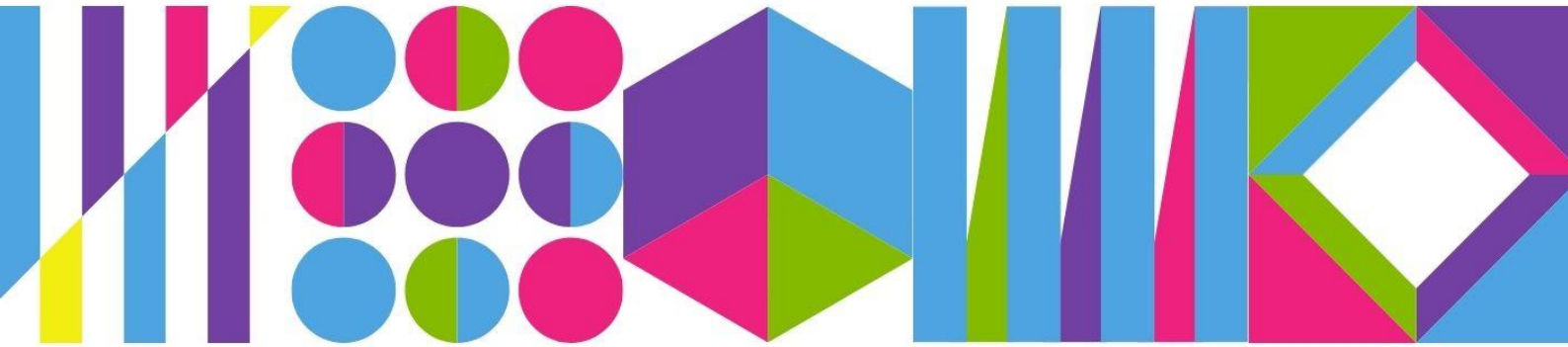


# Enter and View

## Report



# Anson Court

## Residential Home

July 2022



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Visit conducted by Healthwatch Walsall Authorised Representatives



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Authorised Representative



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Healthwatch visits are linked to the 8 principles of care:

1. Essential services
2. Access
3. A safe, dignified quality service
4. Information and education
5. Choice
6. Being listened to
7. Being involved
8. A healthy environment



## Introduction

### Purpose of Visit:

- To observe the physical environment of the home and the interactions of staff and residents
- To listen to, observe and capture the experiences of service delivery from the residents and relatives' point of view

### The methodology used:

- 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
- Speak to management on how service is delivered and monitored and how staff are supported and trained
- Observe interaction at all levels between residents, relatives, staff, Manager, and visitors

### Acronyms that may appear in this report:

- CQC - Care Quality Commission
- WP - BCICB - Walsall Place Black Country Integrated Care Board
- HwW - Healthwatch Walsall
- P.P.E. - Personal Protective Equipment
- P.A.T. - Portable Appliance Testing
- D.o.L.S. - Deprivation of Liberty Safeguards
- L.F.T. - Lateral Flow Test



Exterior of front of building taken from Google Street view

## Anson Court Residential Home



### Venue Overview

Venue: Anson Court Residential Home

Service run by: Manor Court Healthcare Limited

Address: Harden Road, Bloxwich, Walsall, West Midlands, WS3 1BT

Telephone: (01922) 409444

### Capacity:

- Licensed for up to 33 residents
- Currently holding 20 residents
- 16 Local Authority funded and 4 self-funding residents

### Specialisms:

- Accommodation for persons who require nursing or personal care
- Caring for adults over 65 years
- Dementia

Anson Court Residential Home is a residential care home providing personal care for people across two floors.

Currently the day to day running of the home is overseen by a consultancy organisation, called 'Care Solve', who have been tasked with developing processes to strive and improve from previous C.Q.C. ratings. This could in turn mean a measurable impact/ improvement on resident care. We understand that they will be overseeing care provision at Anson Court for up to 12 months.

## Staff Numbers

- No named Manager at the moment
- 7 Senior Care Assistants - 2 during the day, 2 during the night, weekend
- 16 Care Assistants - At least 4 during the day, 3 during the night, weekend
- 1 Activity coordinator - Part time, new in post.
- We were advised that the recruitment of a New Manager is underway. But support is daily from the consultancy team or the owner
- The home is currently recruiting for a senior care assistant

## Food Hygiene

Latest food hygiene rating: 5

Link: <https://ratings.food.gov.uk/business/en-GB/184523/Anson-Court-Residential-Home-Bloxwich>

Date of Inspection: 23<sup>rd</sup> April 2019

## CQC information

The service is rated as Overall: Inadequate

- Safe - Requires Inadequate
- Effective - Inadequate
- Caring - Requires Improvement
- Responsive - Requires Improvement
- Well Led - Inadequate

Recent CQC inspection took place: 25<sup>th</sup> May 2022

Report published: 16<sup>th</sup> July 2022

Link to CQC information: <https://www.cqc.org.uk/location/1-115839170>

## Venue Interviews

Dates of interviews:

Residents/service users: 4 residents, interviewed on 4<sup>th</sup> & 11<sup>th</sup> July

Relatives, carers and friends: 1 relative, interviewed on 4<sup>th</sup> July

Care Staff: 3, interviewed on 4<sup>th</sup> & 11<sup>th</sup> July

Manager/ Consultant: 1 carried out on 4<sup>th</sup>, 19<sup>th</sup> & 21<sup>st</sup> July (initial interview not completed 2 further attempts made to contact)



## Physical Environment

### External

Access to the property is from a main road onto a small carpark. We observed there are not many parking spaces for visitors. People tend to park on the grass verge outside the property.

On arrival we noticed there was a loose roof tile which had moved into the flashing of the roof over the porch. It was pointed out to the Manager on our first discussion.

The building is a two-story property with a flat paved entrance to the property with a buzzer to call for entry. There is no exterior C.C.T.V.

There is an outside enclosed paved courtyard style garden, with seating areas for residents to enjoy with benches to sit on and an area for smokers. Ramps from the building to the garden in place.

### Internal

Inside the front/main entrance doors is an area where you can sanitise and wash hands whilst signing in or upon exit. We were asked to provide proof of negative lateral flow tests; a member of staff then recorded the code from these into a visitors' book.

The latest C.Q.C. report is displayed with other signage/ documents. Also, a suggestion box is clearly marked and mounted to the wall.

Once through the main doors, you will see a seating area for residents with tables and chairs which looks onto the courtyard garden area. This area looks quite new and has wooden flooring where the rest of the home has carpets that appeared somewhat well used.

To the right of reception, a corridor leads you onto a communal lounge area where the residents can join in with the daily activities, socialise or just sit.

There is a small seating area just off this for residents to enjoy some quiet time. Opposite this room is a bright and open 'reading area'. This is usually where visitors can sit with their family member.

We received a tour of both levels of the home by a senior member of staff. We were able to see a vacant bedroom. We checked the temperature of running hot water which did not get excessively hot. Windows could be opened but had restricting aperture guards on them.

We observed a resident and their family member sitting talking and reading that day's newspaper here. This also looks onto the garden area.

There is a lift to the first floor, we were advised all residents with any physical disabilities or mobility issues would be given accommodation downstairs.

In the dining area, tables are laid out sociably with adequate space/ walkways for residents with equipment used to walk.

A menu board was displayed with meals of the day which had 3 choices per meal type. Pictures were also used to display the choices. Drinks were being served throughout. Two staff members were in the dining area, serving food from the kitchen.

The residents' rooms contain single beds only, there are no multi share rooms i.e. for husband/ wife.

Residents also have a door with a small window to their room which is used on a night-time to check on residents, so they are not disturbed during the night. A curtain is there for privacy.

The home does need some décor updates in areas, there was a decorator there who was painting residents' doors to their rooms. They had been given a choice of colours to choose from.

The home is currently undergoing a schedule of redecoration to make it more dementia friendly and more personalised to residents.

There was no obvious smell of urine.

### Safety observations

- Fire Extinguishers were maintained 12<sup>th</sup> February 2022
- P.A.T. date was 22<sup>nd</sup> May 2022
- Fire Exits were clearly marked and free from obstruction
- Weekly fire test each Wednesday 11.30am
- General appearance of venue was tidy
- Carpets in some areas could be cleaned or replaced
- Noted a loose roof tile fallen into flashing of porch roof
- Running hot water in resident en-suite remained warm not overly hot after running tap
- Windows had guards on them so that they could not be opened fully
- C.O.S.H.H./ cleaning storage cupboard was locked



### Resident(s)/ Service User(s) interviews

We spoke to 4 residents; 3 residents took part fully one resident whilst initially agreeing changed their mind as is their choice.

When talking to the residents they appeared to be calm and content, well dressed and happy with the service provided to them. They told us they have easy access to GP services, optician, dentist and a hairdresser if they needed or wished.

Residents it seemed, were relaxed and happy with the staff and felt they were cared for, listened to and valued. They have indicated they had the freedom to choose what they do throughout their day, including joining in with activities organised by the home's activity coordinator if they wished. They are encouraged to join in with social activities, however they can choose to decline and continue with their own activities as is their choice.

Although there is a notice board in the home, the residents do not seem to read it. One resident said it was "boring". They are notified by the staff about any changes/plans within the home. The staff tell the residents what activities are planned for that day and the residents choose whether to join in or not.

When asked about their rooms and if they were happy with the décor and if it was personalised to them, one resident commented they do like a famous film star of old posters in their room of films they like.

Another resident did feel they were not happy with their room as it was not the colour they wanted as their favourite colour was "apple green" and the decorator did not have that colour paint. This information was passed onto a member of staff.

During the visit there was a decorator painting the doors to the residents' rooms, all residents were given a colour chart to choose from and seemed happy with this. The residents were also informed about the decorator attending.

Whilst talking to one resident they advised us they enjoy painting and would like to start that as an activity as it made them happy. They said they would like to paint wildlife and flowers. We spoke with the Activity Co-ordinator who said they can arrange a painting session outdoors for the residents. One resident said they would like more bird books available to read.

One resident told us they have family in a different country and that staff arrange for them to make calls so they can keep in touch.

The residents said they felt safe and part of a community. One resident did not, by choice.

We asked residents if they knew how to make a complaint if they needed to and they said they knew who to go to and what to do. One resident said they had made a complaint in the past and it was dealt with quickly and efficiently and the residents' feelings were valued and taken into consideration.

One resident told us "You can't fault the home; you wouldn't get treated better at Buckingham Palace! I have a newspaper to read every day".



One resident did tell us they felt they didn't like to bother the staff as "they are busy". When asked by a team member of Healthwatch if the resident thought that there were enough staff, they replied "no".

Residents' privacy and dignity appeared to be respected, during our visit. Assistance or the offer of personal care are asked with each resident and their wishes, choices and decisions of:

- When they wish to get up
- What they wish to wear
- What they wish to eat
- What time they wish to go to bed

We were told is honoured.

We observed food being served at lunchtime. Portions appeared to be adequate/ large, and the appearance of the food was appealing. Staff were attentive to offer drinks and ask residents if they were OK. Though there was a lack of available condiments on tables. Staff informed us that this was to reduce some residents overusing salt on their dinner.

We asked if the residents call for assistance when in bed how long can it takes for a member of staff to attend? One resident said, "up to 10 minutes", another said "5 seconds".

We also asked if they engage in any resident meetings. "don't know", another said "no", whilst another said "yes" but couldn't remember when.

We also asked if staff ask for their views or feedback? "Not really", another said "staff haven't got time".

One resident did not know there was a new Activity Co-ordinator. Other residents we spoke to were aware.

Overall residents seemed to be happy with their care and surroundings.

There is a program of updating taking place, but a more homely feel /décor and in their private surroundings a more personal focused space could be explored.



## Relative(s) Family and Carer Experiences and Observations

We spoke to 1 relative.

The relative said they believe their relative is happy and content, with access to other services such as a: GP, dentist, optician and hairdresser.

The relative feels the staff are “very friendly and nice people” and that their family members privacy and dignity is respected.

They feel the resident has full freedom of choice, including what to wear, when to eat, when they go to bed and get up each day, what they choose what to watch on TV and listen to on the radio. The resident is given a daily newspaper which they enjoy reading and they have personalised their room with pictures of the resident's family members. Who are allowed to come and see them whenever they like.

The relative has the relevant information needed if they wished to raise a complaint or concern within the home and feels they would be listened to by staff.

Although the relative visits the resident often, it is another member of the family that is more involved with the residents' care plan so no comment could be made on. But it did seem that the resident did feel part of the community at the home.

The relative was aware that a pack/service user guide was issued by the home when the resident joined and that there are newsletters issued.

The resident they were visiting had been in hospital but said that the home informed them straight away. Also, that the resident had fallen on one occasion and that the family were also informed straight away.

When the relative does not visit in person they can phone or face time the resident to speak to them, enabled by staff at the home.

The relative indicated that there was a prior incident with another resident but that was quickly sorted and has not occurred again.

The relative was not aware of the new Activity Co-ordinator.



## Staff Experiences and Observations

We were advised that there is a review of all staff training and that all staff will have the required training updated and recorded on their individual staff training matrix. This includes: dementia awareness, safeguarding standards/ training. Also, staff are trained in preventative care, such as identifying possible causes of falls. Staff do remind residents to use their frames and walking sticks. Staff have regular One to One with management.

Residents care plans, we were told are reviewed monthly. The residents currently do not need to leave the home to access general health care as it is provided from scheduled visits

from primary care providers and other services that visit regularly. Every Monday 2 Community Nurses attend, one Nurse can prescribe medication.

If there is an urgent/emergency need then the home/staff would call the appropriate urgent/emergency service.

End of life care is supported by nurses; family members are invited to stay over if they wish as there is a room allocated for this.

The staff at Anson Court promote independence with their residents by standing back and observing, only intervening when necessary. Residents are communicated with verbally, this will include updates about the home, activities, meal choices etc.

Relatives are encouraged to book in when visiting their family members, this is to prevent the home being too crowded and to reduce possibilities of infection.

Anson Court has a new part-time Activities Coordinator who is qualified at NVQ Level 2 in Care. We were told the residents are supported to take part in activities by the staff, so it is easily accessible for all.

The Activity Coordinator feels they are supported by other staff to do their job well, including training being provided and that equipment continues to be bought to create a wide variety of activities for the resident's involvement.

External entertainer visits are organised and taking place to engage with residents and some dancing we were told takes place as well as singing.

We advised the Activity Coordinator that a resident had shown an interest in painting. This was acknowledged and we were told that materials had already been ordered.

The Activities Coordinator said they would speak with other staff from other venues if possible about dementia friendly activities that may be incorporated at Anson Court as good practice.

We were told the residents are told about Chiropodist or a Hairdresser attending, so that residents needs, and appearances can be kept to the style and needs of individuals choice.



## Manager/ Consultant Interview

As indicated prior, current care provision is overseen by a representative from Care Solve, an engaged care delivery consultancy organisation.

We were welcomed on both occasions of our visit and assigned a senior to initially tour us round the facility and to liaise with when engaging with residents.

Although currently the home is not taking admissions. We discussed the process of resident admission, and we were advised that a 'Pre assessment' to ensure the facility and care meets the individual needs of a prospective resident is carried out initially. Further that care plans are individual and maintained electronically and audited monthly. Care changes/ plans are discussed by staff at shift/staff handovers.

Staff have a training matrix delivered in a mix of online E Learning via the 'Citation' portal with some face-to-face training delivered by 'EM Skills'.

Staff would receive 3 monthly supervisions.

We were told that there had been 8 safeguarding concerns raised the previous month of June. There had been in the past incidents of resident-on-resident harm but an assessment of the needs of a resident was made and established that their care needs had changed and could not be met at the home, so the resident was moved to another home to meet those needs.

When asked if the home uses the 'Red Bag' process when a resident is sent to hospital all care information including medication is sent with them. We were told they did. But they have never had a return of the red bags when the resident has been discharged back to home. To date they have not had returned two red bags.

New residents, we were informed, receive a 'service user guide' style pack which is made available to relatives also.

We were informed that there is an open-door policy should any resident or relative have a question, wish to raise a concern and a complaints process is in place should there be a need.

Whilst a number of residents have D.o.L.S. in place 3 residents do go out to visit their family for the day and return to the home.



- At the time and previously to our visit the home is being run by appointed consultants and no permanent Manager in place
- Generally, the residents we spoke to felt cared for and felt they had choices
- Residents we spoke to mentioned about activities they could be involved in
- Some of the internal décor lacks colour and appeared to be quite bland and non-descript
- Staff appeared attentive to residents and spoke to them in a friendly manner
- There is a program of decoration being carried out at the home, personalising through chosen colours by residents

- There will be a change in staff as there was currently a care staff vacancy and one senior staff member leaving
- There were no obvious concerns around safety, there is a process to ensure residents are protected with the requirement of L.F.T. to be negative prior to entering the home and other maintenance/ upkeep processes such as P.A.T and fire safety equipment is taking place
- Residents' comments around being involved in resident meetings was varied



## Recommendations

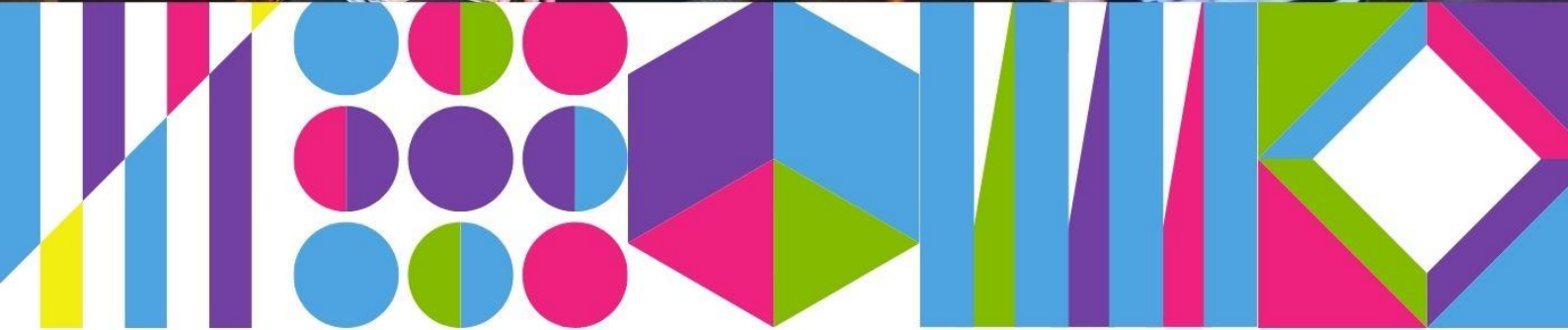
- Secure a more permanent management structure
- Continue to revitalise the homes décor and incorporate more colour and dementia accepted colours, styles and equipment
- Consider identifying additional good practice delivered by other care providers especially around activities
- Liaise with dementia team to identify any equipment or practices that would enhance service users/ residents' life in the home
- Continue to work with organisations that can enhance the resident's experience
- Consider displaying a summary of residents' meetings, notes on the notice board so that they can be referred to by residents. 'You said, we did'... approach
- Consider revitalising the notice board to attract resident/ relatives viewing



## Service providers response

A new registered manager has been employed and is scheduled to commence employment on 1<sup>st</sup> August 2022. We appreciate the recommendations and have already commenced work to ensure our environment is dementia friendly. This includes creating a new Sensory room and Garden room for the residents to enjoy. We will continue to gain feedback on the service from the residents and strive to ensure they are as happy and content as possible whilst living at Anson court care home"

Thank you very much for you're time spent at Anson court and the recommendations made in order for our service to improve, we take this on board and work towards completing them.



# healthwatch

## Walsall

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