

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

Methodist Homes
Ardenham Lane, Bicester Rd, Aylesbury, HP19 8AB
20.09.16 – 10.30am
Alison Holloway, Liz Baker

Summary of findings



- Some residents are very independent and involved in the home but others seemed disengaged
- Good ratio of staff to residents and we found them very welcoming
- A wide range of activities were occurring but no outings, organised by the home, especially for those needing wheelchair assistance

The Visit

Hillside provides nursing care for 68 people of which 14 are classed as younger adults. The former live along 5 corridors whilst the younger adults live along the 6^{th} . We talked to 3 members of staff, 2 visitors and 6 residents and observed another 15 residents and 6 staff.

How people are treated



The vast majority of staff seemed very friendly and the activity coordinator in particular interacted well with the residents on both floors. There were a lot of staff around and they were very welcoming and seemed to know what they were doing. One visitor told us "I couldn't ask for anything more". Visitors told us that "a lot of staff left a few months ago" and that there were now several agency staff in place. One member of staff (possibly a trainee) didn't explain to the resident what they were doing before they went into their ensuite to fetch something. Later, the same person said, when they brought a cold drink, "now, try not to spill this one". Another resident, in a different location, said she didn't want a drink but one was left with her anyway. We also saw a catering assistant not interact at all with residents when clearing a large table at the end of lunch.

We were told that 10 residents attend the resident's meeting and there are regular relatives' meetings too. One relative said that if they had any issues they were comfortable taking these directly to the manager. However, one resident was not aware of any of these meetings.

Personal Choice



A visitor told us that bedroom doors are kept open which they were very happy about but that residents can choose to close their doors. Residents told us they were woken for breakfast and helped to get up after this. However, one resident did say they could ask to be dressed later if they felt tired. Another resident told us they are put to bed after lunch, most days, although they didn't always want to be. They felt that staff "rigidly do what they do". They were also upset that although they had asked to be changed into a short sleeve top because the lounge was too warm for them, staff had not carried out this request. A resident also said they would like to be showered more than



twice a week. However, a visitor told us that their relative appreciated being got up in the morning but put back to bed in the afternoon because of pressure sores and thus feeling uncomfortable after a period of time in a chair.

Visitors we spoke to told us that the food looked appetizing, but there was a lot of food left over on the plates we saw at the end of lunch. Those residents on a puree diet did not seem very happy with their meals; "boring as hell" was one comment whilst a relative of another said that they were not happy and had complained to the home.

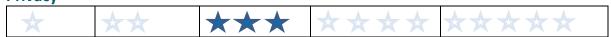
Just like Being at Home



We were told that residents are encouraged to be as independent as possible. Some go to the newsagents whilst another goes into town on their own in their wheelchair. However, some residents seemed to imply that they could only go out if they paid for a taxi which "isn't cheap". Some individuals therefore went shopping or to the pub whilst others didn't. We were also told that some people help water the garden, lay the table and direct people at the door although we did not see this. We did see a resident wheel themselves to their room carrying a coffee cup on a tray balanced on their lap. We also saw two other residents smoking outside and a carer help another resident to go outside when they said they wanted a cigarette.

The home was generally tidy and clean and nicely decorated with photos of residents enjoying themselves. There was a smell of urine outside the lift on the ground floor when we arrived. A visitor told us they can turn up at any time and we met one who had brought their dog in. We saw residents move around between floors by themselves in wheelchairs.

Privacy



We saw a staff member knock on a bedroom door before entering but were told by a resident that this doesn't always happen. We also saw another member of staff forget to knock (possibly a trainee). Two residents said they didn't feel they had any privacy. "They like to accompany you; they don't really trust you."

Quality of Life



Whilst many residents took the opportunity to go out of the home paying for taxis to transport them, others only went out when visitors and friends came to take them. Not having a home minibus and having to hire taxis was seen as a problem. Some residents did participate in a range of organised activities and we witnessed the coordinator visit people on each floor to ask them if they'd like to come and play cards. The coordinator also visits bedrooms and does some arm exercises if people are bedbound. That morning, several residents in one lounge had been discussing the contents of the day's newspaper. Another said they liked playing bingo whilst another said they didn't like any of the activities but couldn't think of anything they would like to do instead. A local scout troop do their gardening badge in the home. A questionnaire is provided to residents twice a year to ask them about the activities run and for any suggestions.



There is a visiting podiatrist, GP and optician and a minister holds a church service in-house every Friday and a bible study group every Wednesday. They also spend time visiting residents in their rooms. We saw two computers in one lounge and a resident playing a card game on one of them. However, another resident said that they only had a couple of programs installed and no internet access. They were also unaware that there was wifi across the home including in individual bedrooms which the deputy manager confirmed later. The latter also told us that some residents were very adept at internet shopping from their personal I-pads.

Recommendations

We recommend that Hillside:

- reinforces training about privacy and involving residents in any decisions made about them
- purchases a minibus and trains volunteer drivers to enable trips outside the home to occur on a more frequent basis
- investigates hiring Chiltern Dial-a-Ride minibus and driver at weekends for trips
 http://chiltern-dial-a-ride.net/operations/ and Community Impact Bucks regarding any community transport schemes in Aylesbury
 http://www.communityimpactbucks.org.uk/pages/community-transport.html
- ensures the home's PC's can access the internet and encourage wider usage of I-pads and other computer tablets
- ensures everyone is aware of wifi access across the home
- looks to all avenues to advertise volunteer opportunities e.g. for befrienders http://www.communityimpactbucks.org.uk/pages/advertising-your-opportunities.html

Service Provider Response

PROVIDERS RESPONSE
On the cessation of dial a ride the home have struggled to find appropriate transport for day trips for groups. Single trips have been in place for individuals, usually organised by family members. A lot of work has gone in to finding appropriate transport for our residents. Chiltern dial a ride stated that they do not cover Aylesbury; community impact also stated they could not support us as these were looked at when Dial a ride closed. No other services available in the area. This is discussed as a topic at the residents meeting on a monthly basis.
These meetings have been held on the last Friday of every month since prior to the current managers employment. They are advertised in advance. Members of the team go and speak to residents prior to the meetings to see if they would like to raise anything and on occasion we have had family members represent residents who are unable to attend. Meeting minutes are then shared with residents who are unable to attend. We also have a resident committee whereby residents act as advocates for other residents and raise issues with the home manager or take decisions back to the resident community to make decisions on. Minutes are also drawn up and shared with the committee panel following these meetings.
A robust recruitment process has been in place for several months which has resulted
in the employment of a number of new employee's. Although there are still some agency in place we use the same individuals each week to maintain consistency. As



	part of the recruitment process residents are also involved in the probation review of new starters to ensure that we have the best people for the role.
Communication with residents not always respectful. A staff member giving a drink and someone clearing a table.	This was raised at a staff meeting in October whereby staff were reminded about the importance of appropriate communication and demonstration of dignity and respect for residents as these are part of the MHA values. All staff are being given copies of meeting minutes which they have to sign for. On going training in place for staff, observations are also in place to ensure that communication remains at a high standard. We also invite residents to complete feedback probation reviews of new staff.
A resident wasn't happy going back to bed after lunch	Residents are given the option at all times around how their care is managed. In some cases there are clinical needs which mean that residents need that specific level of care. We do not force residents to go back to bed, we appreciate that not everyone enjoys care being provided but often understand the need for it.
Resident said they would like to be showered more than twice per week	Residents are asked daily if they would like a full body wash, shower or bath and staff comply with the preference of the resident. These preferences are then documented in the residents care file to keep a record of how often they are having a full wash. There is also a daily personal hygiene record to support this process.
Not happy with puree food, family made a complaint	There have been no complaints raised to the home about puree food. One resident stated via his daughter that he did not like puree; this diet is in place because of a high risk of choking. This was recommended by a dietician and the staff need to comply with this instruction. The head chef is currently reviewing other options on puree presentation and taste/texture to improve the meal experience.
Just like being at home	We are unclear why this area only scored 3 stars given the evidence provided for independent living. Also, there are selections of raised flower beds to the rear of the home that are tended to by residents these are not referred to in the report. We would ask that you reconsider this.
PRIVACY	
	All residents that are regularly monitored may be subject to a deprivation of liberty. The home would not be in a position to share this information. Paper work is in place to support this. We understand that residents may not appreciate it; however we must adhere to the mental capacity act and ensure the safety and well being of everyone in our care. Where residents have full capacity they can opt out of this option and it would be recorded in their care notes. This was also raised at a recent staff meeting. Residents have requested on one full floor to leave their bedroom doors open so that they can see staff and be seen by staff!
Access to the internet Ipad/Tablets/WIFI	There are a number of computers in the home that residents can access, including the computer in the lounge on the ground floor. Our activities coordinator has often assisted residents with accessing information on line as has the home administrator. There is WIFI around the home which is accessed by a range of people and residents are made aware of this on admission to the home. Currently MHA do not provide tablets/IPad for residents, however staff have assisted many residents with setting up their own IT items following admission/purchase, including mobile phones.

Acknowledgements

Healthwatch Bucks would like to thank the residents, visitors and staff at Hillside 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.