

Autumn Lodge

Service address:	Autumn Lodge, 35 Rutland Gardens, Hove BN3 5PD
Service Provider:	Contracted to Brighton and Hove City Council
Date and Time:	Friday 11 th March 2016, 09:30 - 13:00
Authorised Representatives:	Sylvia New and Sue Seymour
Healthwatch Address:	Healthwatch Brighton and Hove Community Base, 113 Queens Road, Brighton, East Sussex BN1 3XG

Acknowledgements

Healthwatch Brighton and Hove would like to thank the service provider, patients, visitors and staff for their contribution to the Enter and View programme.

Who are Healthwatch?

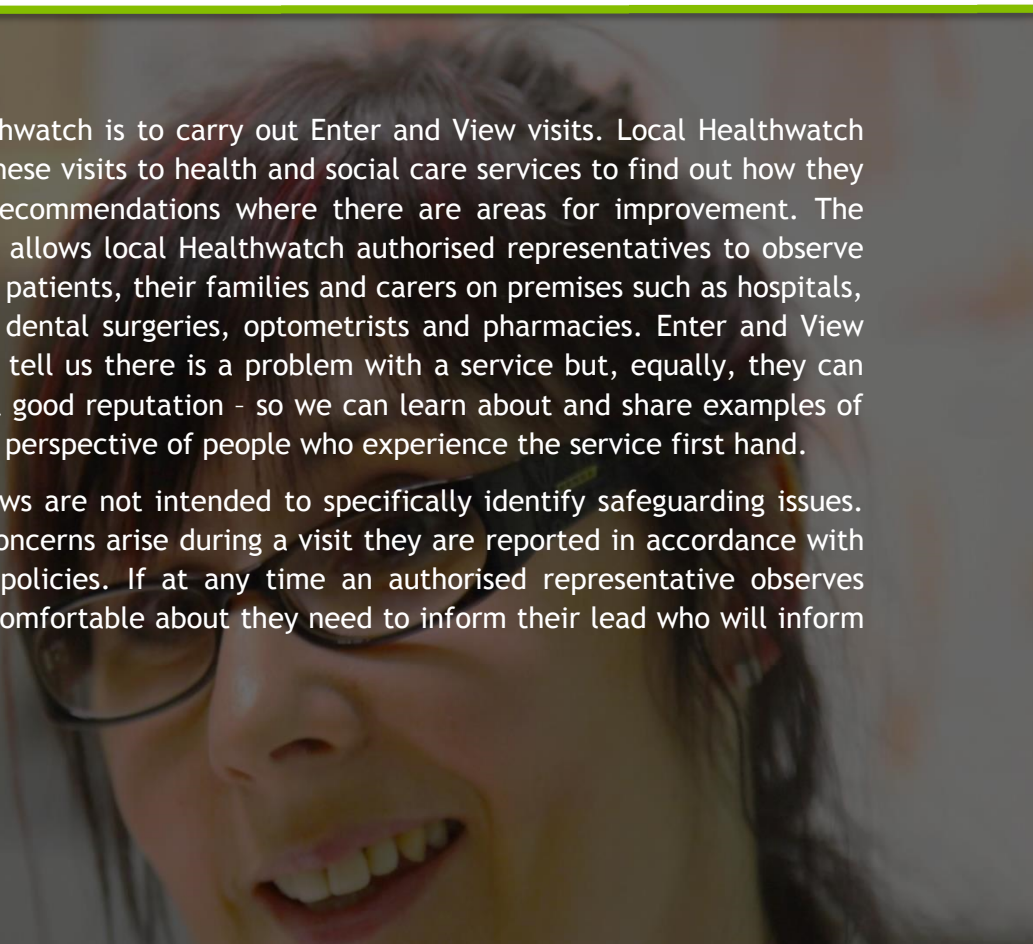
Healthwatch Brighton and Hove supports local children, young people, adults and their communities to influence the design, delivery and improvement of their local health and social care services, now and for the future. We enable people to make informed choices about their health and wellbeing by assisting them when they have concerns or complaints about these services.

Healthwatch Brighton and Hove is a part of the Healthwatch national network, established by the Government under the Health and Social Care Act 2012 to ensure local patients and users have a greater input to shaping and designing local services. There are 148 local Healthwatch organisations across England.

What is Enter and View?

A part of the role of Healthwatch 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 patients, their families and carers on premises such as hospitals, care homes, GP practices, dental surgeries, optometrists 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 we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager.





Why is Healthwatch Visiting Care Homes?

Healthwatch Brighton and Hove undertook a programme of visits to adult social care services across the city in early 2016. In total Healthwatch visit five services across the city with a range of different specialisations.

During our time in each service, authorised volunteer representatives spoke to patients, visitors and staff about their experiences of care and access to services, and recording what they see in the service's communal areas.

Healthwatch wants to understand how people involved in the services feel about them, and make recommendations to ensure that the services are of a high quality. This set of visits was initiated through some concerns raised on our helpline about primary care in-reach in local potential services. We then consulted our partners at the Care Quality Commission, the Clinical Commissioning Group and Adult Social Care to create a list of services to visit in the first three months of the year, and to finalise the questions we would like to ask them.

Methodology

Two Authorised Volunteer Representatives for Healthwatch Brighton and Hove visited Autumn Lodge on Friday 11th March 2016. The time and date of the visit were arranged in advance with the service. Both representatives were fully trained and supported by the Healthwatch. The representatives also completed a full Disclosure and Barring Service check prior to the visit.

Separate questionnaires were conducted for patients, relatives and friends of patients, and managers. The representatives also conducted an observation of the service in the communal areas. This allowed us to triangulate the information we received about the service. We received four completed questionnaires in total, all of which were completed by residents. Our representatives also talked to members of staff. Alongside the paper surveys, an electronic version of the survey was available for friends and family to complete over the period of the visit, to allow for the maximum amount of engagement possible. Unfortunately, we did not receive any responses from friends and

relatives on this occasion.

Healthwatch stresses that the Enter and View method is a snapshot of patient opinion and therefore may not capture the wider concerns of the patient population. Because of the specific requirements of some of the client groups, we aimed to spend time gaining quality information in an ethical way rather than seeking a larger volume of responses.

About the service

Autumn Lodge provides accommodation for adults over 65 years old, and provides personal and nursing care. It specialises in caring for adults with dementia.¹ Situated in West Hove, the service can accommodate up to 35 individuals, and has 23 single rooms with five double rooms, and an en-suite flat for couples.²

Results of the Visit

GP services

Autumn Lodge is currently on the clinical register of a nearby GP practice, which the majority of residents attend. Most residents attend check-ups at the local practice. Two of the residents our representatives spoke to on the day remembered having their own doctor, and recalled that they see their doctor quite often.

Dental services

Dental check-ups most commonly take place when a local dental practice visits the service. Some families choose to make their own appointments for the residents, and some residents are resistant to having their teeth checked. The residents our representatives spoke to were unsure of the last time they had a dental check-up, but one resident did confirm that dental services visited the home regularly.

Staff told our representatives that each morning there is a daily check on tooth cleaning and dentures, however some residents did not wish to comply. A resident

¹ [Autumn Lodge website](#), extracted 09.05.2016

² [Care Quality Commission Report](#), 23.03.2015, extracted 09.05.2016

confirmed that staff helped them with these tasks, and others felt they were able to carry the tasks out independently. Staff said that dentures are kept overnight in resident's rooms, so mix ups and losses are rare. Residents could not recall a time when dentures had been lost or mixed up.

Pharmacy

Staff told our representatives that the service is registered with the Electronic Prescription Service, and that prescriptions are delivered monthly. The Electronic Prescription Service (EPS) is a service that allows a GP to send a prescription directly to a chosen pharmacy. The residents we spoke to did not recall any mix ups or problems with their prescriptions.

Eye care and hearing care

Staff told our representatives that GPs will complete hearing tests as appropriate with residents. One resident recalled a recent hearing test, but the other three residents did not. None of the residents we talked to had hearing aids on the day of the visit. Staff informed our representatives that the maintenance of any hearing aids was the responsibility of the deputy manager.

Staff told our representatives that opticians come to the service regularly to check resident's sight. Residents confirmed that opticians visit the service regularly. The residents our representatives spoke to told us they cleaned and maintained their glasses themselves, and could not recall a time when eyewear was mixed up or lost.

Supplies and adaptations

Our representatives observed that signs including clear pictures for toilets were present, and staff mentioned that large print newspapers and magazine were available, alongside 'touchy/feely' items. However, our representatives also noticed that menus and other items were in smaller print and could appear cluttered and more challenging to read for visually impaired residents. Staff believed that adaptations for those who are hard of hearing were not really applicable to the service.

One resident told us that they use a walking stick, and no residents we spoke with

recalled a time when walking equipment was lost or mixed up. Staff told our representatives that the maintenance of walking aids was not really applicable to the service. Incontinence support was facilitated by the service.

Other important appointments and check-ups

Two residents at the service have diabetes, which is managed through twice daily visits by a district nurse. Any cancer screening takes place as part of national programmes through GPs, and staff meet daily to discuss resident's health and wellbeing. Podiatry services visit regularly for toenail cutting, and residents recalled times when this had occurred. No information was available for cancer screening, out of hours' care or NHS check-ups were observed, but this could be due to the nature of the service and its dementia focus.

Additional findings

Our representatives felt that colourful artwork and places like the reminiscence area were positive additions which made the service feel welcoming and personalised. Juice was available at all times, and water on request. Service staff were positive about their computer system, which allowed information about each resident to be stored and viewed as appropriate.

Summing up and looking forward

Autumn Lodge provided a range of primary care in reach for services such as eyesight and dental check-ups. Our recommendations reflect ways to improve and strengthen the current systems. The most recent CQC report for Autumn Lodge shows that the service was rated 'good' in all five areas³, although primary care in reach was not considered. Whilst residents can be encouraged to attend preventative healthcare appointments and have barriers removed to doing so, their choice to attend or refuse

³ [CQC Report Autumn Lodge](#), 23.03.15, extracted 09.05.16

treatment has to ultimately be respected.

It is unfortunate that friends and relatives of residents did not come forward with their views on this occasion, as their opinions and knowledge could have brought an additional layer to the information gathered.

Our Recommendations & Responses

1. Consider whether it is possible for the visiting optician to also conduct hearing tests at the Autumn Lodge, to improve the likelihood of regular testing.

Response

We have a referral system to the GP, who will check our patients and refer when necessary. Our current optician service is small and is unable to do both.

2. Review written materials such as noticeboards and menus to ensure that they are clear enough for visually impaired residents. This includes making sure text is large, clear and uncluttered by pictures or other information.

Response

We have now provided a daily menu for all residents in large clutter-free writing.

3. From the information gathered, it was unclear how Autumn lodge maintains walking equipment and improves the environment for hearing impaired residents. Review the current processes to see if the service is offering the best support for the relevant residents.

Response

We do visual checks and feedback from staff, residents and families which are put in the maintenance book. Walking equipment is maintained by NRS when necessary.

