



Enter and View Report

Ashlea Court Care Home
Tuesday August 27th 2019

healthwatch

North East Lincolnshire

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Report Details

Address	Ashlea Court Care Home Church Lane Waltham North East Lincolnshire DN37 0ES
Service Provider	Roseberry Care
Date of Visit	27.8.19
Type of Visit	Announced / Unannounced (See methodology on page 5)
Representatives	Karen Meadows, Carol Watkinson, Andrew Savage, Diana Etherington

Acknowledgements

Healthwatch North East Lincolnshire would like to thank the service provider, residents, visitors and staff for their contribution to the Enter & View Programme.

Disclaimer

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

This report is written by the Volunteer Coordinator for Healthwatch North East Lincolnshire using the information gathered by the Enter and View Authorised Representatives named above who carried out the visit on behalf of Healthwatch North East Lincolnshire.

What is Enter and View?

Part of the local Healthwatch Programme is to carry out Enter and View visits.

Enter and View visits are conducted by a small team of staff and trained volunteers, who are prepared as “Authorised Representatives” to conduct visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement.

Enter and View is an opportunity for Healthwatch North East Lincolnshire to:

- Enter publicly funded health and social care premises to see and hear consumer experiences about the service
- Observe how the service is delivered, often by using a themed approach
- Collect the views of service users (patients and residents) at the point of service delivery
- Collect the views of carers and relatives
- Observe the nature and quality of services
- Collect evidence-based feedback
- Report to providers, the Care Quality Commission (CQC), Local Authorities, Commissioners, Healthwatch England and other relevant partners

Enter and View visits are carried out as “announced visits,” where arrangements are made between the Healthwatch team and the service provider, or if certain circumstances dictate as “unannounced visits.”

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 services first-hand.

Purpose of the Visit

- To engage with service users of the named service and understand how dignity is being respected in the care home environment
- To observe the care provided at this home, looking at a number of key themes; Environment, Food & Drink, Safeguarding, Staffing and Personal Care
- To observe residents and relatives engaging with the staff and their surroundings
- Capture the experience of residents and relatives and any ideas they may have for change

Methodology

This visit was an unannounced Enter & View visit.

An unannounced visit is when the care home is aware that we will be conducting an Enter & View in the near future but the establishment are not aware of the exact date the Enter & View Team will be visiting. A letter will be sent to inform the establishment of the pending visit, along with a Manager's questionnaire.

Our Previous Visit

Ashlea Court was previously visited by Healthwatch North East Lincolnshire in August 2014. At this time Healthwatch NEL advised the following recommendations:

- Damp patch near the bathroom be rectified.
- Fire exit be cleared of items blocking this.
- Staff name badges to be worn at all times.
- Efforts are made to provide a more concerted daily activities programme.

The Healthwatch team found all the above had now been actioned.

Details of Visit

Ashlea Court is a residential care home, situated in a residential area of Waltham, that provides full time, and respite care for older adults, including those living with dementia.

The home has undergone some extension work, and now accommodates up to 48 residents in single occupancy rooms over two floors, accessed by stairs and a lift. At the time of our visit there were 37 residents currently residing in the home.

We did not receive the manager's questionnaire prior to our visit.

Environment

The Enter & View Team were greeted into a large entrance space via an entry control system. This was also utilised as a reception area as well as a place for residents to sit and socialise. This area was equipped with Hand Sanitizers, a refreshment station, and an up to date signing in book, which the Enter & View Team were asked to sign in on their arrival. The homes CQC rating was prominently displayed alongside other policy and procedure notices.

At the time of our visit, this area was being used to dispense medication to the residents, by two members of the care staff. These staff were wearing tabbards to indicate this activity and were dispensing the medication from secure medication trollies.

Communal Areas

Access to a communal lounge and outside courtyard area was situated just off the entrance and leading away from that, a series of corridors that provided access to other communal areas and downstairs resident's rooms. Corridors were all carpeted, neutrally decorated and had hand rails. Hand sanitizers were available to aid infection control. It was noted however, that boxes of disposable gloves were placed in some of the corridors and were accessible to residents. These could provide a health and safety risk and should be secured away. There was bold, clear, pictorial signage throughout, indicating the communal areas and bathrooms/toilets etc. and whilst there were pictures and prints adorning some of the corridor walls, it was felt that this could be more of a 'reminiscence' style for those Residents living with dementia.

Ashlea Court has two communal lounges. The main lounge off the entrance area was observed to be large and airy, carpeted, with modern décor and high back chairs arranged to allow social interaction. Adjacent to this lounge was a smaller 'quieter' area, mostly occupied by those guests living with dementia. At the time of our visit, the main lounge was occupied by a number of residents watching TV and being served drinks from the drinks trolley. The Healthwatch Enter & View Team did observe that there did not appear to be any snacks on the Tea Trolley with one resident commenting that biscuits were scarce, and in her words "*like hens teeth*". Healthwatch would recommend that residents be offered a range of healthy snacks when being offered refreshments.

Ashlea Court has a separate lounge area that is utilised by residents and visiting relatives and is also used for activities. This is a pleasant space with a TV, shelves and an Organ. A large Dignity tree is displayed on the wall. Situated off this area is a small kitchenette that can be used by relatives to make refreshments. The Healthwatch Enter & View Team did observe however that there were cleaning materials in this area that were not secured and to which residents could have easy access too. It was felt that this provided a health and safety risk and was pointed out to the manager who informed us that this would be rectified immediately.

The Dining area at Ashlea Court is roomy with a good amount of space between tables. The tables were set to serve four and were set out in a café style layout, with tablecloths. The area was clean but fairly basic and there did not appear to be a refreshment station although there was access to a water cooler.

A pictorial style Menu board was displayed, however today's choices were not displayed at the time of our visit. The kitchen was situated off the Dining area, and whilst we did not enter (due to hygiene reasons) it appeared functional and clean.

The outside courtyard style areas at Ashlea Court are accessible and of a reasonable size. They are well utilised by the residents and are beautifully maintained with flower beds and seating areas. Residents are encouraged to get involved in some of the gardening activities. Some of the resident's rooms in the extension area of the home have direct access to the courtyard.

Ashlea Court does have a designated smoking area for staff and residents. Residents are always supervised in the smoking area, however the resident's smoking area is at the very front of the building and is not sheltered or enclosed in any way, nor is there any seating. The team felt that this was a little 'unsightly' this close to the main entrance as there were cigarettes butts on the floor. However, we were informed that the home is waiting for a smoking shelter to be installed and that this will improve the overall look of the area.

Residents Rooms

Resident's rooms were situated off the main corridors on the first and second floors. Room doors were painted in different colours to aid recognition by those residents living with dementia and also gave the appearance of an 'external' door with the addition of a door knocker on each. Photographs or names of the Resident were also displayed outside their rooms.

The team only had opportunity to observe one or two vacant residents rooms, and these were found to be bright and airy with modern décor. Most of the rooms were ensuite (toilet and sink) and had laminate flooring. We were told that Ashlea Court were in the process of replacing all carpets in the rooms with laminate flooring, unless the resident specifically wished to keep the carpet and it was deemed appropriate to do so. Residents are encouraged to personalise their own living space and all rooms had water/juice jugs available.

All rooms are equipped with a call bell but it was observed that some of these were not accessible to the residents. At the time of our visit it was noted that one call bell was quite constant and we were told that a member of staff had probably responded to this but often the resident will continue to call until the staff return with whatever it is they have requested.

We were informed that call bells are monitored and audited on a regular basis. It was observed that one of the residents had a table by her bed with her tea and water on that she could not reach, this was pointed out and was rectified straight away.

All bathroom and toilet facilities were clean and well maintained, with appropriate safety and lifting equipment and large, modern bathing facilities.

Other Facilities

Ashlea Court has its own laundry operated by designated laundry staff. We were told that this is a busy area and they are considering purchasing larger or additional washing machines to ease the workload.

Ashlea court also has a small room designated as a Hair Salon for resident's use, with a hairdresser visiting once a week. The residents can also chose to have their own hairdresser use this facility. It was observed that the chair in the Salon was soft backed and covered in hair. It was felt, in order to promote good hygiene, that this could maybe be replaced with a wipeable chair or wipeable chair back cover.

Food and Drink

Ashlea Court serves it main meal at midday and a lighter option at Teatime. Residents are given two choices from a range of healthy meal options, with their preferred choices pre ordered in advance of meal times. Individual diets and tastes are accommodated and residents are also able to request alternatives and snacks in between meals, although these did not appear to be offered at a matter of course.

Residents commented that *"we have plenty to eat"* and *"the food is good"*.

Recreational Activities

Ashlea Court employs a part time Activities Coordinator who we were told promotes a varied range of activities, both group and one to one, although residents were not engaged in any activity during our visit. We were told that the home offers a full programme of activities that include reminiscence activities, therapy dogs, bingo and armchair exercise. The team did observe that a schedule of activities was not displayed for residents and relative's information, but we were advised that this was on order. We were therefore unable to ascertain if activities were specifically targeted to a care based environment and/or individual needs. There were some photographic displays of the residents enjoying various activities that evidenced and reinforced enrichment activities.

Ashlea Court has the use of its own Mini bus in order that residents can access activities within the community, such as trips to garden centres, the seaside and local restaurants and shops. The Manager stated that she had tried to involve the local community in contributing to life within the home by way of painting murals on the walls and by inviting local groups into the home to visit or entertain the residents. She stated that she was disappointed that she could not rally any interest in this. However, the home is currently negotiating the possibility of some joint activity with the adjacent allotments and has organised a summer fayre which local residents have been invited to attend.

Residents

During the visit the Enter & View Team were able to speak to a few of the residents in the lounge areas. The consensus of opinion from those spoken to was all positive and all appeared clean and contented. Residents stated that they were able to get up and go to bed when they pleased, and any requests for help and assistance were quickly dealt with.

Comments received from the Residents included, *“I really enjoy being here”, “It’s really lovely”, “I’m really settled here”, “I am happy here and the staff are good”, and “I came here temporarily after the death of my husband and I am happy that I stayed”*.

Relatives and Friends

The Enter & View Team were not able to speak to any visiting relatives or friends at the time of their visit as there were non available at the time. However, Relative and Friends Questionnaires were left prior to the visit and during the visit. The responses received via these questionnaires have been positive and all compliment the home on its cleanliness, location and friendliness of staff. All stated that they were happy with the care their relatives received and that they had never had any cause for concern, but would feel confident raising any matters with management if there had been. One relative commented *“I have peace of mind leaving my mother here, knowing she is content and well cared for “*.

Staff

Ashlea Court currently employs 28 full time and 21 part time members of staff. Staffing rations are calculated on number of caring hours and Staff absences are managed by agency staff if needed. The home are currently looking at recruiting volunteers.

The Enter & View Team were unable to speak one to one with any members of staff during their visit as they were all busy tending to resident's needs. One staff member complimented one of the residents, stating that it was a "pleasure" to take her out in the mini bus. Few staff questionnaires were completed and returned by staff but these responses were mostly positive with those that responded feeling that they were adequately trained and supported in their roles. However, these staff also stated that whilst the most enjoyable part of their role was looking after the residents, they also felt that they did not get to spend enough time with them due to inadequate numbers of staff on duty.

During their visit the Enter & View Team observed that staff that were cheerful and friendly and their interactions with residents were observed to be positive, empathetic and responsive to need. The team were escorted around the home by the Manager, who we found to be approachable and knowledgeable. As the visit proceeded, she interacted with both residents and staff in a very natural and accessible manner. We observed that she was motivated to ensure that resident's needs were met and demonstrated that she was aware of day to day operations.

Promotion of Privacy, Dignity and Respect

The home holds monthly staff and residents/relatives meetings.

During their visit the Enter & View Team saw that staff treated residents with respect and ensured their dignity was maintained. Staff were observed speaking to residents at their physical level and observed knocking on resident's doors before entering. The home has a designated dignity champion and a Dignity board displayed in the upstairs corridor.

Safeguarding, Concerns and Complaints Procedure

Safeguarding and complaints procedures are in place. Staff advised they were aware of the procedures and had attended the necessary training. Friends and Relatives are also made aware of the Complaints procedure and those that responded via Questionnaire confirmed this.

Medication and Treatment

The Enter & View Team found that medication is securely locked in a medication cupboard and at the time of our visit, medication was being dispensed via secured medicine cabinets. The home has access to a range of community health services but we were informed that accessing these services might be delayed as care homes are now unable to refer to these services directly as all referrals now have to go via the GP.

The home has adopted the 'Red Bag' scheme. This scheme ensures that residents who have to have care at the hospital have all the information with them that is required.

This information is kept in individually pre prepared files (compliant with GDPR) and these go into the Red bags along with any personal belongings. The home reports that currently, the Red Bag scheme appears to be working well, with only one red bag not being returned from Castle Hill Hospital.

Recommendations

- To consider the use of more reminiscence style décor in the communal corridors in line with the good practice shown in promoting a dementia friendly environment within the rest of the home.
- To prioritise the installation of a weekly activity schedule, preferably in pictorial format, so that residents and relatives are aware of what activities are on offer each day and to stimulate interest in and participation in the activities.
- To ensure that disposable gloves are secured away from the reach of residents and that cleaning materials are not left unsecured in the relative's kitchenette.
- To ensure that all residents can access their call bells
- To ensure those residents who are bed bound have easy access to their table containing refreshments.
- To consider offering a healthy choice of snacks in between meal times, preferably at the same time as the tea and coffee is served.
- To prioritise the erection of a smoking shelter in order to improve the overall look of the entrance area, and to provide an external extinguisher device for cigarettes.

What's working well?

- Ashlea Court promotes an inclusive, caring and homely environment, with residents observed as being treated with dignity and respect.
- Ashlea court have a considered and creative approach to enabling a dementia friendly environment for its Residents.

- Many of the home's residents are from the local area and have been able to retain their sense of community and familiarity. The home has actively sought to strengthen this by attempting to work with local groups.

Service Provider Response

This response was provided by Suzanne Kochalska (Manager Ashlea Court)

- With regards to the observation that one of the residents had her table by her bed with her tea and water out of reach. The Resident in question is End of Life and unable to independently eat or drink and is assisted with this.
- With regards to the boxes of disposable gloves not being secured out of reach of residents, I have queried this and this is not a CQC guideline, however we have looked at a more in cased storage for gloves for safety.
- With regards to the pictures and prints in the corridors not being of a more 'reminiscence' style, the majority of the pictures displayed where from a local support worker who took the pictures himself of our local area.
- With regards to comments regarding the 'unsightly' smoking area. Only one resident smokes in this area and uses her wheelchair, although we wouldn't encourage this, this is her home and where she prefers to sit.
- With regards to call bells not always being accessible to the residents, the Manager is unaware of residents without access to call bells.
- With regards to the comments from the staff regarding the fact that they would like to spend more time with the residents but are prevented from doing so because of staffing levels, I would argue that there are always 'safe' numbers of staff on duty and never inadequate staffing levels. The staff are very busy during the day meeting the needs of the residents.
- Advice regarding healthy snacks being available on the tea trollies will be actioned.
- The unsecured cleaning products unfortunately must have been a 'one off' on the day and has been removed.

Distribution

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