

# Enter and View Report

---

Prince George Duke of Kent Court

Shepherds Green, Chislehurst BR7 6PA



Healthwatch Bromley

June 2021

Contents

Visit Information ..... 2

Purpose of the visit ..... 2

Methodology ..... 3

Acknowledgements ..... 4

Staffing ..... 4

Background ..... 5

Accessibility ..... 6

Tour of the building ..... 6

Dining ..... 7

Facilities ..... 8

Support for those with dementia ..... 9

Admission of residents ..... 9

Medical support and medication..... 9

Fire safety..... 9

Feedback ..... 9

Covid-19 ..... 9

General feedback from residents, family and friends ..... 11

Activities ..... 11

Recommendations ..... 12

Conclusion ..... 13

## Visit Information

Service visited:	Prince George Duke of Kent Court (PGDoKC)
Address:	Shepherds Green, Chislehurst, Kent, BR7 6PA
Care Home Manager:	Mr Simon Doherty
Date and time of visit:	7th and 9 <sup>th</sup> June 2021, 10 am - 4 pm
Status of visit:	Announced
Healthwatch Bromley Enter and View Authorised Representatives:	Aastha Kamboj, Namrata Bansal and Gerda Loosemore-Reppen with Isadora Pilau de Almeida (telephone reserve)
Lead Authorised Representative:	Aastha Kamboj
Healthwatch Bromley contact details:	Healthwatch Bromley Community House South Street Bromley BR1 1RH Tel: 020 3886 0752 Email: <a href="mailto:info@healthwatchbromley.co.uk">info@healthwatchbromley.co.uk</a>

Healthwatch Bromley (HWB) has the power to Enter and View (E&V) services in the London Borough of Bromley. These visits are conducted by teams of trained HWB E&V Authorised Representatives.

### Purpose of the visit

The Health and Social Care Act allows HWB E&V Authorised Representatives (ARs) to observe service delivery and speak to patients, residents, staff, relatives, friends and carers. Visits may happen in response to concerns expressed to HWB, but also where services have a good reputation. We can thereby learn from examples of organisations doing well and those needing to improve, from the perspective of the people who experience the service directly.

Enter and View visits are not intended to identify specific safeguarding issues. If safeguarding concerns arise during a visit, they are reported in accordance with HWB Safeguarding Policy. If at

any time an AR observes a potential safeguarding concern, s/he will inform the lead AR, who will then end the visit. If any member of staff in the observed organisation wishes to raise a safeguarding issue, they will be directed to the Care Quality Commission (CQC) and Bromley Council's Safeguarding Team. No such concerns arose with PGDoKC.

HWB Enter and View programme has been designed based on local intelligence and feedback, supplemented by feedback from the public, and liaison with local partners and stakeholders including London Borough of Bromley and the HWB local Committee.

The Care Quality Commission rated the home as 'Good' in an unannounced visit in October 2017. Prior to the Healthwatch visit, the home had been inspected by the CQC for a follow up visit in March 2021; results from this inspection were subsequently published on the CQC website in May 2021.

### **Methodology**

In response to the Covid-19 pandemic, HWB has successfully introduced a new digital approach to delivering our E&V programme. Service providers may choose between a virtual visit or physical visit.

PGDoKC management and HWB carried out risk assessments and agreed on a physical visit. Our ARs were asked to wear PPE and conduct a lateral flow Covid test on site. ARs were allowed in after 30 minutes as the tests were negative.

Our visit was announced in advance, after liaison with the provider to make sure they could accommodate a physical visit and identify residents and staff for us to interview without disrupting services. In advance of the visit, HWB sent the home a poster to display in communal areas, announcing our visit, with booklets explaining the purpose of Enter and View visits in more detail.

For this visit, three HWB E&V ARs attended the home, interacted with staff members and residents and were given the opportunity to speak to visitors including family members. The ARs were shown around the premises. Our remote telephone interviewer was on standby to conduct telephone interviews, but none were scheduled.

In addition to face-to-face engagement, staff, residents and friends and family members completed paper questionnaires.

## **Completed Healthwatch questionnaires**

We received a total of 27 completed questionnaires, comprising:

8 responses from family members and friends

10 responses from residents

7 responses from staff

2 responses from senior staff.

The questionnaires cover a range of questions, e.g.

- Impact of the pandemic on the home in the early stages and more recently
- Care received by residents, how it is delivered while promoting independence
- Staffing levels and whether they feel safe
- Any concerns/complaints and how the service might be improved to benefit residents.

This report summarises our findings, based on our observations and feedback received, highlights observed good practice and makes some recommendations for improvement.

## **Acknowledgements**

Healthwatch Bromley would like to thank Simon Docherty, care home manager, for coordinating this visit, the staff for their hospitality during the visit, and the staff, residents, family and friends for their valuable contributions and for completing our questionnaires. The manager and staff were very helpful and supportive during the visit and no issues arose.

## **Staffing**

On our visits, we observed the usual staffing to be:

Management team; three members on site

Office staff; Business Manager and two administrators

Activity Coordinator; one or two on site, depending on rota

Maintenance staff; facilities manager and two facilities assistants

Carers team; 17, including two team leaders, one nurse and eight care assistants, with a varying number of agency staff

Chef; one, with one or two assistant chefs

Kitchen assistants; four

Housekeeping team; four on the floor, three in the laundry

Trainer; one.

Sufficient members of staff were deployed to meet the needs of residents and implement infection control. Agency staff are used to cover illness but the manager said that consistency is prioritised,

with the same agency staff providing cover; they already know the needs of residents and have established a rapport with them.

## **Background**

Prince George Duke of Kent Court is a purpose built nursing and residential home in Bromley borough. The home is run by the Royal Masonic Benevolent Institution Care Company (RMBI). They have been caring for older people for 170 years.

The manager organised the HWB visit. He provides clear leadership and, with the leadership team, is available and visible on the premises. HWB ARs' experience supports this, we found that he could be contacted easily when necessary.

The home is located on a residential road in Chislehurst and accessible by public transport within a short walking distance. There are 12 parking bays for staff and visitors. Additional parking is possible on adjacent roads.

The building appears deceptively small from the outside, but it consists of 78 single occupancy rooms, and communal areas for residents including an extensive garden.

At the time of our visit, PGDoKC could offer residential care for up to 54 people who cannot continue to live at home, even with support from at home care services. Up to 24 people receive nursing care (those who require 24 hour support from a registered nurse). Short stay and respite care are available, to people normally cared for in their own homes. Palliative care is also available for people during the final days of their life, who require specialist skills and understanding. Dental treatment, physiotherapy and podiatry are arranged in response to need.

Our ARs were shown round by a member of staff. Due to the large size of PGDoKC, two ARs were involved, on two days. The tour started in the main foyer. The decoration in the communal areas seemed slightly dated, though the overall environment was welcoming and residents were comfortable. The home was very clean and well cared for, especially where renovations had taken place. There were no unpleasant smells. The staff were friendly and respectful and the residents looked relaxed and happy. The colour scheme was modern and during our tour we were able to see the on-going refurbishments. Smoking is not permitted.

Residents participate where possible in decisions about their care and treatment and the home provides appropriate care and respect in this area. We saw many examples of staff engaging with

the residents in a friendly and attentive manner. Staff were patient with the residents and respected their dignity.

There is a published complaints policy and process which provides people with guidance on how to raise concerns.

### **Accessibility**

On arrival, we took lateral flow Covid tests provided by the home. We completed forms to share personal information while waiting for the tests to process. Our temperatures were checked before admission as part of Covid safety precautions. We were asked to wear PPE including visors, gloves and masks and to sanitise and wash hands regularly.

Two glass doors at the entrance are operated by a code on the keypad to ensure residents' security. We had a slight concern about the signing in arrangements as the correct book could not easily be found. In an adverse event, this could impact on safety. The home would benefit from streamlining their signing in and out procedures. Residents are not allowed to leave unless accompanied by designated family members.

The home has an extensive garden area, visible from various parts of the home. The gardens have benches and tables for residents and their visitors which we noticed are well used. In conversation with staff we heard about plans for recruitment of additional volunteers to make the gardens more attractive. Volunteers assist staff in creating floral displays. New volunteers will create raised beds to allow residents to participate more in gardening activities like growing vegetables.

There are facilities for people with limited mobility, reflected in the layout of the dining room and the lounges. Signage is both written and pictorial to help people with communication needs and can be made dementia-friendly by including interactive displays. Bedrooms have different coloured doors to enable residents to identify them correctly, which helps people with dementia navigate better in the home.

There are tables with adjustable heights, used to facilitate residents eating their meals.

### **Tour of the building**

We visited numerous rooms, communal spaces, toilets and activity rooms on the ground and first floors.

Each resident's room has basic furniture provided and residents can choose to bring their own additional items such as televisions; they are able to decorate the rooms with their personal items. All the rooms we saw are bright and have a view of greenery. Every two rooms have a shared toilet between them. The toilets were well maintained, clean and free of smell.

The refurbishment programme will create en suite toilets. On the first floor, we were shown the refurbished, modern rooms. The windows allow a lot of light inside the rooms, which are very tastefully decorated but not yet occupied.

There are several notice boards throughout the building, especially in the corridors and outside the communal areas. The home keeps a photographic record of special events like residents' birthday celebrations.

Informative poster displays included names of staff and guidance on thorough handwashing to support Covid infection control.

There is no active CCTV recording within the home "due to GDPR regulations". There is a chapel on site but it was not in use at the time of our visit due to Covid.

## **Dining**

The main reception features a modern, clean bar area installed in April 2021. This space opens daily at noon and capable residents can purchase alcoholic or non-alcoholic drinks and snacks. Residents can purchase their own bottles of alcohol and drinks of choice to be stored safely at the bar. According to the staff, they enjoy these on special occasions.

The main dining room on the ground floor can seat up to 65 people comfortably. Residents can choose where they eat but during our visit the hall was being used to near full capacity during lunch. The dining hall décor is slightly dated but it was very clean and pleasant. Menus are placed on each table and residents can choose from a menu which rotates every four weeks. There is a variety of choice whilst maintaining a balanced diet. Residents' food plans ensure any dietary restrictions are met.

Residents do not have to order their meals beforehand. A member of staff asks for their food choices, giving them independence to make their own selection. In addition to the main menu,



there are options for alternative lighter meals. There is plenty of space for people in wheelchairs. The dining room overlooks the garden.

The staff can cater for any specialist dietary requirements, following advice from doctors and health professionals to ensure the residents are well looked after. Information about specialist dietary requirements is maintained in each resident's care/food plan, stored in the kitchen office.

We saw many examples of supported meals where residents not fully able to feed themselves were being supported to eat and drink safely. They were fed on special chairs by a team of carers providing individual support.

Timings are breakfast 07.45 - 10.00, lunch 12.45 - 14:15, dinner 17:30 - 19:00 with snacks available until 21:15.

## **Facilities**

A range of facilities is available. Some have been noted above, including:

- Bar
- Dining hall
- Gardens
- Local public transport
- Use of own furniture
- On site parking
- Good wheelchair access

Others include:

1. Telephone and television points in all rooms (or mobiles may be used).
2. Lift - two lifts servicing both sections of the home.
3. Use of own car or the home minibus.
4. Residents internet - residents have their own free wifi.
5. Yeti - the residents have access to a large screen called Yeti which is sensory and interactive, designed to facilitate cognitive and physical rehabilitation, and promote "therapeutic recreation". It cost £8,000 and has proved popular with patients with dementia. The Association of Friends of the Masonic Community has raised funds for the home which enabled them to purchase Yeti and pay for weekly music therapy.
6. A therapy dog comes in twice a week to interact with residents, and the home has a budgerigar.
7. Kitchenette for residents' use.

8. Video calling and a new, Covid-secure visitors' room.

### **Support for those with dementia**

Staff are trained to support residents living with dementia and those who require assistance with the activities of daily living e.g. washing, dressing and cooking.

### **Admission of residents**

Each potential new resident of an RMBI Home has to complete application forms covering eligibility and finance. A pre-admission assessment is then carried out by a member of staff, or one of the Care Advice Visitors. If the assessment is satisfactory, a place at the home is offered and a date of admission agreed. Potential residents can contact 020 8467 0081 or email [pgdokcourt@rmbi.org.uk](mailto:pgdokcourt@rmbi.org.uk). An eligibility guide is available on their website.

### **Medical support and medication**

Residents have traditionally been able to see the GP as required but during the pandemic, GP care was delivered via a video call. The home is supported actively through an association with the Beckenham Beacon GP practice, which covers all residents. There are regular visits, special calls and FaceTime consultations. All the family members we spoke to are happy with the GP care available.

Medicines were stored and administered properly with no visible risks to those who live in the home. There are locks on all cupboards and medicines are managed by authorised members of staff when they need to be dispensed.

### **Fire safety**

Fire alarm tests are conducted regularly; the main doors which lead to the garden from the café and the main entrance are alarmed.

### **Feedback**

Healthwatch received ten resident response forms. Where possible, forms were completed by the residents themselves; those who needed help were assisted by staff members.

### **Covid-19**

The home has policies and procedures to reduce the risk of the spread of infection, including the

risk posed by any visitors. Visitors are LFT Covid tested and equipped with appropriate PPE. Residents and staff are regularly tested for Covid-19. During the pandemic the home has improved its infection control processes and staff have been well trained to control the spread of coronavirus by following the stricter protocols.

Visiting - during the initial months of the pandemic, visiting restrictions were introduced according to government guidance, to ensure infection control and safety of the residents. The home created a special “pod” room where family members could meet the residents with social distancing and reduced numbers. Garden visits were also allowed. This cuts the risk of infection.

At the height of the pandemic, the home had to put a complete stop to face to face visits by friends and family members, but staff facilitated video calls using mobile phones and the communal tablet.

Now that the restrictions have eased, family members are allowed to visit residents in person provided they test negative on a lateral flow Covid test. Visitors are required to wear suitable PPE. Pre-booked slots of 2.5 hours each are allowed for meetings up to twice a week - this has helped many residents. All eight family members praised this change though one still feels visiting hours could be longer and one mentioned that they found communication around visits confusing during the pandemic.

Family and friends’ feedback on the service during Covid-19

Consensus from the family members to whom we spoke was that the home was communicating well throughout the pandemic - seven of the eight were impressed with communications, though one family member said they did not receive Covid specific updates after their mother’s admission.

Family members acknowledged that from June 2021 the garden visits really helped them and even with social distancing the visiting pod was very helpful. With social distancing and a perspex screen to avoid contamination, and use of PPE, they were able to meet their family members. One person said that as their father is hearing impaired, video calls did not work for them.

On infection control, seven out of eight family members were very impressed with the availability of PPE and supplies with one saying “I’ve been very impressed by the degree of infection control measures. The staff are tested two or three times a week, and the residents monthly. This has prevented any cases.” One family member expressed their disappointment that not all staff were

vaccinated at the time of the visit, which might reduce the effectiveness of infection control measures. This concern will have been alleviated by the staff vaccination requirements coming into force on 11<sup>th</sup> November 2021.

When asked about the impact of Covid on resident family members, four people said they had coped well as they either understood the reason why the restrictions had been imposed, or are not well enough to understand or be worried. One said that loss of mobility has affected her mother adversely, another that her mother normally enjoys going out but has not been able to do so.

### **General feedback from residents, family and friends**

A majority of residents feel happy, comfortable and secure at the home.

Family members praised the staff and their efforts but mentioned that they cannot guarantee what happens behind the scenes, as they only experience the service for a part of the day. This may suggest insufficient communication and reassurance from the home.

Feedback about staff members:

“The care home staff have shown a huge degree of professionalism and positive spirit, keeping residents content during these difficult times.”

“Staff have helped my mother regain her physical health, which was failing following medical issues in 2020. They have encouraged her to eat again and look after herself better. I have no doubts that their attentiveness has given her a new lease of life.”

One person said the information they receive from RMBI head office can differ from actual practice at the home, for example in relation to visiting rules and changes, and felt that clarity is essential for the smooth running of the system.

### **Activities**

The home believes in a mental and physical approach to engagement. Regular activities are provided such as gardening and painting, day trips and low stress fitness classes. Staff also encourage and support residents' own hobbies and interests.

Family members' feedback on the activities offered:

Four acknowledged there are sufficient activities at the home to offer a good choice and that staff encourage reluctant participants to take part, through direct contact.

Three said they didn't know what activities are on offer now, but acknowledged that the home contacts them monthly about the planned list of activities.

One suggested conducting a survey to enable residents to suggest activities they would like to participate in.

## **Recommendations**

We make the following recommendations based on our observations and interviews and the questionnaire responses.

### **Recommendation 1**

The entrance of the home is welcoming but there are different books for signing in and out, depending on the category of visitors. At the time of our visit, the home was unable to find the book in which the HWB ARs had entered their information. This process could have an impact on the safety and security of the residents, especially in the event of fire. It should be reviewed, and organised better, perhaps using just one book.

### **Response from Prince George Duke of Kent Court**

All visitors to Prince George Duke of Kent Court would sign the Visitor's Book when coming into the home. Other books held at reception relate to staffing and Infection Control documentation that is required to be completed for staff, this was an essential part of the monitoring process when coming into the home.

### **Recommendation 2**

The ongoing refurbishments will make very positive improvements to the home facilities and environment, e.g. by the provision of en suite toilets and improved décor. They should be completed as soon as possible.

### **Response from Prince George Duke of Kent Court**

The refurbishment of 19 rooms will enable all rooms to have en-suite facilities. Works will take place in June 22 and will be completed in September 22. As part of these works, 2 corridors that support residents that require residential needs will be decorated, improving this part of the home significantly.

### **Recommendation 3**

A brief survey of residents, family and friends could be conducted on activities provided and others which could be added. Once arranged, these should be communicated clearly to families and friends to enable them to reinforce staff encouragement of residents to participate.

### Response from Prince George Duke of Kent Court

COVID-19 and the restrictions on visitors coming into the home has impacted the range of activities possible in the home. Activities are reviewed with residents on a monthly basis, a more in-depth review saw new activities included and now with the new Dementia House sensory equipment that can be enjoyed by all residents across the home. The home is committed to communicating the activities to all residents and families and including ideas of new things people would like to try.

### Recommendation 4

Advice and information received by residents, family and friends from RMBI head office should be checked for consistency against actual practice at the home.

### Response from Prince George Duke of Kent Court

The team will monitor the information sent from RMBI Head Office and the information cascaded from the home. Monthly relatives' meetings are held which enables any inconsistencies or questions to be raised, discussed, and agreed.

### Recommendation 5

Covid-19 processes, procedures and protocols for infection control are impressive and should be maintained at a similar, appropriate level.

### Response from Prince George Duke of Kent Court

Prince George Duke of Kent Court is supported by RMBI Head Office in all aspects of infection control, this support ensures that procedures, resources, and guidance is effective and meets the current guidance in place. The management team feels supported in the area and is confident that it can respond to any future changes in guidance that might occur.

### Conclusion

Prince George Duke of Kent Court staff are well trained and their morale is high. Each department effortlessly links with the others and residents seem comfortable and at ease. The home offers a safe environment, well supported by The Royal Masonic Benevolent Institution Care Company. We received positive feedback from family, friends and staff about PGDoKC. The manager and leadership team are accessible and HWB ARs found it easy to contact them when necessary.

The Healthwatch Bromley Enter and View Team would like to thank the visitors, staff and residents at Prince George Duke of Kent Court for their courtesy, patience and openness during our visit.

This report will be published on the Healthwatch Bromley website [www.healthwatchbromley.co.uk](http://www.healthwatchbromley.co.uk) and disseminated to the provider, commissioners and the public.

### **Disclaimer**

This report collects the views of the residents, visitors and staff members that HWB ARs spoke to during the visit and cannot represent the views of all residents, relatives and staff there. The observations made in this report only relate to the visit carried out in June 2021.