



# **Enter and View Report**

Royal Court Care Home Monday 4<sup>th</sup> April 2016



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# **Report Details**

Address	Royal Court Care Home 20 Princes Road Cleethorpes DN35 8AW
Service Provider	Appleton Shaw Limited
Date of Visit	Monday 4 <sup>th</sup> April 2016
Type of Visit	Announced / Unannounced (See methodology on page 5)
Representatives	John Revill, Mary Morley & Carol Watkinson

## Acknowledgements

Healthwatch North East Lincolnshire would like to thank the service provider, residents, visitors and staff for their contribution to the Enter & View Programme.

#### Disclaimer

Please note that this report related to findings observed on the date listed above. Our report relates to this specific visit to this service and is not representative of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

This report is written by volunteer Enter and View Authorised Representatives who carried out the visit on behalf of Healthwatch North East Lincolnshire.

## What is Enter and View

Part of the local Healthwatch Programme is to carry out Enter and View visits.

Enter and View visits are conducted by a small team of trained volunteers, who are prepared as "Authorised Representatives" to conduct visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement.

Enter and View is an opportunity for Healthwatch North East Lincolnshire to:

- Enter publicly funded health and social care premises to see and hear consumer experiences about the service
- Observe how the service is delivered, often by using a themed approach
- Collect the views of service users (patients and residents) at the point of service delivery
- Collect the views of carers and relatives
- Observe the nature and quality of services
- Collect evidence-based feedback
- Report to providers, the Care Quality Commission (CQC), Local Authorities, Commissioners, Healthwatch England and other relevant partners

Enter and View visits are carried out as "announced visits," where arrangements are made between the Healthwatch team and the service provider, or if certain circumstances dictate as "unannounced visits."

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 services first-hand.

## Purpose of the Visit

- To engage with service users of the named service and understand how dignity is being respected in the care home environment
- To observe the care provided at this home, looking at a number of key themes; Food & Drink, Safeguarding, Staffing, Personal Care and Medication
- To observe residents and relatives engaging with the staff and their surroundings
- Capture the experience of residents and relatives and any ideas they may have for change

# Methodology

#### This visit was an announced/unannounced Enter & View visit.

An announced/unannounced visit is where we send a letter to the care home 6 weeks in advanced of a date we have in mind, letting them know we intend to visit soon. A letter will then be sent approximately one week before the visit date we have and then we will turn up in that week unannounced.

### **Summary of Findings**

- Residents appeared to be well cared for and were all dressed well.
- The Care Home was very clean and tidy throughout.
- Staff appeared well trained, especially around dementia.
- More activities for residents would be welcomed.
- Residents were treated with dignity and respect.

## **Details of Visit**

#### **Environment**

The outside appearance of the Home was very clean with attractive hanging baskets on either side of the front door. There is a security controlled entry system and we were welcomed by a member of staff, who then informed the deputy manager, who introduced herself as Kerry. There is a signing in book and hand gel in the entrance hall. All rooms apart from two are on the ground floor and the two upper rooms are reached by a stair lift.

Kerry gave us a comprehensive tour of the building including looking into some bedrooms, noting that she knocked on doors first. The bedrooms are very well decorated and there were no bad odours anywhere. The toilets and bathrooms are spacious and very clean.

There is a spare room that at the moment is being used as a store room but there are plans for a change of use to a therapy type room for manicures etc., instead of them having to be done in the main sitting room.

There were at least six fire extinguishers on the ground floor and all rooms have emergency call lights above their doors.

#### Food and Drink

During our visit the tables were being laid for lunch, cloths were on tables, also place mats and napkins. There was a menu board naming one item, but we were assured that there is a choice of three items on each day for both lunch and tea. The residents are shown the menu in the evening for the following day. All residents who were spoken to praised the high quality of the food and the Manager told us that they've just been given five stars from the latest Inspection.

## Safeguarding, Concerns and Complaints Procedure

They do monthly reports on the issues of safeguarding and at present one resident is being monitored. There is a complaints procedure and details of this are also available in handouts about the Home.

#### **Staff**

Staffing consists of Owner/Manager, Mark Appleton, Deputy Manager, Cook, Cleaner and each shift has three staff members on duty with two waking staff during the night. At present they have a second year student doing work experience. The staff wear name badges and appeared to be very pleasant. There was a notice on the door naming the two Dignity Champions with details of what this entails. The staff are all dementia trained and Kerry informed us that the Manager is insistent that they all have every bit of training available, no excuses accepted. Records are kept of all training undertaken.

### Promotion of Privacy, Dignity and Respect

Staff knocked on bedroom doors before entering. There were name cards on the doors, some with a name and picture.

#### **Recreational Activities**

The staff gave us details of recreational activities, for example residents being taken out, short train journeys and meals out. This is where there was some discrepancy because the residents who spoke to us said they didn't feel there was enough in the way of activities. A member of staff said that when it was her turn to do the activities she didn't plan anything but did someone to one talking with individuals and tried to ascertain what they would like to do. They do play dominoes and musical bingo quite often. There was a notice on the board about two events in April, one of them to celebrate the Queen's 90<sup>th</sup> birthday.

#### **Medication and Treatment**

The medication is locked away in a cabinet and is only used by Senior Care Staff. There is one member of staff who is responsible for a monthly audit of medication.

#### Residents

At the time of the visit, there were fifteen residents with one vacancy. The ratio of dementia residents is 75 to 25 non dementia.

#### **Relatives and Friends**

Residents said they were treated kindly by the staff and they were not kept waiting when they had to ring the bell. The residents were well dressed, some having a morning nap and one lady was being taken out by friends as it was her birthday. There is a notice board giving details of meetings for family and friends with dates throughout the year. Family and friends are free to visit and to take residents out whenever they wish to do so.

## Recommendations

All in all this was a very good visit, our only comments are in the recommendations below.

- Although someone does work on activities three times a week, residents felt
  that there was not enough to do. More group activities would be advisory and
  in particular, for those who are not mobile, some chair based exercises would
  be welcomed. Some said that they did seem to be sitting down all of the time
  and would welcome some movement.
- That the spare room is converted to be used as a therapy room as it would give residents a feeling of 'going to have their nails/hair done' rather than staying in the room where they usually sit.

Finally, we would like to thank the Manager Mark, Kerry and the staff for making our visit a very rewarding one.

# Service Provider Response

Mark Appleton, Care Home Manager said:

"We feel that our Activity provision is much greater than suggested. We have seven scheduled hourly sessions per week which are carried out by staff and might include musical bingo, chair based activities and games or one to one focused activities. This can be evidenced by our staff rota/activity record sheet. On top of these scheduled seven hourly staff based sessions we also have a weekly quiz, weekly visits from Pets as Therapy, monthly visits from students from Grimsby Institute, Timecare Reminiscence and various regular visits from entertainers/singers. We have community links with local colleges, schools and churches. We have visits from Brantano shoe shop and a private clothes seller who bring goods to sell at the home. We hold bring and buy sales and also hold Charity fund raising events. We have recently introduced tasting sessions for residents including cheese tasting and fruit tasting. There are also many unscheduled activities which happen on a daily basis and which again could be evidenced by looking at residents own care records."

## **Distribution**

This report has been distributed to the following:

- Healthwatch England
- Care Quality Commission
- Caroline Barley (Contracts manager for HWNEL)
- Julia Wong (Quality Programme Officer CCG)
- Lydia Golby (Lead nurse-quality at the CCG)
- Brett Brown (Contracts manager CCG)
- Angela Tew (CQC Inspection Manager Hull, NEL, & NL)
- www.healthwatchnortheastlincolnshire.co.uk/enter-view