

Summary report of Enter and View of Social Care settings April 1st 2019 - January 2020

What is Enter and View

Under the Healthwatch regulations, we have the power to Enter and View premises providing health and social care services which are publicly funded. Through these powers our authorised representatives can observe matters relating to health and social care services.

Enter and View visits are conducted by a small group of staff and trained volunteers who visit health and social care services to observe and assess the service being provided; write a report with findings and suggestions for improvements if appropriate. Those reports become a public document. If necessary, further follow up visits may be arranged.

These services may include:

- NHS Trusts
- NHS Foundation Trusts
- Local Authorities - Social Care/ Care Homes
- Primary Care Services - GPs, Dentists, Opticians, Pharmacists

Methodology

We visited 11 social care settings during the year. There was a plan to visit an additional 2 by the end of March 2020 but due to the COVID-19 outbreak all Enter and View and community outreach was suspended.

The below represents our visits to Social Care settings

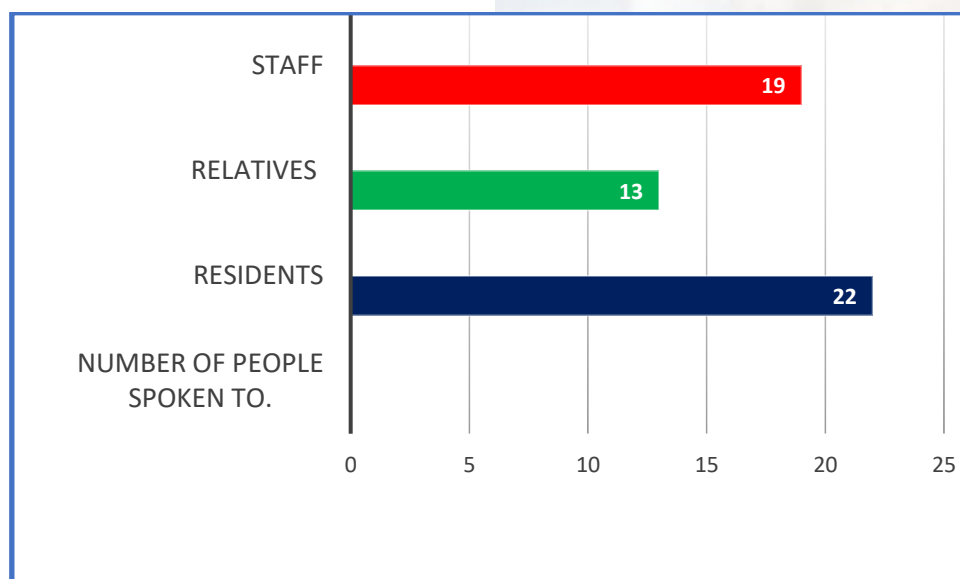
The Care/Nursing homes we visited:

- ❖ Anson Court
- ❖ Leighswood
- ❖ Cedar Falls
- ❖ Fernwood Court
- ❖ Drake Court
- ❖ Stanbrook Care Home
- ❖ Marlborough Unit - Parklands Court
- ❖ Samuel Unit - Parklands Court
- ❖ Collins Unit - Parklands Court
- ❖ Harrison Unit - Parklands Court
- ❖ Elmore Unit - Parklands Court

We visited 2 GP surgeries in addition but as this is based around Social care they have not been included in this summary.

Number of people spoken to.

We spoke to 22 residents, 13 relatives/ carers/ visitors/ 19 staff = 54 people



Escalations

We escalated 4 issues to either the local authority or the newly formed Quality Team. These were around safety, odours and practices. We did not escalate any safeguarding issues.

Residents/relatives comments: In pink positive and in dark blue less positive

“Staff are on the telephone to me immediately there is a need”, “I love the staff here, they are understanding and supportive. They explain everything to me in layman's terms, I am given facts.”

“Staff are very supportive here of my mom and her needs”

“My husband is accommodated with everything here. I have support to support my husband”.

“I feel people are looked after well in this home, whatever I ask for, it will happen“

“Staff don't take people out of the home due to their dementia, I take my husband home regularly to have a soak in our bath, although this can be done here”

“I cannot say a bad word about the staff here, they treat me very well”

“I would rather be at home, but they are ok here”

“I go to bed when I want, if you don't like the food you can have another choice”

“I am Happy with the staff, when you ring the bell, they come to you as quickly as they can”

“We don't seem to have a hairdresser anymore”

“I go to bed when I want to and get up when I want to”

“I go to church and I am supported to do this”

“I was anxious when I moved in. Now I'm settled and get on with everyone”.

“I like it here, but I would like to get out more”

“I'm not keen on living in a home, I would rather be in my own home, but mine has been sold”

“Sometimes I am given meals without choice's”

“We have plenty of drinks here”

“I make my own decisions about the time go to bed”

“I don't want to add anything other than the place doesn't fill me with delight”

“I don’t like everyone; some are not as nice as others”

“I don’t like being here at night on my own”

Its worth noting that many residents have not stayed at other homes so have no comparisons to judge from so may only comment about what they experience rather than a comparison.

Findings/ Themes

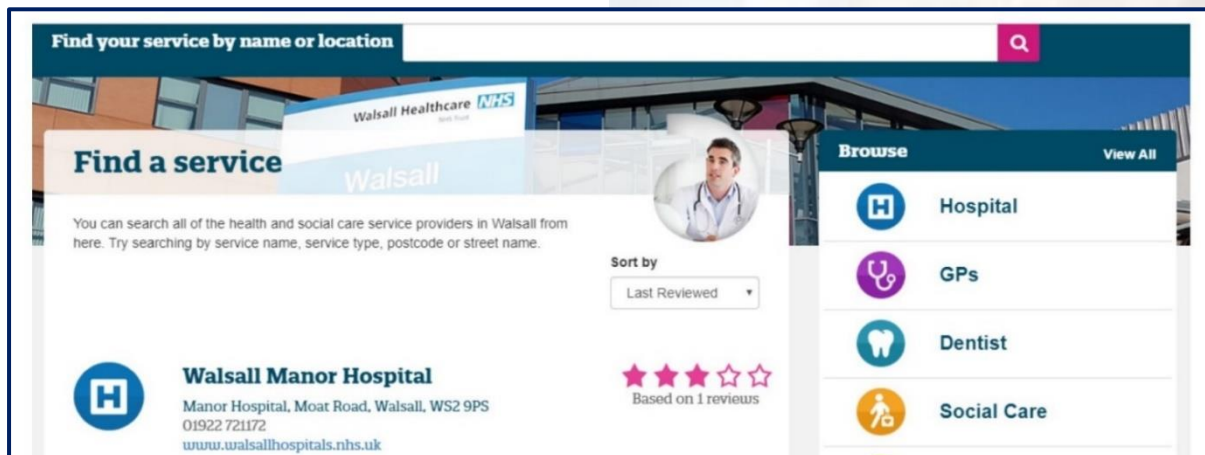
- No dedicated activity co-ordinator(s)
- Carers have additional roles/ jobs not just a carer
- Non or Inconsistent dentist attendance
- Inconsistent GP attendance
- Specialised eating equipment not always available
- Décor and interiors tired
- Fire exits/ equipment impeded
- Resident relatives’ meetings not always remembered by participants
- Signing in book not meeting GDPR/H&S
- Activities not person focused, general All-inclusive activities
- Lack of exterior visits to venues
- Furnishing(s) need replacement
- Varied use of pictorial resident menus
- Varied levels of Food hygiene standards achieved.
- Varied levels of cleanliness
- Not always Cultural food available to diverse residents
- Home maintenance issues were common
- Emergency pull chords tied up in several bathrooms/toilets
- Condiments on tables not always available to residents

Our recommendations

- Endeavour to achieve 5 out 5 food hygiene
- Consider phased mealtimes so that staff can assist feeding residents when necessary
- Carers are Carers, not cleaners, laundry assistance etc.
- Source local visiting dentists
- Source and confirm GPs attendance
- Use Pictorial menus more readily
- Identify and use different eating aids to meet the needs of residents
- Record/display resident & relative meetings
- Identify 1 or 2 dedicated activity co-ordinators in home
- Consider further aids for residents’ activities, eating, fitness and visual/audio stimulation.
- Investigate opportunities for resident outings/ visits
- Maintain improved cleanliness levels
- Identify and replace tiered furnishings
- Carry out daily safety checks check fire exits, pull chords etc.
- Enable use of condiments to residents to allow choice
- Improve Food hygiene rating(s) where less than 5

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.



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