



Enter & View

Dyers Mews

June 2023

healthwatch
Milton Keynes

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2 Introduction

2.1 Details of visit

Service provider	Precious Homes
Date and time	28 th June 2023 9.30am to 1:30pm
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 Dyers Mews 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.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 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 impact that the COVID 19 regulations have had on both services and those who use the services and their loved ones through this year's Enter and View Programme.

¹ <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 Representative arrived at 9.30am and actively engaged with residents between 10:00am and 1:30pm

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

On arrival the AR introduced themselves to the Manager and the details of the visit were discussed and agreed. The AR 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 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 2 residents took part in these conversations.

In respect of demographics: -

One male and one female resident took part both aged 49years, the other two residents were out at college.

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

4 Summary of findings

4.1 Overview

Dyers Mews has been a care home for fifteen years and the Manager has been with the home since the beginning, starting as a carer and going through the required training to become the manager, she is passionate about residents and staff.

The home is registered to provide personal care for up to six people with learning disabilities and/ or autism, but recent renovations removed one bedroom to provide more living space for residents. This refurbishment means that the home has capacity to house five residents, each of whom has a one-to-one carer.

4.2 Premises

The home is situated in a quiet cul-de-sac, the premises are secured with a gate and intercom. The setting is very quiet but still very central, being only 2.5 miles from Central Milton Keynes. The entrance is bright and welcoming to residents and visitors:



Dyers Mews is a large house and has two floors, there is a large eat-in kitchen, and two large sitting rooms, a large conservatory, and a breakout room. All rooms are well equipped with TVs and comfortable seating.



The kitchen is fully equipped as residents are encouraged and assisted to cook for themselves as much as possible. The kitchen is a key area of the home and residents have an evening meal provided for them. The people living at Dyers Mews are encouraged to eat together as a family although they are able to eat wherever they choose.



Bedrooms are individual, and decorated as the residents choose, each room has its own ensuite. One bedroom was unoccupied, with a new resident moving in shortly. We were able to look at this room and saw that there is a wardrobe, a set of drawers, a bedside table, and a wall mounted television ready to be arranged and installed according to the new resident's preference.

The large, well maintained, garden wraps around two sides of the home. One side consists of an expansive patio with seating, the other side is set up as a football pitch.



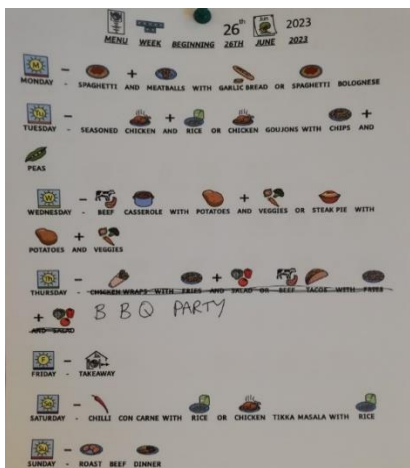
4.3 Staff interaction and quality of care

Each resident has a nominated key worker and link worker, but this is not necessarily their one-to-one carer. The one-to-one carer changes regularly, sometimes daily, and there is a notice board for residents to show them who they are paired with each day. This practice ensures residents learn to trust all staff, they may have their favourites, but it means that when staff have annual leave or days off the change in carer does not cause any stress or anxiety for residents because they are used to, or familiar with, all staff.

Staff were observed to be encouraging, caring and supportive with residents. At the beginning of the visit, we saw the calmness with which situations were handled. Residents didn't want to leave the home to go to college and were resisting their routine morning travel plans to college. Staff remained very calm and reassuring, ensuring the residents were not overwhelmed in any way so that their day could, and did, continue as planned.

Residents are encouraged to do their own laundry, shopping, and cooking, with care staff there to support and help whenever needed. Specific goals are set with each resident and achieving these encourages the feeling of a sense of achievement and independence.

Residents prepare their own breakfasts and lunches so there is lots of information in the kitchen about dietary information to guide residents towards a healthy and balanced diet. These also act as prompts for people to ask for support from care staff if they need help in the kitchen. The care staff also accompany residents to do their shopping. The menu for the shared evening meal is on display in the kitchen.



Residents are also encouraged to clean their own rooms and keep their personal items in a manageable order within their own room. People are supported by their individual key workers in managing their finances. Medications for all residents are managed by the care team, even though residents may be aware of what they have been prescribed and why.

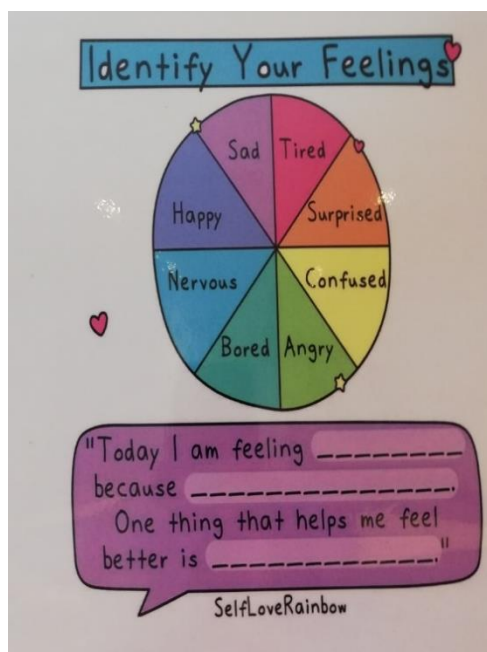
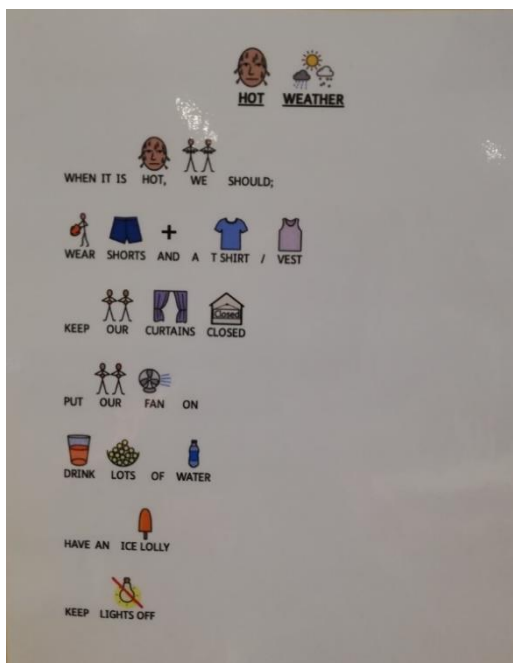
There is a good relationship with the local GP practice where the majority of residents are registered.

4.4 Social engagement and activities

Even though the number of people living at Dyers Mews is small, there is a wide range of needs and abilities. Residents are free to come and go as they please if they have the energy and/ or the financial means to take part in the activity of their choice. If people choose to take a trip to the shops, go out for lunch, to the cinema, go for a drive, a cycle, or a walk then their carer will accompany them. Similarly, if a resident wants to stay home and watch TV or listen to music then that is also acceptable. Staff are aware of the preferences of the people they care for and have a good understanding of what is appropriate for each individual.

There is a large basket full of football boots/ shoes in a variety of sizes so there are no excuses not to join in on a football game in the large, enclosed garden.

There are simple reminders for residents of what may help them, for example, in hot weather or if they are having a bad day posted around the home.



Family members can visit whenever they wish with some residents having preferred days for visits, and others having more family loving close by family and able to call in more often. Care staff are at hand to help residents keep in touch in whatever way is appropriate for each person.

4.5 Additional findings

The Manager was disappointed with the lack of ability to get NHS dental appointments for residents as there are now Oral Health targets for care homes to comply with. The manager is passionate about the health and wellbeing of her residents and notes that, as for a lot of people, private treatment is generally out of reach for the residents of Dyers Mews.

5 Recommendations

On the basis of this visit, no significant issues were identified through interviews and/or observations.

Healthwatch Milton Keynes would like to congratulate Dyers Mews on the culture within the Home as well as the physical environment of the Home.

6 Service provider response

Dyers Mews is a vibrant team that believes anything is possible for the people we support and the team. Our commitment to help people achieve their goals is built upon trust and communication.

Thank you for taking your time to come and visit our service last week.

Thank you for the positive report.



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Milton Keynes

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