



Enter and view visit

To

The Laurels Care Home, Timsbury

Authorised representative(s) undertaking visit:

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Acknowledgements

The Healthwatch Bath and North East Somerset (B&NES) team would like to thank the staff at The Laurels Care Home, particularly the practice manager Joby who spent time talking to the team. We would also like to thank the patients who kindly answered our questions.

Purpose of the visit

Enter and view visits are part of an ongoing programme of work being implemented by Healthwatch B&NES to understand the quality of patient experience across the area.

Methodology

The visit took place on Tuesday 10 May 2016 between 10.30am to 12.30pm.

The visit consisted of interviews with both staff and residents, and open-ended questions were used.

The data collected includes both the volunteers own observations and notes taken during interviews and conversations.

This information was then gathered by the enter and view representatives and collected into a report. All direct quotes are in bold.

Summary of findings/observations/conclusions

First impressions

- Good and clear signposting to the car park of the resident home, however it was harder to find the actual main entrance
- Wheelchair access was available at the rear of the building
- The transport van was noticed to be in a very good condition
- The fish pond was safe for residents and in good care
- The entrance hall was lined with photos of staff, their full names, teams and roles
- Suggestion box inviting comments from residents, families and friends, as well as a Healthwatch poster on the wall about the enter and view visit
- The enter and view team were not asked to sign in and no identification was asked to be shown
- It was also noticed that staff were not wearing identification badges
- It was noted that one of the volunteers found the place **“homely”** and generally well maintained, however the building did seem run down and unkempt along with the decoration. The volunteers were informed that there was going to be a programme of decoration starting in June 2016
- Upon arrival at 10.30am there were no quiet spaces and noise from the television, activities and cleaning were audible in individual rooms

Environment

- Poor lighting in areas
- General decorations were in need of major refurbishment as they looked messy and uninspiring
- Again they were informed that the refurbishments were going to go ahead but have been repeatedly pushed back
- Some safety concerns were noticed:
 1. some residents upstairs had rooms with steps and no hand rails
 2. cabinets stating 'always lock' were not and this could lead to a confidentiality breach
 3. a closet containing medical supplies was open and not locked
 4. the stairs by the copy machine had no stair gates
 5. on the stairwell landing, by the dining area, there was a metal picture hanger on the wall that could cause harm if a resident were to fall on it
 6. there were no defibrillators in the home
 7. outlets along the wall at about two feet with no covers in them
 8. the ramps in the corridors were unmarked and the volunteers would have expected glow tape on the floor where they start and finish
 9. there was a considerable pile of debris (large laundry press, walkie-talkie chargers, furniture) stacked in the corner of the dining area
- Copy machine and administration office was directly outside a resident's room
- There was one main day room that was cramped
- There was a hoist parked outside a room, and at the end of the corridor was a pile of mattresses
- One bathroom was being used as a store for walking frames, bed bath trolley and hoist slings
- The manager told the volunteer they would like the care home **"to be more of a home and less like a hospital"**

Activities

- There is a full time activity coordinator
- The activity coordinator was not wearing an identification badge and the timetable of the weeks' activities were not clearly presented on the board
- The activity coordinator provides a variety of activities for group participation and one to ones, as well as activities including gentle exercise
- The activity coordinator informed the volunteers that they feel they have adequate support from their managers to complete their work and that they actively enjoy their job role, however that they said they would like more funding and resources to support the activities
- One volunteer noticed a warm rapport between the coordinator and a resident
- The home is well embedded in the local community with active support from the local residents, especially in fundraising activities. Staff put on curry and quiz nights as well as car-washes to raise funds for The Laurels

- The manager left a good impression on a volunteer with their enthusiasm for providing varied and exiting activities for the residents
- Residents go out for walks on nice days to nearby local shop and Friday is fish and chips day
- The NGS gardening program was popular and makes most of limited outdoor space

Below are some direct quotes from residents:

1. **“I would like more variety of activities and more outings”**
2. **“This place is like home”**
3. **“The staff are lovely”**
4. **“It is expensive but what can you do”**
5. **“They take us out for walks”**

Some of the residents were proud to show their pottery, card making and needlework.

Staffing issues

- Staffing consists of three nurses, senior carers and care assistants, a full-time activity coordinator, kitchen, cleaners and laundry staff
- Except for nursing staff, most of the other staff are local to the area
- The manager, Joby, is a qualified nurse and has been managing this home for five years. She has previously worked in Bupa homes in the area. She is trained to deliver a manual handling course and knows the local area well
- Joby is supported by a deputy manager (also a qualified nurse). Line management is provided by a regional manager who telephones daily and visits fortnightly. The regional director is very hands-on
- Joby and her deputy manager audit the care plans and medication process, including checks for controlled drugs
- Joby is currently recruiting for two staff members and tries not to use agency staff, as the current staff are often able to take on extra cover
- There was a short discussion with one volunteer on managing ‘over-worked’ staff - Joby provides discretionary two hour paid breaks for staff who are working extra hours and who may be tired
- New staff receive a one week induction and a six months’ probation supervision
- The company provides training for staff which can include NVQs - however one care worker said they were unaware of further training
- Nearby Rosewell (another home) is sometimes used for staff training as the residential home has no training room. As well as this, staff can carry out on-line study in the office
- Joby is implementing Care Quality Commission (CQC) recommendations from the recent CQC report (January 2016). This includes attending to the main issue of compliance with the Mental Health Capacity Act. She has received additional training on Safeguarding, Mental Health Capacity Act and Deprivation of Liberty Safeguards (DoLS). Evidencing required in observing the safeguarding process and systems is being implemented

- One volunteer noted from an administrative perspective that if Joby were to leave she would be very hard to replace. They stated she is a much needed part of the place and centralised a lot of responsibility

Person centred/ residence choice

- There are visiting hours for the residents' family and friends
- One resident said that the home has become too busy, and that there are more residents and fewer staff in the couple of years she has been there. She stated that the staff are nice but too busy to have enough time for her, and their care seemed rushed
- One volunteer observed a resident in a wheelchair asking to sit outside even though it was drizzling. The staff helped the resident outside and a few minutes helped the resident back in
- The manager is trying to make the home more resident centred by involving residents as much as possible with decision making

Nutrition and hydration

- There is a chef on site and the food is cooked fresh
- Several residents said the food is ok and they have a reasonable choice of two main courses
- The dining area is neatly laid out with tablecloths, menus and flowers
- Residents waited for up to 12mins for their first course to be served
- All residents had drinks on the tables in the day room. Although the volunteers had not seen whether hydration had been checked some of the beakers were still full
- Generous food portions were served and the food was served on a hot trolley and warm plates, though sometimes the plates were too hot for the residents
- The residents seemed to eat well
- Two residents were sat next to a free-standing cupboard that could potentially be a hazard
- There was an uninspiring menu board and an allergy chart on the wall which had the day's menu broken down for all fourteen allergies

Communication

- There were comment cards for residents and visitors to give feedback and regular family meetings and surveys
- There was an activity board that had a lot of small print notices on it that could be hard for residents to read. The activity board was also very much cluttered with notices making it again hard to read
- One volunteer observed a care giver giving direct commands to a resident **“Go back! Now back, no back!”** This was the only instance that a carer was not exceptionally kind
- Near the visitors' entrance were some funeral brochures but it may be more tactful placing them somewhere not so visible to family members

- The health and safety poster for employees was not visible for all staff members due to being situated too high

Observations

- One volunteer felt they were not able to speak to staff as they seemed to **'duck out the way'**
- A big concern was no identification on staff and that the volunteers themselves were not asked to sign in
- One volunteer felt pleased with the attitude of staff and the earnest efforts to provide a positive care environment. However, the location was badly in need of refurbishment which, according to Joby, is expected June 2016
- Attention to detail seems to have slipped and there are a number of valuable recommendations we can provide to help them further their goal of resident satisfaction
- Joby, the manager, spoke with great warmth and knowledge about the residents and the home. She said that this is a **'homely home'**. She puts in extra effort into her role (e.g. fundraising for extras to benefit the residents). It was observed that she articulated her commitment to the home and the residents with a genuine feeling of enthusiasm
- One volunteer noted that they received a friendly welcome and atmosphere from their brief visit
- The caring ethos needs to be robustly underpinned with safeguarding systems
- Joby expressed an awareness of the improvements required in response to the CQC visit in January 2016
- Would recommend that additional support from management to ensure effective implementation of systems to comply with the Mental Health Capacity Act. Extra support to Joby and her team to bring safeguarding systems and processes up to standard and meet CQC requirements
- Manager needs to be mindful of staff who may become overworked as a result of taking on extra hours to cover for staff sickness

Recommendations

Immediate service improvements

- Make sure all cabinets with confidential material and medication are locked when not being used or supervised
- Check the temperature of residents' dinner plates
- Make sure all staff members are wearing identification
- Make sure all visitors sign in

Disclaimer:

- **This report relates only to a specific visit (a point in time)**
- **This report is not representative of all service users (only those who contributed within the restricted time available)**

Enter and view visit recommendations

No.	Recommendation	Comments from the service provider
1	All staff need to have identification badges and all visitors need to be signed in for safety	
2	Concerned that there are no defibrillators	
3	Higher numbers of nursing staff required to staff the home effectively	
4	Make the activity board more easily accessible for residents to read by uncluttering and using a larger font	
5	Health and safety needs to be a priority with all trip hazards removed and the free-standing cupboard moved to a more secure area	
6	Clearer signage for the main entrance	
7	All cabinets with confidential information and medications need to be locked when not in use or being supervised	
8	Try to get more outings and outside activities for the residents	
9	Redecoration to take place (scheduled for June 16)	
10	Additional support from management to ensure effective implementation of systems to comply with the Mental Health Capacity Act	
11	Extra support to Joby and her team to bring safeguarding systems and processes up to standard and meet CQC requirements	

Any other comments

It is clear that the volunteers felt welcomed to the care home and that the staff seemed friendly, with a manager who works extremely hard for the residents and home. It seems as though the residents are treated as individuals with individual needs.

As this report has been written in June there is hope that the decorations have begun on the building and it may be worth asking management for more funding for activities, though we realise this may not be an achievable aim.

(Detachable) appendices for any additional information, e.g. question lists, observation sheets, monitoring form(s)