



# Enter and View Report

Kimbolton Lodge Care Home  
Announced

22<sup>nd</sup> January 2024

# What is Enter and View

Part of Healthwatch Bedford Borough's remit is to carry out Enter and View visits. Healthwatch Bedford Borough Authorised Representatives will carry out these visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allows 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, optometrist 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 that we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Bedford Borough's Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Bedford Borough's Safeguarding Policy, the service Manager will be informed, and the visit will end. The local authority Safeguarding Team will also be informed.

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## Provider details

Details of Visit	
Registered Manager	Nicola Smith
Service Address	Kimbolton Lodge Care Home, 1 Kimbolton Road, Bedford, MK40 2NT
Service type	Nursing and Respite
Date and Time	22 <sup>nd</sup> January 2024
Authorised Representatives undertaking the visit	Tracy Cresswell, Lead Authorised Representative  Gloria Chukwuji, Observing Authorised Representative

## Acknowledgements

Healthwatch Bedford Borough would like to thank the Home Manager, staff and all the residents for their cooperation during our visit.

## Disclaimer

Please note that this report is related to findings and observations made during our visit made on 22 January 2024. The report does not claim to represent the views of all service users, only those who contributed during the visit.

## Authorised Representatives

Tracy Cresswell, Lead Authorised Representative  
Gloria Chukwuji, Observing Authorised Representative

## Who we share the report with

This report and its findings will be shared with the Manager of Kimbolton Lodge Care Home, Care Quality Commission (CQC) and Healthwatch England. The report will also be published on the Healthwatch Bedford Borough website.

## Healthwatch Bedford Borough details

Address:  
21-23 Gadsby Street  
Bedford  
MK40 3HP

Website: [www.healthwatchbedfordborough.co.uk](http://www.healthwatchbedfordborough.co.uk)

Telephone: 01234 638678

## Healthwatch principles

Healthwatch Bedford Borough's Enter and View programme is linked to the eight principles of Healthwatch, and questions are asked around each one.

1. **A healthy environment:** Right to live in an environment that promotes positive health and wellbeing.
2. **Essential Services:** Right to a set of preventative, treatment and care services provided to a high standard to prevent patients' reaching crisis.
3. **Access:** Right to access services on an equal basis with others without fear of discrimination or harassment, when I need them in a way that works for me and my family
4. **A safe, dignified and quality services:** Right to high quality, safe, confidential services that treat me with dignity, compassion and respect.
5. **Information and education:** Right to clear and accurate information that I can use to make decisions about health and care treatment. I want the right to education about how to take care of myself and about what I am entitled to in the health and social care system.
6. **Choice:** Right to choose from a range of high-quality services, products and providers within health and social care
7. **Being listened to:** Right to have my concerns and views listened to and acted upon. I want the right to be supported in taking action if I am not satisfied with the service I have received.

8. **Being involved:** To be treated as an equal partner in determining my own health and wellbeing. I want the right to be involved in decisions that affect my life and those affecting services in my local community.

## Purpose of the visit

The visit was announced and was part of the ongoing work programme of Healthwatch Bedford Borough.

## What we did

On arrival to the building the Authorised Representatives (ARs) rang the bell and were greeted by the Manager. The ARs showed their ID badges and were invited in and asked to sign in the signing in book.

The ARs were made very welcome from the beginning of the visit; refreshments were offered throughout.

The ARs spent time talking to the Manager, the residents, and staff.

The Manager has been in post for 6 years and explained it was her first management role.

The ARs were informed that the home is dual registered for 36 residents requiring nursing, residential and step-down care. During our visit, Kimbolton Lodge the manager explained that they have a mixture of residents, they have 12 rehab residents and 24 residents with a mixture of nursing and residential. The manager also explained that they keep the residents who are nursing to a maximum of 16 in total to ensure that their needs are met safely.

Kimbolton Lodge currently has 44 members of staff which are spread across various roles including nursing, care staff, unit Manager, Nurse Lead, kitchen staff, domestics, and admin.

The staff work on a fixed 2-week rota and cover the following shifts:

8 am to 2 pm includes 1 Nurse, 1 Senior Care Assistant, 7 Care Assistants (4 covering nursing and 3 covering residential), a total of 9 staff on duty.

2 pm to 6 pm includes 1 Nurse, 1 Senior Care Assistant, 5 Care Assistants (3 covering nursing and 2 covering residential), a total of 7 staff on duty.

6 pm to 8pm (Twilight shift) a total of 8 staff. One extra carer assists with bedtime routine and works 6pm to midnight.

8pm to midnight a total of 5 staff.

Midnight to 8am a total of 4 staff, however this increases to 5 if the home has higher needs (the number includes 1 nurse and 1 senior).

# Findings:

## Environment

### External

The home is situated in a residential area with off-street parking at the front of the building.

There is CCTV on the outside of the building. The entrance is easily accessible, although first impressions were not that positive as the front entrance doorway was unkempt and included cobwebs, garden debris and litter. The building is accessed by ringing a doorbell.

### Internal

The entrance led into a small spacious hall, with residents' rooms on either side. Directly in front of the front door is a small corridor that leads into a small lounge area. This lounge leads to the dining area and the lift. The ARs sat with the Manager and were then shown around. The ARs observed all the staff wearing 'my name is' badges and a board with all the staff and their roles was displayed.

## Essential services

The Manager explained that they receive referrals for nursing from relatives and the hospital. They receive referrals for residents from a Trusted Assessor with a 48-hour window and use that as their initial care plan for those who require re-enablement. Residents are initially placed for 6 weeks. However, several do not want to go home, and wish to stay within the home. The Manager explained that if they can accommodate these requests, they will. Kimbolton Lodge accepts residents who have dementia if their needs can be met. The care plans are reviewed monthly by the Nurse and unless anything has changed, this time scale remains the same.

The Manager explained that they have been using Person Centred Software (PCS) since 2015, the staff upload the residents preferences onto phones that they have been provided with. They also have Atlas EMIR medication that links into the care plans.

Staff explained that they look on the system at the start of their shift and work through the care plans for each of the residents. The on-duty Nurse will print

out any dietary changes for residents and give these to the kitchen staff. The kitchen staff will receive notification of new residents and their choices.

The staff receive mandatory training, which is delivered online. Fire training is delivered face-to-face. The staff have received Dementia Awareness training with a nominated staff member being trained as a Dementia Champion. The Manager explained that they have an inhouse Train the Trainer for Manual Handling training. They have 18 members of staff who mainly work nights, who are First Aid at Work trained (valid for 3 years.) The remainder of the staff have First Aid at Work certificates, valid for a year. The Manager is going to investigate Oliver McGowan training.

The residents are registered with The De Parys Group, who attend monthly Multi-Disciplinary Team (MDT) meetings, ward round with the paramedics, and complex care team daily. District Nurses visit weekly for residents. However, in an emergency, the Nurses in the home would undertake an initial assessment.

## Access

The Manager explained that they have hairdressers that come into the home. However, one resident expressed that they had not seen the hairdresser since Christmas. It was noted that there has been a hairdresser in the home, but the resident was unwell and unable to get their hair done. Another resident expressed that they have their own private Support Workers who come into the home every day for 5 hours.

A further resident expressed that they had not seen a dentist for several years but do not currently need one.

## Safe, dignified and quality services.

The residents expressed that they feel safe in the home. One resident explained that they *"have a call bell, someone comes as soon as they can."* Another resident explained they *"wear a pendant and cannot come downstairs without wearing it"*, whilst another resident expressed that they *"feel 100% safe."*

ARs observed a resident in their room. The Manager knocked on their door and asked permission before the ARs entered to talk to them.

When the ARs were being shown around, they spoke with one of the residents to ask if they could come back and have a chat with them. The resident was happy for the ARs to go back. However, the resident was having an issue with their television as it kept going off. The Manager explained they would get someone to come and have a look. When the ARs went back to talk to the resident they were still having issues with the TV so the ARs went and found a



member of staff to assist the resident. When the ARs went back the resident was happily watching their favourite TV programme.

There was one resident who had lost a loved one and their funeral had taken place on the day of our visit. The Manager went to speak to them to see if they were ok, but the ARs did not enter the resident's room.

## Information

Staff meetings are hybrid, with supervision being held in March and September. Staff have observations in June and appraisals in December. The Manager had just completed 35 appraisals.

New members of staff are placed on a 3-month probation, which can be extended to 6 months if required. A member of staff we engaged with explained that they had had their probation extended due to various reasons.

The Manager explained that compliments are put on the board and shared with staff. Complaints are received verbally or in writing, with the Manager investigating and providing feedback within a week. The ARs did not observe a "You said, we did" board.

## Choice

Several residents expressed they had a choice. One resident explained they "*get washed at 11pm*" (for bed.) However, another resident explained that they "*don't get a choice of what time to go to bed due to the lift.*"

The residents' rooms are decorated to the individual's colour scheme preference and furnished using their furniture. One resident's room had access to a small garden. The resident liked their door shut.

Another resident explained they choose their own clothes and can choose their favourite food such as "*sausage and mash.*" With a further resident expressing that they "*choose from the menu.*"

A resident explained that they were confused with their food, as the day before they could have normal food. However, on the day of our visit, they had to have food soft to bite. The ARs expressed that they would raise this with the Manager and get them to come and explain the rationale as to why this was the case.

## Being listened to.

The Manager advised that the relative meetings were not well attended, and some of the relatives were difficult to engage with. However, the Manager explained that their door is always open.

They hold residential meetings every 6-8 weeks. During these meetings one of the residents was celebrating a birthday and was asked what they would like to eat. The resident said they wanted crab, so the kitchen staff made sure they had this option. A resident explained they get invited to the meetings, but they are *“not interested in meetings or activities”*, whilst other residents stated that they go to the meetings.

The Manager explained that they use a whiteboard for residents who are non-verbal. They had one resident who lost their hearing aids, and a replacement was being arranged by the hospital audiology team. In the meantime, they engage with the resident with pictures.

## Being involved

The Manager explained that they have an Activity Coordinator who works 4 days a week, providing exercises, and arts and crafts. The ARs observed in the main dining area there were lots of board games and crafting materials. One resident stated they had been doing *“diamond art”*, whilst other residents were enjoying taking part in a quiz.

## Current challenges for the home

The Manager expressed that their current challenge was finding the right staff. Often when sourcing them they are part of a sponsorship licence, stating that they currently have 3 staff on visas whom they could lose imminently.

Another challenge being that the home is a listed building, and they are limited to what they can do in regard to the refurbishment.

Patient transport is another challenge for the home as they have residents going to the hospital for appointments and not knowing what time they are going to get back. Because of this situation, Kimbolton Lodge has started to provide the residents with a packed lunch and drink.

Residents were all *“happy in the home and would not change a thing.”*

# Recommendations

## Recommendations made from findings

1	Look into Oliver McGowan training for staff.
2	Consider the welcoming aspect of the front entranceway to families, visitors, and potential residents. We would recommend more regular external groundskeeping.

3	Consider introducing a “You said, we did” board for all residents and relatives, that would include any changes that have been made from comments and complaints received but also explain if you are unable to achieve the desired outcome and why.
4	Consider engaging with the residents around bedtime routines, especially whilst you are awaiting the new lift installation.
5	Consider engaging with relatives to understand why they are not attending the meetings planned, e.g. is this because of the time of the day/ days of the week meetings are being held and the format in which they are hosted (i.e. Face-to-face, MS Teams/ Zoom)

## Provider feedback

*Can we just say thank you for taking the time to visit our service and spend time talking with our residents.*

*We always take onboard any feedback and can confirm we have subsequently implemented the following on the back to your report*

*We have now introduced a You Said - We Did board - which the residents have wholeheartedly embraced, with weekly suggestions and ideas.*

*All staff have completed or are in the process of completing the Oliver Mc Gowan training.*

*The new lift is being fitted on 29th April and a stair-lift has been insitu - as back up since the end of January.*

*A recent survey and resident's meeting concluded that they did not want family meetings outside of our current Buffet Evenings and Summer Fayres - since they felt family time was precious and many of their loved ones worked or did not live locally.*

*We are currently in the process of renovating the Grade 2 listed wing - being sympathetic to the history and heritage of the building and would very much like to welcome you back to review us and the works again later in the year when it has been completed.*