

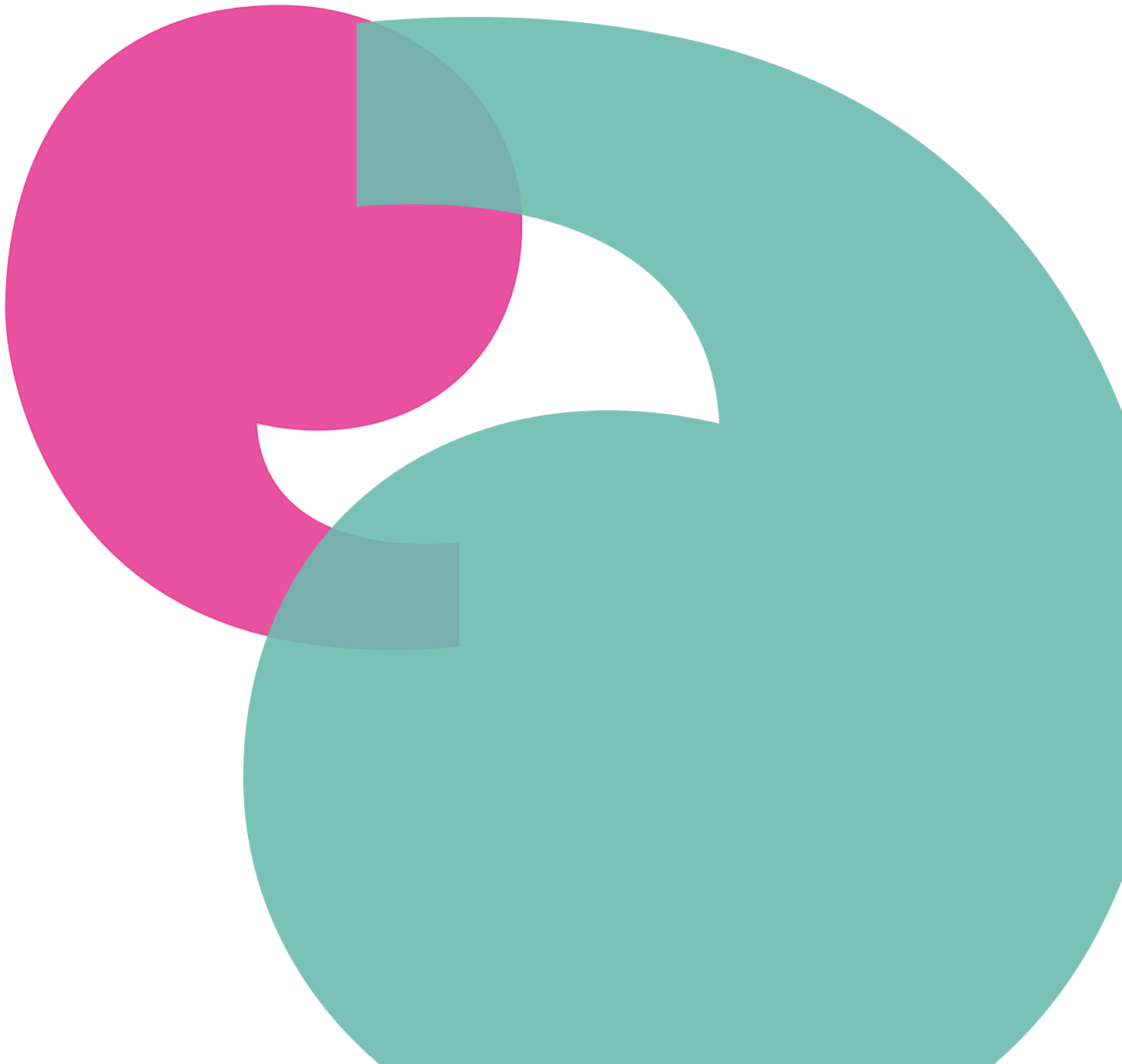
healthwatch

Blackburn with Darwen

Longfield Residential Home

Enter and View

16th November 2015





Details of visit

Service address: Longfield Residential Home. Longfield, Preston New Rd, Blackburn BB2 6PS

Time & Date: 16th November. 10-12pm

Authorised Representatives: Mark Rasburn, Alwyn Cooper & Dorothy Ross

Contact details: Healthwatch BwD, Suite 20, Blackburn Enterprise Centre, Blackburn, BB1 3HQ

Acknowledgements

Healthwatch BwD would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme.

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 run and make recommendations where there are areas for improvement.

The Health and Social Care Act 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 need to 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

The visit is part of an ongoing planned series of visits to services looking at the care provided, specifically around how the homes are able to support residents with additional needs. This includes residents with physical disabilities, learning disabilities, dementia, and mental health conditions.

Methodology

This was an announced Enter and View visit. With the service Manger on duty, we discussed many areas of the home including resident's needs, staff training, and resident involvement.

With the aid of an observation sheet Healthwatch representatives walked around the home to observe the environment in the communal areas and the interaction between staff and residents. Healthwatch representatives were also invited into Residents rooms to observe the environment in there.

Using semi-structured questions, which were prepared before the visit, we spoke with residents and staff. All residents in the communal area were invited to share their experience with us. We also approached staff to engage with us, mindful not to disrupt the care being provided.

During the visit we spoke to 5 of the homes residents and 4 members of staff.

Our findings were briefly discussed with the Team Leader before leaving. This was an opportunity to feedback the findings and highlight any safeguarding issues or quality issues which needed immediate attention. If there were any issues the service Manager would have been informed, along with the Safeguarding team and Adult Social Care Services at Blackburn with Darwen Council.

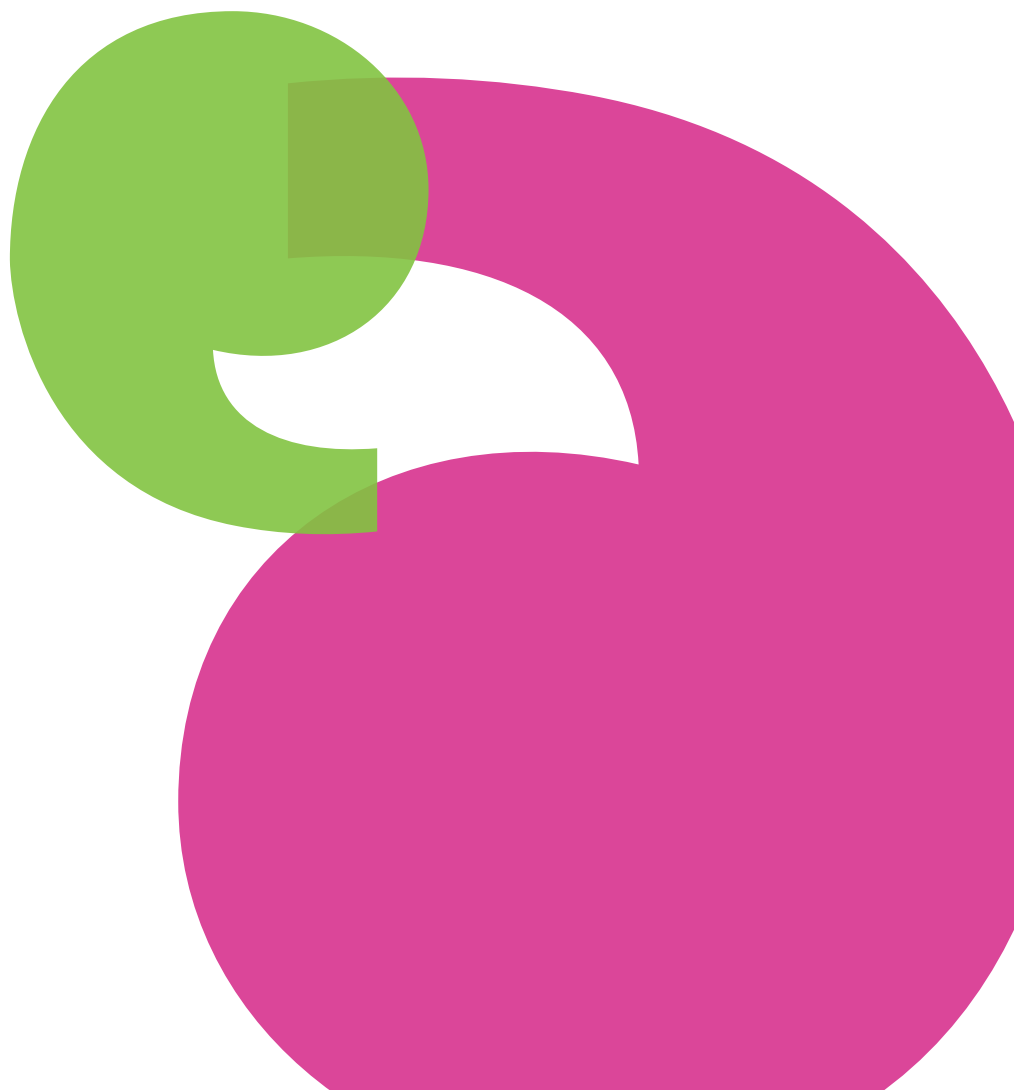
Summary

Longfield Residential Home is a 24 bedroom residential care home specialising in Dementia care. The home is currently classed as full, with 19 residents living there. This is due to some double bedded rooms with single occupiers.

All of the residents have Dementia, with half of them having a physical disability and one resident has a learning disability.

Each day the home has 4 care workers, one house keeper, one manager, and a chef on duty. The home also has two work experience students a week, and had recently been awarded a 'vocational excellence award' from Blackburn College for their 'excellent support'. A typical day shift for staff is from 8-2. Management informed Healthwatch representatives that this was to reduce fatigue in the staff to ensure high levels of care are provided.

The home shares a manager with another local residential home, Hollymount. Some residents leave Hollymount for Longfield if their dementia advances. Having a recognisable and known staff member supports integration and the move.



Results of the Visit

The general environment

Longfield residential Home is a clean, airy and welcoming home.

The three communal spaces visited were all located on the ground floor. All three were clean and nicely presented. In one of the rooms they had a resident's personal chair following a request.

All the residents in the home had dementia. The manager and staff informed Healthwatch representatives that the environment had been created to help best support their residents.

All the toilet doors were painted red, and had large writing saying 'toilet' along with a picture of a toilet. Inside the toilets the furnishings were blue. This helped the residents to find, see and manoeuvre around the room safely.

There were pictures and paintings through the home. These pictures had been purposely selected for their historical depictions for the residents to remember and enjoy. In one of the communal rooms there was a 'memory tree'. This was a selection of past and present pictures of the residents.

There was a secured garden at the back of the house for residents to use.

The home had adequate lighting and hand rails throughout. This helped residents move freely through the home. There was no lift, but there was a stair lift which assisted residents to their rooms on another level. Staff informed us that residents are encouraged to walk up the stairs if they're able. During the visit Healthwatch representatives observed staff members assisting residents to move around the home in a caring and friendly manner.

One bedroom was visited following permission. The room was neutrally decorated with residents encouraged to bring personal belongings to make it a homely environment. This includes chairs, furniture, bedding, and curtains.

Residents View

5 residents (100% of those who answered) engaged with told us they were happy in the home.

Five residents (100% of those who answered) told us the home was clean and tidy.

Staff View

Four staff (100% of those who answered) told us they enjoyed their job

Three staff members (75%) told us they could not think of anything to improve the service they deliver.

Dignity and Respect

The home is also able to provide both female and male carers, with residents wishes documented in their individual care plan.

All care plans are reviewed monthly by staff and every six months with the involvement of families and cares. Families are invited to help shape the care plan every six weeks with the resident involvement. Family members are then invited to review the final care plan and sign up to it. If the resident does not have a family member able to support them then an independent advocate is used.

The home runs an annual resident and family survey to gather feedback, along with a dignity survey for all staff to help the management understand staff knowledge of protocols and identify future training. An example of one the questions is below:

“Do you always knock on a resident’s bedroom before entering?”

Residents View

- 4 residents (100% of those who answered) felt they were treated with dignity and respect
- 4 residents (100% of those who answered) told us they always received personal care in private

Staff View

- Four staff members (100% of those who answered) felt they were able to make time to talk and listen to residents as well as delivering their services.

Meeting individual needs

Each resident has a personal care plan and risk assessment to inform staff the support they require. Within all care plans the resident have a Deprivation of Liberty in place. The management informed the Healthwatch representatives that they do not use agency staff. One reason for this is to ensure they're able to provide the best person-focused care and to reduce any detrimental impact unfamiliar staff may have on the residents.

There are call bells in all communal and personal rooms in the home. Some residents are not able to use these due to mental and physical conditions, so staff operate a 'floating' policy where they continuously walk around the home to offer support. During the visit no call bells were used, but staff were observed to be continuously offering support in a friendly manner.

In the bedroom observed there was pressure mat. Staff informed these were in all residents rooms, used to alert staff when a resident gets out of bed and offer support where needed.

Social Isolation

Staff informed Healthwatch representatives that residents were encouraged to socialise in the communal areas and not spend a full day in the bedroom. Through encouragement, and tailored social activities, staff informed us that all residents used the communal areas.

If residents do wish to stay in their bedroom then staff perform regular checks and update the care plan and risk assessment if required.

Residents View

- 4 residents (100% of those who answered) felt staff met their individual needs
- 4 residents (100% of those who answered) were always given assistance with eating and drinking
- 5 residents (100% of those who answered) told us staff always helped them when needed.
- 3 residents (75% of those who answered) told us call bells were answered promptly. One resident informed us they were, but only when there were able to use it.
- One resident told us the Home provides gluten free food for them.

Staff View

- Four staff members (100% of those who answered) told us they had the flexibility to meet resident's individual needs.

Training

All training is delivered through Blackburn with Darwen Council. All of the staff received new training when they start in the home, which is completed within 1 month. Before any staff support residents they also have to complete moving and handling training, and are then shadowed and supported by a senior staff member for 1 month.

All staff have Dementia, DOLS (Deprivation of Liberty), infection control, moving and handling, and challenging behaviour training.

Staff View

Staff informed us that they have a Level 2 NVQ in Health and Social Care. They identified additional training with Learning Disabilities and challenging behaviour would help improve the care they, and their colleagues, provide.

Three staff members (75%) told us they were given enough support by the Homes management to provide residents with a safe, caring environment.

Interactions between Staff and Residents

We observed staff interacting with residents throughout the visit. This included staff assisting residents to walk from room to room, helping them sit down/stand up, and ask them if they needed anything. We felt this was significant evidence of the positive relationship between staff and residents.

“The staff always help me. I’m very content here”
- Resident

The staff told us they enjoyed their job as the management was very good. Staff felt they were able to find and make time to speak with the residents.

Recreational / social Activities

There was a large range of activities available, and Healthwatch representatives observed a staff member assisting a resident with a jigsaw during the visit. There was a visible and simple noticeboard which showed what activities were on and when through words and pictures.

The home provides activities outside the home, and had recently taken residents to a 1940 event in St Annes.

The homes management informed Healthwatch representatives that some residents ran a shop each Wednesday selling pens, sweets, and other items. All the money from these sales are used to replenish stock and put into a communal fund for activities.

Staff View

One staff member thought additional activities would be beneficial for the residents

Four staff members (100% of those who answered) felt residents were encouraged to attend activities and socialise outside the home.



Contact us



Address:

Suite 20,
Blackburn Enterprise Centre,
Blackburn,
BB1 3HQ

Phone number:

01254 504985

Text number:

07939071407

Email:

info@healthwatchbwd.co.uk

Website:

www.healthwatchblackburnwithdarwen.co.uk



Search: Healthwatch BwD