

Agnes and Arthur Care Home

Date of Monitoring visit

Monday 15th August, 2016. 10.30am - 12.30pm

Care Home visited

Agnes and Arthur
Moorland View
Bradeley
Stoke-on-Trent ST6 7NG

Authorised Representatives

Barbara Mawby; Paul Harper

Representatives have undertaken Enter and View Training and are enhanced CRB checked

Purpose of visit

Healthwatch Stoke-on-Trent, in partnership with the City Council, has introduced a Dignity and Respect Charter which applies to every resident receiving care. Our visit is to assess how this is perceived by both residents and staff.

Methodology

A letter was sent to the Manager of the Home on 27th July, 2016 giving details of the forthcoming visit.

Information was obtained from the Care Quality Commission Reports and verbally from the Manager and Staff at the time of the visit.

Members were able to make an unescorted tour of the Home and talk to residents, staff and visitors.

General overview

The last inspection, undertaken by the Care Quality Commission inspection on 30th June, 2016, rated the Home 'Good' for the two standard of care categories 'Is the service caring' and 'Is the service responsive' and 'requires improvement' for the other three categories - the service was not consistently safe (staffing levels and knowledge), the service was not

consistently effective (staff training) and the service not consistency well led.

Agnes and Arthur (situated on the previous Eardley House facility site) is a Care Home, which is now part of the Safe Harbor Group. After being taken over in November 2013 it was completely refurbished and renovated with a new kitchen and laundry. It is situated in a two storey building with a lift and is registered to provide care for dementia (diagnosed before entry), mental health and short stay residents

The Home appeared generally well maintained and decorated. It has 44 bedrooms (none en suite) and at the present time has 37 residents. Some of the bedrooms are upstairs and can be accessed (via the communal ground floor area). It also has a small hairdressing salon.

The ground floor

This is a large open plan area, all clearly visible but which is separated into two. It has is an easily visible clock/ calendar.

One area has comfortable easy chairs with small tables and the other area has round dining tables and chairs and some residents were sitting drinking tea/ coffee here.

The stairs and lift provide access to the 1st floor upstairs bedroom corridor visible from the communal area. The stairs are chained off and the lift has a coded entry system. Most residents would need to be assisted to gain entry to the upstairs.

At the far end with good visibility of the whole room there is a desk usually occupied by a member of staff.

Corridors are wide with handrails and colourful pictures on the walls.

Bedroom doors are easily identifiable with pictures and names of the residents. Members were invited to see a bedroom which had a single bed, a wash hand basin, a chair, flat screen television, storage facilities, and had been personalized by the occupant.

Information Collected

Staffing

Linda Charlesworth, Manager of the Home (previously Deputy Manager), who was situated in a new office with a large window for viewing activity, helpfully provided information.

We were informed that recently there have been changes and that the Home now employs a Manager, a Deputy Manager and two Unit Managers with a Night Manager also recently appointed.

A 'dependency' tool is used to work out the staffing required for each shift.

Day/ evening shifts run from 8am - 4pm and 2pm -10pm and usually consist of four Care Assistants and two Senior Care Assistants (who have undergone training in medication and updating care plans.)

At night (10pm- 8am) one Senior staff and three Care Assistants are employed.

An Activities Lady comes in between 10am- 4pm Monday to Friday.

Kitchen staff have also been changed and there is one now working during the tea time period whereas previously teatime meals had been pre-prepared and served by the Care staff.

The Home employs a maintenance man who also tends the small garden (including mowing the lawn.) He informed Members that he 'keeps busy' and at the time of the Visit was erecting a wooden structure in the garden area which was going to be, when completed, a residents' shop so that they could buy small items such as sweets.

He pointed out that the paintwork would soon need 'redoing' and indicated when asked that it would be his job. He had only been in post for four weeks at the time of the visit.

Staff training

Some staff training, such as Manual handling, takes place on site, whereas other training takes place at Newpark House. Recently sexual dementia training has been incorporated into their program.

There is also annual training which includes safeguarding and Deprivation of Liberty (DOL's)

We were informed that for staff who wanted to proceed further Newcastle College also covers 4 relevant units including competence in medication.

Respect and Dignity

The Care Home appears to comply with the Respect and Dignity Charter although there was little evidence of the charter being on view for residents and staff. The home does use the 'This is me' leaflet.

Each resident has a 'key worker' and when Care plan reviews take place residents and relatives are able to attend and participate.

The Manager informed Members that that there is a lot of paper work involved which she is trying to cut down on and that each day she tries to have a discussion with a 'Resident of the day' to ask them how they are feeling about the Home and if they feel that any changes are needed.

Staff were observed engaging with residents throughout the visit, and it was evident that there was dignity and respect towards each individual.

Staff also expressed that they too are treated with respect and dignity from management. And some said that they felt supported by managers and the care assistants felt supported by the seniors. However, one person expressed that

"more thank you' s would be nice from management"

Two care assistants said that they get thank you' s and well done at the end of their shifts from some of the seniors in recognition of the work they do.

GP/ Treatment

The Manager informed Members that although the Home would like to have a retaining GP to make fortnightly visits this has been impossible to obtain. 'There is no continuity' and when a call out is necessary a doctor visits from Brook Medical Centre.

This was a major issue for senior staff when having to deal with repeat prescriptions for residents and that difficulties in obtaining them and being able to synchronise the orders where long term and short term residents' medication needs ordering. We were informed that it can take up to 10 days to get repeat prescriptions sorted from the local GP practice which can create difficulties and is very time consuming.

When necessary the Community Psychiatric Nurse visits and can make appointments for Manor House when necessary.

Out of hours' medical care would mainly necessitate calling the 111 service or where there were unobserved falls a call to 999 may be required as we were informed that there were a lot of residents on Warfarin medication and they took a safety first approach in these instances.

A visiting Community nurse confirmed the issues around medication and that sometimes the staff would call them for advice.

Activities

Members were able to talk to Clare, the Activities Coordinator, (who works 10.00am - 4.00pm Monday to Friday), who at the time was painting the nails of female residents. We were informed that money for her budget had to be raised and this year a summer fete and raffles had raised £350. This was an area we felt required resolving for the home management and owner as the activity coordinator currently has no budget.

Residents have activities such as a weekly karaoke session, bingo, visiting entertainers (according to budget), occasional visits from a 'therapy' dog and a monthly Service from Swan Bank Methodist Church. The Home can have use of a group mini bus but at the moment there is difficulty in the provision of a suitable driver. We were very impressed by her drive, enthusiasm and eagerness to ensure that the residents activities continued.

Members were able to speak to a number of residents and staff during the visit

Female resident

When asked 'how she liked the Home' she replied

'It's not too bad. Look after you- yes, as best as they can. Sometimes have to go to bed when they're ready. Not too bad.'

'Do what they can - but very busy. Not had any problem with them. Make you a cup of tea if you want one. Help you if needed. Very good. Staff help me to dress.'

Asked about the food she replied

'very nice food. If you don't like it- will probably make you a sandwich.'

'I'm just waiting for a cup of tea.'

Male resident

'The Home is ok. I've been here for 3 years. Look after me. Help me.'

When asked if there was anything that he did not like replied *'loud music.'*

He said that he had his own bedroom and that the food was nice.

Male resident

He said that he had been at the Home for a week.

'Just getting used to it. It's all right. I come in, sit and watch telly. Can go out in the garden.'

Female resident

Who informed Members that she had not been in for very long.

'Can decide when I want to get up, go to bed. All new to me. Like it but I've got to find something to do. Miss.....' (she did not continue).

Husband and wife residents

Husband -

'Wife had a hip operation. She went home Monday and couldn't cope. Waiting for physio on hip. Hope to go home in a few days. They're very caring. Always help.'

Asked about whether there was enough staff, he replied

'Enough staff. Caring. Very fortunate. We want to be able to cope. They're arranging general help to do meals.'

He said that he *'was ready to go home. But came for wife.'*

Wife

'Don't want to be in the home long term - just waiting for arrangements to be made at home. Help to deal with things.'

Care Assistant

'I love the job but I feel stressed sometimes. Cleaning commodes, doing beds, hard work. Sometimes I feel I need more time to deal with residents.'

Asked about training she replied. *'I've finished Level 2 NVQ. I've been pushed to do Level 3. But I'm happy, I prefer to do care.'*

'We do have regular training at Newpark in fire, etc.'

Asked about staffing levels, she replied:

'Sometimes we need more staff, but they say they have the right amount of staff. But we need more. Residents are my priority. But I would like to spend more time with them.'

'They do get bored. The Activity Coordinator comes in Monday to Friday. We should be getting a weekend worker. Does karaoke, bingo, paints nails. Hairdresser comes in on Tuesday. There is a salon.'

Care assistants 2&3

Both said that they really enjoyed working there and felt that management did respond to concerns where and when they were expressed.

When asked about if they are involved with reviewing care plans as they deliver the majority of hands on care they both felt they could be more

involved but the seniors are the ones who review the plans. They too were also aware of the issues in not having a retained GP.

Cleaner

Members were informed that he had been here from the beginning - 3 years. He said that his main job was as a domestic. He stated

'I float a bit. I love cleaning. Well looked after. Well maintained. It gets very busy. Clean little accidents in between. It is a home and some residents have been here a long time. It's part of the job. Get used to what they like. Some come in for respite.'

Visitor(son)

Members asked a visitor (from Essex) in the dining room what he thought of the Home. He replied

'It's ok'. (He had only visited a couple of times). 'Everybody seems ok and helpful. Staff trying to sort something out today. It seems safe. Ok.'

Visitor(Wife)

'I'm more than grateful. Tried to engage him in activities'. She stated that the staff at Agnes and Arthur were 'absolutely wonderful'.

Husband and wife short term residents

Husband: *'We're just staying for a couple of weeks. Wife had a hip operation, went home Monday so couldn't cope. She's waiting for physio on her hip. We hope to go home in a few days.*

They're lovely. Very caring. Always help. Enough staff. Very fortunate, arranging general help, help to do meals. I'm ready to go home - but I came in for the wife.'

Wife: *'I don't want to be in here long-term and I'm just waiting for arrangements to be made at home and help to deal with it'.*

General Review

-Agnes and Arthur appears to be a clean, well-maintained, comfortable Care Home with the provision of adequate facilities for short-term and long-term residents.

Recent improvements have been made with a new laundry and kitchen, and meals are considered good, by residents, with a food hygiene rating very good.

Staff are seen as kind, helpful, and caring with the provision of adequate training as necessary. Although staffing levels are reviewed, they do appear to be sometimes busy and stressed and may have little time to actually talk to residents.

It is pleasing to note that residents and relatives can be involved in Care plan reviews.

All the staff spoken to were very approachable and willing to discuss issues and were open about their roles and responsibilities and we thank them for their time and commitment to being available during the visit.

Recommendations

Healthwatch Stoke-on-Trent would make the following two recommendations to Agnes and Arthur Care Home as it feels these would have a very positive impact for staff and residents.

- Healthwatch appreciates the significant difficulties surrounding trying to obtain a 'retained' GP to undertake regular fortnightly visits, but feels the Home must continue in its' efforts to achieve this. Consistency would be of considerable benefit to the wellbeing of residents.
- We feel the Home should allocate a realistic budget to allow the Activities coordinator to continue to provide a range of activities. The budget need not be large, but activities should not be only achievable via funding from fundraising activities. This was an area we felt required resolving for the home management and owner as the activity coordinator currently has no budget.

