

Alexander Court Care Centre

Enter and View Report



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1. Introduction

1.1 Details of visit

Details of visit:	
Service address	320 Rainham Road South, Dagenham, RM10 7UU
Service provider	Bondcare Care Homes - Alexander Court Care Centre
Service area	Barking and Dagenham
Date and time	05/03/2025
Authorised Representatives	Jenny Hadgraft (Authorised Representative) Val Shaw (Authorised Representative)
Announced/Unannounced	Unannounced
Contact details	Healthwatch Barking and Dagenham LifeLine House Neville Road Dagenham RM8 3QS 0800 298 5331 info@healthwatchbarkinganddagenham.co.uk

1.2 About the care home

- Alexander Court is a residential care centre, providing care for up to 82 residents, offering elderly care, end of life care and younger care. It is a three story building, comprised of five units. Residents with advanced dementia are cared for on the third floor of the centre. Other residents have various disabilities, disorders and behaviours.
- The home has a large garden. Rooms come with an en-suite, phone point and access to the internet. The centre has a sensory room, and quiet areas.

1.3 Acknowledgements

Healthwatch Barking and Dagenham would like to thank the service provider, service users and their relatives, and staff for their contribution during the visit.

1.4 Disclaimer

Please note that this report 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 observed and contributed at the time of the visit.

2. What is Enter and View?

- The Health and Social Care Act 2012 allows local Healthwatch to carry out Enter and View visits.
- Authorised representatives are recruited and trained to carry out visits to observe specific settings and give feedback.
- During a visit information is gathered through the experiences of service users, their relatives, friends, and staff to collect evidence of the quality and standard of the services being provided.
- 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.
- The visits enable us to share examples of best practice and make recommendations where improvements are needed from the perspective of people who experience the service first-hand.
- An opportunity to give authoritative, evidenced-based feedback to organisations responsible for delivering and commissioning services.
- The visits assist local Healthwatch to alert Healthwatch England or the Care Quality Commission to concerns about specific service providers of health and social care.
- If you are interested in finding out more about Enter and View visits or Healthwatch Barking and Dagenham, then please visit:
www.healthwatchbarkinganddagenham.co.uk

2.1 Purpose of Visit

Our goal was to observe and interact with both residents and staff, focusing on the following areas:

- How care homes plan and deliver their activities.
- Gathering insights from residents about the benefits of these activities on their overall mental well-being.
- Exploring how residents are involved in co-designing activities at care homes, including those that address their spiritual needs. Since bedbound residents are particularly vulnerable to social exclusion, this project aims to highlight the voices of those most at risk.

2.2 Strategic drivers

A recent Enter and View at a care home showed some good practices for providing activities but a lack of co-planning with residents. During the visit, some residents also voiced that they were not asked about activities they would like to take part in. Therefore, Healthwatch Barking and Dagenham wanted to visit a proportion of care homes in the borough to

HW hopes to collect quality data by having face-to-face conversations with residents living in various care homes and determine how their current offer of leisure and spiritual activities meets residents' needs and enhances their well-being.

2.3 Methodology

Before the visit:

- Authorised representatives attended a pre-visit meeting where the questionnaire was designed. The date and time were also set for the visit.
- This was an unannounced visit carried out by Healthwatch Barking and Dagenham authorised representatives to observe the provision of services offered to residents and to review the quality of care given to the residents.
- Feedback received from the visit is used to inform service providers and commissioners about resident's and staff experience in the nursing home.

Day of the visit:

- The Healthwatch team arrived at the care home at 10:30 am. A member of staff used an intercom buzz to open the door to the reception to allow Authorised Representatives access to the building. They were given access to the building by a receptionist using a secure access button on the door.
- Authorised Representatives waited in the reception to be greeted by the deputy manager Chanel, who after some explanation regarding the nature and purpose of the visit, welcomed us into the home.
- The team spoke with Chanel and Tania, an activities coordinator about the activities that the centre offer. We were shown a folder of photographs of residents taking part in a wide variety of activities and shown an extensive events planning document.
- We were shown a sensory room that contained various textiles and mood lighting that is used by residents with dementia.
- We noted that each unit that we saw had a large board showing what activities are on.

- We saw a bedroom that had been painted dark green to represent the resident's Islamic faith, with a prayer painted onto the wall, as chosen by the resident.
- Representatives were guided by staff as to the most suitable residents to talk with as many of the residents have dementia. Staff introduced us to residents that were able to provide feedback, and to some relatives that were visiting loved ones.

3. Findings

3.1 Leisure and educational activities

Overall, we two family members spoke on their loved one's behalf, and two residents were asked how often they participate in activities. We were also introduced to another resident, but they opted not share their views.

Three individuals indicated 'weekly' participation, while one said they take part 'daily.'

Healthwatch Barking and Dagenham would like to note that authorised representatives were advised to not carry out surveys with residents who had dementia, as this would prevent the gathering of accurate information.

Residents were asked to provide more information about their involvement in activities, and here is the feedback that they provided:

"My mum loves singing and when the singer comes in"

"They do lots of activities but none at the weekend"

"[My wife] can't get involved in much but she enjoys just being there [the activity] and taking it in"

Next, residents were asked what types of activities they enjoyed most. Three responded that they enjoyed social activities, while one preferred physical and creative activities. When asked for further details, residents shared the following comments:

"My mum loves colouring and watching the DIY shows on TV when she gets too tired to join in. She likes the wine and cheese nights"

"I love singing"

"I like the hoopla game, and we go out for dinner sometimes"

"I like to read"

Residents' feedback indicates that social activities are highly valued by most residents.

Following that, residents were asked to indicate how they felt following engagement in those activities. One resident felt energised, relaxed and more socially connected, one described that felt happy, and two felt relaxed. When asked to specify their answer, residents provided these comments:

'She feels happy when she is around other people'

"She likes to be involved even though she can't really take part"

"The arts activities have a calming effect"

Residents' comments suggest that engagement in various activities helps them to feel connected to one another, even if the resident cannot participate. However, it is important to acknowledge that for those who may be more unwell than others, these activities can have a tiring effect.

The following question asked residents if they faced any challenges or barriers in accessing activities at the care home. All of the residents said there were no barriers.

Next, residents were asked if they were consulted on what their preferred activities were. One relative said that it was hard to say, but they know that if she suggested that there was an activity that her relative would like to do, the staff would do their best to arrange it. She described the staff as 'really good'. Another resident was unsure, but that they were happy to do everything that is on offer. One resident said that yes, they are consulted. One resident did not answer this question.

When asked to provide more comments relating to that experience, residents provided these comments:

'If there was an activity that mum would like, I would ask the staff and I know they would try to make it happen. The staff are really good here.'

'Happy with the activities on offer anyway.'

It is difficult to surmise if the people we spoke to are regularly asked what they would like to do, however the responses indicate that they are happy with the range of activities and that staff are receptive to requests.

3.2. Religious and Spiritual Inclusion

The next part of the survey was focused on religious and spiritual inclusion. Residents were asked if they practised a religion. One resident was not religious, while three said 'yes'. Following that, those who answered 'yes' were asked if they felt that their spiritual and religious needs were catered for. Two answered 'yes' and one answered 'no'. Residents were asked for more information, and they provided these comments:

'I am religious but not interested in lots of religious activities'

'We celebrate Christmas'

'My mum was brought up as Catholic – there is holy communion each month.'

The responses and comments from the residents suggest that the current support in place meets their religious and spiritual needs.

Next, respondents were asked how their spiritual and religious needs are addressed. The feedback included:

- The three residents agreed that celebrations of religious festivals are acknowledged, and one added that religious services such as mass/sermons are catered to, and another resident took part in prayer groups or individual prayer sessions.

2.3 Impact of taking part in religious and spiritual activities

When asked if they felt those activities reflected and respected residents' diverse spiritual and religious beliefs, two people shared feedback, agreeing that the home catered for all religious and spiritual needs, but they did not provide any examples.

Authorised Representatives asked how often they participated in religious or spiritual activities, one respondent told us it was monthly, and another indicated that it is 'two or three times a week'.

When asked if there were any challenges or barriers to accessing religious or spiritual activities within the care home, two responded with 'no', but the other person did not comment.

Next, respondents were asked to rate the overall impact of the activities and spiritual support provided at the care home. Two respondents that answered this question rated it as 'excellent' and two described it as 'good'

“I love going out to eat and having a chicken dinner. I had not had it before”

‘The activities we do are good.’

Residents were then asked if the activities and spiritual support being provided were helping them stay connected to their values and beliefs. All four responded to this question with a ‘yes’.

Residents that were approached did not have any language barriers, which could make it difficult to take part in leisure or spiritual activities.

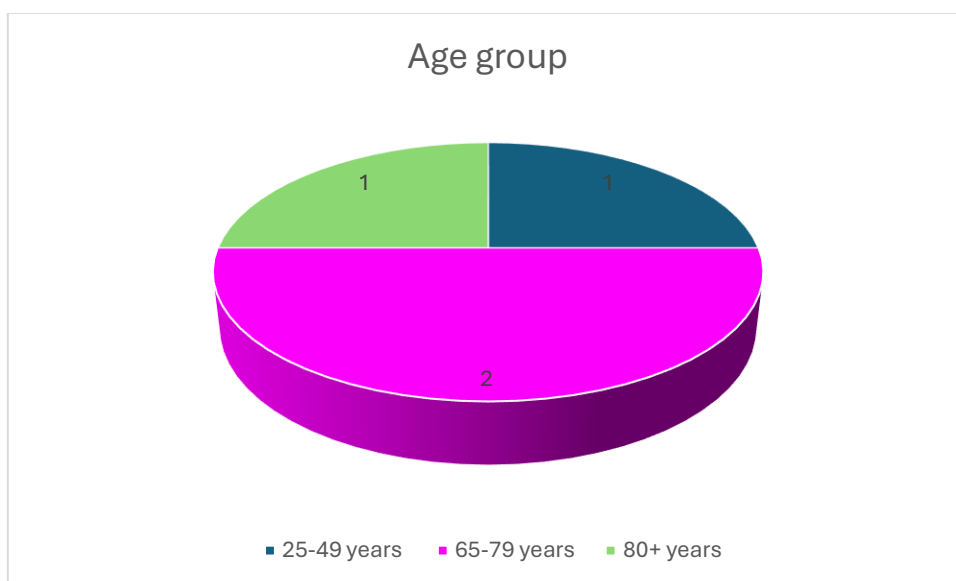
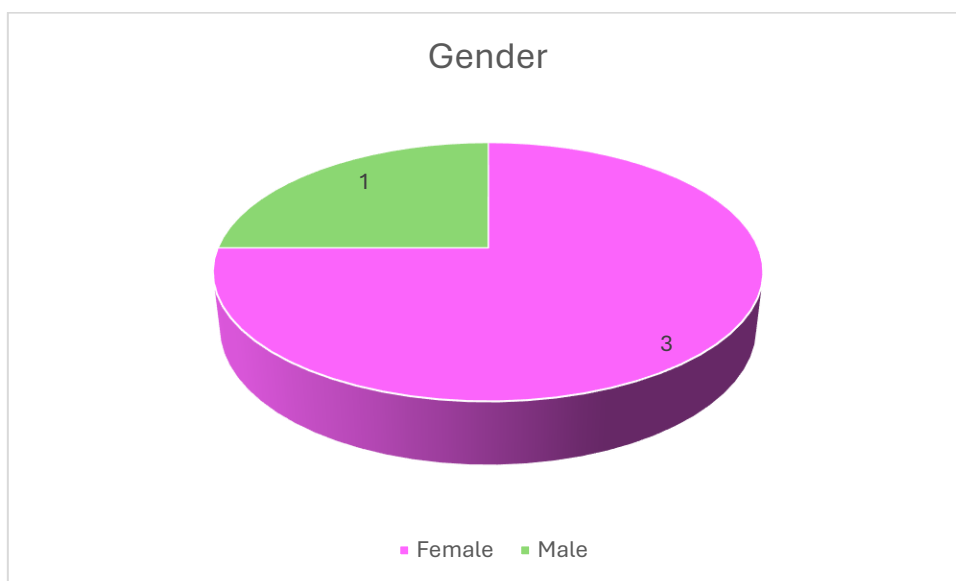
Residents were also asked how the care home encouraged the involvement of family, friends and community. Residents provided these comments:

‘Not sure but they work very hard’

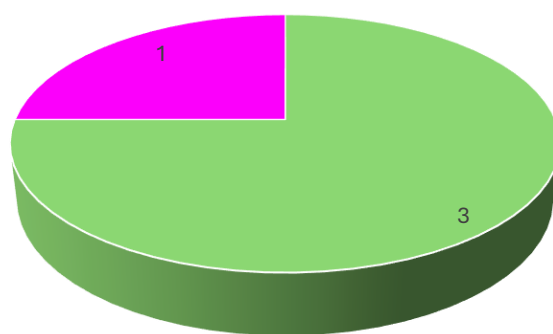
‘They ask your family if they want to get involved’

‘The staff are always encouraging us [relatives] to be involved’

3. Demographic background

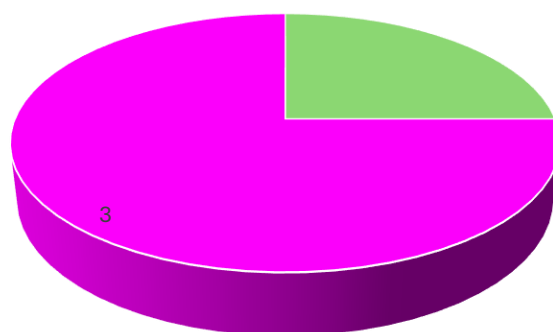


Ethnicity/Race



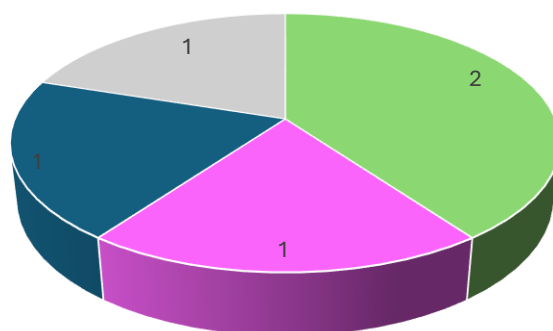
■ White British ■ Black British

Religion



■ No religion ■ Christian

Health conditions and disabilities



■ Dementia or Alzheimer's Disease ■ Asthma ■ Deafness or hearing loss ■ None

3. Feedback from care home staff

We spoke with Chanel, deputy manager and Tania, activities coordinator, who told us the following:

Range and frequency of activities

The care centre provides a range of activities for the residents, including theme nights such as a Hawaiian theme, and activities to mark occasions such as Pancake Day, St Patrick's Day, Mother's Day, Father's Day and more. Regular activities include indoor and outdoor activities such as arts and craft, gardening, making cakes and games such as hoopla. There is a coffee morning twice a week.

There is a sensory room in the unit that caters for those with more advanced dementia, and it is a good place for them to feel calmer if they are in an agitated state

Less frequent activities include a monthly activity when a singer comes in, bi weekly visit from the hairdresser, and annual visits from the local farm so that the residents can engage with pet therapy. The care home allows visitors to bring pets with them, and the resident enjoy being able to interact with the animals.

Residents that are able are also taken on shopping trips, to the local Pie and Mash shop, the nearby park, and for meals at a nearby restaurant. They hold an annual summer fete for the residents, including a raffle, and members of the local community are also invited to attend and celebrate dates such as Easter and Christmas.

Planning of activities

Activities are planned six months in advance and the timetables are displayed in each unit around the home. A residents meeting takes place every three months and gives the opportunity to discuss activities within the home.

Family Involvement

When a resident first arrives at the care centre, the staff speak with relatives to build a picture of the resident's life history, such as what jobs they have had, and what their interests are.

The home has binders full of pictures of residents engaging in activities, which family members can view, and these pictures are also displayed in the rooms of residents who choose to do so.

The care home enables family members to input their ideas and suggestions on activities, by holding a relative's meetings every three months, but are always open and receptive to feedback outside of these meetings.

Engaging residents in activities

Residents that are resistant to engaging in activities are encouraged to do so in various ways, for example, the staff will give them a personal invitation so that they are more motivated to be involved, or a family member will join them in an activity to make them feel more comfortable. Staff liaise with family members to find the best way to

approach the situation for the resident. Bed bound residents, or those that need extra support for are also catered for, as staff provide activities that can be done on a 1-2-1 basis.

Support for the Care Centre

The deputy manager underlined the necessity for more support from the council to enable them to run more activities for their residents, especially due to closure of day centres. She would like the council to increase the viability of local groups to be able to come into the care home and entertain the residents, as the financial burden of this is unsustainable for the care home and not all residents can contribute. This restricts activities that could be very beneficial to wellbeing such as trips to the seaside.

5. Recommendations

On reflection of all the evidence collected during the visit, Authorised Representatives found the visit to be positive and has the following recommendations:

- Healthwatch Barking and Dagenham recommend that care home staff, continue to actively engage residents to participate in activities.
- Healthwatch Barking and Dagenham recommend that the care centre continues to provide activities that socially connect people, as these types of activities are highly valued by the residents we spoke to.
- Healthwatch Barking and Dagenham recommend that care home staff continue involving residents in activity planning processes.
- Healthwatch Barking and Dagenham recommend that the care centre ensures that all relatives are informed about the relative's meetings.
- Healthwatch Barking and Dagenham recommend that an activity timetable is also displayed in the reception/lobby area, as we did not one observe one on arrival.

6. Response from the Service Provider

Abiodun Sanusi, Home Manager, provided an action plan about the recommendations made following a visit on 05/03/25

- We will continue to actively engage residents to participate in activities as much as we can, even at the unit level when activity is ongoing in the main activity room. We will ensure that all residents/relatives continue to be part of the decision-making.
- We will plan more outdoor activities as much as we can in relation to our budget this summer to encourage outdoor and community socialisation
- We will continue to involve resident/relatives in activity planning to continue to meet their needs
- We will keep informing residents and circulate the reminder around the home and units. Wherever possible, we will encourage face-to-face.
- We have displayed the activity timetable and aim to continue to display this around the home and the units



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