

Enter and View Report

Name of Setting: St Mary's Care Home

Name of Manager: Emily Brizzalari

Insert address: Speedwell Crescent, Scunthorpe, North Lincolnshire, DN15 8UP

Date of visit: Tuesday 19 May 2022, 2pm to 3.30pm Date of publication: 22/09/22

HWNL staff & volunteers involved in the visit: Annabel Tindale & Denise Fowler

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

What is Enter and View?

Enter and View (E&V) is the statutory power granted to every local Healthwatch, which allows authorised representatives to observe how publicly funded health and social care services are being delivered. Healthwatch North Lincolnshire (HWNL) use powers of entry to find out about the quality of services within North Lincolnshire.

Enter and View is not an inspection, it is a genuine opportunity to build positive relationships with local Health and Social Care providers and gives service users an opportunity to share their views in order to improve service delivery. Enter & View allows Healthwatch to:

- Observe the nature and quality of services
- Collect the views of service users (patients and residents) at the point of service delivery
- Collect the views of carers and relatives of service users
- Collate evidence-based feedback
- Enter and View can be announced or unannounced

Main purpose of visit

Enter and View visits can be part of the Healthwatch work plan or take place in response to local intelligence. Broadly, the purpose will fit into three areas of activity:

1. To contribute to a wider local Healthwatch programme of work
2. To look at a single issue across a number of premises
3. To respond to local intelligence at a single premises

This visit forms part of the Healthwatch North Lincolnshire programme of work and was carried out in response to feedback received about the care home.

St Mary's background

St Mary's Care Home is a privately owned residential care home (Visionary Care Ltd), registered for a maximum number of 47 residents aged 65 and above. Specialist care categories registered with the Care Quality Commission (CQC) include: old age, dementia and physical disability. At the time of the visit, 39 residents were living at St Mary's and the home employed 11 full time staff and 27 part-time staff, with any absences covered by bank and part-time staff.

A risk assessment was carried out by Healthwatch and the care home in advance of the visit to ensure the safety of staff and residents. Healthwatch representatives completed lateral flow tests before the visit to reduce the risk of covid transmission.

The visit - on arrival

The Enter and View visit was announced, so the manager of St Mary's knew that Healthwatch would be visiting on the specified day. This was a rearranged visit as the care home was closed due to a covid outbreak when Healthwatch had planned to visit in March.

Healthwatch North Lincolnshire representatives (HWNL reps) struggled to find the entrance to the care home as there was no signage to confirm the entrance. The door looked like an entrance into a lounge as opposed to a main entrance. HWNL representatives had to ask a staff member outside if it was the way in, which they confirmed and staff inside the building unlocked the door and welcomed the team.

The manager provided a tour of the building including all communal areas and invited the team to speak to residents and staff around the building. The manager informed HWNL representatives that a lot of residents have dementia so may struggle to answer a questionnaire.

Summary of manager's questionnaire

Before the visit, Healthwatch sent the manager a questionnaire to find out some general information about St Mary's, for example, the number of residents currently living in the care home, the number of staff employed at the home and what external health services visited the home.

Through the questionnaire, the manager confirmed she had been in post for three years. The CQC had recently visited but the inspection had not yet been completed. Before that the CQC's last visit was in January 2019. Changes implemented since the 2019 visit, which were requested by residents, have included: the home's layout and changes to the food menu and snacks.

Covid 19

The manager confirmed that covid policies are in place in the home and that any restrictions and updated covid guidance is communicated with staff through: supervisions, meetings and the communications book. Residents receive communications one to one and there is also a covid information board for those who are able to read/ understand the information. Families are kept up to date through email or letters.

When asked what restrictions had been put in place to keep staff and residents safe in relation to covid, the manager confirmed that: regular testing took place, staff wore PPE and had completed training on infection control and putting on and removing PPE. The home also monitors how many visitors are in the building at any one time, with set appointments for visitors. All visitors are asked to complete a lateral flow test before they visit and are encouraged to wear a face mask. If a resident tests positive for covid, the resident is isolated as much as possible and infection control guidance is followed.

Resident's health and wellbeing

In the manager's questionnaire, Healthwatch asked what impact covid restrictions had on the health and wellbeing of residents? The manager told us that at the start of the pandemic, restrictions had a massive impact on residents who became low in mood and spent more time in their rooms. The staff supported residents to stay in touch with friends and family through letters, facetime, a window pod and outdoor visits when restrictions/ the weather would allow.

When asked what barriers the care home faced when supporting residents to stay in touch with friends and family, the manager told us that when restrictions eased outside the care home, a lot of family members couldn't understand why they couldn't visit like they used to (restrictions were still in place in care homes). The manager also commented that government guidance wasn't easy to follow with a lot of grey areas.

Currently, the home continues to have visiting appointments to be able to monitor the amount of people in the building. Two adults can visit at any one time.

The home offers activities to residents based on what the residents would like. Arts, crafts, games and singalongs are on offer and trips out (weather permitting). The activity coordinator works one to one with residents to find out if there are certain activities they would like to participate in. Residents are provided information in easy read if required. Surveys are used to gather feedback from residents. Staff support residents to complete these if they cannot do so themselves.

External health services

The manger confirmed that access to external healthcare services hadn't changed during the pandemic, except GP visits. Nurse practitioners complete a ward round once a week and if another health care practitioner is needed the care home have to get in touch with the Emergency Care Practitioners to arrange a visit. District nurses, chiropodist and hospital appointments have all continued.

The only appointments that the care home have struggled to access has been GP visits to the care home. Many appointments have taken place via video calls, which has caused upset to residents who don't understand what is going on.

What did residents say?

HWNL representatives did speak to residents about life in the care home, but due to a lot of residents having more advanced dementia, they were unable to ask a lot of questions. HWNL representatives observed that residents all seemed happy and did not sound distressed when talking to them. Residents spoke about family and going home soon, which HWNL observed to be preferred topics of conversation for those living with dementia.

What did family and friends say?

HWNL representatives did not get the opportunity to speak to family or friends during this visit.

What did staff say?

HWNL reps spoke to two members of staff during the visit. Both staff members said they liked their role. When asked how they were kept informed regarding any changes to care or current covid procedures, staff said they kept up to date via their senior, manger, telephone, email, text messages and notice boards.

Staff said that measures to reduce the spread of covid were in place including: masks, Lateral Flow Testing, handwashing and hand gels and the isolation of covid patients when needed. Both staff said they felt safe working there and that they would raise

any concerns with the manager. As both staff had had covid before, they said they were not concerned about getting covid. Both staff members felt they had received sufficient training to carry out their role, but one staff member commented that they would like to attend practical training as well as eLearning. Both staff felt supported in their role and made the following comments:

“Emily makes me feel part of a team - I am not just a number, I’m part of a family.”

“If I have a problem I go to senior in charge or the manger. It’s a good home.”

Observations

HWNL representatives spent time observing interactions in the care home during the two hour visit. The home itself is set out in a square, all at ground level making it easy to navigate.

Control over daily life & dignity

HWNL representatives observed staff supporting residents to meet their needs, for example, one representative observed a staff member helping a resident around the home. The answering of the call bells received mixed feedback with one representative witnessing a call bell being answered promptly, however, on arrival, a call bell was heard ringing and it seemed to sound for a while. Finally, a representative witnessed a resident taking their medication in the main lounge.

St Mary’s has quite an extensive outdoor area, so the Manager was asked if residents can sit outside if requested. The Manager confirmed that residents can sit outside if they want to, but residents choose to sit in the lounge at the front of the building.

Personal cleanliness & comfort

HWNL representatives observed that residents looked clean and tidy. Resident’s footwear varied, some residents wore shoes or slippers but some resident’s wore only socks or had bare feet. Although HWNL reps understand this may be the choice of residents, they were concerned that socks or bare feet might be a slip, trip or falls hazard.

All staff wore a uniform and some wore name badges.

Safety & Covid 19

In terms of building safety, the door to the care home was locked on arrival ensuring the safety and security of residents and staff. HWNL representatives raised with a member of staff that there was a pool of water (possibly from a leaking radiator) near a door at the back of the building - this wasn't a hazard to residents as they were not in this area of the building. Staff were able to act on this straight away and get it cleaned up. Another hazard that was able to be actioned straight away when raised with the Manager was the cleaning of a bathroom that had faeces on the door handle.

When shown the activity room, one representative observed that a lot of activity equipment including nail polish was stored on the open shelves and was concerned that residents would have access to this as the door to the room was open.

In terms of Covid safety, all staff wore masks and staff were witnessed in full PPE (masks, gloves, aprons and visors), suggesting that full PPE is worn when necessary. There was a board near the manager's office displaying information about the latest covid guidelines and care home policies in relation to covid.

There were no other health and safety or safeguarding incidents identified during the visit.

Accommodation & cleanliness

A slight urine odour was detected on entering the care home. All furniture was seen to be clean and tidy and the décor throughout the home was bright and offered a lot of personal touches. There were themed décor areas throughout the home such as the beach and animals which added a nice touch for residents. Residents had their names displayed on their bedroom doors and some also had poems displayed that they had written with staff.

Food & nutrition

The Manager confirmed that residents got a choice of meals. There were no menus displayed in the care home, but the Manager explained that the residents are asked individually each day what meal choices they would like. One HWNL representative observed this taking place, but the menu didn't appear to include any pictures.

A drinks round took place during the visit, but it was observed that residents were given a drink and not asked what they would like to drink. No cold drinks stations were observed around the home during the visit or offered on the drinks round.

A board displaying information on nutrition and the Eatwell Guide was displayed near the Manager's office. The Eatwell Guide is an NHS initiative that shows how much of each food group you need to eat (E.g. fruit & vegetables, carbohydrates etc.) to achieve a balanced diet (NHS, 2019).

Activities & social participation & involvement

Activities were seen taking place in the home. On arrival residents were bowling in the lounge with the support of staff. There was music playing in the background and one representative saw the activity coordinator dancing with one resident to a song the resident was singing along to. Residents in the lounge took it in turns to throw a ball into a basketball hoop. Many residents took part and seemed to enjoy the activity encouraging each other to have a go. Some residents were asleep and some were watching TV in another lounge.

HWNL representatives did not witness any relatives visiting during the visit.

Other observations

The main observations that stood out were around fixtures and fittings being dementia friendly. The team observed that flooring was in line with dementia guidance as it was plain and matt in texture.

One resident was seen continuously walking around the building. The resident wasn't using any grab rails to get around and it might be they did not need these, but HWNL observed that the grab rails and walls were all white in colour and good practice guidance for the environment for people living with dementia is to have contrasting colours for grab rails (Alzheimer's Society, 2020.)

It was observed that in the communal bathrooms, toilet seats were a contrasting colour to the pan, but doors into the bathrooms and toilets were not a contrasting colour and did not include a picture displayed on the door of a bathroom/ toilet, only text. HWNL representatives did observe that bathrooms included non-slip mats, handrails and bath seats.

Conclusion

Overall, the care home was found to be clean, tidy and consistently decorated. Staff were observed supporting residents to get around the home and asking for their meal choices for the day. Activities took place during the visit and HWNL representatives observed residents taking part in activities as and when they pleased. Covid policies and measures were in place with all staff wearing masks and additional PPE when required. It was felt that more dementia friendly measures could be considered to ensure that residents can remain independent and to reduce the risk of slips, trips and falls when moving around the care home.

Healthwatch would like to thank the manager and all the staff at St Mary's for accommodating the Enter and View visit.

Themes & recommendations

The following themes and recommendations are made based on the feedback and observations made during the visit:

Theme: Building access & signage

Recommendation:

1. The entrance to the care home is confusing for people who have not visited before. Consider signage to make it clear how you enter the care home.

Theme: Falls prevention & safety

Recommendation:

2. Ensure all residents wear correctly fitting shoes, slippers or non-slip socks when moving around the care home to reduce the risk of falls.
3. Ensure activity equipment is kept secure when not in use so it doesn't become a hazard for residents.

Theme: Nutrition & hydration:

Recommendations:

4. Ensure that residents are asked what drink they would like and consider cold drinks stations in communal areas.
5. Consider the use of picture menus alongside written text when asking residents their food choice, to ensure menus are in a format that residents with dementia can understand.

Theme: Dementia friendly environment

Recommendations:

6. Good practice guidance (Alzheimer's Society, 2020) suggests grab rails should be a contrasting colour to walls to ensure residents can move safely around the care home and to reduce the risk of falls.
7. Ensure that bathroom and toilet doors are a contrasting colour with picture signage on the doors at a height suitable for residents (see guidance, SEIC, 2020).

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| Signed on behalf of Healthwatch North Lincolnshire: | Date: |
|---|-------|

References:

Alzheimer’s Society. (2020). *Making your home dementia friendly*. Available at: https://www.alzheimers.org.uk/sites/default/files/migrate/downloads/making_your_home_dementia_friendly.pdf [Accessed 30 June 2022].

NHS. (2019). *The Eatwell Guide*. Available at: <https://www.nhs.uk/live-well/eat-well/food-guidelines-and-food-labels/the-eatwell-guide/> [Accessed 14 July 2022].

Social care institute for excellence. (2020). *Dementia-friendly environments: Toilets and bathrooms*. Available at <https://www.scie.org.uk/dementia/supporting-people-with-dementia/dementia-friendly-environments/> [Accessed 30 June 2022].

Response to recommendations:

| Theme: Building access & signage Recommendation 1 | |
|---|---|
| Specific | What is the recommendation? |
| | The entrance can be confusing for people who have not visited before. The manager should consider signage to make it clear how you enter the care home. |
| Measurable | How can you measure progress and know if you’ve successfully met the recommendation? |
| | |
| Achievable | Is the recommendation achievable? Do you have the skills to achieve it? |
| | |
| Relevant | Is the recommendation relevant? |
| | |
| Time-bound | When will the recommendation be completed? |
| | |

| Theme: Falls prevention & safety Recommendation 2 | |
|---|--|
| Specific | What is the recommendation? |
| | Care home staff should ensure all residents wear correctly fitting shoes, slippers or non-slip socks when moving around the care home to reduce the risk of falls. |
| Measurable | How can you measure progress and know if you've successfully met the recommendation? |
| | |
| Achievable | Is the recommendation achievable? Do you have the skills to achieve it? |
| | |
| Relevant | Is the recommendation relevant? |
| | |
| Time-bound | When will the recommendation be completed? |
| | |

| Theme: Falls prevention & safety Recommendation 3 | |
|---|--|
| Specific | What is the recommendation? |
| | Care home staff should ensure activity equipment is kept secure when not in use so it doesn't become a hazard for residents. |
| Measurable | How can you measure progress and know if you've successfully met the recommendation? |
| | |
| Achievable | Is the recommendation achievable? Do you have the skills to achieve it? |
| | |
| Relevant | Is the recommendation relevant? |
| | |
| Time-bound | When will the recommendation be completed? |
| | |

| Theme: Nutrition & hydration Recommendation 4 | |
|---|--|
| Specific | What is the recommendation? |
| | Care home staff should ensure that residents are asked what drink they would like and consider cold drinks stations in communal areas. |
| Measurable | How can you measure progress and know if you've successfully met the recommendation? |
| | |
| Achievable | Is the recommendation achievable? Do you have the skills to achieve it? |
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| Relevant | Is the recommendation relevant? |
| | |
| Time-bound | When will the recommendation be completed? |
| | |

| Theme: Nutrition & hydration Recommendation 5 | |
|---|---|
| Specific | What is the recommendation? |
| | The manager should consider the use of picture menus alongside written text when asking residents their food choice, to ensure menus are in a format that residents with dementia can understand. |
| Measurable | How can you measure progress and know if you've successfully met the recommendation? |
| | |
| Achievable | Is the recommendation achievable? Do you have the skills to achieve it? |
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| Relevant | Is the recommendation relevant? |
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| Time-bound | When will the recommendation be completed? |
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| Theme: Dementia friendly environment Recommendation 6 | |
|---|--|
| Specific | What is the recommendation? |
| | Good practice guidance (Alzheimer’s Society, 2020) suggests grab rails should be a contrasting colour to walls to ensure residents can move safely around the care home and to reduce the risk of falls. The manager should consider changing the colour of the grab rail. |
| Measurable | How can you measure progress and know if you’ve successfully met the recommendation? |
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| Achievable | Is the recommendation achievable? Do you have the skills to achieve it? |
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| Relevant | Is the recommendation relevant? |
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| Time-bound | When will the recommendation be completed? |
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| Theme: Dementia friendly environment Recommendation 7 | |
|---|--|
| Specific | What is the recommendation? |
| | The manager to ensure that bathroom and toilet doors are a contrasting colour with picture signage on the doors at a height suitable for residents (see guidance, SEIC, 2020). |
| Measurable | How can you measure progress and know if you’ve successfully met the recommendation? |
| | |
| Achievable | Is the recommendation achievable? Do you have the skills to achieve it? |
| | |
| Relevant | Is the recommendation relevant? |
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|------------|--|
| Time-bound | When will the recommendation be completed? |
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The report was sent to the provider of the service, however, no reply has been received within the 20 day statutory deadline. Healthwatch would like to thank the manager, staff and residents for accommodating the visit back in May.

Publication date: 22 September 2022