

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

Gold Hill Housing Association Ltd
Austenwood Lane, Gerrards Cross, SL9 9DF
27.04.18 – 10.50 am
Jenny Cassidy, Susan de Kersaint-Seal

Summary of findings



- A very friendly, welcoming care home where staff deal kindly and patiently with residents.
- The building is old and not purpose built and as a result the layout may be confusing to people living with dementia. Works are being carried out to address some of the problems including making the garden more interesting and user friendly.

The Visit

Rock House provides care for up to 36 resident, most of whom live with dementia. Rock House also offers respite care. We spoke to six members of staff, two visitors and four residents. We observed a further six staff and 25 residents.

How people are treated



From what we saw on the day staff treated the residents with kindness and empathy. Residents were addressed gently and patience was shown during lunch when asking residents what they would like to eat. One visitor said to us that her relative often says "If you can't be in your own home you couldn't be anywhere better". They also said that they never worry about them at Rock House. We did observe another resident become agitated saying that they did not want to eat their lunch until their visitor arrived. They were very gently told that they weren't around at the moment but that they would want them to eat their lunch without them. Visitors told us that there are regular family days and meetings where concerns can be raised and suggestions made. They were very happy that any concerns were acted upon and their voices were heard.

Personal Choice



We were told that residents could chose when to get up and when to go to bed. However, some residents and visitors told us that people are encouraged to get up and go to bed and set times. There are choices offered at mealtimes. We observed staff going to each table at lunch with two different dishes so that the preferred meal could be selected. There is no menu on display in either of the two dining rooms. However, there is a very difficult to read menu on a notice board in the corridor. One person we spoke to said they had not enjoyed their lunch as the sauce was too strong. She was offered the alternative when she complained but she couldn't eat it as it was too hard for her teeth so she turned it down. We observed drinks being served mid- morning. Cold drinks were beside everybody in the lounge and most people also had a hot drink and there were biscuits offered. The drinking vessels were all plastic and some looked a little tired. In one of the dining rooms there was a choice of two squashes and water but in the other water was not offered. We observed a resident asking for water and it was provided immediately. We were told that residents

often go into the garden by themselves and walk around or sit and enjoy the view. One resident we spoke to said they would like to get out and do more exercise but there isn't an opportunity. We observed an activities session which was quite lively and some seemed to be enjoying it. We were told that one to one activities are provided for those people, for example a chat and a hand massage or a manicure.

Just like Being at Home



There are two lounge areas in Rock House. One is a conservatory overlooking the garden. There is comfortable seating and this is a peaceful area with not much activity going on. The main lounge is very busy. When we visited there were no residents in their rooms, although we were told people were free to go to their rooms if they wished. The main lounge was noisy and overcrowded. We were told that residents sometimes used the seating area at the front of the house near the front door. Rock House has recently converted a bedroom into a family room where visitors can sit with their relatives to chat in peace. Most of the bedrooms we saw were personalised with ornaments and photographs although we saw no photographs on bedroom doors to help those with dementia find their rooms. Some of the bedrooms had memory boxes outside the door which staff had created using items provided by families. There are safes in bedrooms for storage of valuable personal items. Some of the bedrooms had sheets of what appeared to be Perspex attached to the wall next to the bed, presumably for hygiene purposes. We were told by one resident that they would like to get more involved with meaningful tasks such as laying dining tables. A member of staff regularly brings in their dog and we were told many residents love to see him.

Privacy



We observed no residents in their own bedrooms so cannot say how personal care is carried out. We were told by residents that staff will knock on doors before entering. A resident said to us that they make telephone calls from the privacy of their bedroom. However, we saw a nurse, after saying she needed to put cream on a resident's leg, pull the chair away from the table at which a resident was sitting. This resident had their food on the table in front of them. The nurse got down on the floor and applied something onto the resident's leg(s). The nurse did this kindly but it seemed an inappropriate time and place to do this.

Quality of Life



There is a hairdressing salon and we saw two ladies having their hair "done". There is also a visiting optician and chiropodist. There were a variety of activities planned throughout the day but they are not set in stone and change if the circumstances change. Activities take place after breakfast until before lunch and include singing, group discussions about the news and reminiscing, quizzes, word games and crafts. We were told there is a weekly session of music and movement and one resident is taken for a walk around the common. Activities in the afternoon usually include a movie as most people like to have a sleep. There are games and more one to one activities with staff later in the day. There have been recent trips to the circus on the common and a canal trip. Some of the residents like to go into the garden and potter around or do some weeding. One resident recently helped erect gazebos for a BBQ. One person said to us that they would like to have more physical

activities. We observed people receiving help with their food in a respectful and appropriate way. We were told that a minister from the Gold Hill Baptist Church visits every Sunday to conduct a service for those who would like to join in.

Recommendations

We recommend that Rock House:

- in addition to the intention to show the daily menu on a whiteboard in each dining room, put photographs of the menu option on each table showing the choices. This will give residents a chance to think about what they want and provide something to chat about as there was quite a long wait for some of them as moving everyone into the dining room can take a while.
- ensures there are soft alternative options available to residents who might not be able to eat either menu option for whatever reason
- has water available at mealtimes in both dining rooms.
- displays a timetable of activities in prominent positions around the building. This will give people an idea of what there is to look forward to and create a topic of conversation as residents and staff move around the building.
- considers introducing more physical activities for those more able residents.
- continues the work they have started with their memory boxes outside bedrooms by decorating areas of building with reminiscence items.
- puts photos on bedroom doors to help those with dementia find their rooms easily if there is no memory box for reference
- considers utilising part of one of the dining rooms as another area for seating as the main lounge is very busy.
- looks to involve more able residents who may wish to help with certain simple tasks such as laying tables and arranging flowers.
- serves, where appropriate, hot drinks in china instead of plastic mugs.
- places healthy snacks, such as fruit, where residents could help themselves.

Service Provider Response

Personal Choice - We have now put up two white boards one in each of the dining rooms and the Chef now writes the days menu, so it can be clearly seen. We are now starting to take photos of the meals served so that these can be laminated and put on the tables for residents to see. Soft options such as omelettes are available for those residents who do not fancy what is on the menu. The plastic cups are used only for morning and afternoon teas/coffee as some of the residents find it difficult to hold china cups as too heavy. The blue dining room is set up with china cups and saucers for breakfast and supper and the green dining has mostly plastic patterned cups which are new as we are replacing the older red ones they are lighter for the residents to use. However I have instructed the kitchen to put china cups on the trollies for those residents who can manage them. I have also instructed kitchen team to ensure that water is in both rooms. There is normally a choice of juice and waters for both but have ensured that this is now not missed.



The residents do go out to exercise if they want to and one male resident is taken to the village to the coffee shops as this is what he likes. This gentleman lives with Dementia and does not always remember when he has been out, not even with his family. Unfortunately, most of our residents are

living with dementia and do not remember activities that they have done so we try and capture these times on camera and post on our board with their consent. We have residents who lay and clear tables after meals fold laundry and take a duster around with them, we try to keep our residents independent and encourage meaningful tasks where possible

Just like being at home- Memory boxes are being done for all our residents by their keyworkers and some are taken longer than others as having to wait for families to bring in special pictures and photos, but most have been completed. On the bedrooms doors we have pictures of their favourite hobbies, flowers etc not pictures as we feel that this breaches their privacy. Residents who have severe dementia are escorted to their rooms, so they arrive safe and unharmed.

Privacy- This issue has now been addressed and actions taken. We have also adjusted the medication times so medication is not being given during meals.

We will put up a board in the main lounge showing activities, so it can be seen more around the home.

I would like to take this opportunity to thank you and the team for our visit, it has given us new ideas and ways to enhance the home for our residents.

Acknowledgements

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