

Care Home Provider:	The Brendoncare Foundation
Care Home Address:	St Johns Drive, Stone, Nr Aylesbury, HP17 8PP
Date and Time of Visit:	02.06.17 – 10.30am
Authorised Representatives:	Alison Holloway, Jean Button

Summary of findings



- A calm, relaxed environment where staff were quick to anticipate needs
- Visitors told us their relatives received excellent care

The Visit

Chiltern View provides nursing care for up to 33 people. All of the residents live with dementia and many with high dependency dementia. We were told by the manager and visitors that many residents have been turned away by other care homes because of their complex needs. We talked to 6 members of staff, including a student nurse on placement, and 3 visitors, and observed another 15 residents, 5 visitors and 7 staff.

How people are treated



There are a lot of very visible staff in the home. Many have been there a long time and we were told “the faces are the same”. They seemed to know the residents and their relatives well and were friendly and relaxed with each other. Staff would frequently approach certain residents who were walking down a corridor to ask if they wanted assistance to get to the toilet or somewhere else. Residents were very happy to then be helped. It was a very calm environment. We were told (and observed) that some residents always have one to one care. We saw a resident helped to move environments regularly to stimulate them. A visitor said “it’s absolutely wonderful here; the care is fantastic.” One resident had stopped changing into nightclothes when they moved into hospital after a fall. However, staff at Chiltern View had slowly persuaded them to change clothes at night time once they moved there. “Staff always talk to my mum not just to me.” We saw a lot of gentle touch and hugs and holding hands to guide a resident somewhere. “We couldn’t have asked for (x) to be in a better place.” Quarterly relatives’ meetings were advertised on the noticeboard and staff told us they enjoyed working in the home.

Personal Choice



A visitor told us residents can get up and go to bed when they want to and often can be up during the night. We saw a choice of menus for every meal. Some meals were themed; for example, on the day of our visit, it was national fish and chip day. Staff helped many residents to the dining room and those who needed it to eat. However, many residents could feed themselves and were encouraged to do so. Inside the dining room, the menus were in pictorial format and we were told residents are offered each meal as they sit down at the table to help them choose. Although most drinks in the

lounge were provided in Sippy cups, we did see orange juice in glasses being taken on trays to residents eating lunch in their rooms.

Just like Being at Home



We found the home, which is divided into two wings each with a large lounge, clean and tidy. The large garden which wraps around the back and sides of the home is secure, well stocked with plants and has at least two separate patio areas. There is a third lounge area near the dining room with a piano and other areas set out like a pub and hairdressing salon. All communal rooms have pictures on the doors to help residents and the corridors are decorated with pictures from bygone eras. The rooms we saw were personalised with individual's belongings as well as residents' photos on their doors.

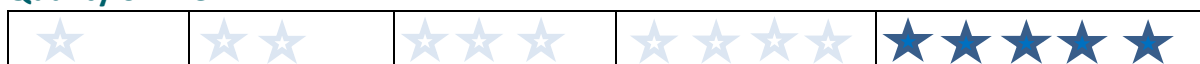
We saw a visitor help themselves to tea from the kitchenette for their mother and another walk around the garden with their husband. One visitor said that their relative had enjoyed the afternoon cream buns when they had been well enough. Another visitor said their mother enjoyed the daily newspaper which was delivered and we were told that there is a church service once a month. Lots of visitors were coming and going and chatting to staff around hospital appointments and lunch.

Privacy



A visitor told us that the staff always knock on doors before entering and close doors when personal care was being given. Some bedroom doors were open and others closed.

Quality of Life



When we arrived, we saw that residents were nicely dressed and many were already up and in the lounges. One resident, with one to one support, we saw asked if they would like to go to different locations and thus we met them frequently with their carer. Other residents wandered around as they pleased with doors to the garden wide open. The TV was on in one of the three lounges when we arrived.

The activity noticeboard was in pictures, as well as writing, and showed a range of group activities such as ball games, baking and arts and crafts as well as one to one time. The coordinator said the latter was often more beneficial for many due to their high dependency dementia. They consulted with relatives about what the resident liked to do to ensure any activities were person centred. Any group activities were done in small groups of four to ensure everyone could be involved. Some residents would indicate that they would just like to observe and be with everyone else rather than participate. A volunteer helped the activities coordinator on Tuesdays. Also advertised were 'Tickled Pink'. When this singing/dance group visit, a visitor said "a couple of the ladies get up and dance" and through holding hands with residents in chairs, others joined in in their own way. The previous day there had been a BBQ for residents and visitors. We were also told there is a visiting podiatrist, hairdresser and optician.

Recommendations

We recommend that Chiltern View:

- Acquires some fiddle muffs and possibly dolls for some of the residents to provide simple individual occupation in addition to the stress ball we saw given to one resident.

Service Provider Response



The report looks very good and I don't feel it requires any changes.

Acknowledgements

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