

Details of visit

Service provider:

Service address:

Date and time:

Authorised representatives:

**Newstead Nursing Home**

43 Venns Lane, Hereford, Herefordshire, HR1 1DT

**Wednesday 30<sup>th</sup> September 2015 - 09:50 - 14:30**

Allan Lloyd, Ian Stead, Brenda Baylise, Val Javens

## Acknowledgements

Healthwatch Herefordshire would like to thank Newstead Nursing Home, 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



**Healthwatch Herefordshire**

Berrows Business Centre

Bath Street, Hereford, HR1 2HE

Tel 01432 364481

[Info@healthwatchherefordshire.co.uk](mailto:Info@healthwatchherefordshire.co.uk)

Follow us on twitter: @hwherefordshire

## 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

9 participants took part in Healthwatch Herefordshire's Enter and View Visit to Newstead House. 2 were carers, the other 7 were residents who all had physical and/or sensory disabilities. Included in the cohort was a carer of a much younger resident.

Out of the 9 people HWH engaged with, it was found that it was predominantly individuals and their families who had chosen to live at Newstead; only two of those engaged with said it was their GP who had driven that decision. All respondents said they like the staff, 8 said they like the food, 6 respondents said they interacted with other residents in a way which engendered friendships and 6 said that their room felt like their own space.

The majority of people engaged with did not indicate they wanted more food choice, whilst 6 people indicated they did want more activities. 4 people said they didn't want more involvement from their families.

On the whole people who took part in our visit were confident about complaining and said that they wouldn't hesitate to raise issues if they needed to. More importantly they did not feel that things would be worse if they complained, nor did they feel that people would get into trouble by raising issues.

There wasn't a general need from the people we spoke to that there needed to be other mechanisms for raising issues. 2 people said that a suggestion box was a good idea or more residents' meetings would be beneficial. 4 people indicated it would be helpful to have someone to speak on their behalf.

Respondents were happy with the level of training the staff had, with only 3 of them saying that there should be more staff. Everyone said that they were treated as an individual, whilst 6 of them said that felt like a valued member of the community.

Answers about the dignity with which responding residents were treated were very positive; everyone said that they felt respected and were given privacy; most of the people said they felt that they were listened to whilst 6 people said they were happy living at Newstead.

The Manager stressed that although the Home was for sale, the residents, their families and carers would not be subjected to any change in the delivery of the service. Management have been open and transparent about the proposed sale of Newstead House.

In accordance with the residents' views of the service they were receiving, and recognising that our Enter and View visit was a snapshot representation of what the people we engaged with said on the day of the visit, we would like to recommend that there is a concerted effort to initiate more activities for the residents.

## Results of Visit

### Vision, mission and values

Needs to be reviewed; Newstead House was registered in 1988 and over the years has been bought by what is now the incorporation of Somerset Redstone Trust. However it has recently been bought (not sure whether the sale is finalised) by Heritage Manor who are the same organisation that owns West Eaton.

### Evaluation of work

Care plans reviewed monthly, Relative/Resident meetings, care reviews with families and carers, menu reviews (especially as someone recently - a relative - has mentioned that the menus are poor).

### Recruitment, training and retention

Retention of staff is one of the biggest problems. There are some staff, however, that have been with Newstead for 27 years, and the team that they have got now are a really good team who it is believed will give a continuous service. Newstead's biggest problem, which is reflected county and country wide is the recruitment of Registered nursing staff.

### Newstead Nursing Home, capacity for residents:

Capacity is for 44 people altogether, but at the moment there are 39 people (reducing to 38 after lunch).

Staff Day:	2 RGNs	9 Care Assistants	1 Level 3 (Meds)
Staff Afternoon:	1 RGNs	8 Care Assistants	1 Level 3 (Meds)
Staff Night:	1 RGN	5 Care Assistants	

Staff hierarchy: 1 Manager, 1 Deputy Manager, 1 RGN  
The Deputy Manager has one office day with drug round

Disabled residents: About 30

### Engaging families

The Manager has an open door policy so families, carers and friends can speak to her at any time; the Administrator and Deputy Manager can fill in the gaps when she is away. The Manager has a 'hand-over' from the night staff so she is aware of what is happening with all the residents. The Manager feels very strongly that their job is not just about looking after the resident but it is about supporting the family.

### Referring

Management take referrals very seriously ensuring that they are able to meet the needs of the people coming into their care. If they do need to refer people on to other places (which is not something that they have to do frequently - both Manager and Deputy Manager assess the residents before they're admitted to the Home). Caroline Evans refers patients with Parkinson's to them.

The Manager had been busy dealing with a safeguarding issue and had been at the Home all weekend going through the paperwork.

### Main providers of other personal services such as hair dressers, chiropodists

Hairdresser comes to the Home weekly and the Chiropodist comes on a monthly basis.

### Do residents receive a good service?

The staff really care for the residents; they do their best to make sure they get the best possible service. Referrals are made to the GP if the Home is not able to deal with any issues.

### What would residents want to make the service better?

They may say that they would like more redecoration; they may say that they would like more activities although there are 31 hours of activity provision.

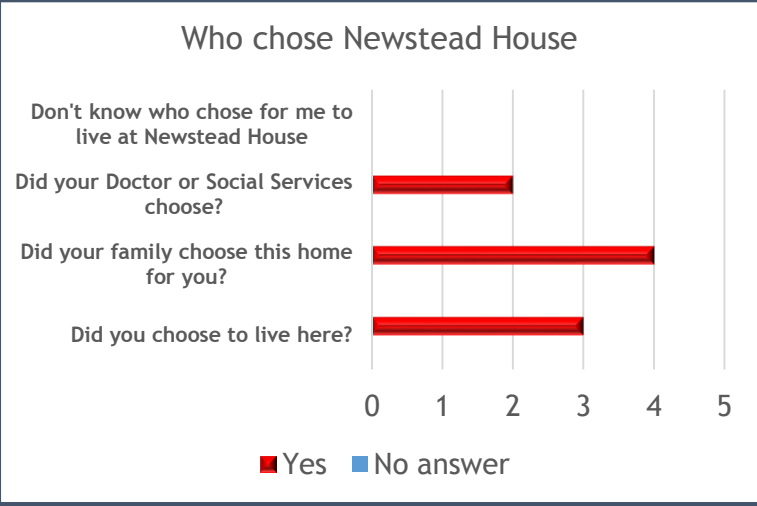
### Choices

Always two choices for food; residents are encouraged to personalise their own room, one resident had bought his own recliner. Breakfast; they can have whatever they want - cooked, cereal, porridge.

The Home is on the market; there is one potential purchaser who already has one Home in Herefordshire.

# Results of conversations with Respondents

## Reasons for people living at Newstead House?



My husband was in and out of hospital; having falls all the time; looked after well at this Nursing Home - got Vascular Dementia; nerves in lower legs are damaged, poor balance and can't walk on his own.

Had massive stroke; given block busting drug which caused a bleed on the brain. Doubly incontinent, speech impaired, couldn't cope with him at home because he had so many issues, hence moving to Newstead.

Bought here as advised.

Just turned up on doorstep. Have had a couple of falls; people here are much worse than me; I know I've got a bit of a problem with my memory.

Don't know why I am here; I don't need to be. My wife says she can cope with me at home, so I don't understand why I am here. I've had a few falls, but I don't need to be here. I can do everything for myself, so don't understand why I am here. My wife hasn't complained about not being able to cope, but they say she can't. No one has explained why I am here; not even my doctor from Moorfields.

Couldn't live at home - had a stroke, loss of speech and effected left side.

After my husband died my family helped to choose Newstead and my daughter helped me move here. She worked as a nurse in nursing Homes so knew what to be looking for.

Had a stroke 12 months ago, can't look after myself.

First care home; the doctor suggested it but my family and I chose it. My family lives here, but I am from Surrey.

## What respondents liked about living at Newstead House

Likes it but got bad cough at the moment so staying in bed. Likes the staff, likes being called Joy. Likes food but not well as the moment; everything ok but sick at moment.

Well looked after; food ok; plenty of choice but not like home. Made friends with others.

I have my own room; very happy here. I like the privacy, staff are very good. Quite good food, but I eat in my own room - by choice - I like my own company. Do see other resident but only when I choose.

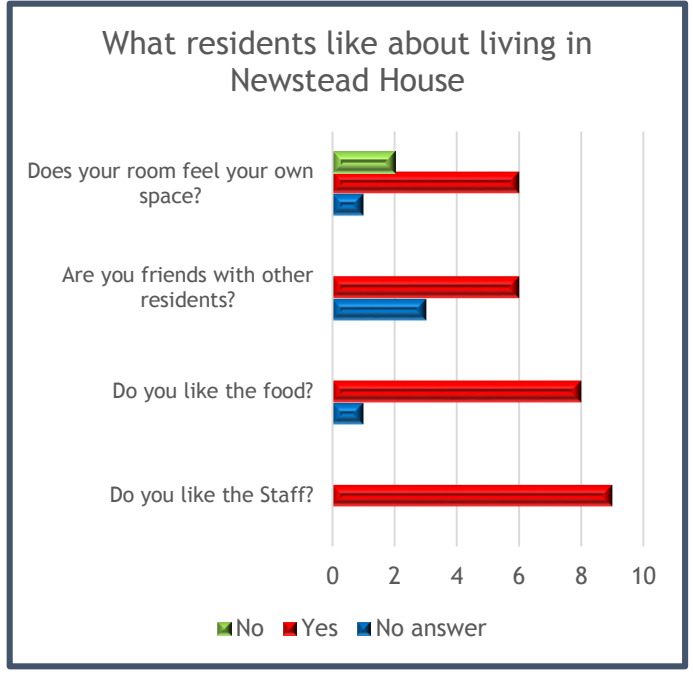
Have my own phone in my room, newspapers delivered daily.

Nothing! No place is like my own home. Breakfast is ok, cereal, hot breakfast, can have your own stuff here.

Food, don't mind being here. Likes 3 staff but keep falling and that is why I am in bed. Got my own pictures, and the posy I made, can do my knitting which I like.

The Nurses are excellent, given choice whether to stay in room or go to main room for dinner.

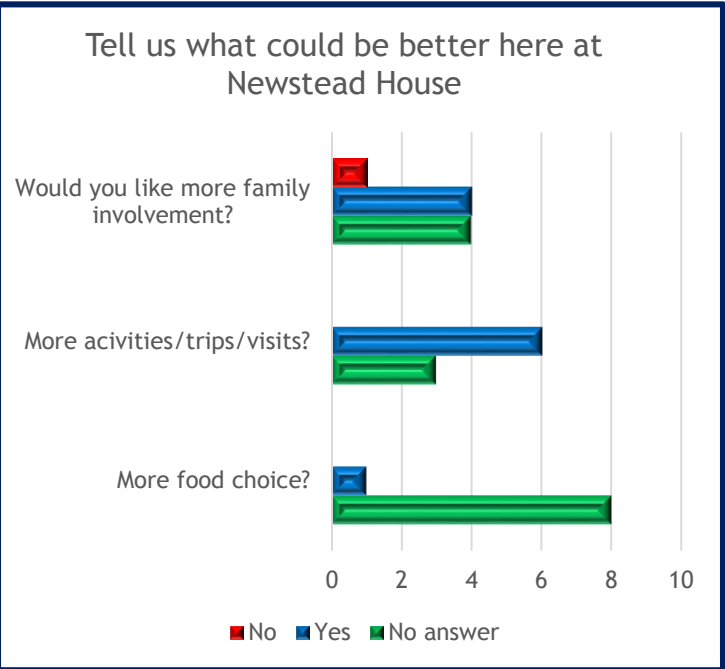
Newstead accepted him where other Homes would not accept him owing to his age. He was assessed and accepted for nursing care. This Home was recommended together with one other home near Hereford.



Hospital physio contacted community physio team who come in every day - as well as OT, Speech therapy most days.

Feels content living here.

Respondents said what could be better



Room for more activities; don't think they have enough church activities

For me and my husband it has been really good; it enabled me to feel confident about going on holiday which after the trauma of what has happened was very good for me.

Like to feel that it is not long term, as first thought. But feel it will be. Would like a few more things of my own.

Don't like it; would rather be at home.

Haven't taken part in any activities or outings.

Nothing really; generally happy with the home. Menus change regularly which I find very good; I choose every morning.

Nothing; it's all good. Not many activities here; would like more singing etc - I was in a choir. No Bingo!

Can't get mobile at the moment; would like activities when well.

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

Easy enough; have some issues with staff and have been asked to put issue in writing; but certainly feel able to complain to the Manager and to the rest of the staff

Haven't got any reason to complain - my husband is enabled to do as much as he can; physically he is determined and doing well; the team have to tell him to stop

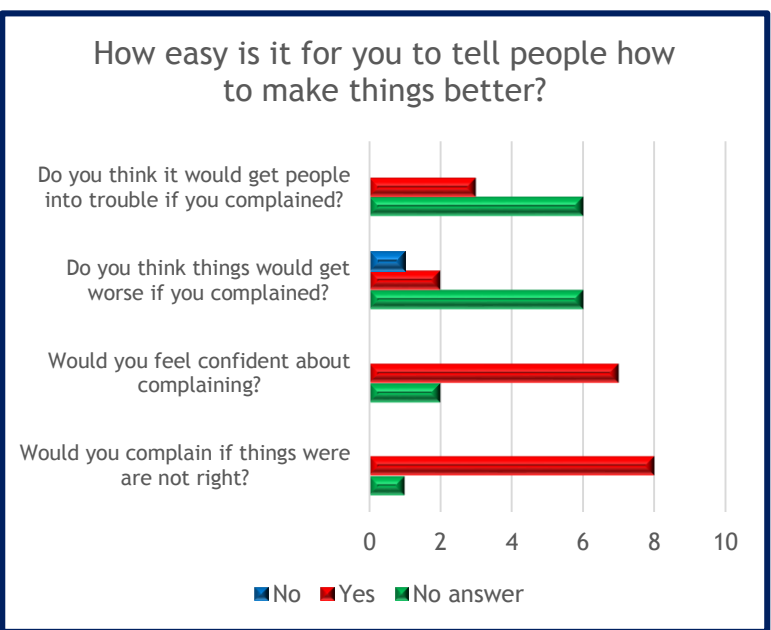
Don't feel uneasy raising issues

Expect it would be easy to complain, but I wouldn't like to, not nice to tell people off. My husband and daughter would help and speak on my behalf.

Can talk to staff, don't know if my daughter does. She would take up issues for me. Many not afraid to raise issues. Would improve things if complained.

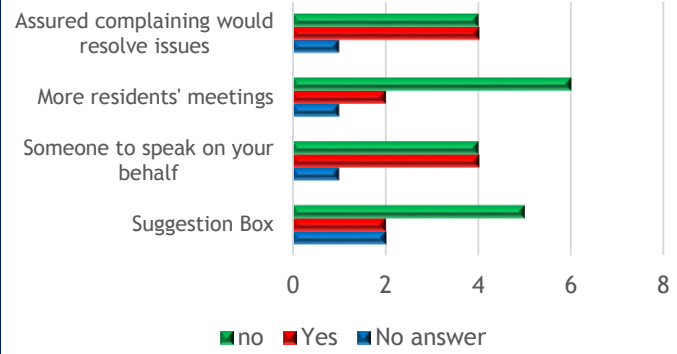
No problem; staff would be ok if I or family complained.

Yes, no problem raising issues with staff.



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

If it's hard to tell staff when things are not going well, what would make it easier?



Suggestion box would help I suppose. I think staff would put it right if I complained about something.

Not had any staff/residents meeting, but no problem in complaining if needed.

Anonymously.

Someone to help with all his unanswered questioned. Seems he is not on the same wave length as his wife, feels the authorities are pulling the shots.

Respondents' views on the support they receive from staff

Yes, they do; they are very nice.

Yes, very good care; see to be enough staff and are well trained

If I ring my bell because I want something they always answer. My Daughter does my laundry; no complaints about nurses and staff or their availability.

Yes, I think so, although when I went in to the garden I over a few times; but just don't know what I am expecting.

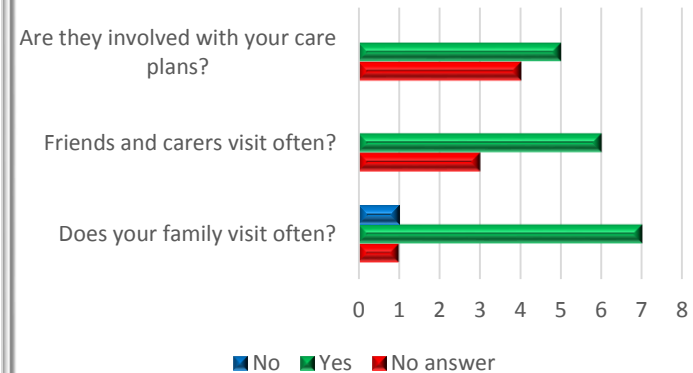
Do staff know enough about your condition to support you in the best way possible?



fell

Respondents' comments about their family involvement

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



Don't visit much - my family. (Staff told us that she did get regular visitors)

Family comes and can discuss with staff. My husband visits nearly every day, he discusses my care

My daughter comes very day and have regular visits from my grandson. My daughter is involved in my care plan.

My husband comes every day; 1 child in Cardiff, 1 child in Hereford, son in the air force, 7 grandchildren, one of them comes often, so does another one.

2 boys, and I have got 1 daughter who works in a shop; she just came back from abroad

Wife comes 2 to 3 times a week; children also come. Have 2

grandchildren, they found it awkward travelling to Ross.

Wife comes in every day, one daughter does as well, and they attend the therapy sessions with him

Wife comes in every day, been married for 13 years; I was 75 when we got married, but been married to another for 49 years previously.

**Residents comments on being treated with dignity**

Yes, feels comfortable and private in the room. Staff friendly and treat me well.

Not happy here because I want to be in my own home. Very respected; lots of banter with staff but not disrespectfully.

If my door is closed staff knock to come in. They can be stressed when busy. No problem communicating with staff, treated with dignity.

Some staff are more abrupt than others; no rudeness though, only as a joke.

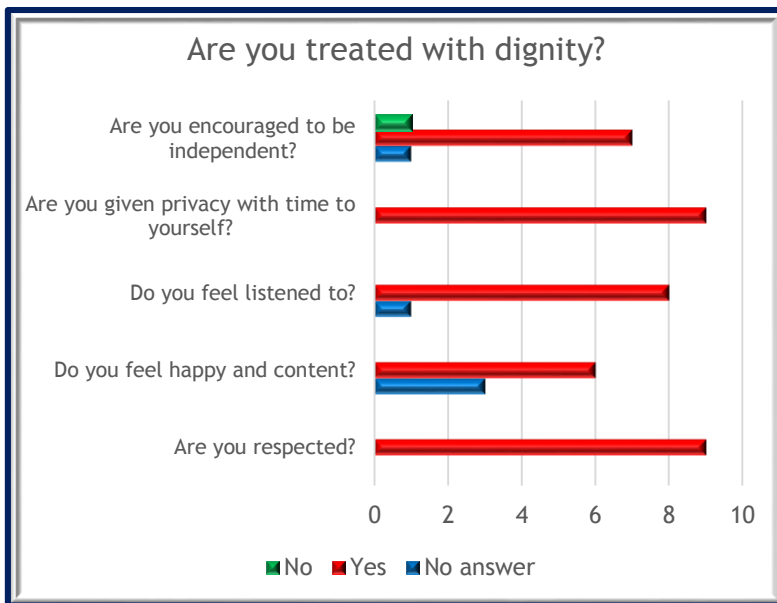
Fingers crossed I can go home soon.

Get tired very quickly.

Don't feel neglected, feel more settled now that I am back in Hereford; staff help with baths.

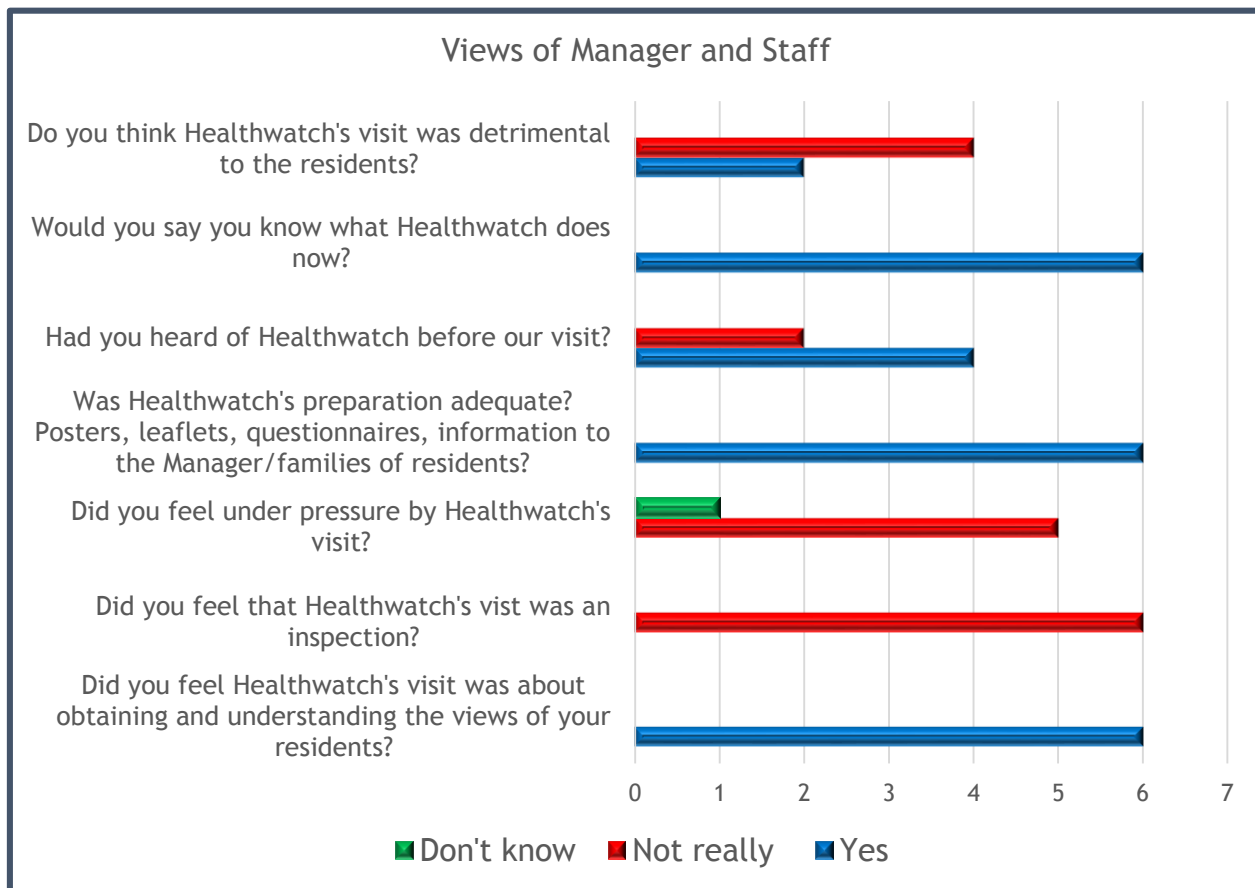
Care is excellent, really good; community therapist said how good staff is.

Feels like he has got the run of the place; feels like the staff are for him in his own room.



**Feedback from Manager and Staff at Newstead House**

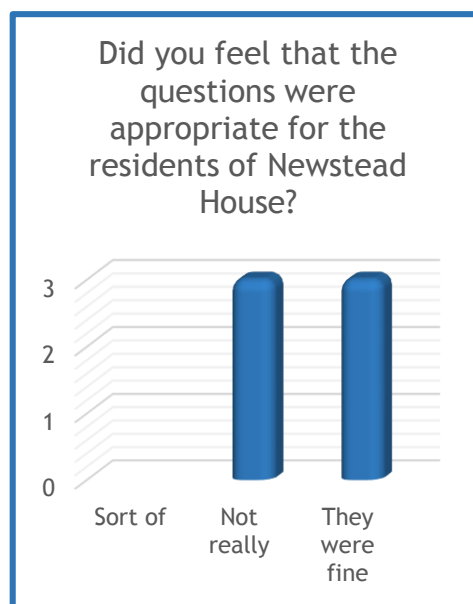
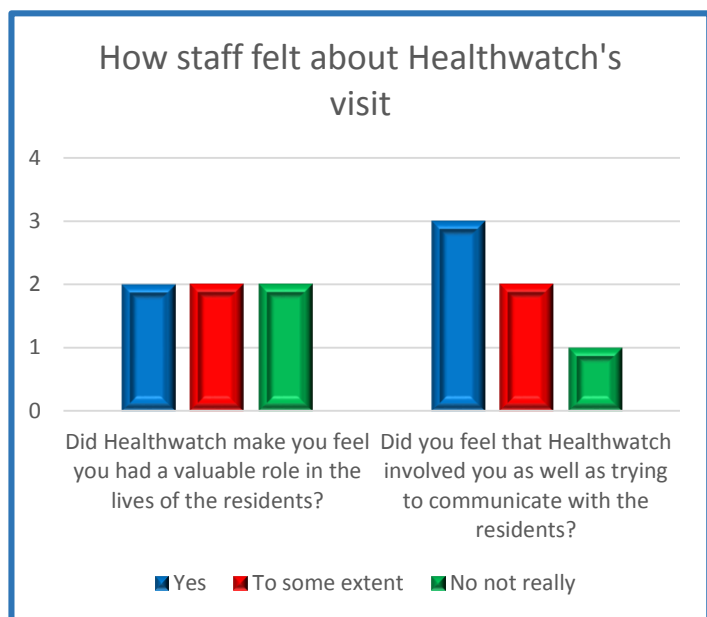
**What the Staff felt about Healthwatch's visit**





It was a shame more residents weren't spoken to and relatives for their views to be heard but I understand why this didn't occur.

Having the Healthwatch visit today was very good practice as we can find residents' views and we can improve on the areas where we need to.



## Additional findings

The gentleman who said he did not understand why he was in Newstead House had had falls at home which made it impossible for his wife to cope with him at home.

Feedback from the carer of the stroke survivor was extremely positive, elaborating on how motivational it had been for the staff to have a resident who was recovering.

## Recommendation

The positive responses from the residents and their relatives led to a positive Enter and View visit out of which we would like to recommend that there is a concerted effort to initiate more activities for the residents.

## Newstead House - Response

There is a Suggestion Box in the reception area which has been in situ since 2000, however we obviously need to make people aware of it and promote its use. The Activities Organiser acts as the residents' advocate within the home.

More activities - this has been a difficult area to address, interviewed candidates and let down, however during the summer holidays there were an additional 21 hours per week, we are budgeted for a total of 52 hours. We have a student who comes in on a Friday, Saturday & Sunday providing 12 hours per week, totalling 43 hours per week. We also have a link with a local high school and college which means students studying Health & Social Care come into the home weekly and we can have as many as 4 students per week. We do promote a whole home approach with regard to activities and perhaps on the day of the visit the Healthwatch team were not aware that our care assistants provide occupation & stimulation throughout the day such as reminiscence/reading etc

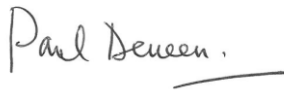
## Results of Visit:-

On the whole during the past 12 months the majority of residents/families say that the menus have improved, however, the menus are in the process of being reviewed in particular for those residents who have difficulty in swallowing.

Church Activities - The Reverend from St Barnabus Church provides a Church of England Communion Service once a month. Representatives from the Salvation Army come into the home fortnightly to sing hymns with those residents who wish to participate.

More singing - we have recently acquired a large organ which was generously donated and have several family members who can play it

Our last residents meeting was held in June, one to be scheduled early November to discuss Christmas menu & activities as we felt that it was too early to discuss in October. At a meeting in January the frequency of meetings was discussed and at the time it was agreed to hold 6 monthly, however the frequency will be discussed again in November.



Signed

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