



# Enter & View

Neath House  
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**healthwatch**  
Milton Keynes

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# 2 Introduction

## 2.1 Details of visit

Service provider	Neath House – ExcelCare
Date and time	9 <sup>th</sup> August 2023 – 9.30am to 4.30pm
Authorised representative	Helen Browse

## 2.2 Acknowledgements

Healthwatch Milton Keynes would like to thank the service provider, staff, service users and their families for their contribution to this Enter and View visit, notably for their helpfulness, hospitality, and courtesy.

## 2.3 Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

# 3 What is Enter and View?

Part of the local Healthwatch programme 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 service users, their families, and carers on premises such as hospitals, residential 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 the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the CQC where they are protected by legislation if they raise a concern.

## 3.1 Purpose of visit

The purpose of this Enter and View programme was to engage with residents, their relatives, or carers, to explore their overall experience of living in Neath House Care Home. As well as building a picture of their general experience, we asked about experiences in relation to social isolation and physical activity.

## 3.2 Strategic drivers

For this coming year Healthwatch Milton Keynes will be working in partnership with Milton Keynes Council, undertaking joint visits so that a well-rounded view of the operation of the care home/service can be understood. Healthwatch Milton Keynes will be specifically focusing on the experiences of the services users and their loved ones.

Social isolation and/or loneliness has been recognised as having an impact on people's physical health and emotional wellbeing. COVID 19 has increased and intensified loneliness and isolation by the very nature of the way in which we have had to manage and reduce the spread of the virus. The 'Hands, Face, Space' guidance and the regulations imposed but the UK Government has resulted in services users not being able to interact with loved ones and friends for over a year. Furthermore, the inability to have social time with other residents has exacerbated the feeling of loneliness and isolation.

It is important to understand the distinction between loneliness and isolation. Age UK defines 'isolation' as separation from social or familial contact, community involvement, or access to services, while 'loneliness' can be understood as an individual's personal, subjective sense of lacking these things. It is therefore possible to be isolated without being lonely, and to be lonely without being isolated.<sup>1</sup> There is a link between poor physical health and increased isolation as loss of mobility, hearing or sight can make it more difficult to engage in activities. It is, therefore, important to explore how residents of care homes in Milton Keynes are able to access physical activity alongside social activity.

Healthwatch Milton Keynes understands the pressures the COVID 19 pandemic has placed upon both services and service users alike. We have received a significant amount of feedback with regards to the necessary changes made to service delivery required to promote safety for all. It is our intention to be able to formally report the impacts of the COVID 19 regulations on both services and those who use the services and their loved ones through this year's Enter and View Programme.

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<sup>1</sup> <https://publichealthmatters.blog.gov.uk/2015/12/08/loneliness-and-isolation-social-relationships-are-key-to-good-health/>

### 3.3 Methodology

The visit was prearranged in respect of timing and an overview explanation of purpose was also provided.

The Authorised Representatives (ARs) arrived at 9.30am and actively engaged with residents between 10:00am and 4.00pm.

The visit was conducted in a COVID safe manner with the appropriate PPE as agreed in advance with the provider.

On arrival the AR(s) introduced themselves to the Manager and the details of the visit were discussed and agreed. The ARs checked with the provider whether any individuals should not be approached or were unable to give informed consent. The Manager provided the AR with a thorough tour of the Home and introduced them to staff and residents along the way. The AR was subsequently afforded access to all parts of the Home for the duration of the visit.

The AR used a semi-structured conversation approach (see Appendix A) in meeting residents on a one-to-one basis, mainly in the communal areas. The checklist of conversation topics was based on the pre-agreed themes for the Care Home visits. Additionally, the AR spent time observing routine activity and the provision of lunch. The AR recorded the conversations and observations via hand-written notes.

Residents were approached and asked if they would be willing to discuss their experiences. It was made clear to residents that they could withdraw from the conversation at any time.

A total of 9 residents and four family members took part in these conversations.

In respect of demographics: -

All residents were female with ages ranging from 72 to 86 with average age of 81 years. The average length of stay in the home is two years of those residents spoken to but the length of stay varied from 3months to 5years.

At the end of the visit, the Manager was verbally briefed on the overall outcome.

# 4 Summary of findings

## 4.1 Overview

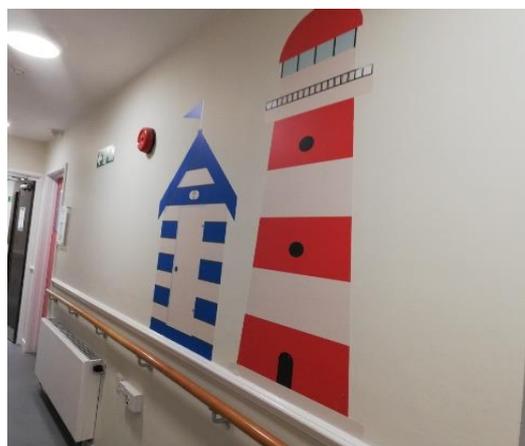
Neath House is a purpose-built care home close to Milton Keynes City Centre and is registered to provide accommodation for up to 47 residents who need personal or nursing care. There were 46 people in residence at Neath House when we visited. The home is set out over two floors and with the majority of residents living with Dementia, Parkinsons or other neurological conditions, many have additional physical needs which cause them to be bedbound.

## 4.2 Premises

The Ground floor has a spacious reception area with a 'coffee shop' for family and residents to use when visiting which opens onto one of the large patios. There is also a cosy seating area near the lift to the first floor.



Each of the corridors on the first and second floor is decorated quite differently with a theme, seaside, railway, flowers, shops, so it is quite easy for people to identify their own rooms.



The ground floor, even though it has a large lounge and conservatory that is used partly as a dining room and has a great outlook over the large garden feels

much darker in the corridors, this could be different lighting to the first floor, however on a bright sunny day it was fairly dim in the corridors even though the lights were on.



As you step out of the lift onto the first floor you reach the 'beauty salon/hairdressers' and the nurses' station with some quiet seating for residents.



The first floor has three smaller lounge/dining areas, one of which has a small patio area. Each of these dining areas has a recently refitted kitchenette which allows for staff or visitors to make hot or cold drinks, and food can be heated. Because of this, some residents like to buy ready meals when they go out to the shops. It is also used to reheat meals if people have been eating very slowly.

### 4.3 Staff interaction and quality of care

Staff were observed to be caring and well-liked by residents, taking time to encourage residents to eat and drink. All meals are prepared inhouse and no residents were rushed to eat at set times. One resident was being served breakfast at 11.30, when lunch was being served from 1pm. Staff knew that this resident would have their meal when they were hungry and that may be at that maybe at 2, 3 or 4 pm depending on how on how they were feeling that day. Staff felt the important thing was that they had the flexibility to meet people's needs as individuals rather than forcing people to fit arbitrary schedules.

Staff were seen to be encouraging and patient with those residents who needed help or assistance with their meals. Family members commented that they had been invited to join their loved ones for meals if they wished and that the food was always really good quality and that their family members enjoyed the meals.

The Home uses photographic menus, and found this approach also helps encourage people to try things that they are not familiar with, or if they don't recognise the name of the dish. The menu for the day of our visit was:



One resident told us they thought the food was pretty good and then laughingly said it was "a shame really as I need to lose some weight".

Some of the comments from residents and family members were:

*"It's a nice place, staff are lovely, get to take Mum out and about"*

*"Mum is happy and content, what else can we ask for"*

*"could be more staff on weekends, there always seem to be less when I come on a weekend?"*

When asked if there was anything they would change about living at Neath House, most residents said they wouldn't change anything. There were a couple of people who told us they would like to go on more walks, but this depended on the number of staff as they needed someone to accompany them. As in any care home setting, there was one person who said they would love to go home but, overall, the residents at Neath House told us they felt cared for and content.

## 4.4 Social engagement and activities

The management team are very much part of the care team, they were fully 'hands on' throughout the day of the visit and it was clear from residents that this was absolutely the norm for the Home. The relatively low staff turnover and the very visible presence of the longstanding manager is, we feel, a major contributing factor in the consistently good standard of care we have observed at Neath House over a number of years.

During our visit there were a few different entertainment sessions in the home. The first-floor late morning activity, run by an external organiser, was 'Rag Dolls' for music and movement. This was very popular and was attended by 16 residents and three staff. After lunch there was an outdoor activity on one of the patio areas with more music and movement with the care home staff and residents.

Pamper days are very popular and are tailored to the individual resident. The residents enjoy spending this time having the one-to-one interaction with staff as much as the actual pampering.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	1. HAPPY 63 <sup>rd</sup> BIRTHDAY ANNIE!! Dancing and singing fun with Ragdolly Anna's 11:45am	2. Pamper day with Fiona	3. Fete prep with Sammy and Fiona	4. gaming day with Fiona	5. Activities with team members	6. NEATH HOUSE SUMMER FETE 1:30pm - 5pm
7. Neath House Photo shoot fun day	8. Arts and crafts fun with Fiona 11am	9. Dancing and singing fun with Ragdolly Anna's 11:45am	10. Getting out and about with Sammy	11. Puzzle club with Fiona 11:30am	12. 'About me' with Sammy 11am	13. HAPPY 89 <sup>th</sup> BIRTHDAY COOKIE!!
14. HAPPY 77 <sup>th</sup> BIRTHDAY CLAUDIA Interactive gaming with Fiona 11:30	15. Dancing and singing fun with Ragdolly Anna's 11:45am Granny square day	16. Reminiscence session with Fiona 11am	17. Aromatherapy 1 to 1 with Sammy 11am	18. PAMPER Day with FIONA	19. Weekend Activities with Team members World photo day	20. Church service with Rev DR Sam 15:00
21. Down Memory Lane with Fiona 11:30am	22. Dancing and singing fun with Ragdolly Anna's 11:45am	23. HAPPY 76 <sup>th</sup> BIRTHDAY KEITH!! Coffee morning bingo with Fiona 11:30am	24. Movie club with Sammy 6.30pm	25. Indoor circus with Fiona 11am	26. Weekend Activities with Team members International dog day	27. Weekend activities with team members
28. Music fun with Fiona 11am Summer bank holiday	29. Dancing and singing fun with Ragdolly Anna's 11:45am	30. Games Afternoon with Fiona 2pm	31. Memory Café with Sammy and Fiona 11.30am			

Happy Summer from everyone at Neath House

Day	Time	Activity
Monday	11:30	Arts and Crafts fun with Fiona
Tuesday	11:45	Arts and Crafts with Fiona
Wednesday	All Day	Dancing and singing with Ragdolly Anna's
Thursday	All Day	Getting out and about with Sammy
Friday	11:45	Puzzle Day with Fiona
Saturday	11:30	About Me with Sammy
Sunday	2:30	Happy Birthday Cookies

There is a full activity schedule for residents, and a smaller version is on display in most resident's rooms, with some of the activities tailored to suit residents' specific needs.

We observed staff spending time with residents, tempting them to join in activities, chatting with those in day rooms who were sitting alone or with just a few other residents, ensuring they were comfortable and that they were staying hydrated.

Residents that were in their rooms all day had less contact but did enjoy visits from the hairdresser and one of the staff members who regularly visited for 'special me time' a few times a week, this was mentioned by several residents and the staff member and time spent was greatly appreciated.

All staff were observed to be calm, reassuring, and caring and there was a very quiet and relaxed atmosphere throughout the home.

Each resident has a scheduled day of the month for 'health check day' family members are asked in advance if they have any concerns and after the checks family are updated.

# 5 Recommendations

If support with activities or for residents living with dementia, would be helpful, there are a number of local memory clubs who would be happy to have a discussion about what they could offer to enhance your Home's current programmes: <https://www.healthwatchmiltonkeynes.co.uk/advice-and-information/2019-07-08/dementia-memory-clubs-and-support-groups>

Explore ways of improving the lighting in the corridors on the ground floor, this could have a positive effect on both staff and residents if lighting levels were able to be improved.

Consider ways of alleviating isolation for those residents that have difficulty leaving their rooms, perhaps more one to one time with care staff, more time in group situations, enlist the help of volunteer groups such as befriending services to sit and talk with residents.

# 6 Service provider response

1. Team members providing 1:1 support for people who are in the bedroom- Our care team and activities enable us to have 1:1 session in the home for people who prefer to stay in their bedrooms and in addition to this people staying in the bedroom have hourly wellbeing checks completed by the team members. Sometimes the 1-1 support will include manicures, hand massage, reading, chatting, having a coffee together etc.
2. In relation to the comment on the ground floor lights are not bright enough compared with the top floor; this had been discussed with the maintenance team and is on a schedule of works being completed in the home. The home has had a number of works completed this year including new flooring, painting and decorating, new furniture, team room upgraded, the garden completely redone so it has been accessible through the summer. The maintenance team are aware about this, and this project is booked in with estimated time to complete the Job by 30<sup>th</sup>December 2023.
3. Involving outside dementia community or club – the Home Manager will liaise with our sister home The Willows to ensure that residents can firstly visit their monthly dementia café and involve the lifestyle team also to discuss the possibility of holding some sessions at Neath. The home already holds social occasions, fetes, church services etc for the people at Neath and this helps people to maintain the engagement with the community. At Neath the team members and lifestyle team take people outside the home on a regular basis, and this includes taking people for shopping, visiting their friends and families, Garden Centres, Local Pubs and cafes etc to continue to maintain their engagement and relation with the outside community. Photos are sent to the loved ones of those that cannot visit. One of the residents was included in the NHS newsletter as she was so entertaining for everyone when she went to the hospital for an appointment and was singing along to old tunes with her daughter and the Surgeon. The home will also advertise for volunteers and befrienders to join the home .

# Appendix A

About You (Optional questions)				
Your Name				
How long have you been living here?				
Your provider and your care	Yes	No	Don't Know	Comments
Do your carers treat you with respect and dignity?				
Have you read and signed your support plan?				
If you were unhappy about your care, could you tell someone? Who would you tell?				
Do you think the people who look after you would fix any complaints you had?				
How have your carers helped you stay active/engaged?				
How have your carers helped you stay in contact with friends/family?				
Your Choices	Yes	No	Don't Know	Comments
Do you get to choose your food?				
Do your carers ask your permission before helping you?				
Do you have enough interesting things to do?				
Do your carers give you the information you need to help you make choices?				

Are there always snacks and drinks available when you want them?				
<b>Safeguarding, dignity, and privacy</b>	<b>Yes</b>	<b>No</b>	<b>Don't Know</b>	<b>Comments</b>
Do you feel safe?				
Do you think there are enough staff?				
Have your carers told you what to do if you feel unsafe or at risk?				
<b>Concerns</b>				
Is there anything you don't like about your carers?				
<b>And Finally</b>				
What is your favourite thing about your carers/living here?				
If you could change one thing about your care, what would it be?				



# healthwatch

## Milton Keynes

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