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Part of the Healthwatch Staffordshire remit is to carry out Enter and View Visits. Healthwatch Staffordshire Authorised Representatives will carry out these visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows 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, equally, they can occur when services have a good reputation – so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand. Healthwatch Staffordshire Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Staffordshire safeguarding policy, the service manager will be informed and the visit will end. The Local Authority Safeguarding Team will also be informed.

Provider Details

Name: Kingsley Rest Home

Address: 7 Southlands Avenue, Newcastle under Lyme, Staffordshire. ST5 8BZ

Service Type: Residential Home

Date of Visit: 9th April 2018

Authorised Representatives

This visit was made by two Authorised Representatives of Healthwatch Staffordshire.

Purpose of Visit

Independent Age, a national charity, have developed a set of 8 Quality Indicators for care homes. We are including an evaluation, based on our findings on the visit, of these quality indicators, which are as follows:

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 individual resident, their needs 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 regularly see health professionals such as GPs, dentists, opticians or chiropodists
- 7. Accommodate residents personal, cultural and lifestyle needs
- 8. Be an open environment where feedback is actively sought and used

The methodology to be used is to;

- Talk to residents about all aspects of their care and whether this is delivered in a way that promotes their dignity and independence including the ability to make choices about their daily lives.
- Talk to residents about staffing levels and whether they feel safe with the level of the care provided.
- Talk to relatives, if they are available to ask if they are happy with the care provided to their relatives and whether they are aware and feel able to report any concerns/ complaints.
- Speak to staff about training, turnover, support staff levels.
- Observe interaction at all levels between residents, staff, manager, and visitors.

Physical Environment

External

The home is situated in a residential area. The entrance was not particularly well signposted, with the house number on the gate and a small house name by the front door, although the entrance is easily accessible. Access to the home is by bell and keypad. There is no CCTV. The outside of the building was generally well-maintained, but with some work needed on the paintwork. During the course of our visit we were advised that building work is due to start within the next couple of months.

There is a small garden area at the front of the building at present and we were advised that a new garden at the rear is to be created when the building work is complete. The gardens we saw were well maintained.

Internal

There is a visitors book in the hallway, with the reception/office located in the main sitting area. There were no malodours in the home, just some cooking smells coming from the kitchen.

We noted that the décor is well maintained, with the furniture and soft furnishings being in good condition. The corridors were free of clutter and all areas were clean.

Resident Numbers

The home as a capacity for 14 residents. At the time of our visit there were 13 residents living at the home.

There are 13 single rooms, 1 twin and some rooms have en-suite facilities.

Staff Numbers

There are 3 carers on duty in the mornings, afternoons and evenings, with 1 working at night. An additional carer is on call at night in case the need arises for additional assistance.

There are 2 part-time domestic staff.

There is a maintenance person attending the home 1 day per week on a regular basis. There is a gardener who visits monthly in the winter months, but more often in the summer months.

There is 1 catering staff at present, although the home are currently advertising for a further member of catering staff.

There is a Manager, who is very hands on within the home.

Agency Usage

We were advised that the home do not use agency staff.

Management

Management - A good care home should have strong visible management.

The manager should be visible within the care home, provide good leadership to staff and have the right experience for the job.

Our findings

We spoke to some staff members and they said that they felt supported by the Manager and indicated that the Manager provided good leadership.

We found that the residents regularly see the Manager around the home and the Manager is friendly and knows them individually. The Manager lives on site and the office is visible from the lounge area. The Manager interacts with the residents and their families on an everyday basis.

The residents advised us that they felt that the Manager and staff were helpful and responsive to their needs.

Comments

The Manager is very visible within the home, is well known by the residents and interacts well with them and also provides good support to the staff.

Staff Experiences and Observations

Quality Indicator 2 - Have the staff the time and skills to do their jobs

Staff should be well-trained, motivated and feel they have the resources to do their job properly.

Our findings

The Manager and staff were initially quite wary of us as they had not been expecting us to visit, although we had sent advance information to them advising that Healthwatch would be visiting. They did not appear to be aware of Healthwatch and indicated that they had previously had a negative experience during a CQC inspection.

The staff we spoke with felt that they were appropriately trained to do their job and we were advised that a training matrix is held on the computer. We were told that staff are supported to acquire further skills and qualifications and that some training was delivered by an independent training company.

The staff felt that there was adequate staff cover per shift. It was explained to us that the staff levels had been increased after a CQC visit.

The staff felt that they had adequate time and resources to do their job well, saying that the owner was very supportive to staff and always willing to supply resources.

The staff appear to work well as a team and morale and motivation were evident. We were told how the employee of the month was recognised with a small gift from the management.

We spoke at length with a cleaner who had worked at the home for 5 years. They said they were very happy at the home and felt supported by the management.

We noted that the staff were all interacting well with the residents throughout the time of our visit.

We were told that all staff had done mandatory training which includes how to protect residents from abuse or the risk of abuse and safeguarding training and that openness to raising concerns was encouraged.

We were advised that all DoLS assessments were up to date and that they were waiting for Social Workers visits.

Comments

The staff seemed to have adequate training, were well motivated and had the time and support to do their jobs well.

Quality Indicator 3 - Do staff have good knowledge of each individual resident, their needs and how their needs may be changing

Staff should be familiar with residents' histories and preferences and have processes in place for how to monitor any changes in health and wellbeing.

Our findings

We were advised that the staff have good knowledge of the residents, their histories and their preferences and that these are all record in individual care plans and the care plans are discussed with all staff. We were told that any changes to the health and wellbeing of residents was monitored, recorded in the care plans and discussed with the staff, so that everybody was fully informed. We were told that the home uses a Quality Compliance System to maintain standards in the home.

Comments

We noted that the staff were all interacting well with the residents throughout the time of our visit.

Activities

Quality Indicator 4 - Activities - Does the home offer a varied programme of activities?

Care homes should provide a wide range of activities (and ensure residents can access these) in the home and support residents to take part in activities outside the home.

Our findings

We were advised that the home does not have a specific Activities Coordinator, but that all care staff are involved in providing activities for the residents.

Group activities on offer include painting, cards, dominos and colouring-in and these are available to all residents who wish to join in.

The home does reminiscence therapy which is tailored to individual needs and capabilities.

We were told that the neighbouring Kindergarten visits the home at Christmas and that relatives sometimes bring pets in so that residents can see the pets and interact with them.

We were told that special events are celebrated in the home and that there are cakes for birthdays.

Some relatives take a couple of residents out for shopping trips. The homes arranges some outings, recent examples include Blackpool, Trentham Gardens, Freeport etc.

We were also advised that residents can do one to one activities if they prefer and that they are supported with individual interest and hobbies. Two of the residents enjoy knitting.

We were advised that there is a monthly budget for Activities, and sometimes part of this is saved up to provide for bigger activities like trips out.

Comments

There are a range of activities available to the residents and the interaction and involvement of the care staff with activities, both individual and group is positive.

Catering Services

Quality Indicator 5 - Catering - Does the home offer quality, choice and flexibility around food and mealtimes?

Homes should offer a good range of meal choices and adequate support to help residents who may struggle to eat and drink, including between mealtimes. The social nature of eating should be reflected in how homes organise their dining rooms and accommodate different preferences around mealtimes.

Our findings

The kitchen has a 5* hygiene rating.

A new kitchen is due to be installed soon as part of a programme of improvements.

There is a choice of menu, with hot and cold breakfast available, a choice of 2 hot dishes at lunch and 1 hot, 1 cold choice at tea.

Special diets are catered for and currently that have 2 residents requiring puree diets and 2 diabetic diets.

The residents that we spoke to said that the food was good.

Should a resident require support to eat or drink staff assist where necessary.

Drinks, biscuits and fruit are available between mealtimes.

Residents nutrition and hydration is monitored by Food, Liquid and Weight charts.

All the crockery and linen at the home is white. The home told us that they had used coloured crockery, but the residents didn't like it, so now they used white. The dining room was pleasant and organised as to be sociable, but with differing needs able to be accommodated.

Comments

The residents said that they were happy with the catering and the choices available to them.

Resident Experiences and Observations

Quality Indicator 6 - Does the home ensure that residents can regularly see health professionals such as GPs, dentist, opticians or chiropodists?

Residents should have the same expectation to be able to promptly see a health professional as they would have when living in their own home.

Our findings

We spoke with one resident at length and three or four others to find their experience of living at the home. All of them were complimentary regarding the staff, the food and the care and support that they received.

One resident commented on the excellent cleanliness of the home and explained that she was able to get up and go to bed when she wanted and to stay in her room if she wished. She also said that the food was good and that the staff were lovely, helpful and kind.

Residents privacy is respected, with all staff knocking before entering rooms. The residents felt that the staff treated then with kindness and respect. They felt that their needs were being met by the individual care plans and the treatment and support that they received.

The residents felt that the staff knew them well, with only 13 residents, all the staff knew them individually and that their dignity was respected.

Call bells were within easy reach of the residents.

All the residents are registered with a local GP Practice. Residents are taken to a local dentist by family or staff as required. An Optician makes regular visits to the home. Chiropody needs are provided via the GP surgery for residents who are diabetic or receiving treatment with Warfarin. Otherwise this is arranged privately. One residents said that they had recently seen the dentist after a problem with their dentures.

Comments

The residents have good access to healthcare professionals and their needs are met.

Quality Indicator 7 - Does the home accommodate residents personal, cultural and lifestyle needs?

Care homes should be set up to meet residents cultural, religious and lifestyle needs as well as their care needs, and shouldn't make people feel uncomfortable if they are different or do things differently to other residents.

Our findings

The residents individual religious preferences were respected and accommodated.

All the residents looked appropriately dressed and said that they had choice about their clothing, bedtime and food and drink. They confirmed that there was a choice at all meals and that drinks were available whenever they asked for them. They said that bedtimes were flexible and they chose when to retire and when to get up in the morning and this varied for each resident.

Comments

The residents lifestyle needs are met with them having choice in the care that they receive, when and how they receive it and their personal preferences being fully respected.

Family and Carer Experiences and Observations

There were no relatives present at the time of our visit, but we were told that visitors are made to feel welcome in the home and that they can visit at any time, although they are asked not to visit at meal times in order to maintain the dignity of residents needing assistance to eat. Relatives can sit and chat privately in the residents room if that is preferred to the lounge area.

We were advised that relatives are kept well informed regarding their loved one

The home has a regular monthly Residents meets and relatives are welcome to attend if they wish to. Feedback and suggestions are collected from these meetings.

The home has a complaints book and the residents and relatives are aware of this.

Quality Indicator 8 - The home should be an open environment where feedback is actively sought and use.

There should be mechanisms in place for residents and relatives to influence what happens in the home, such as a Residents and Relatives Committee or regular meetings. The process for making comments or complaints should be clear and feedback should be welcomed and acted on.

Our findings

The home has a regular monthly Residents meets and relatives are welcome to attend if they wish to. Feedback and suggestions are collected from these meetings.

The home has a complaints book and the residents and relatives are aware of this.

The home is responsive to individuals likes and preferences. A previous resident had his favourite dish especially made for him. One resident particularly likes stead, so that is cooked for him. Two residents like their fish poached rather than fried, so this is prepared for them in their preferred manner.

Comments

The home is responsive to each individuals needs and preferences and act on the feedback and requests made of them.

Summary, Comments and Further Observations

The Manager and Deputy Manager (mother and daughter) both live in accommodation within the grounds of the property, so there is a very personal "hands on" approach to the running of the home.

The residents were all comfortable and happy with the care and support that they received from all the staff.

The staff were motivated and interacted well with the residents, who they knew well and the staff

The home is responsive to the individual needs and preferences of the residents. The home appears to have well responded following a CQC inspection by increasing staff numbers and providing care is a less regimented way with individuals needs and preferences being respected.

There is a good atmosphere in the home

Comments

We found on this visit that this home met the Independent Age Quality indicator for care homes.

Recommendations and Follow-Up Action

It may be interesting to make a further visit when the building work has been completed to see the changes made and the new garden at the rear and how this may improve the wellbeing of the resident.

Provider Feedback

No feedback has been received

DISCLAIMER

Please note that this report only relates to findings we observe on the specific date of our visit. Our report is not a representative portrayal of the experiences of all residents and staff, only an account of what was observed and contributed at the time.



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