



Enter and View Report

Carlton House

Monday 9th February 2015

healthwatch

North East Lincolnshire

Contents

Enter and View Report.....	1
Report Details.....	3
What is Enter and View.....	4
Methodology.....	5
Details of Visit	6
Recommendations.....	9
Service Provider Response	9
Distribution.....	10

Report Details

Address	Carlton House 267 Hainton Avenue Grimsby DN32 9JX
Service Provider	Mrs Katrina Peerbux
Date of Visit	9/2/2015
Type of Visit	Announced/Unannounced visit (see Methodology on page 5.)
Representatives	Elaine Flower and Jenny Smith.

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

- A warm, bright and very well furnished care home with a high standard of cleanliness throughout.
- The staff were welcoming and well trained with some of them being Dignity and Infection Control Champions and some of them attending the local Dignity and Long Term Providers meetings.
- Residents appear well cared for and are treated with dignity and respect.

Details of Visit

Environment

Carlton House is an attractive double-fronted, period house which stands near the junction of Hainton Avenue and Welhome Road.

Although it does not have a designated car park there is sufficient road side parking nearby.

There is secured entry control and visitors are required to sign in on arrival. There is hand sanitizer available to aid infection control.

We were greeted on arrival by Julie Gillies, Deputy Manager, who provided us with all the information and evidence that we required and gave us a comprehensive tour of the establishment. We were joined later by Katrina Peerbux, the Manager, who had arrived to undertake a medicines audit.

The home is warm, bright and very well furnished. The standard of cleanliness is excellent throughout and there was no malodour.

Carpets, hard flooring and all soft furnishings are co-ordinated to enhance the overall homely feeling. There are two comfortable lounges with views of the avenue from the front windows and residents enjoy watching people and traffic pass by. There is a separate cosy dining room and a modern, well equipped laundry room downstairs and a ground floor bathroom.

There is a stair lift to the first floor bedrooms and bathrooms etc.

Two bedrooms share a Jack and Jill style en-suite bathroom (Separate doors to one shared bathroom). Other bedrooms use shared facilities, all in excellent condition. All bedrooms are well furnished and decorated with co-ordinating bed linens. Above each bed there is a secure cupboard which houses lotions, creams, denture cleaner, etc. that the resident may need during washing or bathing. The contents of these were being audited for expiry dates and content during our visit. Each bedroom has a sound monitor which is used to alert staff during the night.

Each bedroom door had a photograph of the resident to aid recognition. Residents are encouraged to bring their own home comforts into the home to help them settle in.

All corridors were free of obstructions and fire exits were clearly marked. There is an enclosed, secure rear courtyard garden which residents use during good weather. This is to be upgraded when a large apple tree which has become a Health and Safety issue has been removed.

Some new all-weather furniture is to be purchased and the environment improved.

Food and Drink

Meals are prepared on site and there is a menu displayed in the dining room and on the fridge in the kitchen. The menu rota changes every 3 weeks. There are snacks and drinks available between breakfast, lunch and dinner and again at supper time. Intake of food and drink is recorded in the care plans. A variety of dietary requirements are catered for including fortified diet, diabetic diet, Category D and Category E. There are always alternative options available for residents if required. Sometimes residents enjoy a Chinese take-away or fish and chips eaten out of the paper.

Relatives who are visiting may enjoy a meal with their loved one.

Details of diet regimes are recorded in care plans, and there are visits from a Dietician for those requiring fortified or thickened diets.

Residents have their weight recorded monthly, and concerns are discussed with the Dietician.

The home has a 5 star local authority hygiene rating.

We noted, on one occasion, a member of staff in the kitchen was not wearing protective clothing during meal preparation. The next time we passed she was wearing an apron.

Safeguarding, Concerns and Complaints Procedure

All staff have undergone safeguarding training and have yearly updates. There have been no issues concerning safeguarding.

There have been no complaints for a considerable time. Minor issues are dealt with immediately.

Medicines and chemicals are kept locked away from residents.

Katrina reported to us that she is having difficulty sourcing the correct type of ferrule needed for a piece of equipment used in the home. We advised her to contact Hope Street Specialist Service and speak to the Falls Prevention team who may be able to assist.

Staff

There are 11 staff members and all are required to undertake regular on-going training, which is accredited by NCFE. Katrina provided us with a copy of the training matrix which is kept up to date.

The home has Dignity and Infection Control Champions and staff attend the local Dignity and Long Term Providers meetings.

Name badges and uniforms are not worn as this is a home, not a clinical environment. However, PPE is available throughout the home to aid hygiene and infection control.

There is a maintenance man who does necessary repairs and Health and Safety checks on fire alarms, water temperature, flooring and appliances etc.

A hairdresser visits the home each Wednesday.

Promotion of Privacy, Dignity and Respect

All residents appeared clean, well dressed and comfortable. None of them appeared distressed in any way despite the fact that the majority suffer from varying degrees of Dementia.

Most of the residents were sleeping during our two hour visit and there were no visitors, so we did not observe much interaction between them or the staff.

Staff address individuals by name and all personal care is undertaken in privacy.

One lady has full mental capacity and she is encouraged to be as independent as possible. She enjoys going to the shops and local market.

All personal belongings are kept within each resident's room in a neat and tidy manner.

Recreational Activities

There are planned activities each day which are displayed on a board in the lounge and visits from organisations such as Time Care Reminiscence and Motivation and Co help residents remember their past. Entertainers such as the G I Girls visit periodically.

Some residents are taken out for lunch, to the local parks and garden centres when the weather is suitable.

Unfortunately, due to their level of Dementia some residents are not able to enjoy many recreational activities.

Medication and Treatment

All medications are provided in a cassette system by Lloyds Pharmacy. They are dispensed from the medicine trolley on an individual basis to each resident. There is a medicines profile for each resident giving full details of how they must be prepared and given.

There is a weekly audit on all medications, which was being undertaken during our visit.

Safe handling of medicines training is done by distance learning and staff are assessed for their competency 3 times per year.

Residents

There are 8 residents at present, 1 with full capacity, 1 with mild Dementia and 6 with advanced Dementia.

Relatives and Friends

There are relatives meetings 3 times per year which are advertised in advance on the notice board and relatives are notified by post. Unfortunately no relatives attended the last meeting and few relatives visit at all.

Relatives and visitors may speak with care staff at any time.

Recommendations

- Members of staff to be reminded that they should wear PPE at all times when preparing food and beverages in the kitchen.
- Contact Hope Street Specialist Falls Prevention Service to assist with sourcing the correct ferrules needed.

Service Provider Response

- We would like to thank the visitors who were very friendly and professional. They were respectful and not intrusive, which was greatly appreciated.
- Katrina Peerbux had made some minor comments on the original report and these have been accepted by Healthwatch and incorporated into the final report.
- Katrina wanted to highlight that although not much interaction was observed by our representatives with staff and residents when we were first welcomed, because the residents appeared to be asleep, a host of activities were on while our representatives were in another part of the building.

Distribution

This report has been distributed to the following:

- Healthwatch England
- Care Quality Commission
- Caroline Barley (**Contracts manager for HWNEL**)
- Jeanette Logan (**Older People Service Lead at the CCG**)
- Sue Cooper (**Lead nurse-quality at the CCG**)
- Brett Brown (**Contracts manager CCG**)
- Antony Hall (**CQC inspection team**)
- www.healthwatchnortheastlincolnshire.co.uk/enter-view