national programme, and visits to the GP for screening can be supported by staff.

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## Additional findings

Staff informed our representatives that noticeboards and information has been torn down by residents in the past, and as a result there is no written information or flyers available about the service. Residents accessed water through use of their own kitchens, and animals were encouraged at the service.

## Summing up and looking forward

The most recent CQC report found the service 'good' against all five of its criterion.<sup>3</sup> In part due to the younger age range the service caters for, minimal numbers of residents currently have hearing, visual or mobility impairments. Staff identified some reluctance on the part of residents to engage with primary care check-ups and interventions. Whilst personal choice should be respected, a lack of engagement could lead to larger physical problems further down the line.

# Our Recommendations & Responses

1. Consider whether it would be appropriate to start facilitating yearly hearing tests and opticians' appointments at Lavender House to reduce barriers to access, and support residents to look after their physical health

### Response

*We will begin discussing this with each resident when we do their health review (every three months). We will encourage them to access these services and note their response if they decline. We will support them to make and attend the appointments if they wish to.*

2. Consider ways to engage with residents about the importance of oral hygiene and check-ups.

### Response

*We will use the same strategy outlined above.*

3. Consider whether switching to the electronic prescription service could save time for staff members when dealing with medications.

### Response

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<sup>3</sup> [Lavender House CQC report](#), 07.09.15, extracted 25.04.16

*We will discuss this with our pharmacy.*

4. Consider alternative ways to provide residents information about maintaining their health, as noticeboards appear to be unfeasible at the service.

*We will start doing this when we conduct the health review every three months.*

## Next Steps

Once the provider has responded to each of the recommendations, we will include these responses in the final report, which is published on our website<sup>4</sup> for the general public to see. The report will also be shared with key organisations in the city including the Care Quality Commission, Brighton and Hove Clinical Commissioning Group and others. After the report's release, Healthwatch Brighton and Hove will conduct some planned follow up activity to ascertain whether changes have been made following the visit.

Once we have visited all six practices, we will also compile a larger strategic report which will pull together key themes across this snapshot of adult social care provision in adult social care settings in the city. This report will also be made available to all the services we have visited, as well as partner agencies. An easy read version will be made available to the public.

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<sup>4</sup> [Healthwatch Brighton and Hove](#), 'What We've Done'

