



Evaluating Care Homes

Enter and View REPORT

Beenstock Home

Care Home Contact Details:

Beenstock Home
19-21 Northumberland Street
Salford
M7 4RP

Date of Visit:

1st November 2017

Healthwatch Salford Authorised Representatives:

Ruth Malkin
Faith Mann
Susan Fisher



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1.1 Introduction

Healthwatch Salford is the independent consumer champion for children, young people and adults who use health and social care services in the borough of Salford.

Healthwatch Salford:

- Provides people with information, advice and support about local health and social care services
- Listens to the views and experiences of local people about the way health and social care services are commissioned and delivered
- Uses views and experiences to improve the way services are designed and delivered
- Influences how services are set up and commissioned by having a seat on the local Health and Wellbeing Board
- Passes information and recommendations to Healthwatch England and the Care Quality Commission

Healthwatch Salford have statutory powers that enable local people to influence Health and Social Care services under the Health and Social Care Act 2012. One of these statutory powers is to undertake Enter and View visits of publicly funded adult Health or Social Care premises.

The Health and Social Care Act allows local Healthwatch 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 are undertaken when Healthwatch Salford wants to address an issue of specific interest or concern. These visits give our trained Authorised Enter and View Representatives the opportunity to find out about the quality of services, obtain the views of the people using those services and make recommendations where there are areas for improvement.

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 Salford also produces reports about services visited and makes recommendations for action where there are areas for improvement.

Information gathered and reported on is referenced against information from health and social care providers, commissioners as well as national and local research sources.

Healthwatch Salford Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch Salford safeguarding policies.

Further information about Enter and View is available at <https://healthwatchsalford.co.uk/what-we-do/enter-and-view/>.

The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013 is also available to view at http://www.legislation.gov.uk/uksi/2013/351/pdfs/uksi_20130351_en.pdf.



1.2 Acknowledgements

Healthwatch Salford would like to thank the Beenstock Home staff team, residents and relatives for their contribution to the Enter and View visit.

1.3 Disclaimer

Please note that this report relates to findings observed on the specific date set out above. 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.



Enter and View report for: Beenstock Home

2.1 Visit Details

Service Provider:	Beenstock Home
Service Address:	19-21 Northumberland Street, Salford, M7 4RP
Visit Date and Time:	1 st November 2017, 10am-13pm
Authorised Representatives:	Ruth Malkin, Faith Mann and Susan Fisher
Healthwatch Salford Contact Details:	The Old Town Hall, 5 Irwell Place, Eccles M30 0FN Email: feedback@healthwatchesalford.co.uk Telephone Number: 0330 355 0300 Website: www.healthwatchesalford.co.uk

2.2 The Care Home

Group: Agudas Israel Housing Association Ltd

Person in charge: Samantha Neumann (Manager)

Local Authority / Social Services: Salford City Council

Type of Service: Care Home only (Residential Care) – Voluntary / Not for Profit Owned, Registered for a maximum of 26 Service Users

Registered Care Categories*: Old Age • Physical Disability

Admission Information: Orthodox Jewish Residents Only

Languages Spoken by Staff (other than English): German, Hebrew (modern)

Single Rooms: 26

Rooms with ensuite WC: 26

Weekly Charges Guide: Personal Care Single from £485 (These prices are only a guideline, please contact Beenstock Home to find out the exact price for your requirements.)

Facilities & Services: Respite Care • Physiotherapy • Sheltered Housing • Own GP if required • Own Furniture if required • Smoking not permitted • Close to Local shops • Near Public Transport • Minibus or other transport • Lift • Wheelchair access • Gardens for residents • Phone Point in own room/Mobile • Television point in own room

See Care Quality Commission* (CQC) website to see their latest report on this home.

* Care Quality Commission is responsible for the registration and inspection of social care services in England.



2.3 Purpose and Strategic Drivers

Purpose

- To engage with residents of care homes and understand how dignity is being respected in a care home environment.
- Identify examples of good working practice.
- Observe residents and relatives engaging with the staff and their surroundings and to experience the care home using the 3 primary senses of sight, sound and smell.
- Capture the experience of residents and relatives and any ideas they may have for change.
- We asked questions around 8 'care home quality indicators,' produced by Independent Age in partnership with Healthwatch Camden. (2016)

Surveys and questions are based on '8 care home quality indicators'.

A good care home should;

1. Have strong, visible management
2. Have staff with the time and skills to do their jobs
3. Have good knowledge of each individual resident and how their needs may be changing
4. Offer a varied programme of activities
5. Offer quality, choice and flexibility around food and mealtimes
6. Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists
7. Accommodate residents' personal, cultural and lifestyle needs
8. Be an open environment where feedback is actively sought and used

Strategic Drivers

Update from CQC dataset 10 May 2017 states that there are 39 Salford Based Care Homes CQC Inspected between December 2014 and May 2017.

Each of the 39 Care Homes were rated based on a 4-scale rating;

- Outstanding
- Good
- Requires Improvement
- Inadequate

The breakdown of Care Homes and their ratings:

- 21 – were rated Good
- 17 – were rated Requires Improvement
- 1 – was rated Inadequate
- 0 – were outstanding

Salford has more homes that require improvement across all the judgement criteria compared to the rest of Greater Manchester. Based on CQC Ratings and comments received locally Healthwatch Salford have made Enter and View of local care homes a priority to contribute to the local strategic improvement plans for care homes in Salford.



3. Methodology

This was an announced Enter and View visit. On first arriving for the visit, we approached a member of management before we spoke to anyone in the care home and took their advice on whether any residents should not be approached due to their inability to give informed consent, or due to safety or medical reasons.

Authorised representatives conducted interviews with the deputy manager, three members of staff, plus a volunteer at the care home. Topics such as quality of care, safety, dignity, respecting and acknowledging the resident's and families' wishes and staff training were explored. Authorised representatives also approached two residents at the care home to ask them about their experiences of the home and, where appropriate, other topics such as accessing health care services. No visitors or family members were available for comment at the time of the visit. Two family members were also spoken to.

A proportion of the visit was also observational, involving the authorised representatives walking around the public/communal areas and observing the surroundings to gain an understanding of how the home works and how the residents engaged with staff members and the facilities. There was an observation checklist prepared for this purpose.



4. Summary of key findings

Beenstock Home is a well-managed care setting that was set up to meet the needs of the older Orthodox Jewish community. Improvements have been implemented swiftly following on from a Care Quality Commission inspection in 2016 and the home has recently been re-inspected to be rated as 'Good'.

Of particular note were the wide variety of activities available to the residents and the homely appeal. The staff seem well supported by the management to work together to make sure that the cultural and practical needs of the residents are met, and positive feedback was received from residents, visitors and staff.



5. Results of visit

Beenstock Home is registered to provide nursing and personal care for up to 26 people. The home is integrated into a sheltered housing complex that comprises three floors, with sheltered flats on the ground and second floors and the nursing and residential units on the first floor. All bedrooms are single occupancy with en-suite facilities. The home offers a culturally specific service for the Orthodox Jewish community. There was a registered manager in place.

In 2016 the home was inspected by the CQC and judged to 'require improvements' in some categories. By 2017, the home had improved enough to be judged to be 'good' in all areas.

It was decided that it was important for Healthwatch Salford to visit this home for two key reasons:

1. How had they implemented the required changes in a short period?
2. To visit an example of a faith based home (it is run exclusively for members of the Orthodox Jewish community.) It was interesting for Healthwatch Salford to consider the positive role that faith can play in the provision of care.

The Healthwatch Salford Enter and View representatives spoke to the deputy manager, two residents, three staff members, a volunteer and two relatives.

Resident Feedback

- **Environment:**

The atmosphere in the home is friendly and relaxed. The staff are caring. Artwork on the wall was appreciated by one resident.

- **Activities:**

Residents are encouraged to take part in a variety of activities as appropriate. Activities include baking, exercises, music and regular trips out. It's a very social atmosphere, and although men are in the minority they are made welcome, and included in all activities.

- **Food:**

The food is good and there is a good choice. Examples include vegetable soup, apple pie with raisins and a buffet style supper. It is tailored to individual tastes and the staff make changes if asked. There is plenty to eat and drink. Residents are allowed to make breakfast for themselves if they want.

- **Religion and culture:**

There is a great deal of respect for religion and culture in the home. A resident said that all their religious needs were met and pointed out there was a Friday night service for everyone and a service on Saturdays.

- **External medical care:**

A dentist and an optician visit the home.

- **Dignity in Care:**

Staff are well trained and caring, and achieve their aim of making a homely environment.

- **Having a say:**

The relaxed nature of the home has meant that residents feel well able to make suggestions and they know how to make complaints.



- **Management:** The manager is well known to residents

Relative feedback

- **Environment:**

The home is well staffed with visible, caring management and well trained, caring staff.

- **Activities:**

Some residents are not capable of joining in with any activity. However, there is a variety of activities that those people who can join in can partake of. Staff make it very easy to join in the activities.

- **Food:**

Residents don't have to stick to prescribed meal times. The quality and choice of food is excellent, and residents are supported to manage their food and drink intake appropriately.

- **Religion and culture:**

Religious and culture needs of the residents are met.

- **External medical care:**

The optician calls regularly, and staff help with dental care.

- **Dignity in Care:**

The home is well run and respectful.

- **Having a say:**

One relative commented "they listen to whatever I have to say," going on to express confidence in being able to make a complaint.

- **Management:**

The management are visible and responsive to feedback.

Staff

- **Resident and relative:**

Staff are satisfied that residents and relatives are happy and appropriate levels of personal information about the individual residents are provided to enable staff to get to know residents well enough to offer appropriate levels of care.

- **Care Plans:**

The residents are assessed at home and a care plan developed before they enter the home where possible. This is updated as staff get to know them and as their needs change. Everything is documented and there is a monthly review as well as regular updates in between.

- **Nutrition:**

There is a varied menu and residents can choose, including food that does not appear on the menu. People sit together at meal times and there are staff around to assist. There is a three-course meal at lunch and a light supper.



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- **Activities:**

Staff at the home work hard to provide a varied range of activities for residents, who are actively encouraged to participate and assisted to complete the activities. Examples include one to one activities, singing, baking, gardening and taking residents out where possible.

- **External medical care:**

An optician visits the home around three times a year and dental care is maintained by staff. Residents are supported to keep their external medical appointments.

- **Religion and culture:**

The home is set up to meet the religious and cultural needs of the Orthodox Jewish community. A Rabbi comes in regularly and Kosher food is served. Religious festivals are celebrated, and dress codes adhered to. All residents are encouraged to take part where possible.

- **Training and personal development:**

Staff are encouraged to progress with incentives. There is mandatory training provided online. Individuals can pursue their own career development plan. One staff member gave the example of completing an NVQ level 3 in Team Leading.

- **Working environment:**

There is a nice atmosphere at the home and it is enjoyable to know the residents are happy.

- **Management:**

The manager is, “really friendly and approachable”. There is daily contact and regular supervisions and appraisals.

Management

Care of individuals is the most important aspect of the role. The Home is run on a not for profit basis, so all the money is put back into running the service. There has been plenty of opportunity to get training to support the work.

The residents all have individual care plans that are developed through conversations with them and their relatives before they enter the home and added to as the staff get to know them better. Care plans are reviewed monthly, but staff are able to update plans when necessary – an example of this is a resident who has recently been given a diagnosis of dementia. Their care plan has been updated to reflect the change in circumstance.

There are staff who monitor food and fluid intake and update records accordingly and there is a separate table for residents who require staff assistance to eat. Residents can choose their meals at meal time – they do not have to decide in advance. The home only had Orthodox Jewish residents and it is tailored to the needs of that community. An example of this is the Shabbos lift. Food is Kosher and a Rabbi visits. Staff have regular meetings and meet regularly with residents and relatives of residents to update their preferences. There are regular supervisions and appraisals and staff know that they can approach the manager with any concerns. At mealtimes there are enough staff on to make sure that residents are eating and drinking properly.



Environment

The environment at Beenstock is homely and relaxing with art on the walls. Residents are allowed to receive visitors and are supported to go on outings and participate in religious and cultural activities whilst in the home. Residents are treated with respect and are supported to be independent.

The building is set up to be secure yet accessible – for example there are hinged boards fitted on bedroom doors on the upper floor that stop residents with dementia from wandering around and there is a culturally appropriate lift to all floors. Accessible toilet facilities are available to visitors, but it was noted that the accessible facility on the top floor does not meet nationally recognised standards to be listed as accessible.

Residents were reluctant to talk to Enter and View volunteers because the baking activity was due to start when we arrived, so we went to the area where the activity was taking place. Twenty or so residents were enjoying their regular baking session and it can be confirmed that the results of their efforts were delicious.

Additional Notes:

Wigs are cared for and residents' nails are cleaned. On Fridays there is a long time from lunch to the evening meal so there is an option for residents to have a snack.

Whilst the Enter and View visit was proceeding, it was observed that one of the dementia doors was causing difficulties for staff attempting to move specialist medical equipment into the room. This was very swiftly remedied by the on-site caretaker, which demonstrates appropriate staffing levels and roles. Culturally specific language support in Yiddish, Hebrew and German was provided where necessary at the home.



6. Recommendations

Beenstock Care House is a well-run and caring nursing home that serves a particular community of Salford. Residents were happy and well cared for, enjoying culturally appropriate meals and activities. Staff felt supported and enabled to complete their work appropriately. The home smelt clean and was generally well maintained. The building is old and has many storeys which house people who would struggle to use stairs and ongoing work is required to improve accessibility to all.

It is recommended that:

1. A schedule of works is drawn up to update the building to modern accessibility standards – the signing in book is out of reach of wheelchair users, the accessible toilet on the upper floor does not meet modern standards.
2. Other accessibility issues such as managed fire evacuation policies and procedures are updated in line with current good practice
3. Although appropriate staffing levels are maintained, some residents had noticed that staff were very busy, and this meant that they did not always feel able to ask for support when required. Considering this resident feedback, it may still be necessary to review the staffing levels
4. Staff are provided with updated training and information in all aspects of providing care, including implementing the Accessible Information Standard, which applies to all Health and Social Care settings.

Home managers are welcome to work with Healthwatch Salford on any of these recommendations, and authorised representatives will be happy to revisit the home in three months' time to review progress on implementing these recommendations.



7. Service Provider Response

I am surprised by [the toilet of the third floor not being wheelchair accessible] as we have never had this reported by the care homes consultant we use nor by CQC. We take our responsibilities to disabled users seriously and would be grateful for feedback as to the issues with this bathroom. It is regularly used by wheelchair users using the service. Unless we are in breach of a regulation which you can evidence I'd like this removed from the report. If we are in breach of a regulation, please inform me as to what and why so I can immediately rectify.

[In relation to emergency evacuation] If you look on the doors in EVERY room there is a Personal Evacuation Plan. We have a full fire safety audit once a year. As we are a non-evacuation building there is no requirement for fire refuges. All rooms have fire foods attached to the fire alarm system. IF need be residents are moved horizontally behind two fire doors.

[Regarding staffing levels] I would like you to look at staff rotas, ratios and the CQC report. We consistently staff over the recommended ratios.

Point 10: Environment: The hinged board are to stop people walking in others' bedrooms. It is not to stop people with dementia leaving their rooms.



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