



Details of visit

Service address:	Woodside, The Old Vicarage, Slip End, Nr Luton, LU1 4DB
Service Provider:	Central Bedfordshire Council
Date and Time:	23rd April 2015 10:00 – 12:00
Authorised Representatives:	Dave Simpson, Linda Grant
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.



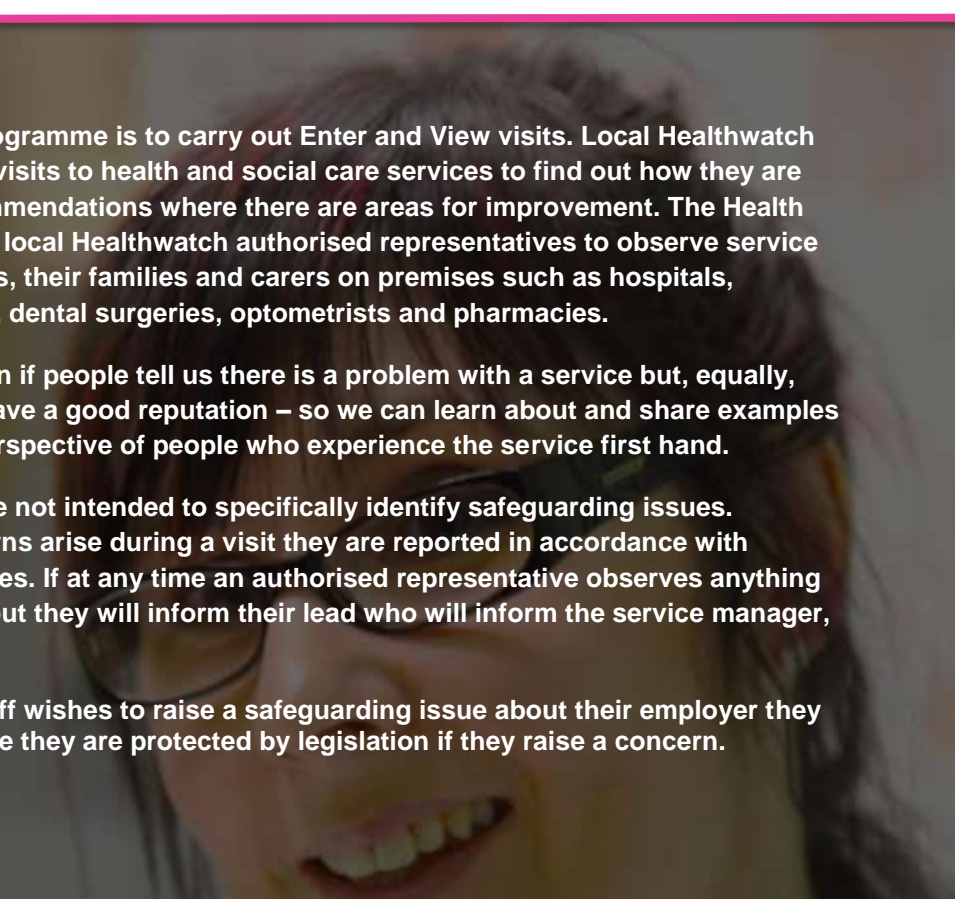
What is Enter and View?

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 asked to sign-in, and were met by the Manager, who gave a verbal introduction regarding the home, its history, the number of beds and residents, staff etc.

HWCB authorised representatives did not feel it appropriate, at the time of the visit, to speak with the residents at the care home owing to the stages of their dementia and their physical condition. In addition, HWCB representatives visit did not coincide with any relatives attending the home and representatives were therefore unable to talk to a relative. A representative of SSAFA was visiting one of the residents; however his tight schedule did not allow him the time to speak to representatives. Several members of staff were spoken to and representatives did observe staff in their interactions with residents.

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

After speaking with members of 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.

- The home is a Residential Care Home with Nursing.
- 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.
- The menu appeared to be balanced and nutritious and mealtimes were suitable for the residents. Residents could also choose where to take their meals.
- There was clear evidence of social activities, with photographs of visiting entertainers displayed on the activities board. 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:

- 27 beds, with eleven currently unoccupied.
- The ground floor beds are for residential care, the first floor is for nursing care.
- Two residents are bedbound.
- Seven residents need complete feeding.
- All rooms are single occupancy with one room being en-suite.
- Beds are available for respite care.
- There are no rehabilitation beds.
- Care categories of residents include those with dementia, Alzheimer's and the frail elderly. All residents are over the age of 60.
- Four beds are privately funded; the remainder are funded by various Local Authorities.



Results of Visit

Environment

The home operates over two floors in a 100 year old former Vicarage with an extension which was added in the 1960s. Access to the upper floors is via a lift and/or two flights of stairs.

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. Initial impressions were that the home is very dated, both in respect of decoration and furnishings and appears to be urgently in need of redecoration or refurbishment. Some of the corridors have poor levels of lighting and appear 'gloomy'.

The home contains three lounges including a small lounge upstairs which is used for meetings and is available for families to use plus one dining room.

Bedrooms contain washbasins and WC cubicles; however, representatives concluded that the cubicles are not fit for purpose as they are too small to facilitate safe access and egress by residents who are not fully mobile.

The home has a large garden which contains seating and several bird feeders. The garden is tended mainly by the 'Friends of Woodside' and the local Primary School, with some help from residents. Representatives were advised that there are plans to create a sensory garden for residents.

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 a laminated notice on the door to their room. The Manager informed representatives that the home was preparing notices to go inside each resident's room with a photograph of their named nurse. Representatives were advised that each resident has a key worker who also works with the family.

HWCB representatives were advised that all bed linen is changed regularly or as necessary. Each residents individual Care Plan is kept in the office, available for residents and/or their family to view on request.

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

- Hairdresser – fortnightly.
- Chiropodist – six to eight weeks.
- Dentist – residents are taken to Houghton Regis, a dentist will visit bedbound residents if required.
- Optician – currently use 'Blink' but are moving to Vision Call.

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. The home has access to the Slip End Community Group minibus for organised trips outside of the home. Relatives are also included in the majority of activity planning.

Interaction between Residents and Staff

HWCB representatives observed residents in the communal areas and also observed staff members engaging with residents, calling them by their first names and proactively encouraging them to be involved in, and with, their surroundings.

Residents

Representatives were advised that residents are all registered with one or other of the two local GP practices in Markyate and Caddington. However, some residents have opted to remain with their own GPs which may be 'across the county boundary'. Representatives were advised that this can and does cause problems due to the different Local Authorities.

Residents' medication, which is kept locked away in the nurses' station, is distributed by a medication trained nurse at all times although this was not witnessed. Resident's photographs are included in Care Plans and on Medication charts.

Representatives were also advised that DNRs (Do Not Resuscitate) notices (if appropriate) are kept within each resident Care Plan which is kept in the nurses' station. The carers have access to a separate folder for each resident containing a body map, charts for bowel movements, food and fluids and a daily report.

Residents clothing is laundered daily, and bedding is changed regularly and as necessary.

Food

The daily menu is managed on an four week rolling and seasonal cycle and appears to be comprehensive, with specialist diets, (religious, medical, diabetic etc.) catered for. All food is prepared and cooked on site in the well-equipped kitchen.

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

HWCB representatives were informed by the Manager that the home has 'Food First' certification and has regular contact with the dietician to ensure that residents received the best nutrition possible. The home is also 'MUST' (Malnutrition Universal Screening Tool) accredited and offers fortified drinks and meals. Residents are weighed monthly and have a quarterly assessment.

Recreational activities/Social Inclusion/Pastoral needs

An Activities Co-ordinator organises events to involve residents and their relatives as much as possible. 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.

Residents were seen using the large TV Lounge and reading newspapers. The dining area was also being used at the time of the visit by residents and representatives also observed mid-morning refreshments being served.

Representatives were advised by staff and the Manager that activities included Bingo, musical therapy, cake baking, 'ball and parachute' games, arts and crafts and pamper sessions. There are visits to the home by 'Pat dogs' and 'readers'. Trips are organised outside of the home, including visits to the local library and village pub, and to the Woodside animal shelter although it was not clear how often these took place. The home is hosting a VE Day celebration in May.

Visits to the home by local schools and their choirs are encouraged and spiritual needs are met by volunteers escorting residents to the local church on Sundays. The local vicar hosts a tea party at the vicarage for residents every six weeks.

Involvement in Key Decisions

Representatives were advised that meetings with relatives are held monthly at present but will move to every quarter. The main purpose is to give both residents and their relatives the opportunity to raise any issues and/or concerns.

Relatives have been asked by the Manager to produce a 'Life History' sheet for residents to be included in their Care Plans.

Concerns/Complaints Procedure

The Manager, residents, relatives and members of staff all confirmed there is a complaints procedure and one relative mentioned having used it. The Manager stressed that there is an 'open door' policy for residents, relatives and staff in order to swiftly identify and resolve any concerns.

Staff

A total of 24 members of staff are employed, including the Manager (a former nurse), three nurses, 15 carers, one activities coordinator, two cooks (one of whom is also a carer), one domestic, three cleaners and one laundry lady.

One nurse and three carers are on duty in the daytime, and one nurse and two carers at night. The staff levels are determined by dependency needs assessment. The home uses one agency nurse on two nights each week and is currently recruiting for a permanent position.

All 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 externally by Central Bedfordshire Council in the following areas:

- Health and Safety
- Fire Awareness
- Infection Control
- Safeguarding
- Emergency First Aid

Moving and Handling training is delivered on site using the home's equipment by the Manager who designed the training package.

Training records are kept on a Training Matrix; staff are moving towards NVQ levels 2 & 3, one nurse is currently progressing to NVQ level 5

Visitors and Relatives

Unfortunately, during HWCB visit, relatives were not in attendance at the home. Representatives were informed that visiting hours are open and flexible, but the home asks for prior notification if a visit is to take place after 8:00 pm.

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 Manager explained that she had been 'brought in' in late June 2014 to 'put the home right' following a less than satisfactory inspection. This work is ongoing and the management of the home is attentive to any suggestions for improvement and expressed plans and ideas for the future of the home.

The home is recruiting a Nutritional Assistant to assist with residents eating at meal times between 8:00 and 11:00 intended to release carers to perform their other duties.

Staff do not currently wear uniforms or name badges however this issue is under review by the Manager who is examining various options.

HWCB representatives noticed a 'Birthday List' in the Manager's office, which is also kept in the kitchen; this ensures that cakes and celebrations happen on each resident's birthday.

Recommendations

This report highlights the good practice that was observed and recognises the amount of work being carried out by the team at Woodside to further improve the home for residents.

- Healthwatch Central Bedfordshire recommends that the programme of redecoration and refurbishment continues and that priority be given to improving lighting in the corridors of the home.
- HWCB considers that some form of identity badges for staff is essential, for the benefit of residents, relatives and visitors and recommends this be addressed as a matter of urgency.
- HWCB would also recommend that the WC cubicles in bedrooms be removed as soon as possible to improve access for residents, particularly those with limited mobility (those needing hoists etc.) and they are replaced with a suitable alternative, such as commodes and a sluice room.
- Healthwatch Central Bedfordshire recommends that this report is shared with the residents of Woodside 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

I would like to thank you for the time attention given throughout your visit on 23rd April 2015 and thank you for the assistance and information imparted about your service for the use by our service users, families etc.

In response to your report I would like to acknowledge that we continue to strive for improvement and are currently initiating our improvement plan for all the bedrooms with the first room hopefully being completed prior to the close of May.

Following feedback we will then roll out the programme across the home.

Discussions with senior management have led to uniforms being sourced and these will be supplied once the all information is gathered in order to place the order.

I will actively be promoting the services of Healthwatch and will address your services with our family members at our next meeting.

Kind Regards
Mandy Colman
Registered Manager
Woodside Nursing Home.

