

Update on Green Trees Care Home May 2017

Healthwatch Enfield wrote to the management of Green Trees Care Home on 3 March 2017, requesting an update on progress in regard to the recommendations which we made in the report we published after our Enter & View visit in August 2014.

The reply we received from Green Trees is attached below, along with a response from Healthwatch Enfield.

Green Trees

Care Home

21 Crescent East

Hadley Wood

Barnet

Herts EN4 0EY

Telephone: 020 8449 6381

Facsimile: 020 8449 2008



Lucy Whitman
Healthwatch Enfield
Community House
311 Fore Street
Edmonton
N9 0PZ

17/03/2017

Dear Madam,

In response to your letter of 3rd inst, please find detailed below our response to your recommendations as requested.

Personal histories, life story work and reminiscence

All of our residents now have life histories recorded on their files held on our resident computer system, to which our care team have access. Some of our residents also have "My Life" books that have been prepared by their families.

This information is now obtained and recorded on all new admissions, normally within the first week of their admittance.

Activities

All of our residents have been asked their likes and dislikes where activities are concerned, using a format supplied to us by Enfield Social Services, which we were advised were used by them in their own homes. This information is again recorded on their files on our resident computer system. Again, this is used for all new admissions and normally obtained and recorded within the first week of admission. It is from this information that we try to organise suitable activities.

We are currently considering trying to improve the individual activities that really can only be done on a one to one basis, or with a very limited number of residents. Discussions will be taking place with relatives to see if they wish to pay for these, as all of our group activities are included in our fees, as all of our residents, both "the have and the have nots" are treated equally.

Access to physical exercise

All of our residents who are able and safe to do so can move around the home freely. Those that need assistance are given it. We have a qualified physiotherapist who comes every other week for an hour who carries out exercise sessions. In our opinion, with the client group we cater for a qualified person to do this is essential.

Opportunities for going out

Whilst we understand and accept your comments, consideration must be given to resident's choice, together with their physical and mental abilities. Those who wish to go out, and are able to do so are normally taken by their families, and if wheelchairs are required, we provide them.

We did contact Enfield Volunteer Centre as suggested, but unfortunately got absolutely no response.

Again we intend discussing this area with relatives to see if they wish to pay for any organised outings.

Other meaningful occupation

Currently we only have 4 residents who have both the physical and mental ability to take part in activities of daily living, and all 4 do so by making their beds, assisting with the laying and clearing of tables etc.

We did as per your suggestion contact Enfield Libraries, who advised us that the mobile library did not cover our part of Enfield, and although they promised to contact us again regarding books by post, they also failed to do so.

We did ourselves put up a number of book shelves, complete with books in our lounge, but over the last 2 years have not had one resident interested in reading books. They are happy with daily newspapers and magazines.

Access to spiritual services

We do not understand this as our local vicar has been visiting the home regularly, normally every month or so, as has the Catholic lay preacher. This has been happening for the last 25 years. Our local vicar is always on call for residents at their time of need, almost daily if required.

Advance Care Planning for End of Life

We are primarily a dementia unit, and the vast majority of our residents have been professionally assessed as "lacking capacity", mostly prior to admission. Part of our pre admission assessment includes this subject, but we have found from experience that the vast number of people are loathe to discuss this issue.

However, the home manager works very closely with the Enfield CHAT team and between them and the resident, if capable or residents families, end of life care plans, DNAR's etc are put in place as and when it is felt necessary.

Staff Names

All of our staff wear uniforms with their name and position embroidered on them by our suppliers. A display board is not considered appropriate in our resident's home.

Volunteers

As mentioned earlier we contacted Enfield Volunteer Centre as you suggested, but got absolutely no response.

End of life care

We did try the Gold Standard Framework but found it unwieldy, with far too much emphasis on paperwork.

We do however work extremely closely with both the CHAT team, our GP's and the palliative care team on end of life care.

All of our long term members of the care team have received end of life care training from North London Hospice, the newer members have done an on line course and will be enrolled on the next available course with North London Hospice.

Safe movement within the home

There is no point in replacing the stair lifts as we have an 8 person shaft lift. To remove them would entail major building works, on a fire escape route and would cause major inconvenience to our residents for no benefit other than possibly aesthetic.

The installation of stair gates on an escape route we are sure would give us major issues with the London Fire Brigade as well as inhibiting free movement of both staff and residents around the home.

Off the two bedrooms commented on any resident using either room is fully assessed for mobility and risk of falls prior to being offered either room. Both rooms are registered by the CQC.

Access to the garden

Your recommendations were acted upon, the paths made safe and some fences, hand rails and a gate put up to ensure residents safety

Arrangements for handover between shifts and covering staff leave.

All of our resident's daily records are now computerised so handover has now been simplified. More importantly any issues raised on any shift are now notified to all care staff, irrespective of whether or not they are on the next shift, by an internal email system.

Staff training

We accept your comments, but all of our training is "accredited", be it on line or by outside trainers. We feel that our mix of training is right for our environment, and as we have been inspected by both the CQC and Enfield Social Services with no questions raised, we have continued as before.

It should be borne in mind that our manager is a qualified teacher, especially in dementia.

Staff support and supervision

Individual supervision is carried out formally every 4 months for all staff.

If you have any further questions or queries, please do not hesitate to contact us.

Kind regards

For and on behalf of the partners

A handwritten signature in blue ink, appearing to read 'B Haydon', with a long horizontal stroke extending to the right.

Brian Haydon

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11 May 2017

Mr Brian Haydon and partners
Green Trees Care Home
21 Crescent East
Hadley Wood
EN4 0EY

Dear Mr Haydon and colleagues

Thank you very much for your prompt and detailed reply to our request for an update on the situation at Green Trees Care Home, since our visit in 2014.

We are delighted to note that the Green Trees management has taken on board many of the suggestions we made in our report, including:

- Recording residents' personal histories to inform care-planning, and encouraging them to create life story books with help from their families
- Making a range of books available to the residents
- Requiring all staff to undertake training in end of life care, provided by North London Hospice
- Improving safe access to the garden
- Improving arrangements for handover between shifts and notifying all staff by email of any concerns about individual residents' health and wellbeing. This is an excellent initiative.

We note also that:

- You are discussing with residents and their families what activities and outings they would like to take part in, including one to one activities, and are considering how these might be paid for.

- Those residents who are able to do so, are encouraged to take part in the activities of daily living.
- There are regular visits from the local vicar and Catholic lay preacher.
- You work closely with the CHAT team, GPs and Palliative Care team, and try to make sure that advance care planning for End of Life is put in place where possible.
- It is not practicable to remove or replace the stair lift.
- All care records are now kept on a computerised system.

With regard to your response to the other recommendations which were made in our original report:

- **Activities:** we appreciate that you are giving thought to developing this area. Support, training and resources are available from the National Activity Providers Association (NAPA): <http://www.napa-activities.com/> See also this article: <http://www.carehome.co.uk/news/article.cfm/id/1560721/benefit-of-having-meaningful-activities-in-care-homes-is-huge-says-director-of-napa>
- **Access to physical exercise:** we commend the decision to employ a professional physiotherapist to lead organised exercise sessions, although it is a shame that these sessions are only once a fortnight. We would encourage more informal exercise - moving from room to room in the home, going outside into the garden, short walks along the road outside the care home - all with assistance as necessary, and due consideration for individual abilities.
- **Staff training:** we recognise that the manager is a qualified teacher. We hope that you continue to make sure that training for staff in all roles and at all levels of responsibility is always kept up to date, so as to benefit from the exchange of fresh ideas and good practice with other professionals.
- **Staff supervision:** we suggest that monthly supervision for all staff would be more effective than supervision every four months.

We are sorry to hear that you did not receive any useful help or advice from Enfield Volunteer Centre or from the Library Service. Since our original report was written, we have discovered that the Volunteer Centre is not allowed to assist with recruitment for privately owned care homes; they can only help to recruit volunteers for not-for-profit providers. It is disappointing to learn that the mobile library service is not able to visit residents in your part of the borough.

Finally, we note that the Care Quality Commission (CQC) carried out an inspection of the home in March 2017 and have now published a report of their findings,

which rates the service as 'requires improvement'. (The report is available here: <http://www.cqc.org.uk/location/1-120114628>.) We note that the CQC report appears to echo some of the issues raised in Healthwatch Enfield's Enter and View report. We understand that you will now be working to address the matters raised in the CQC report, and we recognise that the CQC will monitor progress in response to the actions identified.

Thank you once again for your response to our enquiry, and we welcome the steps you are taking to address the recommendations made in our report.

Healthwatch Enfield will publish this correspondence as an update to our original report.

Yours sincerely

(Signed) Lucy Whitman
Enter & View Programme Manager, Healthwatch Enfield