

Enter And View

Report

Aldridge Court Nursing Home
Carried out 29th August 2018



**Local voices
improving local
health and social care**



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Healthwatch Walsall is an independent consumer champion created to gather and represent the views of the public. Healthwatch plays a role at both national and local level and will make sure that the views of the public and people who use services are taken into account.

At a local level, Healthwatch Walsall will work to help people get the best out of the health and social care services in their area; whether it's improving them today or helping to shape them for tomorrow. Local Healthwatch is all about local voices being able to influence the delivery and design of their services - not just for people who use them, but for anyone who might need them in the future.

Part of the Healthwatch Walsall remit is to carry out Enter and View Visits. Healthwatch Walsall 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 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 Walsall 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 Walsall 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: Aldridge Court Nursing Home
Little Aston Road

Address: Aldridge
WS9 0NN

Service Type: Nursing and Personal Care

Home Capacity: Licensed to 59 residents

Date of Visit: 29/ 08/ 2018

Authorised Representatives

| | |
|--------------------------------|--|
| Name: Tom Collins | Role: Engagement and Information Lead (HWW) |
| Name: Ross Nicklin | Role: Healthwatch Advisory Board (HWW) |
| Name: Richard Jolly | Role: Authorised Representative |
| Name: Richard Przybylko | Role: Authorised Representative |

Purpose of Visit

- To observe the physical environment of the home and the interactions between staff and residents.
- To listen to, observe and capture the experiences of service delivery from the residents and relatives.
- We carried out the visit at the request of Adult Safeguarding Walsall CCG.

Physical Environment

External

The building is well signposted. There is sufficient car parking at the front of the building and there is CCTV installed to the exterior.

There are extensive gardens and lawned areas which can be accessed directly from the home to include a large terrace. However, the garden could benefit from some sympathetic landscaping coupled with the addition of more sensory aids, designed to stimulate resident experience. (Provider feedback) 4 Since your visit the home has purchased garden furniture, and is currently working with the local garden centre in purchasing planting etc and landscaping...

We also saw some broken paving slabs on the terrace which could be hazardous to residents and visitors. These were reported to management at the time of our visit and we were told that these were scheduled to be repaired. (Provider feedback)1 The slabs in the garden - the job had already been identified and they were replaced the following day from your visit.

Entrance to the interior is accessed via keypad and intercom.

Internal

Visitors are requested to sign in using a visitor's book. A comprehensive visitor information leaflet was also provided that included the necessary fire safety guidance.

Consideration could also be given to providing a tear off visitor/contractor signing in book which, includes: individual authorisation to be on site, imparts the relevant fire, health & safety information and meets legislative requirements. Such signing in books are readily available at minimal cost.

The reception area notice board displayed the latest CQC report dated 18 March 2016, in which the home was rated **good**.

Also displayed were the employer's liability insurance, complaints policy, designated fire evacuation stations and the last Healthwatch Enter & View report dated 7 October 2014 which is encouraging as this seeks to capture stakeholder experience of the facilities.

In addition, there were periodic photo albums of residents involved in activities.

There was also a photo board of staff highlighting dedicated dignity champions for specific issues such as palliative care, dementia and infection control.

The main office is located directly off reception. The home itself is extremely large and comprises two buildings; the Main wing and the newer Garden wing.

The resident bedrooms are arranged over three floors, of which 70% have some level of ensuite facility.

We saw a number of rooms during our tour of the home and all looked clean and well appointed. We were told that every room has a call bell which we witnessed in those we viewed.

There is also a hairdressing room, 2 nurse stations and 2 bathrooms fitted with hoists on each floor.

There are 2 lifts in the home, one in each wing.

The main wing communal lounge including dining area is located a little further off reception. This is extremely large with a widescreen TV and has direct access to the garden.

Seating was arranged sympathetically, **although a number of the soft furnishings were somewhat tired in this area.**

There was also a very faint odour in this area. (Provider feedback) **3 The odour in the lounge, importunately odours cannot be managed all the time, however the home has commercial air fresheners managed and installed by a company who maintain the service of these devices on a Monthly basis.**

We were told that staff endeavour to get those residents who are mobile to this main lounge for dining, although there is another lounge and dining area in the other wing.

At the time of our visit a leftover breakfast plate with some food remnants had been left uncollected. (Provider feedback) 2 The breakfast plate was not collected with the rest of breakfast as one of our resident's requests a late breakfast

At the time of our visit there were a group of nursery children visiting and interacting with residents in the dining area. We understand that this happens twice per week.

The corridors were free from clutter and as a consequence left no trip hazards for visitors.

Most areas appeared to be clean despite the overall size of the home.

Cameras operate in most communal areas of the home.

Resident Numbers

At the time of our visit 45.

Staff Numbers

67 in total: 1 Manager, 2 Administration, 7 Nurses, 40 Carers, 1 Activity Coordinator, 5 Domestics, 2 Maintenance and 9 Catering staff.

Agency Usage

We were told that agency staff are very rarely used and when required the same agency is used. There are 6 bank staff.

Resident Experiences and Observations

We spoke to 4 residents about their experiences and observations.

All of the residents we spoke to gave positive feedback regarding their experience of the care provided by the home.

They were happy with the standard of meals provided, with one resident stating that the food was fantastic and another that it was magnificent. We were told that there was a choice of menu which satisfied their needs.

One resident did refer to an occasion their meal arrived cold; we checked this with management and were assured that all plated meals leave the kitchen on a hot trolley.

We were also told that residents felt that they had a choice in personal attire, the time they went to bed at night and they were able to watch TV later if they wished.

The residents' needs were being met by the care they were receiving as supported through individual care plans. We observed evidence of this.

At least one resident told us that they felt they were treated with respect and dignity by the staff. For example, using their names and asking them before carrying out tasks. One told us that they respected their privacy by closing the door when the resident required changing or washing or simply wished some quiet time to themselves.

The same resident told us that the staff were approachable if they had any individual needs.

The residents we spoke to looked to be well cared for in terms of appearance. One resident told us that they could have help shaving if needed and that they had been showered twice a week since going into the home. At least one resident was aware of visiting healthcare professionals such as a chiropodist.

Residents had choice in using their own doctor's surgery, however management told us there are issues in getting GP's to attend the home and therefore runs 2 clinics per week. (Provider feedback) 6 Our GP practice is Fantastic and provides us with an excellent service. We only have issues with GP Practice which are out of area and for that reason the residents have to be registered with our practice and are not able to keep their own GP, so this decision is led by the GP and not the Home. We give a choice to residents to keep their own GP.

Generally, the residents were praiseworthy of the staff, although one resident told us that the night staff were not of the same standard as the day staff it seemed that some night staff were less approachable.

We were told that staff would accompany residents to external healthcare appointments when required.

At least one resident told us they were aware of the activities the home provided but generally chose not to participate in them. However, they also stated that if they wanted to do something specific this would be accommodated.

One resident told us that their religious preferences were respected in attending Church previously and was aware that a Priest could visit the home.

Overall, the residents felt happy in the home, with one stating it was the best place they had been in.

Family and Carer Experiences and Observations

We were able to speak to 2 relatives on the day of our visit.

Generally, both gave positive feedback of the home. They felt the facilities and food provided were very good.

They were made to feel welcome by the staff and management and could visit at any time up to 9.00 PM.

We were told they were kept informed of their resident's care and involved in the process.

One relative told us that they felt the staff were good and that there were enough of them even at night. They were also happy with the level of care provided to their resident. This relative also told us they were aware of the complaints procedure but had not needed to use it.

Another relative told us that the level of care for their resident was very good.

Activities

Regrettably, at the time of our visit, the activities coordinator was on holiday and therefore we were unable to speak to them.

However, we were informed by management that activities are person centred and each month an agenda is formulated.

Examples cited were: BBQ's, afternoon tea, dementia café and nursery visits.

In addition, special occasions are celebrated and catered for.

Around the home there are a number of reminiscent objects designed to stimulate resident sensory experience.

Given, the size and infrastructure of the home, potentially drawing residents together for group-based activities might prove difficult logistically and it would be useful to understand this more directly with the activities coordinator on the next visit.

Catering Services

The home has a food hygiene rating of 5 which is very good.

Regrettably, at the time of our visit we did not observe a meal service.

The menu is rotated every 6 weeks and there are choices at each mealtime. A hot meal is served for lunch with a lighter option available in the evening such as soups, sandwiches, etc.

In addition, the kitchen will cater for any individual resident requests.

Special dietary needs are catered for, such as: puréed requirements, hydration and nutrition are monitored.

Individual resident records are kept which are developed from care plans.

The kitchen appears to be well equipped and food storage is managed accordingly, for example through date stickers.

Assistance is provided to residents at mealtimes and user friendly utensils are provided.

As mentioned previously, communal dining for residents is encouraged.

There is continuity in the kitchen as the chef has been in situ for 18 years.

The Fire Exit adjacent to the kitchen was blocked by food trolleys on the day of our visit. Whilst this was not an immediate hazard to residents there could be an obvious risk in the event of evacuation. This was flagged up to management on the day of our visit. The trolleys were removed and the exit was clear. We stressed the importance of keeping Fire Exits clear at ALL times. We were assured this would be addressed.

Staff Experiences and Observations

We were able to speak to 4 staff members, including the home manager and chef.

We were told by staff that there is a strong level of teamwork in the home and that they felt adequately trained to carry out their roles. They also felt supported to acquire new skills through additional training.

Management told us there is a training matrix and training is usually carried out online in house or externally for mandatory updates.

The home also uses Redcrier Training Solutions.

The staff members we spoke to on the day of our visit felt there was enough staff cover to allow for time spent with residents on a one to one basis.

We were told that there is a strong team ethic and staff feel motivated to carry out tasks.

One staff member told us that knowledge of resident preferences and histories is reliant on good communication between colleagues and the relevant documented care plans.

Management also placed a high priority on training and we were told that a training matrix for all employees was in place.

There is an appraisal system in place to ensure employee development is managed. Training is planned to encompass DOLS, the Mental Capacity Act and safeguarding for all staff.

Recruitment is built around skill set, references and DBS/ identity checks.

A Quality Management System is in place and the Manager is mostly responsible for its monitoring and audits.

We were told that complaints are recorded and followed through to conclusion. This includes even seemingly minor issues raised by residents or relatives.

Care plans are currently paper based but will soon be moving to electronically held. Care plans are reviewed monthly or if a prevailing change in service user needs arises.

Nutrition checks are in place and the online Malnutrition Universal Screening Tool calculator is used.

Incontinence pads are used and documented within individual care plans. Hourly checks are undertaken with 2 hourly positional changes.

Medication is secured and controlled by nursing staff from their stations. It is administered as prescribed and is signed off prior. One local pharmacy supplies the medication.

Management have a high profile and are visible in the home. At the time of our visit we saw a good level of staff interaction with residents.

We did not observe lifting equipment being used.

Summary, Comments and Further Observations

Overall at the time of our visit the feedback received was mostly positive and the staff are striving to provide a high standard of care.

Residents seem happy and well cared for and staff seem to be adequately trained and motivated to carry out their roles.

Facilities are clean and comfortable and food standards are very good.

Given the extensive infrastructure there are undoubtedly financial pressures in maintaining the environment. (Provider feedback) 5 We have also ordered new carpets for the lounges and feel that the comment in the report stating "that there are undoubtedly financial pressures maintaining the environment does not reflect what has been implemented. Furniture is also in the process for update. Notwithstanding this, consideration should be given to raising the sensory experience for residents in a joined up way throughout the home.

We thank the residents, relatives, staff, management and owners for their cooperation and contributions during our visit.

Recommendations and Follow Up Action

- Consider garden design to facilitate more user friendly and safer environment for residents and visitors.
- Review provision of activities to ensure sensory stimulation for residents.
- Replace soft furnishings as part of refurbishment plans.
- Ensure all Fire Exits are always kept unblocked. Review food trolley storage.
- Plan follow up visit for next year - Date TBA.

Provider Feedback

1 The slabs in the garden - the job had already been identified and they were replaced the following day from your visit.

2 The breakfast plate was not collected with the rest of breakfast as one of our resident's requests a late breakfast.

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Again, thank you for visiting and I look forward to the report and your visit next year.

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

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