

Enter and view report

Scarborough Hall Care Home

Contents

Background.....	2
Details of the visit	3
Summary	3
About this visit	5
Findings	6
Quality of life	7
Quality of care	13
Care during COVID-19	14
Changes implemented since COVID-19	15
Raising concerns and issues	16
Staff.....	17
Overall rating.....	18
Acknowledgements.....	18

Background

What is Healthwatch?

Healthwatch North Yorkshire is the independent champion for people using local health and care services. We listen to what people like about services, and to what could be improved. We share these views with the people who have the power to make a difference.

What is enter and view?

Part of the local Healthwatch programme is to undertake enter and view visits. Our team of authorised representatives go out to local health and social care services to find out how services are being run and make recommendations where there are areas for improvement. The 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.



Details of the visit to Scarborough Hall Care Home

Service address	Mount View Avenue, Off Seamer Road, Scarborough, YO12 4EQ
Service provider	Barchester Healthcare
Date	10 October 2022
CQC (Care Quality Commission) rating	Good
Care home senior general manager	Charlotte Nurse
Contact number	01723 312528

Summary

Purpose of the report

We summarise the findings gathered during the visit on 10 October 2022, as well as feedback shared through survey responses gathered before and after.

Purpose of the visit

- To visit and gather views of the residents and their relatives and the experiences of the services provided.
- To observe the ongoing care being provided for the residents and their interaction with staff and their surroundings.

During the visit

Our authorised representatives visited the home and spoke with residents, residents' relatives and friends, and care home staff.

We heard from 19 residents, 23 residents' friends or family members, and 17 members of staff whose feedback forms the basis of this report.

Key findings

We found that at the time of our visit Scarborough Hall Care Home was operating to a generally good standard. These findings were based on our observations, and reflect the general happiness of residents, family and friends of residents and staff members. The home had just undergone refurbishment of communal areas and was well decorated and clean.

The dementia floors had good features designed to best support people with dementia and more initiatives were being planned.

However, there were a few issues highlighted and we have made suggestions for review and improvement below. We found that improvements are needed to ensure residents can eat and drink enough and with support when needed, some signage could be improved, and we agreed with the care home manager that new carpeting was needed to address some smells.

Positive feedback

- The home was clean and welcoming. Staff were friendly.
- A lot of thought had gone into the decoration and layout of the dementia floors including good wall and floor colour contrast, animal-themed wall decoration and good signage on doors.
- Refurbishment was ongoing to ensure the home was at the highest standards.
- There were many activities including outings and activities for residents who cannot leave their rooms.

Recommended areas for improvement

- Review mealtime protocols and staffing levels to ensure sufficient staff are available in the dining room throughout the meal to help residents who need additional support, while other staff members serve and support residents eating in their rooms.
- Ensure every resident has fresh water in their room, that water jugs are refilled, and residents are encouraged to drink water regularly.
- Ensure external signage for the reception is clearly visible and not obscured.
- Ensure there is good signage in large fonts throughout the home. E.g. signage to dining rooms, toilets and lifts and this is visible from all angles/directions. (Note this may have happened after the refurbishment).

- Refresh carpets as outlined and look at other ways to ensure smells are kept to a minimum and dealt with as quickly as possible.
- Ensure cleaning procedures are in place and followed. Prioritise safe disposal of used continence pads and pants immediately.
- Investigate opportunities for more discussions with relatives in the early weeks of a person's stay at the care home. Also, look at opportunities for more structured contact (perhaps twice a year) with relatives/friends in the longer term to discuss a person's care.

About this visit

[Scarborough Hall Care Home](#) is run by [Barchester Healthcare](#) and provides care to its residents in Scarborough, North Yorkshire. The home has 85 beds with four more planned. At the time of the visit, 78 people resided there, including three people on respite and three more due to arrive the following week. Resident ages varied from 60 to 103. The current manager has been in post for 15 years.

This was an announced Enter and View visit arranged with the care home manager. The purpose of this visit was to capture the experience of life and care within a care home environment and to identify examples of positive working practice. We did this by observing the residents engaging with staff and their surroundings and by speaking with the residents to understand their experience. We asked relatives and staff members to provide their experience and views of the care home by completing a survey.

Prior to our visit, we provided information about the Enter and View visit, which was made available for people to read in the reception area of the home. It included surveys for staff and relatives to complete and how to access the survey digitally. The survey was available up to 10 days after our visit.

On the day, five of our authorised representatives conducted observations. We spoke with 19 care home residents, who shared their thoughts and experiences of living at Scarborough Hall Care Home. During our insight gathering, we used a survey to help our discussions, which focused on quality of life and care in the home, and the impact of COVID-19.

23 family members and friends responded with their experience and views of the care home, and we heard from 17 members of staff who work in the home. Most of the staff respondents had worked at the home for more than five years,

with five having worked there for 14 years or more. The staff members worked in a range of roles including reception and support, management, caring roles, activities, and housekeeping.

Of these respondents, not all of them were able to provide an answer to every question and some respondents preferred not to answer the questions.



Findings

Environment

On the initial observation of the care home, our authorised representatives found the building to be in a good state of repair, with evidence of recent refurbishment. There was a small garden with seating visible. No residents were outside, but the weather was cold.

Signage to the home main entrance from the car park was not good. Two representatives had to ask for help and found that a pot plant obscured the sign to reception.

The reception area of the care home had recently been refurbished. It was open, welcoming and had a feel like a hotel. There was a coffee lounge next to the reception open for residents and visitors. There was also a lot of information available including the menu for the day, activities information, a 'you said, we did' board, details about the CQC rating and information about face mask requirements. New boards were being put up, which would include staff photographs. These were due for completion imminently.

There could have been better signage to dining rooms and the lift, which we believed was to be done as part of the final elements of the refurbishment.

Staff were welcoming and friendly, including the reception staff member. There seemed to be good interaction between staff and residents, particularly around activities and doing tasks.

Accommodation

The home has three floors, connected by a lift. The top two floors are specifically for people living with dementia. Each floor was differentiated by a different animal theme as part of the decoration and pictures. This was attractive and easy to remember for residents. Internal signage was small and not always visible depending on which direction you were going.

Representatives did find some areas confusing, as there was a similar layout on each floor. They felt that using different colours could help residents more easily identify where they are.

The dementia floors had good signage on residents' rooms with photos and names on doors. The signage on the non-dementia floor seemed small and did not include photos (this may suit the residents on that floor better).

Residents were free to move around the floor they lived on but needed staff assistance to access other floors or go outside.

All residents' rooms were ensuite and were smart, clean and with good decoration. All residents' rooms have a television, some lounges had televisions and dining rooms had radios. There were a good number of different lounges and dining areas, which residents could use at any time.

Representatives found the home attractive but felt it had more of a hotel feel than a 'home'. They felt that residents might have wanted a more homely approach. No residents or relatives mentioned this.

Cleanliness and hygiene

Our representatives noted that the home was clean. However, there were some unpleasant smells in parts of the home. The manager mentioned that plans were in place to get new carpets in those areas to address the issues.

We asked residents about the cleanliness of the home.

All residents our representatives spoke to felt the home was clean or adequately clean.



Quality of life

General happiness

Residents were asked whether they were happy living in the care home and how much choice they had over their daily life. (By choice we meant could they get up/go to bed when they want, can they go where they like in the home, do they choose what to wear each day etc).

Almost all the residents spoken to said they were happy or quite happy at the home. One person mentioned that there were some 'nasty' people there but gave no more information and another person said it depended on which staff were on duty.

Four residents said they have as much choice as they want over their daily life. Eleven said they have adequate choice and three said they have some choice, but not enough.

The comments recognised that residents have mobility and other issues, which can make it difficult for them to move about without help. Two said they would like to go outside regularly but they would need help to do that, and staff are very busy. One person said they would rather be back in their own home.



Food and drink

Residents and relatives were asked to share their views on the food and drink. Our representatives observed a mealtime in the home.

Residents can eat in the dining rooms or in their own rooms. At the beginning of a meal, staff are busy serving residents and ensuring those in their rooms get their meals. This can delay people in the dining room getting support to eat if they need it. Our representatives observed people struggling to use cutlery and having to use their hands to eat, not being able to find their serviette (which was under a menu) and wiping their hands on their clothing or people eating a small amount as they kept spilling the food. Staff did come to help as soon as they were able.

Eight residents said they get all the food and drink when they want it and 10 said they get adequate food at OK times. Generally, residents seemed to like the food. One person said they are a vegetarian and that can be difficult; one mentioned that they have gone off some foods, e.g., mashed potatoes, which can also make things difficult, and one person said they would prefer a cooked breakfast, hot lunch, and then sandwiches and other cold food later.

Two relatives mentioned finding an empty water jug or no water in their loved one's room.

“I do feel there is a general lack of time for the residents. Thankfully, my mother can feed and drink by herself although she has lost a huge amount of weight since being in Scarborough Hall Care Home. I would not like to think what would happen if she was unable to feed herself.”

Activities

Residents were asked if they spend their time doing things they value and enjoy. Relatives and staff were asked if residents have regular access to activities in the home.

Two residents said they can spend their time as they want, nine said they are able to do enough of the things they enjoy, five said they can do some things they enjoy, but not enough and one said they don't do anything they enjoy or value. Some respondents said they don't want to do things with others and are happy in their own room. One said they would like to go outside more, but need a wheelchair to enable this and they don't have one.

All 15 relatives who responded said their loved ones had access to activities in the home. Relatives mentioned that there is an activities board and they have seen activities happening during visits. There is also a Facebook page with information about things and families can request an outing for their loved one once a month. Activities mentioned include gardening, live music sessions, going to church, and trips to shops, pubs and even golf. Some relatives said that while their loved one is invited, they either don't want to or find it difficult to take part in activities.

Our representatives saw 'laughing yoga' and noted that there were usually three activities a day. One representative joined in an activity and was impressed by the staff member's skill.

A monthly meeting asks residents what activities they would like to see. Three staff members run activities in communal areas or residents' rooms. Staff mentioned a large range of activities, including tailoring things to individual's interests. These include trips to the beach, theatre/shows, visiting entertainers and animals (petting farm), arts & crafts, cooking, garden parties, bingo, reminiscence, out for meals/coffee and an outing for Armed Forces Day for one resident. The home has its own minibus, which makes outings easy.



"I like to read in my room. And I was also taken to church. I really enjoyed it."

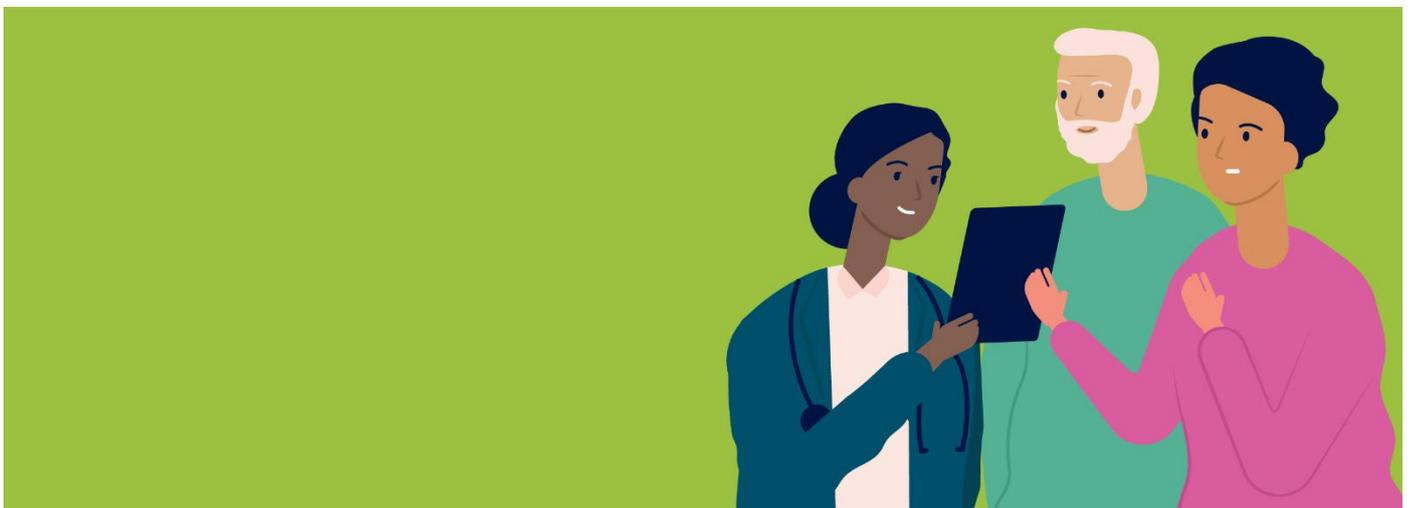


Social contact

Residents and their relatives were asked about their social contact and our representatives observed interactions between residents, relatives, and staff.

Three residents said they have as much social contact as they like, 10 said they have adequate social contact, two people said they have some, but not enough, social contact and one said they feel lonely and socially isolated.

Many of the relatives who responded visited at least once a week, but some visited more often. Some could not visit so often, perhaps once a month. The one person who could not visit currently said they can keep in touch with their friend by phone.



Quality of care

Residents and relatives

They were asked whether they felt they/their relative was well cared for. We also observed whether residents looked well cared for during our visit.

Our representatives generally found people well turned out. However, they noted one person was wearing trousers with holes in (when asked, staff said those were the person's favourite and it was very difficult to get them to wear anything else). Many residents weren't wearing shoes or slippers, just socks, but the home was warm and carpeted throughout so this didn't seem a problem.

Residents generally felt they were clean and presentable. Although one resident said this was not how they would choose to dress. They were wearing clothes for a second day and had food residue on their slippers.

Of the 16 relatives who responded, nine said they are very satisfied with the care of their relative, four were somewhat satisfied, two neither satisfied or dissatisfied and one person was somewhat dissatisfied. Some comments mentioned disruption from the recent refurbishment and one person said it is difficult to tell as her husband has Alzheimer's and can't provide any information. One person said their friend is a resident and could not be better looked after. They praised the food and all the staff very highly. However, one relative said their mum is often in dirty clothes and while their mum can be difficult, it doesn't mean that hygiene and cleanliness should be ignored.



"The home is spotless, and the food is very good. Residents can have a meal with spouse when visiting if they wish. People are well looked after, especially when compared to a previous care home."

"Overall, it is a lovely home with caring staff who have done an amazing job in difficult conditions throughout the pandemic and major building refurbishments."



We also wanted to know whether residents feel like they need additional help with anything, such as help to eat or drink, and if they receive enough help.

Nine residents said they had enough help if they needed it and five said they didn't have enough help. One resident said while staff are very good, they are sometimes too busy to help. They added that they would like physiotherapy support to help them recover from an operation, but this isn't available.

Our representatives feel that more support is needed at mealtimes.

Relatives and friends were asked if they contribute to individual care plans.

12 relatives (80% of respondents) said they have been asked to contribute to care plans, but four relatives said they had not. Relatives mentioned filling in an 'all about me' booklet at the request of the care home and updating a care plan from a previous care home to ensure the information was up to date. Other relatives had been contacted recently to update care plans but had not had chance to respond yet. One relative, who has only been contacted recently, had raised concerns as they felt the home was not following local authority guidelines regarding care plans.



"Before [my relative] was admitted I was asked to fill in an admission book, noting all her needs etc. I frequently check her care plan and contribute if necessary."



Staff

We also wanted to know how well informed the staff are about the residents they look after in terms of their individual likes and dislikes, food/drink requirements, hobbies/interests.

13 of the staff respondents said they feel very informed and two somewhat informed about the residents needs and likes. Staff mentioned regular meetings and ensuring that care plans are updated on at least a monthly basis.

Safety and staff levels

Residents, relatives, and staff were asked whether they feel there are enough staff, and we asked the residents if they felt safe in the home.

All residents said they feel as safe as they want (11) or adequately safe (7). Comments mentioned feeling staff are overstretched and not able to help as much or as quickly as some residents would like.

Three quarters of residents who responded (12) said there were enough staff and four said there are not enough.

Nine of the relatives who completed our survey said there are enough staff with six saying there aren't enough. One person said there needs to be more cleaning staff as their father's room can be dirty and that they have seen soiled continence pants in corridors.

14 of the staff respondents said they feel there are enough staff and two felt there are not. Two staff members mentioned that recruitment was happening, but they weren't sure if they had a full staff team. One person mentioned that staff are always very busy and do not have as much time as they would like to spend with residents.



"During the daytime it seems that there are not enough staff to meet the needs of all residents. The staff, especially the activities staff, are very good and they try hard, but they are too busy to help every resident when needed."

"Staff are always very busy. Sometimes residents are not shaved or dressed accordingly. Items go missing all the time and very often other residents are in the wrong bedrooms."



Sensory health (including oral health, sight, and hearing)

We asked residents and friends/ family if they had been able to access relevant health checks during the pandemic.

Staff said that residents' sensory health needs are included in their care plans and these are reviewed monthly. This includes details of whether residents have their own teeth, their choice of toothpaste, toothbrush and how often they see the dentist. It also includes anything about language needs and if residents need prompt cards to help with communication. Residents are all encouraged to have an annual eye test and details of glasses and what they are used for are also included in the care plan. Similarly, the care plan includes details of any hearing aids, for which ears, when they need reviewing and a reminder to check batteries.

Specsavers visits the home to conduct eye tests and some residents have been to audiology appointments outside the home. There is an issue regarding dentistry. Two residents mentioned wanting to see the dentist, but the care home manager said they had struggled to get dental appointments as there is

a severe lack of dentists in the Scarborough area. (Since the visit one new NHS dentist has opened in Scarborough, but this may have only had limited impact for residents due to the number of people seeking an NHS dentist in the area).

No relatives mentioned issues with accessing healthcare appointments during COVID-19, but some said their relative wasn't resident at that time. Relatives mentioned the optician visiting and others said they, or a carer, had taken their relative to the dentist or for checks to Scarborough hospital.

Two relatives mentioned that their loved one's mobility aids including wheelchairs and walking stick had gone missing. One added that they had seen staff using the wheelchair to move heavy files round the home and felt staff should have access to appropriate equipment to do this and not have to use residents' mobility aids.

Care during COVID-19

Staff

What is your experience on working in a care home during the pandemic?

Staff said the experience was extremely difficult, stressful, and upsetting at times. Dealing with ever changing guidance from the government was particularly hard as was trying to support the relatives of people at end of life during the visiting restrictions. PPE (Personal Protective Equipment) also created more difficulties and staff were worried about bringing COVID-19 into Scarborough Hall. Staff members found some rewards of working together as a team to support residents through the unprecedented time.



"It was horrendous, I can't think of anything worse. I was terrified that I would take COVID-19 home to my kids. I don't know how I got through it. All the staff and management really had to stick together and support each other!"



Residents

Do you feel safe against COVID-19 in the care home?

All nine residents who responded said they feel safe against COVID-19.

Residents and family and friends

Has the home implemented any changes to make sure you/they are able to contact loved ones during the pandemic? Could anything have been done better?

The residents mentioned using technology to keep in touch with relatives during the pandemic, but one said they don't know how to do this.

10 out of 12 relatives said they were able to stay in touch with loved ones during COVID-19. They mentioned visiting pods, garden visits, Zoom and phone calls.

All the relatives who responded (12) said they had been kept informed about the COVID-19 situation at Scarborough Hall Care Home. Most mentioned that they received updates by email and some by phone.

Changes implemented since COVID-19

Staff

We asked for their views on whether any positive changes were implemented in the care home during the pandemic.

Staff reflected on improvements in communication and infection control and better awareness of personal protective equipment because of coping with COVID-19. The home is still using the visiting pod in the garden and recently has invested in building additional rooms and refurbishing communal areas. Zoom and Skype using tablet computers is still in use to enable residents to stay in touch with family and to communicate with local GPs. Staff are also increasingly using WhatsApp and Facebook to stay in touch with families and friends and let them know what is happening.



"We have become even more of a team. We have developed a whole-home approach."



Raising concerns and issues

Residents, family, and friends

We wanted to know if they had any concerns about the service, would they know what to do.

All but one resident (14 out of 15) said they know how to raise concerns. Some would talk directly to the staff and others raise concerns via family members. Nine respondents said they were happy with how issues were dealt with and three said they were not. Comments included that the manager could be more accessible, and one resident said they are still waiting for a new walking stick.

Relatives said it is easy to contact the care home if needed. It seems that the home doesn't give regular updates, but does contact relatives or friends with specific updates, if anything is needed or things have changed. Several relatives said that a meeting or conversation in the first month of someone's stay would be useful and then perhaps every few months, just to check everything is going well and if anything is needed.

All the relatives who responded felt they knew how to raise concerns if needed. One mentioned that Barchester has a formal complaints procedure and others that they would contact their relative's social worker. Most said they would talk to staff at Scarborough Hall.



"I am assuming the first point of contact is with the floor lead and then with the manager. Barchester has a formal complaints procedure should an approach to the home fail. This information was provided on admission."



We also asked if they had been happy with how the concern had been dealt with in the past.

Most relatives were happy with how their concerns had been dealt with. However, one person mentioned that, while the issue had been dealt with, it was only after it was raised a second time. Another person, who has raised issues about cleanliness and had initially received a positive response, later found dirty continence pads in public places. They told us that they felt that the issue hadn't been addressed effectively.

Staff

How do they feel?

We asked staff about working in the care home.

All 17 staff respondents said they enjoyed working at Scarborough Hall. Staff mentioned good teams, excellent support from the manager, being paid above average and Scarborough Hall being the best care home they have worked in for a while.

All respondents said they would recommend the home to family or friends with one person saying they already had, and another said that they wouldn't want their family members to go anywhere else.

We asked if there was anything that could be better. One person mentioned salaries could be higher and another said that people should be paid more than statutory sick pay if they are unwell. They felt people come to work even when they are not well.

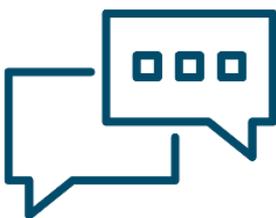


"I feel part of a team and a family."



We wanted to know whether the staff feel well informed about changes to services in the home.

75% of staff respondents (12) said they are well informed, one said they were not well informed and two added other comments with one person saying they had not been there long enough to comment. The staff said managers communicate any changes, that their suggestions have been acted upon and that Barchester sends a weekly email update to all staff.



Overall rating

We asked residents, family and friends of residents, and care home staff how they would rate the home out of 5 (with 5 being the best).

Residents: (4.4/5)



Friends and family: (4.3/5)



Care home staff: (4.8/5)



Acknowledgements

The Healthwatch North Yorkshire enter and view team would like to thank the manager, staff, friends, residents and families for letting us access the care home and for sharing their views with us. Thanks also to our dedicated volunteers who helped support us.

Disclaimer

This report is not a representative portrayal of the experiences of all patients, relatives, and care home staff, but an account of what was observed on the day of the visit and shared with us by those who completed our survey. Note: Some of the residents we spoke with have cognitive impairment, which can impact their ability to answer the questions.



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