

Enter and View Report: Rottingdean Nursing and Care Home

Service address:	30-32 Newlands Road, Rottingdean, BN2 7GD
Service Provider:	Brighton & Hove City Council
Date and Time:	Tuesday 18 th November, 1pm - 4pm
Authorised Representatives:	Sue Seymour and Paul Wilson
Contact details:	Healthwatch Brighton and Hove Community Base, 113 Queens Rd, Brighton, East Sussex BN1 3XG

Acknowledgements

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

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.

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. 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, ending the visit.

Purpose of the visit

Healthwatch Brighton and Hove has committed to conducting six Enter and View Visits between October 2014 - March 2015, themed around occupation and social activity. The theme was chosen using evidence provided by Healthwatch's predecessor, Brighton and Hove LINK. Healthwatch will visit a mixture of social care services including day centres and care homes. The locations have been chosen on the basis of their geographical location, the services they provide, and local intelligence from Brighton and Hove City Council and Brighton and Hove Clinical Commissioning Group. The combined outcomes of all six visits will create an overall report which will be shared with the council, looking at what people would like to spend their time in our local social care services.

Rottingdean nursing and care home is a medium sized residential home with nursing care. The home currently has very elderly residents, who are 90+ years of age.

Methodology

Two trained and DBS checked Enter and View Volunteer Representatives visited the service on Tuesday 18th November 2014. They talked with 6 residents and 1 member of staff at the care home. The representatives had some set open questions to ask the service users about the service they were using at the time, as well as any other NHS services they had recently used.

The representatives also conducted a short observation about activities and social occupation in the service. This involved the authorised representatives walking around the public/communal areas and observing the surroundings to gain an understanding of how the home actually works and how the residents and service receivers engaged with staff members and the facilities. There was an observation checklist prepared for this purpose.



Results of Visit

Spending time with other people

The residents that we spoke to, all felt that staff at Rottingdean were friendly, chatty and approachable. Our reps observed staff warmly chatting with residents all the time they were in resident's presence. Staff who came in and out of the communal areas asked residents about activities and their wellbeing, and the representatives felt that the atmosphere was warm and relaxed in the communal spaces.

 *They know me very well and my funny ways* 

On the day Healthwatch visited the home, about 10 of the 35 residents were in the communal areas. This was about the average amount of residents who came to activities each day. The activities coordinator mentioned that she would occasionally go to resident's rooms to provide the others with activities, and sometimes residents would take activities up to their rooms to complete. Whilst residents appeared fully engaged with activities and with staff, they were not observed talk to each other very frequently. Most residents did not answer when asked whether they felt they had enough contact with other residents, but some felt that they could talk to some people if they were sat in small groups.

Things to do

The activities coordinator works 4 days a week and creates a plan of things for the residents to do in monthly rotations. Almost all residents know who the activities coordinator is and how to reach her. The activities plan is available in every bedroom and the main dining room and lounge. Despite being printed in small text, the plan included some pictures to help residents to understand the schedule. Board games and films were not available the coordinator informed the reps that this was because of storage issues. However, a library of books and magazines were available, along with a daily newspaper. Residents told us that they borrowed books from the library regularly and enjoyed having them available.



 Cheryl arranges activities. We watch sports on TV, and activities such as 'sticking' I like that. I go to bingo with my daughter sometimes 

There is a lunch club for people who want to eat together, followed by an activity, then afternoon tea. On the day of the visit residents were sticking decorations on pictures of Christmas trees, in advance of the festive season. Other activities available on the plan included cake decoration, quizzes, and guessing objects in a bag. The activities co-ordinator said that there are also visits out in the minibus, singers, and exercise.

 We go on outings, to the beach, garden centres. I love going out. I would love to go out more 

Special occasions are marked with themed activities, like creating Christmas cards and other items. Christmas is celebrated with gifts from Santa, a raffle and tombola. Birthdays are celebrated with cake and flowers. No pictures of residents were observable on the walls of the communal areas. A garden is available to residents in summer. Regarding outdoor trips, residents told us that they visit shopping centres, the beach and garden centres locally. Some residents said they did not want to visit places outside of the care home, whilst others said they would like to go out more.

Overall

On a scale of 1 to 10, the average score from the residents was 8.6. No residents had any specific examples of activities they would like to do but are currently not doing, but some did refer to activities they did before they went to the care home that could be recreated within it, like light gardening or visiting a local football match.



Recommendations

1. Ensure activities plans are available in larger fonts to ensure accessibility.
2. Staff to encourage more resident to socialise with one another, as well as with staff members. Things like board games and other joint activities might assist with this.
3. Conduct a brief review of residents to double check that they are happy with the activities currently provided, and ask if there is anything else they would like to do.
4. Create a clear plan to ensure all residents are given regular opportunities to join in with activities, even if they usually do not want to participate.
5. Consider putting photos of residents and staff in communal areas to create a stronger sense of homeliness for residents.

Service Provider Responses

1. A large whiteboard will be put in the dining room with all the activities on it for residents to read.
2. Residents do interact with each other at lunch club. In the afternoons we will encourage staff to play board games with residents in small groups. Residents to have tea parties together and trips out together where they do interact.
3. Activities lady talks to each resident every day to tell them about activities. A program is put on their walls for the month. This can be in larger font.
4. Residents have an activities care plan. They are asked about their history and interests and hobbies when they come into the home. They are asked about what they would like to do while they are here and what they would like to achieve.
5. No Response

