



ENTER AND VIEW

Hawksyard Priory Nursing Home

Part of the Healthwatch Staffordshire remit is to carry out Enter and View Visits. Healthwatch Staffordshire Authorised Representatives will carry out these visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows 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 Staffordshire Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Staffordshire safeguarding policy, the service manager will be informed and the visit will end. The Local Authority Safeguarding Team will also be informed.

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Provider Details

Name: Hawksyard Priory Nursing Home
Address: Armitage Lane, Armitage, Rugeley, Staffordshire. WS15 1PT
Service Type: Residential Nursing Home
Date of Visit: 20th March 2017

Authorised Representatives

Name: Christine Ralston
Role: Author
Name: Val Emery
Role: Observer

Purpose of Visit

The CQC report of 6th July 2016 stated two areas that required improvement, so this visit is to confirm that these areas have been addressed and also to observe a home that has a good caring reputation, is responsive to needs and well managed.

The methodology to be used is to;

- Talk to residents about all aspects of their care and whether this is delivered in a way that promotes their dignity and independence including the ability to make choices about their daily lives.
- Talk to residents about staffing levels and whether they feel safe with the level of the care provided
- Talk to relatives, if they are available to ask if they are happy with the care provided to their relatives and whether they are aware and feel able to report any concerns/ complaints
- Speak to staff about training, turnover, support staffing levels
- Observe interaction at all levels between residents, staff manager, and visitors

Physical Environment

External - The home looks very impressive and is part of the old priory adjoining a beautiful old chapel. It is set in well-tended grounds, and on the day of our visit, on a sunny day, the blooming spring flowers and daffodils looked lovely, the appearance of the gardens indicating being very well maintained. The chapel is used for regular services for different denominations. The home is well signposted and easily accessible with a bell and a keypad.

Internal - We were greeted in a large reception area and were invited to sign in. The home is spread over three floors. The ground floor is residential, the first floor more for nursing care and the second floor was mainly for residents with greater care needs including severe dementia.

The interior is tastefully decorated with very well proportioned rooms, mostly single, though a few are double. Corridors, rooms and bathrooms were spotlessly clean with no odours.

Residents are encouraged to bring furniture and personal possessions.

There are large dining rooms and also a small quiet lounges where the residents can choose to go, without TV or other noise, to relax and observe the beautiful gardens outside.

Resident Numbers

The home caters for 102 residents, 34 on the ground floor, 36 on the first floor and 32 on the second floor. There is a married couple in residence.

Staff Numbers

There are 3 nurses on day and evening and 2 at night.

There are 20 carers on day and evening and 10 at night.

There are 3 occupational therapists, 1 on each floor.

There are 8 - 9 domestic staff.

There are 2 maintenance staff.

There are 3 administrators.

There are 2 management staff.

There are 2 chefs.

There are weekly GP visits and other outside agencies regularly attend.

Agency Usage

The home tries to keep usage to a minimum, but does sometimes have to use them. When needed they use the same agency to ensure continuity.

Resident Experiences and Observations

The residents we spoke to were full of praise for their care and the attitudes of the staff, who they seemed to feel were personal friends, who consulted them on their wishes, for example on trips out, shopping trips and personal issues. The residents felt well supported and had their choices respected. One married couple there said it was just like being at home without having to do the work and cooking and that they loved it there.

Residents were well dressed and well-groomed and had assistance with personal care as required.

Residents advised us that the food was good and that they appreciated the care that the domestic staff took with the cleaning.

We were told that care plans were available to the residents and family.

All the residents were very happy with the GP and the regular visits.

Activities

The home has its own transport and uses wheelchair taxis to take residents out. Three occupational therapists, one on each floor, coordinate activities and celebrations throughout the home and work as a team.

Family and Carer Experiences and Observations

Only one family member was spoken to, who was very complimentary about the home and the care their relative was receiving and told us how happy their relative was at the home.

Catering Services

There is a large dining room on each floor and a large kitchen on the ground floor. Residents have a choice of menu and special dietary needs are catered for. Drinks are available at all times and residents can choose to eat in their rooms, but are encouraged to go to the dining room if possible. Assistance is given to people if required at mealtimes.

Staff Experiences and Observations

There was a very positive response from staff regarding working conditions and support from management. They also said they felt comfortable with discussing any areas of complaint or concerns with management.

An excellent staff training programme was on offer and they were encouraged to expand their skills. We were able to see the training room and the training matrix. The owner/manager was a certified trainer and did training for other organisations.

The staff we spoke to told us that they felt there was always enough staff to cover the care of the residents.

Summary, Comments and Further Observations

Complaints - There is a well-advertised complaints procedure for residents and relatives and also regular family meeting for any issue to be raised.

Medication - Medication issues raised in the CQC report have been addressed and put into place.

Deprivation of Liberties - The owner told us there appeared to be a complete dichotomy with the overlap of safeguarding and deprivation of liberties, which can be an issue.

We were advised that resident's nutrition and hydration are monitored on personal charts.

We were made very welcome at the home although it began with a little confusion as it was the manager's day off. However, the owner who lived locally and still helps with management, came in to meet us and answered any questions we wanted to ask. We were given free range to go wherever we wished. We observed a very calm feel to the home and we were impressed with the whole ethos and feel of the home. The care of the residents and their comfort appeared to be the number one priority and this seemed to have been achieved.

Recommendations and Follow-Up Action

We did not feel there needed to be recommendations for a further visit as we observed nothing of concern and found this to be a very well managed and well run home.

Provider Feedback

The owner provided feedback following receipt of our draft report and advised as below:-

The representatives who undertook the visit were very pleasant and unassuming. Staff and service users were happy to talk to them and enjoyed their chat. We would welcome their input at any time.

DISCLAIMER

Please note that this report only relates to findings we observe on the specific date of our visit. Our report is not a representative portrayal of the experiences of all residents and staff, only an account of what was observed and contributed at the time.