

Enter & View

Report

Rowley Hall
Nursing Home
6th November 2019



<http://healthwatchstaffordshire.co.uk/>
email: enquiries@healthwatchstaffordshire.co.uk
[Freephone 0800 051 8371](tel:08000518371)



Part of the Healthwatch Staffordshire remit is to carry out Enter and View Visits. Healthwatch Staffordshire Authorised Representatives will carry out these visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows 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 Staffordshire Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Staffordshire safeguarding policy, the service manager will be informed and the visit will end. The Local Authority Safeguarding Team will also be informed.

Provider Details

Name: Rowley House Nursing Home

Address: 26 Rowley Avenue. Stafford, Staffordshire ST17 9AA

Service Type: Nursing Home - caring for adults over 65 years, physical disabilities, sensory impairments and dementia.

Date of Visit: 6th November 2019

Authorised Representatives

This visit was made by two Authorised Representatives of Healthwatch Staffordshire.

Purpose of Visit

Independent Age, a national charity, have developed a set of 8 Quality Indicators for care homes. We are including an evaluation, based on our findings on the visit, of these quality indicators, which are as follows:

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 individual resident, their needs 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 regularly see health professionals such as GPs, dentists, opticians or chiropodists
7. Accommodate residents personal, cultural and lifestyle needs
8. Be an open environment where feedback is actively sought and used

The methodology to be used is to;

- Talk to residents about all aspects of their care and whether this is delivered in a way that promotes their dignity and independence including the ability to make choices about their daily lives.
- Talk to residents about staffing levels and whether they feel safe with the level of the care provided.
- Talk to relatives, if they are available to ask if they are happy with the care provided to their relatives and whether they are aware and feel able to report any concerns/ complaints.
- Speak to staff about training, turnover, support staff levels.
- Observe interaction at all levels between residents, staff manager, and visitors.

Physical Environment

External

The home is set back from the road. The signage is clearly visible from the road, this gives the name of the home and contact details. There is a car park to accommodate staff and visitor parking. Access to the building is up several steps, though there is a ramp to allow for disabled access. There are gardens to the front and rear of the home; these contain mature shrubs and trees. The gardens appear well maintained. There is external CCTV, which we were told is in working order.

Internal

Access to the home is via the front door which has a working bell. On arrival we were met by the manager and area manager and we were asked to sign the visitors book. There is no internal CCTV. The managers and administrators offices are located at the front of the building. There is a large reception area to welcome visitors.

We were shown around the communal areas of the home and some of the residents bedrooms. There was a pleasant odour throughout the home. All areas observed were clean and tidy. The home is presently being refurbished; some rooms have been completed. We observed maintenance work around the building and we noted clear warning signs of this work. The corridors were free of clutter. The décor is bright and well maintained and all furniture appears in good condition. We were invited to look around the refurbished bedrooms. These were tastefully decorated and personalised with service users own soft furnishings: For example one service user had a pretty throw and matching cushions.

Resident Numbers

The home has a capacity for 36 residents. On the day of our visit there were 26 residents.

Staff Numbers

During the day there are 2 trained nurses, 3 carers, 1 activity co-ordinator, 3 domestic, 1 laundry member, 2 catering staff, 1 administer and a member of management. During the evening and night shifts there is 1 trained nurse and 3 carers.

Agency Usage

We were advised that the home does use agency staff if a member of staff calls in sick. We were told this isn't a regular occurrence, perhaps once every few weeks. Indeed, during our visit the home was waiting for an agency carer to attend.

Management

Management - A good care home should have strong visible management.

The manager should be visible within the care home, provide good leadership to staff and have the right experience for the job.

Our findings

The manager had only been in post for 2 days. The home has been managed by the deputy manager for a considerable time supported by the area manager. We met with the new manager and area manager who gave us their vision for the future.

They told us about their wish to form a residents and relatives committee, and to seek other ways of obtaining views, opinions and suggestions for the home. Another vision is to carry out a more comprehensive training audit to establish individual training needs.

Comments

Although the manager is new to this post, she is experienced and has managed a home before. It was interesting to hear her explain her clear vision for the future.

Staff Experiences and Observations

Quality Indicator 2 - Have the staff the time and skills to do their jobs

Staff should be well-trained, motivated and feel they have the resources to do their job properly.

Our findings

The staff we met with and encountered on our visit were very helpful and cheerful. Each one greeted us and were happy to provide us with information and answer our questions.

Staff we met with were happy to tell us about the mandatory training they undertake every year, e.g. safeguarding, health and safety etc. They told us that they complete training online, however if they wish to attend any other external training events then this is discussed with the manager and accommodated if appropriate to the needs of the home and residents.

The manager showed us the training matrix. This clearly details which staff have completed which training, and highlights any training that is still pending. The training records of members of staff we looked at showed all training was up to date.

The staff we spoke to told us they feel well supported by management despite the absence of a permanent manager in recent times. They explained that they feel senior staff are approachable and they feel comfortable to voice their opinions and make suggestions. One member of staff did say there were quite a few occasions when there were not enough staff, this was mainly due to staff calling in sick.

Quality Indicator 3 - Do staff have good knowledge of each individual resident, their needs and how their needs may be changing

Staff should be familiar with residents' histories and preferences and have processes in place for how to monitor any changes in health and wellbeing.

Our findings

The staff we spoke to told us that each service user has a care plan which they have access to. They explained what was recorded in the care plans; this being physical care needs and also personal preferences such as hobbies and interests, religious beliefs and other details important to the individual. We were told how Care plans are updated on a regular basis. Staff have a handover period at the beginning of each shift where a verbal report is given to the new shift.

Comments

Staff morale is good. We observed staff working together and noted that there was good communication and respect for each other. Staff were happy to chat to us and answer our questions in a transparent way. Some staff have been employed by the home for several years.

Activities

Quality Indicator 4 - Activities - Does the home offer a varied programme of activities?

Care homes should provide a wide range of activities (and ensure residents can access these) in the home and support residents to take part in activities outside the home.

Our findings

We spoke at length to the activities co-ordinator. She told us she has been in post since February 2019.

The activities co-ordinator carries out group activities such as art and crafts with small groups and also one to one activities with individual residents. For example, some service users like to be read to, play a game or have a manicure. She told us she finds out what service users enjoy by reading the care plans and talking to them about their personal interests. The co-ordinator often plans activities around a theme and arranges special events. We heard how the residents had just had a Halloween party following activities to make Halloween decorations to decorate the main lounge. The co-ordinator told us that there was an outing planned for remembrance Sunday for those residents who wanted to attend the local cenotaph. We were told that residents are welcome to leave the home for shopping trips etc, either with relatives or staff if staffing allowed.

Comments

There is a programme of activities planned. The co-ordinator offered to show us her programme. However, she did tell us that when the home is short staffed she was required to help on the care side and therefore, there are occasions when activities do not take place as planned.

Catering Services

Quality Indicator 5 - Catering - Does the home offer quality, choice and flexibility around food and mealtimes?

Homes should offer a good range of meal choices and adequate support to help residents who may struggle to eat and drink, including between mealtimes. The social nature of eating should be reflected in how homes organise their dining rooms and accommodate different preferences around mealtimes.

Our findings

The dining room is delightful. The room has the feel of a vintage tea-room and has been tastefully decorated. The french windows look out on to the rear garden and tables are arranged to make mealtimes a social occasion. The home accommodates individual dietary requirements; at present there is a diabetic resident. There is a choice of 2 meals at each mealtime. The kitchen is situated next door to the dining room and meals are served freshly prepared.

We were able to observe lunch time during our visit and spoke to two service users and one family member. All praised the food, one said it was '*always hot and tasty*'. A relative was having lunch with their family member. They praised the quality of the food and how accommodating the catering staff are.

One resident told us '*I'm having trouble with my teeth so they mash it up for me so I can eat it more easily*'.

Nobody we spoke to had any complaints about the food, they felt there was a good choice, it was of good quality and very well cooked. The food we observed looked very appetizing. All crockery was available and suitable for individual use.

In between meals service users are offered hot and cold drinks upon request along with snacks and biscuits.

We were told some residents had their meals in their rooms. Those that required Assistance with eating and drinking is given to those who require support at mealtimes. Food and drink intake is monitored and record on residents care plans.

Comments

The home provides a catering service that meets the needs of individual residents. The food is of an excellent standard. From our observations, mealtimes are a relaxed and sociable occasion in a delightful dining room.

Drinks and snacks are readily available at all times.

Resident Experiences and Observations

Quality Indicator 6 - Does the home ensure that residents can regularly see health professionals such as GPs, dentist, opticians or chiropodists?

Residents should have the same expectation to be able to promptly see a health professional as they would have when living in their own home.

Our findings

All residents are registered with a GP and a dentist. Should an individual require an appointment then they are accompanied by a member of staff if a relative is unable to take them. Staff will arrange transport if required. T

There is a visiting optician and chiropodist. The optician carries out regular eye tests. The chiropodist administers foot care to those that require it. Should service users wish to see a different optician or chiropodist then they are free to do.

Quality Indicator 7 - Does the home accommodate residents personal, cultural and lifestyle needs?

Care homes should be set up to meet residents cultural, religious and lifestyle needs as well as their care needs, and shouldn't make people feel uncomfortable if they are different or do things differently to other residents.

Our findings

Each resident has an individual care plan that details their cultural, religious and personal needs. These are discussed on admission. We spoke to several service users who told us that the home is very accommodating when it comes to implementing their wishes. Each service user has their own clothes and given a choice of what to wear. Personal choices such as bedtimes are accommodated.

All of the residents that we spoke to said they didn't have any complaints and that the staff carried out their wishes as far as is reasonable. All residents that we spoke to praised the staff, one person had been a resident for nine years and told us she had everything she wanted and needed.

Service users told us that they felt safe and well looked after.

The manager told us that the home is establishing links with the local churches of different denominations.

Family and Carer Experiences and Observations

We spoke to one family member who told us that they were very happy with the home and the care their relative received. They said 'it's much better than the last home he was in' The relative told us that they were always made welcome and invited to stay to lunch.

Quality Indicator 8 - The home should be an open environment where feedback is actively sought and use.

There should be mechanisms in place for residents and relatives to influence what happens in the home, such as a Residents and Relatives Committee or regular meetings. The process for making comments or complaints should be clear and feedback should be welcomed and acted on.

Our findings

There is presently no residents and relatives committee or regular meetings; however the manager told us that this is something she is looking at implementing in the near future. Residents and their families are encouraged to verbally express their views and opinions on an informal basis.

The home has a complaints procedure; this is clearly displayed in the reception hall and is visible at wheelchair height.

We were unable to ascertain how management has responded to complaints and suggestions as the manager is new to the post and the deputy manager wasn't on duty at the time of our visit.

Summary, Comments and Further Observations

From our discussions and observations, the residents and relatives are happy with the service provided by the home. There is good staff morale and staff provided good individual care to the residents and were happy with their working environment and the management of the home.

The refurbishment of the home to date appears to be of a good standard. The home is clean and comfortable with a happy and relaxed atmosphere.

The catering is good with everyone being pleased with the quality of the meals.

Recommendations and Follow-Up Action

It is recommended that the home makes it a priority to implement the residents and relatives committee so views, suggestions and any complaints are noted and acted upon formally. It may also be useful to consider surveying residents and relatives periodically to enable them to give feedback about the home - this could be used to demonstrate consistent quality of care.

It is recommended that cover for staff shortages be arranged so that the Activity Co-ordinator does not have to cancel activities with groups or individuals in order to provide care. Good and regular activities are an important contribution to people's wellbeing.

Provider Feedback

Healthwatch have not received any feedback at the time of publication.

DISCLAIMER

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



Healthwatch Staffordshire

Room 31, Staffordshire University Business Village
Dyson Way, Staffordshire Technology Park
Stafford ST18 0TW

<http://healthwatchstaffordshire.co.uk/>

email: enquiries@healthwatchstaffordshire.co.uk

Freephone 0800 051 837

Part of (ECS) Engaging Communities Solutions

