



Foreword

What are Independent Age's quality indicators?

Independent Age is a national charity which represents the views of older people. Independent Age worked with Healthwatch Camden to devise ten care home quality indicators that represent areas of quality that a good care home should be able to meet. The indicators focus specifically on issues of quality, rather than safety, such as how much residents and family can have a say in how the home is run, and whether residents are able to pursue their hobbies.

This research fills a gap in existing information when looking at the things that older people and their families wanted to know when choosing a care home. It will also assist the CQC, Clinical Commissioning Groups and the local authority to build a comprehensive picture of the quality in care homes, something that currently is difficult to do. The Independent age also consulted care experts for their views on what are the most useful indicators of quality. We used these Quality Indicators to talk to staff, residents, family and friends in each of the homes using the pre-designed questionnaires which focus on the Quality Indicators.

We spoke to Healthwatch Camden who supplied us with sets of pre-designed questionnaires to use during our Enter and Views and the traffic light system

If you would like more information, or would like to get involved then do please contact us on info@healthwatchkent.co.uk or call anytime on 0808 801 0102

Steve Inett

Chief Executive, Healthwatch Kent

Overview

Little Court Care home

- is a purpose built modern building situated in the countryside in Speldhurst, Tunbridge Wells
- has 33 rooms, 2 of which are shared.
- currently has 35 clients
- has large landscaped garden
- was light and airy and well decorated both inside and out
- caters for people who require nursing and specialist care.
- Is privately owned by MG homes.

The latest CQC report was on 13 December 2016 and can be found on the following link

<http://www.cqc.org.uk/location/1-1375586157> .

The overall rating was good.

How did we go about it?

We visited Little Court Care Home on 12 January 2018 arriving at 3.00pm.

Our authorised visitors were Mike McKenzie, Ray Fairburn and Theresa Oliver from Healthwatch Kent. When we arrived residents were either in their rooms or in the communal lounges watching the television or sitting with staff, there was also a separate dining room. We spent 2 1/2 hours at the home.

We heard from 8 residents, 4 Family members and 3 staff members.

This is what we found

A good care home should...

1. **Have a registered manager in post.** The registered manager is the most important staff member in a care home - and the one responsible for ensuring quality standards and residents' needs are met. They should be visible within the care home, provide good leadership to staff, have relevant experience of the health and care system and qualifications to help them do their job.

No **manager** currently in post but the 2 directors are currently interviewing for the post. Managerial responsibilities shared between the Head of Care and Deputy Manager The 2 directors come in most days.

The **Senior Care worker** told us that there had been some uncertainty about when or if the Manager was leaving which meant that the information given to families and residents was sparse. Some family members mentioned this.

1 **family** said previous manager *“was very good”*. Another family said that previous manager was *“always friendly and helpful”*

1 **resident** knew the previous manager who was *“good”*

1 **staff** member said that the current management were *“very approachable and get things done”*

Note:We were informed post-visit that the Deputy Manager had been appointed as manager from February



Based on what we have heard, the home meets the indicator with some minor reservations.

2. **Have a stable workforce.** Care homes with knowledgeable, experienced staff who get to know residents can make the difference between an institution and a home. Where turnover of staff is very high, these qualities can be lost. It may also be a sign that staff are not happy working in the home.

The **Senior Care staff** told us there are 42 long term staff and 16 new staff members.

1 **family** mentioned that *“two previously good people have just left”*. Another said that the staff are *“absolutely brilliant, they are caring in every way possible”*

2 **Residents** thought that the staff were fine or alright, another said *“very good”*



Based on what we have heard, the home meets the indicator with some minor reservations

3. **Have staff who have the right skills to do their jobs.** Well-informed, skilled staff who are valued and developed as employees are vital to a smooth-running care home. All care homes should have a clear, comprehensive training scheme to ensure staff have the knowledge they need.

1 staff member said that training was encouraged and there was a structured annual training plan discussed at appraisals. Another said external training was organised.

The Activity Organiser had requested and was registered to do a reflexology course.

2 families thought that staff had the appropriate skills to care for their relative.



Yes, fully. Based on what we have heard, the home meets the indicator with no reservations.

4. **Have enough staff on duty during the day and night.** Many homes have a lower proportion of staff on during the night, but if the ratio falls too low - at any time of day - response times can be too slow.

We were told, there were 7 people on duty in the mornings, 5 in the afternoon and 2 overnight. In addition, a nurse was on duty during the day and night.

1 Staff member didn't feel that they had enough time to care for the residents as they were 2 staff members down and felt that though they worked well as a responsible team, it was quite pressurized, particularly if there was sickness or unplanned absences.1

Staff member did feel that they had enough time to care for residents and made that a priority. They were running a team. 1 staff member said they had limited time to chat but do when “*the opportunity arises*”

5 residents said that staff had time to chat with them and one said “*sometimes, but they haven’t got a lot of time*”

1 family told us that the staff would come in spent time talking with their relative and were “*caring in every way possible*”



Based on what we have heard, the home meets the indicator with some minor reservations

5. **Be clear about how they will be able to meet residents’ needs both now and in the future.** Many residents will develop more care needs as they get older - particularly if they have a condition like dementia. It is vital that homes can spot changes to their health and respond appropriately - consulting other health professionals where necessary - in order to provide the right level of care and prevent residents from having to move again.

Staff told us that pre -admission a ‘*This is me*’ document is completed by talking to resident and families which gives life history, likes, dislikes etc and the care plan developed from this is reviewed monthly, or as required, by carers, nursing staff, family and other staff.

There is also a ‘Resident of the day’ session where one resident’s care and lifestyle is looked at in more depth.

3 family members all thought that staff noticed when their relative’s needs changed with 1 saying “*this is the most brilliant Care home. We took my relative out of a Bupa home as it was so bad, but everyone here has been brilliant*”

1 resident said: “*I haven’t got a bad word to say, absolutely brilliant, I don’t want for anything*”. 3 residents told us that the staff knew what their likes and dislikes were.



Based on what we have heard, the home meets the indicator with no reservations

- 6. Actively involve residents, family, friends and the local community in the life of the home.** Homes should have a clear way for residents, relatives and friends to get involved in decision-making in the home, if they choose to, such as a residents and relatives committee. Homes should not have set visiting hours, or any other arrangements that makes them feel more like a hospital than a home. They should have good links with the local community, for example by arranging visits from local schools.

We have included any responses to this question in the number 10 Indicator: **Show that they are always looking to improve**

- 7. Offer meaningful activity and enjoyment to suit all tastes.** Care homes should not be boring places - they should offer an interesting range of activities and entertainment that match the tastes and preferences of their residents, including individual activities. Homes should take steps to stop residents from becoming isolated or lonely while respecting their privacy and choice.

Staff told us the home has an Activity Co-ordinator who works Monday -Friday and another member of staff who works part time. As well as quizzes, games, bingo, flower arranging etc they do activities with a local school, have outside entertainers once a month and visits from an animal therapy company. In summer they have events like Tea on the rec and gardening. They try to do one outside activity a month. Staff encourage people to join in if possible

1 **family** told us that the home has a mini bus and takes those that can get out on trips to places like the garden centre.

1 **family** said The Activity Co-ordinator is *“really enthusiastic, always smiling”*. They thought she has lots of ideas for music, crafts, dance, and is *“really brilliant”*

1 **family** told us *“we did a garden walk yesterday and they have been on a boat trip down the Medway”*

Another **family** said there were lots of activities but their relative was not well enough to participate in most of them

1 resident said that “staff come and ask me if I want to join in but no pressure if I don’t.” Another resident said that they particularly like cooking and hearing the old poems. When asked if they had trips outside the home 1 resident said they had been on a train trip, another said they had been to the pub and 1 said they had planted some bulbs in the garden.



Based on what we have heard, the home meets the indicator with no reservations

8. Enable residents to see a GP or other health professionals like a dentist, optician or chiropodist, whenever they need to.

Residents should have the same expectation to be able to promptly see a health professional as they would have when living in their own home. Care homes should be able to explain the relationship they have with their local NHS services - does a GP visit regularly? Can they call a GP out in an emergency? How easy is it for residents to see a dentist, optician, chiropodist or physiotherapist, either for a check-up or in an emergency?

Staff told us that Eye Concern visit once annually or at the request of GP or staff, but the Community dentist comes on request. Have links with a local surgery and GPs know the residents.

1 resident told us that they needed to see a dentist as they had tooth ache. Another said that they had seen an optician twice in two years.

3 Families said their relative didn’t need optician or dental services but had access to GP. 1 family said their relative had teeth cleaned daily

Some residents and families didn’t know whether there were regular dental and optician visits but thought that they came if needed. 1 resident is waiting for a cataract operation.



Based on what we have heard, the home meets the indicator with some minor reservations.

9. **Accommodate your cultural and lifestyle needs.** Care homes should be set up to meet your cultural and lifestyle needs and shouldn't make you feel uncomfortable if you do things differently to other residents. They should also be proactive in finding out what your needs are, so that they can accommodate them.

Staff told us there is not a regular service but a minister visits periodically or by request especially if requested at end of life. Most residents are Christian or do not have an established belief.

1 resident said that *"Valerie takes church."* Another said they were not a church goer and not been offered to attend a service *"but sure it's here if I want it"*. **1 resident** said she had seen the priest. Other residents couldn't answer

1 family said that they thought *"the home would accommodate their relative's religious needs if asked for something"*



Based on what we have heard, the home meets the indicator with no reservations.

1. **Show that they're always looking to improve.** You should be able to find out what current residents, their families and friends think about the home. The care home should be happy to help you do this - for example, by putting you in touch with a residents and relatives group or allowing you to speak to residents and visitors in private. They should also have support in place for people who wish to make a complaint any time, and there should be a healthy culture of challenge and feedback between residents, relatives and staff.

All the families we heard from felt that they were welcome participants in the life of the home. **1** said *"very much, all the staff greet us by name and are always friendly"* They told us there are monthly relatives meetings but staff are always ready to listen at any time and office door is always open. There are no restrictions on visiting times

Staff told us that families and residents can make suggestions, and nothing is normally rejected out of hand.

1 staff member thought that staff have an input into how the home is run up to a point, especially on practical matters but not on the philosophy of senior management.

4 residents said they would not change anything about the home with **1** saying they were *"quite happy as it is"* and **1** said that he was generally happy but would rather be in his own flat.

1 resident said they would go to the manager's office if they had a complaint, but most did not answer. 1 family said that they knew how to make a complaint and were confident it would be acted upon as they had made a complaint once before. Another said they knew how to make a complaint but were unlikely to. The home was happy for us to talk to staff and residents. However, packs sent to the home prior to the visit to be given out to families had not been distributed. This was probably the result of no manager in place. Consequently, we only had limited responses from families.

Other information - we also asked the manager, residents, staff and family and friends about the food and mealtimes

5 residents thought the food was good or very good, and 1 said it was "*marvelous-never wasted any yet*". All thought the choice was good but one commented that their choice was limited due to dietary restrictions. Those that were able to go to the dining room enjoyed their meals and the social interaction.

Staff told us they encourage residents to eat in the dining room where possible and they have snacks available between meals if wanted.

1 Family said that the meals were "*excellent*" and thought they were sociable. Another family told us that the meals were "very good. They even provide one for me if I want to stay with my relative"

What have we recommended.

- To explore the possibility of regular dental /optometry visits as a preventative measure as poor oral health can lead to a range of other diseases as well as making eating difficult and poor eyesight can be very isolating and prevent people joining in activities. Appreciate that this is dependent on availability of Healthcare professionals.
- To ensure that there are robust procedures in place for taking into consideration the view of families and residents.
- To share both within the group or via the care home network the excellent activity program on offer.

Acknowledgement

Healthwatch Kent would like to thank the service provider, manager, staff, residents, family and friends, our volunteers and staff for taking the time to contribute to this piece of work.

Disclaimer

Please note this report relates to the findings on the day stated at the beginning of this report. Our report is the experiences of all staff, residents, family and friends, only and account of what was contributed and observed during our visit on that day.

Healthwatch Kent

Healthwatch Kent is the independent voice for local people in Kent.

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