



Enter and View Report:
Monmouth Court Nursing Home

15th February 2017



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Name and Address of Service visited:

Monmouth Court Nursing Home,
Monmouth Close,
Ipswich,
IP2 8RS.

Name of Provider:

BUPA Homes.

We visited this service on:

Wednesday 15th February 2017.

ACKNOWLEDGEMENTS, DISCLAIMER AND... WHAT IS ENTER AND VIEW?

Acknowledgements:

Healthwatch Suffolk (HWS) would like to thank the service provider, residents, visitors and staff for their contribution to the Enter and View programme.

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 residents and staff, it is an account of what was observed and contributed at the time.

What is Enter & View?

Part of the local Healthwatch programme is to carry out Enter and View (E&V) visits. These may be announced or unannounced.

Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch '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 they can also occur when services have a good reputation - Healthwatch Suffolk wants to learn about and share examples of good practice from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an Authorised Representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.

EXECUTIVE SUMMARY

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EXECUTIVE SUMMARY:

The manager has been in post since August 2016, prior to this she was in a management role in domiciliary care. The previous manager left in May 2016 and a temporary manager was in place between May and August.

The current manager appears to have a positive impact on staff morale.

There are three houses to Monmouth Court, Harlech, (18 residents) which is a dementia unit. Both Powys (14 residents) and Cillgaren (19 residents) are residential units with some frail elderly residents.

The home is registered for 153 residents in total but at the time of the Enter & View visit there were only 51 residents due to restrictions on admissions imposed by the CQC and Suffolk County Council a year ago. The restrictions have now been lifted and a planned, structured admission policy is to be put in place to admit new residents.

Active steps are being taken to recruit more permanent staff to alleviate the use of agency staff. Whilst agency staff continue to be used, it is a policy of BUPA and this home to ensure that agency staff are trained by BUPA and are always invited to attend extra training if they wish. Monmouth Court uses the services of two agencies and their requirements are booked well in advance. The Manager liaises with her counterpart at Anglesea Heights and they work together for support.

The E&V team saw evidence of good practice and positive relationships between staff and residents throughout

the visit.

Several recommendations have been made by the Enter & View team following the visit:

Recommendation 1:

Management to make themselves fully conversant with the NHS Accessible Information Standard to make sure that training is put in place for staff to work toward compliance of the standard

Recommendation 2:

Signage in all areas needs to be standardised in pictures and words and this is relevant to all houses as this will aid orientation for all residents and comply with the requirements of the NHS Accessible Information Standard.

Recommendation 3:

It would be helpful if photographs of staff with their names and professional roles are displayed in each house.

Recommendation 4:

Memory boxes should be used in all three houses located outside the resident's room, this will aid orientation if a person is confused, as well as informing staff and visitors of the occupant and their wishes.

Recommendation 5:

Staff to ensure that all residents can take part in meaningful daily activities to aid stimulation and maintain independence e.g. helping with gardening, in the kitchen, laying tables, washing up, reading, being read to and other activities that reflect their past life experiences and interests.

Recommendation 6:

Hand washing or sanitizing should be encouraged in all houses before meals

for all residents, this was observed to be happening in some cases but not all.

Recommendation 7:

The same standards and procedures established across all three houses, this will allow the movement of both staff and residents between all houses.

Recommendation 8:

To ensure more participation with the local community to provide entertainment for the residents such as W.I. or craft groups or photography group etc.

Recommendation 9:

It is strongly recommended that all fire exit doors to be kept alarmed at all times.

Recommendation 10:

The E&V team have recommended that the home contacts local church groups to attend and give services to residents on a regular basis and offer religious support.

Recommendation 11:

To seek specialist training and support for the activity coordinators and appropriate senior care staff in developing an environment where residents living with dementia can live meaningful lives and be encouraged to take part in creative activities and everyday tasks where they wish to do so. Opportunities to visit care settings where this is achieved might be very helpful.

Recommendation 12:

The E&V team strongly recommend that the gardens are redesigned to accommodate the needs of the residents. It would be good if residents were involved in the process, for example as a form of therapy residents could contribute to the planning and creation of raised flower beds.

Recommendation 13:

Providing a variety of spaces that offer a choice of location for residents is important, this includes manipulating

the physical space in order to give people with dementia a choice of space for activities (whether scheduled or informal) and the opportunity for social interaction. Informal areas fitted out with memorabilia that offer stimulation can be helpful to residents.

Currently there are no areas of interest either internally or externally with items that might stimulate the senses.

The Enter & View team recommend that the Monmouth Court management team look critically at the space available in order to create informal areas for various activities.

Recommendation 14:

An informal coffee area for friends and relatives to sit with residents.

ENTER AND VIEW

“.. There are four activities coordinators working a total of 108 hours per week. ..”

1. Visit Conducted by:

Lead Authorised representative:

- Bob Hawkes

Authorised Representatives (AR):

- Stella Morris
- Wendy Shepherd
- Sue Spencer
- Helen Hollinworth
- Sheila Warnes

2. Purpose of the visit:

- 2.1 To observe life at Monmouth Court.
- 2.2 To establish what choices residents, have in relation to their daily activities and involvement in care planning, food and menu choices.
- 2.3 To determine how staff, communicate with residents to ensure they can participate fully in decision making.
- 2.4 To gather information about staff levels.
- 2.5 To determine the extent of the implementation of the NHS Accessible Information Standard

3. Methodology:

- 3.1 Discussion with the Manager, staff, residents and relatives.
- 3.2 Review of relevant documentation.
- 3.3 Observation throughout the three houses.

4. Introduction:

- 4.1 The home is in a residential area of Ipswich. The main building is used for administration and training. There are three houses for residents, Harlech, Powys and Cillgaren.
- 4.2 Monmouth Court can accommodate up to 153 residents but at present has only 51 due to the restriction placed by CQC and Suffolk County Council following an inadequate CQC rating a year ago. The restriction has now been lifted and a planned, structured and gradual reintroduction of residents will commence.
- 4.3 The accommodation in all three houses is on one level and resident's rooms radiate from the central dining room/lounge.
- 4.4 The rooms are single occupancy with washing facilities but none with en-suite toilet or bath. The Enter & View team were informed there are two rooms with en-suite facilities in each house but this was not verified.
- 4.5 There are multiple baths, showers and toilets in each house and all are connected to an alarm call system which is constantly monitored and all units are equipped with assisted bathing facilities.
- 4.6 All the houses have their own dining room/lounge with a small kitchen with the facilities to make

hot or cold drinks at any time, except for Harlech house where the kitchen is kept locked at all times when not in use for safety reasons, however relatives can make drinks there.

- 4.7 The central kitchen, where the meals are prepared, is situated in the main building and the food is transported to the houses in heated trolleys. The kitchen can meet the needs of residents with special dietary requirements or choices and cater for soft diets also.
- 4.8 Wi-Fi is available throughout the home on receipt of the password for access.
- 4.9 There are four activities coordinators working a total of 108 hours per week.
- 4.10 The staffing of the home is comprised of a management team led by the general manager, unit managers/senior nursing staff, senior carers, carers, domestics kitchen staff and activities coordinators.
- 4.11 Outside healthcare professionals visit regularly or on request.
- 4.12 The management team are attempting to encourage the local community to become involved with the home.
- 4.13 The E&V team found that some of the alarms on fire exit doors were inoperative at the time of the visit and the path from these exits lead through into the garden and to the car park, then onwards to the street.

It was felt that if the houses need to keep these doors open for ventilation during the summer and to allow residents access to the gardens, a fence should be erected

to stop residents wandering too far placing themselves in danger of potential hazards.

5. What we found - impressions and findings of the service (including NHS Accessibility Standard):

- 5.1 Monmouth Court has a large car park used by visitors and staff.
- 5.2 Access to all of the houses and the main building is from the car park with the security of key pads on the outer doors.
- 5.3 It was noted by the E&V team that the exterior of the home and the gardens need extensive maintenance as all are looking very tired and therefore not inviting.
- 5.4 On entering we were greeted by the receptionist and invited to sign the visitor book.
- 5.5 The team was then introduced to the manager, offered refreshment and taken to the manager's office.
- 5.6 There were Healthwatch posters situated throughout the buildings.
- 5.7 The team were asked if they would like to be escorted or make their own way around and we chose the latter option. The team were given the door access codes by the manager.
- 5.8 The E&V team felt that the houses were not very welcoming as the décor is rather dated and in need of refurbishment and brightening up. The manager informed the team that this is in hand but priority has been given to bringing the level of care up to the standard required.

Perhaps now is also the time to consider the conversion of some

rooms to incorporate shower and toilet facilities as en-suite facilities would make a positive contribution to the resident experience including helping to maintain their independence and dignity.

5.9 The team found that all areas were clean and tidy with no odours but some hazards were observed in all areas, where store cupboards and storage rooms had been left open or unlocked, some containing chemical cleaning materials. These issues were raised with the manager at the time of the visit.

5.10 Information on activities and menus were on the notice board in each house but there are no photographs of staff members with their names on display, this would help both residents and visitors.

5.11 During the visit the E&V team found the staff on all houses to be polite, responsive and caring to the residents in their care. Staff reported that they feel more valued, which helps them have a more positive impact on the way they perform their work.

5.12 During the dining experience the staff, again on all three houses were found to be helpful, caring, polite and patient with the residents. There was a good deal of verbal interaction taking place which contributed to make it a pleasant experience.

5.13 The residents have the choice of where they would like to take their meals in the dining room sitting with others, in their own room, or on a separate table within the dining area. There is adequate space and seating for staff members to sit and assist residents as needed. It was noted that the food was hot and smelled inviting and 'seconds' were

offered to anyone requiring it. The E&V team felt that with better portion control a considerable amount of waste may be avoided.

5.14 Residents are allowed to personalise their own rooms with memorabilia such as photographs or ornaments to make the rooms appear to be more homely.

5.15 All of the doors are very similar with little to denote who lives where. The team suggested that the use of memory boxes on the outside of the resident's doors could aid orientation, the manager informed the team that this is already being considered. The manager also informed the team that door skins are on order to help differentiate what the rooms are and enquiries have been made for the purchase of new standard door signs for toilets and bathrooms.

5.16 During the visit, it appeared that there were sufficient staff on duty to meet the resident's needs, and the staff were seen to interact well with the residents giving good eye contact, sitting next to or bending down to the same level when talking to residents, except for one member of staff who stood upright when addressing the residents which could be construed as talking down to them? This was pointed out to the manager at the time of the visit, who promised to look into it, evidently this particular member of staff had only recently been appointed.

5.17 The team felt that the shop in Harlech is a very good idea and should be developed to sell a wider range of goods for the residents to stimulate memories of times gone by, and perhaps residents in the other houses could be encouraged to join in the shopping experience.

The experience could be enhanced by extending the display to include items such as old scales, an old telephone, some old tins or packets and perhaps photographs of old Ipswich.

- 5.18 All the houses have fresh flowers on display, one of the activities coordinators has an agreement with a local supermarket to take all of their out of date flowers for the home.
- 5.19 The one relative that was available to speak to the team suggested a coffee area where visitors could take residents would be appreciated. The team have included this in the recommendations.
- 5.20 It was also noted that in Powys there was a shortage of seating and tables in the lounge area should visitors and residents wish to sit together around a table.
- 5.21 The manager informed the team that in the summer months a gazebo and tables and chairs were placed in the garden for residents to use, however at the time of our visit the gardens were not welcoming, and in need of a considerable amount of attention to make them user-friendly. Raised beds should be usable - little soil in them at the time of the visit. Furthermore, there is no sensory area for residents with visual impairment and no circular pathway for people to move freely around. Currently the garden path leads directly to the car park which should be addressed urgently and made safe.

Management of the service:

- 5.22 In discussion with the Manager it was established that she has been in post since August 2016 after being in a domiciliary care environment

for 15 years.

- 5.23 The Manager is at present receiving support from the BUPA Regional Director and is also liaising with, and using the experience of, the management team at Anglesea Heights. As the manager in Monmouth Court is not a qualified nurse a clinical lead has been appointed with responsibility for supervision and ensuring clinical best practice.
- 5.24 Although the management team and the staff are aware of the NHS Accessible Information Standard, there is no one fully conversant with the standard.
- 5.25 The E&V team spoke to only one relative who was quite positive about her relative in the home but would like to see more "happy time" with sing songs as other residents do seem to enjoy this type of entertainment. This resident has privately funded 1:1 activity for 3 hours per week as her family feel that she spends too much time in her room.
- 5.26 The E&V team spoke to 11 residents who were all content with the care they receive, informing the E&V team that the food is good and the staff are very helpful, one resident said 'nothing is too much trouble for them'.
- 5.27 The E&V team also spoke with 11 members of staff ranging from Duty Manager, nurses, senior carers, carers, activities coordinators, and domestics, all have a positive attitude towards the new Manager and to their roles, they also now feel more valued by the management team. They are all aware of the complaints procedure and the whistle blowing procedure. One member of staff did say that they

wished that the Manager would explain the changes that were being made and why as this may help them understand new working practices more readily.

5.28 Staff training is comprehensive and on-going. Agency staff are invited and encouraged to attend on-going training sessions with BUPA staff at no cost to themselves or the agency.

5.29 Key worker and key nurse systems are in place throughout the houses.

Choices and activities:

5.30 Discussion with staff and residents indicated that if required a resident would be supported in making choices regarding how and where they would like to spend their time. Residents are free go to bed at whatever time they wish, and they have a choice of what they would like to eat and where they may like to take their meals.

5.31 There are a range of activities organised but due to the small number of residents, few residents actually attend these sessions. There are a number of 1:1 activities arranged spontaneously at the request of the residents. The team were informed by the two activities coordinators spoken to that they are both still gauging the needs of the residents.

5.32 There seems to be no spiritual counsel in place and there are only religious services held on special occasions at present.

Care Planning:

5.33 The E&V team were informed that at this time there is a full review being carried out on all care plans, which is to be completed by 28/02/2017 and this will bring all

care plans up to date, residents and relatives are being involved in this process. Care plans will be available to all staff eventually and will be updated as necessary.

5.34 The house manager takes the shift handover and then escalates any actions to be taken to the care staff.

Meals:

5.35 Lunch was observed in all three houses and it was noted that staff were offering assistance where required and this was done in a caring way using eye contact and gentle handling. Should a resident have a change of mind over food choice an alternative will be offered after staff consultation with the chef to ascertain what is available, drinks are freely available throughout meal time. On Harlech the residents are shown each of the meals on offer for the day and asked which one they would like, on the other two houses meals are selected the previous day by the residents.

RECOMMENDATIONS & AREA'S OF GOOD PRACTICE.

“.. The staff were seen to be very caring and supportive to residents and treated them with dignity and respect..”

The E&V team saw evidence of good practice and positive relationships between staff and residents throughout the visit.

Area's of Good Practice:

1. The staff were seen to be very caring and supportive to residents and treated them with dignity and respect.
2. The new manager is very positive about the future of Monmouth Court and is forward thinking, the staff feel that they are now supported by management and valued.
3. The residents and relative the team spoke to appeared to be happy with the care received.
4. Good practice and positive interaction between the staff and residents was observed.
5. After the current review of care plans it will be policy to involve residents and relatives where possible in future planning for the residents, this has not happened in the past.
6. The buildings are clean and comfortable with a variety of seating available, but parts of the buildings are looking tired and in need of some TLC, we were informed this is work in progress.
7. The management team are attempting to forge links within the local community to involve local groups such as W.I. and local

schools to be associated with Monmouth Court and the residents therein.

Recommendations:

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PROVIDER FEEDBACK (ON RECEIPT OF DRAFT)

Verbatim, provider comments are included within the text of the report. Any action plan submitted by the provider will also be attached to the report.

Action plan from Health Watch Inspection Report

ISSUE	ACTION	TO BE COMPLETED BY WHO	SIGN OFF OF COMPLETION
Management not aware of the NHS accessible information standards.	Training to be arranged for the management teams regarding the implementation of the NHS accessible information standards.	GM/ CSM	
Signage is not standardised throughout all three units.	Signage to be changed to pictures and words. This will be rolled out to all the units.	GM/ REM	
Not easy to tell who staff are or to distinguish between the different positions.	All units will have a notice board put up with pictures of staff, this will also include their name and position held.	GM/ ADMIN	
Memory boxes were up in resident's rooms on harlech and most of them were empty. No memory boxes on other units.	Memory boxes will now be moved outside the resident's room and relatives will be encouraged to bring in personal items to use in the box that will be easy for residents to recognise.	Maintenance Manager Activity Staff Key worker Relatives	

No evidence that all residents were taking part in meaningful activities. Not a lot of participation from the local community.	Linda Patel to come to MMC to devise action plan with REM for activity staff. Key worker responsibilities will be reissued to all staff as a reminder of their role in activities. More involved from local community will be addressed.	REM/ CSM	
Not all units offered hand sanitising before meals.	Coaching regarding the meal time experience to be delivered to all staff. Dining experience audit to be completed on each unit to ensure that this is happening.	REM/ CSM	Complete
Not all fire doors were kept alarmed on the units.	Coaching to be delivered to all staff regarding all fire doors to be kept closed and alarmed at all times. Maintenance to carry out monthly checks.	CSM/ Maintenance Manager	Completed

No raised garden beds in the garden, also gardens are not very accessible for residents.	Will contact estates people to visit site to provide more accessible gardens and provide raised flower beds.	Gardener/ Maintenance Manager	
No points of interest for residents on the dementia unit.	Management team will look at the dementia unit and create points of interest for residents to aid stimulation.	General Manager/ REM	

HERE TO HELP...

If you have a query about this report or would like to know more about Healthwatch Suffolk please contact us as below. We will be happy to help.

You can watch a short video about us via the following link:

www.healthwatchsuffolk.co.uk/about-us/

For information about how we made a difference in the year 2014/15, please download our annual report from:

<http://www.healthwatchsuffolk.co.uk/about-us/annual-reports-and-agm-resources/>

You can also contact us for a hard copy (limited availability) or watch our supporting video. Simply search for "Healthwatch Suffolk" on YouTube.

CONTACT US

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If you require this report in an alternative format please contact us at the address above.

This Enter and View report is publicly available on our website and has been distributed to the Care Quality Commission, Suffolk County Council Adult Care Services Quality and Monitoring Team, Healthwatch England and other stakeholders including all Healthwatch Suffolk friends and members.

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