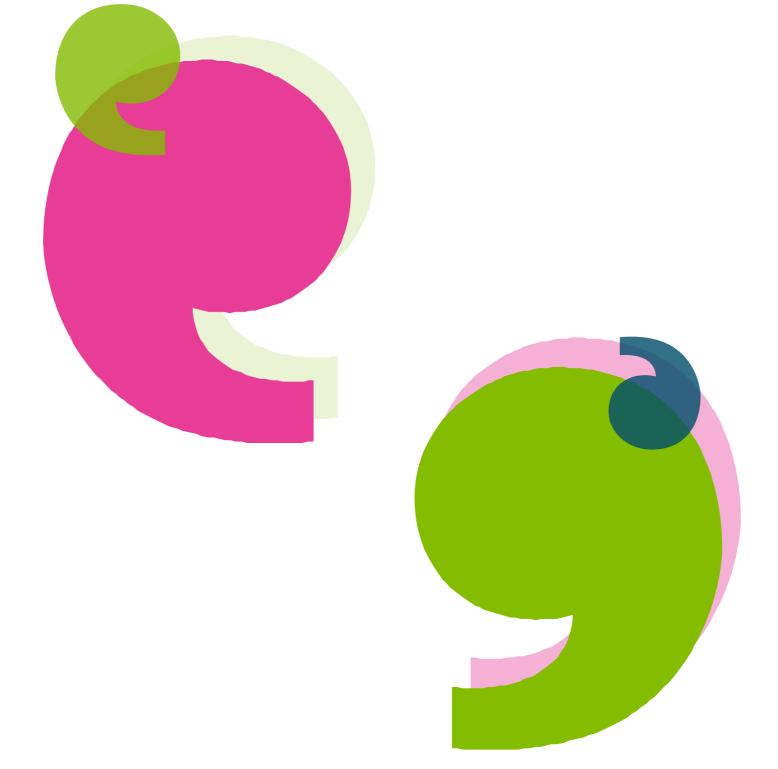


ENTER AND VIEW REPORT: Bradbury Home



Details of visit:	
Service address	Bradbury Home 2 Roots Hall Drive Southend SS2 6DA
Service provider	The Salvation Army Social Work Trust
Date and time	Friday 15 December 2pm-4pm
Authorised representatives	Leanne Crabb (Healthwatch Southend staff), Deborah Webb (Healthwatch Southend staff), Jan Stannard (volunteer), Wendy Dodds (volunteer), Jackie Olver (volunteer)
Contact details	(01702) 416320
Service provided	34 bed residential home for frail older residents, some with dementia.

1 Purpose of visit

Our visit to Bradbury Home was conducted as part of a series of pre-arranged visits to residential care homes across Southend.

National charity, Independent Age, have been carrying out research looking at the things that older people and their families want to know when choosing a care home, as well as consulting care experts for their views on what are the most useful indicators of quality. They have developed a set of 10 Quality Indicators for care homes.

Independent Age intend to use these Quality Indicators to call for better reporting of key data by care homes. This will help older people and families make more informed decisions, while also helping the Care Quality Commission (CQC), local authorities and Clinical Commissioning Groups (CCGs) to build up a comprehensive picture of quality in care homes - something that is currently difficult to do.

We will use these Quality Indicators to talk to staff, residents and family members

in older people's residential care homes in Southend to see how they meet the 10 Quality Indicators.

Through this work we aim to:

- Provide a different type of information, based on personal testimony, to help fill the gaps in what people can find out from the Care Quality Commission, the local authority and the care homes themselves.
- **Seek out and share best practice** and provide feedback to care home providers based on our observations.

2 Key findings

- While visiting we heard that Bradbury Home has excellent responsive staff but although the residents knew who the Manager was the general feeling was they did not see enough of her.
- We heard that staff skills were good but we also heard some minor concerns about lack of staff.
- We understand that Bradbury Home has a very varied and full activities
 programme which was evidenced by photos and was praised very highly by
 some residents and seems responsive to their needs. We were not clear the
 extent to which the home tailors activities to residents' specific interests
 and would like to see more feedback routes for residents to give their
 opinions about activities, such as surveys, committees, 1:1s etc.
- We heard excellent feedback regarding the quality and variety of food available at mealtimes and were shown examples of menus. We were also given examples of how specific dietary requirements are met.
- We heard that residents have regular access to healthcare professionals such as GPs and dentists.
- We saw that it was not standard practice for staff to wear identifying name badges and residents, especially those with dementia, had difficulty in identifying and naming staff.

3 Results of visit

Context of the visit

We visited Bradbury Home on a Friday after lunch time by prearrangement with the manager. Various staff from the care home provider were also present. Some residents were just about to listen to guest singers, while other residents were in their bedrooms or seated in various common areas.

A good care home should...

1. Have a registered manager in post. The registered manager is the most important staff member in a care home - and the one responsible for ensuring quality standards, and residents' needs, are met. They should be visible within the care home, provide good leadership to staff, have experience of working in care homes and qualifications to help them do their job.

At Bradbury Home ...

The **manager** was not present for the visit but she had arranged for our posters announcing the visit to be put up around the home the week before our visit. In a prior phone call the manager was very positive and welcoming about our visit and encouraged us to talk to staff members.

Two **staff** members told us about the training which was provided to them by the manager and felt they were well supported. They said they received regular supervisions. Several staff felt they could approach her if they had concerns.

Two residents said they did not know the name of the manager, four residents did know who she was but all commented that they did not see her around much. General consensus was that residents would like to see the manager interacting with them more.

The family member said she had met and spoken with the manager.

Does Bradbury Home meet Independent Age's indicator?



Yes, partly. Some concerns were raised by residents which seem to be due to the lack of visibility of the manager but generally staff felt they were well led.

2. Have a stable workforce. Care homes with knowledgeable, experienced staff who get to know residents can make the difference between an institution and a home. Where turnover of staff is very high, these qualities can be lost. It may also be a sign that staff are not happy working in the home.

At Bradbury Home...

Three of the six residents and one family member we spoke to felt that there sometimes wasn't enough staff resulting in wait times for help with getting a drink or going to the bathroom. They said this was especially true at night.

Two residents commented on the amount of paperwork the carers have to do meaning they had less time to give hands on help to the residents.

Most of the residents' comments regarding the staff were very positive such as "they are all decent", "the staff are all nice", "they are very kind", "they are polite and friendly".

All six residents we spoke to agreed they were treated with respect, and two residents said they felt the day staff, who tend to be regulars, were better at meeting their needs as the night agency staff didn't have a good understanding of what support they needed.

We spoke to five staff covering a variety of roles and their feedback was very positive including "this is one of the best care homes I've worked in", "we work together like a family", "I like working here", "everyone works hard as a team".

A few residents said they knew the staff - though not their names which caused confusion at times. No staff had visible name badges and when residents were asked to point out staff most were unable to do so. Two residents commented that they know some staff but that a lot of the staff changes, with one resident saying that this caused problems because they then had to explain their preferences all over again to new members of staff.

Does Bradbury Home meet Independent Age's indicator?



Yes but... Residents being unable to identify staff could be easily rectified with the use of name badges.

3. With the skills to do their jobs. Well informed, skilled staff who are valued and developed as employees are vital to a smooth running care home. All care homes should have a clear, comprehensive training scheme to ensure staff have the knowledge they need.

At Bradbury Home...

Two staff members told us that since being at Bradbury Home they had completed basic principles of care training, manual handling and the inductions as well as other courses. Two agency staff said they had done all their compulsory training via their agency and they hadn't been allowed to start at the home until this had been evidenced.

All five staff spoken to felt they had access to the training they needed and that it was all up to date.

All staff spoken to said they had regular supervisions and one commented that

"they felt listened to in staff meetings".

Does Bradbury Home meet Independent Age's indicator?



Yes

4. Have enough staff on duty during the day and night. Many homes have a lower proportion of staff on during the night, but if the ratio falls too low - at any time of day - response times can be too slow.

At Bradbury Home...

One **staff** member told us that there is around one staff member for every three or four residents but the staff member wasn't entirely certain about the ratios and told us that staff levels can vary depending on the need. One staff member commented that "there are times when demand is high and there are not enough staff".

One **family** member and three residents said that they felt that residents had to wait too long for staff due to there not being enough, especially at night.

One resident said that staff do come quickly if they need help but one added that at night they have needed help sometimes and they have "had to wait".

A resident commented that "there are not enough staff if I want to go into the garden".



Not clear. While staffing levels do not seem to be unsafe, the feedback we received conveyed a sense that staff can be put under too much pressure.

4. Be clear about how they will be able to meet your needs both now and in the future. Many of us will develop more care needs as we get older - particularly if we have a condition like dementia. It is vital that homes can spot changes to residents' health and respond appropriately - consulting other health professionals where necessary - in order to provide the right level of care, and prevent you from having to move again.

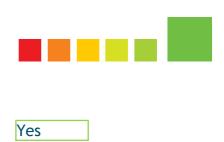
At Bradbury Home...

One staff member told us that they would change the resident's care plan when needed. A second staff member said that they would pass on changes to the team leader to sign off. A third staff member said that they would notice changes as they know the residents.

Three residents said they would be happy to tell staff of any additional help they needed, although two mentioned that they would wait for the day staff.

We were shown evidence of a care plan being updated to reflect changing dietary needs as suggested by a GP.

Does Bradbury Home meet Independent Age's indicator?



5. Actively involve residents, family, friends and their local community in the life of the home.

Homes should not have set visiting hours, or any other arrangements that

make them feel more like a hospital than a home. They should have good links with the local community, for example by arranging visits from local schools.

At Bradbury Home...

While we were there visitors were coming and going and didn't seem restricted by visiting times.

A member of staff said there is some involvement with the community through inviting the community into the home and through taking residents out into the community. We were shown photos of residents visiting various places in Southend and of singing groups, schools etc visiting the home.

One staff member told us that they think the home encourages relatives to come in family can come and join the activities and talk to the staff.

One resident said they have been taken to markets, taken shopping for shoes and can go to church services and family members can join in.

A couple of residents talked about the variety of singers and dancers that came to visit them.

Does Bradbury Home meet Independent Age's indicator?



Yes

6. Offer meaningful activity and enjoyment to suit all tastes. Care homes should not be boring places - they should offer an interesting range of activities and entertainment that match the tastes and preferences of their residents, including support for individual activity. Homes should take steps

to stop residents from becoming isolated or lonely while respecting their privacy and choice.

At Bradbury Home...

The activities coordinator said she keeps a record of who is joining in activities so she can see if anyone isn't joining in, and can ask them what they would like to see. She showed us photo albums she is keeping which record day trips out and events at the home so residents can look through it to remind themselves what they've done and where they've been.

We were shown evidence of many trips including markets, the bandstand, parks, Sealife Centre and music.

Residents talked about recent activities which have been arranged for them such as manicures, massages, crafts, quizzes, singers and dancers.

Staff told us that residents can suggest activities and that they aren't forced to take part in any activities. One staff member mentioned one resident who never want to get involved and that they had made a special effort to ask them what activities they would be prepared to take part in but that they preferred to relax and look out their window.

One resident says she likes art and is allowed to design cards for the home.

All staff said the activities coordinator encouraged residents to join in if they wanted to and would adapt activities for wheelchair users and one member of staff said the coordinator would go into rooms if someone was bedbound and paint their nails or do other things they may want to do.

One resident listed activities and told us that "there is an incredible range of activities" and that they join in with all of them. They said "we've had some great guests, we had a beautiful young dancer come in last week, and it was lovely to watch".



Yes. Everyone spoke highly of the activities and we saw good evidence of the variety during our visit.

7. Make sure that you can see a GP or other health professional like a dentist, optician or chiropodist, whenever you need to. You have the same rights to see a health professional promptly if you are living in a care home as you would if you were living in your own home. Ask the care home about the relationship they have with their local NHS services - does a GP visit regularly? Can they call a GP out in an emergency? How easy is it for residents to see a dentist, optician, chiropodist or physiotherapist, either for a check-up or in an emergency?

At Bradbury Home...

One resident said a GP comes in once a week and is called out if they need him sooner than that. Another resident confirmed the doctor visits every Thursday.

A staff member said that as well as the regular GP visits they call out GP/dentist/optician etc whenever they are needed.

A resident said they had people like that coming to see them when they were ill or had bad tooth pain. One resident mentioned they had to wait a while for a doctor when they had bad earache but that he does come and visit regularly.

One resident said that they didn't need to see a dentist as they have dentures and another resident said that the dentist comes in but that there is no choice of dentist.



Yes, fully. Everyone we spoke to told us that residents regularly see a GP and have regular access to other care.

8. Accommodate your cultural and lifestyle needs. Care homes should be set up to meet your cultural and lifestyle needs as well as your care needs, and shouldn't make you feel uncomfortable if you do things differently to other residents. They should also be proactive in finding out what your needs are, so they can accommodate them.

At Bradbury Home...

A family member said she was asked to provide a history of the resident's likes and dislikes when they first entered the home.

A member of staff said as it's a Salvation Army home all the residents are Christian and can access services.

One resident said "I like to go to a church service regularly and I can do that here".

One staff member said that the home catered for people's different food requirements and could be quite flexible.

A staff member mentioned that every resident has a care plan with their life history so staff can understand their cultural needs and that family members can have input in this.

A resident said they were able to decorate their own room exactly how they wanted it which made them feel as though they fitted in.

All residents spoke highly of their food options and the quality of the food.



Yes, fully. We were told that Bradbury Home accommodates residents' cultural and lifestyle needs.

9. Show that they're always looking to improve. You should be able to find out what current residents, their families and friends think about the home. The care home should be happy to help you do this - for example, by putting you in touch with a residents and relatives group, or allowing you to speak to residents and visitors in private. They should also have support in place for people who wish to make a complaint at any time, and there should be a healthy culture of challenge and feedback between residents, relatives and staff.

At Bradbury Home...

A staff member told us that they would "take on board" any suggestions from residents or family and see if they could be actioned. They said the family members are encouraged to talk about what's gone well each week or what could be improved.

One member of staff said there is a complaints procedure and that this is given out when residents move into the home.

All residents we spoke to said they felt comfortable either raising concerns with staff or telling their own family members who would raise it with the home.

In a phone call prior to our visit the Manager said they were very happy for Healthwatch Southend to come and chat to residents about their experiences and that she thought everyone should encourage feedback, good or bad.

The five staff members we approached during our visit were all very willing to spend time with us talking about the home.



Yes

4 Service provider response

Bradbury Home care to respond here...

Healthwatch Southend recommendation:

We would like to see Bradbury Home ensure that all staff have some form of name badge to help residents identify them.

Bradbury Home said:

New Badges were on order at time of visit and all staff now wear them daily.

Healthwatch Southend recommendation:

We would like to see the home's Manager be more visible for residents and spend more time with them to better understand their needs.

Bradbury Home said:

We are unable to comment on this in the manager's absence.

5 Background

5.1 What is enter and view?

Part of the local Healthwatch programme is to carry out enter and view visits. Local Healthwatch 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 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.

5.2 Strategic drivers

As part of our work, we aim to seek out the voices of those people who can be least heard: which includes people living in residential care homes. Many elderly people who are not able to live independently are residents of either nursing homes or residential care homes. Residents of care homes are, almost by definition, seldom heard with little choice and control. They live in an environment that is often isolated from the wider community and any expression of their needs, wants, preferences and experience is likely to be mediated by a third party - whether care home staff or relatives. Local people have told Healthwatch Southend that they want us to do some work ensuring that the voices of people in residential care are heard.

5.3 Methodology

Three Healthwatch volunteer Authorised representatives and two members of staff spoke to staff, residents and their relatives using a set of pre-prepared questions which follow the theme of the ten Quality Indicators drawn up by Independent Age (see "Purpose of visit"). The questions have been designed to draw out information on the ten key topics and have been tailored according to the audience. We spoke to five members of staff, six residents and one family members. "Family members" may comprise family or friends of residents or regular visitors to the home but have been referred to above solely as "family". Not all individuals were asked or responded to each question. Authorised Representatives made notes of their conversations. These notes form the basis of this report.

We agreed the visit with this service in advance and sent posters to be displayed to advertise our visit to residents, their relatives and staff. Authorised representatives wore ID name badges and made sure to gain individuals' agreement before asking the questions and verbally explain the role of Healthwatch Southend and the purpose of the visit. We have discussed our findings with the provider and they have been given opportunity to add context to what was observed and contributed at the time.

5.4 Acknowledgements

Healthwatch Southend would like to thank the service provider, service users, visitors, staff and volunteers for their contribution to the enter and view programme.

5.5 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 service users and staff, only an account of what was observed and contributed at the time.