

Enter & View

Report

Marlyn House

6th March 2018



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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.

Provider Details

Name: Marlyn House
Address: 41 Cannock Road, Blackfords, Cannock, Staffordshire. WS11 5BU
Service Type: Residential Home
Date of Visit: 6th March 2018

Authorised Representatives

This visit was made by two Authorised Representatives of Healthwatch Staffordshire.

Purpose of Visit

Independent Age, a national charity, have developed a set of 8 Quality Indicators for care homes. We are including an evaluation, based on our findings on the visit, of these quality indicators, which are as follows:

A good care home should...

1. Have strong, visible management
2. Have staff with time and skills to do their jobs
3. Have good knowledge of each individual resident, their needs 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

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 staff levels.
- Observe interaction at all levels between residents, staff manager, and visitors.

Physical Environment

External

The entrance was well signposted and easily accessible. The doors were locked so we had to wait to be let in after ringing the bell. There was no CCTV..

The outside of the building was in need to some maintenance and paint was peeling off window frames.

There are gardens, but these were covered in snow at the time of our visit, so we could not see them too well, but the garden appeared to be neat. We noted that there is a patio and chairs for the residents to sit out in fine weather.

Internal

There is a visitors book and there were no malodours.

The decoration generally looked a little tired, although we were informed that a maintenance person has been employed and they are working their way through the home attending to decoration and repairs.

The Entrance Hall has been recently decorated and looks very pleasant and welcoming.

The soft furnishing were in good condition, the corridors were free of clutter and all areas were clean.

Resident Numbers

The home has a capacity for 18 residents, with 16 single bedrooms and 1 shared.

At the time of our visit there were 15 residents.

Staff Numbers

There are a total of 17 carers including Senior Carers.

There are 2 domestic staff 5 hours a day during the week, with 1 domestic staff on duty over the weekend.

There is a part-time maintenance person.

The catering is run in two shifts with an overlap at lunchtime.

There is one full time Manager.

Agency Usage

We were advised that the home does not use agency staff.

Management

Management - A good care home should have strong visible management.

The manager should be visible within the care home, provide good leadership to staff and have the right experience for the job.

Our findings

The staff felt adequately supported by the manager and that the manager provided good leadership.

The residents regularly see the manager around the home and they are known to the manager as individuals.

The manager is friendly and interacts well with the residents, their family and friends on an everyday basis.

The residents indicated that the manager is helpful and does a good job of running the home.

Comments

The manager provides good leadership to the staff and has good interaction with the residents.

Staff Experiences and Observations

Quality Indicator 2 - Have the staff the time and skills to do their jobs

Staff should be well-trained, motivated and feel they have the resources to do their job properly.

Our findings

Staff receive in-house and out-sourced training. They were going to be attending a first-aid course on the day of our visit. They told us about their training in safeguarding, falls prevention and skills for care, just a few of the types of training that they receive and the staff felt that they were adequately trained.

We were advised that there is a training matrix and that staff are supported to acquire further skills and qualifications.

The staff also felt that they were adequately supported by the Manager and that they worked well as a team and were motivated to do their jobs well.

They felt that the staff levels were sufficient to meet the needs of the residents and that they had the time and resources in order to look after the residents well.

We spoke with 2 members of staff who specifically said that they were happy with the support and the training they they received.

Whilst we were at the some a District Nurse was visiting and she told us that she was very happy with the support she received from the home.

In addition, a visiting social worker said that they felt that the home was supportive to the residents and to visiting professionals.

Comments

The staff were clearly motivated, felt that they were appropriately trained and felt that they received good support from the manager and owner.

Quality Indicator 3 - Do staff have good knowledge of each individual resident, their needs and how their needs may be changing

Staff should be familiar with residents' histories and preferences and have processes in place for how to monitor any changes in health and wellbeing.

Our findings

They felt that the staff levels were sufficient to meet the needs of the residents and that they had the time and resources in order to look after the residents well.

The staff seemed to have good knowledge of the residents, their histories and their preferences and said that as it was not a big home, that everyone knew each other well.

Many of the staff have worked at the home for several years and they can communicate any relevant information about the residents on the hand over.

We were advised that the residents needs, both in terms of health and wellbeing were monitored and recorded in individual care plans.

Comments

The management and staff know residents on an individual basis and respond well to changing needs of the residents.

Activities

Quality Indicator 4 - Activities - Does the home offer a varied programme of activities?

Care homes should provide a wide range of activities (and ensure residents can access these) in the home and support residents to take part in activities outside the home.

Our findings

Although there is not a specific activities coordinator, activities are important at Marlyn House. A lot of group activities take place as most of the residents congregate in the lounge and these activities are accessible to all. The staff join in with the activities as well as lead them.

Other activities are tailored to individual residents as necessary. One to one activities take place and residents are supported with individual hobbies and interests.

Outings are arranged for residents and special events are celebrated.

Residents are able to go out for shopping trips.

Comments

Whilst we were visiting the residents were playing a game and we could see the pleasure it gave and hear the laughter it prompted.

Catering Services

Quality Indicator 5 - Catering - Does the home offer quality, choice and flexibility around food and mealtimes?

Homes should offer a good range of meal choices and adequate support to help residents who may struggle to eat and drink, including between mealtimes. The social nature of eating should be reflected in how homes organise their dining rooms and accommodate different preferences around mealtimes.

Our findings

We were advised that the menu was changed every week and that residents have a chance to choose what they would like to see on the menu.

We were advised that any special dietary needs are catered for.

The residents told us that they were happy with the variety and the quality of their meals.

Support is given to residents who may require assistance to eat and drink as required.

Bowls of fruit are available throughout the home.

The dining room has a sociable atmosphere and we noted the differing needs and preferences were able to be accommodated.

Comments

Our visit covered lunch being served and we noted that the residents were able to choose what they wanted and that support was given as necessary. The food looked and smelt good.

Resident Experiences and Observations

Quality Indicator 6 - Does the home ensure that residents can regularly see health professionals such as GPs, dentist, opticians or chiropodists?

Residents should have the same expectation to be able to promptly see a health professional as they would have when living in their own home.

Our findings

The residents had regular access to GP services, dentistry, opticians and chiropody services.

The home provides transport where necessary to access health care professionals and residents are escorted by a member of staff, unless a family member is able to accompany them.

Comments

Residents have regular access to healthcare professionals as required.

Quality Indicator 7 - Does the home accommodate residents personal, cultural and lifestyle needs?

Care homes should be set up to meet residents cultural, religious and lifestyle needs as well as their care needs, and shouldn't make people feel uncomfortable if they are different or do things differently to other residents.

Our findings

The residents appeared to be well looked after and content. They felt that the staff knew them well as individuals and cared for them with respect and dignity. Privacy was respected with staff always knocking on the door before entering residents rooms. Residents religious preferences were respected and catered for. Call bells were within easy reach and were reacted to in a timely manner

Comments

The residents seemed to be very happy and it was lovely to see and hear the residents enjoying activities as a community.

Family and Carer Experiences and Observations

There were no family members visiting the home at the time of our visit.

We were advised that relatives were made to feel welcome when visiting the home and can visit at any time. We were also advised that relatives are kept well informed regarding their loved ones.

Quality Indicator 8 - The home should be an open environment where feedback is actively sought and use.

There should be mechanisms in place for residents and relatives to influence what happens in the home, such as a Residents and Relatives Committee or regular meetings. The process for making comments or complaints should be clear and feedback should be welcomed and acted on.

Our findings

We were told that the home has regular residents and relatives meetings, although we were advised that there is not a lot of support for these meetings from relatives.

The management keeps relatives informed of any changes to their loved ones and consults about any changes in their care, taking feedback and suggestions into consideration. The home advised us that they are willing to make changes in response to feedback and suggestions from residents and relatives

The home does have a complaints procedure and residents and relatives are made aware of this.

Comments

The home has an open, friendly attitude and is happy to receive feedback and suggestions and respond to requests.

Summary, Comments and Further Observations

The home is small and well run. The owner is present at the home on a regular basis and is supportive to the staff. The staff felt that they could approach the owner at any time and that the owner was friendly and pleasant.

The manager of the home was welcoming, friendly and helpful. The manager knew every resident on an individual basis and the staff felt that the manager was very supportive and encouraging.

There was a calm and relaxed atmosphere throughout the home.

Comments

We felt that this home met the Independent Age Quality Indicators to be considered a good residential home.

Recommendations and Follow-Up Action

We did not feel it necessary to make any recommendations.

Provider Feedback

We have not received any feedback from Marlyn House.

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.



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