

Details of visit

Service provider:

Service address:

Date and time:

Authorised representatives:

West Eaton Nursing & Residential Home

Worcester Road, Leominster HR6 0QJ

9th July 2015 - 09:50 - 14:30

Ian Stead, Christine Price, Val Javens

Acknowledgements

Healthwatch Herefordshire would like to thank West Eaton House, all their service users, visitors and staff for their contribution to the Enter and View programme. They would also like to thank all their authorised representatives who took part in the visit.

Disclaimer

Please note that this report relates to findings observed on the specific date and time 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 outlined.



‘Enter and View’ is the opportunity for authorised representatives to go into health and social care premises to hear and see how the consumer experiences the service and collect the views of service users at the point of service delivery. Evidence-based feedback is reported to Providers, CQC, Local Authority and NHS commissioners, quality assurers, Healthwatch England and other relevant partners. Development of recommendations across multiple visits will inform strategic decision-making at local and national levels.

Enter and View applies to all premises where health and social care is funded from the public purse. Only authorised representatives may undertake ‘Enter and View’, and then only for the purpose of carrying out the activities of the local Healthwatch they represent.

Enter & View addresses HWH’s Core Priorities: Integrating Services; Communicating with the Public; focusing on harder to reach people. HWH’s 2015-2016 E&V visits will focus on engagement with people with sensory or physical disability; their carers, family and friends in 4 care homes & 2 WVT units. 10* Dignity Challenge will be used to identify where good practice is being delivered or where improvements could be made.

‘Enter and View’ is planned, with a clear purpose; it is not an inspection, nor a stand-alone activity, nor a last resort or a first choice option.

Outcomes:

1. Local people are empowered to give their views and influence decisions to improve health and social care services
2. Local people are aware of Healthwatch Herefordshire, understand its purpose and how to access it for help and support



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Purpose of the visit

To encourage, support, recommend and influence service improvement by capturing and reflecting the views of service users whose voices often go unheard; offering them an independent, trusted party (lay person) with whom they feel comfortable sharing experiences. Carers and relatives are invited to participate, helping to articulate the views of service users where necessary. It is identifying and sharing 'best practice', keeping 'quality of life' matters, specifically through the 10* Dignity Challenge, firmly on the agenda, whilst encouraging providers to engage with local Healthwatch as a 'critical friend'. It is the gathering of evidence at the point of service delivery, adding to a wider understanding of how services are delivered to local people. It is supporting the local Healthwatch remit to ensure that the views and feedback from service users and carers play an integral part in local commissioning.

Strategic drivers

Enter and View forms part of Healthwatch Herefordshire's engagement programme for 2015-2016. HWH will engage with people who have sensory or physical disabilities who are using health and social care services, recording and subsequently analysing the views of their experiences, focussing on an accessible and inclusive service being delivered with dignity.

Healthwatch has identified people with sensory and/or physical disabilities as its target groups for 2015-16, thus Enter and View's aim is to reach these vulnerable people whose voices are seldom heard. An objective of the visits will be to find out how easy it is for service users to interact with current feedback systems or if they think there could be ways to make these systems more user-friendly and effective. Herefordshire's dignity principles will form the basis for finding out how the services are delivered.

Enter and View 2015/16 will encompass: four care homes, randomly selected from the CQC list of publicly funded, residential homes, identified for providing for people with sensory and physical disabilities, and two Wye Valley Trust venues whose patients include HWH's target groups.

Methodology

Visits will be undertaken by Healthwatch Herefordshire's Authorised Representatives: Board Members, Volunteers and staff, all lay people who have received appropriate E&V training. Healthwatch England sets out guidelines emphasising the importance of a collaborative approach with Providers and/or Managers.

The views of these vulnerable people will be gathered, and through HWH's promotion as well as collaboration with the providers, families, carers and friends will be invited to participate and, where necessary, help articulate those views. Paper-based recording sheets will be used by authorised representatives. The overarching objectives will be:

- 1. To identify concerns, compliments or issues raised by or on behalf of the service users**
- 2. To identify those Homes/Units whose delivery of service can be designated best practice**

Focus Groups of disabled people will be instrumental in designing and developing the topics for discussion and ultimately, if they wish, volunteering to take part in the visits. A 'Wave' approach, facilitating flexibility, will enable HWH to modify its methodology, particularly the themes of conversation as HWH test their efficacy as a result of the initial visits.

The information will be analysed on both quantitative and qualitative content, and recommendations made based on the conclusions of the visits.

Work plans will be formed with Providers in the case of detailed recommendations being made, and subsequent visits incorporated into the plans.

The information will be collated and published in report format. The reports will be discussed with the Providers and all Healthwatch personnel involved in Enter and View, and ultimately signed off by HWH's Chair. They will be used to advise local Providers, influence decision making Commissioners regarding present and future services, and inform Healthwatch England, NHS England and CQC.

Summary of findings

8 people from West Eaton House participated in HWH's topics of conversations. The group was made up of 4 respondents who were very communicative whilst the other 4 appeared to have advanced forms of cognitive impairment, and did not, or could not participate in all conversations. All eight participants had disabilities, sensory, physical or those associated with dementia.

6 respondents liked the staff (the other 2 did not respond to this topic of conversation, as was the case with other topics, which could be attributable to their illnesses - **Results Section** outlines numbers), the majority said they liked the food, 3 of those participating said that their room felt like their own space. Half of those engaged with said they had made friends with other residents and 5 respondents were confident about voicing their concerns and being confident that in doing so the issues raised would be resolved. Participants, on the whole, did not express the need to instigate improvements.

In terms of being treated with dignity, 5 participants said they were treated with respect (there was no answer from the remaining people engaged with); 3 said they were happy and content and 3 said their privacy was respected and they were given time to themselves whilst 2 said they were encouraged to be independent.

It must be noted that half the participants, possibly due to their condition, did not answer many of the questions. Observations about their wellbeing concluded that routine facilitated their welfare; evidence from the way they were dressed which was appropriate, how well they looked, indicated an overall adequacy in living at West Eaton House.

Results of Visit

West Eaton House is a private care home registered with The Care Quality Commission. It caters for people with varying degrees of physical, sensory or mental disabilities.

Vision, mission and values

West Eaton House's statement of purpose states: "We believe that care should be "person centred". Whilst some interpret this as meaning individualised care, they view "person centred care" as being care which enhances a person's daily life, and care which steps back from being overly prescriptive."

Evaluation of their work

To evaluate their work they run 6 month surveys with respondents and relatives. As part of the Heritage Manor Group they have a scheme where Managers from other Homes 'audit' each others' Homes. In addition the company employs an external auditor once a year to evaluate the Home.

Recruitment and Training

Recruitment at West Eaton is difficult situated as it is, over a mile outside Leominster Town's boundary, and with competition from other Care Homes in the town. Many applicants who are invited to interview do not turn up. West Eaton are working towards increasing their staffing levels by 10% in order to provide holiday cover. West Eaton places high importance on getting the right people for the job and have tried different methods of recruiting. Their training has followed the lines of the current care certificate, meeting nine of its standards, and basically involves a week's induction, followed by two weeks' shadowing and thereafter being under observation. They have their own accredited trainer who delivers the training.

Capacity and staffing resources

The Home has capacity for 32 residents; at the moment there are 29. In all, including kitchen staff and others, 35 people are employed at West Eaton with 2 vacancies being recruited for. There are usually 6 paid carers in the morning and 5 paid carers in the afternoon with 3 paid carers at night. The Manager is a trained Nurse.

Engagement with families

There is a family meeting once a year, but the Manager operates an open door policy for all when feedback is invited from friends and relatives. Senior staff are on a rota, but the Manager is usually available by mobile over the weekend.

What does a usual day look like?

The manager has a handover from night staff every morning; being updated as necessary. He has a regular weekly meeting with all heads of department.

Referrals

In the main referrals come from Social Services and word of mouth. Some of the respondents are self-funders and have made their own choice about coming to West Eaton. Very rarely do they refer respondents on to other organisations, but they have had to give notice once meaning that Social services then is responsible for find a suitable alternative Home.

Personal Services

A hair dresser visits once a week, whilst a chiroprapist visits every six weeks.

What would respondents be requesting in way of improving services?

Increased accessibility to the garden which is already being improved and made more accessible.

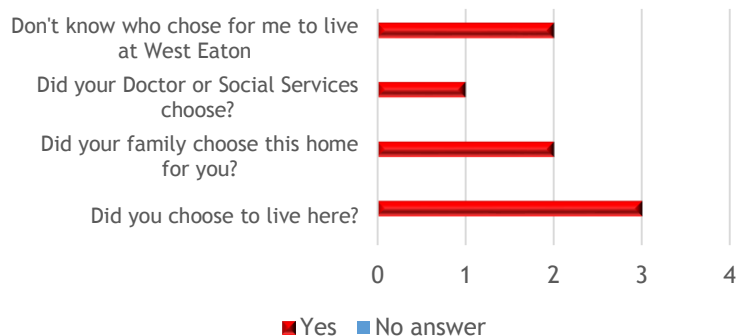
What choices are on offer for food, room colour, personalisation of living space?

There is a four week rolling menu with choices of main and starters. Respondents are encouraged to have their own items of furniture and knick-knacks in their own rooms, making it feel like 'home from home'. The Manager encourages respondents' families to submit photos of respondents when they were younger; they often do not recognise current photos of themselves.

Results of conversations with Respondents who engaged in Healthwatch's Enter and View visit

Reasons for respondents living at West Eaton House?

Who chose West Eaton House for you



3 respondents we engaged with said it was their decision to live at West Eaton. Some respondents said they didn't know, an answer which could be attributed to the stage of the illness they had. 2 said their families had made the choice for them. Respondents comments were as follows: "Didn't want to go back to hospital; been diagnosed with Dementia imaginary illusion syndrome." "I've got MS, I wanted to come here because I can easily express myself here." "When I first came it was a residence, most of us had cars. Now it is more for old age." "Medics decided I couldn't live on my own. No relatives that visit. "Don't know who chose it." "I chose to live here." "I didn't choose to be here, I don't know who did."

What respondents liked about West Eaton House

3 respondents said they liked the staff; 2 did not answer the question which could have been attributed to their condition. All participants answered positively when asked about the food; 4 said they had made friends with other respondents and 3 said that their room felt like their own space. Other comments made:

"Thought I would have to go into hospital; couldn't wish for a better place for me; people are lovely, food lovely, lovely and warm, I try and keep sociable".

"I can express myself, I can do what I want to do, artistic words, drawing, got a lot of my things around, got a lot of friends".

“The staff are very helpful, particularly understanding; the grounds and the situation. I spent all my money and they fixed it so that I am still here. The garden we can go into”.

“Food not bad - a bit stodgy for me. Desserts - prefer fruit, do get some. Reasonably comfortable”.

“They keep me busy - don't know what; flower arranging. I share a room.”

“Always been happy with care; comfortable and well looked after.”

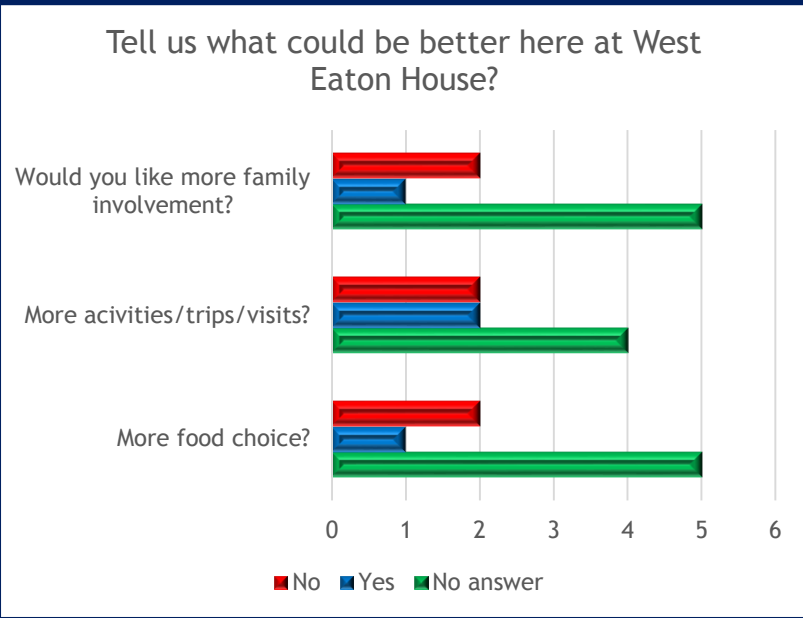
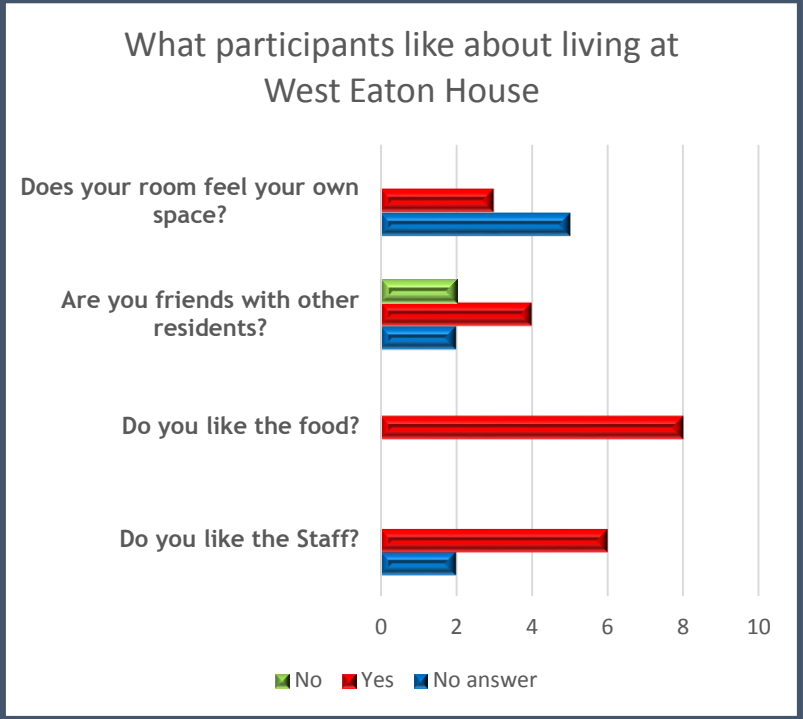
“Excellent food and nice choice. Nice room, I like living here, fortunate to have places like this. Very, very good very fortunate with garden.”

“Like company.”

“Reasonably comfortable. Food - good choice. (Like) Mostly living here. Depends if you like this life.”

“Very good; like the garden.”

“It is very good - it is changing though. It was a lot better in the past - it was more like a second home - more like a hospital now. I am now the only one with legs (able to walk) even though I am 95.”



Respondents were asked what could be better?

“It's lovely here - look at the green. Was a welder and painter in Hereford for the past years of my life. Not good now; liked kicking a football around.”

“Good as it is! I know it is lovely; I like Rita, she is the one I like the most. Really happy with everything that Rita does; she sees me as I really am. Reading, writing - wholesome. ”

“Cook is very friendly; she can cook; very pleasant. People can give their ideas. ”

“I sweat a lot; bed covers (polyester) not suitable; had to buy my own stuff.”

“I ought to do more, but I don't. Don't have any problems.

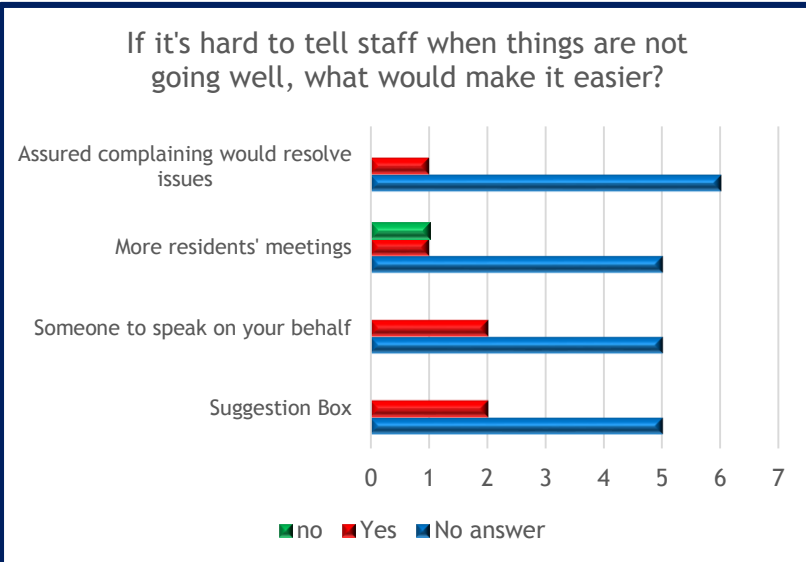
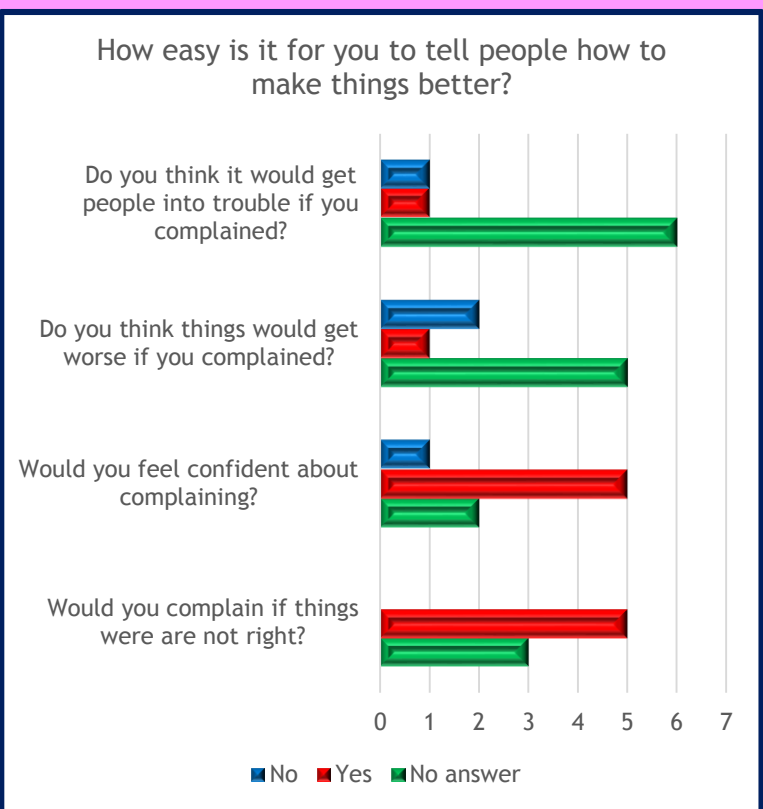
“I could ask if I wanted something; some staff would listen; some wouldn't. Depends what you ask. ”

“I wouldn't choose here”

“Would like to do more activities”

How easy is it for respondents to tell staff how to make things better?

5 respondents said they could complain and were confident about complaining if they needed to. Respondents' comments are as follows:
 "I haven't found anything that is not right. Food, care, first rate. Home from Home."
 "I could explore my options. If they don't like me complaining and they hounded me they'd do it at their cost. But wouldn't want to".
 "Feel able to talk to people; don't know about complaining getting people into trouble; haven't tried it, but I would think twice. My son in law was the Mayor last year."
 "No problem raising issues with staff. I have different interests to other respondents; don't do activities."
 "I could ask the staff for different things."
 "Haven't thought about it; I just look forward to seeing Peter."
 "Can't think of anything in particular; I would like to be out in the garden working".
 "I could ask for something I needed it; no problem doing this. Nothing's perfect."
 "If I wanted different food, I could ask for it. Would be able to ask staff if anything needed."



Respondents' views on what would make it easier to let people know when things are not going well?

"English for some staff a minor issue."
 "No, it's okay."
 "Can talk to staff and my son visits and speaks for me. Haven't had any problems."
 "Not much contact with staff, would like more. Used to getting out more - steam railway. Mostly stay in my room by choice."
 "You're two people; you're the inside person who wants to do things, and the outside person who has been trained to conform."
 "We have respondents meetings and I suppose if you did have a suggestion box it would give you anonymity."

"Yes it would be good to get family to talk on my behalf - trouble is they're all dead."
 "One of the Nurses/Carer - Sue is the one, and Maria - just lovely. Look after me; I couldn't have better care and I appreciate it. I love it here."

Respondents' views on the support they receive from staff

3 respondents said that there needed to be more staff whilst no one thought that more training was needed in order to support them more fully. Participants commented as follows:

“Top class. See the girls lifting very heavy things - should be a man around.”

“Yes, Becky is lovely - beautiful lady, speaks to me as me, a pessimistic person. I would call Mary a beautiful lady too.”

“People don't get up early, they have to take their turn.”

“Yes but not enough staff, need 1 or 2 more then more time to chat.”

“Nothing they need to know about. If I have any problems they can get what I want.”

“Not really; they are used to it.”

Do staff know enough about your condition to support you in the best way possible?



Are you family, friends or carers encouraged to be part of your life here at West Eaton House?



Respondents comments about their family involvement

“Yes, my daughter in law comes, but she does work.”

“Not as often as I would like.”

“Won't go out on coach trips - all the others do.”

“Friend visits once a month, and will get things. If I needed a doctor they'd get one but don't see one routinely.”

“Family visit me.”

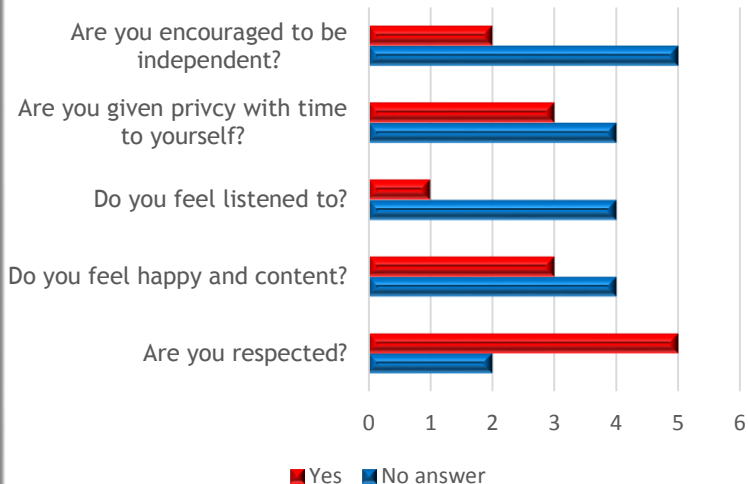
“My son visits - he could talk to the staff.”

“They can speak to staff here.”

“Occasional visitors.”

“Gets some visitors.”

Are you treated with dignity?



Respondents comments on being treated with dignity

5 respondents said they were respected.

Comments about dignity follow:

“Normally respected and treated with dignity. But you have to look after yourself.”

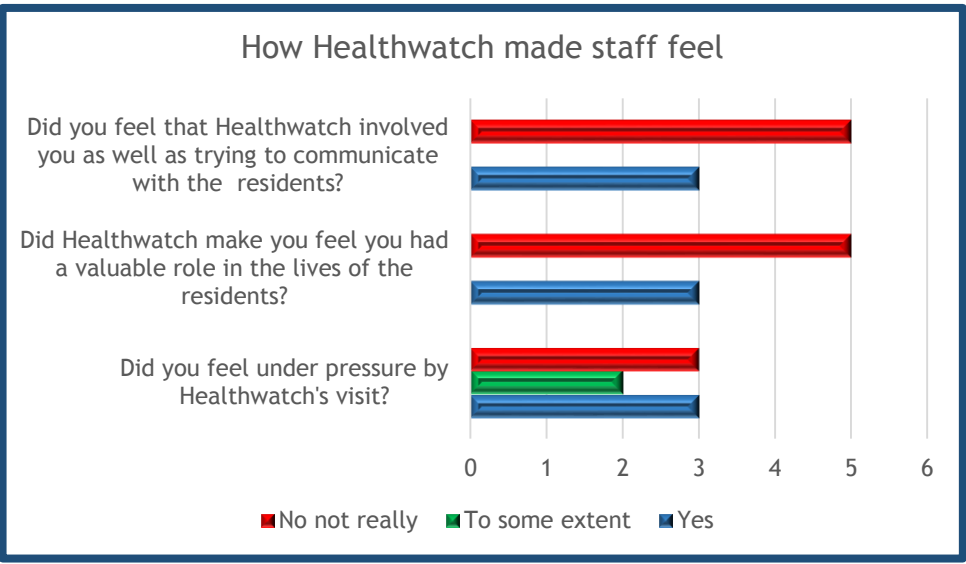
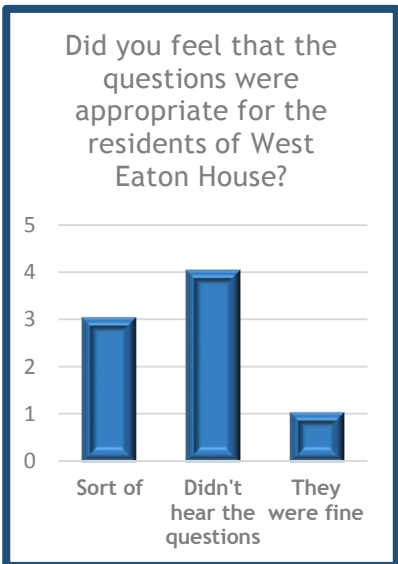
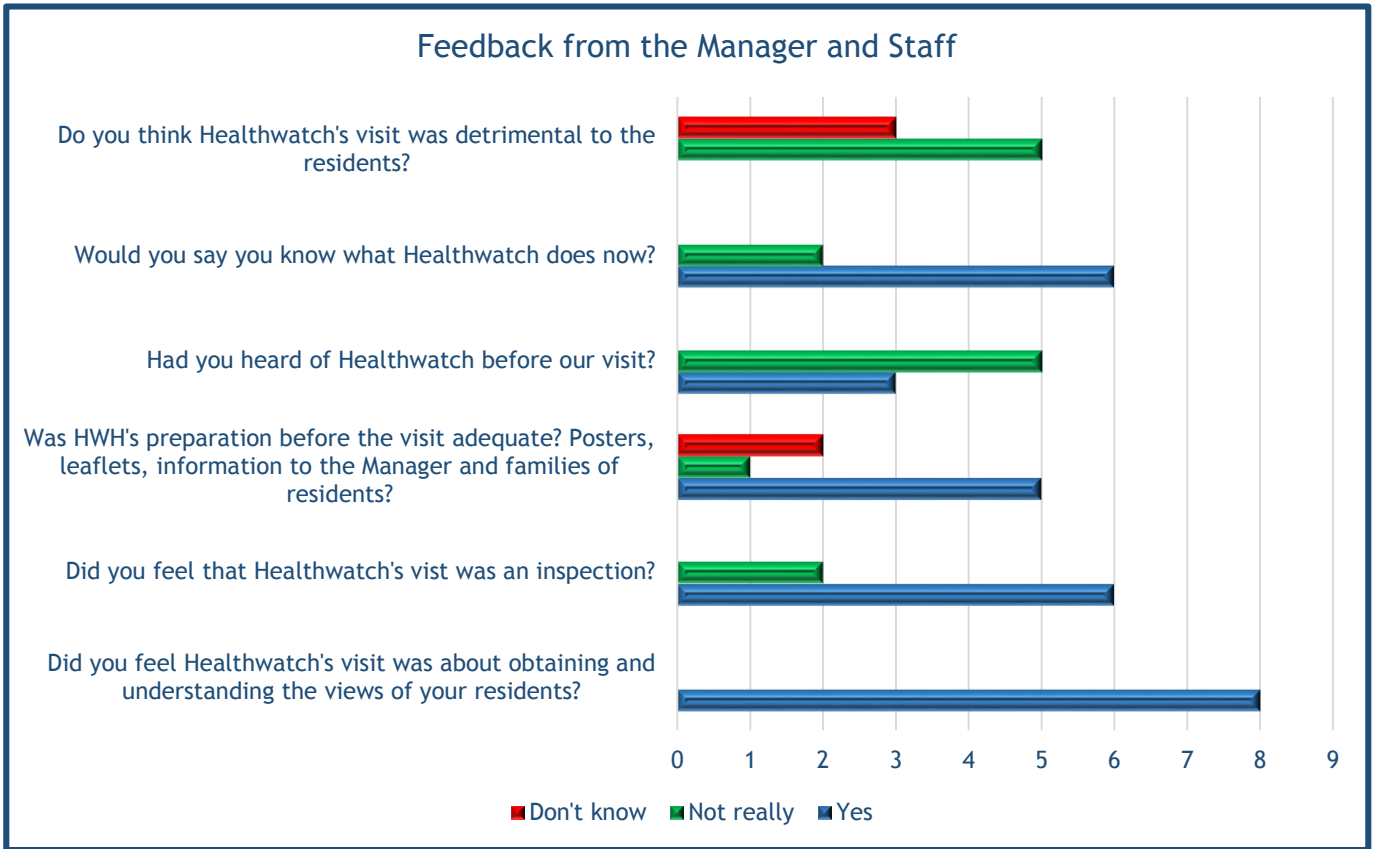
“The improvement with the whole set up here, you can get together, get things done. Organisation between staff - amazing what they get through.”

“Yes, I do. Used to be a pharmacist in Hereford Hospital - 33 years.”

“I expect them to respect me if they want to be respected themselves. Thrive here, I like everybody but I don't have to be with them.”

“Yes, I hope so. I admire them all. My family have been too, but not so much for the last two days. I was worried they wouldn't take me in, I am so grateful. My wife hasn't been.”

Feedback from Manager and Staff at West Eaton House



It is clear from the evidence from the Staff that Healthwatch made them feel under pressure. The tension was tangible; an observation raised with the Manager at the end of the visit. Healthwatch Herefordshire routinely has a preparatory meeting with the Manager of the Home. This provides the opportunity to reinforce the engagement approach of Enter and View visits as opposed to inspections. Time precludes further engagement with staff, and it is hoped that the Manager will disseminate this message to other staff.

The anxiety of staff at West Eaton was discussed with the Manager; he commented that even though it had been emphasised that Healthwatch was undertaking an engagement visit with the respondents of the Home, staff still felt they were being inspected. One member of staff was heard to tell a resident that Healthwatch

were there to 'interrogate' him. The tangibility of the pressure had a knock-on effect with all those who participated in the Enter and View visit.

On initial contact with the Manager, he said that he was committed elsewhere on 9th July, but plans were changed in order for him to be there on the day of the visit. In discussions with him, concluding the visit, he said it was the duty of staff to be in attendance with respondents at all times which at times had the effect of feeling inhibitory for all those participating.

Staff commented in their feedback that they did not know what the questions were which were asked of the respondents. This is good learning for Healthwatch and in future visits 'topics of conversation' will be circulated to staff prior to the visit.

Other comments included staff not being involved in the visit, or valued by Healthwatch authorised representatives. In a short period of time it is difficult to involve everyone, but certainly Tracey, Monica, Rebecca, Rita, Sue, June, Gabor were staff members who made an impact on Healthwatch authorised representatives.

Additional findings

Work was being undertaken in the garden to make it secure and accessible to the respondents, much of the work had been done by Volunteers from the Marlbrook site of Cadburys. This will be of great benefit to respondents who remarked on the inaccessibility of the garden.

Healthwatch authorised representatives were invited to see a resident in his room; not enough time was given to ensure that he had finished putting on his shirt before they were encourage to enter.

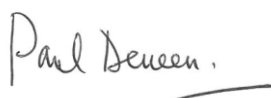
Recommendation

Overall the responses to being treated with dignity were positive. However, the example of authorised representatives being invited to enter a room when a resident was still putting on his shirt leads Healthwatch Herefordshire to recommend that a review of Herefordshire's Safeguarding Board's Dignity Principles is undertaken by all members of staff.

West Eaton House - Response

"We agree that it is inappropriate that someone be invited into a resident's room whilst they are dressing, and this should not happen. All staff have received appropriate training, and this is out of the ordinary. We will reiterate to the staff the principles surrounding privacy and dignity."

Signed



**Paul Deneen OBE JP DL
Chair Healthwatch Herefordshire**