

HW Reference: 20190219
Time & Duration of Visit: 10.00am - 1.50pm
Number of people engaged with: 10
Managers Name: Mike Lythgoe

Enter & View Residential Care Report 1/2019

Specialism/Service: Accommodation for persons requiring nursing or personal care, Dementia, physical disabilities, caring for adults over 65 years

The Old School House Residential Care Home

Main Road, Gilberdyke, East Yorkshire HU15 2SG

Date of visit: 18th February 2019

Date of publication: 30th April 2019

HWERY Representatives: Denise Lester & Michelle Harvey

Disclaimer: This report relates only to the service viewed on the date of the visit and is representative of the views of the service users who contributed to the report on that date.

Main Purpose of Visit

This home was initially visited by Healthwatch East Riding of Yorkshire (HWERY) in November 2017; following a routine 12 month re-visit to the home to check on recommendation progress, the home requested that HWERY use the E&V process to inform them of further recommendations to help them implement changes to support their on-going improvement and development programme - this was the first planned visit used for this purpose.

Summary of Key Findings

The Old School House and Courtyard is a residential care home providing accommodation and care for up to 41 older people some of whom are living with dementia. The accommodation is provided in two distinct areas dependent on level of need. A third area 'The Courtyard Bungalow' is undergoing a change of use and is being re-developed into a facility specialising in mental health; this area and part of the garden are currently 'out of bounds' due to ongoing building work. The kitchen is also undergoing refurbishment.

Recommendations/Observations

Since the initial visit from Healthwatch the new manager and deputy have implemented many of the initial recommended changes and both acknowledge that they are in a period of on-going improvement and development. In the long term, improvement lies in the creation of a staff culture which is accountable and more open to change. In the short term, however, Healthwatch recommends the following as being relatively easy to achieve and a starting point for on-going improvements and future development:

- All staff to be provided with and to wear name badges.
- Signs or posters to be displayed around the home to detail daily menus, activities/trips out, a calendar, the weather. These to be current, visible and easy to read. A clock to be provided for the main lounge.
- A dining area to be defined in the large main lounge using the round tables and window space already available. Tables to be set with cutlery, napkins, condiments, by a designated member of staff possibly with help from residents. Residents who are able, to be encouraged to take their meals at these tables to promote and encourage social interaction.
- Re-launch the 'Key Worker' system. Specific responsibilities should be outlined to staff for the residents that they are responsible for; residents should be made aware of their 'Key Worker' and their specific responsibilities - in part by the introduction of posters on the back of residents doors (an example of which has been supplied by HWERY).



Full Report

Background

Local Healthwatch has a number of specific statutory activities that it is required to deliver, defined in five Healthwatch Quality Statements, specifically

- Strategic Context & Relationships
- Community Voice & Influence
- Making a Difference Locally
- Informing People
- Relationship with Healthwatch England

Within the context of Enter & View:

Under its remit of 'Community Voice & Influence', Healthwatch has a responsibility to support local people to share their experience and opinions of local services.

Under its remit of 'Making a Difference Locally', Healthwatch has a responsibility to capture the experience of local people in our research and reports, use the opinions and experiences of the public to produce recommendations for change and ensure our recommendations for change are heard and responded to by relevant decision makers.

Under its remit of 'Informing People', Healthwatch has a responsibility to ensure that we provide the public with accurate, reliable, relevant and useful information about local services, when they need it, in a format that meets their needs.

Main Findings

How safe is the setting for service users?

By safe we mean people are protected from abuse or avoidable harm.

On arrival, the member of staff in the entrance was aware of the visit from Healthwatch and a signing in book was available.

The main entrance is secured via a keypad with a bell provided for staff to answer as visitors arrive; areas of the home which are not accessible to residents are also secured with keypads, which offer a much improved level of safety for residents since the last full visit by HWERY in November 2017. The home appeared clean with no discernable odours present throughout and hand gel to aid infection control is available to use throughout the building.

First impressions are that areas of the home are 'tired' and are in need of redecorating and refurbishment in places, though some areas have been redecorated and much improved since the last full visit in November 2017; however it is understood that this is an ongoing process which will take time to complete. Areas that were undergoing refurbishment were kept out of bounds for residents to maintain a safe environment. The home has a handyman who was praised by the manager for his work and attitude and was busy on the day of our visit.

A call system is in place which sounds an alarm and indicates the area where assistance is required on a board sited in a corridor. The alarm was activated a number of times during the course of the visit and reaction/response times to the alarm seemed to vary; however, residents we spoke with said that they felt safe and that a member of the care staff would always be available to help them if required - although they did not actually know what the sounding alarm was for.

Fixtures and fittings supported mobility and independence and appeared to be maintained to a safe condition. Main areas of the home were kept free from clutter and any potential trip hazards for residents which again, was much improved since the last full visit in November 2017.

The food hygiene rating at the home has recently dropped from 5 (very good - the highest score possible) to 2 (improvement necessary); the Food Standards Agency Report shows that this is due to the physical condition of the kitchen which is subsequently undergoing refurbishment to address the areas of concern, rather than the management of food safety which was found to be generally satisfactory and hygienic food handling which was good.

How effective do service users consider the service to be?

By effective, we mean does residents care, treatment and support achieve good outcomes and promote a good quality of life?

All staff were clean and tidy and wore a uniform which were of different colours according to their role; none of the staff however wore name badges which made them difficult to identify for both residents and visitors.

Fixtures and fittings supported mobility and independence. We saw handrails fitted to walls, those in The Courtyard were painted in the same colour as the walls; although the more recently decorated School House part of the building had more effective contrasting handrails to aid residents with a visual impairment or those living with Dementia - this should be extended to all areas of the building as part of the refurbishment programme.

We saw a hoist being used effectively to move a resident to a chair in the lounge.

During the course of the visit we heard some examples of staff effectively communication with residents to help them decide on their lunchtime meal choice; however at other times staff seemed less engaging with residents although not unpleasant.

There was a weekly rotating menu which was varied and provided a choice for residents; however the only menu which we saw on display for residents was not current and was a small A4 poster on the wall of a corridor, making not particularly visible and quite difficult for residents to read. Several residents we spoke with were happy with the food provided and said they were given 'plenty to eat', another said 'We get a choice of food, but they'll always get you something else'.

Residents mostly ate alone at portable tables in the large lounge although large dining tables are available; this meant that some residents had not moved from the same chair throughout the course of the visit and that they had only interacted with any person that had chosen to directly approach them. We felt that mealtimes could be made a more social and enjoyable occasion by setting tables and encouraging residents to sit together, improving both the social interaction of residents and their physical movement.

Some residents required help with feeding and we saw care staff providing support where needed, although we also saw one gentleman who had fallen asleep with his food untouched in front of him - no support was being offered to him and the meal remained in place for some time and would have gone cold during this time. One resident also told us 'I sometimes feel rushed when I'm eating'.

We viewed garden areas and patios from inside the building; although much of the outside area is not presently in use due to the ongoing building works. Several of the residents we spoke with said that they would like to be able to sit outside, one told us 'I'd like to go outside to drink my cup of tea when the weather is nice - I'm a country girl and that is what I'm used to at home'. The home has now purchased a number of pet rabbits which are housed within the inner courtyard for residents to spend time with and enjoy should they wish.

How caring do service users find the service?

By caring, we mean that the service involves and treats people with compassion, kindness, dignity & respect.

We saw that staff spoke with residents in a compassionate and caring way and appeared to know their likes and dislikes. Residents spoke highly of the care staff and the support and help they received; we observed however that staff were busy carrying out tasks and spent little time talking and interacting with residents unless they were directly involved with carrying out their immediate care needs.

Presently residents do not have active named carers/key workers, although the manager and deputy said that they believed this had been something that had been in place in the past, the system was not currently being applied and could be an area of improvement for the future.

Residents had their own rooms which they were able to personalise with their own possessions. One married couple with spoke with were able to share a double room and were very happy with their accommodation, they told us 'We spend most of our time in our own room together, we like just talking to each other and just being in each-others company. We generally come out for meals and other things now and again, but we're very happy in our own space'.

There is now a part-time designated activities coordinator in post and the role is shared between other members of staff when they are free or the activities co-ordinator is not in. There were photographs of residents engaged in various activities but none of these were current. A number of residents we spoke with felt there was little offered for them in the way of activities apart from watching the television, but one told us 'I know there is a bingo and a quiz sometimes and chair exercise once per week, but other than that I don't know'. Residents spoke only of one trip out which was to a local garden centre.

Although there is not a dedicated hairdressing room a hairdresser does visit the home on a regular basis.

How responsive to their needs do service users find the service?

By responsive, we mean that the services meet people's needs.

The care home offers respite and day care for those that require it.

There is a complaints procedure in place, but none of the residents we spoke with had ever made a complaint; they felt however they could speak with any of the carers or the manager if necessary. Residents told us that they felt they were well cared for and that help and support was always available if needed.

One resident told us 'I like it here - there's plenty of space especially for when the grandchildren visit, we can fit everybody in'.

The home do not currently hold residents or relatives meetings; however the deputy manager told us that they have recently distributed questionnaires to relatives and are in the process of gathering responses, ready to form an appropriate response or carry out relevant actions.

How well-led do service users consider the service to be?

By well-led, we mean that the leadership and management assures the delivery of high quality and person-centred care, supports learning and innovation and promotes an open and fair culture.

The current manager and deputy have told us that they are aware that there are still many improvements to be made to bring the home up to the required standard and to the standard that they personally envisage for the home. They have expressed a wish to

engage with Healthwatch East Riding to support them in bringing about necessary improvements by using the Enter & View process as a way of implementing resident led recommendations.

One resident told us felt that the home had improved since the present manager had been in post.

In the long term, improvement lies in the creation of a staff culture which is accountable and more open to change and this should be led by the current management team.

The manager told us that he felt staffing levels were adequate and that recruitment was never a problem; most of the staff currently in post are from the two local villages.

Two members of staff we spoke with said that they very much enjoyed working at the home. They also said they would particularly miss the residents and couldn't imagine working anywhere else, they felt that they had received all the training they needed but had difficulty remembering what it was.

Response from Setting:

I found the report to be accurate and a true reflection of all areas observed and discussed.

A very helpful and positive visit, we have asked for and agreed further support and visits to ensure we reach and maintain the standards we aspire to.

Signed on behalf of HWERY	<i>Matthew Fawcett</i>	Date: 30/4/19
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