

Healthwatch Greenwich

Enter and View Report



Puddingstone Grange Care Home

January 2020

1. Details of the visit

1.1 Purpose of our visit

Healthwatch Greenwich is carrying out a series of visits to Residential Care Homes in Greenwich to ascertain the quality of life, experience and views of residents.

Name and address of premises visited	Puddingstone Grange Care Home 82 Plumstead Common Road, Plumstead, London SE18 3RD
Service Provider	Avante Care
Care Home Manager	John Ogbe
Date/time of visit	8 th January 2020 - 1:30PM - 4:30PM
Healthwatch Greenwich Authorised Representatives	Joy Beishon, Sam Greaves and Jummy Alabi
Admission Information	Residential care home for adults aged 60+ living with a dementia related condition and nursing care needs
Number of beds	62 - there were 58 residents in-house at time of visit
Staffing levels	Daytime: 3 Team Leaders, 8-9 Care Service Assistants, 3-4 Healthcare Assistants, 1 Registered Nurse, 2 Assistant Managers and 1 Nurse Manager Night-time: 2 Team Leaders, 5 Care Service Assistants, 2 Healthcare Assistants, and 1 Registered Nurse
At our visit	We spoke to six residents, six members of staff, two relatives and the registered care manager. We observed the care and interaction of 15 residents, and the staff looking after them, in three lounge areas. In addition, we viewed all communal areas and a small number of resident's rooms.

1.2 CQC inspection

The Care Quality Commission (CQC) carried out an unannounced visit to Puddingstone Grange Care Home on the 9th May 2017. The home was rated as ‘good’ across all areas.

(https://www.cqc.org.uk/sites/default/files/new_reports/INS2-3063271186.pdf)

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Since our visit, the CQC have published their latest inspection report, from the 20th November 2019, in which the home has maintained its rating of “Good” across all areas.

1.3 Other ratings

Puddingstone had a rating of 9.8 from Carehome.co.uk

(<https://www.carehome.co.uk/carehome.cfm/searchazref/65432203156>)

1.4 Healthwatch Greenwich Enter and View 2016

In February 2016, we conducted an enter and view visit to Puddingstone Grange, and provided the following recommendations:

- Ensure all residents have knowledge of and access to their care plans to ensure a sense of choice in their treatment and care
- Ensure all residents are aware of the complaints procedure and are confident to use it
- Include more culturally diverse options on the home’s menu to reflect resident population

1.5 How our visit was conducted

The visit was unannounced.

We notified the registered manager that we would be attending at some point in January, without specifying the date or time. During our visit, we provided the home with leaflets and letters (to share with residents, relatives, carers and visiting healthcare professionals) giving an opportunity for further feedback.

1.6 Acknowledgements

Healthwatch Greenwich would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme. Healthwatch Greenwich would also like to thank the Healthwatch volunteers and representatives who assist with the visits.

2. Summary

Puddingstone Grange Care Home provides a homely environment. From our observations of interactions, and our conversations with residents, residents are generally happy with the care they receive. Staff are friendly, attentive, and visibly know their residents well. As a team, staff communicate with each other well, and feel supported by management.

3. Our Findings

3.1 Communal spaces

External space

The front of the home is well-kept and the reception, which is located at the back of the home, is well signposted. The home has a communal open and spacious garden with dementia-friendly features such as a red telephone box, bus-stop and shaded seating. The garden is not accessible for wheelchair users. The Care Manager told us that refurbishments are planned and will include a sensory garden in addition to ramps for accessibility. Garden refurbishment will be completed by the summer.



A relative told us how important the garden was.

“It’s a fantastic garden, [in the summer] mother enjoys sitting out there as much as she can”

Residents told us they are happy with the outdoor space.

“In the summer we love it and learn how to do gardening.”

Reception area

The home has a secure entry system and a welcoming reception area. The visitor’s book is in use. We noticed the reception area displayed any array of leaflets for visitors, including “Review us” forms, information about providing feedback, and future important dates for the home.

Bathrooms

All resident rooms are ensuite. We observed these to be clean and spacious.

Lounge and dining areas

Lounge areas across all floors are open plan, encouraging interaction between residents, and staff. Lounge areas have a large TV, stereo equipment, and a shelf of books, boardgames and CDs. We saw residents watching tv in the lounge areas, whilst others sat quietly around the dining tables.

The dining area is clean and welcoming, and residents are encouraged to make their own drinks as jugs of juice and water are displayed on the kitchen counter. The tables are arranged to encourage small groups of residents to eat together.

3.2 Other observations



Noticeboards were visible in several places outside the reception area. However, the array of information made it difficult to identify important information - such as notices from the care home - from more general, informal and less important information. We also found an invitation to a Healthwatch Greenwich meeting that was 6 months out of date, which we took down.

3.3 Personal spaces

Resident rooms are personalised with photos of family members and mementos. Bedrooms were clean, spacious and odourless. Information about the occupier is displayed outside some bedrooms, including an indication of residents who are prone to falls, however, not all rooms had information displayed outside.

Residents told us they are happy with their rooms and did not want any changes.

“The room is big and cosy, smashing”

In one bedroom we found the call bell (alarm cord) was tangled/tied up, which would hinder residents’ ability to summon assistance if needed.

We immediately brought this to the attention of the care home manager who rectified it.

3.4 Activities

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	Arts & Crafts	Walking Group	Arms & Legs	Table Games	Chair Exercises	Chair Exercises	Arms & Legs
Afternoon	Current Affairs	One to One	Arms & Legs	Pet Therapy	Arms & Legs	Chair Exercises	
Evening					Chair Exercises	Chair Exercises	

A weekly activity timetable is displayed in the communal areas. Activity coordinators focus on maintaining the physical and cognitive capacity of residents with a wide range of activities including arts & crafts, pet therapy, walking group, table games, armchair aerobics, and current affairs. At the time of our visit, we observed residents taking part in Bingo. We also saw a photo board providing evidence of the activity's residents take part in.

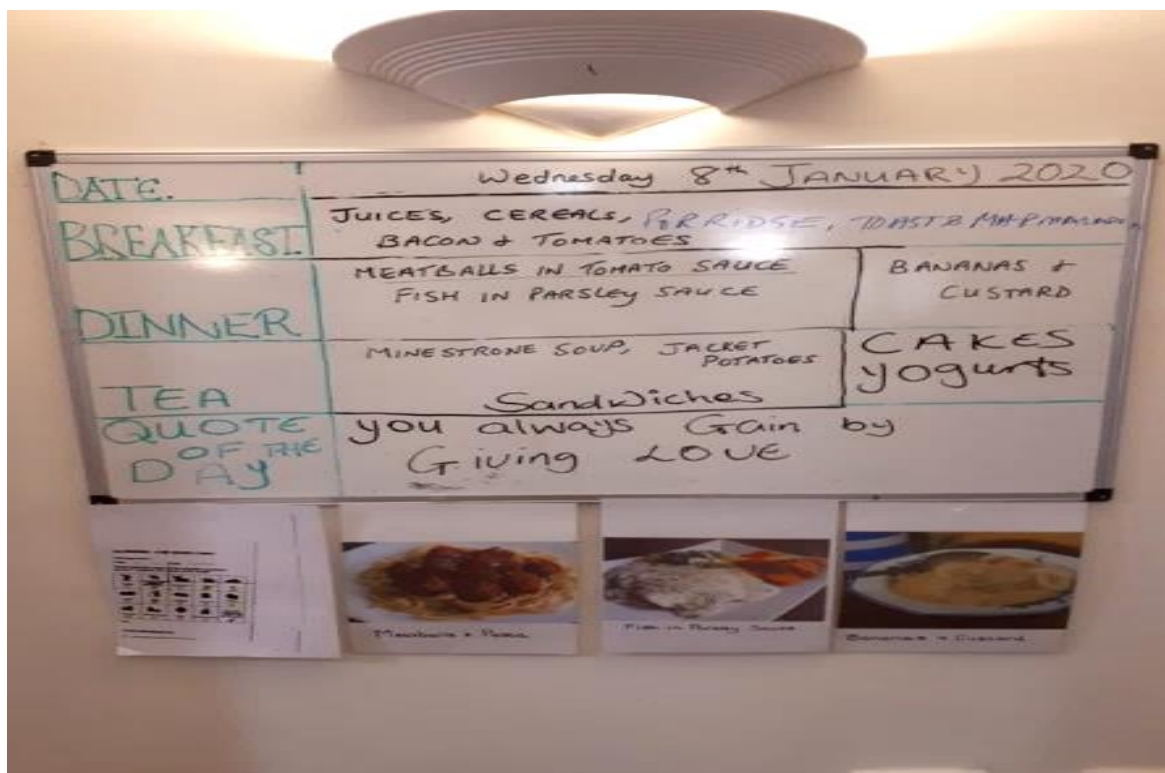
The home has good links with the surrounding community. The local primary school invites residents to listen to the choir and the Brownie and Scout packs visit. Residents can attend Remembrance Day commemorations and the local supermarket held a dementia coffee morning.

Residents told us there are plenty of activities in the home, and they decide what they would like to take part in.



The home offers therapeutic and beauty treatments including a hairdressing facility, manicures, hand massage and footcare. Spiritual care is provided by monthly Priest visits from Catholic, Pentecostal and Anglican Church, and residents (who would like to) can receive holy communion. Residents can attend church (with support). The home also took part in Diwali celebrations.

3.5 Food and mealtimes



An in-house chef prepares all meals. There is a choice of menu, and residents can request something else if they do not want the meals on offer. Since our recommendation from our last visit, the Care Manager told us they arrange special

food shopping trips to Woolwich Market to buy African/Caribbean food for ethnic minority residents.

Family members are encouraged to come and eat with residents and at least one resident eats lunch daily with her husband who still lives in the marital house.

Residents told us they enjoy the food provided, and none of the residents we spoke to suggested changes. One resident confirmed there are always a variety of menu options. One relative we spoke to said *“It’s good plain food, mother enjoys it, and eats everything”*

3.6 Staff and resident relationships

There is a keyworker system at the home. Where possible, staff involve residents in their care plans and/or the resident’s family, to deliver both choice and high-quality treatment and care. In addition to regular care plan reviews, the home uses “Resident of the Day” at which one care plan is checked and reviewed, to ensure care plans are up to date.

To support continuity of care, the home keeps use of agency workers to a minimum and staff turnover is low. However, staff said that the cost of high staffing ratios provided was not always fully funded by the local authority and was partially subsidised by the home. Without this subsidy by the home to fund additional staff, it would be difficult to deliver the best possible care. Staff praise the leadership of the home, reporting easy access to management to discuss concerns or make suggestions.



Staff know residents and their individual preferences well. Staff are very friendly and quick to respond to calls for assistance from residents. Staff sit with residents, make conversation, and regularly ask if they are okay, or if they would like a drink.

One relative told us *“[my wife] likes it here, everyone is very friendly”*

Staff have completed dementia training. The same training is offered to relatives. To maintain high levels of dignity and respect for residents, staff training includes

role play, in which staff put themselves in the place of residents and reflect on the care provided from a resident's perspective.

Residents told us their privacy is always respected by staff, staff are patient with them, and no residents reported having any problems or difficulties with any member of staff. No residents suggested anything staff could do better.

“Staff have been fine”

“They're always around here if you need something”

“They are a nice crowd and I like them”

Two residents told us that they did not always feel staff listened to them.

“Sometimes yes, sometimes no. Sometimes I get fed up of people telling me what I should and should not do”

“They keep asking me to jump up and do things (armchair aerobics), and I can't”.

Overall, residents feel supported to live as independently as possible, for example, staff involve residents in setting up the tables for mealtimes, with some residents helping with washing up and collecting cups. Residents are given the opportunity to learn new skills for example using iPads to Skype family and friends.

“If I want to do something and I can't do it, I'll ask them (staff) and they'll show me”

3.7 Relative and resident feedback

The home adopts an open-door policy and organises regular relative and resident meetings, providing relatives/residents with opportunities to provide feedback. During our visit, dates of future meetings were clearly displayed in communal areas. The Care Manager told us that many residents attend the meetings, and that staff are encouraged to attend. One relative told us *“99% of the staff are fantastic and so helpful. They feel like friends”*

Residents told us that if they were treated badly, they would know how to complain.

4. Recommendations

Recommendation 1: Check alarm call bells regularly

Alarm call bells in all rooms and communal bathrooms should be checked on a regular basis to ensure that residents can easily summon assistance when needed.

Recommendation 2: More autonomy for residents

A small number of residents do not feel they are properly listened to, given choices, or control over how they spend their time. Staff providing care should never make the mistake of assuming that because they know the individual well, they always know what their preferences will be.

Recommendation 3: Personalised bedroom doors

Outside doors of bedrooms should be personalised to help residents recognise their own bedroom and enable staff to maintain awareness of residents who are at risk of falls.

Recommendation 4: More accessible information on notice boards

Too much information is crowded on notice boards making it difficult to identify important notices from informal or fun updates. Information displayed on notice boards should be regularly refreshed and out of date information removed.

5. Service providers response

All providers are given the opportunity to review our Enter and View reports prior to publication, check for factual accuracy and provide a formal response.

Comment from provider:

Other observations: Noticeboards

There are two in the dementia suites and one contains information for relatives that don't change and the other is more of a community/relatives notice board and has been better organised since your visit.

Recommendation 1: Check alarm call bells regularly

Call bells are checked daily by the care staff, more regularly during night checks and serviced monthly by the maintenance technician.

Recommendation 2: More autonomy for residents

Two residents told us that they did not always feel staff listened to them.

Thanks for this feedback as we welcome this to ensure we are providing a high quality of care tailored to the needs of our residents. I however think this comment has been misunderstood in your recommendation. Residents are given an opportunity to take part in variety of activities which is great. They have choice and control whether they wish to participate or not. Staff do not assume this and are always seeking consent from each resident if they want to participate or get involved in any way. Residents are made aware of what is going on in the home and if they wish to participate, they do so with support from the activity coordinator or care staff, but they are not made to or pestered to do so.

Recommendation 3: Personalised bedroom doors

We have memory boxes in front of each room to help personalise each resident's room. We also have a Green finches sign in front of resident rooms that are at risk of falls. This was in place at the time of your visit. We will continue to explore other ways to support our residents in their day to day living.

John Ogbe, Home Manager

6. What is an Enter and View?

Part of the Local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch Authorised Representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act 2012 allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families, and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists, and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service, but equally, they can occur when services have a good reputation - so we can learn about and share examples of good practice, from the perspective of people who experience the service first hand.



6.1 Our approach

To collect information, our Authorised Representatives complete an observation form. Where possible, we also speak to residents, service users, patients and staff as appropriate. We emphasise to all service users and patients that participation is voluntary. We always check with staff if there are individuals who we should not approach or who are unable to give informed consent.

6.2 Disclaimer

Please note that our reports relate to findings observed on the specified date of our visit. Our report is not necessarily a representative portrayal of the experiences of all service users and staff, simply an account of what was observed and contributed at the time.

7. Contact us

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If you require this report in an alternative format, please contact us at the address above.

We know that you want local services that work for you, your friends and family.

That's why we want you to share your experiences of using health and care services with us - both good and bad. We use your voice to encourage those who run services to act on what matters to you.

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