

<b>Details of visit</b>	<b>Prior Bank House</b>
<b>Service Provider:</b>	<b>Anchor Hanover Group</b>
<b>Service address:</b>	<b>74 Cherry Tree Road, Sheffield, South Yorkshire, S11 9AB</b>
<b>Date and Time:</b>	<b>Thursday 29 November 2018, 10.00 am – 12 noon</b>
<b>Authorised Representatives:</b>	<b>Nazreen Iqbal, David Boddy</b>
<b>Contact details:</b>	<b>Healthwatch Sheffield, The Circle, 33 Rockingham Lane, Sheffield, S1 4FW</b>

## Acknowledgements

Healthwatch Sheffield would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme.

## 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 service users and staff, only an account of what was observed and contributed at the time.



## What is Enter and View?

Part of the local Healthwatch 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 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 experience the service first hand.

Healthwatch 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 safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.

## Purpose of the visit

The visit is part of a planned series of visits to residential and nursing homes, looking at the quality of care provided. The experiences of care home residents and their relatives and visitors are often seldom heard in the care sector in general, and exploring this is one of our 2018-19 priorities.



As part of our work we would like to find out whether the care provided meets people's needs, and what people and their families and visitors say about the services that are provided. In particular, we aim to find out how the home provides opportunities for people to improve their quality of life and well-being on the whole and connects with the wider environment.

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## Strategic drivers

- Healthwatch Sheffield's statutory duties include the need to highlight good practice and encourage those providers requiring improvement to do so.



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## Methodology

The visit was organised in advance with the Care Home Manager. A poster was sent to the Care Home Manager to let residents and their visitors know when Healthwatch volunteers would be at the home, making relatives and visitors aware of the visit and providing the opportunity to share their experiences if they chose. We noted copies of the poster had been put up in the reception area upon our arrival.

The visit was undertaken following positive anecdotal feedback about the home. We recorded observations and asked questions to the residents, their visitors, and staff at the home. The questions were focused on the Quality Indicators from a collaborative project between Healthwatch Camden and Independent Age, which you can access [here](#).

Upon our arrival, we were informed by the senior staff we would be able to speak to all of the residents.

We spoke to:

- Six residents, and one relative.
- Four members of staff.

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## Summary of findings

- Residents told us they were happy at the home, and spoke very highly of the care home and the staff in particular, and we saw staff being caring towards residents
  - The building was well-maintained.
  - The staff said they felt supported by Anchor, the organisation they work for. They said they well-trained, and given regular refresher training.
  - Residents were generally happy with the activities on offer. Currently, two staff members work solely as Activity Coordinators. In the future, this will be shared amongst staff.
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## Results of visit

### Environment

Prior Bank House is registered as a residential and nursing home, and is owned by the company Anchor. The home has 32 rooms, and there were 28 residents at the time of our visit. Residents had lived at Prior Bank House for between six months and more than three years, and some residents had dementia.

In their most recent CQC inspection, the care home received a rating of 'Good' as of January 2018, and the report can be accessed [here](#).

The building is a converted Victorian house, and was tidy, clean and in good repair. Staff members said they were waiting for their head office to approve improvements to the décor, including the carpet, which was quite worn. Staff told us steps were taken to accommodate a range of residents, for example two rooms were provided specifically for married couples.

Staff said that families and visitors are welcome to visit at any time.

### Staff and training

The staff we spoke to had worked at the home for over a year. We saw staff being caring towards residents, and the residents we spoke to confirmed this. Upon arrival, we were greeted by a staff member who said they needed to give a resident their medication and would return as soon as they were done, which we felt was putting the residents' needs first.

Residents spoke positively about the attitudes of staff at the home. They praised the care of staff, and one resident said "the staff are lovely". When asked, two residents said they felt they were treated with respect and dignity. Another resident said they felt "very well cared-for" by the staff members who supported them to dress and undress each day.

Staff had access to a regular training programme, and one staff member said they were given good training, and talked about attending conferences to share good practice. Another staff member told us some internal staff were qualified to train others on courses including Moving and Handling, which help staff to care for residents appropriately. Other training on treating residents' personal

data in accordance with the law and related topics was conducted online, and was typically refreshed every 12 months. We were told that specialist training courses were conducted by the Anchor head office, including safeguarding and dementia care training.

The members of staff we spoke to said they were happy with Anchor as an employer, and felt well supported in the event of any issues. A staff member gave an example of an occasion when they had received telephone support and a visit by a senior member of staff when they asked for it.

When asked if there was anything that could be improved, a staff member said the organisation had adequate staffing capacity currently, but that they would prefer more funding and that having more staff would be useful.

## **Food**

Residents told us they were generally satisfied with the food provided, although there were mixed views; one resident said the food was “alright, it’s a bit plain”. At the same time, they said “the chef is very accommodating” to their choices for meals. Another resident said they would not talk to staff directly if they wanted something different to eat. Instead, they said they would tell their relative, who would raise it with staff.

The staff said they cater to residents’ needs at meal times, for example pureeing food for those who require it. They explained that all food is provided fresh and is cooked at the home by the chef.

## **Activities**

At the time of our visit, two members of staff worked solely as Activity Coordinators. A staff member said in the future, the Activity Coordinator role will be shared amongst all care staff. Another said staff numbers were not being reduced, as the two Activity Coordinators will go into new roles as care staff.

When we heard from residents about these changes, they were unclear about the plans and expressed some concerns. One resident said “I’m worried that they’re reducing staff, and there won’t be an activities person... I’m worried we’re going to lose our tea dances”. We think that the care home could reassure residents following their concerns.

Residents were offered activities inside and outside the home. Residents and staff members told us that connections with the community were very good, saying some residents were taken on outings every one or two weeks. These included shopping trips and trips to the local pub , as well as ‘tea dances’ at the Crucible Theatre every three months.

Other activities take place at the home, including Tai Chi sessions; volunteers who help with the garden; visits by children from a local school and a dog owner.

Although residents said they appreciated the activities, some expressed disappointment about their a loss of freedom. One resident said “I can’t go out on my own, I must be with a relative”, and another resident agreed with this.

We observed that residents could choose to join in organised activities if they wished, but could also spend time on their own or with others in the communal areas. We saw some residents sat with members of staff going through photo albums, and talking about their memories.

## **Residents' access to health professionals**

The staff and residents both confirmed that regular visits from health professionals take place, with a GP visiting once a week or when they are specifically called. Community Nurses visit on a daily basis to care for individual residents' nursing needs as appropriate, such as insulin injections. We were told other care professionals visit less frequently; a chiropodist visits every six-eight weeks, whilst speech therapists and physiotherapists visit when required.

## **Care arrangements**

Before moving into the home, staff said residents and their visitors are encouraged to visit and to stay for a weekend to make the transition to living in a care home easier, and to see how they settle in.

We observed care plans being handed over between shift teams, suggesting the staff actively keep track of this. This included daily records for fluid and food intake, as well as residents' interests and hobbies. In addition, the Care Home Manager confirmed that End of Life care plans are agreed with residents and/or their families.

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## **Recommendations**

- Staff to provide an alternative way for residents to choose meals that is not in person, making some residents more comfortable with this.
- The Care Home Manager to ensure residents and visitors are involved in the design of planned maintenance work by the head office.
- Staff to reassure residents that the changes to the way activities are organised and delivered will not impact on their frequency or quality.

## Service Provider Response

- Prior Bank are very happy with the report given and would like to thank health watch Sheffield for providing the home with two very well respective persons that visited our home to complete this assessment.
- The two individuals treated our customers with the greatest respect and made themselves feel open, approachable and gave out a very calming feeling to our customers.
- The two individuals that came sat with our customers and listened to everything that our customers feel are important to them.
- I believe that this is a good outcome and shows that our customers continue to have a voice and remain well cared for and with the continued on going assistance from all the professionals inside Prior Bank and outside Prior Bank.

We look forward to sharing our home with you again in the near future.

