**Enter and View Report** 





Details of visit	
Service address:	St Georges Nursing Home Windsor Street, Wigan WN1 3TG
Service Provider:	St Georges (Wigan) Ltd
Date and Time:	13 <sup>th</sup> December 2018 at 10 am
Authorised	David Brown, Paul Collier & Jean Fieldhouse
Representatives:	(supported by Karen Wilson, Senior Engagement Officer)
Contact details:	info@healthwatchwiganandleigh.co.uk 01942 834666

#### Acknowledgements

Healthwatch Wigan and Leigh 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 Wigan and Leigh 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 Wigan and Leigh 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

- To engage with residents of care homes and understand how dignity and choice 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
- Capture the experience of residents and relatives and any ideas they may have for change

## Strategic drivers

- CQC dignity and wellbeing strategy
- Engaging with hard to reach and vulnerable communities
- Exploring experiences of person-centred care

### Methodology

This was an announced Enter and View visit.

Prior to the visit Karen Wilson and Paul Collier had met with Abin Francis, Registered Manager and Julie Hughes, Clinical Lead at St. Georges. This gave us the opportunity to discuss the service provided at St Georges, the visiting protocol used by Healthwatch Wigan and Leigh (HWWL) and how we would conduct the visit, produce a report and gather feedback from the home. It was agreed that HWWL would leave questionnaires for visitors and staff who may be unable to contribute on the day of the visit.

On the day of the Enter & View visit we met with the Clinical Lead before we spoke to anyone in St Georges and took her advice on whether any residents should not be approached due to their inability to give informed consent, or due to safety or medical reasons.

Following a discussion with the Clinical Lead, Authorised representatives conducted short interviews with a number of staff members at the home who had worked at St Georges between three months and seven years. Topics such as quality of care, safety, dignity, respecting and acknowledging the resident's and families' wishes and staff training were explored. 12 members of staff contributed to our engagement either in person on the day or by completing one of the questionnaires.

Authorised representatives also approached nine residents to informally ask them about their experiences of staying at St Georges and, where appropriate, other topics such as accessing health care services from the home were also explored, to help with our wider engagement work. Seven visitors also contributed information about their experience of visiting a family member or friend residing at St Georges. Authorised Representatives explained to everyone they spoke to why they were there and took notes.

A large 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 actually works and how the residents and engaged with staff members and the facilities. There was an observation checklist prepared for this purpose.

When they had finished speaking to staff and residents they left them with an information leaflet and explained that a draft report would be sent to the Manager to check factual accuracy and to allow St Georges to comment on any findings or recommendations.

#### Summary of findings

At the time of our visit, the evidence is that St Georges was operating to a good standard of care with regard to Dignity and Respect.

- Residents looked tidy and clean and we saw no evidence of dignity not being respected
- We saw evidence of staff interacting with residents positively and regularly
- Residents told us that they were very happy with the food but would like more choice or variety for supper
- There are a variety of activities offered and we understand more activities away from the home may be offered in the future following the partnership with Driven

### **Results of Visit**

St Georges is a registered for 62 residents. The majority of bedrooms are for single occupancy but there are some shared bedrooms. We were informed St. Georges is rarely at full capacity so they can allow residents to have their own room if possible. Some rooms are en-suite and there are toilets and bathrooms close to all bedrooms.

#### Environment

The home was clean and the décor was good. Our observations suggest that a good standard of hygiene is being maintained. The home appeared clean and free from any unpleasant smell on the day.

St Georges is arranged over three floors. Each floor has access to a communal lounge/dining room although most of the activities are held on the lower floor as the area is more spacious.

There is a small enclosed patio area leading to a large garden although there are plans to increase the size of the enclosed area and to redevelop the garden lawn area to include a sensory garden. There is a resident who enjoy gardening and gets involved in planning flower pots, brushing leavings and generally being outside looking after the garden.

## Promotion of Privacy, Dignity and Respect

All the residents we saw appeared dressed, clean and tidy. Those we spoke with were happy with their personal care.

There was a split response when we asked residents if St Georges caters for their individual needs and similar response about residents making their own choices, however, although this may be due to the differing level of support residents require.

All bedrooms are numbered, have the name of the resident.

## Promotion of Independence

The majority of residents we spoke with felt that there are opportunities to take part in meaningful activities and said that they are encouraged by staff to get involved in planning or recommending activities.

We were informed by staff that their main difficulty is getting people out due to funding, staffing etc. although they have begun to work with Driven, volunteer led, door to door transport service designed to enable your neighbour's and other community residents to get out and about more easily.

Residents can choose what time to get up in the morning and when they want to go to bed. Mealtimes are set but the kitchen is flexible around the resident. Drinks and snacks are offered throughout the day and the communal area on each floor has an area where these can be prepared. Some residents did comment that supper can be repetitive and they would like to be offered something different.

There was a pictorial menu board offering the breakfast, midday and evening meal options.

#### Interaction between Residents and Staff

We saw evidence of staff interacting with residents in a friendly and positive way during our visit and both residents, visitors and staff were positive about the relationship.

There were a few visitors who spoke with us on the day who could not praise the care for their relative highly enough.

#### Residents

Healthwatch representatives spoke to nine residents. Residents told us they had lived at St. Georges between one and four years, although some did say that had lived there a long time but could not remember how long. Residents said that they were very comfortable and well cared for and that their individual needs are catered for.

"I can't fault the staff in any way. If I could get a coach I'd introduce them to the queen"

"I would like to change the food at suppertime – it's always the same"

Family and visitors we spoke with were very happy with the service and said that the care is excellent, however, some visitors although positive about the staff were not as happy with the management and felt that they came across rude at times.

"The staff are lovely but management is not good and they can be rude sometimes"

"My relative came to St. Georges from hospital and not in a good way. She is very well looked after and treated as an individual and they really do meet all her needs

## Food

The Manager informed us that choices are offered at each meal with three meals and a light supper being served through the day. Residents and visitors are happy with the food and encouragement from staff, apart from the comments about supper being repetitive but perhaps this could be considered by the management.

## Recreational activities/Social Inclusion/Pastoral needs

We observed a noticeboard at the entrance displaying a calendar of activities and being December it highlighted some Christmas activities and information when schools and choirs would be visiting the home.

We had been informed by staff that their main difficulty is getting people out due to funding, staffing etc. although they have begun to work with Driven, volunteer led, door to door transport service designed to enable your neighbour's and other community residents to get out and about more easily.

We spoke to a resident who is a keen gardener and likes to spend time outside pottering in the garden and tidying up.

## **Involvement in Key Decisions**

Residents and families we spoke with felt involved and informed at all stages and were happy with the communication from staff and felt that they know staff well.

Families told us that they are always kept informed and staff are available at any time.

## Concerns/Complaint Procedure

The home confirmed that they have a complaints procedure, although no resident mentioned having used it to us.

## Staff

All staff we met were friendly and we saw them interact well with residents and visitors. Residents and visitors were happy with the staff and the staff we spoke with were all happy in their job saying they really enjoy it but there is always room for improvement.

Staff highlighted the relaxed friendly environment with professional staff who care about the residents and families. Staff spoke about the happy atmosphere and how well staff work together, although they commented that staffing levels could be improved as working with agency staff can be stressful when they haven't worked at St. Georges before and don't know the home or the routine.

Staff were confident with their training and the training opportunities offered.

All but one member of staff said they would be comfortable speaking to a senior member of staff if they had any concerns or problems relating to work and felt supported, however one member of staff felt that senior staff are not really interested and just pass the information back to the senior nurse. Staff said they have lots of opportunity to build relationships with residents by sitting with them, chatting, by reading their care plans and assessments.

"I get to know their dislikes/likes, history, past jobs etc by asking them and their family members. I feel I have a good relationship with the residents."

### **Visitor and Relatives**

Families and visitors were extremely positive about the serviced and care at St Georges and happy about how the home is run.

### Additional findings

Overall our impression of the home is that it is well run and residents are happy living there.

### Recommendations

This report highlights the good practice that we observed and reflects the appreciation that residents and families felt about the care and support provided.

- Consider offering a wider choice for suppertime
- The management to be more self-aware in the way they communicate with families and visitors
- Look at how the home is meeting residents' individual needs and offering choice

# Service Provider response

- Is this report factually accurate? If not please state what needs to be changed and why. Yes it is accurate
- 2. Is this report fair? Yes
- 3. What learning has been gained by your organisation as a result of this Enter and View report?

The service received some surprise response from at least one relative that they are feeling management is not friendly. This needs to be investigated and addressed as soon as possible.

4. What was your impression of Healthwatch Wigan and Leigh? Is there anything we could have done better?

As management we would like more detailed feedback on the day of the visit so that we will be able to find out if anything is wrong and would be able to rectify.

## 5. Comments on recommendations

## Recommendation 1: Consider offering a wider choice at suppertime

**Comment:** St. George's nursing home is committed to provide adequate nutrition to all our service users on their choice, unfortunately one of our service user felt that we are not providing choice to our service users at supper time. We will have to do a full investigation about this as we already give them a wide variety of choices. At tea time (5pm) we offer our service users 2 hot meals where they can choose, also there is a choice of variety of sandwiches and soup. Our kitchen is flexible and would adapt according to the service users needs and prepare additional food on request. After this meal all our floors have its own kitchen area and we stock a variety of foods in this area 24/7 where staff will prepare foods to our service users on request the range of food we can provide is soup, sandwiches, bread and butter, cereals, tea/ coffee/ hot chocolate, homemade cake, variety of salads, fruits, fresh fruit juice or squash etc. on top of this we would be able to prepare something if any residents needed any special dietary needs which we are doing for few of our service users. St. Georges is taking very seriously with this opinion about the choice of food at suppertime and we will include this in to our next service user and relative meeting for full discussion and surveys and we will try to improve as per the requests

**Recommendation 2:** The management to be more self-aware in the way they communicate with families and visitors

**Comment:** The management of St. Georges are committed for customer satisfaction and was working hard to deliver the best care in our home. And the comment is surprising to all of us. We conducted an urgent management meeting after the draft report received and completed a detailed reflection about this and none of us can identify any incidents where we have been rude to any relatives. St. Georges management and staff will try to satisfy both our service users and relatives all the time only one time we may unable to satisfy the relatives with their wish when they insist to do any tasks against the medical advice (Eg. Wife of one service user requested giving a drink to her husband without thickening the fluids where speech and therapist clearly instructed not to, our staff/ management will refuse this request this may make the family upset)

St. Georges Management team are really sorry that this family felt this way and we will to everything in our capacity to avoid situations this way. And we urge our service users and family members to use our feedback systems to let us know how you are feeling whatever may be it is we will make sure this will be addressed for this you can use our complaint forms, feedback forms, survey forms, meetings, or even you want to talk about it to one of us you are welcome and you don't need an appointment to speak to us.

**Recommendation 3:** Look at how the home is meeting residents' individual needs and offering choice

**Comment:** The home have a system to make sure the service users needs are met all the time, the home is depending on the care plans and the daily records for to ensure this. Our care plans are giving a detailed account about the person and their needs and their preference, All our staff are trained in person-centered care and dignity and choice. And our feedbacks are reflecting this practice. Even in this report most of the areas its reflecting that we are upholding the dignity, choice and person-centered care. We will consider the recommendation and reflect on the systems in place along with our service

users, staff, and relatives to make sure we are meeting the service users needs and make the necessary changes

Comments received from Abin Francis, Registered Manager  $4^{\rm th}$  March 2019

