# **Jah-Jireh Charity Homes**

August 2016

# Healthwatch Blackpool



Resident's Voice - a Healthwatch Blackpool Review

## 1 Introduction

## 1.1 Details of visit

Details of visit:	
Service Address	127-131 Reads Avenue, FY1 4JH
Service Provider	Jah-Jireh Charity Homes
Date and Time	23/08/16 @ 2pm
Healthwatch Representatives	Steven Robinson, Anish Verma, Wendy Stevenson, Kim Rushton
Contact details	hello@healthwatchblackpool.co.uk

## 1.2 Acknowledgements

Healthwatch Blackpool would like to thank the service provider, service users, and staff for their contribution and for facilitating us to carry out our consultation.

## 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, only an account of what was observed and contributed at the time.

The views expressed in this report are primarily from those who reside in the home. It is acknowledged that some of the participants in our studies may suffer from conditions such as dementia or other memory impairments which do not enable them to give fully balanced and reflective views. However we feel that it is essential that every voice is heard and recognise our duty to all who receive care in Blackpool. In order to allow for this to happen we request feedback from the care home for clarification of the issues that are raised.

## 2 What is a Healthwatch Review?

Healthwatch Blackpool is the independent consumer champion for health and social care. Its purpose is to listen to the experiences of people using services and feed them back to those who run them to make positive change.

Part of the local Healthwatch Blackpool program is to carry out reviews of health and social care services to find out how services are being run from the service user perspective and make recommendations for improvement where possible.

Local Healthwatch is granted the ability to *Enter and View* premises to observe service delivery and talk to service users. Visits can take place if there are reported issues with a service, but equally, they can occur when services receive praise so that examples of good practice can be shared.

## 2.1 Purpose of Visit

To gather information about the experience of living in a care home in Blackpool directly from those who reside in them, including quality of life factors such as privacy and dignity, quality of care, and choice of activities and food.

## 2.2 Why did we do this?

In June 2016 Healthwatch Blackpool produced a <u>report</u> which asked Blackpool residents which health and social care services were of concern to them. Care Homes were reported as the 5<sup>th</sup> most concerning service in Blackpool.

As a result of this Healthwatch Blackpool set out a statutory annual work plan which included reviews of all Blackpool care or nursing homes deemed to be "requiring improvement" in any of the five inspection areas in their latest Care Quality Commission (CQC) reports.

The Blackpool <u>Joint Strategic Needs Assessment</u> (JSNA) notes that "Dementia is the single most frequent cause of admission to care homes, and of the need for community care services for older people. The demographics of an ageing population indicate the number of people with dementia in Blackpool is predicted to rise to around 3,841 by 2020".

## 2.3 What were our aims?

Our aim was to allow the residents to have a say in the care that they were receiving. To do this, we required the cooperation of residents, family/carers, and the management and staff of the home. By collating this information, we could evaluate the quality of care within each care home we visited.

## 2.4 Methodology

We did not wish to perform an enforced *Enter and View* visit to this home. We felt that to be invited to attend the home would give us a more balanced view and encourage openness and co-operation with the care home management. To do this we wrote to the care home we intended to visit with a comprehensive outline of our intentions and purposes of a review. We also supplied the home with a poster confirming the date and time of our visit and its aims. We asked that the home place the poster in a prominent position for residents, families/carers and staff.

All Healthwatch representatives wore identification badges during the review. Before speaking to any residents, it was explained who we were and the purpose of our visit. Those residents that were happy to speak to us were asked a series of open-ended questions about what they liked most and what they felt could be improved. We confirmed that the information they gave us would be anonymous and that they were free to end the conversation at any point. Healthwatch representatives also made informal observations throughout the visit and made notes of what was seen around the home.

Healthwatch reviews are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch Blackpool's safeguarding policies. If at any time an authorised representative observes anything they have a query about, they will inform the lead reviewer who will either discuss with the service manager or make a judgement on whether this requires reporting to the Blackpool adult social care team.

Also, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the Care Quality Commission (CQC) to find out more about whistleblowing guidance.

Jah-Jireh's most recent CQC report (<u>December 2015</u>) gives an overall rating of "*Good*", although it is deemed to be requiring improvement in safety.

Healthwatch Blackpool aimed to assist the home in recognising any potential improvements in all areas of its service delivery from the perspective of residents.



#### Summary of provider 2.5

Jah-Jireh charity homes is a large care home which can accommodate up to thirtythree residents and provides nursing, respite and residential support for people based on a model of spirituality and family. The home identifies as a place for Jehovah's Witnesses to live, but accepts people of any or no faith depending on their compatibility with other residents in the home. The registered manager Tracy Gandesha showed Healthwatch Blackpool Representatives around the home and explained their model of care.

The ethos of the home is that those residing in it are treated as "brothers and sisters" and use of scriptures and Christian beliefs is in place throughout the home. The home has close links with the local Jehovah's Witness church and prides itself on including volunteers and spiritual support in elderly life and upon death. It was also explained that the home and the church work together to support families as well as residents. Staff and volunteers sit with residents until the end of their lives and do not let them die alone. Families are also invited to events and encouraged to take part in themed activities.

There are 2 activities co-ordinators at the home who are responsible for events such as arts and crafts, dancing and singing. Since the last CQC inspection, it was explained that the home was invested in spending more time with the residents and involving them within wider aspects of their daily lives.

At the time of our visit there was twenty-three residents in the home.

We spoke to 9 residents and three family members during our visit. On arrival there was a week-long annual prayer and celebration for the men inside the home, as it is custom to meditate and watch religious videos. This meant that some residents were unable to speak with us.

#### Results of visit 2.6

### General

The most reported positive aspect of residing at Jah-Jireh was the staff and the management of the home. Eight residents told us they felt safe and the community aspect was second to none. One resident

"I get to meet people I've never met before."

noted that their family is invited to stay with them in the home for free.

Residents explained that they felt the home had a relaxing feeling throughout, and that staff were very accommodating, making them very happy living in the home. Only one resident reported that they were sometimes unhappy residing at Jah-Jireh, explaining that they would prefer to be at home. All residents reported feeling involved in their care, with one person explaining it was important that their old furniture could be brought here from home.

## Food and drink

Healthwatch Blackpool Representatives were informed that the food on offer was very good in its quality, but could have more variety. One resident explained that the choice of cereal or toast for breakfast was usually fine, but they would like the occasional option to have a cooked breakfast. Half the residents spoken to indicated that more choice was needed. However overall the food provided was very good, was served hot and the amount given was right for them.

### **Activities**

Residents and their family members were very vocal about the amount of activities available on offer. When asked if the religious activities were a choice or compulsory it was explained that often residents sit

"I enjoy the workshops and discussions."

out and reflect on their own and can pick and choose what they wish to do.

"We look at scriptures and have meetings, and spend time together." Residents explained that social activities such as parties for families and friends happen frequently and also many residents enjoy music and sitting in the garden.

## Staff & Safety

Almost all residents and family members explained that staff were friendly and empathic to the residents. It was reported that carers are skilled, patient and often go the extra mile.

"Excellent carers who show respect and dignity"

One respondent explained that the end of life care is very good. Their family member was supported throughout the end of their life and now they were visiting another family member they felt re-assured that care would be a very high standard.

### **Concerns & Complaints**

All but one of the residents reported having no complaints about the home or staff and that they felt there would be no difficulties raising issues with the home. All residents said that once raising an issue they felt confident that staff would listen and act on the information to resolve the concern.

One family member reported that on one occasion it was difficult to get information from the staff about their concern for their relative's wellbeing. This issue had been resolved and there were no further concerns, but felt that if they had not pushed to have the issue dealt with then it may have continued.

## 2.7 Recommendations and findings

This report highlights the practice that was observed and reflects the feelings that residents had about the care and support that they were receiving. While it was not the intention during this visit to make recommendations, it was our intention to talk to residents and ask if there was anything they felt would improve their quality of life within the care home. Residents felt that the following areas should be noted, and could be looked at for improvement:

### General

Most people reported a strong sense of community within the home as well as close family relationships. It appeared that this sense of community and openness improved communication and integration between residents and that the celebration of family events in the home help to create a stronger bond between the home and families.

This good practice may help to support other homes in the area. Welcoming and involving families can be a barrier as it can bring scrutiny or undeliverable expectations, resulting in the breakdown of relationships. This invitation and celebration of family ties may help overcome these issues.

## Food and drink

Resident meetings can provide a good opportunity to explore how to increase variety and choice within the home, as can 1:1 discussions with residents, which should be included in regularly updated person-centred care plans. It is reported that more variety is needed within the current menu, including the addition of hot meals at breakfast. While this may be an undeliverable expectation on a daily basis the inclusion of an optional cooked breakfast on a certain day of a food rota may increase choice and variety.

### Concerns and listening

The resolved issue raised by the family member included some elements of deprivation of liberty. Up to date training should always be available for staff, and all staff must have an awareness of the Mental Health Act, Mental Capacity Act, Human Rights Act and Deprivation of Liberty Safeguards.

## 2.8 Service Provider response

The service provider did not provide a response to the report or recommendations.