

# **Glenthorne No 2 Care Home**

## **Thornton Cleveleys**

**Enter and View Report**

**Tuesday 14<sup>th</sup> November 2017**

**10.30 am-12.00 pm**



### **DISCLAIMER**

This report relates only to the service viewed at the time of the visit and is only representative of the views of the staff, visitors and residents who met members of the Enter and View team on that date.

**Contact Details:****Glenthorne NO 2 Care Home Ltd****4 Station Road****Thornton Cleveleys****FY5 5HY****Staff met during our visit:****Anne Clarkson (Manager)****Date and time of our visit:****Tuesday 14<sup>th</sup> November 2017****10.30am -12.00pm****Healthwatch Lancashire Authorised****Representatives:****Michele Chapman Project Officer (Lead)****Lesley Miller Project Staff****Lawrence Houston Project Officer****Introduction**

This was an announced Enter and View visit undertaken by authorised representatives from Healthwatch Lancashire who have the authority to enter health and social care premises, announced or unannounced, to observe and assess the nature and quality of services and obtain the view of those people using the services. The representatives observe and speak to residents in communal areas only.

This visit was arranged as part of Healthwatch Lancashire's Enter and View schedule. The aim is to observe services, consider how services may be improved and disseminate good practice. The team of trained Enter and View authorised representatives record their observations along with feedback from residents, staff and, where possible, resident's families or friends.

The team compile a report reflecting these observations and feedback, making comment where appropriate. The report is sent to the manager of the facility for validation of the facts. Any response from the manager is included with the final version of the report which is published on the Healthwatch Lancashire website at [www.healthwatchlancashire.co.uk](http://www.healthwatchlancashire.co.uk)

## Acknowledgements

Healthwatch Lancashire would like to thank Anne Clarkson, together with staff, residents and visitors, for making us feel welcome and taking part in the visit.

## General Information

Glenthorne No 2 Care Home Ltd is privately owned by Glenthorne Rest Home Ltd with places for 15 residents. There were no vacancies at the time of our visit. The person in charge is Cheryl Holden.

Information obtained from carehome.co.uk states that the home provides care for people who are affected by Dementia, Eating Disorders, Physical Disability, Sensory Impairment.

## Methodology

The Enter and View representatives made an announced visit on Tuesday 14<sup>th</sup> November 2017 10.30am-12.00pm

We spoke to four residents, one staff member and three relatives, where possible within the constraints of the home routine, people's willingness and ability to engage and access to people in public areas. Discussion was structured around four themes (Environment, Care, Nutrition and Activities) designed to gather information concerning residents overall experience of living at the home.

The team also recorded their own observations on the environment and facilities.

As some residents were receiving visits, choosing to stay in their rooms or being nursed, we spoke with four of the fifteen residents.

Our role at Healthwatch Lancashire is to gather the views of service users, especially those that are hard to reach and seldom heard, to give them the opportunity to express how they feel about a service regardless of their perceived ability to be able to do so. It is not our role to censor feedback from respondents.

Observations were rated on Red, Amber, Green scale as follows;

**Green** = We would choose this home for a loved one.

**Amber** = We may choose this home if some improvements were made

**Red** = We would not choose this home for a loved one unless significant improvements were made.

## Summary:

Glenthorne No 2 Care Home Ltd is a facility under new management which for the past six months had been undergoing a process of refurbishment.

Representatives considered both the external and internal environments to be of concern in terms of health and safety, staffing levels and observations of comfort and homeliness.

We did not see evidence of any activities and residents and relatives who were asked about this appeared to concur. Similarly, there were mixed opinions in respect of the quality of the food.

However, feedback from some respondents particularly in respect of care was good and this is recorded in our report.

As a result of our visit we made contact with the Care and Quality Commission, the Clinical Commissioning Group and Lancashire County Council Contract Assurance Team.

Based on our findings, representatives agreed that they would not be happy to choose this home for a loved one unless significant improvements were made.

Based on the criteria, the Enter and View Representatives gave the home an overall score of:

**Red**

# Enter and View observations

## Pre-visit and location

Prior to our visit we attempted to access a dedicated website and did not find one however, we noted that the facility had a Facebook page. We did not see a facility brochure on display in the home.

Representatives considered that Glenthorne no 2 Care Home was situated reasonably close to public transport and local amenities.

The home was clearly signposted from the main road and there was a small dedicated parking area adjacent to the building, however we did not see a dedicated disabled parking space. The manager told us that there was a space for ambulances to the front of the building alongside disabled access to the home.

## Green

### The External environment/first impressions

Our first impressions were of a building in need of significant update and refurbishment.

Approaching the building from the road we saw the two staff members on duty outside smoking. As we established later, these were the only two members of staff on duty and this effectively left the residents inside the home unattended.

Representatives did not see any area of the garden where it would be safe and pleasant for residents to sit out, and it was apparent that whilst some work had been done to the garden area it was not yet suitable for residents to access.

We also observed that a charred oil drum which had been used on Bonfire Night required removing from the rear garden along with the expended fireworks and firewood.

We did not consider that the premises to be secure. An external glass door had a pane of glass missing which was covered by cardboard and as the two staff were outside when we arrived the main door had been left ajar.

## Red

### The internal environment/reception -first impressions

Entrance to the public areas was via a small porch and corridor. A wall mounted hand gel dispenser was empty and so the manager brought us another one. We were able to sign into a visitor's book kept on a side table in the dining room but did not see a designated reception area. There, was no general staff noticeboard nor was there a photographic staff noticeboard identifying key staff.

We did not see a menu, or a daily activity schedule displayed.

One of the staff introduced herself as the manager and she was very welcoming. However, our first impressions were not those of a homely environment. The entrance area consisted of bare floorboards which were uneven and may have represented a hazard to those less mobile.

The Healthwatch Lancashire poster was clearly displayed.

## **Amber**

### **The observation of corridors public toilets and bathrooms**

Representatives did not consider that the public areas were pleasant or homely. We evidenced building materials stored in the conservatory and boxes stored elsewhere. Fire extinguishers appeared to be stored in the office rather than public areas and loose wiring was secured down onto the floor with tape. There was very little in the way of soft furnishings or artwork displayed on the walls.

We saw that resident's doors were personalised with numbers names and photographs.

A bedroom right at the entrance to the home afforded very little privacy as visitors had to pass the opened door. The resident could clearly be seen in her bed and representatives considered this compromised her dignity.

All public toilets were adequately clean and stocked with soap, toilet rolls, and towels but needed refurbishment. There was a general smell of damp in some bathrooms and the corridor in the annexe on the ground floor smelled strongly of urine.

## **Red**

### **The lounges, dining and other public areas**

The main lounge overlooked the rear garden and the manager told us that this had recently been fitted with a laminate floor and been redecorated.

Residents were seated around the room in a manner which did not encourage social interaction and representatives noted an absence of soft furnishings which did not contribute to a homely environment. A TV was turned on low in the lounge which did not inhibit conversation.

A small conservatory adjacent to the main lounge smelled strongly of smoke with representatives believing that a bucket sited in the conservatory contained cigarette butts. The conservatory also housed unused boxes of laminate flooring.

The dining area appeared to be pleasant and clean with enough seating for the number of residents. Tables were nicely set with placemats and cutlery, but we did not see a menu displayed.

Representatives were advised that the stairway area had been decorated and carpeted however the bottom of the stairs was protected by a child safety gate which did not appear robust enough for purpose.

## **Red**

### **Observations of resident and staff interactions**

There were two staff on duty when we arrived (one of whom identified herself as the manager) Both staff were outside the building smoking leaving residents unattended.

About 40 minutes after our arrival a domiciliary care worker and a trainee domiciliary carer arrived. They explained that they were part of the same company as the staff at Glenthorne and had a “spare hour”.

Representatives observed staff to have positive relationships with residents, knowing residents by name and enjoying easy banter with them. Relatives we spoke to were very positive about the care at the service, however residents we spoke to were slightly less so.

The manager told us that residents were able to choose from a menu (the day before) what they would like to eat and that there were two choices and alternative snacks. We were informed that the care home facilitated bingo and domino nights. However, we were unable to see any evidence of a menu or activities taking place.

We observed that some residents had personalised their doors with photographs.

## **Amber**

### **Additional information**

The manager told us that from April 2017 the home had been undergoing a period of refurbishment. A new boiler had been fitted, along with some laminate flooring new wallpaper and refurbishment of the staircase. She also told us that some work had been done to clear the garden area.

## Feedback from residents

### Environment

*"It's quiet here and the staff are very friendly, I've only been here a short while. I've been in the Blackpool one but prefer this one."*

*"Your room can be personalised."*

*"I've been here a long time. It's very friendly and staff are very nice".*

*"I came from the other Glenthorne Home in Blackpool."*

*"My bedroom is very nice."*

*"I sometimes get fed up and want to move".*

*"I like to sit here so I can see the garden."*

### Activities

*"I've not done a lot, I've been ill with flu. I can't walk far".*

*"We never have activities, I think people may be too old. I've got some very nice friends here."*

*"We need a few more activities. People don't mix much".*

*"We don't have an activities coordinator. We need more activities".*

*"I am not sure of the activities."*

*"I would like to be in the garden."*

*"I like to go out. I don't like staying in."*

### Care

*"I'm well looked after. Staff are all very pleasant."*

*"They are short staffed"*

*"The care is alright. Some of the staff are nice and then you get some that are off. They need more staff".*

*"I only came in yesterday and I have been looked after very well."*

### Food

*"The food is alright. If I don't like something they will make me a salad or a sandwich. I don't know what is for lunch".*

*"We get the same thing all the time, it's boring". Food is basic and no choice"*

*"The food was lovely - they made me sandwiches as I only came in yesterday. "*

*"The food is good, yes."*



## **Relatives and friends' views**

### **How do you feel generally about the service?**

*"I'm very happy my husband is here."*

*"The staff are nice. I think they check on him every hour during the night as well."*

*"They wash him, shave him and they always make sure he wears his own clothes which is something I'm very happy about. I want him to wear his own clothes."*

*"They deliver a first-class service."*

*"I can see my husband at any time and I am offered refreshment."*

*"The service is very good."*

### **Do you think that you are kept informed about your relative e.g. Health and future care plans?**

*"They always let me know how he is."*

*"Yes, they do talk to me and we have a chat."*

*"I am kept well informed."*

*"Very much so"*

### **Do you know how to make a complaint if you need to?**

*"I would just go and speak to the manager if I needed to."*

*"Yes, we know how to make a complaint."*

*"I would speak to staff."*

### **Are you aware of the social activities at the service and do you feel welcomed to join in?**

*"I am not sure about the activities at the home."*

*"No, I'm not aware of any activities".*

*"I would speak to staff."*

*"They had a bonfire and it is Xmas soon."*

### **Would you recommend this service to others?**

*"Yes, I'm glad that he can stay here."*

*“The service couldn’t be better, my relative is improving all the time.”*

*“The owner hasn’t had the home long, but she has made great improvements”.*

## **Staff views**

### **Do you have enough staff when on duty?**

*“Yes, we do.”*

### **Do you feel supported to carry out person centred care?**

*“Yes.”*

### **Do you feel you have enough training to carry out your duties well?**

*“We get plenty of training, I’ve just finished a course”.*

### **Are you happy working here?**

*“Yes I am.”*

### **Would you be happy to recommend this care home to a close relative?**

*“Yes, it’s nice and friendly.”*

## Response from provider

The report i do find this un fair due to the fact that i have had this home since May 2017 and this home was run down and on closer by CQC if i hadnt of taken over, CQC inspected December 2017 and was very impressed of how far the home had come. The inspection report will be published by end of February 2018 for the public to see. This is a very detailed inspection and gives good evidence of how the home was and what its working towards now. Please bear in mind that this inspector was the same inspector that was there prior to take over. I would like to give you the opportunity to invite yourselves back later in the year to see more of the work complete.

Lcc contract inspection took place January 2018 to which this inspection was a good outcome to the inspectors were very Impressed , this report hasn't been sent out to us yet.

Infection control came out in November 2018 and an action report was done by myself and most of the work is now complete ready for re inspection in March 2018

Food hygiene came out last October and since then most work has been carried out and a fully fitted new kitchen is going in this month Febuary 2018 to which then I will be asking for a re inspection/grading in March/April 2018.

Fire inspection was carried out late 2017 and all action plan is complete and now fully compliant.

There has been a extensive amount of work taken place and will be on going through out the year.

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