

Dignity in Care Enter & View visit to Kent House

Care Home Provider:	Brain Injury Rehabilitation Trust
Care Home Address:	1 Haslerig Close, Aylesbury, HP21 9PH
Date and Time of Visit:	17.11.16 – 3.45pm
Authorised Representatives:	Alison Holloway, Sheila Cotton

Summary of findings



- A relaxed atmosphere with a good ratio of staff present
- There was no weekly schedule of activities in the home

The Visit

Kent House provides residential care for 22 people living with an acquired brain injury. There were two rooms unoccupied at the time of our visit. We talked to 3 members of staff and 5 residents and observed another 8 residents and 5 staff .

How people are treated



Staff used individuals’ first names and everyone seemed to know each other. The atmosphere was very relaxed. We were told that some of the residents and staff have been at Kent House for 15 years. One resident said “the staff are fabulous”. At dinner, we heard staff ask whether one resident would like salt and pepper and others whether they would like assistance to cut up food. Help was also given in a timely way to an individual who needed assistance to eat and a clean bib quickly provided when necessary. We also heard several staff try to get one resident to sit down to eat and saw them being taken into a different area when they became agitated. Another resident was encouraged to tell us about when they were a nurse which sparked a short conversation. There was a lot of friendly banter and medication was given out, at dinner, in a controlled but light hearted manner. Everyone was very welcoming and there were a lot of staff visible. One person told us they attended the regular residents’ meetings.

Personal Choice



A resident told us they can get up when they like and they can have breakfast in bed too. The day’s menu was written in large letters on a chalk board in the dining / lounge area although there was no weekly menu up or any picture menus. The individuals we talked to did not know what was for their evening meal. We heard residents being asked whether they would like orange or blackcurrant squash and saw three different meals being served. There was only one option, chicken nuggets and chips, though shown on the written menu on the wall. The other meals served were quiche and potato salad and mushroom soup with possibly mash potato. Because they were all white or brown they looked bland although residents ate them very readily. One resident did say they didn’t like getting stew all the time. The deputy manager told us that the chef confirms everyone’s meal choices every day and that the main meal of the day is served at lunch time. Fruit and yoghurt are available every evening but at least one member of staff seemed unaware that apple crumble and custard was also available on the day we visited.

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Just like Being at Home



The home was well presented with plants and ornaments in communal areas. The bedrooms and flats, we saw, were large, had individual colour schemes and personal belongings and photos. The wheelchair accessible garden was planted with herbs and shrubs. One resident told us they were having visitors the following day although felt they weren't allowed out of the home enough. The deputy manager did say that some residents struggle to accept they have a brain injury and have a different way of living. We were told many have free bus passes and three have cars driven by one-to-one carers. Another resident was celebrating their birthday and we saw cards on a table in the quiet lounge. Chitty Chitty Bang Bang was being shown on the TV in here when we arrived and music was playing on the TV in the lounge /dining area. The TVs were turned off during the meal which helped with conversations as it was difficult to talk to some people initially because of the volume of the music.

One resident was helping lay the tables for dinner and individual placemats were put out. These not only showed staff what individuals liked to eat and not eat but how much assistance they might like as well as any possible risks. If residents refused assistance at dinner we saw this was accepted.

Privacy



The deputy manager always knocked on doors before entering any bedroom. We were also told by a resident that this was the case with all staff and the latter respected whether they wanted their bedroom door open or closed. They could not give us an example of where their privacy was not respected.

Quality of Life



The weekly activities in the community were typed on a poster on the noticeboard. These are mainly at the Healthy Living Centre which residents can get to using their bus passes. There was no weekly schedule for activities inside the home and we were told there was no activity coordinator in post. The staff had written on a whiteboard the day's activities but on the day we visited these were principally coffee or hot chocolate get-togethers. We did see one person being helped to construct simple word jigsaws by their one-to-one and two people were watching the film. The deputy manager also told us that Singing for the Brain sessions were sometimes attended by residents.

Recommendations

We recommend that Kent House:

- ensures a daily picture menu is always available near to where residents eat to assist those who have difficulty reading
- makes sure activity schedules for inside the home and in the community are again available in picture format to enable residents to access this information themselves
- ensures there is a range of activities on offer to residents inside the home

- serves some vegetables or salad with evening meals to add colour and obvious health benefits

Service Provider Response



On the whole I feel there were lots of positive observations, however I was disappointed that my catering staff had failed to highlight choice of all meals available to service users as they know they must, and indeed, usually do. We have spent a great deal of time devising some splendid coloured menus, but acknowledge that this still requires further work. As such we have a new chef starting work here on 28th December, along with 2 new catering assistants, so I see this as an ideal opportunity to get things right and develop training and support for our catering staff further.

We pride ourselves on our family atmosphere, which we were pleased you identified, as CQC had done likewise, as we have worked incredibly hard to forge strong relationships with families and professionals. We have also built strong community links, which serve of huge benefit to our service users. Service users are encouraged to access the community regularly, with the support of staff where required and every effort is made to ensure that service users wishes are respected at all times. Of note is that some service users lack mental capacity and are thus subject to a DoLS, though this is not viewed as a barrier to them accessing the community, which is actively encouraged at all times.

Staff have, in the absence of an Activities Co-ordinator due to difficulties filling the vacancy, been trying intermittently to offer a range of different activities both in house and outside Kent House, and it is apparent that little was seen to be going on when you visited. Unfortunately, whilst we have made a conscious effort to ensure that a variety of activities are happening on a day to day basis, on occasions due to e.g staff sickness, this has not always been possible to maintain, due to the need to allocate the staff member alternative duties. We have however since filled this post, with the new staff member starting their role at Kent House on 12th December 2016.

Many thanks for the feedback you have given us, which we really appreciate and for the relaxed fashion in which you conducted your visit, thereby putting both service users and staff at ease.

Acknowledgements

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

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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.
