

Brownhill Lodge Care Home test



Enter & View Report

January 2024

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Executive Summary

In November 2023, we conducted an Enter and View visit to Brownhill Lodge Care home. Brownhill Lodge is a residential care provider and home in Catford, currently housing 19 people with dementia, cognitive impairments, or learning disabilities. We did this to assess the quality of the care provided there, by making observations and speaking to staff, residents, and their families. After considering what we found, we wrote this report to help Brownhill Lodge continue to provide good care and to recommend areas where they could further improve.

Overall, there was a good atmosphere in the house and the residents and families seemed overall pleased with the care, particularly the attitudes and abilities of the staff. The home is regularly visited by care professionals and has frequent activities that are social and engaging. The house is thematically decorated by residents for special occasions and a residents committee consents to visits.

We noticed some things that could be improved. This included: systematically updating the décor based on good practice, installing an external CCTV system, undergoing some additional dementia training, being more proactive on including residents from different backgrounds, reassessing the frequency of visits by healthcare professionals, and organising more small-scale activities with the help of additional volunteers, such as local walks.

Acknowledgements

We would like to thank the staff and patients from Brownhill Lodge Care Home who took part in the interviews. We would also like to thank our team of volunteers –Carolyn Denne, Amos Kuje, and Bharat Vasandani, who carried out the Enter and View and our project officer Jack Burnett, for collating the findings.

What we do

What is Healthwatch Lewisham?

Healthwatch Lewisham is one of 152 local Healthwatch organisations created since 2013. Healthwatch champions the rights of people who use health and social care services and holds the system accountable.

We are an independent watchdog that tries to be the voice of local people so that they can influence and challenge how healthcare services re purchased, provided, and reviewed in the Borough. We also help to find out whether health and social care services are safe, effective, and meet patient's needs.

Enter and View



One way we do this is by carrying out 'Enter and View' visits to publicly funded healthcare services. The responsibility to carry out these visits was given to Healthwatch in the **Health and Social Care** Act 2012. These visits are not inspections, and they always have a purpose.

Brownhill Lodge

In November 2023 we visited Brownhill Lodge Care Home. Brownhill Lodge is a residential care home in Catford, providing care and nursing to up to 21 people. When we visited, there were 19 residents. Most (15) of the residents have been diagnosed with dementia. Three residents have a cognitive impairment, and one has a learning disability.

Brownhill Lodge aims to provide high-quality person-centred care to make our residents feel safe, happy and to ensure that they feel at home.

-Staff member

How we looked



Who does these visits?

This visit was carried out by a team of three specially trained and DBS checked volunteers called Authorised Representatives. They make observations, collect people's views and opinions anonymously and produce a report.

How we got our information

Our three volunteers went to Brownhill Lodge on Wednesday, 1 November 2023, between 10:30am and 2:30pm. We notified the staff about our visit, and the management filled out a questionnaire about the care home before we arrived. Our volunteers were shown around the rooms and the living spaces and shown the digital systems that the staff use. We listened to the experiences of six staff members and five residents. Afterwards, we spoke to four family members of people staying at the home.

We are trying to find out whether the things we saw align to good principles of care homes. Healthwatch Camden found this to be the following eight principle:

- 1. Have strong, visible management: The manager should be visible within the care home, provide good leadership to staff and have the right experience for the job.
- 2. Have staff with time and skills to do their jobs: Staff should be well-trained, motivated and feel they have the resources to do their job.
- 3. Have good knowledge of each resident and how their needs may be changing: Staff should be familiar with residents' histories and preferences and have processes in place for how to monitor any changes in health and wellbeing.
- 4. Offer a varied programme of activities: Care homes should provide a wide range of activities (and ensure residents can access these) both in the home and outside the home.
- 5. Offer quality, choice and flexibility around food and mealtimes: Homes should offer a good range of choices and adequate support to help residents who may struggle to eat and drink. The social nature of eating should be reflected in how homes organise their dining rooms, and accommodate different preferences.
- 6. Ensure residents can see health professionals such as GPs and dentists regularly: Residents should be able to see a health professional promptly, just as they would when living in their own home.
- 7. Accommodate residents personal, cultural and lifestyle needs: Care homes should be set up to meet residents' cultural, religious and lifestyle needs, as well as their care needs, and shouldn't make people feel uncomfortable if they are different or do things differently from other residents.
- 8. Be an open environment where feedback is actively sought and used: There should be mechanisms in place for residents and relatives to influence what happens in the home, such as a Residents and Relatives Committee. The process for making comments or complaints should be clear and feedback should be welcomed and acted on. [1]

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What we found

We try to get the whole picture by listening to our Authorised Representatives and the staff, patients, and patient's families at Brownhill Lodge. We also consider different parts of the care such as the facilities of the home (**What was there**), the **Safety** standards, and how the **People** who lived and worked there felt about the care.

What was there?

Outside and Entrance

The home is a two-story building separated from the street by a front outdoor area, which includes some parking spaces. From inside the house there was almost no sound of the traffic.

The name of the home is displayed on a large, visible sign. Overall, the entrance and greeting were good, and a mask was recommended, but not enforced. However, the use of hand sanitiser, though available, was not specifically encouraged. There also was not a security system on the outside of the building, which the staff felt would help them to feel safer.

The home also had a back garden with a shed that contained some gardening tools. Unfortunately, the garden seemed quite small compared to the size of the house. Despite this, it was well tended and had a bright array of plants and fruit growing. The garden was also an opportunity to involve the residents, both in the cultivation of plants and the parties and barbeques hosted during the summer months.







Living Areas

The house has a bright and airy conservatory that is used as a multi-purpose room for visits and for holding interviews.

There were two main lounges, one was smaller and for quieter activities such as reading or watching television. The other is larger and has a more social arrangement of chairs in a circle.

Lots of social interaction happens in the larger room. When we visited there was a karaoke morning, which many of the residents were happily engaged in. Those who were not directly involving themselves in the singing seemed to be enjoying the activity, and the energy of the morning carried into lunch time.

There was also a large bright notice board of activities, which was also decorated with the Remembrance Day theme.



There is also a kitchen. Notably, the staff put magnets on to the fridge from their holidays, which is a good conversation starter for the residents that also adds colour to the room.

The Environment

The house had a positive energy. It was welcoming, and the residents responded warmly to our presence. When we visited, multiple rooms in the house had been thematically decorated for Remembrance Day, which added lots of character to the place and involved residents' drawings. The staff mentioned that this was done for other events, such as Christmas.



Some other parts of the house seemed to feel tired or neutral in their decoration. The lounge was very neutral colours, as were the toilets. This could be an accessibility issue for the residents with dementia.

Some of the hanging paintings also felt generic and possibly out of date, which could be easily rectified. One staff member acknowledged this, and it would be beneficial to see it updated.

Bedrooms

The are a total of 20 rooms at the home, and one can be shared between two people. Not every room has its own telephone, but there are portable telephones that can be taken to bedrooms for personal calls given that most resident do not have mobile phones.

Some rooms were decorated very well. This included one room with lavender walls and new, modern furniture. Some of the rooms were also very spacious.

The room size and levels of decoration were inconsistent, however. Some were smaller, and others lacked distinct character. One bedroom is currently being refurbished between occupancies, but updating more of the rooms in a way that accommodates residents needs and schedules would be beneficial.

The placement of a resident's furniture is decided by using photographs from their previous home as an attempt to recreate the look or layout. This is good practice and demonstrates good personalisation of care. The living areas had a lot of life. This includes the karaoke activity and the decoration for Remembrance Day. Residents are also involved in making the felt poppies, decorating the windows, and colouring in the posters for these decorations,

We appreciated that music also features prominently.

Food

There was a menu of meals, which included adequate choice. The staff told us that special diets are catered for. This includes things like diabetes and allergies, as well as personal preferences. A dietician visits the home when required, or when recommended by a GP, though this is not regularly scheduled.



One older man had his food preference catered for when he mentioned it. This is good evidence that Brownhill Lodge caters for preferences, religious backgrounds and cultural backgrounds in accordance with the Health and Social Care Act 2008. [2]

The residents we spoke to all rated the food positively on our surveys and the residents we spoke to said that they enjoyed the food at Brownhill Lodge.

Safety

We did not find any issues with general safety precautions in the home. The exits are clearly marked and there were no obstructions on the floor or blocking any of the hallways. A resident we spoke to mentioned that they feel very safe in the home.

However, staff members did mention that a CCTV system might be a valuable addition to the outside of the house.

Dementia Friendly

It was good to see that precautions were taken to make the home a dementia friendly environment. Calendar clocks around the home displayed the date and time of day. One of these was set incorrectly, but the staff were happy to fix it once this was noticed. There is clear signage around the house and there is good contrast between most of the floors and walls.

However, improving the décor may also improve the environment's dementia friendliness. Improving the contrast in some rooms, such as the toilet, and giving some of the rooms more energy.

Residents can go out on walks and are accompanied by a staff member.

I like going out, but because I could get lost in the area, I love being accompanied.

- Resident

COVID-19

Generally, the staff seemed to be well trained on COVID-19, although as mentioned it would be good to explicitly encourage visitors to use the hand sanitiser provided.

Accessibility

There were both stairs and a lift. Staff said that they lightly encourage mobile residents to use the stairs when possible and most used the stairs while we were visiting.

Most residents are mobile and are encouraged to practice some self-care and be otherwise mobile.

The people

I love the support and care that I receive from the staff and their attitude. - Resident

The Residents

All the residents we spoke to at Brownhill Lodge were happy to be there. Almost all the residents are involved and able to socialise and engage in activities if they choose.

The residents are involved in their own care, for example a residents committee was asked about, and consented to, our visit. Posters that mentioned our visit were placed visibly around the house, too.

Previously, the residents' doors were personalised with photographs of them. Some residents did not like this or did not recognise themselves, so this was changed. This shows that the people living at Brownhill Lodge can determine some of the ways they are cared for.

Social activities are very good and important to the Residents. Engagement with family and visitors, listening to music, and being involved in drawing and sticking to the activities board is helpful.



- Member of staff

- Resident

G

The staff are very helpful and take care of us very well.



Staff

The most positive aspect of the care home, based on the feedback we received, was the staff. The staff speak respectfully to residents, and the residents address them appropriately and on a first-name basis. They dressed appropriately and were friendly and welcoming to us during the visit.

The staff we interviewed understood the importance of regular care checkups and the benefits of socialisation, self-determination, and family communication.

In particular, the management was very impressive. The manager was engaged in the care and was able to keep good and regular contact with other staff and the patient's families. This was reflected most clearly in the feedback from the families.

The Families

All the family members we spoke to gave us overwhelmingly positive feedback about the manager, who they mentioned by name. They all had nothing but positive things to say about the rest of the staff. The people caring in Brownhill Lodge seem to be one of the strongest parts of the care there.

The other strongest aspect was the communication. Families are communicated with regularly, if there is a change in the family members health, or just for updates on their heath and their care. This shows a very good level of involvement.

The families did notice that the décor could be updated, but as one noted, it was understood that "this takes time and money". Another person noted that they thought the decoration was not as important as the staff attitude.

They mentioned that their previous care experience in a well-furnished home was worse overall. Nevertheless, this could still be improved whilst maintaining care standards.



Quote from Resident

G

"I get a good feeling about the manager and her staff, who always seem very pleasant and helpful. They take the client's temperatures regularly, keep them clean and well fed, and the bedrooms are clean and tidy.

I am not family, so there are limits to what I can hear, but the manager is happy to answer the questions I do ask.

The manager has been very assuring, and she offers my friend the best care possible. I feel reassured that she is safe and well looked after, but I like she would benefit from more social interaction."



Friend of a Resident

Case Study

One family member lives quite far from London and had her own health issues but was the next of kin for the resident. This was causing a lot of difficulties and meant they was not able to visit very often.

They said that the manager insisted on taking in the family member, who was over 90 years old, to Brownhill Lodge once they saw their living condition at home.

Since then, the care quality has improved drastically, the family member seems happier and there is regular contact with meaningful updated from the staff. This obvious increase in care made a real difference, not only to the person receiving care, but also to the family members with their own difficulties, that has stress taken off, since they could now be confident in the care.

The Care Systems

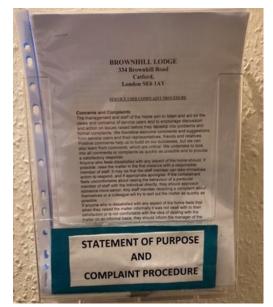
Most of the residents in the home are over 90 years old and there are younger residents with cognitive impairments, so it is important to closely monitor their health. This is done by **staff**, **visiting healthcare professionals**, and through **care systems**. It was also important to consider how the care was **personalised**.

Staff

The staff closely monitor the health of the patients, this is encouraged by the management, who noted to us the importance of checking, asking, and speaking regularly.

The system of care feels systematic and open. An example of this is that a 'Statement of Purpose' and 'Complaint Procedure' is posted on a visible wall with lots of foot travel. This is good practice and in a good way to help empower patient and family voices.

Staff noted the difficulty of making sure all residents knew how to provide feedback, given their condition and they noted the importance of Healthwatch visits and that they were open to them anytime.



We always note that whatever we decide to do, make sure it makes you happy.



Visiting Healthcare Professionals

There are many healthcare individuals and teams that the Care Home is in contact with. This includes:

- •A GP who calls once a week and attends in person for any issues.
- •A dietician who calls and shows up in person for any issues.
- •A dentist who attends regularly.
- •A falls team who attends regularly.

•And other visitors, such as the Community Mental Health Team, who can offer advice on care of older people with dementia.

Digital Care System

The home had a digital 'Care Vision' system, which included all residents' room having a QR code. This enabled the staff to show that they had been to all the rooms to check on the residents.

There is also an assessment monitoring software checks that checks their condition through the day. It colour-codes residents' condition into greed, amber, and red.

Personalisation of Care

There is good evidence of personalised care at Brownhill Lodge.

Each resident at Brownhill Lodge has a comprehensive plan of care and staff are updating care plan monthly and as necessary. – Manager

All residents have the options to request food and personalise some aspects of their care. The staff also understand the residents. For example, they know who it is appropriate to encourage to use the stairs.

However, a couple of the residents told us they would like to go out more. Some smaller trips, like short walks, could be arranged alongside more substantial group trips.

Case Study

Two people with English as a second language and limited communication skills have more recently become involved in the home.

This was initially a challenge, but staff gave them telephones in addition to the shared mobile phones so that they could speak to their families more often. They also have now met their cultural food preference. There were also some behavioural issues that were harder to resolve because of the language barrier, but that the staff told us had improved.

This means that the residents are more involved in the house, which is an improvement to the care standard.

What we recommend

It is important that we can make recommendations. These suggestions do not imply a home is failing in a certain regard, but rather they concern areas where we think they could improve based on our visit and what we found.

There are six recommendations we are making to update the **décor**, improve the **security**, work on the **dementia friendliness**, have more kinds of **activities**, be more proactive about **including** different kinds of residents, and reconsider the frequency of **GP visits**.

Décor

The décor should be refreshed, and this includes a lot of the furniture and paintings in the home. "The use of colour and contrast can be really helpful for people with dementia". [3]

In some places the contrast should be improved between the walls and carpets, to ensure a dementia friendly environment.

The rooms should be decorated in a more systematic manner. A room should be updated more than when its resident changes.

Security

A CCTV system outside the front of the building is advised.

Dementia

It would be good to ensure that residents are at the centre of decision making even when they have limited capacity.

The Social Care Institute for Excellence have useful resources for this. [4]

Activities

There are also useful resources on planning and doing activities for people with dementia, such as Age Exchange, or Playlist for Life. [5, 6].

There could be more small-scale opportunities for residents to go outside on small walks. It appears the home does this already, but it could possibly be expanded. Local volunteers may be able to help with this.

We were told that the number of large trips decreased after the pandemic. The home should review how and when this can be expanded again.

Inclusivity

The home could consider the religious and cultural backgrounds of new residents more proactively.

It is good that changes were made once issues were identified, but the home could look into policies that could prevent such issues from arising.

GP Visits

The number of visits has been reduced at the home. The staff we spoke to believe this is okay given the demand in their home, but we suggest reviewing this relationship with local GPs to make sure this is the case.

References

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