

'Enhanced Health in Care Homes' scheme funded by NHS Sussex Integrated Care Board: Report of a pilot project to obtain feedback from residents in care homes about access to healthcare and support.

**Healthwatch East Sussex** 

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# **Executive Summary**

## **Overview**

NHS Sussex Integrated Care Board (ICB) commissioned Healthwatch East Sussex (HWES) to carry out a pilot project to obtain feedback from residents in care homes about their access to healthcare and support services. There was a particular emphasis on the Enhanced Health in Care Home scheme.

This is a pilot project, to test out how feedback can be effectively obtained from residents of care homes. The intention is for the project to be rolled out over a wider area and involving more care homes. The aim was to carry out Enter and View visits to ten care homes across East Sussex. However, one visit had to be cancelled due to a COVID outbreak in the care home. Two volunteers (authorised representatives) from Healthwatch East Sussex carried out each visit.

A survey form was produced by the ICB and this was used by volunteers during their visits. On average, two to three residents were met with at each care home.

# **Key findings**

The conclusions of the feedback from residents included:

- Residents felt that they were at the centre of their care and support.
- There was a mixed response to whether they had a care plan, with many being unsure of this, whereas others were very aware and had been involved in it. For the vast majority of residents, the issue of having a care plan was not significant to them.
- Residents felt they could meet with healthcare professionals in private and that confidentiality would be maintained.
- Most residents said they had met with a healthcare professional and that this had been helpful. Apart from those few residents who needed regular nursing input, the healthcare professional most often named as seen by residents was the paramedic practitioner.
- The response about the involvement of healthcare professionals was more positive when the person visited the care home and carried out face



to face meetings. The healthcare professional in those establishments was known by residents, often by their first name.

- Linked with the above, where feedback was obtained from care home staff, this was more positive when the healthcare professional was a regular visitor to the care home rather than weekly meetings being by phone.
- Residents were confident that relevant people knew about their wishes, should their health deteriorate.
- Residents stated that they had not used technical devices (e.g. iPad, mobiles etc.) to access healthcare, with the exception of one resident who had regular video calls with her psychiatrist.
- It was unclear whether residents' medication had been regularly reviewed in a formal sense. Residents feedback was that their medication had changed, but it was unclear whether this was due to an annual review or just that their health had changed and medication had been reviewed accordingly.
- Few residents were aware of a weekly meeting between healthcare professionals. Those residents who were aware, knew this because someone visited the care home on a weekly basis.
- Residents were positive about their care at the care home.
- Residents knew what to do if they needed assistance.
- Any future survey for residents needs to refer to wider health issues such as dentists, audiology, chiropodist and podiatrists so that a more holistic assessment of whether health and care needs are being met can be determined.

### Recommendations

Eight recommendations were made, mostly related to suggestions for any future rollout of the project.

These included:

- That NHS Sussex should review the survey form used in this pilot. A
  possible alternative version is attached to this report see appendix 3.
- 2. NHS Sussex and the local authority should co-design a survey to capture feedback from care home providers and managers about access to



health support services. Not all care home providers were aware a previous survey had been circulated. A possible version is attached to the main report – see appendix 4.

- 3. As part of the planning for any future project, more details need to be obtained about the current support structure for each Primary Care Network (PCN) area. This could include such information as which GP surgeries are in which PCN, the names of the linked paramedic practitioner and the link Community Matron/lead clinical nurse for each care home and a list of care homes and which GP they are linked to. This will assist in planning as well as in our conversations with care providers when we visit.
- 4. NHS Sussex and Primary Care Network Managers should collaborate with HWES on planning future visits to enable a greater level of comparison across the county. One option would be to carry out a visit to at least one care home for each GP practice, in order to cover all areas of East Sussex.
- 5. The weekly 'ward rounds' should be held face-to-face in the care home to create more effective links directly with residents who will get to know the people visiting and be more confident about raising any issues with them.
- 6. All PCNs could consider devising a similar document as that produced by <u>Bexhill PCN</u>, to assist care homes to understand better the support systems available to care homes.
- 7. All GP practices could consider providing a dedicated phone number for care homes, to enable them to have quicker access to healthcare support, rather than relying on public-facing communication channels.
- **8.** HWES to revisit the activity in 2024 when the national programme is fully embedded.



## **Response from NHS Sussex**

Here is the NHS Sussex response to the Healthwatch findings:

"It has been brilliant to work with Healthwatch East Sussex to hear from care home residents and their families about their experiences of health care across our communities, and we would like to thank the Healthwatch team and their volunteers for their time and commitment.

It is really encouraging to hear the positive feedback outlined in this report and that generally people shared that they had good experiences of healthcare in our care homes and were receiving the support they needed. We welcome the recommendations so that we can further improve and are already taking these forward in our ongoing work to ensure that residents of care homes and their families can receive high-quality person-centred care and support."

### **Next Steps**

As the public champion for local health and care services, Healthwatch East Sussex will continue to work in partnership with commissioners and providers to monitor the experiences of patients and the public in accessing health and care services locally and explore how ongoing improvements may be delivered.

#### **Tell Us Your Experiences**

Please tell us your experiences of local health and care services via our <u>Feedback Centre</u> and let us know how this has been for you.

We want to hear if it has been good, bad or indifferent.

#### Help and support with Health and Care

If you need help or support related to health or care, then please contact our <u>Information & Signposting Service</u> via

0333 101 4007 or enquiries@healthwatcheastsussex.co.uk