Dignity in Care Enter & View visit to Byron House



Care Home Provider: Care Home Address: Date and Time of Visit: Authorised Representatives: Westgate Healthcare Ltd 141/143 Wendover Road, Aylesbury, HP21 9LP 26.04.18 – 10.30am Alison Holloway, Graham Faulkner

Summary of findings



- A very relaxed atmosphere where everyone seemed to know each other well
- Lots of praise for staff
- A huge range of activities and visiting entertainers / community groups

The Visit

Byron House provided nursing care for 26 residents on the date of our visit. We talked to 6 members of staff, 3 visitors and 6 residents and observed another 6 residents, 2 visitors and 7 staff.

How people are treated

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We met a very confident friendly staff team who all went about their business is a relaxed, cheerful but knowledgeable way. Most of the relatives we spoke to visited daily. "I wouldn't want my nan to be anywhere else." "The staff are wonderful." We saw everyone being addressed by first name and staff had good eye to eye contact with people. A staff member told us about Chatterbox, an initiative whereby staff pick a question out of a box and ask it to residents to start a conversation. Today's question was 'what's your favourite sandwich?' However, there was not much conversation at the tables on the ground floor during lunch. There are also residents' and relatives' meetings alternating each month. Whilst most people we talked to were very complimentary about staff, a very new resident felt that they were not being asked enough about what they preferred or how they would like to be treated.

Personal Choice



The lunch time menu showed a good choice of options and there was an accompanying folder for those who found it easier to make their choices using photos of the food itself. Comments about the food ranged from "it's reasonable" to "very good". We were told people can choose to eat in their rooms but most have lunch and supper in the dining rooms where we saw several residents being assisted to eat. Tea and coffee were served at 11am and we saw other drinks within arm's reach at other times. A resident told us that they didn't go out but they could, whilst another told us they went on the bus to Aylesbury to shop and go to a café. We were told about a resident who likes to watch films in the cinema room in the evening. Another when asked about her lovely nails, told us the activity coordinator had painted them in the Namaste room. A relative said there was lots to do but also room to have some personal space without always having to hide in a bedroom.



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Just like Being at Home



The home is laid out across three floors with the two largest having very good interior design. However, we, felt and, were told that the few bedrooms on the top floor seemed a little isolated from the rest of the home. Otherwise there were several small quiet areas as well as dining rooms and lounges on the main two floors. There were old sweet shop shelves set up behind glass on one corridor and sailing memorabilia in another. It was very homely and had a very relaxed, comfortable atmosphere. "It's spotless." "It feels like home." There is also a garden café in the ground floor dining room where visitors can help themselves to drinks and a conservatory leading onto a lovely secure garden. Several residents told us they go out into the garden in summer. There were bold picture signs on communal doors on the ground floor, where residents lived with dementia, although no picture signs on individual bedroom doors. We saw a visitor help lay tables for lunch and were told that some of the residents help fold towels.

Privacy

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Residents and visitors told us they felt individuals were respected and privacy protected. We saw bedroom doors knocked on prior to entry and were told doors were closed when personal care was given. Staff also try to ensure that the individuals who prefer baths can take one with the help of their preferred carer. We also saw carers help a resident to a toilet then wait outside. They knocked again before entering to check the person was alright and to assist them back to the dining room.

Quality of Life

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There is a full-time activity coordinator and we were shown a photo album of lots of activities including a recent cheese and wine evening where families were invited too. Residents had read poems on Remembrance Day, decorated bonnets at Easter and an upcoming Royal wedding event was organised. We were also told of monthly cupcake activities and baskets being planted. However, a resident with a past involving both baking and gardening didn't participate in either. Another resident told us about making Xmas decorations and painting. The weekly timetable is written and accompanied by pictures and is up on noticeboards and in the lifts. Singers and a PAT dog visit and a different resident told us how much they like to dance. Students with learning difficulties from Harding House also visit twice a week to join in with activities which brings different generations together. The hairdresser and GP visit once a week and we were told of referrals to Brookside dental service. A very new resident, who was struggling to hear, was waiting for a hearing assessment which was due this week.

Recommendations

We recommend that Byron House:

- incorporates photos or other pictorial signage on bedrooms doors on the ground floor to help those living with dementia find their bedrooms easily.
- perseveres with those whose past lives reflect a possible interest in activities, such as baking or gardening, even when they say they don't want to get involved.

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Service Provider Response



Thank you very much for the draft report and for the feedback. Having discussed the report with my managers we are very happy for you to go ahead and publish the report. We take on board your recommendations and have already started implementing them.

Acknowledgements

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