



# Evaluating Care Homes

Enter and View REPORT

## Kenyon Lodge Nursing Home

### Care Home Contact Details:

99 Manchester Road West  
Little Hulton  
Salford  
M38 9DX

**Date of Visit:** 15<sup>th</sup> December 2017

### Healthwatch Salford Authorised Representatives:

Ruth Malkin  
Delana Lawson



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## 1.1 Introduction

Healthwatch Salford is the independent consumer champion for children, young people and adults who use health and social care services in the borough of Salford.

Healthwatch Salford:

- Provides people with information, advice and support about local health and social care services
- Listens to the views and experiences of local people about the way health and social care services are commissioned and delivered
- Uses views and experiences to improve the way services are designed and delivered
- Influences how services are set up and commissioned by having a seat on the local Health and Wellbeing Board
- Passes information and recommendations to Healthwatch England and the Care Quality Commission

Healthwatch Salford have statutory powers that enable local people to influence Health and Social Care services under the Health and Social Care Act 2012. One of these statutory powers is to undertake Enter and View visits of publicly funded adult Health or Social Care premises.

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 are undertaken when Healthwatch Salford wants to address an issue of specific interest or concern. These visits give our trained Authorised Enter and View Representatives the opportunity to find out about the quality of services, obtain the views of the people using those services and make recommendations where there are areas for improvement.

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 Salford also produces reports about services visited and makes recommendations for action where there are areas for improvement.

Information gathered and reported on is referenced against information from health and social care providers, commissioners as well as national and local research sources.

Healthwatch Salford 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 Salford safeguarding policies.

*Further information about Enter and View is available at*  
<https://healthwatchsalford.co.uk/what-we-do/enter-and-view/>.

*The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013 is also available to view at*  
[http://www.legislation.gov.uk/uksi/2013/351/pdfs/uksi\\_20130351\\_en.pdf](http://www.legislation.gov.uk/uksi/2013/351/pdfs/uksi_20130351_en.pdf).



## 1.2 Acknowledgements

Healthwatch Salford would like to thank the Kenyon Lodge Nursing Home staff team, residents and relatives for their contribution to the Enter and View visit.

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



Enter and View report for: Kenyon Lodge

## 2.1 Visit Details

<b>Service Provider:</b>	Kenyon Lodge Nursing Home (Abbey Healthcare)
<b>Service Address:</b>	99 Manchester Road West Little Hulton Salford M38 9DX
<b>Visit Date and Time:</b>	15 <sup>th</sup> December 2017, 13pm-16pm
<b>Authorised Representatives:</b>	Ruth Malkin Delana Lawson
<b>Healthwatch Salford Contact Details:</b>	The Old Town Hall, 5 Irwell Place, Eccles M30 0FN  Email: <a href="mailto:feedback@healthwatchsalford.co.uk">feedback@healthwatchsalford.co.uk</a>  Telephone Number: 0330 355 0300  Website: <a href="http://www.healthwatchsalford.co.uk">www.healthwatchsalford.co.uk</a>

## 2.2 The Care Home

**Group:** Abbey Healthcare

**Person in Charge / Registered Manager:** Gulzar Nazir

**Local Authority / Social Services:** Salford City Council

**Type of Service:** Care home with nursing – privately owned

**Registered Care Categories:** Old Age, Physical Disability

**Specialist Care Categories:** Epilepsy, Stroke

**Admission Information:** Ages 65+

**Single Rooms:** 60

**Shared Rooms:** 0

**Rooms with en-suite WC:** 60

**Weekly Charges Guide:** Charges 'unknown', please contact Kenyon Lodge to find out.

**Facilities & Services:** Palliative Care • Respite Care • Own GP if required • Own Furniture if required • Close to Local shops • Near Public Transport • Minibus or other transport • Lift • Wheelchair access • Gardens for residents • Bar/Cafe on premises • Phone Point in own room/Mobile • Television point in own room

**See Care Quality Commission\* (CQC) website to see their latest report on Kenyon Lodge.**

*\* Care Quality Commission is responsible for the registration and inspection of social care services in England.*



## 2.3 Purpose and Strategic Drivers

### Purpose

- To engage with residents of care homes and understand how dignity is being respected in a care home environment.
- Identify examples of good working practice.
- Observe residents and relatives engaging with the staff and their surroundings and to experience the care home using the 3 primary senses of sight, sound and smell.
- Capture the experience of residents and relatives and any ideas they may have for change.
- We asked questions around 8 'care home quality indicators,' produced by Independent Age in partnership with Healthwatch Camden. (2016)

Surveys and questions are based on '8 care home quality indicators'.

A good care home should;

1. Have strong, visible management
2. Have staff with the time and skills to do their jobs
3. Have good knowledge of each individual resident and how their needs may be changing
4. Offer a varied programme of activities
5. Offer quality, choice and flexibility around food and mealtimes
6. Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists
7. Accommodate residents' personal, cultural and lifestyle needs
8. Be an open environment where feedback is actively sought and used

### Strategic Drivers

Update from CQC dataset 10 May 2017 states that there are 39 Salford Based Care Homes CQC Inspected between December 2014 and May 2017.

Each of the 39 Care Homes were rated based on a 4-scale rating;

- Outstanding
- Good
- Requires Improvement
- Inadequate

The breakdown of Care Homes and their ratings:

- 21 – were rated Good
- 17 – were rated Requires Improvement
- 1 – was rated Inadequate
- 0 – were outstanding

Salford has more homes that require improvement across all the judgement criteria compared to the rest of Greater Manchester. Based on CQC Ratings and comments received locally Healthwatch Salford have made Enter and View of local care homes a priority to contribute to the local strategic improvement plans for care homes in Salford.



## 3. Methodology

This was an announced Enter and View visit. On first arriving for the visit, we approached a member of management before we spoke to anyone in the care home and took their advice on whether any residents should not be approached due to their inability to give informed consent, or due to safety or medical reasons.

Authorised representatives conducted interviews with five members of staff at the care home. Topics such as quality of care, safety, dignity, respecting and acknowledging the resident's and families' wishes and staff training were explored. Authorised representatives also approached four residents at the care home to ask them about their experiences of the home and, where appropriate, discuss other topics such as accessing health care services. Two family members were also spoken to as they were with residents at the time.

A proportion of the visit was also observational, involving the authorised representatives walking around the public/communal areas and observing the surroundings to gain an understanding of how the home works and how the residents engaged with staff members and the facilities. There was an observation checklist prepared for this purpose.



## 4. Summary of key findings

The recent CQC report on this care home rated it as inadequate. As a result, a new manager with significant experience had been appointed. Despite being in charge for only three months he had already implemented significant changes and was planning more changes. This had already had a positive impact on the atmosphere of the care home. Staff, some of whom had been working at the home for many years, were particularly happy at the change of manager as he was clearly listening to their views and updating the service accordingly.

We spoke to four residents, five staff members, two friends and family members who were visiting and the manager.





## 5. Results of visit

*Kenyon Lodge nursing home is a purpose-built care home that is large and bright. When we visited, the service was in the process of being reconfigured due to feedback from the residents about lack of communal space. However, the work was being conducted in a way that was intended to ensure that disruption to residents was kept to a minimum.*

### **Resident Feedback**

#### **Environment**

There was some disruption in the home that was causing some unease at the time the Enter and View took place. However, the residents had been kept informed of the changes and were largely supportive of them, despite temporary inconvenience.

#### **Activities**

One resident commented “there are none”, another resident pointed out there was only one activity coordinator and a third resident said that although there were activities available that they could join in with the resident liked to organise their own activities.

Another resident expressed considerable satisfaction with activities pointing out there was, gardening, art or getting involved with helping the handyman or a member of staff in the kitchen.

Staff take residents out to places they want to go – one resident goes “to the pub” and another goes out for “beer and cigs.” They go on shopping trips. One resident commented “I went on the trip to the farm. It was good.” It appears that residents appreciate the flexibility of the staff and are also aware that the Home has recently changed hands. The changes are filtering through slowly, with more recognition for effort i.e. the activities coordinator had just been awarded Employee of the Month.

#### **Food and mealtimes**

The residents generally enjoyed the meals but one commented “I can’t get what I want to eat.” On the other hand, another could get anything he wanted, even pot noodles if he asked, and another resident had Polish food brought in by the cook specially for them.

The cooking was “the old-fashioned kind” as one resident commented, with many residents saying that meals were enjoyable.

There was no indication that residents were not being properly fed the right kind of diet when they needed it. During the Enter and View visit, authorised representatives observed staff asking residents regularly if they wanted a drink.

#### **Religion and lifestyle**

One of the residents was Polish and commented that none of the staff spoke Polish, but a church person comes in and speaks Polish. Another resident confirmed they were Church of England and were taking communion that afternoon with a visiting minister. Another one said they were aware they could attend a service if they wanted but they didn’t.

#### **Medical appointments and access to specialists**

One of the residents had had a visit from the dentist at the care home and one had been visited by an optician. “They come here, and things are done for you.”



### **Having a say**

There was a lack of knowledge about a formal complaints procedure among residents, although one person thought there might be a form to fill in. However, one person said they'd "just tell them" and another one said they'd "go and see the boss" to make a complaint. So it would appear that the residents are comfortable with the idea of making a complaint if necessary.

### **Manager and support**

The new manager had been well received by the residents and had made a difference in the short time he had been in post. "He's done a lot since he's been here." One resident said he deserved "five stars" because he was "a diamond."

In relation to staff, one person pointed out that staff were so-so and went on to say that some were brilliant, but some were not too bothered. One person commented that "there's not that caring touch among the younger ones", which emphasises the vocational nature of the role. Some staff are very "timewise" they "walk past and couldn't care less".

They can be very strict with residents. On the other hand, one person gave the impression they thought the staff talked too much, "busy yapping!"

When asked whether they would change anything about the home one resident said "Galzar [the new manager] is doing it!"

## **Relative Feedback**

### **Environment**

"It's not posh. We are not bothered about posh, only care," relatives commented on the improvements made since the new manager arrived.

"Staff are lovely. Very caring but need help. The manager has improved things when he first arrived. The cleaning is better." Another relative said "The atmosphere is excellent...she is loved."

A relative commented that her "husband has a good relationship with the staff" who are "very responsive" and "some of the nicest carers I have ever met."

The affection the staff hold the residents in was particularly noted by the relatives spoken to.

### **Activities**

Staff "try their best" to get people involved.

### **Food and mealtimes**

One person whose relative is on a liquid diet pointed out "the food is excellent." Another said that their relative "eats everything" and "the food is not the best, but mealtimes are well planned."

### **Religion and lifestyle**

One resident – a devout Christian (Methodist) – has a minister come to the home to pray with her and a Roman Catholic priest comes in to give holy communion.

### **Medical appointments and access to specialists**

The optometrist visits the home, but residents have to go out to the dentist, "it would be easier if the dentist came to the home".



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### **Manager and support**

After an unsettled period where managers changed, it is clear that relatives now appreciate the stability and quality of the new manager.

The manager is described as “excellent – kind, generous, caring, watchful – has a personal touch.” The staff are described as “excellent – wonderful – very caring.” Recent improvements to the levels of staffing was noted.

### **Staff Feedback**

“I try not to bond with anyone because I love them all equally,” commented one staff member.

### **Manager and support**

“Morale has been raised.” A past dependence on agency staff has been addressed and now the atmosphere is good for workers, “the new manager has made such a difference.”

### **Residents’ care**

The care needs of the residents are contained in their care plans and staff regularly consult and update care plans. Staff also reported talking to relatives and residents to keep updated with their changing needs. It was reported that photographs were used to help with communication and that time was taken to “...build a personal relationship with them and their family.”

### **Training and professional development**

Staff feel that their training and professional development will be prioritised moving forward. For example, one member of staff is about to complete an NVQ 3 qualification with the support of the manager. Training in topics like moving and handling and care have been completed. The manager has suggested they learn from others, and one member of staff is going to go and observe at a different care home, to see how they do things differently there. The manager has got involved with informal staff training, “[he] showed me how to open residents’ clenched hands.”

### **Activities**

A range of activities are available, such as bingo, crafts sessions, knitting clubs, games and gardening, as well as visits for example to the Dementia Farm. There are accessible shopping events, and for the Christmas period some seasonal events such as Mother Goose and a Christmas Fayre, as well as putting up Christmas decorations. “Some people join in, some don’t.” There are one to one activities as well. This is important for people with dementia, who are involved through giving them dolls and memory boxes as well as tactile or scented things to trigger memories.

### **Food and mealtimes**

“I eat the food! The residents enjoy it too.” The meals take place at set times but there are extra drinks available. The files are checked to make sure that residents who are on fluid diets get what they need. Some can’t swallow. “We ask every day if there is anything they’d like and talk to the cook.”

Some people eat in their rooms, but some choose to come out. Carers will help people to eat and also there have been attempts, such as a visit from a gospel choir, to make mealtimes special. Relatives are also encouraged to stay at mealtimes.



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### **Religion and lifestyle**

Vicars and priests come in, give communion. "We've had a gospel choir and themed nights such as Indian themed nights. Polish food was bought for a Polish resident." Residents are taken to neighbouring churches.

### **Medical appointments and access to specialists**

Residents are taken to the dentist at Walkden Gateway. Sometimes the dentist comes in and there is a podiatrist. The GP comes in weekly.

### **Residents and resident involvement**

A partially sighted man stayed in the home, and adjustments were made in consultation with family members. There are regular monthly meetings and "the manager is very approachable". Family meetings can be held to resolve any issues. For example, sometimes people have requested a room change and this has been done. The new manager has an open-door policy, and this has made a lot of difference to the way the home is run.

### **Working environment**

The manager has made a lot of difference. He helps and is very supportive. Staff now feel valued and listened to. This has boosted the morale of staff, after an upsetting report in the local press. Learning and training is encouraged, "he is making brilliant changes and is very easy to talk to. He listens and tells us straight," and "he's always there if we have a problem. He's very strict and won't let slackers in." Staff also commented, "he will stop and talk. He's helped do the residents' nails – I've never known a manager do that before."

## **Management**

### **Introduction**

"I managed an 86-bedded care home for five years. I like a challenge and I want to make a difference. I enjoy boosting staff morale. I've introduced Employee of the Month."

### **Residents' care**

"We do a thorough pre-assessment before the person moves in to identify need. This creates a plan and life history – habits, likes and dislikes." As needs change the resident is monitored closely. Family involvement is important. "We monitor health carefully and where there is limited capacity we use pictorial methods [to communicate]."

### **Activities**

There are two activity coordinators who plan a range of activities from one-to-one activities to trips out. The residents want to go to Blackpool for example. Staff build relationships with residents and their families, and this encourages them to take part in activities. Wheelchair users get the opportunity to go out.

### **Food and mealtimes**

Breakfast is from 8am until 11am with a good choice. There is a snack trolley, a lunch menu, and tea. There has been a recent audit, and no-one has lost weight. A dietician has been consulted. Staff are encouraged to eat with residents to make mealtimes more sociable.

### **Religion and lifestyle**

There are visits from priests on a regular basis.



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### **Medical appointments and access to specialists.**

Visioncare comes every Tuesday. The GP also comes to the home.

### **Residents and resident involvement**

There will be family meetings every two months and it is planned to implement 24-hour resident receptions. "I operate an open-door policy and there is also a complaints and whistleblowing policy."

### **Staff**

Many of the staff have been here for a while. There is now a proper sickness/return to work policy. Staff are encouraged to book annual leave in advance. "I'm trying to use fewer agency staff as this improves care for residents."

## **Environment**

These judgements are based on observations made during a short afternoon visit. The building was purpose-built as a nursing home and is well appointed.

Natural light was maximised with large windows. Corridors were wide and free from obstructions. The building is accessible to a good standard. The building was decorated in neutral colours. There was some disruption due to building work that was taking place to convert the manager's large office on the ground floor to a communal lounge. The manager, who had not been in post for long, had assessed the space available and wanted to provide more communal space for residents on the ground floor, so was relocating to a smaller room upstairs. Attempts were being made to keep disruption for residents to a minimum, but one or two residents were clearly a little disturbed by the changes.

The atmosphere in the home was pleasant, with helpful staff who felt able to spend time to help the residents. The care provided was person centred. There were some nice touches, such as the use of natural light lamps in the bedrooms. The caring nature of the staff, and the changes brought about in a short space of time by the new manager had been particularly noted by the friends and family of residents.

The activities coordinator had won an Employee of the Month award and there was an impressive range of activities provided. Residents are encouraged to take part in all aspects of home life. They are treated with dignity and respect, and are clearly held in affection by staff who work with them.

This is a home which has had a difficult few months with high staff turnover and a period where there was no registered manager in place. However, those issues have been resolved with the appointment of a new, experienced and capable manager who had made significant and effective changes in a short time so that the home was now functioning much better and providing a welcoming and caring environment for its residents.

## **Additional Notes**

An article in a local newspaper about the home's CQC report had caused some upset amongst staff and they were keen to highlight the good practice that was taking place at the home.

Policy documents are in clearly labelled files prominently displayed in the manager's office.



## 6. Recommendations

1. There have been significant attempts to make improvements to this home which are having a positive impact. The Enter and View representatives found the pace and effect of these change inspiring. It is recommended they should continue to follow through with the changes to the layout and management of the home and monitor carefully to ensure the continued successful and positive impact of the improvements.
2. All written communications and updated notes for residents should be checked against the Accessible Information Standard (2015)\*



## 7. Service Provider Response

We would firstly like to thank you for your visit and for the positive reinforcement which you have given around the hard work and improvements, which the Registered Manager is making in the home. We of course, welcome all feedback but we particularly enjoy positive feedback.

Below I will state some points for clarification and also some ideas around continued improvements:

- To confirm we have two activity co-ordinators in post.
- The home has not changed hands. We continue to be owned and operated by Abbey Healthcare although we have a new manager in post Gulzar Nazir supported by a new operations team, in the main Sarah Willitts Regional Manager and overseen by Andrea Gamble Regional Operations Director.
- We do have a formal complaints procedure. All residents have a copy of this in their Service Users Guide in their bedrooms. We will though make a copy visible in the communal areas of the home and we will make an easy to read version available as well. We will discuss and run through the procedure at our next residents' meeting.
- To clarify we do have a visiting dentist who visits subject to appointment and residents need. We also have Visioncare at Home the opticians who visit on a regular basis, and a GP who visits on a Tuesday.
- Gulzar is working with the staff every day to reinforce the importance of staff interaction with the residents.
- Our chefs and manager Gulzar are working with all of our residents to plan menus around their dietary preferences and needs.
- We are unsure about the reference to the 24 hour reception we are of course staffed 24/7 with qualified staff and nurses.
- We are also going to make some basic signage and communication cards for our Polish resident should he need to rely upon these. We will also investigate technology which could be supportive of communication needs.

We would like to thank you once again and hope we have progressed even further when you visit us next.

## 8. Revisit Update – 23<sup>rd</sup> May 2018

Healthwatch Salford would like to thank the home manager for taking the time out of their busy schedule to discuss the recommendations and service provider response from the Enter and View visit that took place in December 2017 into Kenyon Lodge.

The manager has already made quite a difference to the home and we could see that they are planning to continue with this updating work.

Healthwatch Salford is satisfied that the recommendations have been addressed:





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- A Service Users Guide is now in every residents' bedrooms, which includes the complaints process.
- There is now an Easy Read version of the complaints process on the wall in the entrance lobby
- Menus have been updated
- No reception desk of any nursing home is staffed 24/7 but you assured us staff are always on hand 24/7
- Some picture cards have been created for a Polish resident and you have recruited some Polish speaking volunteers who can come in and speak to the resident

Thank you for once again for confirming that you found Healthwatch Salford's Enter and View process clear, efficient and easy. We agreed that it was a helpful process for Kenyon Lodge. You confirmed also that you have been re-inspected by the CQC and have moved up to a 'Good' rating in two categories and to 'Requires Improvement' (from 'Inadequate') in the other three categories.

Healthwatch Salford wishes you all the best with the next phase of your improvement works.





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