



Enter and View Visit Report

THE FARMSTEAD

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Bryce Way, Telford TF4 2TB

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Acronyms and Terminology

CQC-Care Quality Commission.



About Healthwatch Telford & Wrekin

Healthwatch Telford & Wrekin (HWT&W) 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) receives the services they need.

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

What is Enter & View?

HWT&W 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 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, which results in the producing and publishing of a report.

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

Details of the Visit

Visit Details:	
Service	<i>The Farmstead</i>
Provider	<i>Sandstone Care</i>
Date and Time of visit	30/8/2022 @ 14.00
Visit Team	3 HWT&W Enter & View Authorized Representatives and 1 in training



Service contact details	Name: Kelly Richardson Phone: 01952 623890 Address: Bryce Way, Telford TF4 2TB Email:
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Purpose of the 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 residents' 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 HWE 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 our Authorised Representatives with the benefit of their previous experience and with the evidence from their observations produce visit reports. These are shared with the providers, the public, Care Quality Commission (CQC) and HWE. HWE 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. HWE 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 HWT&W 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 Care 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.

The Farmstead is currently rated 'Good' by the CQC, last review 2021.

The visit was 'announced', we informed the Manager of the date and time of our visit.

What were we looking at?

The focus of this visit was to find out if the residents of The Farmstead are happy living in the Home. We wanted to learn about:

- the environment
- the experiences of people living in the Home
- activities
- visiting
- choices available to people
- staffing levels and staff training



What we did?

When we arrived at the Home, we were met by the manager, we were asked to show evidence of a LFT test.

We were asked to sign in, and produce ID.

We were allowed to walk round the home and speak to residents, relatives and staff.



We approached those residents in the home who were willing to talk to us and any visitors and relatives. We spoke to residents in the lounge and in their rooms after asking permission to enter the room.

We spoke to 12 residents in total, 5 relatives, and 3 staff members.

What we found out about the Home

The Farmstead is a Residential Home which provides Nursing Care. The home is a relatively new build in Lawley Village, Telford.

The Home can accommodate 66 residents and currently have 64, All rooms are single ensuite rooms with toilet, washbasin, and shower.

The Home does take hospital discharge and assesses the resident with the hospital before discharge.

The home will assess new residents as the information supplied is not always correct.

The home has a five-star Food Hygiene Rating.

Follow up on recommendations following previous visits

This is our first visit to the home.

The Environment of the Home

The home is a purpose-built residential care home set in Lawley Village, near to a supermarket and pub. It is situated on a busy corner by the traffic lights.

It is bright and spacious inside giving a friendly impression. All bedrooms have a 'front door' type of door with a letterbox, giving the impression of home. The resident's name is in large text beside the door.

The home has its own kitchen where all food is prepared, there is a dementia café on the first floor.

The residents we saw and spoke to in the home all appeared happy, clean, and well dressed.

We noted that all rooms had call bells. One resident commented that the call bell was on the left-hand side of the bed, but as they had suffered a stroke which left them with left side paralysis, they were unable to operate the call bell.

A Hairdresser and chiropodist visit the home. There is a hairdressing salon on site for hairdressers to use, as organised by the home or by residents



The home uses the GP practice at Lawley (which is part of Teldoc). The home has difficulties accessing doctors at the practice and arranging visits. The home also has problems with medication prescribed being wrong or lack of proper instructions.

On one occasion a resident had to wait 4 hours for an ambulance following a fall.

One relative told us that on two occasions their 90+ relative was taken to hospital, as a doctor would not come from the GP practice. On one occasion waiting 8 hours in an ambulance outside A&E. Both occasions could have been avoided with a doctor's visit.

Optician and Chiropodist visit the home, mainly in a private capacity.

The Home is currently having problems identifying a suitable Dentist.

One relative raised concern over the oral hygiene of their relative. The resident who has dementia, was not being told to clean their teeth. The care plan stated that staff have cleaned the resident's dentures for the past month, but the resident does not have dentures.

Staffing levels and training

We were told the staffing levels were

Days:

2 Nurses

3 Seniors

10 Carers Nights:

2 Nurses

1 Senior

6 Carers / twilight shift 1 Carer

Auxiliary:

Kitchen - Head Chef and kitchen assistant

3 Domestic Staff

1 Admin

Clinical Lead

Deputy Manager

Manager

Nurses and Seniors administer medication.

All new staff do a 2-day full induction course and take part in at least 2 shadow shifts. The home offers online training courses, care certification, and NVQ levels 2/3/4.

Dementia training is provided by SPiC (Shropshire Partners in Care).



A buddy system is to be introduced and mentors identified.

The home does use agency staff, but this has reduced lately.

The home is fully staffed for nurses but have has vacancies for carers.

Activities

The home has one full time and one part time activities co-ordinator. Residents and relatives spoke highly of the full-time co-ordinator.

Residents have been taken to the café at the local supermarket and also the restaurant over the road.

The manager told us that meaningful activities take place to suit the residents, however feedback from residents said, “there are no activities on offer” and another “not anything I would be interested in”. One resident was happy sitting in the Garden room doing jigsaw puzzles and said that the activities co-ordinator would do their shopping and had taken them to the local pub.

Each floor has a bright spacious lounge, but most of the residents were in their bedrooms during our visit. The home also has a cinema room

The manager told us the home is fully involved with the local community.

A resident told us “Don’t do it (activities) often, it’s lovely when somebody does come”

Meals

Residents are given a choice at breakfast.

The main meal is at lunchtime and is cooked on site. On the day of our visit, lunch was Chicken and vegetable casserole, or Cauliflower cheese and sage quiche, with boiled new potatoes and mixed vegetables. Dessert was a choice of white chocolate and lemon cheesecake or Apple and mixed berry compote.



Teatime residents have 3 cold choices and one hot choice.

Options are always available, and dietary needs can be met.

Kitchen staff will meet new residents and discuss dietary requirements. This is reviewed monthly. Residents can complete a questionnaire as to what they would like on the menu

Residents we spoke to said “food was good”, “have spoken to the chef, and now were offered food they liked and was suitable for their dietary needs”.

A resident said, “Tea and coffee always available”.



Raising concerns

Relatives' meetings are held bi-monthly and advertised on the home's website.

The manager puts aside an hour a week for any concerns to be raised.

Complaint's procedure is detailed in the Residents welcome pack.

Fortnightly open-door session for two hours and advertised to all relatives.

Visiting

We were told that during the covid lockdown, relatives could telephone residents. Also, the home set up a Facebook page for them and used WhatsApp. There was also a visiting pod set up.

There are currently no restrictions on visiting and children are now welcome to visit. However, they are being asked to book a visiting time to avoid too many visitors in the home. Visitors are being asked to provide proof of a negative LFT. However, from the day after our visit this was no longer a requirement, but the home may still require LFT tests.

While checking in we witnessed two visitors having to don full PPE. All visitors requested to wear masks when moving around the home.

What residents, relatives and visitors told us?

Most residents we spoke to said they were very happy in the home, that they were well looked after, and had nothing to complain about.

Relatives said the apart for some issues (detailed elsewhere) they are happy for their relative to be in the Home, they think it is the best place to be. Very happy for relative to be there.

One relative told us that both her parents were in the home, initially they had two adjacent rooms one was used as a shared bedroom, and the other a sitting room. Recently they have chosen to change this, so they have their own bedroom next door to each other.



“All kind and friendly”.

“Very little to say other than perfect, can’t fault it”.

A relative said their parents were happy, “it ticked all the boxes”. Home was viewed by video during covid. The home allowed them to do some gardening so their parents could see them outside their window.

“Seem to have high turnover of staff, including agency staff, but recently has improved”.

One resident said they were “bored” tends to get parked in their wheelchair in front of the TV and left there.

What staff told us?

Staff told us they were unhappy having to do re-training when the current company took over the home.

One carer said they were very happy working in the home, having moved from another home.

Staff members commented on being short staffed.

Staff felt that numbers on duty were based on number of residents rather than on the requirements of those residents.

Staff also commented on staff ratio’s where there is one permanent staff to three agency staff. They never do a shift without there being at least two agency staff. This results in staff missing breaks due to feeling unable to leave the floor without permanent staff cover. One staff member said the management were not interested in staff mental health.

We were told that there are issues between carers and housekeeping who call them to do jobs they could have done themselves, and only allowing one bin bag in a bin at the time.

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Staff Interactions with the Residents

We saw staff talking with residents in the lounges and hallways and rooms. All staff were using residents name and coming down to the seated residents’ level.



Additional Findings

Rooms had been personalised with photos and pictures. We didn't see any furniture which was not provided by the home

One resident was permanently shouting during our visit, we were told this is their normal behaviour and goes on all night.

We noticed that all rooms had drinks available for residents.

One resident was much younger than the other residents, and felt she did not fit in. The manager explained that the resident is registered with the CQC, having some problems with the resident's social worker, and the situation is likely to be temporary.

Summary of Findings

We were made welcome by the manager and staff.

The home was clean, tidy, and uncluttered.

All residents appeared happy, clean, and well dressed.

Generally, all residents and relatives we spoke to were full of praise for the staff at the home.

Recommendations

Following our visit, we recommend:

- Check all residents can access call bells
- Check oral hygiene of residents and that residents are helped or reminded to brush their teeth. Check that records are filled in correctly.
- Liaise with staff and get their views on staffing levels.
- Find out about and try and improve staff concerns over mental health
- Liaise with staff about staffing levels and relationship between carers and housekeeping.
- Follow up with the GP practice to try and improve the relationship between them.



This has been acted upon and currently GP will still not visit MDT is on teams LA are aware and have been involved this not controlled by the home.

Service Provider Response

HWT&W received the following response to this Enter & View visit and report from the Operations and Business Manager of The Farmstead 1//11/2022.

The home has recently changed pharmacy and the issue around medication prescribed and proper instruction had now been rectified.

The Home currently has a community dentist.

When Sandstone care took over the home had no evidence of past inductions and we felt it was vital to induct staff into Sandstone care to support good integration. In addition, staff mandatory training was at 3% which does not ensure our staff have the right tools to do the job and care for our residents properly. Since we revisited training using our own internal trainer, using face to face in addition to online it now sits at 90%. Nurses had not received training for some time and as such it was important, we provided this again to ensure all are working using current best practice.

When we took over the home we reviewed and increased the staffing model and budget, and this was implemented. We can evidence that despite the home not being full staff numbers have exceeded what is required and this is reflective of dependency levels also.

As stated above we have completed dependency assessments on every resident and can evidence staffing is too high based on numbers in occupancy and dependency levels. Staff are often found to have this view despite regular updates and information sharing.

When Sandstone care took over agency use was at 38% this was down to 21% by August and has dropped further due to positive recruitment which continues.

There were changes made within the home relating to bins during covid this has now reverted back and we have met with both teams

Residents are advised they can bring in personal items if they meet fire regulations.



This individual was placed as an emergency and was awaiting alternative placement this has now taken place.

Response to recommendations

Where residents are unable to access the call bell themselves this is set as a tile on the daily care actions

The New care plan system includes oral hygiene risk assessment and care planning

Team meetings have been held and will be moving forward to outline importance of all staff and teams.

This has been acted upon and currently GP will still not visit MDT is on teams LA are aware and have been involved this not controlled by the home.

Acknowledgements

HWT&W would like to thank the residents, relatives, and staff of The Farmstead for their contribution to the visit during 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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