



Enter & View Report

Care Home: The Court

Service address: The Court, 2 Barton Road, Hoylake, Wirral

Service Provider: Ryding Care Ltd

Date and time: 05/07/2016, 16.00pm

Authorised representatives: Diane Hill

Kate Gratwick

Elaine Evans



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Acknowledgements

Healthwatch Wirral would like to thank the staff, residents, relatives, and staff at The Court who spent time talking to us.

Please note that this report relates to findings observed on the specific date and time of the visit. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

The visit also takes into consideration the fact that many of the residents spoken to may have an illness and/or disability, including dementia, which will have an impact on the information that is provided.

What is Enter and View?

Part of the Healthwatch Wirral's work programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allows local Healthwatch Authorised Representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies.

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 use the service first hand.



1.0 General profile of the service that was entered and viewed.

The Court Care Home is a large detached house situated in a quiet suburban area in Hoylake. It is owned/managed by Ryding Care Ltd and is close to local shops and near to local public transport. It provides residential accommodation and nursing care for up to 17 people who may have disabilities such as Dementia, Alzheimer's or other types of mental health problems.

2.0 Purpose of visit

To verify service user feedback

Responding to a request from a services regulator or commissioner ✓

Responding to a request from the service provider

Incoming Concern/complaint

Familiarisation

Other



3.0 Type of E&V visit undertaken

Unannounced

4.0 Methodology

The visit is not designed to be an inspection, audit or an investigation, rather it is an opportunity for Healthwatch Wirral to get a better understanding of the service by seeing it in action and talking to staff, service users and carers/relatives. Healthwatch Wirral seeks to identify and disseminate good practice wherever possible. However, if during a visit Healthwatch Wirral identifies any aspects of a service that it has serious concerns about, then these concerns are to be referred to the appropriate regulator or commissioners of the service for investigation or rectification. Any safeguarding issues identified will be referred to the Local Authority or Commissioner for investigation.

The rectification of less serious issues may be directly with the service provider.

The Enter & View visits are a snapshot view of the service and findings are reported based at the time of the visit.

Enter and View visits are conducted in a way that works in accordance with Wirral Safeguarding Adults Partnership Board's principles and procedures. Information will be shared accordingly in order to safeguard adults at risk on Wirral and promote quality of local services.



5.0 Discussions, findings and observations

Healthwatch reps visited the home on 4th July but were refused entry as the new proprietor was unavailable.

Healthwatch Authorised Representatives were invited to attend the following day to talk to the new owner who had purchased the business on 1st July 2016 and who was leasing the premises from the Hilbre Care Group.

Healthwatch Wirral had originally arranged to visit Hilbre Court, owned and managed by the Hilbre Care Group, during July and were unaware that on the day of their initial visit it had changed hands.

On arrival the new owner was not available as she was at a business meeting. We were invited into the home and made very welcome by a senior member of staff. He agreed to talk to Healthwatch Authorised Representatives about the current procedures and working practices at the home. We were told that the home provides residential and nursing care and will also provide respite care if there are beds available.

The current staffing levels were 3- 4 carers during the day and 2 waking staff at night. Staff shortages were managed by care staff being flexible and by using bank staff.

Staff have NVQ qualifications up to level 6 and have the Care Certificate. All staff are offered mandatory training and in addition to this staff attend Dementia and DoLS training, Moving and Handling, Medicines Management and End of Life Training.

We were told that the introduction of the Care Certificate has been very positive and has boosted staff confidence.



Staff have appraisals annually and supervisions/staff meetings every 2 months.

Medication is managed and administered by senior staff and the home uses the Biodose System. Staff receive training from Wirral Metropolitan College.

All residents, staff and relatives are aware of the complaints procedure and there is an 'open door' policy approach. There is also a timescale for the resolution of any concerns or issues. Complaints are monitored weekly.

Residents may keep their own GP if the practice allows this and two local GP Practices look after residents at the moment. The home has good relations with GPs and District Nursing teams.

We were told that all staff understand the need for adequate nutrition and hydration for residents. The home uses the MUST tool (This is a five-step screening tool to identify adults, who are malnourished, at risk of malnutrition, or obese. It also includes management guidelines which can be used to develop a care plan) Residents are given a good choice of food to meet their nutritional requirements and are weighed regularly. Residents may be referred to a dietician if necessary. Menus are changed every 3 weeks and residents have a good choice. Visitors are allowed to join residents at meal times.

The home currently has an activities co-ordinator and the new owner intends to purchase their own transport to enable residents to go on outings. Staff have researched suitable activities for residents who have Dementia such as music sessions, relaxing hand massages and interactive games.



The new owner arrived shortly after Healthwatch Authorised Representatives had spoken to the Senior Carer and said that she was looking forward to managing the home and will be reviewing all of the current policies and procedures.

She was familiar with both staff and residents as she was formerly a member of staff at Hilbre Care Group.

She invited Healthwatch Authorised Representatives to view the facilities but informed us that we could not access resident's rooms due to their lack of capacity to consent. The home has 14 rooms of which 3 are shared. All have en-suite facilities.

Environment

Reception

The main door was open into a vestibule area where there was a signing in book for visitors. A hand sanitizer was available in this area and there was a sign on the wall requesting that visitors should use the hand gel to ensure infection control is adhered to.

Corridors

The corridors viewed were free from obstructions. We saw evidence of the installation of Dementia Friendly signage in some areas viewed.



Lounge

The main lounge was a good size with comfortable sofas and furnishings. There was a large TV and a fish tank situated in the room and residents were enjoying activities at the time of our visit.

There was another small lounge where residents were talking to visitors. Staff were readily available to provide refreshments for the residents and visitors.

We were informed by a member of staff that they had wanted to install a conservatory but planning permission had been denied so the home installed bi-fold doors to access the garden.

Dining room

The dining room was small and the tables were set with appropriate crockery and cutlery. The home arranges for meals to be taken over 2 sittings due to the lack of space.

Kitchen

The kitchen was large, organized and clean and tidy.

External Garden

This was large and well maintained. We were informed that the home next door (The Lodge, which is part of Ryding Care Ltd) is able to share this facility.



Feedback (from Staff, Service Users, Relatives, Visitors, Carers)

Staff

“I am very happy with the new owner/manager”

“I enjoy working here”

“I enjoy working with the residents and know them well”

Residents -

“I enjoy living here”

“The staff are very caring and kind”

“The food is tasty and I get plenty”

“ I am very happy and I get along with all of the staff”

Relative -

“ I am always made very welcome by the staff”

“ My relative is very happy here”

6.0 Safeguarding observations on day of visit.

No Safeguarding issues were identified at the time of our visit.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies.

If any safeguarding issues are identified during a Healthwatch Enter and View the Local Authority will be notified on the same day as the Enter and View visit.



Safeguarding Alerts.

We were informed that all alerts are reported to CADT and CQC and are documented and investigated.

It is seen as good practice for all Health and Social Care Services to report potential Safeguarding alerts to Wirral Council Central Advice and Duty Team.

6.2 DoLS

We were informed that The Court follows the legal requirements and guidelines which can be very complicated and confusing.

The home stated that the impact that DOLS has when running a care home is that a lot of paperwork is required to be completed and that the process is not straightforward.

6.3 Falls

The Court prevents and manage falls by assessing and monitoring residents and using external agencies such as the Falls Team for support. All falls are recorded and relatives are informed. Falls are also audited regularly.

6.4 Pressure ulcers

Residents would be referred to the District Nurse Team and Tissue Viability Service if they developed a pressure ulcer.



7.0 Conclusions

- Residents looked cared for and appeared to be happy.
- Staff appeared to know the residents well and treated them with dignity and respect
- Care was well balanced from a health perspective.
- Staff seemed pleased with the new management arrangements

8.0 Recommendations

- Continue to implement a Dementia Friendly environment for residents.
- Ensure that residents are not put at risk due to common doorway between this home and The Lodge Care Home next door (during our visit several people appeared to access the home via this door)
- Review and implement any recommendations from the last CQC Inspection in February 2016.
- Display Healthwatch 'Your Voice' leaflets to allow feedback to be gathered independently



9.0 Supplementary feedback from the provider post visit

Residents are not put at risk due to common doorway between this home and The Lodge Care Home next door as all exits at The Court are keypad locked.

The visit by Healthwatch Wirral was carried out in a respectful and pleasant manner. The three representatives were warm and considerate to the residents, families and staff.

I felt that I was given a right to reply and the process enables an alternative view for people to see.

Thank you.

The Manager



10.0 Healthwatch follow up action.

Revisit the home in 2017 when the new owner/proprietor has reviewed the policies and procedures of the home.

11.0 Distribution of report

Healthwatch Wirral will submit the report to the Provider, Commissioner, CQC, and Family & Wellbeing Performance Committee.

Healthwatch Wirral will publish the report on its website and submit to Healthwatch England in the public interest.

Glossary

CADT	Central Advice and Duty Team
CQC	Care Quality Commission
DoLS	Deprivation of Liberty Safeguards
DNAR	Do not attempt resuscitation
GP	General Practitioner
HCA	Healthcare Assistant
MUST	Malnutrition Universal Screening Tool



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