



Details of visit

Service address:	New Meppershall Care Home, 79, Shefford Road, SG17 5LL
Service Provider:	Pressbeau Ltd
Date and Time:	14th April 2015 10:00 – 13:00
Authorised Representatives:	Dave Simpson, Diana Blackmun
Contact details:	Healthwatch Central Bedfordshire Capability House, Wrest Park, Silsoe, Bedfordshire, MK45 4HR Tel: 0300 303 8554

Acknowledgements

Healthwatch Central Bedfordshire (HWCB) would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View visit.

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



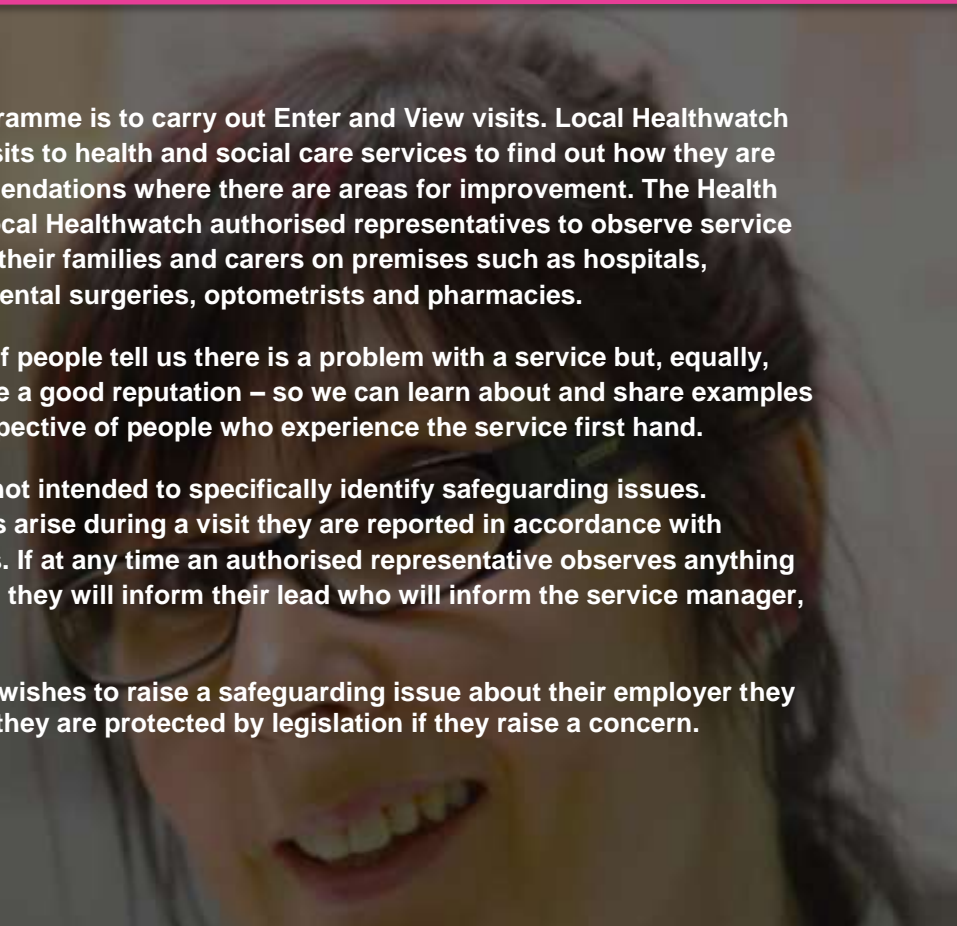
What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being managed and make recommendations where there are areas for improvement. The Health and Social Care Act 2012 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 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 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 safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they will inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.



Purpose of the visit

- To engage with service users 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;
- Consult with residents, relatives and staff about their experiences of the environment within the home and how care is delivered.



Strategic drivers

- Care Quality Commission dignity and wellbeing strategy
- Care homes are a Local Healthwatch priority

Methodology

This was an announced Enter and View Visit.

On arrival, representatives were met by the Manager, who gave a verbal introduction regarding the home, its history, the number of beds and residents, staff etc.

Authorised representatives also approached residents at the care home to informally ask them about their experience of the home. Family members and members of staff were also spoken to.

The authorised representatives explained to everyone spoken to why they were there and took notes.

After speaking with the residents, relatives and staff, HWCB leaflets were given to the Manager to be displayed in the home to enable residents, family members, friends and staff to contact HWCB at any time.



Summary of findings

At the time of the visit, the evidence is that the home was operating to a good standard of care with regard to cleanliness, dignity and respect.

- On entry, the representatives were pleased to see the Healthwatch Central Bedfordshire posters displayed within the home.
- Residents looked tidy, clean and well cared for, representatives saw no evidence of dignity not being respected.
- Residents spoken to were generally happy with the meals; the menu appeared to be balanced and nutritious and mealtimes were suitable for the residents.
- Representatives observed residents being taken into the dining room and witnessed lunch being served. Residents could also choose where to take their meals.
- The residents spoken to were given the option of taking part in organised activities along with their relatives.

The Manager advised representatives that the current capacity of the home is as follows:

- 28 beds, with six currently unoccupied.
- All rooms are single occupancy with 14 rooms en-suite.
- Beds are available for respite care.
- There are no rehabilitation beds.
- A total of 28 members of staff are employed, including four full-time nurses (the Manager and Deputy are also qualified nurses), two bank nurses, one adaptation nurse (male), 13 carers, one Activities Coordinator, four kitchen staff, one administrator, one housekeeper and two domestics, one laundry lady and 'one and a half' maintenance men.
- The staff/resident ratio is 1:3 during the day and 1:9 at night.
- Staff on duty are:
 - a.m. - 1-2 nurses + 5 carers
 - p.m. – 1 nurse + 4 carers
 - night – 1 nurse + 2 carers
- Care categories of residents include those needing personal nursing care, those with dementia, MS and Parkinson's etc and the frail elderly.
- Residents' ages range from 59 to 101.
- Funding for current residents care is as follows:
 - 12 private
 - 7 Local authority
 - 2 CHC
 - 1 commissioned



Results of Visit

Environment

Meppershall Care Home, following a Care Quality Commission (CQC) report, was initially closed to new admissions on 1st July 2013 because of the CQC's concerns over care standards. The commission said the home's standards fell well below what residents deserved and the law required and urgent action was needed. The home was subsequently closed down by CQC on 19th July 2013.

The home reopened in December 2014, under new ownership, and currently operates within the newly refurbished and reopened ground floor of the 20 year old premises.

The upper floor and the former Day Centre are undergoing refurbishment. HWCB representatives were advised that plans for the upper floor includes two Dementia Nursing units; one containing 14 beds and the other 16 beds. Additional plans include converting the Day Centre into a Palliative Care Unit.

The home is set in pleasant grounds, however Healthwatch Central Bedfordshire representatives were initially unsure of which entrance was the Home's main entrance as this was not clearly identifiable. On entry, representatives found the environment to be clean, warm, light and airy. The atmosphere was 'neutral' in that there were no apparent smells, good or bad.

The occupied area of the home has currently been open for four months and is in a very good, clean state of repair, with wide corridors to facilitate free, uncluttered movement for residents on foot, with Zimmer-frames or in wheelchairs.

Two main corridors stretch out from the reception area and each accommodates a 'break-out' area halfway along; one is a very fashionable (French style) café area and the other a sophisticated bar area. Both of these are suitably decorated and creatively designed to enhance the ambience and environment of the home.

Promotion of Privacy, Dignity and Respect

All residents seen at the time of the visit appeared to be well dressed and cared for. Each resident's name is displayed on the door to their room.

HWCB representatives were advised that all bed linen is changed regularly or as necessary. Each resident's individual Care Plan is kept in the office, available for residents and/or their family to view on request. The company has recently purchased an electronic system for storing residents Care Plans which will soon be implemented.

DNR notices are kept at the front of the Care Plans which also contain a photograph of the resident, the same as the medication chart.

Representatives were advised that the home facilitates the following visiting services:

- Hairdresser – according to resident's needs (on call), but also on a weekly basis, usually on a Thursday.
- Chiropodist – six weekly or as required.
- Dentist – residents are taken to the Dentist in Shefford as and when needed.
- Optician – Clinic held in February, next clinic booked for April then six monthly.

One relative commented that *'it is lovely to see (relative) treated with dignity; they call her by her first name and ask her where she would prefer to sit – things like that are important'*

Promotion of Independence

Residents are encouraged to bring their personal possessions, photographs, pictures, ornaments and small pieces of furniture, including televisions, to create familiar surroundings.

All residents are offered the opportunity to be involved in social activities organised at the home. Residents spoken to mentioned being taken for walks around the grounds in suitable weather.

Interaction between Residents and Staff

HWCB representatives spoke with residents in the communal areas. The residents spoken to stated they were comfortable in the home and quite happy. The residents appeared to be pleased with the care received.

Representatives observed staff members engaging with residents and calling them by their first names and escorting residents into the dining room for lunch where representatives saw lunch being served and staff asking residents for their choices of drinks.

Staff were also observed engaging with residents in the large communal lounge, playing music, chatting and serving mid-morning drinks.

Residents

Residents are pre-assessed by the Manager or Deputy, within their own home or in hospital, to ensure that New Meppershall Care Home can adequately meet their needs.

The residents spoken to expressed feelings of complete confidence and trust in the staff, with the majority adding that they *'felt safe and secure at the home'*.

Representatives were advised that residents are all registered with Shefford Health Centre and that a GP from the Centre visits every Tuesday at 10:00 but will also attend at other times if called. The management at the home reports that a very good service is received. There is also regular contact with District Nurses and a Dietician.

Residents' medication is issued by trained nurses at all times who remain with residents while medication is taken, although this was not witnessed by representatives.

Food

The menu is managed on a four week rolling cycle and will be seasonal. It appears to be comprehensive, with fortified and specialist diets, (religious, medical, diabetic etc.) catered for. There are two main choices at mealtimes, however alternatives can be provided if these do not suit a resident.

All food is prepared and cooked on site in the well-equipped kitchen and the home is working towards Food First Certification.

Representatives witnessed residents and relatives being offered refreshments during the visit and were informed that snacks and refreshments are available at almost any time in the café. The residents appeared content with the care they received at mealtimes and are able to choose where to take their meals.

The residents that representatives spoke to all thought the standard and variety of food served was very good.

Recreational activities/Social Inclusion/Pastoral needs

An Activities Co-ordinator organises events to involve residents and their relatives as much as possible during the week. The home is looking to recruit another coordinator to help at weekends. Trips outside of the Home, to local attractions, will be organised for which the Home will use a local coach company.

Residents were observed using the large TV Lounge, reading newspapers and listening to music. The lounge accommodates a large well stocked bookcase which also houses board games and jigsaw puzzles.

Representatives were advised by both staff and residents that activities include quizzes, Bingo, dominoes and musical sessions. There are visits to the Home by the 'Good Neighbours of Meppershall' (GNOMES) who arrange coffee mornings each month and volunteer at the home.

The communal lounge is used for the majority of activities. There was no evidence of residents being forced to take part in activities; it is optional for all residents.

Visits to the home by local schools and their choirs are encouraged and spiritual needs are met by a monthly multi-denominational service at the home. Residents are able to visit the local Methodist church for Communion should they wish and the Manager is likely to ask the 'Gnomes' for help with transport, as the church is at the opposite end of the village, and the village does not appear to operate a local taxi service.

Involvement in Key Decisions

Representatives were advised that meetings with residents only are currently held every month. Meetings with both residents and relatives are planned to be held every quarter. The main purpose is to give both residents and their relatives the opportunity to raise any issues and/or concerns.

Management has used, and will continue to use, these meetings to help decide what information should be included in the 'Residents Information Pack'. This is currently being designed as the Manager is keen for residents and relatives to have input into the process which needs to be 'fit for purpose'. The residents meetings are open to all, including staff (Activities Coordinator, Housekeeper and Chef) to give residents the opportunity to comment on services provided within the Home. e.g., activities, the menu etc.

Concerns/Complaints Procedure

The Manager informed representatives that complaints would be dealt with by a letter of acknowledgement and an investigation. The Manager explained that as Meppershall has only recently opened, with a new system and new residents, there are inevitably hiccups and problems however management's policy is to *'meet them head on, resolve and learn from them'*. The management's ethos is that *'unless you get feedback you can't improve'*. Relatives spoken to during the visit also commented *'I always check on the notes left in her room and I would also report my concerns if I saw anything untoward'*. This relative added that she also attends the relatives meetings.

Staff

All the staff seen and spoken to during the visit were friendly and helpful to the representatives and to the residents they were observed interacting with. All the staff, observed speaking to residents, clearly knew them well, using their first names. The staff appeared to be well trained and representatives were confident the residents were well cared for.

Staff training is delivered in the following disciplines:

- Health and Safety
- Fire Warden
- Moving and handling
- Infection Control
- Safeguarding (SOVA)

The training is delivered internally by e-learning, with some delivered externally including Wound Care and Pressure Care delivered by the CCG.

The home has Trained Champions in Mental Health (one nurse is a specialist MH nurse), Infection Control, DOLs and mental capacity.

There are two members of staff whose first language is not English however the Manager only expressed slight concerns over the communication skills of one staff member which she is monitoring. One relative commented that *'all staff clearly understand English and speak it very well'*.

Visitors and Relatives

Representatives observed family members visiting residents in the home. The family member, representatives spoke with, were most appreciative of the care, respect and dignity afforded to their relative.

There are no restrictions on visiting, other than family members are asked to avoid mealtimes, unless they plan to dine with their relatives, which is welcomed.

The Healthwatch Central Bedfordshire notice was displayed in the care home advising relatives of the visit; however Healthwatch Central Bedfordshire was not contacted directly by any relative prior to or since the visit to the home.

Additional Findings

The management of the home is attentive to any suggestions for improvement and informed representatives of the future plans and ideas for the home; the target capacity of which will be 80 beds.

Healthwatch Central Bedfordshire's representatives were impressed by the passion and determination shown by the Manager to ensure staff provide an excellent quality of care, for present and future residents, and that the home is a friendly and enjoyable environment for all.

HWCB representatives would welcome the opportunity to revisit the home on the first anniversary of its reopening in December 2015 to review the quality of care and environment one year on.

Recommendations

This report highlights the good practice that was observed and reflects the resident's and relative's satisfaction with the care and support provided.

- In light of their experience on arrival at the Care Home, HWCB would recommend that a clearer, more visible sign is installed at/over the main entrance doorway.
- It is HWCB's recommendation that the same degree of thought and consideration, given to the renovation of the ground floor, now be applied to the upper floor and to the previous Day Centre, in accordance with plans outlined to HWCB representatives by the Manager.
- HWCB further recommends that all new staff engaged at the home continue to undergo rigorous training in the levels of care and compassion expected of them.
- Following comments from a relative at the home, during the visit, HWCB recommends that blinds/curtains are replaced in the main lounge as soon as possible, (it is understood these are on order).
- HWCB would also recommend that larger picture/photo books are added to the main library or placed around the home for residents to look at, possibly with photos from the 50's or 60's for example, as an addition to the current 'text heavy' books on display which may not appeal to all residents, particularly the sight impaired.
- Healthwatch Central Bedfordshire recommends that this report is shared with the residents of New Meppershall Care Home and their family members, to advise that if they should wish to contribute any additional comments about the report, to contact Healthwatch Central Bedfordshire direct on 0300 303 8554.



Service Provider response

Many thanks for the positive report.

Can I just mention that we do not display resident names on doors unless they request as it would be against data protection and we do not receive an input for district nursing as we are a nursing home with our own nurses.

We do have good relationships with dieticians, Speech therapists, physiotherapists and occupational therapist.

Tina Flack
Manager,
New Meppershall Residential Care Home

