

My Views Matter: Swanton House Care Centre



Healthwatch Norfolk visited Swanton House Care Centre in Swanton Novers on 04/10/2022 to see and hear how people experience care there.

Contents

Contents	1
Who we are and what we do	2
Introduction	3
Summary	6
FindingsRecommendations	7

Who we are and what we do

Healthwatch Norfolk is the independent voice for patients and service users in the county. We gather people'sviews of health and social care services in the county and make sure they are heard by the people in charge.

The people who fund and provide services have to listen to you, through us. So, whether you share a good or bad experience with us, your views can help make changes to how services are designed and delivered in Norfolk.

Our work covers all areas of health and social care. This includes GP surgeries, hospitals, dentists, care homes, pharmacies, opticians and more.

We also give out information about the health and care services available in Norfolk and direct people to someone who can help.

At Healthwatch Norfolk we have five main objectives:

- 1. Gather your views and experiences (good and bad)
- 2. Pay particular attention to underrepresented groups
- 3. Show how we contribute to making services better
- 4. Contribute to better sign posting of services
- 5. Work with national organisations to help create better services

We make sure we have lots of ways to collect feedback from people who use Norfolk's health and social care services. This means that everyone has the same chance to be heard.

Introduction

Enter and View

Part of Healthwatch Norfolk's work programme is to carry out Enter and View visits to health and social care services, to see and hear how people experience care. The visits are carried out by our authorised representatives. We can make recommendations or suggest ideas where we see 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. 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.

My Views Matter

From September 2022 – March 2023, our Enter and View visits will be part of a project called 'My Views Matter'. This project is specifically focused on residential and in-patient care for people with learning disabilities and autistic people in Norfolk. We are implementing this project in response to the tragic events at Cawston Park, in which three residents with learning disabilities died between 2018 and 2020. One of the key findings from the Safeguarding Adults Review was that residents and their families were not being listened to.

My Views Matter will involve visiting around 20 residential homes across Norfolk to find out what people with learning disabilities and autistic people, and their families, want from their residential care. It will also investigate whether residents' and their families' views are being taken into account in how care is delivered. The 20 homes have been selected to provide a representative sample of homes in different areas of the county, different CQC ratings, different sizes of home, and different sizes of provider chain. These are all aspects which professionals have told us affect the ability of homes to deliver personalized care effectively.

Alongside the Enter and View visits to homes, we are also interviewing family members and professionals in the sector and organizing focus groups with care home residents outside their homes. The project is being implemented with the assistance of About with Friends, NANSA (Norfolk and Norwich SEND Association) and Opening Doors.

A final report from this project, which will report on data from across the county, will be published in May 2023.

How we gathered people's views on this care home

We visited Swanton House Care Centre on 04/10/2022, and the visit was announced in advance, in order to minimise disruption to the people living there. We spent around two hours talking to residents and staff, and observing life in the home on that morning, and examining the building and its facilities. We also interviewed three family members of residents. In total, we spoke to five of the 14 residents living in Bluebell, the part of the service where people with learning disabilities are cared for. We also spoke to four staff members, including the manager.

The visit team was:



Rachael Green -Research and Projects Manager



John Spall -Enter and View Co-ordinator



Jessica Hickin -Project Officer

About Swanton House Care Centre

Swanton House Care Centre is a nursing and residential home, split into three different buildings. This Enter and View report covers Bluebell, which is the part of the service which specialises in learning disabilities, although not all of the people living there have a learning disability. 14 people live in Bluebell, and they have a range of physical, neurological and learning disabilities. Several have quite complex needs. Swanton House is part of a larger organisation called Swanton Care, which operates over 50 care homes across England.

The home is based in a small rural village called Swanton Novers. The most recent CQC inspection was conducted in 2020, and the home was rated as 'Good'.

Summary

During this Enter and View visit we focused on what residents thought about their care, and the degree to which they were being listened to by the home staff. We considered the following themes, with the following findings:

- Voice choice and personalisation: People seemed to have a good amount
 of control over their lives and how the home was run. This was achieved
 through regular residents' meetings and good relationships between staff
 and residents. Family members that we spoke to were happy with how the
 home communicated with them and responded to requests.
- Premises: The home has recently undergone extensive renovations, was
 pleasant and tidy, and is set in extensive grounds. There is a good amount of
 communal space and good facilities on site, some provided in response to
 residents' requests.
- Activities: The home is in quite an isolated rural location, making outside
 activities more difficult to access. However, the home compensates for this
 by bringing in activities from external providers, employing dedicated
 activities staff on site, and having good on-site facilities.
- Relationships and community: Relationships between residents seemed to be good, and people were well-supported to see their family members regularly. The staff seemed to have friendly relationships with residents, and to understand how to anticipate potential tensions between residents.
- Food and health: All of the people we spoke to said they enjoyed the food at Swanton House. The weekly menu offered a range of healthy dishes, and people were regularly consulted about the weekly menu. People were offered alternatives if there was a dish that they did not like.
- Relations with the broader health and social care system: The manager reported that Swanton House has a good relationship with Norfolk County Council and the local GP surgery, who send a nurse in once a week to see anyone who requires it.

Overall, the care we witnessed at Swanton House seemed to offer people a good range of options for living an active and happy life, and to care well for people with quite complex needs.

Findings

Voice, choice and personalisation

More detail on the ways that the home takes people's views into account in specific areas are detailed in the sections below. In this section, we give some more general detail about how residents and their families were supported to take control of their care and their home.

Mechanisms for ensuring residents' voices were heard and responded to

There is a monthly residents' meeting which is an important way for the home staff to understand what people want and anything that they are not happy with. People are asked whether they would like any new activities and what they would like to be on the menu. People can also discuss any household decisions, such as whether they would like to get a pet. The decision to keep chickens had come out of one of these meetings. The staff also make suggestions at meetings, to encourage residents to try new things.

As mentioned below, the ongoing, friendly relationships between residents and staff seemed to help the home to understand and respond to people's preferences.

Responsiveness to family members



They are receptive and I can always discuss things with them. They are helpful and cooperative.



- Relative

The three family members that we spoke to were all happy with the home's communication with them, and were confident that their relatives liked living there. The home staff are keen to facilitate family visits, and regularly keep in touch with family members.

The home also responds promptly to the requests of family members. For example, one family member who wanted their relative moved to a room in the

main Bluebell building reported that the home had responded by moving them as soon as a room became available.

A family member of a different personwho has regular medical appointments noted that the home "errs on the cautious side", and will always call an ambulance if they are in any doubt about an incident, and keep them up to date about what is happening. They are also keen to help them to find new ways to keep their relative active and to help in their rehabilitation, including setting up a small garden for his relative. who enjoys gardening. This family member did mention that they were sometimes unsure as to whether information was always passed over when staff members were changing shift, although they did not believe that this had ever affected his relative's safety in any way.

Premises

The three homes that make up Swanton House Care Centre are at the end of a long drive, with ample parking outside. The buildings are over 100 years old and are set in over 20 acres of grounds which are well-tended and pleasant. There are three different facilities here, Birch House is for nursing care for the elderly, Holly Court is for people with mental health problems, and Bluebell specialises in the care of people with learning disabilities. All of the buildings are well-maintained and a substantial amount of money has recently been spent on repairs and renovations.

Bluebell is behind a wooden fence, and is accessed through a gate, which you need a card to open. There is a large area outside the front door, which is mainly covered in gravel, and has some benches with a standing ashtray next to them. There are plant tubs either side of the path, which we are told are being planted up with spring bulbs. Several of the entrances to residents' rooms are visible from the front of the building. They have their own numbers on the doors, and each room has its own kitchenette. No residents invited us see their bedrooms.

There is a communal area near the front of the building. This is a long room, which has a dining area and kitchen at one end, and a living room area with a television at the other. There are board games and DVDs on shelves. There are photos on one wall, showing the residents on recent outings and activities. There are paintings created by the residents on the other wall above the sofas. There are paintings by each resident, and larger canvasses that all of the residents have contributed to. The floors are a wood laminate.

The walls throughout the home are painted a neutral, beige-brown. Along the corridor from the living room there is a second dining room along the corridor which also has a tea and coffee area for staff. This room used to be a bedroom, but was converted to be a second dining room because one of the residents needed to be away from the food as it was cooking. The separate staff area for teas and coffees is there because the residents need to have decaffeinated coffee, and drinks were getting mixed up when everyone was making their hot drinks in the same place. This corridor also houses the administration office and a clinic room.

There is also a courtyard garden to the rear of the building, which is a pleasant space with a patio dotted with planters, and areas of gravel. There is a gazebo in the middle with chairs and benches, and another ashtray.

Outside the fence there is a garden area available to people living in all three homes. This is quite large, with a lawn, and paved walkways. There are flowerbeds and raised planters with a range of plants in that residents were

growing. There is also a chicken run at the back, with around five hens, which were often mentioned by the people living in Bluebell as a particular highlight. There is also a recently-planted apple tree, with a plaque commemorating a former resident who passed away.

There is an activity shed in this garden area, which is mainly given over to a large table being used for arts and crafts. There are lots of arts supplies around the place, and residents' artworks all over the walls, and a corner with drums, percussion and other musical instruments.

When external providers come in to put on events, the communal area in Birch House is made available to residents of Bluebell. Another building is currently being renovated to provide more facilities and more communal space, including a pool room and a hairdressers salon, and an orangerie is planned to be built, adjoining Bluebell. The residents are therefore generously served with communal spaces and facilities, with more to be opened shortly.

Activities

Residents have a range of options for activities, which are mainly provided on site. We were shown an activity calendar, which provided options for all residents to choose from for each day of the week. This can be changed on a weekly basis. Some of these activities are provided by dedicated activities staff on site. These include painting and music sessions in the activity shed, playing bingo, doing word searches, gardening and feeding the chickens. People have the option to participate in the scheduled activities, and are offered alternatives if they do not want to do the scheduled option. Some residents prefer to stay in their rooms, or do not have the capacity to participate in all of the options on offer.

There are regular visits by external providers, especially by musicians, including guitar players, singers and keyboard players. For people who do not want to, or are unable to, come out of their room, the musicians can go into their rooms to perform for them. There are also regular visits from people who bring in dogs, guinea pigs and miniature donkeys.

People also go on outings, although these were limited at the time that we visited, as the minibus had a mechanical problem and was awaiting repair. We saw photos of a visit to a church in Dereham, where residents went to pay their respects after the death of the Queen, and to leave messages in the book of condolences. People light up when we ask them to tell us about these photos, and seemed to have enjoyed this visit very much. They also enjoy trips to a local garden centre café, MacDonalds, and one resident likes going to the Post Office.

invited, and there are plans to begin holding these again. Residents therefore have a wide range of activities that they can participate in, and the relatively remote location of the home is compensated for by activity provision on site.

Relationships and community

Between staff and residents

The interactions we observed between staff and residents were caring, respectful and attentive. People who were able to, told us that they liked the staff. Staff were very responsive: they noticed promptly when a resident needed some help to clean themselves after an activity, and were very quick to help someone who was having some trouble eating their lunch. They also moved the visit team promptly to a different room when our presence began to disturb someone.

Staff also seemed to have a good knowledge of residents, and were able to talk in detail about their needs, preferences and personalities. They were also very aware of the dynamics between residents and how to manage them. One patient's condition could cause them to become agitated, and staff were adept at calming them down, and at reducing their impact on other residents. This included a good knowledge of this person's friendships, and which people could help them to calm down.

We also saw evidence that when residents wanted to do something that staff disagreed with, they were allowed to proceed under supervision and staff did not try to impose their opinion on them. For example, one person liked to move their furniture around their bedroom, which could potentially cause a piece of furniture to fall on them. Rather than preventing this person from moving their furniture, staff made sure that they were observed while they were doing so.

These good relationships seemed to be helped by good staff retention. The home was fully staffed when we visited, and agency staff were not used. The home was able to offer salaries above the living wage, and offer an extra grant for rural living, given the home's location. New staff are required to 30 online courses during their probation period along with face-to-face training in many subjects. The company also has training officers working across the chain, who can organise any extra training that staff would like to do.

Relations between residents

Relations between residents seemed to generally be good. Two of the people we met seemed to have developed a close companionship, with one helping the other to communicate and to keep calm. People also seemed happy to accommodate each others' preferences. For example, one person's favourite

musical was The Sound of Music, and the other people were happy to often have it on the TV and to watch it with her.

They also seemed to have strong emotional connections with one another. One person who lived in Bluebell had recently passed away, and because none of the residents was invited to their funeral, they wanted to do something to mourn their passing. They decided to plant a fruit tree in the garden with a plaque commemorating the person.

Due to their conditions, there were sometimes potential tensions between residents. These seemed to be well-understood by staff, who took measures to head off any conflict. For example, one person could be quite noisy, which could be upsetting to people who preferred a quiet setting, but staff members were careful to keep the noise levels down and to ask people to move to other rooms when necessary.

Relations between residents and the broader community

People in the home who are still in touch with their families have quite regular visits, and family members mentioned that the home was very helpful in facilitating family members' visits. Due to the home's quite remote location, possibilities for participation in the local community are perhaps limited, as there are not many local amenities. As mentioned above, though, the residents like to go to a nearby garden centre café.

11

Food and health

The residents we asked all told us that they like the food at Swanton House, and they clearly looked forward to their next meal. They also spoke about the Sunday roast as their favourite meal and a highlight of their week. The residents' menu was decided at the residents' meeting. There are two options for each meal, one with meat and one with fish, and soup was also offered. The desserts are made to be low in sugar, so that anyone who is diabetic can also eat them. All of the menu choices are designed to be healthy, and they all include vegetables. Menu choices included roast dinners, sausage casserole, fish in white sauce, and more.

Staff were aware that there was a risk of choking for one person. Their meal was adjusted to be safer, and this person was supervised while they ate, to remind them not to eat too fast.

All of the residents seemed to be of a healthy weight. Some of them enjoyed walks around the grounds, but others had mobility problems which prevented them from taking walks.

Interactions with the broader health and social care system

The manager told us that they have had a good relationship with the broader health and social care system in Norfolk, and did not report any concerns. The local GP surgery has been responsive, and sends a member of staff the home every week to see anyone who requires it. This is a service that the home pays for. The manager also reported that they have a good relationship with Norfolk and Waveney Integrated Care System.

In addition, they also reported having a good relationship with Norfolk County Council (NCC), although there are sometimes disputes over funding when residents are moved from Continuing Health Care funding to NCC funding.

Recommendations

The residents that we spoke to told us that they were happy living at Swanton House, and the standard of care that we witnessed was good. The relatives that we spoke to were also happy with the service provided at Swanton House, and were reassured to know their relatives were well cared for. Despite the remote location of the home, the use of external providers and an activity team on site meant that there was a good range of activities for people to choose from. Relationships between staff and residents seemed to be good, contributing to well-personalised care.

The standard of the premises and the facilities provided was impressive, and is due to be improved. The one recommendation that we would make would be to include residents in decisions about how buildings, and particularly bedrooms, are decorated. We felt that this would add to the homely atmosphere.

Service Provider Response

Dear John,

Thanks for this. It's lovely to read a positive report! Thank you to you and your team, we, and the individuals we support enjoyed your visit. We found it helpful and constructive and welcome the comments and feedback you have suggested.

Kind regards,

Nigel Snelling

Registered Service Manager Swanton Care Centre.

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