

# Victoria Highgrove

Service address:	Victoria Highgrove, 59 Dyke Road Avenue, Hove BN3 6QD
Service Provider:	Contracted to Brighton and Hove City Council
Date and Time:	24 <sup>th</sup> February, 09:30 - 13:00
Authorised Representatives:	Maureen Smalldridge and Tim Sayers
Healthwatch Address:	Healthwatch Brighton and Hove Community Base, 113 Queer 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?

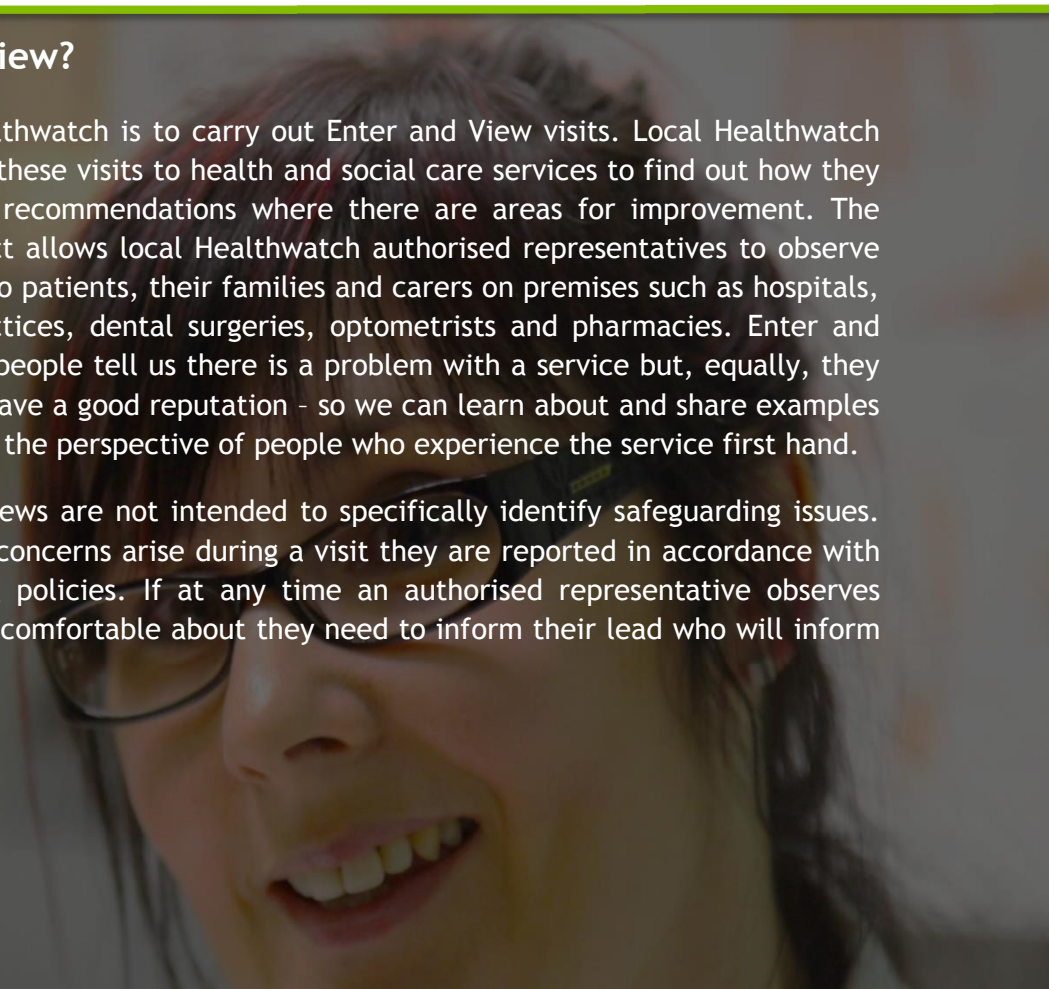
Healthwatch Brighton and Hove supports local children, young people, adults and their communities to influence the design, delivery and improvement of their local health and social care services, now and for the future. We enable people to make informed choices about their health and wellbeing by assisting 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, potential 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 we visited five services from 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 saw 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 Vitoria Highgrove Nursing Home on 24<sup>rd</sup> February 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 office. They also completed a full Disclosure and Barring Service check prior to the visit.

Separate questionnaires were conducted for patients, relatives and friends of patients, manager and staff members. 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 patients. Our representatives also talked to two members of staff and manager. Alongside the paper surveys, an electronic version of the survey was available for friends and family to complete the week before and after the visit, to allow for the maximum amount of engagement possible.

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

### About the service

Victoria Highgrove is a nursing home, which specialises in caring for adults over the age of 65 years in an intermediate care capacity.<sup>1</sup> Victoria Highgrove is registered to provide nursing and personal care for up to 23 people. Care is provided to older people and is one of four homes owned by the provider in the surrounding area. The provider has a contract with Brighton & Hove City Council to provide intermediate care.

## Results of the Visit

### GP services

Because the service is an intermediate care facility, patients were not registered to a GP via the service itself, as they do not stay long enough for this to be appropriate. This also meant that annual health checks did not take place in the service due to the duration of stay, and materials were not available regarding NHS health checks. During their stay, the majority of patients told our representatives that they saw a GP roughly once a week. One individual told us they had only been seen by a GP once, and had been in and out of intermediate care since late last year.

### Dental services

Because of the temporary nature of the support provided at Victoria Highgrove, scheduling regular dental check-ups would not be proportionate to the length of time people stayed at the service. If a problem was identified, staff told our representatives that they would contact an NHS dentist and ask the patient and their relatives about the patient's medical history regarding dentistry.

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<sup>1</sup> Based on CQC records for [Victoria Highgrove](#)

Staff have a checklist to complete with patients which includes an item on cleaning dentures or teeth regularly. This item is also included in the care plan for each patient. Patients told us that staff helped them to keep their dentures or teeth clean when they needed them to, and that patients did this independently where possible. The service took precautions to avoid losing or mixing up dentures by ensuring that cleaning only takes place in individual's rooms, and labelling boxes as appropriate. The patients our representatives spoke to did not recall any incidences of dentures being lost or mixed up by the service.

## Pharmacy

The service is not currently registered for the electronic prescription service. The Electronic Prescription Service (EPS) is a service that allows a GP to send a prescription directly to a chosen pharmacy. Currently paper prescriptions are faxed to a local pharmacy and are delivered to the service directly. The patients we spoke to did not recall any mix ups or problems with their prescriptions.

## Eye care and hearing care

Hearing and optician check-ups were not appropriate for the length of time individuals stay at the service, but they are arranged as appropriate. Staff are developing a programme to improve eye health. Some patients said that they did have hearing aids, but preferred not to use them and didn't take them in to Victoria Highgrove with them. Staff at the service were unaware of the sensory services team<sup>2</sup> and how they relate to the service.

Staff clean some patient's glasses daily to ensure they are working properly. They are also trained to do daily checks on hearing aids to ensure they were working well and clean, and took out and put in hearing aids as requested by patients. All of these checks are documented. Staff told our representatives that they worked closely with the audiology department at the Royal Sussex County Hospital, and would send hearing aids to be cleaned or fixed as needed. One staff member told representatives that

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<sup>2</sup> [The Sensory Services Team](#) provide support for visual and hearing impaired individuals

some glasses were labelled from hospital admission, and another implied that the service labelled the glasses themselves. One patient recalled a time when their glasses were lost in the hospital.

## Supplies and adaptations

On the day of the visit our representatives did not observe any adaptations for those with visual impairments. The staff told our representatives that things are handled on a case by case basis, but that if someone with visual impairment accessed the service adaptations such as decluttering, ensuring the area was light, bigger if possible, and that magnifying glasses were available. Adaptions would also be made for hearing impairment as required.

Staff told our authorised representatives that they have physiotherapists and occupational therapist available to assess equipment and need. These assessments are arranged by the local clinical commissioning group. All the patients we spoke to require some form of walking aid, including walking sticks and Zimmer frames. Those that required incontinence support had this provided by staff.

## Other important appointments and check-ups

All patients have their blood sugar monitored on admission if they are diagnosed with diabetes, and take advice from families on caring for the individual. Screening for cancer is inappropriate given the nature of the service, and screening information was not available at the service. Toenail cutting was available on request.

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## Additional findings

Small noticeboard was visible on the day of the visit, but as patients were usually having bed rest or were escorted to communal areas for lunch or activities, we could argue that information displayed there may not be used by them. Notices were on display about coffee mornings and afternoon teas. Water was always available to patients in their rooms, and tea and water was served at lunch times. Our representatives felt that communal spaces could benefit from some redecoration.

## Summing up and looking forward

In general the service had lots of areas of good practice with regards to primary care and primary care in-reach. Because of the transitory nature of the service, preventative check-ups were not appropriate, but the service did well to maintain equipment as and when required. Our representatives felt that standard of care was very high because of the hard work of the service manager. The most recent report from the CQC rated the service ‘good’ in all areas of service<sup>3</sup>.

## Our Recommendations & Responses

1. Consider what information on screening, NHS check-ups and other preventative healthcare information could be available for visitors to ensure that the longer term primary care needs of the patients are met.

### Response

*We will endeavour to have this information available for the patients as soon as possible.*

## Next Steps

Once the provider has responded to each of the recommendations, we will include these responses in the final report, which will be published on our website<sup>4</sup> for the general public to see. The report will also be shared with key organisations in the city including the Care Quality Commission, Brighton and Hove Clinical Commissioning Group and others. After the report’s release, Healthwatch Brighton and Hove will conduct some planned follow up activity to ascertain whether changes have been made following the visit.

Once we have visited all six premises, we will also compile a larger strategic report which will pull together key themes across this snapshot of primary care provision in

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<sup>3</sup> [CQC Report](#) for Victoria Highgrove, March 2015

<sup>4</sup> [Healthwatch Brighton and Hove](#), ‘What We’ve Done’

adult social care settings in the city. This report will also be made available to all the services we have visited, as well as partner agencies. An easy read version will be made available to the public on the request.

