

Enter & View

The Paddocks

(Formerly the Lilliputs Complex) (Fourth visit)

Wingletye Lane, Hornchurch, Essex, RM11 3BL

24 January 2025



Cherry Tree and The Farmhouse

(formerly the Lilliputs Complex)
Fourth visit



What is Healthwatch Havering?

Healthwatch Havering is the local consumer champion for both health and social care in the London Borough of Havering. Our aim is to give local citizens and communities a stronger voice to influence and challenge how health and social care services are provided for all individuals locally.

We are an independent organisation, established by the Health and Social Care Act 2012, and employ our own staff and involve lay people/volunteers so that we can become the influential and effective voice of the public.

Healthwatch Havering is a Community Interest Company Limited by Guarantee, managed by three part-time directors, including the Chairman and the Company Secretary, supported by two part-time staff, and by volunteers, both from professional health and social care backgrounds and lay people who have an interest in health or social care issues.

Why is this important to you and your family and friends?

Healthwatch England is the national organisation which enables the collective views of the people who use NHS and social services to influence national policy, advice and guidance.

Healthwatch Havering is <u>your</u> voice, enabling you on behalf of yourself, your family and your friends to ensure views and concerns about the local health and social services are understood.

<u>Your</u> contribution is vital in helping to build a picture of where services are doing well and where they need to be improved. This will help and support the Clinical Commissioning Groups, NHS Services and contractors, and the Local Authority to make sure their services really are designed to meet citizens' needs.

'You make a living by what you get, but you make a life by what you give.' Winston Churchill



What is Enter and View?

Under Section 221 of the Local Government and Public Involvement in Health Act 2007, Healthwatch Havering has statutory powers to carry out Enter and View visits to publicly funded health and social care services in the borough, such as hospitals, GP practices, care homes and dental surgeries, to observe how a service is being run and make any necessary recommendations for improvement.

These visits can be prompted not only by Healthwatch Havering becoming aware of specific issues about the service or after investigation, but also because a service has a good reputation, and we would like to know what it is that makes it special.

Enter & View visits are undertaken by representatives of Healthwatch Havering who have been duly authorised by the Board to carry out visits. Prior to authorisation, representatives receive training in Enter and View, Safeguarding Adults, the Mental Capacity Act and Deprivation of Liberties. They also undergo Disclosure Barring Service checks.

Occasionally, we also visit services by invitation rather than by exercising our statutory powers. Where that is the case, we indicate accordingly but our report will be presented in the same style as for statutory visits.

Once we have carried out a visit (statutory or otherwise), we publish a report of our findings (but please note that some time may elapse between the visit and publication of the report). Our reports are written by our representatives who carried out the visit and thus truly represent the voice of local people.

We also usually carry out an informal, follow-up visit a few months later, to monitor progress since the principal visit.



Background and purpose of the visit

Healthwatch Havering is aiming to visit all health and social care facilities in the borough. This is a way of ensuring that all services delivered are acceptable and the welfare of the resident, patient or other service-user is not compromised in any way.

Introduction

The Paddocks is a care home co-located with Cherry Tree and The Farmhouse on a site just off Wingletye Lane in Hornchurch. Together, they offer residential care for people aged under 65 who are living with learning disabilities; they share the site with a Day Centre and a children's unit (both outside the remit of Healthwatch).

The facilities were formerly known as the Lilliputs complex (the whole site was once part of a farm known as Lilliputs) but, since the current providers, R G Care Ltd, took them over, they are treated as individual units rather than as a complex. The three homes are individually registered with the Care Quality Commission (CQC).

The site is located in a semi-rural area within the Ingrebourne Valley, between the built-up areas of Hornchurch and Upminster, on former farmland. Residents are accommodated

The Paddocks (formerly the Lilliputs Complex) Fourth visit



from a wide geographical area, across London and South East England.

Although each Unit is registered separately, Healthwatch generally regards the site as a single entity for the purposes of Enter and View visits.

Healthwatch Havering has visited the site on several previous occasions, both formally and informally.

We have previously reported on visits undertaken by teams from Healthwatch Havering in October 2024 ¹ but, as it was not possible for our teams to visit The Paddocks on that occasion, we arranged for this visit to be carried out in January 2025.

¹ See: https://www.healthwatchhavering.co.uk/report/2024-11-24/cherry-tree-farmhouse-and-paddocks-wingletye-lane-elifar-formerly-lilliputs



The Paddocks

The team were made very welcome by the Manager, who explained that she had 32 years' experience in health work, starting with many years in the NHS, moving across to learning disabilities and then mental health. She had been "head hunted" two years ago to join The Paddocks when it was taken over by the new management company. She had managed to raise the home's CQC grading from 'Requires Improvement' to 'Good' since her arrival.

Staffing

The Manager commented that there was no Deputy Manager. Staff worked in two teams, each for half a week, handing over efficiently in the middle of the week. The Manager was very flexible with her time and would come into the home whenever there was pressure or problems.

There were 27 full time staff, which included a good activity person who had been there for some years. The team were able to see examples of her work with the residents – at the time of the visit, they were preparing to celebrate the Chinese New Year, of the Snake.

As the home had capacity for seven residents so there was a high staff ratio of 27 staff to 7 residents.

There was no registered nurse on the staff.



It is not always easy to recruit the staff with the right background, which she feels is very important. Absences are covered by a long-time arrangement with an agency so staff are familiar with the work and can pick the job up straightway.

The Manager is a fully-trained trainer so some training is done in-house face-to-face and some online. She had the support of the learning disability psychiatrist for the Borough, which she values. Staff meetings are held regularly.

There is a whistle blowing process in place. A couple of cases were currently being investigated by her line manager but they were not considered serious.

There is a group of trained staff who deal with the medication rounds, who wear tabards while doing so. No concealed medications are necessary, no resident is on blood thinners and the medications are reviewed regularly with the help of a local pharmacy, of which the Manager spoke highly.

Support for residents

At the time of the visit, there were five men and one woman in residence. They were supported by a mix of GPs, as two residents had retained their own, but the Manager commented that she found difficulty with the amount of support, which is a general problem throughout the Borough.



For medical emergencies, help was available from the Physicians Response Unit at St Bartholomew's Hospital (Barts).

They would very much like a defibrillator on site, available to all three units. The Manager told the team that she had close family involvement with all the residents, holding regular group meetings as well as individual reviews of care plans every 4 - 6 weeks. She monitored quality issues and families are involved.

Physiotherapy, opticians, dieticians and chiropodists were accessible but the Manager was finding it difficult to contact dentists. Most residents would be taken to the barbers but two preferred family members to cut their hair.

All catering was done in-house, much being prepared by the residents themselves – some were able to be taken shopping in the local Sainsbury's, where the staff were helpful. All residents chose one meal a week; they could eat what they like, being guided by healthy eating plans. Plenty of fruit and vegetables were available; all staff have to learn to cook. All residents were weighed, some weekly and some monthly. No-one needed assisted feeding.

Residents' disabilities were mainly non-verbal, autism, severe learning disabilities and associated behaviours.

Cleaning was done by the staff, a lot by the night staff and there was a maintenance person on site. The Manager checked the water temperatures regularly.



Birthdays etc were celebrated, depending on family choice.

There was a small social fund which could be used for such events and the families were involved. Residents' religious needs were mainly dietary: there was one resident of Arab origin who bought and prepared his own food and another of Jewish origin who observed the Sabbath, when candles were lit; he also had his own dietary needs met.

Hospital discharges were not accepted after 6 pm.

The setting

The team saw and spoke to several staff members who were busy, each one doing one-to-one care. The nature of residents' disabilities precluded talking with them and no relatives were available at the time of the visit.

All laundry was done on site with the help of two large washing machines and there was a washing line in the garden. All equipment seemed to be in full working order, apart from a washing machine which was awaiting repair. One resident was watching Teletubbies on TV with his carer.

The team were shown around the unit, which was all clean, odourless and tidy. Self-service breakfast dispensers were on a table in the dining room, which had many windows and thus was quite bright and pleasant, overlooking a large sunny garden where some gardening was encouraged. Tables and



chairs were available for use in the garden when the weather allowed, and the Manager emphasised that there was a vegetable patch that residents were encouraged to cultivate and harvest so that they could then cook and eat the vegetables they had grown.

Conclusion

The team concluded that this establishment is being run well; there was a happy atmosphere. The Manager showed a lot of enthusiasm for her job and appeared to be well in control of all aspects of her work.

The Team did not wish to make any recommendations.

Acknowledgments

Healthwatch Havering thanks everyone at The Paddocks for their co-operation before and during the visit.



Participation in Healthwatch Havering

Local people who have time to spare were welcome to join us as volunteers. We need both people who work in health or social care services, and those who were simply interested in getting the best possible health and social care services for the people of Havering.

Our aim was to develop wide, comprehensive and inclusive involvement in Healthwatch Havering, to allow every individual and organisation of the Havering Community to have a role and a voice at a level they feel appropriate to their personal circumstances.

Members

This was the key working role. For some, this role will provide an opportunity to help improve an area of health and social care where they, their families or friends have experienced problems or difficulties. Very often a life experience has encouraged people to think about giving something back to the local community or simply personal circumstances now allow individuals to have time to develop themselves. This role will enable people to extend their networks, and can help prepare for college, university or a change in the working life. There was no need for any prior experience in health or social care for this role.

The role provides the face to face contact with the community, listening, helping, signposting, providing advice. It also was part of ensuring the most isolated people within our community have a voice.

<u>Healthwatch Havering Friends' Network</u>

Join our Friends' Network for regular updates and other information about health and social care in Havering and North East London. It cost nothing to join and there was no ongoing commitment.

To find out more, visit our website at https://www.healthwatchhavering.co.uk/advice-and-information/2022-06-06/our-friends-network-archive





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