

Waldram Place | Forest Hill London | SE23 2LB Healthwatch was established in 2013 in accordance with the Health and Social Care Act 2012.

Within this legislation [Arrangements to be made by relevant bodies in respect of local Healthwatch Organisations Directions 2013] Healthwatch has a right to a reply within 20 working days to Reports and Recommendations submitted by Local Healthwatch to a service provider.

Report & Recommendations Response Form

Report sent to	Shola Adedugbe-adeyemi
Date sent	23.05.23
Report title	Enter and View Report Manley Court
	Response (If there is a nil response, please provide an explanation for this within the statutory 20 days)

General feedback	
o choral recapació	

We would appreciate if you could outline what actions and/or improvements you will undertake as a result of the report's findings and recommendations.

Recommendation	Manley Court Response
Finding 1.	The Activity Team have re arranged
Posters and notices on display are generally not easy to read – with the use of capital letters, dense paragraphs,	the Activity Board and new Boards

and a lack of spacing. The activity board especially appeared 'congested' with information.

have been purchased to replace damaged ones.

Recommendation 1.

We recommend improving the displays, in particular the activities board, by using larger and more accessible font (not capitalised), and a layout that may be disseminated more easily. For the activities board, the activity title could be larger/bolder, followed by a short description, and accompanying image. We recommend using this guide to help future improvements:

https://www.gov.uk/government/publications/inclusivecommunication/accessible-communicationformats#accessible-print-publications

Finding 2.

A relative questions the ratio of bathrooms/showers per resident, and suspects that bathing is 'once a week'. There are also 'unresolved issues' with incorrect tagging of clothes.

Recommendation 2.

It would be good if the home responds to these issues, through engaging with relatives (at meetings or through a questionnaire). This would be an opportunity to find out more, to seek ideas and thoughts on resolution, and to communicate the home's perspective.

There are enough bathrooms and shower rooms on each Unit.
Residents are given a choice of general bath and shower as required.

This can be evidenced in the residents Care Plan. Residents' wishes are also respected. There is a Relatives Meeting on the 23/06/23 and this will be shared with Relatives There is also Satisfaction Survey this month. This might also assist in finding out Residents preferences.

Resident's clothes are labelled, and laundry Assistants advised to check and put new labels on for residents in case they come off. Key workers are also advised that clothes are labelled and returned to the right residents after washing

Finding 3.

In some of the interactions observed, we note that staff were 'direct and professional' – perhaps more akin to an institution than a home.

This has been cascaded to all grades of Staff in the daily Huddle, Staff Meetings and Hand overs. We have also organised Customer Care Training for Staff. This will also

Recommendation 3.

A 'direct approach' might be more effective in obtaining a response; however, this is not overly appropriate, or expected at a residential home, we feel. It is widely commented that staff are compassionate, patient and understanding, we would like this to be instilled throughout the home, perhaps through a 'gentle reminder' at meetings, or through the direction of team leaders.

be included in individual Staff Supervisions

Finding 4.

There was a musty, somewhat unpleasant odour downstairs (Learning Difficulties and Frailty Unit) reminiscent of poor personal hygiene.

Recommendation 4.

We are noting this, as no other areas of the home had an odour. We would ask this to be investigated by management, to establish if any environmental, or personal care issues exist. We are noting this, as no other areas of the home had an odour. We would ask this to be investigated by management, to establish if any environmental, or personal care issues exist:

This has been investigated by Management. A resident on the Unit had Urinary Tract Infection at the time and on Urethral Catheter. The odour was from the urine as it was very concentrated. Staff were advised to encourage and push fluids for the Resident.

Finding 5.

Although feedback suggests staff are compassionate, responses also suggest a gap in the availability of staff to respond to residents when they need help.

Recommendation 5. We recommend increasing staffing levels to ensure residents' needs are responded to in a timely manner.

Staffing levels will be increased according to residents needs to make sure we are giving the residents a high quality of care

Finding 6. In one of the bathrooms, the emergency pull-cord was tied to a handrail which presents a clear risk.

Recommendation 6. We recommend that a regular audit is conducted (all bathrooms and toilets) to ensure that pull-cords are fully accessible and useable.

This is now part of the Hand over to Staff. Regular audits are carried out by the Maintenance Man and Nurses on duty **Finding 7.** Furnishings throughout the home are clinical and functional. As a result, the communal spaces lack a homely character - and appear institutional.

Recommendation 7. We realise that design, and ergonomic decisions are made at group level, and most will have been well-considered, and based on experience and good practice. That said, a less 'institutional' feel would certainly be welcome – perhaps the home could consult with residents, relatives and staff, to see if any creative solutions may be found. The odd alteration, or personal touch may go a long way.

There is going to be a
Refurbishment programme in the
Home where residents/relatives will
be given the opportunity to choose
their own room décor/ furnishings

Finding 8. During our visit, we noticed the communal spaces (lounges and dining rooms) were not well attended by the residents. We know that one bedbound resident, who expresses profound boredom and loneliness, would certainly leave the room more, if able to.

Recommendation 8. This particular resident needs more assistance to sit up, or to get out of bed. Delays in securing a wheelchair essentially means he is trapped in his room, and for most of the time – in bed. If the home has a strategy for getting more residents out of bed, and out of their rooms, how is this implemented, and is it as effective as it could be? We recommend the management to consider finding solutions to ensure residents are utilising communal spaces and are supported to be active. Seeking ideas from relatives and staff might help.

This has been discussed in Meetings are more residents are now being encouraged to use the communal areas. The residents spend time in the garden because of the recent good weather. This has been a quality time for them to engage with each other and with other residents from other Units. Relatives and residents are involved in the Annual Review, and ideas sought from relatives to make sure residents are kept engaged and active.

The Activity Coordinators
encourage interaction between
residents. More outside
entertainments booked for the
residents. Outings booked eg visits
to restaurants

Finding 9. We are told it is difficult to forge friendships, We have 1:1 activity for residents as many of the residents cannot communicate. who are bed bound or prefer to spend time in their bedrooms. There are manicure and **Recommendation 9**. Any loneliness should be apparent to staff, in their observations and interactions with pedicure/massaging for these residents. We would urge staff to work together, in residents. identifying residents who appear lonely or withdrawn, There is also Animal therapy for and in bringing people together. residents, and this also taken to residents in their bedrooms and this helps in stimulating them.

Finding 10. Staff would like better pay, increased recognition of staff feedback, a more effective process for recruitment, re-décor of the staff room and more hoists.

Recommendation 10. As these issues have been raised, there is now an opportunity for the home to provide a platform for staff to share their concerns and suggestions. We recommend using the suggestions to drive further improvement including strengthening communication with the central recruitment department.

Staff salaries have been increased in March. Staff are advised about Career Progression in the Company and encouraged to take part in the Staff Survey there is one completed in May and the results were published this week.

We are working on making sure all

We are working on making sure al Staff are valued within the Company.

The décor of the Staff Room is part of the upcoming Refurbishment. A new hoist was ordered in March, and one will be ordered at the end of June.

Signed	
Name	
Position	
Date	