



Enter and View Report: Best Practice

High Peak Nursing Home

Visit: 22nd November 2016

Report published: 21st December 2016

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Background

What is Healthwatch Warrington?

Healthwatch Warrington helps the residents and communities of Warrington to get the best out of local health and social care services. We gather the views of local people and make sure that they are heard and listened to by the organisations that provide, fund and monitor services.

What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View (E&V) visits. Local Healthwatch representatives, who are trained volunteers, 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 (2012) allows local Healthwatch representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, care homes, GP practices, dental surgeries, opticians and pharmacies. E&V visits can happen if people identify a problem. Equally, they can occur when services have a good reputation; enabling lessons to be learned and good practice shared.

Healthwatch Enter and View visits are not intended to specifically identify safeguarding issues. If safeguarding issues are raised during a visit Healthwatch Warrington safeguarding policies in place which identify the correct procedure to be taken.

Disclaimer

Please note that this report relates to the findings observed on the specific date of the visit. This 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.

Acknowledgements

Healthwatch Warrington would like to thank everyone at High Peak for their welcome and in particular Sharon Brennan (Manager), Tina Thompson and Janet Howarth - all of whom made time to share information with the team and answer questions.

Purpose of the visit

In November and December 2016, Healthwatch Warrington embarked upon a series of Best Practice Enter and Views visits. High Peak had been identified as a service undertaking particularly noteworthy work with residents around 'Palliative Care'. The purpose of the visit was to explore what that work looked and felt like from the perspective of a lay person. The visiting team also wanted to see if transferrable lessons could be identified to strengthen future practice in other providers.

In the last few years, poor practice in health and social care setting has often been ascribed to the presence of a 'toxic' culture and the absence of person-centred values. Therefore, part of the Best Practice approach is to pay conscious attention to the expressed and embodied culture and values of providers.

Details of the Visit

Details of the Service

High Peak Nursing Home provides nursing and palliative care for older people. Part of the Embrace Group, High Peak is an adapted three storey country house with 33 rooms for residents and a hospitality room for families/visitors, which includes a bed and tea making facilities. High Peak has been a home for 30 years. In Autumn 2015, High Peak achieved the Gold Standard Framework for Palliative Care. The Care Quality Commission's February 2016 inspection report rated the home as 'Good'.

Location

High Peak Nursing Home, Main Lane, Kenyon, Warrington, Cheshire, WA3 4AZ

Date/Time

We visited on Tuesday 22 November 2016 from 11:00am to 12:40pm

Panel Members

Jackie Le Fèvre - Healthwatch Warrington, Enter & View Visit Lead

Gwen Lightfoot - Healthwatch Warrington, Enter & View Authorised Representative

Jim Sinnott - Healthwatch Warrington, Enter & View Authorised Representative

Provider Service Staff

Sharon Brennan - Service Manager

Tina Thompson - Regional Manager

Janet Howarth - Senior Registered Nurse

Results of the Visit

Spotlight - Excellence in Palliative Care

As a society we are not always comfortable with, or willing to talk about, death and bereavement. Overwhelmingly, however, the sense of the last phase of life that we experienced at High Peak suggests that days of light and evenings of entertainment and laughter are more than possible. Staff prepare for the arrival of new residents by visiting them to explore their 'holistic needs'; which includes their psychological / emotional wellbeing needs. Only if the team feels confident that High Peak can deliver, do any conversations go to the next stage.

Care focuses on what residents 'want' (even if this is not the best for them, we were told) - after all, in this final phase, if you want chocolate even though you have high cholesterol why shouldn't you have some? This is an approach which is not just working, but working well. This person-centred care sees people routinely outliving their prognosis sometimes by weeks or months. Families have been so reassured by the experience of a family member that they will turn to High Peak as their first choice provider for other loved ones, when that time comes.

We were told "you can't not develop a personal connection" and that sense of genuine connection between one human being and another is very much alive at High Peak Nursing Home, in all of the relationships we saw.

Observations from the Visit

First Impressions

The home is based in an imposing building, with good signage and access especially for ambulances to the front door (which was signed). The home has an attractive front court yard with flower beds and nice personal border plaques. There is adequate car parking for visitors. The building has a warm, pleasant feel and scent as you enter; the entrance hall has plenty of windows so it is filled with natural light.

There are Gold Standards Framework and Beacon Status certificates on display in the entrance hall. There are visitor's books on a table for signing in and out. There is a good run of notices and clear information on a board in the corridor.

The team received a welcome from a friendly member of staff and were swiftly joined by the Service Manager, Sharon Brennon, who was also very welcoming. Sharon was comfortable being on first name terms with some visitors who arrived while the team were stood in entrance hall. Many of the subheadings that follow only contain brief details, as the team spent more of the visit enquiring into the culture of care at High Peak, as opposed to the detail of operations.

Activities / Leisure

The team saw clear evidence of interesting and varied craft sessions; such as impressive pieces of original work in corridors and on the wall of the lounge. Sharon commented that the current residents are "not really bingo people". The team also saw a 'You said We did' noticeboard in the corridor, where had residents suggestions as to the activities that they would like to try.

Food

The team spent time in a homely TV lounge, adjoining the dining room, as lunch was being served. Mealtimes are 'protected' meaning that the home is not open to general visitors at that time. This is to ensure that residents who need 1:1 support are not inconvenienced, or left whilst staff answer the door or the phone. Family or friends, however, are welcome to support residents in eating. The team also saw a gentleman who chose not to go into the dining room. He was sat in a chair close by and was served lunch (sausage and mash), which was too hot initially. After a few minutes, the care assistant returned and knelt down with him and cheerfully and very patiently cut his food up and gently coaxed him to eat, which he did slowly. Although we didn't venture into the dining room, from a distance, it looked well organised and cosy; with residents being looked after attentively. The room has large windows looking out onto landscaped grounds.

There is a choice of home cooked meals and the aroma floating through from the dining room was very appetising.

Staffing / Staff training

Staff turnover at High Peak is very low, several members of the 48 strong team have been there 15 years or more. The Deputy Manager has been in post for 18 years, Sharon, as Manager, has been in post for 6 years. Anne Marie, a Care Assistant, brought us some tea and stated that she has worked at High Peak for 10 years.

While turnover is low, there is recruitment occasionally. The Embrace Group uses application forms and interviews. From the “first hello”, Sharon seeks the chance to find out who the person is and make the candidate aware of the Gold Standards Framework (GSF) way of working and what that means in practice. The GSF is the basis for the planning of staff training. Sharon says High Peak “recognises that it is not easy to sit with someone who is dying”, so exposure for new staff to the various aspects of palliative care is managed very carefully and support is in place for all staff, especially when a resident has died.

Good staff management and open interaction is promoted and encouraged. Sharon spoke very positively about Kate Harvey, her Deputy Manager / Registered Nurse, and mentioned how fortunate she was to have such a strong and supportive team. Sharon is understandably very proud of the Beacon Award they received, which she and Kate went to London to accept at the awards ceremony last year:

<http://careindustrynews.co.uk/2015/11/care-home-awarded-beacon-status-in-gold-standards-framework/>

Our team was left unsupervised to chat to Senior Registered Nurse, Janet Howarth - a former care home manager herself - which spoke volumes about the trust that Sharon has in her team. Janet told us ‘the GSF is a fantastic way of working’ - speaking with passion about High Peak and the support.

The team also met with Tina Thompson, Sharon's manager. As Embrace Regional Manager, Tina is responsible for 8 homes - 1 in Warrington and 7 in the Liverpool area. She visits each home for a full day, each month, to undertake a thorough review of plans and records, plus staff and resident's feedback and suggestions.

Sharon appreciates this attention to detail and it is clear that Sharon has an excellent and open working relationship with Tina, but: "she can be challenging" - a comment that came across as a healthy constructive and supportive management style.

One of our team wrote: "All staff I saw, went about their work in a smiling purposeful way. Sharon commutes from Haydock and likes to arrive early and sit down and have breakfast with residents she says: 'It's amazing what you learn from this contact'", her interest is in understanding the residents as individuals in the time they're in the home - a person centred approach.

Access to Medical Care

There are registered nurses on duty in the core High Peak team, 24 hours a day, 7 days a week. Sharon also referred to the great support they receive from the Thompson Avenue surgery in Culcheth and the regular visits by Dr MacBeth.

Cleanliness

All areas the team visited were clean, tidy and free of clutter. The bathroom that the team visited was spotless and all facilities were in excellent condition - with a well-stocked soap dispenser, toilet rolls and hand towels.

Furniture and décor

The team visited a bright, airy lounge adjoining the dining room. It had two large screen televisions and an induction loop system was visible. There was a variety of comfortable chairs and footrests arranged around the room; some facing televisions, others with views of the gardens. Bowls of fruit and fresh flowers were also seen.

Privacy and Dignity

Individual care plans are reviewed and updated at least monthly, sometimes more frequently, and revisited with families every 6 months. Each resident has both a named nurse and a key worker who gather information from the resident about their family, their life, their interests and their wishes.

Staff listen actively and take note of ‘throw away’ comments, as it is their experience that it can take a number of weeks for trust to become fully established and for significant information to be imparted by the residents.

Sharon mentioned that she and her staff work hard to gain the trust and friendship of residents, such that they are sometimes told things in confidence that their own families aren’t necessarily aware of. Staff are especially careful not to divulge any of the things that they’re told in confidence by a resident, although where appropriate these insights are shared with family after the resident has passed away: Sharon told us that families can find it reassuring to know that their loved ones felt so secure with the people of High Peak, that they shared personal feelings and that those confidences were kept throughout the individual’s final days.

The Manager’s Perspective

Sharon described their person centred approach to knowing and understanding the wishes of their residents, right from the beginning, which quite often involves a home visit - talking to the future resident and their family, before they take up residence. There is an emphasis on “this is me” and life stories. Sharon personally likes to spend time with each resident individually. A good number of recommendations for High Peak come by word of mouth. One resident has been in the home 13 years.

Sharon was relaxed and very open about the culture and ethos of the home and her team, again reinforcing the changes they’ve been able to make since becoming “Embrace”; allowing them time to more effectively focus on their residents as individuals.

GSF coding reviews are held monthly, for each resident, and involve as many staff as possible from every function: residents strike up relationships with different members of the team - just because someone is not in a designated 'care' role does not mean they lack an awareness of the interests or anxieties that a resident may be reflecting upon.

Families and carers are each encouraged to complete a questionnaire 6 months after a resident's death. This important feedback ensures that Sharon and her team are positively supporting residents, and where appropriate, making any necessary small changes or fine tuning procedures to ensure best practice is maintained at all times.

Other comments

Embrace Group gives in its promotional material on High Peak a stated 'vision' which says:

“We believe in making a difference. We know that it's often the small things that make a big difference to the lives of the people that we support - as well as their families and friends. Together we look forward to discovering their stories, listening to their dreams and supporting them to ensure they have something to look forward to - each and every day. We deliver the highest quality of support that we would expect for our own loved ones.”

In September 2015, at the group managers' conference, Embrace introduced a set of core values for the whole organisation. The values are:

- Passion
- Accountability
- Care
- Tenacity

The team asked Sharon and Tina very generally about the values and they said that these values basically bring together everything that Embrace is about and that they act as an extension of the existing mission. Unprompted, they both started to talk about ‘Tenacity’ as the hardest one to explain to other people - but were able to describe what it meant to them in their work.

From recruitment material on the Embrace website it is clear that the group is working to align vacancies with the values describing both behaviours and indicators for each job role for example:

A Clinical Psychology Assistant would live the value of Tenacity by:

Relentlessly pursuing ways to improve and develop services

And we would know that was being done because we would see someone

Take responsibility for your development and ensure your knowledge is up to date so that you can make valid and innovative suggestions in the face of challenges.”

Under Embrace there has been a shift in culture to one of listening and then supporting staff; for example, the High Peak team was asked what it needed and staff said a more flexible kitchen and better laundry facilities and now those things are in place. There is solid and meaningful engagement with staff who are encouraged to contribute their ideas both formally through regular meetings and informally through conversation - that’s about shared passion and accountability.

This is not a micro-management environment. Sharon clearly understands how vital it is for residents and their families to be able to trust the staff team and it would appear from Healthwatch Warrington’s visit that she and Kate, her deputy, share and promote that sense of trust.

Recommendations

- 1.** *Consider making the PACT values more visible on the website as they do help to differentiate Embrace/High Peak from other providers.*
- 2.** *Continue to champion the Gold Standards Framework within Embrace and within local networks of care home managers, as it is clearly core to the excellent palliative care at High Peak.*

Distribution List

This report has been distributed to the following:

- *Warrington Council*
- *Warrington CCG*
- *Care Quality Commission*
- *Healthwatch England*

Appendices

Appendix A

Response from provider

Many thanks for the draft copy of the visit, it makes me "Beam with Pride".

Many Thanks

Sharon Brennan (Manager)

