

healthwatch

North East Lincolnshire



Enter and View Report

Sussex House
Thursday 28th February 2019

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Report Details

Address	Sussex House 36 Princes Road Cleethorpes DN35 8AW
Service Provider	Melina Coggan
Date of Visit	28 th February 2019
Type of Visit	Announced / Unannounced (See methodology on page 5)
Representatives	Karen Meadows, & Janet Pearson

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 Officer 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.

Summary of Findings

- Staff engaged with residents well, promoting residents dignity and privacy
- Residents spoke highly of the staff and were happy with the quality of care and support they received
- Additional safeguarding procedures were in place to protect residents and staff
- Concerns raised regarding a safety risk from security spikes to the outside aspect

Our Previous Visit

Sussex House was last visited by Healthwatch North East Lincolnshire in January 2017. Following our previous visit we made the following recommendations:

- Ensure rooms are warm (radiators were not very warm on this visit)
- Ensure all doors containing harmful substances are kept locked when unattended.
- Activity room to be used for activities.
- Carer/Resident meetings to be held more frequently and the dates for future meetings to be published and displayed well in advance.
- Dignity champions to be highlighted.
- Lunch menu to be made pictorial and for the menu board to be updated before 11AM.

Following this visit we are able to report the following:

- The manager had addressed the heating concerns, and her locking of the doors via her previous response to our visit in 2017
- Activity room was being used for Activities
- Carer/Resident meetings held every 3 months and enough notice given
- Dignity Champions now highlighted
- Menu board was updated but they do not currently use Pictorial menus

Details of Visit

Sussex House is a residential care home, situated in a residential area that provides support for adults who predominately have mental health conditions and accommodates up to 24 Adults. The building is purpose built with lift and stair access to the first floor. Accommodation consists of single occupancy rooms situated over 3 floors, 17 of these rooms having en-suite facilities. At the time of our visit there were 23 residents currently residing in the home. The service currently employs 23 members of staff.

We received the manager's questionnaire prior to our visit; this did not highlight any issues that we needed to be aware of prior to our visit and did not identify any areas in which Healthwatch might be able to help and support them further.

Environment

The Enter & View Team were greeted in a small reception area via an entry control system. There was a sign in book and a photographic family tree showing staff members on display, and a hand sanitizer. The home was set over 3 floors with the majority of the rooms being on the first and second floors. The rooms were all accessed by a series of corridors which may benefit from some additional signage as the layout may prove confusing to both residents and visitors. Healthwatch staff did notice that a resident who had recently changed rooms, had signs on his corridor to remind him of that, which was a constructive touch. Resident's rooms displayed the residents name and the colour of their 'team'. Individual rooms were bright and of a reasonable size, with residents being able to personalise the room as they wished. All rooms had vinyl flooring and were clean and free of any malodour. We were told that all rooms are gradually undergoing a series of refurbishment.

Whilst there was hand sanitizers provided along the corridors, some of these were observed to be empty. Additionally, these may benefit from a sign to encourage residents and visitors to use them.

The main residents lounge was situated off the main dining area. This was a bright, open space with access to the outside area. At the time of our visit, the residents were engaged in an activity with the Activities Coordinator, however it appeared that only one resident was engaged in this whilst the others were all watching the TV. There was a quiet lounge to the front of the building which was cosy and comfortable, with a TV and high back chairs.

The Dining area was newly refurbished in bright colours and had a very modern café style feel, with table cloths and matching crockery. The space allowed for the residents to socialise over mealtimes and there was a blackboard style menu board with the day's menu written on this.

There was a large open outside central space for the residents to use, although access was supervised for safety reasons. There was garden furniture and a small grassed area with a water feature which provided a calm and restful space.

The home also has a resident rabbit and pigeon which the residents and staff care for and a shelter is provided for smokers.

Healthwatch staff however were concerned that one of the outside brick walls, leading off an accessible outside space, had long, sharp, security spikes along the perimeter. This wall was adjacent to the residential home next door that had apparently installed the spikes. However, these could easily be reached by residents causing serious harm to them. This matter was raised with the manager who assured us that this would be blocked off by a trellis as soon as possible.

Food and Drink

Whilst there is only one set dining time, residents can eat later on request. Meal choices were clearly displayed on the dining room menu board, although this may benefit from a more pictorial approach for those with learning difficulties or those living with dementia. The menu plan submitted to Healthwatch prior to our visit promoted a good range and choice of healthy meals. Residents commented that the food was *'great'* and there was *'lots to choose from'*.

All residents have access to a kitchenette to make their own refreshments if they wish and all residents have access to a range of snacks during the day.

Recreational Activities

The home has a wide range of activities for the residents and the schedule for these was clearly displayed on the Activity room door. During our visit we witnessed the Activity Coordinator encouraging residents to take part in an activity, although only one resident appeared to be taking an interest. There is a designated Activity Coordinator employed at the home for 10 hours a week and a designated activity room, where residents can watch films, play bingo or colour and make crafts. One resident's artwork was displayed prominently in frames of the walls which was a lovely touch. The activity room is open at all times for the

residents to use, although depending on care needs, some residents need to be supervised whilst in the room.

Residents

During the visit the Enter & View Team were able to speak to a number of residents and the consensus of opinion from those spoken to was all very positive. Residents stated that they were able to get up and go to bed when they pleased. All residents spoken to said that they felt “safe” and “well cared for”. One resident stated that he was “happy that he was given financial independence” and had “no complaints” with the staff or the care he received. Another stated that he felt that he was “part of a family” and felt “at home”.

The home has access to a range of community health services who attend the residents within the home on a regular basis.

Relatives and Friends

The Enter and View Team were not able to speak to a relatives or friends visiting the home. Questionnaires were left at the home for these to complete if they wished to provide feedback to Healthwatch.

Staff

The Enter & View Team were unable to speak one to one with most members of staff during their visit as they were all busy tending to residents needs or engaging residents in activities. Staff that were spoken to stated that they were happy working there and felt ‘well supported’ and ‘part of a team’. Several Staff questionnaires were left for other staff to complete but we have had no responses to date. The manager of the home was very welcoming, transparent and honest and a senior staff member took time to show us around. Both the Manager, and the senior staff member, were clearly very passionate about their role and both very knowledgeable about the resident’s needs.

During their visit the Enter & View Team saw that staff were all aware of resident's needs and displayed patience and empathy in the care they provided. This was demonstrated when Healthwatch staff witnessed the home manager comforting a resident who was upset that his wife had to leave. There was easy engagement between staff and residents and attempts observed by the staff to initiate conversation with the residents.

The Manager stated that she currently has the correct staff to resident ratio.

Promotion of Privacy, Dignity and Respect

The home has quarterly residents and relatives meetings to discuss best practice and any issues which have arisen at the home.

During their visit the Enter & View Team saw that staff treated residents with respect and ensured their dignity was maintained.

Safeguarding, Concerns and Complaints Procedure

Safeguarding and complaints procedures are in place. Staff spoken to advised they were aware of the procedures and had attended the necessary training.

All residents' rooms had QR codes displayed so that these could be scanned by staff, using hand held monitors, attending the residents in the rooms. This enabled senior staff to monitor care and enhance safeguarding procedures.

Medication and Treatment

The Enter & View Team found that medication is securely locked away and staff encourage residents to take their medication as required. Care records are also kept securely.

Recommendations

- To ensure that Hand Sanitizers are refilled and to consider placing a sign by them to encourage residents, staff and relatives to use these.
- To block off the security spikes on the wall adjoining the next door property and the home's outside area, to prevent injury to residents.
- To consider the use of a more pictorial style menu board to aid those residents living with dementia.
- To consider utilising additional signage to corridors to aid navigation around the home, both for residents and visiting relatives.

What's working well?

- Staff responded well to residents needs and demonstrated a caring and empathic approach.
- Use of QR code system to aid in additional safeguarding monitoring

Service Provider Response

Although we agree with the report, we would also like for you to take into consideration the following: -

- To ensure that Hand Sanitizers are refilled and to consider placing a sign by them to encourage residents, staff and relatives to use these.

The hand sanitizers referenced as empty were not working. New sanitizers were already on order on the day of the Healthwatch visit. These arrived the next day and have been fitted and are working properly. They also have signs by them to encourage usage.

- To block off the security spikes on the wall adjoining the next door property and the home's outside area, to prevent injury to residents.

A trellis has been erected to block off the security spikes on the wall adjoining the next door property and the home's outside area. This was actioned the very next day after the visit.

- To consider the use of a more pictorial style menu board to aid those residents living with dementia.

Pictorial menus have been introduced and are in place.

- To consider utilising additional signage to corridors to aid navigation around the home, both for residents and visiting relatives.

More signage has been put into place to aid navigation around the home.

Please see reference with photographs below.



Distribution

Brett Brown, CCG contracts officer Lead
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Jan Haxby (Director of Quality and Nursing at NELCCG)

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