# Enter and View Report

# Selwyn Court Announced Visit 17<sup>th</sup> May 2023





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# **Provider details**

Name and Address of Service: Se

Selwyn Court 1-3 Bilston Lane Willenhall WV13 2QF

Manager: Mrs Alison Maureen Clarke Service type: 35 bedded Nursing Home Client type: Residents under/over 65 with Dementia/Physical disabilities Service Provider: Glenthorne Care Services Limited

# Acknowledgments

Healthwatch Walsall would like to thank the Registered Home Manager: Mrs Alison Maureen Clarke, care staff and all the residents for their co-operation during our visit.

# Disclaimer

Please note that this report is related to findings and observations made during our visit made on 17<sup>th</sup> May 2023. The report does not claim to represent the views of all service users, only those who contributed during the visit.

# **Authorised Representatives**

Tracy Cresswell Lynne Fenton Richard Jolly

# Who we share the report with

This report and its findings will be shared with the provider, Local Authority Quality Team (depending on the visit), Black Country Integrated Care Board (BICB), Care Quality Commission (CQC) and Healthwatch England, Primary Care Network (PCN) if GP report. The report will also be published on the Healthwatch Walsall website.

# **Healthwatch Walsall Contact Details**

Address: Blakenall Village Centre, 79 Thames Road, Blakenall, Walsall WS3 1LZ Website: www.healthwatchwalsall.co.uk Freephone: 0800 470 1660 Social media: Facebook - <u>https://www.facebook.com/HealthwatchWSL</u> Instagram - <u>https://www.instagram.com/healthwatchwsl/</u> Twitter - <u>https://twitter.com/HWWalsall</u>

# **Healthwatch Principles**

Healthwatch Walsall's Enter and View programme is linked to the eight principles of Healthwatch, and questions are asked around each one.

- 1. A healthy environment: Right to live in an environment that promotes positive health and wellbeing.
- 2. **Essential Services:** Right to a set of preventative, treatment and care services provided to a high standard to prevent patients reaching crisis.
- 3. Access: Right to access services on an equal basis with others without fear of discrimination or harassment, when I need them in a way that works for me and my family.
- 4. **A safe, dignified and quality services:** Right to high quality, safe, confidential services that treat me with dignity, compassion and respect.
- 5. **Information and education:** Right to clear and accurate information that I can use to make decisions about health and care treatment. I want the right to education about how to take care of myself and about what I am entitled to in the health and social care system.
- 6. **Choice:** Right to choose from a range of high-quality services, products and providers within health and social care.
- 7. **Being listened to:** Right to have my concerns and views listened to and acted upon. I want the right to be supported in taking action if I am not satisfied with the service I have received.
- 8. **Being involved:** To be treated as an equal partner in determining my own health and wellbeing. I want the right to be involved in decisions that affect my life and those affecting services in my local community.

# **Purpose of the visit**

As part of Enter and View schedule we primarily select care/nursing homes that are rated as 'Requires Improvement' or 'Inadequate'. In this case CQC have rated the home as 'Requires Improvement'.

Link to CQC report: https://www.cqc.org.uk/location/1-10918676343

### What we did

Authorised Representatives looked around the external area of the property (details below). Once entering the building, Authorised Representatives were greeted by a member of the team who asked the Authorised Representatives to sign in and sanitise their hands. Then followed a short discussion about the visit and the Authorised Representatives started the Enter and View process.

# **FINDINGS**

#### Environment

#### External

The exterior of the property was well maintained with a small car park. There was CCTV on the exterior of the building. The garden area whilst accessible did not appear to have been maintained recently.

Internal

On entry, the Authorised Representatives were asked to sign the 'Visitors Book'.

The front door of Selwyn Court leads through to the main reception corridor. This corridor leads off to two lounges, service areas and bedrooms. Decoration in the communal areas appeared to be furnished to a reasonable standard with no obvious safety concerns, trips, or hazards. Handrails were fitted in corridors.

It felt very homely. There were no unpleasant odours. The décor was well maintained throughout. There is a lift available to travel through each level of the home and the lift is fitted with a keypad security system. Toilets and rooms are well signposted around the building.

Floor decor appeared to be in good condition. Areas appeared to be free from clutter. TVs were there but turned off as there was an entertainer singing in person. The majority of residents were in the lounge listening to the singer and actively joining in.

There are CCTV cameras in operation inside the Home.

Hand sanitiser dispensers were available around the home and were operational and being used.

#### **Essential Services**

Residents informed Authorised Representatives that there is adequate access to services including opticians, dentists, GP, Chiropodist, and hearing aid checks.

#### RESIDENT COMMENTS "I love it here"

*"I love the atmosphere; staff are very kind here. The food is nice." "This is a lovely place, staff are very kind to me and have my personal care every day from staff"* 

"Staff get me up, give my personal care and I have lovely breakfasts here" "I am supported by staff for personal care, I love the atmosphere here staff are very kind, the food is nice, no concerns about living here" "Yes, to all the above I am treated very well here"

#### Access

All the residents we asked commented that they have access to all essential services such as: GP, Dentist, Optician, etc.

#### Safe, dignified and quality services

All residents we spoke to said that they felt safe in the Home. They felt cared for, happy and treated with compassion at Selwyn Court. They felt that they are treated fairly, with dignity and with respect. Residents informed us they have an alarm bell and that staff make them feel safe. Residents shared that they get checked on regularly.

When observed, staff appeared to be involved and attentive to the residents.

#### **RESIDENT COMMENTS**

#### "I do feel safe, I know how to press alarms if I want staff" "I feel safe here with no problems" "I feel very safe here, staff help me to feel safe. All equipment is supplied with no violence here" "If I want things, I tell staff and they just do what I want." "I feel safe here."

*"I am fully happy here."* 

Residents appeared to be happy and content in the settings provided.

#### Information

Authorised Representatives observed up-to-date notice boards in the main corridor and lounge with all the latest activities and events for residents and relatives. Residents informed us that they are kept up-to-date verbally by staff if they have not seen the notice boards.

We were told by the residents we spoke to, that there are no formal resident/ relative meetings held. Another resident informed us that they did not feel they need to attend meetings as they are kept updated verbally. For example, one resident said, "When there is a new member of staff, they get introduced to them."

#### Choice

Residents were asked about choice regarding their clothing, food, drink, and bedtime. The residents we spoke to said they have plenty of freedom. Residents said they can get up and go to bed when they like. One resident said they can watch a film at bedtime if they want, and if they don't want what is on the menu, they can choose something else. Residents say they wear the clothes they choose to wear.

#### **RESIDENT COMMENTS**

#### "No problem with choices, I love it here."

#### "I have 2 choices of meals each mealtime. I help with the gardens, I choose not to engage in inhouse activities"

"I choose what time to get to bed, I choose what clothing, all with staff support" "I wear what I want, I go to bed when I want to, I do take part in activities but I don't have a choice in food, but it's really good"

#### **Being listened to**

The residents that were asked at Selwyn Court informed Authorised Representatives that they know how to make a complaint and would feel able to do so.

#### **RESIDENT COMMENTS**

"Staff really good. Listen ok." "I can speak to anyone." "I could speak to staff any time." "I would not be afraid to speak to someone" "I could speak to staff at any time. Be sure I would speak to someone, no problem" "The home knows I would tell them issues, they would to me too" "I would not feel afraid to speak to someone"

#### **Being involved**

Residents informed Authorised Representatives they feel involved and can choose to take part in the activities provided for them if they like. Staff keep them updated on new activities that are available to them.

The notice board advertised various activities and there is an Activity Co-ordinator who works 5 days per week including at weekends. At the time of the visit, a live singer was entertaining the residents and this activity was very well received.

One resident said they are introduced to new staff.

Some residents said they are unaware of meetings. But one resident felt that there was no reason to go to meetings.

Another resident helped to plant plants in the garden/rockery and has taken it upon themselves to water the plants every day.

#### **RESIDENT COMMENTS**

#### "I don't see resident meetings"

"No, we don't have any meetings, to do with relatives, residents, changes in the home" "No reason to go to meetings" "I am involved"

#### We asked if the residents could change one thing what would it be?

"I don't have a problem with anything in the home at all" "I would like more male staff but nothing else" "I can't think of anything to change" "Better availability of phone to speak to family"

### **Staff Interviews**

Staff who were asked felt confident in their roles. They informed our Authorised Representatives that Walsall Council provide some training and that staff have an online training matrix which covers all modules that are relevant to the staff roles, including: manual handling, dementia, oral care, safeguarding, assisted feeding and more. If staff felt there was a need for other training they would ask the Manager.

We were told that staff have a monthly supervision with team leader or Manager. They felt supported and the Manager would support further as needed.

One member of staff said that when they initially started at Selwyn Court, they shadowed existing staff for three shifts as part of their induction.

A staff member explained that when a new resident comes into the Home, they go through all the discharge notes, any other paperwork that is provided, ensure that the medication matches the discharge notes. They ensure that the bedroom/bed is suitable for the residents. They see if there is a D.O.L.S or Best Interest in place The resident's weight and observations are made on admission.

A body map is carried out to document bruises, pressure sores, ulcers, this is carried out daily for 7 days.

A 24-hour care plan is completed for all residents on admission, they include medication, previous symptoms, foods, likes and dislikes are all recorded.

All care plans are electronic.

Care plans are updated as resident needs change and on a monthly basis.

Staff advised Authorised Representatives they spend as long as necessary with the residents.

A staff member explained that all residents have refreshments between 10.30 a.m. and 12.00 noon. They explained that some residents get up at different times in the morning and have different requirements.

We were told that they have an activity co-ordinator that works between 2.00 p.m. and 4.00 p.m. daily (5 days a week including weekends).

Staff use the care plans to ensure that they communicate with the residents that don't get involved in activities or have cognitive impairment, to establish their likes and dislikes.

When asked if a resident or relative raises a concern what would they do? They said they would discuss with the duty team leader. It may also be discussed in the daily handover sessions which happen three to four times daily. Ultimately it would go to the Manager. Any Safeguarding concerns would be reported to Management immediately.

The staff member felt confident to raise a concern even if of a sensitive nature.

We were also told that family questionnaires were completed.

When we asked the staff members 'If you could change one thing what would it be and why?'

#### **STAFF COMMENTS**

#### "I can't think of anything off the top of my head, communication is great and if I had an opinion, I would share it'

"More free support from outside such as professional activities/shows to give the residents more stimulation" Later the staff member commented that they had not seen a resident/relative meeting since starting here, which was a few months.

A staff member explained that they have a resident that is non-verbal, however they are able to understand the individuals body language and expressions. They also use cards as a way of engaging with them.

Another resident has problems with their hearing aids, and whilst they were being fixed, the staff used a white board and pen and paper to communicate with the resident.

They have staff that are multi-lingual who are able to speak to the residents who do not speak or understand English. They do not have any BSL residents currently, however if they did, they would ensure that the residents communication needs are met.

# **Manager Interview**

The Manager has been in post since February 2023. Living on site and on call 24 hours a day, 7 days a week. There are approximately 25 staff. It is 3.5 staff plus a senior. A Deputy Manager who is additional. 3 staff on night shift.

We were told that GP visits are carried out on a Monday, by Lockfield GP Surgery. The home engages with Brooklands for pharmacy services.

Also, the Manager felt confident in their role, but is considering further training to become 'Train the Trainer' on Manual Handling.

Residents needs and behaviours are identified initially by discussion with the resident(s) and relative(s). Additionally, they make use of discharge information from the hospital or other care homes, though they do not receive care plans from care homes. 24-hour care plans are initially completed on the resident's arrival. Any like or dislikes are asked and recorded.

The Manager seeks to spend time with the residents, especially around mealtimes and advised that they would like to spend more time with residents, but this is dependent on the Managers workload.

They ensure that staff are trained to meet the mandatory requirements. Any bespoke training is dependent on the needs of the individual resident(s).

Recently they had a respite resident that had a 'Percutaneous Endoscopic Gastrostomy' (PEG) and the staff all received training on this.

Currently not all staff are dementia awareness trained, but training has been booked over the next few weeks for staff which will include new staff starters.

They always have staff on shift who can speak Punjabi and they seek support from local temple especially around food.

When asked how the residents/relatives complaints process works, the complaint is made to the Manager which should then be answered in 7 days. If the response is not to the satisfaction of the complainant, it can then be escalated to the Owner/Director. Complaints can be made in person, by email, letter or by telephone.

The Manager feels they have adequate support from the Home Director.

All safeguarding issues are raised immediately and expressed that they would not have issues raising any other concerns.

The Manager mentioned that they encounter issues with newly referred residents, i.e. resident arriving from hospital as step down patient with no belongings, they felt that the patient had been forgotten. Another occurrence was when a resident's funds had run out at a care home elsewhere, that home said that they could not support that resident anymore. The resident's family was left to sort.

When we asked the Manager if they could change one thing what would it be? They answered that hospital discharge was more robust and that hospital staff carryout follow up calls to the home to check on the discharged patient, especially patients who are step-down care patients.

An Activity Co-ordinator was appointed in February 2023, who works 5 days out of 7 which includes some weekends, working with residents, relatives and carers.

Whilst some of the residents said there were no meetings held with them it was indicated that the Activity Co-ordinator leads resident meetings, and the Manager would support when able to. Meetings may be in the early start up stages as the Activity Co-ordinator has only just recently started.

We asked the Manager, what are the current challenges that they face? The Manager is currently working through issues around communication as previous pathways had been closed by previous management. There had been low resident occupancy in the past with only 12 residents. This has now successfully increased up to 30 residents. Staffing levels are set to meet full residency occupancy of 35 residents.

They are currently forwarding monthly information to the CQC due to a previous breach.

Concerns were raised around that the Home had experienced delays in registration in the past, also around the dependency tool for step down patients/residents.

Other concerns were around waiting times for payments from the Local Authority and resident families. This could be between 4 to 5 months and may have an effect on running the Home and residents' care. The Home is also left following up on family payments which puts additional pressure on the Home.

They have issues with getting a dentist but this down to the funding of the dentists.

# **Recommendations**

- Initiate regular resident and relative meetings so that opportunities to discuss any service provision or changes can be communicated to parties
- Rear garden may need freshening now Spring/Summer season upon us, so that residents can access and enjoy
- Seek to get ALL staff dementia awareness trained

# **Provider feedback**

The following comments were received from the provider:

Thankyou for the report, it reads really well, I feel very proud to be part of this report with an excellent staff team and happy residents.

It is 3.5 staff plus a senior. We also have a deputy manager who is additional.

Also your recommendation re dementia training for staff however most staff have had training - it's really only new ones that have not as yet.

# How to contact us

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