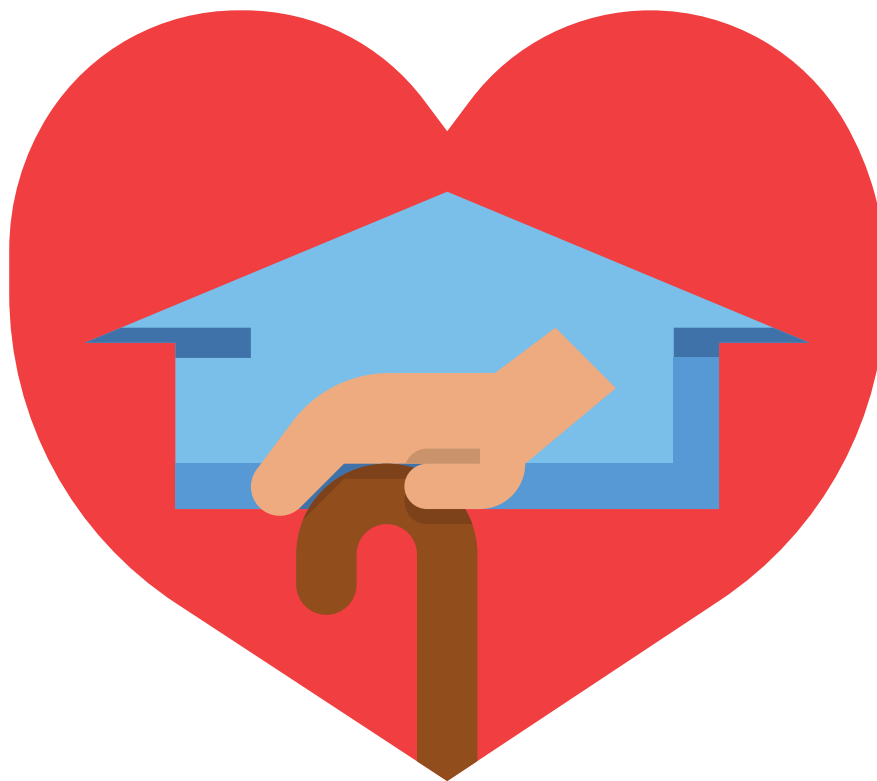


Spotlight on Care Homes in Medway

Rogers House

Care Home, Gillingham



September 2020

FOREWORD

In Medway we have 74 Care Homes offering a variety of services and different levels of support to residents and their families.

In June 2018, a new system was created to enable every nursing and residential home in Medway to form a partnership with a local GP. The partnership was designed to ensure residents would have a dedicated GP who could visit them in the home and help avoid unnecessary hospital admissions.

That means that every care home in Medway should now have a dedicated GP who visits the care home regularly, getting to know residents and their needs, giving continuity and more timely medication reviews. Patients still have the option to opt out of this service if they wish and register with an alternative GP.

This new way of working has been in place since 2018, and we wanted to talk to people to see what difference it has made to their experience.

We committed to visiting 24 Care Homes across Medway to talk to the residents, their friends and family and staff to hear about how the new enhanced GP service has changed the services offered at the homes. We also wanted to find out whether the residents were supported with other health and social services such as dental treatment and social activities.

Coupled with this desire, we knew that Medway Council were planning to recommission residential and nursing care services for older people and working aged adults in Medway. We wanted to ensure decision makers heard about peoples' experience of living in a Care Home in Medway to help inform their decisions.

Everything we found is detailed in this report and we have shared our findings directly with each Care Home, Medway Council and the Medway Clinical Commissioning Group.

We would love to hear your story about a Care Home in Medway. Was it good? Could it have been improved?

Get in touch with us anytime on: www.healthwatchmedway.com

We look forward to hearing from you

Maggie Cane
Healthwatch Medway

What were we trying to achieve from our visits?

We wanted to talk to people who were currently residents at Rogers House Care Home, Gillingham about their experiences of the health and social care offered at this home. We also wanted to speak to staff to see if the new enhanced GP service had made a positive impact on how they work and support their residents.

We wanted to hear about some key areas of the resident's lives at Rogers House Care Home:

- Were residents given a choice about which Care Home to move into when they were choosing where to go?
- Were residents given the choice to keep their own GP or join the home's dedicated GP practice when they moved to Rogers House Care Home.
- For residents who have lived at the home since 2018, did they feel the new system of a dedicated GP visiting the home had benefited them?
- Are the social care needs of the residents supported at the home with a programme of activities?
- Are residents offered support with other health services, such as a dental services, eye sight checks etc.

How did we go about it?



Our trained Healthwatch staff and volunteers visited Rogers House Care Home on 26th November 2019. These visits are known as Enter & View visits.

Prior to our visit, we provided printed questionnaires designed specifically for family and friends and we asked each home if they would kindly hand these out to family and friends as they visited their residents. These questionnaires were anonymous and had a freepost envelope included so that people could complete at their leisure and return to Healthwatch Medway directly.

Unfortunately, we did not receive any completed questionnaires back from Rogers House. The home did tell us that they had posted some completed questionnaires but these never arrived.

What happened during our visit?

When we arrived at the home, the Manager had just returned from sick leave and so had not had time to prepare for our visit. We were informed that we were unable to talk directly to the residents. Instead staff completed the questionnaire with residents.

This meant that we were unable to hear directly from residents about their experiences, nor did we hear from families or friends of the residents. Therefore, the feedback in this report is not independent. Roger House supplied feedback from five residents and six members of staff.

It is important to note that the following feedback from the Resident's perspective at Rogers House was NOT taken by Healthwatch Staff but from staff working at Rogers House Care Home.

In Summary

- All five residents said that they did choose Rogers House Care Home.
- One resident said that they thought the services offered at Rogers House Care Home had improved since they moved in with the remainder of residents saying it was about the same.
- The GP visits the home weekly.
- Staff talked about the improvements that had seen since the new enhanced GP service started.

What have we recommended?

Given that we did not gather feedback directly from residents we are unable to make formal recommendations. However, we will be revisiting Durland House to ensure residents have a chance to be share their feedback freely with an independent organisation.

In the meantime, we would encourage Rogers House to do the following:

- Ensure that the GP takes enough time to visit all residents who require to be seen during their visit.
- All residents must have regular access to a dentist.
- Explore a befriending service for the benefit of residents.

We will be following up with all the homes we have visited to check that they have implemented our recommendations.



Our Findings in Detail

*Please note some residents did not answer all questions

What did residents tell us?

We received five completed questionnaires that the staff at Rogers House had asked their residents.

We asked residents whether they had a choice of Home when moving to a Care Home, this is what we heard:

All five residents that we heard from said that they did choose Rogers House Care Home; some made the decision alongside family.

We heard what was important to residents when choosing Rogers House Care Home:

Four residents said it was important to have lots of activities to get involved in at the home.

Other residents said they wanted somewhere friendly, with good food, nice and clean and somewhere they would have some company.

We asked how long each resident had been living at Platters Farm Lodge and had they notice any changes in services during that time?

Two of the residents we spoke to had lived at Rogers House Care Home for more than two years.

One resident said they thought the services offered at the home had improved, commenting:

“Management has improved. I am enjoying the activities”

The other four residents said they thought services were the same with one resident saying, “everything is the same, I’m very happy”.

We asked residents whether they had a care plan:

Two residents said they thought they had a care plan in place, with one telling us they would like to know where it was kept.

One resident said she did not have a care plan and just likes to live one day at a time.

We wanted to know when residents had last seen a GP or practice nurse, and were appointments well co-ordinated and convenient?

Staff told us that the GP visits regularly on a weekly basis. According to NHS England’s plan, GPs should carry out a weekly round in the care homes that they cover.

Staff told us that there has been a noticeable improvement since the new GP service commenced, commenting:

“Better management of the service, more patients are able to be seen by the GP”
“Some things have improved, regular weekly visits”

Two residents said they had seen a GP within the last 6 months. A couple of residents could not recall when they saw the GP last.

Our Findings in Detail cont.

We asked residents whether they made decisions around their medical needs?

Three of the residents said they were involved in their medical needs with one resident reporting that they like to be involved.

We asked residents whether they had been offered support by staff to access other health services e.g. dentist, chiroprapist?

The CQC published a report in 2019 on oral care in Care Homes. Their findings show us that people in care homes do not always get the support they need with oral care with one third of care homes saying they found it difficult to access routine NHS dentistry services. Domiciliary dental services should be in place in every town to support the needs of residents in care and nursing homes, whether this is through visits from dentists or the training of staff to support them in offering general oral care and hygiene to their residents.

Does a Dentist visit Rogers House Care Home to examine residents:

It was unclear from the feedback how often the dentist visits the home.

“Visited the dentist one or two years ago”.

“Saw dentist about 6 months ago or more”.

“I visited the dentist a couple of years ago I think”.

“About 50 years ago!”.

Does an Optometrist visit Rogers House Care Home to examine residents:

Three residents reported that they had not been offered support to access other health services. Two residents were unsure whether they had been offered support to access other health services.

Social Activities at Rogers House Care Home:

Residents talked about a variety of activities to get involved in if they wanted to. Two providers visit the home weekly and offer guided chair exercise for the residents.



What did family and friends tell us?

Unfortunately, we have not received any feedback from family and friends of the residents of Rogers House Care Home.

What did the staff at Rogers House Care Home tell us?

We received six completed questionnaires that the staff at Rogers House.

We asked staff whether they had noticed any improvement since the new GP enhanced service and this is what they told us:

Staff told us that they have noticed an improvement in the GP serviced offered at the home. They said that the management is better, more residents are able to be seen by the GP and the visits are regular.

One staff member told us that the GP does not visit at night.

How often does the dedicated Homes' GP visit?

The GP visits every Friday for around 2 hours we heard. Staff told us they send an email with a list of residents they would like the GP to see.

What proportion of residents are seen on those occasions and does the GP have enough time to see all the residents who wish to be seen?

Staff told us the GP visits up to 10 residents on each visit. The GP only visit those who request a slot.

“On one occasion he asked only to see the urgent cases as he had to get back to surgery”

“We have been asked on occasion to refer residents to an ACP”

Does the GP refer residents to other healthcare specialists such as physiotherapists, dieticians and Parkinson disease nurses as frequently as you think they should?

Most staff said that the GP does refer residents to other healthcare specialists however staff have to ask the GP to make the referral.

Do you have an Infection Prevention Lead at this residence?

Staff told us that there is an Infection control lead and that staff undertake annual training.

How do you ensure residents are hydrated and are eating well? Do you have a schedule which includes checking on each resident at regular intervals?

Staff told us that they ensure residents are hydrated and eating well using charts and have daily written records. Residents use colour coded cups.

Residents are checked every two hours and are offered regular drinks if they are awake. Drinks are served with main meals and hot and cold drinks are offered. Carers encourage residents to take refreshments.

What did the staff at Rogers House Care Home tell us? cont.

Are refreshments offered to residents through the night? Is this logged?

Fresh water/juice are placed in residents' rooms and hot drinks are offered if residents are awake. Daily records are written, and fluid charts are kept.

Pressure Sores/Pressure Ulcers - What is the procedure for checking residents and are all staff trained to identify early symptoms?

Staff told us that carers check for sores when changing pads, or if a resident spends time in bed or is not mobile as they were. Body charts are kept, and all staff are trained.

Carers monitor skin integrity and changes are reported to a senior. If there are any concerns staff email the District Nurse.

Activities for the residents: Do you have a weekly schedule of activities for the residents to take part in if they wish to?

Staff told us there is a weekly activity schedule for residents.

Are residents offered time outdoors and if so, how often do staff take residents outdoors (whether into the home's grounds or further afield):

"Residents are able to access the garden when they wish"

"Monthly, an activity company also organises trips out"

"Yes, as often as possible, depends on the weather"

"The activities don't seem to be great"

If residents are taken outside less often than on a monthly basis - what is the reasoning for this?

Staff talked about a range of reasons for residents not having time outside:

"Lack of staff, or not enough time"

"Staff levels"

"Some residents do not wish to leave the home"

Befriending Service - we asked both staff and family and friends whether they thought a befriending service would benefit the residents:

Befrienders would be a group of volunteers who would be appropriately vetted and trained and residents and their families would be approached and could sign up to the service.

Four staff members said it would be nice to have a befriending service in place for when family and friends cannot visit.

General observations made by Healthwatch staff and volunteers during the visit:

Although we were unable to complete our visit, we were warmly welcomed by staff.

The Home has in-house chefs and laundry services.

CQC rating:

Current CQC Rating of Rogers House Care Home - Good. Visited on 14th June 2017.

Acknowledgements

Healthwatch Medway would like to thank the residents, family, friends and staff along with our volunteers for taking the time to contribute to this piece of work.

Disclaimer

Please note this report relates to what we saw and heard on the day of our visit. Our report is not a representative portrayal of the experiences of all patients, family, friends and staff, only an account of what was contributed and observed during our visit on those days noted.



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