

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

Michael Batt Charitable Trust
Tower Road, Coleshill, Amersham, HP7 0LA
27.06.17 – 11 am
Alison Holloway, Graham Faulkner

Summary of findings



- Staff seemed to know residents well and were quick to respond
- There was a range of activities and space to spend time on your own or with others

The Visit

Rushmead provides residential care for 26 people. The home had 3 vacancies on the day of our visit. We talked to 5 members of staff, 1 visitor and 6 residents and observed another 8 residents and 5 staff .

How people are treated



Staff were very relaxed and seemed comfortable with each other and the residents. They were very visible although we were told that there are sometimes not enough on duty at weekends. Staff told us about their training and one said “I really enjoy my job”. The care staff knew residents’ names and the visitor said “they are lovely” and would readily hug residents. We saw one staff member take a resident by the hand into a different room, and another stop what they were doing to take someone to the lift when a resident looked unsure. We also saw an activity coordinator persuade a resident to sit down on the edge of a group. They then talked one-to-one for some considerable time and we could hear the resident feel more relaxed. Once the singing activity started, she soon moved into the main body of the group and joined in. This resident had not wanted to become involved, at the start, when asked by the other activity coordinator.

A visitor became distressed as a relative slipped slowly, over time, down in a wheelchair and was concerned about the lap belt affecting their breathing. The activity coordinator went to get help when the visitor said it needed removing. The manager came to say that the visitor must not remove the lap belt. A hoist was brought to move the resident back into an upright position but little was done to reassure the relative who was visibly upset. We were told there are regular staff meetings and residents meetings and annual resident reviews with relatives.

Personal Choice



A staff member told us residents can get up and go to bed when they want. Some prefer to go to bed early whereas others like to watch the news on the TV in the evening. We saw a range of crockery and cutlery in use to help various residents feed themselves. We also saw residents drink out of different receptacles and they were offered a variety of cold drinks. For lunch, they could

choose from shepherd's pie or turkey escalope and tiramisu or a banana. Residents can move from one floor to another freely and often take afternoon tea on whatever floor they are on at the time. There are many communal rooms on the ground floor should a resident want to spend some time out of their bedrooms but not necessarily in other people's company.

Just like Being at Home



Rushmead has been well adapted from a country house into a homely residence which is bright, clean and well decorated. There is a lounge and dining area on each floor and easy access to the garden and patio from the ground floor. You can access a roof terrace from the first floor on which we saw pots filled with petunias which we were told the residents had helped plant. One resident told us that they were taken outside for walks in summer although no one was outside on the day of our visit. Whilst the toilets and bathrooms were well signed with pictures on the doors, all the grab rails were white like the tiles.

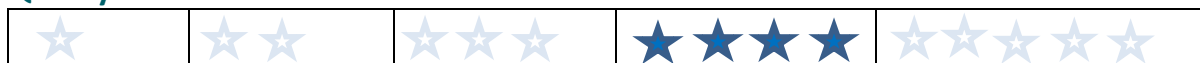
Tables were set for lunch by staff and we saw that one member of staff knew a resident's drink preferences. On asking what they'd like, the resident said tea. "Wouldn't you prefer a cold drink like orange juice, lemon, coke...?" When the resident struggled to remember what they normally drank the staff member said "don't you usually have orange juice" and the resident quite happily agreed. We also heard staff talk about who they were going to help feed but didn't hear any social conversation between residents or between staff and residents at the beginning of lunch. Many residents were, however, sat at the tables by 12.10pm and no food was served before 12.30pm. By 1.30pm some residents were still eating tiramisu.

Privacy



Most bedroom doors were open and some residents still in bed at 11.45am. However, we were told that care plans recorded which residents preferred their doors to be left open. One resident has a notice on their door stating that they should not be distributed before 8am. We also saw a resident come out of the toilet and shuffle quite a distance down a corridor with their trousers down before staff appeared to remind them to pull them up. For a care home with lots of communal space, it seemed unusual, to seat residents, under a dryer, in the corridor to dry their hair whilst another resident was inside the hair salon.

Quality of Life



The singing we saw was led by two activity coordinators, one who wandered around the group clapping and gaining eye contact from some of the residents. By the end of this session, most were waving their arms, singing, clapping or tapping the table. It also looked like they had been painting flowers earlier in the morning. Activities were scheduled for every morning and afternoon and these also included gardening, armchair movement to music and cookery. We were told though that a group playing classical music would be appreciated by one resident. We were not told about any trips out nor did we see photos up of any outings.

The hairdresser visits on a Tuesday and was being kept busy. In the other lounges, residents were mainly snoozing and either music was playing or the TV was on.

Recommendations

We recommend that Rushymeade:

- provides pictorial menus as about 30% of residents live with dementia and these may be more easy to 'read' than the whiteboard menus on each table.
- encourages those, who are more able, to lay tables and fold napkins and become more involved in the everyday activities of the home.
- replaces grab rails in bathrooms / toilets with ones in a contrasting colour to the white tiles to enable residents living with dementia to easily differentiate between them.

Service Provider Response

- 1) There is always a sufficient number of staff on duty at the weekends to ensure that our residents needs are met.
- 2) All of our visitors are given feedback into any concerns that they may have, however some regular visitors that we have to the home need to be given feedback in private, when reassurance is required my staff and management team are fully aware that certain situations from experience with certain family members need to be addressed in a different way.
- 3) The painting of the toilet grab rails is something that is already in process as per our refurbishment action plan.
- 4) Residents are often sat at the dining room tables 15-20mins before service as some of them enjoy to have a conversation and it is a nice social time for them and for the staff, and we also do not rush our residents at meal times, they can take as long as they wish to eat their meals.
- 5) You mention about not being told about any trips out nor did you see photos. Activities are currently going through a change as I mentioned, also there are photos available to see they just had not been put up on the board at the time of your visit.
- 6) Pictorial menus, we have a pink folder on our ground floor which has pictures of all of our daily food menus for our residents with dementia I was not informed that you had mentioned that otherwise we could have shown you. As you also saw the menu is written on the white boards and a menu is also put on the tables themselves.
- 7) Our residents do lay the tables when they wish too, and we always encourage home style activities which are available everyday from laying tables, to folding up the laundry and these are separate from the scheduled daily activities.



Acknowledgements

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

Dignity in Care Enter & View visit to Rushmead



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.
