



# Enter & View Report

Stanbrook Care Home  
Carried out 6/1/2020



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## Provider Details

**Name:** Stanbrook Care Home.

**Address:** Manor Road Precinct, Walsall, WS2 8RF.

**Service Type:** Residential Care Home

Registered Manager: Jessica Yates.

Home Capacity: Licensed up to 25 residents. 25 single occupancy rooms with ensuite

Stanbrook care home is owned by Interhaze Ltd.

The Home was inspected by the Care Quality Commission (CQC) in August 2019. It is rated as overall "Requires improvement."

Link to report: [https://www.cqc.org.uk/sites/default/files/new\\_reports/INS2-6857484251.pdf](https://www.cqc.org.uk/sites/default/files/new_reports/INS2-6857484251.pdf)

Food hygiene rated as 4 out of 5.

Link: <https://ratings.food.gov.uk/enhanced-search/en-GB/stanbrook/ws2%208rf/Relevance/0/%5E/%5E/0/1/10>

## Authorised Representatives

Name: Lynne Fenton - Role: Healthwatch Insight Senior Lead Advocate/Authorised Representative

Name: Tom Collins - Role: Engagement and Information Lead/ Authorised Representative.

## 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.
- 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

Access is from a slip road to the frontage of the property. There is a small area at the front for parking, and a larger car parking area to the side of the building. The garden is to the back of the property with large chalet style building which we were informed was for staff meetings.

The building exterior appeared to be in good repair with no obvious maintenance issues. This is a two-storey property. Entrance to the building is via a secured front door and doorbell.

We observed at side of the home CCTV, we were informed it was operational and it was there from the previous owners.

A hand sanitiser was mounted on the wall outside the main door.

### **Internal**

Upon entering we were asked to sign into a visitor book. In the reception area are several certificates and information displayed such as: Insurance Certificate, available CQC report. Food hygiene rating of 4.

Through the main secure doors that led off to the: Treatment room, main through lounge and dining room and kitchen.

The lounge appeared to lack any homely feel, although recently refurbished it lacked personal touches and atmosphere that would be experienced in someone's own home.

On our arrival, just before lunch, staff began engaging with residents in playing bingo.

We observed a broken windowpane taped in the dining area next to the kitchen hatch. We were informed the glass was on order, there were no curtains at this window, although we observed nets being put up during our visit. No drawn curtains were in place at the window.

We observed that some fire extinguishers throughout the building appeared to have passed the check/maintenance date. We were informed some were the previous owners. We pointed out the responsibility of this as being the new providers role to ensure in date. We were informed during our visit that this had been addressed and someone would be coming out to complete the fire extinguisher service and maintenance.

## **Resident Numbers**

At the time of our visit there were 13 residents.

## **Staff Number**

- Manager/Deputy Manager
- Mornings - 3 carers 1 senior
- Afternoons - 3 Carers 1 senior
- 2 cleaners.
- Nights - 2 Carers

There is a vacancy for a Kitchen Assistant currently, no cook is required, The food is "cook chill" delivered from a sister home daily.

## **Resident Experiences and Observations**

Healthwatch visits are linked to the 8 principles of care:

- Essential services.
- Access.
- A safe, dignified quality service.
- Information and education.
- Choice.
- Being listened to.
- Being involved.
- A healthy environment.

We spoke with one resident and two relatives and staff members who were: manager and a senior carer. We also spoke to a carer whilst in the kitchen acting as kitchen assistant who was preparing cook chill lunch that day.

We observed that residents appeared well dressed.

The resident we spoke to informed us “Staff are lovely here”. “Staff will do anything for you”.

We tried to engage with residents to gain their views around their care and facilities. But due to associated medical conditions/impairment issues they were unable to share these at this time. We were advised that two other people that we would have been able to speak with were unwell and were in bed.

The residents we were able to communicate with informed us they can access opticians, GP, chiropodist and a hairdresser.

## Family and Carer Experiences and Observations

During the visit we spoke to two relatives.

A relative commented: “I am made to feel very welcome when I visit my loved one here”. “I am made to feel welcome in the home whenever I visit, I am happy with everything”

Another relative informed us that this is a positive experience for her loved one, and this makes her happy.

We were informed by two relatives that no relative/resident meetings had taken place.

A relative we spoke to said she was totally unsatisfied with her relative’s care and support. Her loved one had been waiting for a dentist for some time and had not seen one. This was fed back to management and we were informed this would be addressed.

*We received sensitive and confidential information regarding a resident’s care, and we fed this intelligence back to the Local Authority.*

## Activities

We were informed there is no dedicated activity co-ordinator. We observed Bingo being played for a short time before lunch. We saw photographs of a pub lunch visit and local school Pantomime in December for a few of the residents. There was also a weekly activities schedule displayed near the kitchen/dining area, this included out of home visits.

## Catering Services

The home has a food hygiene rating of 4 out of 5.

Link: <https://ratings.food.gov.uk/enhanced-search/en-GB/stanbrook/ws2%208rf/Relevance/0/%5E/%5E/0/1/10>

We were informed that residents menus are discussed and ordered with them the week before. We asked how people could recall their choice and what happened if people changed their minds the day the food was delivered? We were informed that a “few extra choices” are put on the



trolley just in case. We observed a cooked lunch. We asked for condiments on the table, as there were none for people to use. This was rectified for the residents.

We observed the plates that are used for lunch appeared to be plastic that lunch was served on what would appear to be tea plate size.

We entered the kitchen area, there was a small amount of fresh fruit available.

We observed frozen mixed vegetables being eaten at lunchtime, no fresh vegetables on site as the food is not cooked on site.

We asked to see the food hygiene certificate for the staff member who today was acting as the kitchen assistant. These were electronic we were informed and achieved dated April 2019. We did not observe this.

We observed food allergies/preferences/speech and language therapy issues identified on a chart on the wall in the kitchen.

## **Staff Experiences and Observations**

We met with the Manager and the Area Manager who was on site throughout our visit.

We were informed that the Manager is looking to commence NVQ Level 5 qualification but has been advised by the owners of the Home that she will have to fund this herself. The Area Manager said she will investigate this.

We were informed that E-learning is the preference of choice in the home with the manager who is a trainer in "Moving Handling"

A Staff member informed us they feel very supported by the Manager.

## **Summary, Comments and Further Observations**

- We were informed by the residents we spoke to, that they have regular chiropody/ hairdresser and dentist visits. Although two people that lived there required a dentist as an unscheduled visit, we were informed that the Dentist who usually visits was unavailable due to sickness. The management will call and ask for someone else to visit.
- We observed a bathroom with an extractor fan which appeared loose in the ceiling. We were informed during our visit this had been addressed by maintenance and secured.
- We observed water damage to the same ceiling tiles and poor floor covering. We were informed this was all going to be addressed.
- We observed an odour in the corridor of the upper floor, although there was an electronic air freshener on the wall. We were informed that they were aware of the odour in that area the reason why.
- We were shown an empty bedroom, which had an uneven floor covering, we were informed that no one will move into the room until the floor covering is replaced. The Area Manager visiting informed the Manager that no one is to take occupancy of the room until the flooring is replaced.
- The sensitive concerns shared with us by a relative, as noted earlier in the report, were passed onto the newly formed "Quality Team" which is made up of local Nurses, Local Authority representatives, Infection Control representatives and others.

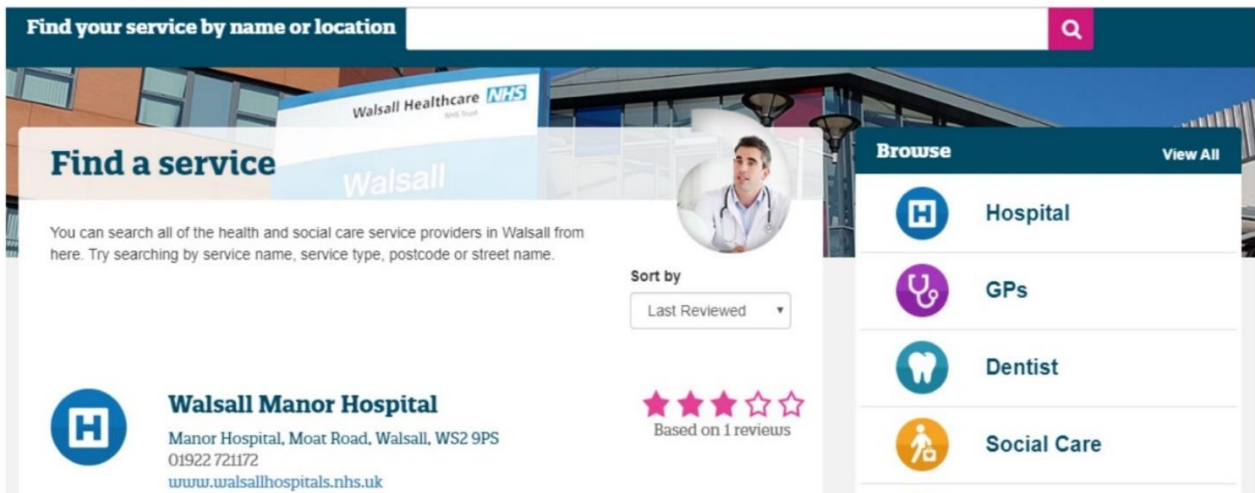
## **Recommendations and Follow Up Action**

- To hold regular Resident/Relative meetings to enable people to have their views heard.
- We recommend a visual/physical check of equipment and fittings in all areas.
- To replace the floor covering in the empty room/bathroom.
- We recommend speaking with Public Health regarding support around odours within the home.
- We recommend that condiments are available for people and monitored inconspicuously.
- We recommend speaking with Dementia Team to take advice on size and colour of plate to aid people with dementia.
- To utilise the chalet in the garden for people to have activities/sensory stimulation/quiet time/hobbies etc.
- To make the very small area in the garden resident friendly and stimulating. Look at opportunities to have raised flower/veg beds/garden furniture.
- To ensure that people can see the Dentist when needed.
- To provide a pictorial menu for people to view as people with cognitive impairment will not recall a week later their choice of menu/food.
- To ensure that fire equipment is serviced and maintained within schedules.

## **Provider Feedback**

**We did not receive feedback to insert from the home.**

If you have any NHS or Social Care service experiences that you wish to share, you can visit our online 24/7 Feedback Centre. Whether it's a compliment, concern or complaint.  
Link: <https://healthwatchwalsall.co.uk/services/>



## 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.



**healthwatch**  
Walsall

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