

# Wilbury Care Home

<b>Service address:</b>	Wilbury Care Home, 66 Wilbury Rd, Hove, Hove, BN3 3PA
<b>Service Provider:</b>	Contracted to Brighton and Hove City Council
<b>Date and Time:</b>	Monday 14 <sup>th</sup> March 2016, 09:30 - 13:00
<b>Authorised Representatives:</b>	Nick Goslett and Maureen Smalldridge
<b>Healthwatch Address:</b>	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?

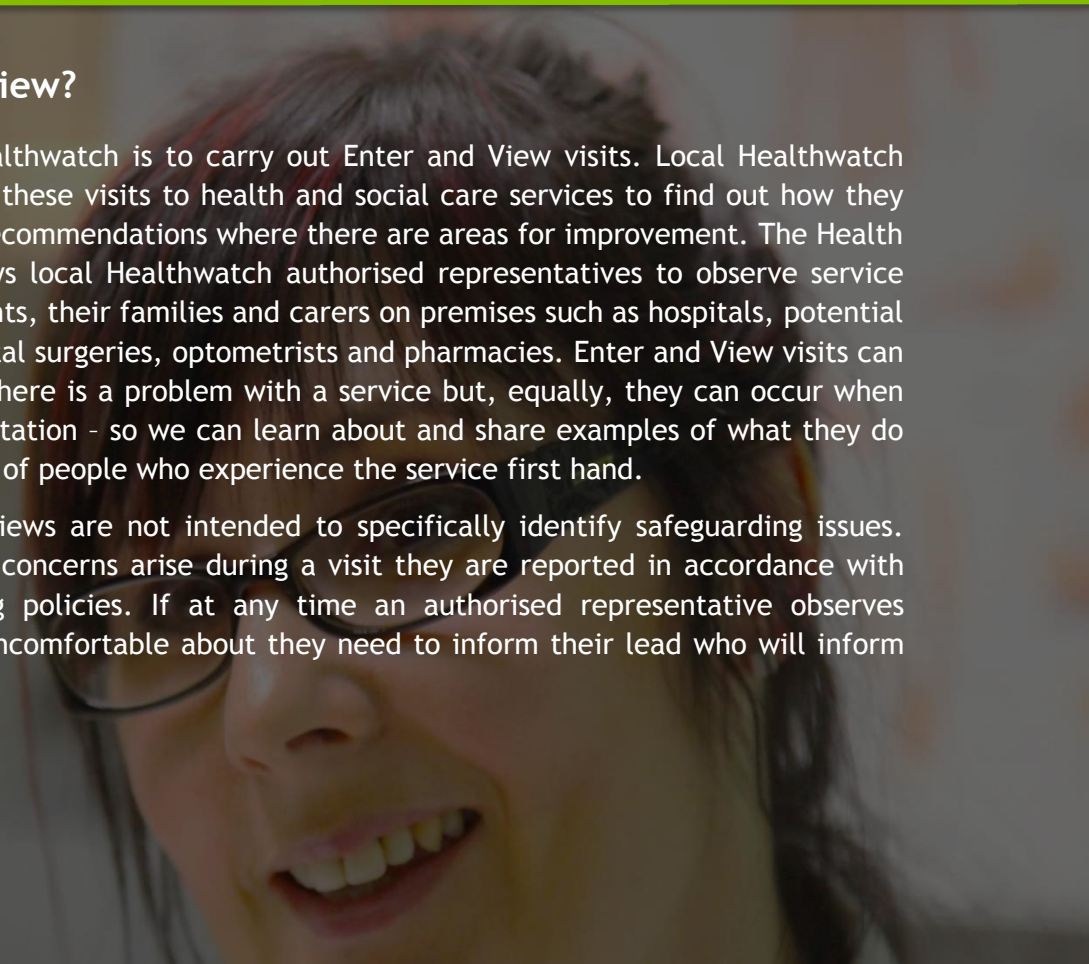
Healthwatch Brighton and Hove supports local children, young people, adults and their communities to influence the design, delivery and improvement of their local health and social care services, now and for the future. We enable people to make informed choices about their health and wellbeing by assisting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





## Why is Healthwatch Visiting Care Homes?

Healthwatch Brighton and Hove (HWBH) are undertaking a programme of visits to adult social care services across the city during 2016. In total we will visit five services from across the city, with a range of different specialisations.

During our time in each service, authorised volunteer representatives will be talking 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 Wilbury Rest Home on Monday 14<sup>th</sup> March, between 09:30 - 13:00. 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, and managers. The representatives also conducted an observation of the service in the communal areas. This allows us to triangulate the information we received about the service. We received 17 completed questionnaires in total, 11 of which were from residents, and six by friends and relatives. 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.

Healthwatch B&H stresses that the E&V method is intended to be a snapshot of patient 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

Willbury Rest Home is a service caring for older residents who do not have nursing needs. It can accommodate up to 19 people, and is located in residential Hove. They are listed as providing care for those with hearing impairments, personal care and end of life care<sup>12</sup>.

# Results of the Visit

## GP services

Wilbury Rest Home is registered with two nearby GP practices, and receives visits from district nurses on a regular basis. Staff felt that their relationship with local GP services were positive and communicative. All residents and friends/relatives confirmed that residents are registered with their own doctors. The majority of residents (supported by information from friends/relatives) felt that they only went to see their GP if it was needed and necessary, which tended to be fairly infrequently. Most residents had seen their doctor in the last year.

Annual Health checks were not completed routinely, but medication is reviewed annually and blood tests were taken as necessary, which can lead to an annual health review. Most residents and friends/relatives could not recall if such a check had taken place.

## Dental services

Wilbury Rest Home is registered with a dental service which visits the service regularly for check-ups. About a quarter of the residents our representatives spoke to recalled a dental check-up within the last year, and most friends or relatives were unsure about the last time a check was carried out. Staff informed our representatives that some residents

---

<sup>1</sup> [Wilbury Rest Home CQC Report](#), 25.06.2014, extracted 30.04.16

<sup>2</sup> [Wilbury Rest Home NHS Choices Entry](#), extracted 30.04.16

chose not to attend dental check-ups.

Staff told us they would support residents to clean their teeth or dentures as required, but at present all residents were able to complete these tasks with prompting. Whilst all residents verified that they completed these tasks unassisted, half of the friends/relatives who responded to us believed these actions were being carried out by staff at the rest home. No losses or mix ups of dental equipment were reported by residents, or their friends/relatives.

## Pharmacy

The service is not currently registered with the electronic prescription service. No incidence of medication being mixed-up or lost was recalled by residents or their friends/relatives.

## Eye care and hearing care

Sight tests take place annually at the rest home, although some residents choose to attend separate appointments. Roughly half of the residents we spoke to said they had an eye test at the service, and all friends/relatives confirmed that one had taken place in the last year. Hearing tests currently take place at the resident's request, or if a staff member identifies a need. The majority of residents and friend/relatives confirmed that hearing tests had not recently taken place, or if they had, it was done privately or as part of other medical treatment.

Staff believed it was the families and residents who deal with both hearing tests and hearing aid maintenance, with the service assisting where possible. Hearing aids were not used for the majority of residents who spoke to our representatives on the day. Residents who wore glasses all told us that they maintained their glasses themselves. However, Friends/relatives had mixed opinions on who maintains eyewear at the rest home, with some believing no-one assisted residents, and some believing that this was the responsibility of staff. Residents and friends/relatives could not recall a time when glasses were lost or mixed up.

## Supplies and adaptations

Although our representatives observed no adaptations for visual or hearing impairments, staff informed them that residents did have access to magnifying glasses, large print books and talking books and watches, and additional adaptations for those who are hard of hearing. Staff were aware of techniques for supporting hearing impaired individuals, such as looking at the person and speaking slowly and clearly. One resident who is registered blind, goes up and down stairs by counting steps and holding on to staff's shoulders for

support.

Residents usually bring their walking aids with them to the rest home, but spares and wheelchairs for going out are provided. Residents and friends/relatives confirmed that most of them had some form of walking aid, be it a walking frame, a stick or other support. Staff told us that the falls team were available to maintain walking aids as necessary. One resident recalled an experience of their walking equipment getting lost or mixed up with another resident's. All personal care items were provided by the rest home.

### Other important appointments and check-ups

There are two diabetics at the rest home, who receive check-ups and tests from the district nurse regularly, and receive annual reviews. Most of the residents fall outside the proscribed ages for different types of cancer screening, but if there is any cause for concern staff would contact the relevant GP surgery.

Residents appeared to have mixed experiences of podiatry and toe-nail cutting, with some attending clinics elsewhere, some within the service, some doing it themselves, and some having friends or relatives taking care of issues as they arise. Friends and relatives all believed that this was provided at the service, and that residents had the opportunity to use them in the last year.

---

### Additional findings

The noticeboard was observed to be up-to-date, easy to read and uncluttered. Information asking residents and friend and relatives to review them on a popular website were visible. Water jugs were available in each room, and on request. Hand gel was also available throughout the rest home.

One friend/relative took the time to say how happy they were with the general care provided by the rest home, and that they felt welcome and included as a visitor.

## Summing up and looking forward

In general, the service appeared to have a thoughtful approach to primary care in-reach, and a lot of support from residents and friends/relatives who visit the service. However, some preventative services appeared to be more imbedded into practice than others, and could be developed to improve the health of residents, and prevent issues before they start impacting on wellbeing. The most recent CQC report rated the service 'good' in all five service areas.<sup>3</sup>

# Our Recommendations & Responses

1. Consult with Specsavers about whether they might be able to provide hearing tests when they visit the rest home to provide sight tests

### Response

*Staff will be more proactive in monitoring residents' hearing. If a hearing problem is identified, staff will apply olive oil and request the surgery to syringe the patient's ears. If this is not effective we will request Specsavers to conduct a hearing test via a GP referral.*

2. Explore the possibility of training for staff in hearing aid maintenance, so that hearing is always maintained at the best level possible.

### Response

*Wilbury is committed to supporting residents with their hearing aids. The care home manager conducts hearing aid maintenance whenever needed and she has plans to train staff to be able to maintain the aids as well.*

3. Consider ways to improve communications with friends and relatives about primary care in-reach and equipment maintenance, to ensure that all parties are aware of their responsibilities.

---

<sup>3</sup> [Wilbury Rest Home CQC Report](#), 11.09.2016, Extracted 02.05.16

**Response**

*We feel we have very good communication with our friends and families. We communicate face to face, by telephone and email.*

- 4.** Consider whether it would be beneficial to join the electronic prescription service.

**Response**

*Our GP service has now joined the electronic prescription service.*



## Next Steps

Once the provider has responded to each of the recommendations, we will include these responses in the final report, which is 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 practices, we will also compile a larger strategic report which will pull together key themes across this snapshot of primary care provision in 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.

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

