



Enter & View Report

Care Home: Sandtoft Care Home

Service address: 70-72 Alderly Road

Hoylake

Wirral

Merseyside

Tel 0151 632 2204

Date: 14/09/2018

Authorised representatives: Tricia Harrison

Mary Rutter

Elaine Evans





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Acknowledgements

Healthwatch Wirral would like to thank the management, residents, carers and staff at Sandtoft Care Home who spent time talking to us about the home.

Please note that this report relates to findings observed on the specific date and time of the visit. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

The visit also takes into consideration the fact that some of the residents spoken to may have an illness and/or disability, including dementia, which may have an impact on the information that is provided.

What is Enter and View?

Part of the Healthwatch Wirral work programme is to carry out Enter and View visits. Local Healthwatch Representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act 2012 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 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 use the service first hand.

We are also working in partnership with Local Elected Members. In order for Elected Members to see a Care Home "in action" we will be conducting a series of short visits. These visits will comprise of a Healthwatch Wirral Staff Member or volunteers and an Elected Member and will be called 'Green' visits. The Elected Member will not be from the Constituency that they represent at Local Government

If there are any issues/concerns which arise during this visit then this could result in a follow up visit by Healthwatch Wirral Authorised Representatives.

Type of E&V visit undertaken

Familiarisation

Methodology

The visit is not designed to be an inspection, audit or an investigation, rather it is an opportunity for Healthwatch Wirral and Elected members to get a better understanding of the service by seeing it in action and talking to staff, service users and carers/relatives. If during a visit Healthwatch Wirral identifies any aspects of a service that it has serious concerns about, then these concerns are to be referred to the appropriate regulator or commissioners of the service for investigation or rectification. Any safeguarding issues identified will be referred to the Local Authority or Commissioner for investigation.

The rectification of less serious issues may be directly with the service provider on the day.

The Green visits are a snapshot view of the service and findings are reported based at the time of the visit.

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Enter and View visits are conducted in a way that works in accordance with Merseyside Safeguarding Adults Combined Board's principles and procedures. Information will be shared accordingly in order to safeguard adults at risk on Wirral and promote quality of local services.

General Profile of the Service.

Sandtoft is a care home situated in a quiet residential area of Hoylake. It is close to the promenade, beach, local shops and a wide range of amenities.

Discussions, findings and observations

Discussion with Manager

On entering the property the Manager gave Healthwatch Wirral authorised representatives a warm friendly greeting. We were asked to sign in and were escorted to the dining room for a brief discussion about the home.

We were informed that the home provides residential care and accommodation over 3 floors for up to 22 residents. At the time of our visit there were 20 people residing in the home.

Access to all floors is provided by stair and lift.





Activities

Sandtoft provides a good range of activities for residents including getting involved with the local community and schools.

Care Plans

The Manager reported that care plans are person centred and identify the care and support people require. They are reviewed and updated when necessary to reflect people's changing needs.

Management of Medication

Medication is stored in a lockable trolley and secured to the wall. Trained members of staff administer medication to residents.

Staff and Training

16 staff are employed at Sandtoft.

The Manager stated that staffing levels are adequate to provide safe care to residents and levels are adjusted to meet the needs of the residents.

Staffing Levels

Day - Manager, 1 Senior and 2 Care Staff Night - 2 Care staff (both medication trained)

The Manager stated that staffing levels are adequate to provide safe care and levels are adjusted to meet the needs of the residents.

Staff shortages are managed by using their own staff and Manager.

Staff have an Induction when they start work at the home and receive regular supervisions and annual appraisals.





Staff receive extensive training including Level 2 and 3 QCF, Level 5 Management, MCA and DoLs, Infection Control, Dementia, EOL 6 steps, Nutrition MUST, Food Hygiene, Medication, Fire Safety, Moving and Handling etc

Training is delivered online, Learning Curve and Sysco.

Complaints

The home has a complaints procedure and staff, residents and their relatives are aware of this. Complaints are dealt with immediately and the outcomes are discussed with relevant people. Family meetings are held if required.

Nutrition and Hydration

We were informed that residents are asked about their food preferences and dietary requirements and the kitchen staff cook to order.

The home celebrates events and special occasions with special meals throughout the year.

Residents can eat in the dining rooms or, if they prefer, they can be served their meal in the privacy of their own rooms.

The home uses the MUST Tool and monitors residents' weight when they come to live at the home and regularly after that. Staff assist residents to eat and drink during the meal service and ensure that residents fluid intake is sufficient for their needs.

Two menu options are available daily and relatives are encouraged to join residents at mealtimes.

Falls

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The home prevents and manages falls by documenting incidents, referring to Falls Team and by using specialist equipment to prevent falls. Falls are recorded on an Incident/Accident form and a post accident observation form up to 72 hours after the fall.

DoLs/ DNAR's

The home follows legal requirements and best practice guidelines.

Residents are reviewed monthly and renewed yearly and best interest meetings are held if required.

Pressure Ulcers

Pressure ulcers are managed by using body maps and by referring to District Nurses.

Quality Monitoring

We were informed that Sandtoft monitors the quality of the service it provides by conducting Quality Assurance surveys with residents and relatives, reviewing and updating care plans and conducting resident and staff meetings.

Sandtoft works together with a number of health and social care professionals who care for their residents. These include local GP's, district nurses, dentist, optician and chiropodist.

After our discussions the Manager invited Healthwatch Authorised representatives to tour the facilities.

Environment -

Reception

The reception area was small bright and welcoming.

The hand gel for infection control purposes was situated in this area but we were not asked to use it when we arrived.

There were plenty of notice boards displaying statutory notices, current information and photographs of residents enjoying activities.





Corridor

Menus were displayed in the corridor which showed the choices available on the day.

Staff informed us that snacks and drinks are readily available all day. The corridors were clean, tidy, fresh and free from obstruction. One area of the corridor was used for the safe storage of wheelchairs.

Communal room/lounge

The lounge and adjoining conservatory were clean, bright and fresh. Both were decorated and furbished to a good standard. The furniture was set out around the perimeter to allow space to enable residents to manoeuvre around the home safely.

Residents were participating in the activities taking place. Adjacent to the lounge the conservatory provided access to the garden.

Dining Room

At the time of our visit, lunch had already been served in the dining room. It was spacious, bright and decorated to a good standard. This room had patio doors leading out to the garden.

Bedrooms

We were invited to view a resident's room. It was tastefully decorated, clean, fresh and bright. A call bell was within reach for the resident to call for assistance if needed. It was evident that the resident had personalised their room to their own taste.

Shower and bathrooms

The shower room and bathrooms viewed were clean, tidy and well equipped. Call bells were placed within reach for users of these facilities.

Kitchen

The kitchen was small but adequately equipped. We were informed that the cook was on holiday and another member of staff was covering in their absence. It was reported that residents are asked what they want to eat daily and this is then prepared for them.





Laundry

The room was small but very organized. We were informed that laundry is done daily and all items of clothing are clearly labelled.

First Floor

One area on the first floor was malodorous and this was reported to the Manager.

External areas

The external areas, including a garden located at the rear of the building, were well maintained and safe.

There was a variety of garden furniture provided for residents' use in these areas.

The home did not have a car park but there was plenty of car parking spaces in the road at the front of the home.

Staff Observations:

All of the staff appeared to be very cheerful and treated residents in a friendly manner and with respect and dignity.

Staff appeared to enjoy their work and were at ease with the residents.

Residents -

Most of the residents appeared cheerful and informed us that they enjoyed living in the home, were happy with the food provided, the activities and the level of staffing.

Subsequent to our visit discussions were held with the Manager to validate our observation

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- The home provided a safe, homely and comfortable environment for residents.
- The building was in a good state of repair and condition.
- The Manager and staff were friendly, enthusiastic and appeared to be caring, respectful and approachable.
- There was a pleasant atmosphere around the home and staff appeared to engage well with each other as well as with residents.
- Residents looked clean, tidy and well cared for.

Recommendations/considerations

- Consider in any future programme of refurbishment include creating a Dementia Friendly environment.
- Consider adjusting the location of the furniture and seating in the lounge, currently placed around the perimeter of the room.
 Smaller grouped seating may encourage conversation and interaction between residents and create more space to enable staff and residents to manoeuvre around the room safely.
- Consider having a rolling programme or forward plan of menu options which could be managed easily and provide more choice.





Supplementary feedback from the provider post visit

Thank you for your feedback.

We had tried the lounge with the chairs situated differently but unfortunately as most of our residents use walking aids it was not easy for them to manoeuvre.

Residents do also enjoy using the conservatory when they would like to have a chat and when families visit.

We are also in the process of completing another 4 week rolling menu.

Healthwatch follow up action

Provide Manager with Healthwatch Checklist 'How to create a dementia friendly environment in a care home.





Glossary

CADT- Central Advice and Duty Team

CSW - Care Support Worker

CQC - Care Quality Commission

DoLS - Deprivation of Liberty Safeguards

DNAR - Do not attempt resuscitation

RGN - Registered General Nurse

QCF - Qualifications and Credit Framework

MUST - Malnutrition Universal Screening Too

Distribution of report

Healthwatch Wirral will submit the report to the Provider, Commissioner and COC.

Healthwatch Wirral will publish the report on its website and submit to Healthwatch England in the public interest.

Healthwatch Wirral

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