



# Revisit Enter and View report Gracefields Care Home 21 March 2017

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# 1 Introduction

## 1.1 Details of visit

Details of visit:	
Service Address	Gracefields Care Home North Street Bristol BS16 5SE
Service Provider	Cedar Care Homes Ltd
Date and Time	Tuesday 21 March 2017
Authorised Representatives	Kay Hobday Andrew Riches Janet Spence
Contact details	01454 543 402 info@healthwatchsouthglos.co.uk www.healthwatchsouthglos.co.uk

## 1.2 Acknowledgements

Healthwatch South Gloucestershire would like to thank Gracefields Care Home management and the members of staff who were willing and able to host our revisit and answer our queries.

## 1.3 Purpose of the visit

Healthwatch South Gloucestershire undertook an enter and view revisit to Gracefields Care Home in March 2017, with the purpose of finding out if any changes have been made in light of the recommended findings from an enter and view visit in January 2015. This approach is one measure being tested to evaluate and assess the impact of enter and view visits.

A selection of care homes in South Gloucestershire previously visited are being revisited.

## 1.4 How this links with Healthwatch South Gloucestershire strategy

A key priority laid out in the Healthwatch South Gloucestershire work plans for 2015/16 and 2016/17 was to engage with older people and people with dementia, and to enter and view care homes across the county. Enter and view provides an ideal tool to hear the views of residents in care homes.

Full details of the work plan for Healthwatch South Gloucestershire are available on the website: [www.healthwatchsouthglos.co.uk](http://www.healthwatchsouthglos.co.uk)

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# 2 Methodology

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## 2.1 Planning

A monthly planning meeting is held by authorised enter and view representatives. These are used to agree which observations to focus on and prompt questions to use during enter and view visits. Observation templates and prompt questions have been continually amended and revised as authorised representative's learning and knowledge has developed.

The focus for this enter and view revisit was to try and assess the impact of the first enter and view visit and an observation template and questionnaire was developed with a focus on the changes suggested in the January 2015 recommendations for action by the care home.

## 2.2 How were changes noted?

On 21 March 2017 three authorised enter and view representatives visited Gracefields Care Home. Information was gathered from the representative's observations and their notes from a discussion with the Cedar Care Homes area manager, Kathleen Ortiz, and the home's administrator. The registered manager, Vina Baadkar, had unfortunately been called away to head office for an important meeting. The discussion focused on the recommendations for action made in the January 2015 enter and view report. We toured the whole building, being shown all areas including the kitchen, bathrooms, sluice rooms, lounges and offices, as well as resident's bedrooms where appropriate.



## 2.3 How were findings recorded

Notes were made by all authorised representatives during the revisit and one of the enter and view representatives then compiled the report based on the records from the conversations and observations, and shared the report in draft form for all representatives to discuss and agree.

## 2.4 About the service

Gracefields Care Home is registered for 50 residents - 27 general nursing and 23 dementia residents. There were 7 vacancies at the time of the visit. It is situated in a purpose built building in Downend, by the main road with shops and other amenities. It was last inspected by the Care Quality Commission (CQC) in March 2015 and received an overall grading of good.

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# 3 Findings

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## Executive summary

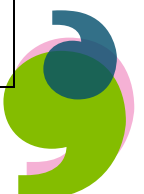
In January 2015 Healthwatch South Gloucestershire enter and view representatives highlighted a few issues that needed to be addressed and made some recommendations. These are set in the table below as follows:

January 2015 recommendations/issues	March 2017 findings
Complaint by resident of insufficient hot water for morning shower.	This issue is due to the inadequacy at times of the bio-mass boiler that had been installed for ecological reasons. This has been addressed by installing an additional boiler as back-up for high-use times of day.  However, a tap in one of the bathrooms still seemed slow to deliver hot water until it had been running for a while. This was noted by the care home and they said it would be attended to.
The meals were not always hot when served to the residents.	The chef was very impressive with her knowledge and enthusiasm. Two menus are on offer every day with other items being

	<p>available on request. All special dietary needs are catered for with a very thorough approach to keeping foods separate and avoiding allergy contamination.</p> <p>When questioned about making sure food is hot enough to deliver around the large premises, the chef assured us that food temperatures are taken with a thermometer and nothing leaves the kitchen if it is not at the correct temperature. The meals are put in a large heated trolley for delivery around the Home. The dining room areas were bright and attractive, with table cloths and napkins. Residents could choose to eat in their rooms if they wished.</p>
<p>No regular, minuted residents and relatives meetings.</p>	<p>Meetings with relatives are held every couple of months. Meetings with residents had been tried, but had not been well attended or seen as useful by the residents who felt free to talk to staff at any time and did not need a formal meeting.</p>
<p>Links with local community were suggested, especially intergenerational links.</p>	<p>We were told that that the home has a partnership with the Bristol Plant Project, sponsored by Bristol Zoo. The project involves groups and schools around the city growing different varieties and species of the endangered plant, Calendula. With the objective of establishing a dispersed collection of plants to achieve 'National Plant Collection' status. Bristol Zoo is using Gracefields gardens to grow plants collected by the botanists and they come and talk about the plant collection project and reciprocate with free entry to the Zoo for residents.</p> <p>There are strong links with the local Downend Baptist Church, who provide a service twice monthly.</p> <p>No specific intergenerational links have been made, except at Christmas when for example</p>



	<p>various local groups, e.g. Brownies and school choirs, come into the home to sing carols.</p>
<p>Some residents were unaware of the daily activities provided.</p> <p>There was a lack of appropriate and stimulating activities.</p>	<p>There are now 2 full-time activities coordinators, one of whom we met and talked to. They provide one to one stimulation where the resident is unable or unwilling to join in with group activities, e.g. talking about a photo or newspaper cutting from a 'Memory Box'</p> <p>There is a well-advertised programme of activities that take place in the afternoons, with printed programmes and well-placed notice boards.</p> <p>Examples of activities available included; music wellbeing, skittles, arts and crafts, 'Alive' activities, Bingo, Hoy! (this is like Bingo but with shapes), crosswords, knitting, musical entertainment, singing, church services, visits to the pub and coffee shops.</p> <p>The dementia ward had a large picture board with many photos of residents partaking in activities. Music was playing in the background.</p> <p>A hairdresser visits weekly and regular manicures are given.</p>
<p>Are there sufficient members of staff available to deliver appropriate, relevant care in a timely manner?</p>	<p>We were told that the home is currently fully staffed and that recruitment for replacements as necessary is carried out very promptly by head office. The home does not use agency staff except as a last resort. Training is carried out on site and during staffs working hours. Staff are encouraged to take training courses free of charge, including NVQs, and time is protected for this. Similarly, managers are able to do an ILM (Institute of Leadership and Management) qualification.</p> <p>There have been several management changes in recent years and the current manager has only been in post for a month. This turnover was discussed with the area manager who felt</p>



	<p>that some had taken the job on without being fully aware of the level of demand and challenge the role posed. The area manager was able to step in during vacant periods as necessary. Both she and the administrator who showed us around had been with the company for more than three years and had worked their way up through the ranks. Recruitment and promotion was offered within the organisation whenever possible.</p>
<p>Several members of staff did not have English as a first language and some residents had difficulty in understanding them.</p>	<p>The staff are from a wide range of nationalities. We were told by the Area manager that anyone applying for a job must show a good level of spoken English and will be asked to go on language courses if they are not up to standard before being taken on. All applicants will be monitored for their language skills, and we were told that residents enjoy helping out with this, correcting mistakes and getting new staff to practice with them.</p> <p>We had no difficulty understanding any of the staff we spoke to.</p>

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## 4 Conclusion

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Gracefields is an impressive and attractive home with excellent facilities. Most of the issues that Healthwatch raised before have been addressed and there was little to find fault with. Better intergenerational links with local schools or community groups would be the one area where they could do more.

The décor is impressive throughout with many thoughtful touches, such as good, clear and colourful signage, interesting posters and wall art with both masculine and feminine imagery. Gracefields is a modern, purpose built nursing home with well landscaped gardens and spacious communal rooms which use bright contrasting colours. Resident's rooms are also large, all have en-suite bathrooms and doors have a nicely framed photo and name of the resident. Lower ground floor rooms have access to a secluded garden/patio area. Corridors are wide and kept clear of clutter. Everywhere smelt fresh and looked clean and bright.





## Disclaimer

- This report relates only to a specific visit on 21 March 2017 and only represents our own observations and the verbal reports of the staff to whom we spoke.