

Care Home Provider:	The Abbeyfield Buckinghamshire Society Ltd
Care Home Address:	Tring Road, Halton, Aylesbury, HP22 5PN
Date and Time of Visit:	30.03.19 – 10.30 am
Authorised Representatives:	Alison Holloway, Katie Everitt

Summary of findings



- Numerous activities available 24/7
- Not all staff respected residents as individuals.

The Visit

The Leonard Pulham currently provides nursing care for 28 people some of whom live with dementia. We talked to 4 residents, 3 visitors and 1 member of staff. We observed a further 11 residents, 2 visitors and 6 staff.

How people are treated



We heard some staff address residents and visitors by name. Some staff also used touch to reassure and encourage. Over lunch there were 5 staff sitting with residents assisting them to eat. They talked with each resident at eye level. One staff member demonstrated they knew a resident well, taking time and patience to persuade them to eat. They tried both main course options then a banana. The resident refused the first two but ate the latter quite happily. One person said that a carer occasionally brings flowers from the garden or takes photos to show their relative. A visitor also said that the home always did their best to resolve any issues. People told us “it’s not a bad place”, “I’m happy here” and “it’s very good here”.

The person in charge on the day did say they struggled to recruit staff. However, they said they employed the same agency staff. One person told us “staff change all the time”. Residents said it was difficult to form a bond with people in these circumstances. We were also told “staff don’t understand us, and we don’t understand them.” We were also told that sometimes staff, giving personal care, talk amongst themselves ignoring the resident. “They are forgetting these are individuals.” We also saw occasions when some staff talked about residents to each other across those residents’ heads. Staff brought residents in wheelchairs to the lounge area. They did not ask where individuals would like to go. Instead, we heard them talk as if the resident was not present; “we’ll put her at the table.” One resident was alarmed when they, and their wheelchair, were moved without warning to make room for others. Another staff member was heard, a couple of times, to say “Thank you madam” which sounded patronising. In a bedroom, we also saw preferences written on a white board on the wall; the resident was referred to as ‘he’ rather than by name.

Personal Choice



We were told that the food was “very good”, “could be better” and one person said it was too bland. Residents were asked what they would like to eat at the beginning of the week. This did mean that, as we visited on a Saturday, no one remembered what was for lunch. They had a choice of two main

course options at lunch time and one dessert. However, we did see three dessert selections being given. One visitor was pleased with the puree option given to their relative. At lunch, we saw a disposable bib placed on every resident in the dining room. However, no one was asked whether they would like to wear one. We saw food and drinks given in a range of bowls, plates and cups to suit individual needs. Tea and coffee were delivered to bedrooms in the morning. There was a choice of five cold drinks with lunch. Most people were offered a choice but not everyone. When one resident asked what their drink was, the staff member smiled but didn't reply.

A resident said that they could go to bed when they liked as night and day staff would assist them.

Just like Being at Home



Residents have breakfast in bed and are then helped to get dressed and up. We were told that they then tend to spend the rest of the morning in their bedrooms before being helped to the lounge or dining room from noon. We found these areas empty for most of the morning. The TV was switched on when the first resident appeared but left on when the last was helped to the dining room. The home has large communal spaces and a fully accessible large garden. A resident said they liked it because "it doesn't smell like a nursing home". We found it bright and airy and when residents said they were cold staff closed the windows promptly. One was also offered a cardigan. However, there were no pictorial signs on the toilet doors or eye level signs to orientate you in any corridor. Whilst visitors were able to come and go when they liked, we were not challenged when we arrived about who we were visiting. We had to call back the staff member to say why we were there. Staff always looked busy and people told us that there were sometimes not enough staff available. One person told us that they had waited a long time to be helped off a commode. A visitor did say that they had just received a letter explaining how "the new matron was addressing response times".

Privacy



Everyone told us that staff always closed doors and curtains when personal care was given. However, we were told that not everyone knocks on doors before entering a person's bedroom. Also, "staff ask for doors to be left open" although there was "nothing to stop you closing it (the bedroom door)".

Quality of Life



The main activity coordinator was praised by all the residents and visitors. We were told that they make sure everyone is included; enabling all interested residents to get to and from communal areas regardless of mobility issues. "The social activities are brilliant." "There's always something." Relatives were particularly impressed that the home was able to arrange so many visits out into the community. People talked about the range of options available as well as the quantity. We saw the activity person on duty talk individually to residents waiting for lunch. They asked how they were and about a visitor they'd seen the previous day. They then encouraged them to join in with the flower arranging after lunch. A noticeboard showed twice daily activities including trips to the garden centre, to Aylesbury, musical movement, games, quizzes and a knitting club. "The mental stimulation is as important as the environment." Regular monthly activities including visiting

musicians, a local church, the mobile library and a PAT dog. People also told us about a school, band and choir visiting. A garden party occurs every summer and birthdays are always celebrated. We also saw a hairdresser's space and newspapers being delivered to bedrooms.

Recommendations

We recommend that The Leonard Pulham

- ensures all staff have attended person-centred training and are supported to put this into practice
- reminds staff to talk with each resident and not over them; treat everyone as an equal
- puts up pictorial signs to differentiate one corridor from another and a toilet door from a bedroom door
- reminds staff to answer all residents' questions
- continues to improve the response time to call bells
- asks residents whether they would like a bib rather than assume
- reminds staff to knock on doors all the time

Service Provider Response

Thank you for your visit to Leonard Pulham Nursing Home on 30.03.19. Your draft report was of great value to the residents and to the staff and from the date of your report to now we actioned on the following of your recommendations:



- We booked a training session for Person Centred Care on the 26th of June. The trainer will observe the staff in the morning and during lunch period and she will hold the training session in the afternoon based on her direct observations on the day. She will also provide us with a full report.
- We held a residents' and sponsors' meeting to discuss the signage of the home. This was also recommended by the CQC inspectors during their visit and it is something that has been part of our service improvement plan since January 2019.
- The draft report was discussed during one of our regular meetings with the executive committee.
- The call bell system continues to be monitored and the improvement is visible. At the time of your visit approximately 10% of the calls were answered above the 5 minute limit. At present this went down to 1% with a maximum answering time of 6:32 minutes.
- We held a staff meeting and the report was discussed into detail. The staff were involved in the discussion about the factual accuracy of the report and they said that there was a sense of familiarity in the home because of the length of service of most staff and the length of the placement for most residents. Staff acknowledged the fact that although they knew the residents' wishes in a lot of detail, there was a need for continuous involvement in all aspects of the care. The boards in every room are used mostly as communication made by family to us and the one that was observed on the day was actually written by the resident's son. All staff felt that the two stars rating awarded to the first domain 'How people are treated' is very low and disproportionate with others which do link to how people are treated such as 'The Quality of Life'. The staff also considered that this was a small snapshot of a normal week.
- The head of catering said that the menus are planned weekly because the home uses fresh meat from a local farm and this needs to be planned in advance. The meat is being brought

in fresh the day before it is prepared. The head of catering spoke to the residents about the quality of the food. Her feedback was that most residents don't like pasta so this was removed from the menu. The menu choices are displayed now in the residents' rooms and staff are now aware that they will be incorporated in a discussion about the next meal choices every morning.

- Our activity coordinator spoke to the residents about morning group activities alongside our group activities which are normally held in the afternoons. The main response was that it would be too much to have this as a regular part of the program. It was observed however that the mornings when activities are taking place are well attended. The few comments collected are: "This would be a good idea in theory" "I like to spend the morning in my room watching the television, I enjoy this" "great idea, but not sure how many of the Residents would attend" "this would be too much for me" "I like to spend the morning relaxing in bed", "This would be too much for me I like to rest in the morning" "getting up and ready is a problem as I am quite slow" "it is too uncomfortable to spend virtually all day in my wheelchair" "this would be ok now and then but not all the time" "if I attended in the morning I would be too tired to attend in the afternoon and join in" "I look forward to the afternoon activities, I feel attending in the morning as well would be too much" "great idea if the activity started 11.30ish and stopped before lunch".

I hope that this email will contain sufficient information to reassure you that we are addressing your recommendations and also for you to complete your final version of the report. We would like to thank you again for taking the time taken to carry out your visit and to draw your conclusions. I read the report of your previous visit and I am hoping that in the future we can raise up to the same standards.

Acknowledgements

Healthwatch Bucks would like to thank the residents, visitors and staff at The Leonard Pulham for their contribution to the Enter and View visit as part of the Dignity in Care project.

Disclaimer

Please note that this report, on dignity in care, relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all residents and staff, only an account of what was seen and heard at the time.

Methodology

This was an unscheduled Enter and View visit in that the care home were given up to 2 weeks' notice of our intention to visit but not the time and date. Authorised representatives noted what they observed and were told.
