



Enter and View Visit Report

Barclay Gardens Care Home

Visit date: October 2018

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Wellington Road, Donnington, Telford. TF2 8AB

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Terminology and Acronyms

DBS: Disclosure and Baring Service - a check made to help make safer recruitment

DOLs: Deprivation of Liberty Safeguards - as part of the Mental Capacity Act aims to make sure people in care homes and hospitals are looked after in a way that does not inappropriately restrict their freedom.

MCA: Mental Capacity Act - promote, protect and safeguard/restore decision-making for those people who lack capacity to make some/all decisions for themselves.



About Healthwatch Telford & Wrekin (HWT&W)

Healthwatch Telford & Wrekin is the independent health and social care champion for local people. We work to ensure your voice counts when it comes to shaping, delivering/receiving and improving services. We address inequalities in health and social care to help make sure everyone in Telford and Wrekin (T&W) gets the services they need.

There are local Healthwatch across the country as well as a national body - Healthwatch England (HWE).

What is Enter & View?

Healthwatch Telford & Wrekin gathers people’s experiences of health and social care services and there are times when it is appropriate for Healthwatch to see and hear for ourselves how services are being provided. These visits are called ‘Enter and View’, and can be ‘announced’, ‘partially announced’ or ‘unannounced’. ‘Partially announced’ visits mean the service provider is told we will visit but not the date or time of the visit.



The responsibility to carry out Enter and View visits was given to local Healthwatch in the **Health and Care Social Act 2012**.

Enter & View visits are carried out by a team of specially trained and DBS-checked staff and/or volunteers called Authorised Representatives. These volunteers are not experts in health or social care and report only on what they see and hear during the visit. They make observations and collect people’s views and opinions anonymously and produce and publish a report.

Enter & View visits are not an inspection, and always have a ‘purpose’.



Details of the Visit

Visit Details:	
Service	Barclay Gardens Care Home
Provider	Coverage Care
Date and Time of visit	October 2018
Visit Team	1 HWT&W Enter & View Authorised Representative (ARs) and 3 Authorised Representatives “In-Training” (T-ARs)
Service contact details	Name: Debbie Ellis Phone: 01952 605321 Address: Wellington Road, Donnington, Telford. TF2 8AB

Purpose of Visit

How dignity, respect, quality of life and independence is being respected and supported in the person’s care, and how ‘activity-based’ care supports people to continue to be as active and independent as possible.

We want to hear about resident experiences and those of any relatives and visitors present, and we will observe the residents engaging with the staff and their surroundings. We want to identify examples of good practices and hear about any ideas the residents or staff may have for change.

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



Context of the Visit

In August 2017 Healthwatch England published a report: ‘**What’s it like to live in a care home?**’ Between January 2016 and April 2017, local Healthwatch staff and volunteers across England visited 197 care homes across 63 different local authority areas to find out what day to day life is really like for many of those living in care homes. These homes collectively provide care for almost 3,500 residents ranging from elderly people with dementia to those with severe learning disabilities.

During these visits local Healthwatch spoke with residents, their families and staff, compiling people’s experiences with their own observations to produce visit reports. These were shared with the providers, the public, CQC and Healthwatch England. Healthwatch England reviewed what people told local Healthwatch and identified the common issues that need to improve as well as eight quality indicators for a good care home. Healthwatch England identified that 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 resident 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 see health professionals such as GPs and dentists regularly
7. Accommodate residents’ personal, cultural and lifestyle needs
8. Be an open environment where feedback is actively sought and used

As part of the engagement programme Healthwatch Telford & Wrekin will visit Care Homes in the borough, and those elsewhere in the county where funding support is provided by Telford & Wrekin Council Adult Social Care. Individual visit reports will be published on each home visited. Over-arching theme reports will be published focusing on person-centred care and the quality of life experienced by residents, relating to their dignity and respect and exploring topics such as activity-based care, access to health professionals, and living with dementia.

Barclay Gardens Care Home in Telford & Wrekin is currently rated ‘**GOOD**’ by the Care Quality Commission (CQC).

The visit was ‘**partially announced**’ and we told the manager of the visit but not the date and time.



What we were looking at

The focus of this visit is to find out if the residents of Barclay Gardens Care Home are happy living in the home. We want to learn about:

- the environment - including supporting dementia, accessibility, activity
- the experiences of people living with dementia
- supporting people to continue to be as active and independent as possible
- staffing levels and staff training



What we did

A pre-visit by the visit lead representative with the manager provided the team with an overview of the Care Home and environment, the delivery of care and support, and staffing.

When we arrived at the home, after signing-in, we spoke to the senior staff-member on duty. We took advice on whether any residents should not be approached due to safety or medical reasons, or any issues regarding ability to give informed consent. The senior staff member then showed the team around and introduced us to the residents and staff.

We spoke with residents in the home who were willing and able to talk to us and any visitors and relatives present. We spoke to residents in the lounge and were invited to speak to some residents in their rooms - in these cases either a staff member or the representatives knocked on the open resident's bedroom door and asked if they would be happy to speak to us. Some residents declined.

We spoke to 9 residents in total, 5 relatives / visitors, and 7 members of staff.

What we found out

About the Home

Barclay Gardens is a Care Home integrated with a small housing and day centre complex and located within walking distance of some local shops and public transport, and with access to outdoor open spaces. The home provides residential care as well as short break and respite opportunities for older people over 65 who require personal care, including those living with dementia. Barclay Gardens comprises 40 individual rooms are organised as single bedrooms with full ensuite facilities, and residents have access to separate specialist bathing/shower facilities which are a good size. A guest suite is available for visiting relatives or friends. Resident rooms are organised within 4 units, each with its own kitchen-dining-sitting room for communal activities. There are 3 EMI units where residents have a

variety of conditions - some with dementia and some with health conditions and palliative care.

An onsite ground-floor restaurant / communal dining room with chef provides freshly cooked meals for residents; visiting relatives and friends/visitors can also book for a meal here too.

An enclosed hard-landscaped courtyard garden is accessible for residents to enjoy the outdoors in the summer and when weather permits. The courtyard is overlooked by independent-living flats. Occasionally a resident needing care support in the Home will have a partner/spouse living independently nearby in an independent-living flat, though able to visit and spend time/the day with the resident on daily basis. A separate Day Centre, which shares an entrance lobby with the Care Home, is available to those living within the flats and local community, as well as any Care Home residents who wish to attend.



Views of the residents

Person-centred care with dignity and respect

We spoke with a resident's relatives/visitors in a unit sitting/dining room. They told us they were very happy with the care provided at the Home for their relative, and the excellent care and support provided by all staff. The relatives visited regularly, and they were always offered a cup of tea/coffee when they visited and made very welcome. They told us their resident relative was always clean, well dressed and happy. Staff made time to talk with residents and kept the relatives up to date with care needs, any changes, health, and events. The relatives were aware of the resident's care plan and with the resident were involved in reviews and any changes. The residents' room was warm and comfortable and had photos and other items to make the room personal.



Another visitor was in the unit lounge watching TV with their spouse, a resident. The relative told us they came every day and spent their day with the resident, joined them for meals and sometimes in the activities. The resident was in the care home and spouse lived in a nearby independent-living flat. The relative was very happy with the care given to their spouse resident, and the way the staff engaged with them too.



Residents we spoke to told us they were happy at the home, happy with their living environment and staff care. The staff and managers were good and looked after them well. They could choose (order) their meal choices which were cooked fresh onsite and could eat in their room if they wished. One resident mentioned there was a wide range of activities including those available in the Day Centre and trips out by taxi.

We talked with some residents who could not remember what they had eaten for breakfast or lunch that day. We heard that for some of the residents with dementia there can sometimes be confusion as the residents forget what choices they made earlier that day; however, the staff and dining room / chef were usually able to resolve this.

Resident / Relatives said:

I'm comfortable here - I like it.

I visit my wife most days - we watch TV and I have lunch with her...

The meals are ok - we have choices. I can either have my meal in my room or I can go to the dining room. Mostly I eat in my room.

The staff are very kind here



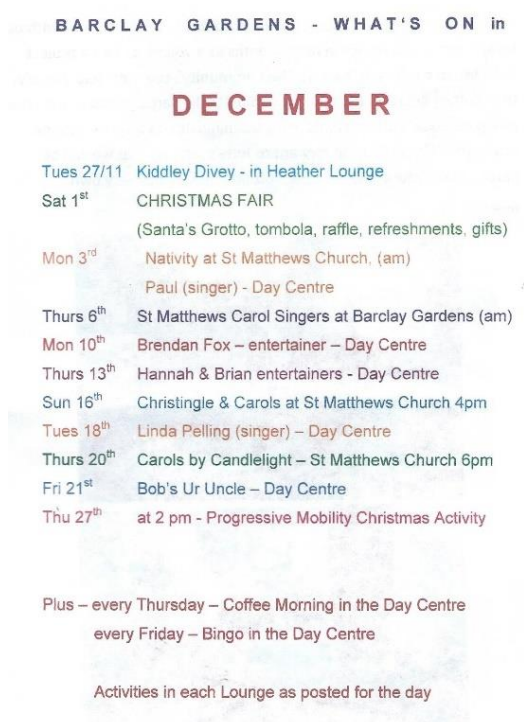
One resident had had additional handrails put into the resident's room and other aids to assist using the wash basin. The resident was able to clip the 'call bell' to clothes when moving around their room. The resident's bed seemed small for the resident's size which the resident commented was uncomfortable.

A Donnington Practice GP doctor visits every Thursday; the Home sends a visit list and sometimes the doctor will visit twice if needed. Residents' can retain their own doctor of choice. Residents in need of nursing care are supported by regularly visiting district community nurses who deliver nursing-specific needs such as apply dressings and special skin-wraps, giving insulin injections etc, and community psychiatric nursing. District Nurses have also provided training to Carers in the application of special skin wraps. Residents also have access to appointments with vision care services including opticians, Occupational Therapy, Community Mental Health Services and Memory clinic services, and via GP referral a private Chiropractor. Every 6 months oral care champions and dentist appointments are arranged.

Activities and Independence

A schedule of organised activities and events is supported with allocations of activities to each of the units. Some activities take place in the day centre -for example seasonal celebrations such as Carols, and other visiting events such as entertainers, visiting schools. Residents from a unit attend the activities of choice in their unit or can go to another unit if they want to. Activities in each unit are led and supervised by a unit lead and include activities such as craft work, knitting, Bingo, special birthday/tea parties, pamper day, etc.

A record of resident likes, dislikes and preferences including the activities and events they have engaged with is maintained and available for staff and the activities coordinators. In one unit we saw residents involved in making Christmas decorations, while some residents were knitting (the TV was not on here at the time). The hairdresser visits are popular available more than once a week at a modest additional charge.



Several residents told us they appreciated singing at the Carol Concert they attended. One resident with dementia said they would have liked to go but they had forgotten that staff had told them about this several times and on the day.

One resident told us they liked to be active but commented that they had to rely on walking about as there were not any other facilities for them to exercise. We were told that residents participate in exercise activities in their units that



including arm-chair hoop-la, football and tennis. The resident did not comment on these arranged exercise-activities, which may not have been the type of exercise wanted or sufficiently 'active' for them.

Resident / Relatives said:

I like to watch TV and do things I have friends here.

**There are lots of activities for our relative
Our relative has been on trips.**

The newsletter described several events that had occurred with some pictures of residents taking part. One volunteer from Asda had brought in flowers and greenery for the residents to try some flower arranging. Other activities they were looking forwards to included making 'mocktails' and a music quiz. The newsletter also described a trip made by some residents to the local Theatre in Donnington to see a play; photos showed the residents were having a great time.

Occasionally as a special treat for a meal is provided - a take away supper or 'fish and chips' which the Home serve in paper wrappings, reminding the residents of their experiences of their past; photos appear in the Home's monthly newsletter.



Feedback on care meeting the needs of those living with dementia



In an upstairs dementia unit, we noted a calming atmosphere. Staff were present in the unit dining/sitting room and were responsive to resident needs, either asked for or anticipated. A resident was helped to the table, and reassurance given to a particularly distressed and agitated resident who was dressed in a casual 'lounging suit'.

A downstairs unit was particularly pleasant decorated in cheerful colours. The staff on duty were attentive and compassionate in their care and support of the residents. A visiting friend told us they were positive that the resident had made good progress since being placed in the home, and the visitor was hoping the placement would become permanent.

Doll therapy is encouraged for those residents who benefit from this therapy which provides a doll (or teddy/similar) for that person to interact with and gain enjoyment from holding or simply being with the doll. This might remind the person of a time when they had young children of their own, or encourages good feelings related to reminiscence or affection, or a sense of purpose and can improve communication. We noticed one resident with dementia who had her doll sat on a chair next to her.

Staffing levels and training for staff

During the day there are 7 staff on duty in each of 2 shifts (8.00am to 3.00pm; 3.00pm to 10.00pm) and 4 on duty at night (10.00pm to 8.00am). EMI units have 3 staff, and 1 is residential. There are also support and relief care staff, an assistant manager (sift lead) and shift managers. Support includes housekeeping, maintenance, as well as a catering manager with 2 assistants/support workers. There are 2 Activities Co-ordinators who job-share and support weekends too. There is a very low turnover of staff; after leaving for a job elsewhere, management have found staff often want to return.

All staff, including those recruited who are experienced, receive Home induction and Policies training as well as Corporate Induction at Coverage Care. Staff must pass the probation period which is 3 months. Training for all staff includes on-line courses, include DoLS (Deprivation of Liberty), Safeguarding, Food & Hygiene, Infection Control, Mental Capacity Act, and medicines training. Staff have Dementia training. Managers, Team Leads and Seniors have a medicines management system walkthrough. Staff can administer medication once full training has been given, and staff competencies are regularly checked. Staff are encouraged to study QCF (formerly NVQs), and work experience opportunities are supported. Management development is encouraged through a company programme. One person who was on work experience following 6th Form and now



following a Level 3 Diploma Course, told us it was a bit overwhelming at the start, but the team were very nice and helpful.

One staff member we spoke to explained they had been at the home a few weeks and found it a great place to work. The staff member had received some on-job training and some on-line training. Another staff member 'had been there for some time and found the staff work together well'; they commented on the low turnover of staff. The staff member indicated that they do try to spend time with the residents as well as their care and support time, but this is not always possible.

Staff told us that management was good, very open and discussed problems and issues, and were receptive to improvement suggestions. The home operates a monthly STAR (Special Thanks and Recognition) initiative where residents, visitors/relatives and staff colleagues can nominate someone who has gone the 'extra mile'. We noted this advertised on one of the notice boards, encouraging participation.

Observations

During the visit the authorised representatives observed interactions between staff and residents, and looked at the physical environment

Staff interactions with the residents

We noticed staff interactions with residents and visitors were good - staff were cheerful when talking with the residents and visitors, clearly knew each individual resident by name, and were able to engage demonstrating they knew about the individual residents - their capabilities, likes and preferences. Staff observed were respectful in supporting and providing personal care. Staff were seen ensuring they lowered their heads/faces to an appropriate level when talking with seated residents.

The environment of the home

The reception area (shared with Day Centre) has some easy-seating and a water dispenser, and several notice/information boards. These displayed a good range of health and safety information including information about abuse reporting, alcohol, pharmacy services, H&S Fire Marshalls & fire instructions, as well as requests for Feedback on services and staff, and poster listing the planned activities and events for the month, and reminder about regular Coffee morning and Bingo sessions in the Day-Centre . We noticed that the boards needed tidying with several notices overlapping making it difficult to access the information.

On the ground floor, off the entrance lobby, is a purpose-built well-equipped hairdressing salon which provides a reasonably-costed hairdressing service for residents.



The courtyard/garden area is set with seating areas, pergola and some raised flower beds enabling residents interested in doing gardening with opportunities as they wish.

The dining room/restaurant is light, airy, and decorated in pleasant neutral colours, with most tables set for 1 or 2 diners, and some larger table arrangements. Space between the tables/chairs seemed restricted for wheelchair users. Brightly coloured china cups and plates for tea were stacked on a trolley giving the room a homely atmosphere.

Access from the reception to the dining room and residential areas on both floors is operated by keypad combination lock, and these are also used for doors leading to Dementia units. There is a lift to first floor for those in need.

Corridors were clean and with a variety of art-work pictures on display, though some seeming quite long, and upstairs corridors in areas seemed dark with less natural light and felt less homely. Where appropriate, signposting was clearly visible with different colour backgrounds and placed at eye level, though limited use of pictorial signs to help residents identify things. A clock in one of the unit dining/sitting room has roman numerals which may be hard for residents to read and several clocks were quite small; we did not notice any display of date/day in unit lounges.

Resident room door signs were small, but there are boxes on wall by each resident room for them to place in some personal picture or other item; several were not being used. Resident rooms were reasonably sized in the main, warm, clean with personal effects such as photos and other items and cheerful curtains. One resident had evidence of their hobby in their room. Some resident rooms had safety mats by the beds, and other safety equipment was noticed. Rooms have a telephone point (for resident-provided phones) and residents can have a TV in their room.

Summary of Findings

- Residents told us they are happy living in the home and feel supported and cared for by the staff.
- Staff are caring, cheerful and kind interacting with residents, and work well as a team.
- Meals are fresh-cooked and appreciated by residents, with occasional special treats.
- A varied programme of activities is provided for residents within units, the Day Centre, and includes trips out to special events.



Recommendations

- Include some pictures on the month's activity listing/schedule displayed on notice boards to help residents recognise the advertised event/activity.
- Periodically check notice boards to review and re-arrange notices to reduce/prevent overlapping.
- Periodically review room-facilities with residents to help identify concerns/issues such as bed comfort etc
- Consider use of pictures to help residents with signage.
- Consider replacing small clocks and those with roman numerals provided in each unit with clocks that also provide day and date.

Service Provider Response

Healthwatch Telford & Wrekin received the following response to this Enter & View visit and report from the manager of Barclay Gardens Care Home in December 2018.

“Thank you for your report.

Relative-resident relationships are a big part of Barclay Gardens and they enjoy visits in the home, and they are encouraged to play an active role in all aspects of their loved-one's care. They enjoy meals together in the restaurant and join in with the activities in the home.

Residents are encouraged to bring some of their own belongings on admission with personal photos and memories. Residents are offered a wide variety of choice from the menu's and offered alternatives if the choices of the day are not to their personal taste. Home-made cakes are offered on a daily basis.

We offer a wide variety of activities from gardening, theatre trips, various physical games, painting & drawing sessions plus much more and all residents are encouraged to attend. Dementia clients are encouraged to attend all social events, but they cannot always remember attending the activity.

We have an excellent rapport with the local GP practice and other professionals, and we are part of the red bag scheme with the multi-disciplinary team. Barclay Gardens was also involved in the pilot scheme through the NHS “care to smile” project where oral care is monitored closely, and a dentist visits the home.

We support local colleges and regularly have work experience placements at the home who are completing their level 2 or 3 in social care. From the last placement one of the students has now been employed as a relief carer. Four years ago, we started an apprentice who has been focused and a conscientious



member of the team and by completing her training and working hard is now an assistant manager. This is one of the benefits of working for Coverage Care there are always opportunities for staff to progress in their chosen career.”

The manager has also provided the following information in response to our recommendations:

“A lot of the recommendations have now been completed (as the visit was in December 2018).

Pictures on the monthly activity listings: The ones on the units do contain pictures the ones in the foyer don't has this is just for visitors to let them know what is happening in the home.

Notice boards reducing overlapping: These are checked regularly and during visit there were more than normal due to the extra activities that were going on in the home due to it being the Christmas period.

Review room facilities: this is done on a monthly basis when all care plans are reviewed and we have not been able to identify which resident you were referring to when you report the bed being small as all residents who we have spoken to are happy with their current beds.

Usage of pictures to help residents with signage: Currently ordered 27 new signs these should be with us anytime now.

Consider replacing small clocks and those with roman numerals on: The clock with roman numerals on is in the residential lounge and donated by a resident. This isn't a dementia unit. Day & dates are displayed in the dementia units on blackboards and we are currently looking at replacing the small clocks.”



Acknowledgements

Healthwatch Telford & Wrekin would like to thank the residents and staff of Barclay Gardens Care Home for their contribution to the visit and our Enter & View programme.

Get in Touch

Please contact Healthwatch Telford & Wrekin to share your views and experiences of this service or any other health and social care service in Telford & Wrekin or received elsewhere by people living in Telford & Wrekin.

We gather comments anonymously and share them with the public, service commissioners and providers to highlight areas of good practice and identify areas for improvement.



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