

Camphill

Review of Residents' Social Wellbeing



Published:

Contents

1	Introduction.....	3
1.1	Details of visit	3
1.2	Acknowledgements	3
1.3	Disclaimer.....	3
2	What is Enter and View?	4
2.1	Purpose of Visit	4
2.2	Strategic drivers.....	5
2.3	Methodology	6
3	Summary of findings	7
3.1	Community	7
3.2	Staff interactions	9
3.3	Resident activities and wellbeing	9
4	Additional findings	11
5	Recommendations	12
6	Service provider response	13
7	Appendix A.....	14



1 Introduction

1.1 Details of visit

Details of visit:	
Service Provider	Camphill Milton Keynes Communities Ltd
Date and Time	17 th November 2022 9.30am -4.30pm
Authorised Representatives	Helen Browse

1.2 Acknowledgements

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

1.3 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



2 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.

2.1 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 Camphill Residential Home. As well as building a picture of their general experience, we asked about experiences in relation to social isolation and physical activity.



2.2 Strategic drivers

As social isolation or loneliness has been recognised as having an impact on people's physical health and emotional wellbeing, Healthwatch Milton Keynes determined this theme as the stated purpose of our planned programme of Enter and View visits to Care Homes across the Borough and explore with residents their experiences of social life in such settings.

We know that, just because people were living in homes with other residents, did not mean that they were somehow immune to loneliness or social isolation. It's 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.¹

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 understand the pressures of the COVID 19 pandemic on services and have had a significant amount of feedback with regards to the necessary changes to service delivery and accessibility to promote safety for all. It is our intention to be able to formally report the impacts these changes have had on both services and those who use the services and their loved ones.

For the 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 or service can be understood. Healthwatch Milton Keynes will be specifically focusing on the experiences of the services users

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

2.3 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 9.30–4.30pm.

On arrival the ARs 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 ARs with a thorough tour of the Home and introduced them to staff and residents along the way. The ARs were subsequently afforded access to all parts of the Home for the duration of the visit.

The ARs used a semi-structured conversation approach (see Appendix A) in meeting residents on a one-to-one basis, mostly in their own rooms. The checklist of conversation topics was based on the pre-agreed themes for the Care Home visits. Additionally, the ARs spent time observing routine activity and the provision of lunch. The ARs 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 fourteen residents took part in these conversations.

In respect of demographics: –

- Participants were aged between 27 and 65 years of age with an average age of 48 years.
- Six were females and nine were males
- Four had been in residence for more than 30 years, six had been in residence between five and twenty-seven years, and one of the participants is a day client.
- All residents were spoken to in communal areas.

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



3 Summary of findings

Camphill is a community for adults with disabilities that provides a home environment that provides, structure, support, learning opportunities and the chance to achieve whatever an individual's potential may be in a caring safe environment. Care staff are a combination of live-in permanent staff who work on a twenty-four-hour rota and volunteers alongside a training team in a variety of disciplines to ensure that there is a structure and purpose to each day and that there is a practical relevant skill for each of the residents learn and enjoy.

The premises are set out over two sites Willen and Pennyland, this visit concentrated at Willen, which is the main site and houses 59 of the 70 residents currently in Milton Keynes.



This Mural was created by residents, staff, and volunteers in the pottery workshop to mark the 40th anniversary of the community in Milton Keynes and is situated on the wall outside the pottery leading to the main office and bakery.

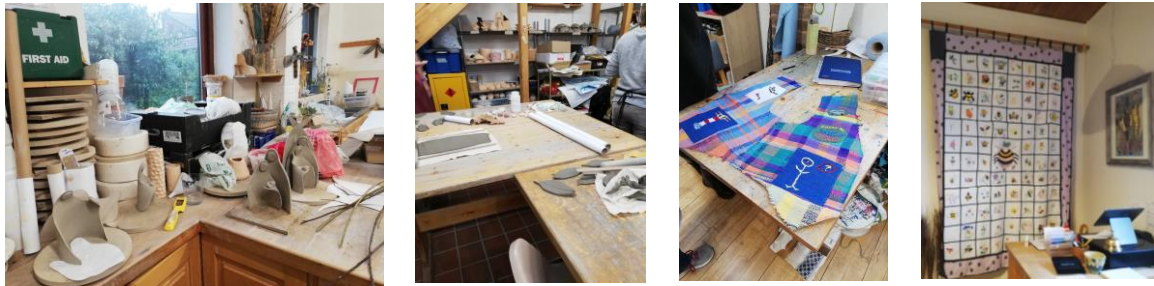
3.1 Community

The large Willen site is almost a town of its own, and has a real community feel to it. The houses, where the residents live, all have their own kitchen, dining, and lounge area.

The site also has a bakery where residents work and produce a variety of produce, some to be sold in the onsite café and some to be used in each of the houses for mealtimes. There is a pottery arts and crafts shop, a weave



and textile shop, a Tec Lab, Music & radio studio, and newsletter production and of course all the outside gardening and horticulture projects



There is also a Theatre for drama groups, backstage groups, and public performances. Healthwatch Milton Keynes used this theatre when we brought the show 'Phyllis' to Milton Keynes. All the spaces are well very equipped with staff and volunteers to teach and support residents.

Mealtimes are very much a family time, each of the 'houses' has its own kitchen dining area and lounge where the residents go for their lunches, always help at hand from care staff, evening meals are the main meal of the day. Residents may help in the preparation of the evening meal, but this may be prepared by the care staff in the individual households, each house will be different dependent on resident needs on any given day



One of the larger houses, observed during lunch, was a little like a student college hall. With loud, organised chaos full of chatter and laughter, everyone wanting to be in the kitchen at the same time but all happy to take turns, everyone ate, sat at the table and were happy with their lunch.

Mealtimes are positive time, with residents having input into their meal planning and helping to make meals depending on ability, set meal times ensure that everyone knows when to be in the house for meals or to have let staff know they will be out and about, but residents have to take a little responsibility for their time management, the care team are there supporting and guiding



Every aspect of daily living has been thought about, including IT, baking, weaving, and drama with the ability to have a balanced combination of these workshops to give a well-rounded vocational education which creates a creative environment to encourage growth, wellbeing, and positivity.

3.2 Staff interactions

Staff had a good relationship with residents, they were trusted, and residents were happy to talk to them about all types of subjects during lunch from their next activity to health issues and personal relationships. Care staff were careful to have conversations in appropriate situations but always giving time and support to residents, even if that required telling someone they had to wait until another resident had some private time.

Staff oversee the meal preparation and mealtimes, helping when asked. Residents were all relaxed and care staff picked up on any minor tensions and defused things before anything could escalate. Staff took care to always explain to residents' outcomes and reasons.

Care staff knew the residents well and the residents also knew the care staff well and residents joked about my visit, the managers or 'the big wigs' having lunch in the coffee shop and why wasn't I with them. They were very aware of everything that was happening within the community and were very proud and wanted me to see and know about everything. It wasn't easy to get away from my lunchtime visit as the group I was with now wanted to show me everything they were doing; I was made so very welcome.

3.3 Resident activities and wellbeing

The quality of the workshops is outstanding; the equipment helps but the attention of the staff in helping residents achieve their goals is what makes the workshops so good. Many of the items produced are sold in the coffee shop: pottery, textiles, baked goods, paintings, all produced by residents. Much of the food used in the kitchen is also produced in the gardens, they really have a great deal to be proud of.

There is also a computer Tec lab so, for those who are able, they can be up to date with modern technology. They have their own radio station and newsletter. All skills used in the theatre are learned, if not front of stage, then backstage and many performances are open to the public in the impressive theatre. The theatre is also used for dances, bingo, and other evening entertainment. Many of the residents also go off site during the evenings to visit friends, cinema or other dance groups or discos.



Residents are encouraged to reach their full potential of independence, for some this means learning to manage finances, taking trips outside the community, or taking part in the workshops that are available. For others, Independence could mean having a job outside the community or getting married, the possibilities are extensive and different for each resident. The common factor for each resident is that their confidence grows when they feel safe and have structure alongside meaningful 'work roles' within the community.

Residents are very proud of their achievements and of the freedom that the community gives them in goal setting. They are encouraged to do more or to try different things because staff and volunteers are at hand to explain and support their aspirations.

Residents are aware of the importance of diet and exercise through meal planning, gardening, and exercise. Some residents are in the bike club, and a couple of residents have just joined a gym to help with weight loss and have taken up swimming. Annual health checks with GP's are carried out and the residents understand the importance of knowing what medications they take and when, even though this is managed by care staff.

Some of the residents are able to go away on holidays, this could be eight residents with 2 care staff. Some holidays are in the UK, but could be to Tenerife, or a mini bus day trip to Harry Potter World or the RAF museum. Two clients were at the community as day visitors on the day we were there. They were each doing very different activities; one drama and one pottery, but both enjoyed the workshops that the community has to offer

Residents are kept in touch with their families where possible, many told us about their siblings and nieces and nephews, and their plans for Christmas and the holidays.

Two residents were helping to make Christmas wreaths for all of the accommodation houses, these weren't to be given out until they were all completed so they could all be put up on the same day, although the coffee shop had theirs early for an 'open weekend' the previous weekend.



4 Additional findings

During conversation with residents and care staff a question was asked by staff regarding what we could do for Camphill residents?

Healthwatch Milton Keynes run women's groups to discuss Menopause and it was asked if a specific session could be run at Camphill, the age range for female residents is between 28 and 60 so understanding why their bodies change is important but joining an existing group may not be appropriate.

Healthwatch Milton Keynes will organise a menopause discussion event to be held at Camphill.



5 Recommendations

On the basis of this visit no issues were identified through interviews or observations.

Healthwatch Milton Keynes would like to congratulate Camphill on the culture within the Community as well as the physical environment.



6 Service provider response

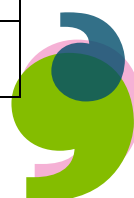
The provider was given 20 working days in which to respond but, as yet, Healthwatch Milton Keynes have not received a written response to this Enter and View report.

7 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?				
Safeguarding, dignity, and privacy	Yes	No	Don't Know	Comments
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?				
Concerns				
Is there anything you don't like about your carers?				
And Finally				
What is your favourite thing about your carers/living here?				
If you could change one thing about your				



care, what would it be?	
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