

# Enter and View Report



**Bell Lodge  
Byfield, Daventry  
June 2018**



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# Details of the visit

Name and address of premises visited	Bell Lodge 25 Bell Lane, Byfield, Daventry, NN11 6US
Name of service provider	Mr Graham Holden and Ms Jane Piengjai Thongsook
Type of service	Residential Home
Specialisms	<ul style="list-style-type: none"><li>• Dementia</li><li>• Physical disabilities</li><li>• Sensory impairments</li></ul>
Date and time of visit	8 June 2018, 12.30-2.30pm
HWN authorised representatives undertaking the visit	John Rawlings, Margaret Moss
Support Staff	Becky Calcraft, Healthwatch Officer
Contact details of Healthwatch Northamptonshire	Portfolio Innovation Centre, Avenue Campus, St George's Avenue, Northampton, NN2 6JD enquiries@healthwatchnorthamptonshire.co.uk

## Acknowledgements

Healthwatch Northamptonshire would like to thank the manager, residents, visitors and staff of Bell Lodge for their assistance in planning the visit and the preparation of this report as well as providing us with information and feedback.

## 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.



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## Purpose of visit

Healthwatch Northamptonshire is carrying out a series of visits to NHS and Social Care funded accommodation in Northamptonshire to ascertain the quality of life, experience and opinions of residents, with a particular focus on activities, nutrition and hydration. Bell Lodge was selected as one of the homes to visit as they provide care to residents with a range of different needs.

## How the visit was conducted

The visit was an announced visit with the manager being given two weeks notice of the intended visit. We sent letters, posters and leaflets to the home to inform residents, relatives (or other carers and visitors) and staff about our visit and Healthwatch Northamptonshire.

The visit began with a meeting with the manager who gave us an overview of the range of current residents and their needs. We checked with the manager at the beginning of the visit who said there was no one we could not approach. There were opportunities to speak to 10 of the 11 residents. One person was asleep at the time of the visit. We spoke to 6 members of staff and 7 visitors to the home.



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# Observations and findings

## Summary

As a small home, Bell Lodge has an intimate, homely atmosphere. Open visiting arrangements and its location give it a good relationship with the village, which is enhanced by the use of the local GP and the involvement of local people. Relatives suggested that the installation of a wet room would be a great asset but appreciated the cost involved. All appropriate bathing equipment aids are currently in place.

In response to an invitation to relatives to give us their views and experiences of the home, we received 11 letters and testimonials which gave recognition to the wide range of activities provided, including Christmas parties, barbecues, garden parties, birthdays, etc. Relatives also highlighted the individualised and respectful attention and care provided, particularly in helping new residents to settle in and in supporting residents with dementia and those with challenging behaviours.

Our general impression was of an intimate, homely establishment.  
It is well-positioned in the village.

## About the home

The home is situated in the village of Byfield and is registered to take 15 residents. Currently there are 11 residents; 6 male and 5 female. This includes one married couple who have a double room. All the other residents have single rooms.

## General impressions of the home

Bell Lodge is an intimate, homely establishment in a large Victorian house. It is well-positioned in the village, overlooking the main street and local primary school, with sounds of children playing. There is a welcoming, warm and pleasant atmosphere. There were no unpleasant odours.

Outside there is a large garden which has a paved area with seating, flowers and shrubs. There are raised beds to enable residents to do some gardening tasks. Members of the local community are actively involved with the home.



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## Activities for residents

At the time of the Enter and View visit, a community musician was performing. All the residents were involved by listening and participating in various ways. The musician attends the home twice a month.

There is a programme of activities for residents, which includes: Keep fit (to a DVD); armchair exercises; arts and crafts; music; skittles; and a reminiscence group. Residents have the opportunity to go on excursions with relatives.

There are also regular weekly visits from a local hairdresser and a 'Pets as Therapy' (PAT) dog with its owner. Male residents are accompanied on visits to the local barber. A local lay preacher comes to the home to offer religious services.

An annual summer barbecue is organised at the home and relatives, friends and visitors are all invited to attend.

## Food, drink and meal times

Each resident has a monthly nutritional assessment. Menus are devised to reflect the specific needs and preferences of all residents. Breakfast is served as required at around 8am with a choice of food. The lunch menu provides residents with three choices of main course each day.

Other meals are available as required to suit residents specific needs/habits. Meals can be taken with relatives. Snacks are always available, including for visitors. All meals include a healthy option. Alcohol is available if requested.

## Care and dignity of residents

All the residents appeared well-cared for and were gathered in a relaxed, warm comfortable area. Relatives and visitors are welcomed at all times.

As visitors to the home, we were properly introduced to residents. Residents invited us to join in with the singing and other activities.

## Staff behaviour, attitudes and relationship with residents

At the time of our visit we observed that relationships between staff, residents and visitors were cordial and relaxed. Staff were respectful of residents' needs.



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## Other observations

A relative advised that five years ago they had moved their relative from a larger home and had no regrets. They felt Bell Lodge provided all their relatives' needs in an intimate atmosphere. One relative made a comment about the continuity of staff by referring to them as being 'long term'.

One person we met came to the home for day care and occasional, short term residential care. This arrangement appeared to work well for them and their family.

In advance of this Enter and View visit, Healthwatch Northamptonshire sent the home letters to send to relatives and visitors of residents advising them of our visit and inviting them to either meet us on the day or send us any comments about the home.

We received responses from 8 relatives or friends of the home's current and former residents and 3 letters from regular visitors to the home. The following is a sample of the very positive comments passed on to us by the home:

"I always find a quiet, peaceful, cheerful and positive atmosphere ... and the staff obviously enjoy very good relationships with the residents and vice versa. I thoroughly enjoy my visits to Bell Lodge."

"The level of care has consistently been the best."

"My parents have been residents in Bell Lodge for three years. They are well looked after and both enjoy their meals, entertainment and activities."

"Bell Lodge team's efforts to provide a calm, friendly and homely environment for [my relative] are much appreciated."

"The support we have had ... has made it feel as though Bell Lodge is actually an extension of our family. It is a great comfort to us to know that the team there really do care about [my relative] as an individual and treat them accordingly."

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## Suggestions for improvement

When asked about any improvements that could be recommended, one relative suggested the provision of a wet room. Other than that she was more than satisfied with the care provided.



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# About Healthwatch Northamptonshire

Healthwatch Northamptonshire is the local independent consumer champion for health and social care. We are part of a national network of local Healthwatch organisations. Our central role is to be a voice for local people to influence better health and wellbeing and improve the quality of services to meet people's needs. This involves us visiting local services and talking to people about their views and experiences. We share our reports with the NHS and social care, and the Care Quality Commission (CQC) (the inspector and regulator for health and social care), with recommendations for improvement, where required.

Our rights and responsibilities include:

- We have the power to “Enter and View” health and social care services (with one or two exceptions). Our primary purpose is to find out what patients, service users, carers and the wider public think of health and social care. Our role should not be confused with the role of the Care Quality Commission (CQC) or OFSTED. CQC is the regulator and inspector of health and adult social care and OFSTED is the regulator and inspection of children's social care. Both organisations have a legal requirement to inspect care provision with reference to national standards and guidelines.
- We prepare reports on the Enter and View activity we conduct. We have an Enter and View policy which sets out our process of delivering Enter and View and the process for developing our reports. Our values include openness and transparency and so all our reports are published. They will only be published on our website once the service providers have had an opportunity to comment on the factual accuracy. We will send final copies of our reports to providers and commissioners asking for their comments on our findings and a response to recommendations, which we will also publish a summary version of on our website. We will send copies of our report to our national body, Healthwatch England and to CQC. As part of our Enter and View, we explained to the people we spoke to that their comments would be non-attributable but that if we heard about possible harm to individuals then we are obliged to refer those issues to the safeguarding team at Northamptonshire County Council.
- We strive to be a strong and powerful voice for local people to influence how services are planned, organised and delivered.
- We aim to be an effective voice rooted in the community. To be that voice, we will find out what local people think about health and social care. We will research patient, user and carer opinion using lots of different ways to find out views and experiences so that the community is effectively represented.
- We will provide information and advice about health and social care services.





- Where we don't feel the views and voices of Healthwatch Northamptonshire and the people who we strive to speak on behalf of, are being heard, we will escalate our concerns and report our evidence to national organisations including Healthwatch England and CQC.

## Enter and View

Healthwatch Northamptonshire 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 View visits are not part of a formal inspection process, neither are they any form of audit. Rather, they are a way for Healthwatch Northamptonshire to gain a better understanding of local health and social care services by seeing them in operation. Healthwatch Enter and View Authorised Representatives are not required to have any prior in-depth knowledge about a service before they Enter and View it. The representative's role is to observe the service, talk to service users, families, other visitors and staff if appropriate, and make comments and recommendations based on their subjective observations and impressions in the form of a report. All Healthwatch Northamptonshire authorised representatives have been through a recruitment process (either as staff or volunteers), had a Disclosure and Barring Check, and received Enter and View and safeguarding training.

This Enter and View Report is aimed at outlining what we see and hear during our visits and making relevant recommendation for improvement to the service concerned. The reports may also make recommendations for providers, commissioners, regulators or for Healthwatch to explore particular issues in more detail. Unless stated otherwise, the visits are not designed to pursue the rectification of issues previously identified by other regulatory agencies.

Healthwatch Enter and View visits 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 Healthwatch Northamptonshire of their concerns, who will inform the service manager and may terminate 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.



# Contact us

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