

## **Little Gaynes Care Home: Follow-up visit**

We re-visited Little Gaynes on 21 February 2017 to discuss the recommendations made following our Enter and View Visit in April 2016.

Our team met the manager, the Care Home's assistant director and the senior administrator. At the time of this visit, there were 19 residents in the Care Home.

As a result of the visit, the team have made the following observations:

### **Staffing update**

Since the 2016 visit, there had been a considerable turnover of staff, especially over the last 6 months. There were now 26 staff (excluding management), with 4 staff members on duty at the time. Each resident has a key worker. The shift patterns were: 7am to 1.30pm; 1.30pm to 8pm; and 8pm to 7am. The team were reassured that these shifts enabled staff to have enough rest between shifts and that staff were not allowed to pick up a shift unless they had had a 12 hour break from work.

### **Dishwasher**

The team were told that there were no plans to install a dishwasher as there was no space available for one. The CQC were happy with current practice (kitchen staff hand wash dishes).

### **Name badges and information board displays**

The team were told that the home was in the process of issuing name badges for all staff and are planning to put staff photos and names on the notice board.

The home was also aiming to update the information on the notice board and to add relevant current certificates and examples of good practice to the display. Healthwatch welcomes this as a way of promoting good relationships between staff and residents and their visitors, and passing information to them.

### **Medicines and covert medication**

No resident was currently on covert medication and the local Pharmacy and GP had helped draft a procedure to be followed as and when is needed.

### **Sanitisers**

It was pleasing to note that more sanitisers were available, to comply with infection control recommendations

### **Staff training**

An experience trainer oversaw staff training and the team were told that all mandatory training was up to date. An outside trainer had been invited to do other social care training.

The manager is an NVQ assessor, but expressed concern about future funding for courses, as she understood that NVQs were funded through the EU.

### **End of Life Care**

The team were pleased to note that the gold standard framework for end of life care was applied as necessary

### **Activity coordinator**

The coordinator showed the team some of the work she had been doing with the residents. She organised fundraising events, the money raised going towards entertainment for residents.

### **General discussions**

The team were shown how the home was planning to manage records electronically. All staff would be trained to input information.

It was said that this is a challenging task but they hoped it will improve record keeping and accountability.

### **Recommendations**

Management to monitor shift patterns to ensure staff are having the necessary rest between shifts.

All staff to be provided with name badges and full use to be made of notice boards, to promote good relationships and to provide information to residents and visitors.

Sources of funding for training courses to be clarified.