

Enter & View Residential Care Report

Brough Manor

33 Station Road, Brough, East Yorkshire HU15 1DX

Date of visit: 31st August 2017

Date of publication: 9/10/17

HWERY Representatives: Martin Davies & Pamela Wakelam

Disclaimer: This report relates only to the service viewed on the date of the visit and is representative of the views of the service users who contributed to the report on that date.

Main Purpose of Visit

This visit was part of a Healthwatch East Riding programme to carry out a required number of Enter & View visits per year to collect the views of people whilst they are directly using services. This will then contribute to its remit of helping ensure that the views and feedback from patients and carers are an integral part of local commissioning across health and social care.

It is important to note that Enter & View is not an inspection; it is a genuine opportunity to build positive relationships with local Health & Social Care providers, provide opportunity to demonstrate that providers support service user engagement and give service users the opportunity to give their views in order to improve service delivery.

Summary of Key Findings

Brough Manor is one of three homes run by East Riding Care Services catering for 26 residents when full. On the day of our visit they had 21 residents in the home. The management of the homes overall appeared very comprehensive with necessary processes in place for all aspects starting with the Human Resource and staff recruitment issues, to the day to day workings of the home including Quality Assurance processes. We were impressed with the comprehensive induction programme for new staff and the Quality monitoring check list that all the three homes managers use and report on to their head office monthly.

The manager was unexpectedly of sick on the day we visited and so we were greeted by one of the owners. The enthusiasm displayed by the owner for her work was infectious. The owner also voluntarily sits on the safeguarding adult's board.

Recommendations/Observations

There are no specific recommendations however we were able to share some good practice observations gleaned at other homes (which remained anonymous) and this was met with enthusiasm by the owner.

We liked the 'Taster sessions' for menu changes to allow for a broad viewpoint on choices.



Full Report

Background

Local Healthwatch has a number of specific statutory activities that it is required to deliver, defined in five Healthwatch Quality Statements, specifically

- Strategic Context & Relationships
- Community Voice & Influence
- Making a Difference Locally
- Informing People
- Relationship with Healthwatch England

Within the context of Enter & View:

Under its remit of 'Community Voice & Influence', Healthwatch has a responsibility to support local people to share their experience and opinions of local services.

Under its remit of 'Making a Difference Locally', Healthwatch has a responsibility to capture the experience of local people in our research and reports, use the opinions and experiences of the public to produce recommendations for change and ensure our recommendations for change are heard and responded to by relevant decision makers.

Under its remit of 'Informing People', Healthwatch has a responsibility to ensure that we provide the public with accurate, reliable, relevant and useful information about local services, when they need it, in a format that meets their needs.

Main Findings

How safe is the setting for service users?

We were asked to sign in to the home.

The home was very clean, tidy, odour free and hand gel was available at the entrance and within the home.

We observed the necessary certificate displayed e.g. CQC and Public Liability documents.

Many areas are locked with code or key access to provide a safe environment for the clients however the general areas are open for clients to walk around as they wish.

The rooms have a call system in place.

Medicines are managed well inside a locked room with a NOMAD system in place. Controlled drugs are kept separately in a locked cupboard in the locked room and all documentation is in place. The contacted pharmacy service provides audits of the drug management and record keeping.

Residents spoken to felt happy and safe in this home. Comments were made such as, 'Lovely staff', 'The food's great', 'They take care of me' and 'I'm safe here'.

The home has a Food Hygiene rating of '5' (the highest score possible).

The home has no space for a garden area but does have a courtyard which is accessed via locked doors and gate; this offers some safe outside space for residents.

How effective do service users consider the service to be?

There are regular visits from Podiatrist, Dentists and Opticians and the District Nurse visits as required.

All rooms are single, though some larger rooms can cater for couples as required and 90% of rooms are en-suite. Approximately 70% of the residents have some form of dementia.

Clients are able to make choices in line with their ability to do so, in line with the level of dementia present.

A gentleman resident spoken to who has been resident for only 3 weeks was very positive in his comments. He believes his stay is temporary while his family sort some practical issues out re his living arrangements, and although he expressed a wish to return to his own home he felt safe and comfortable here. Prior to speaking to him he was indulging in a hand manicure from one of the staff which he enjoyed.

The home employs a cook and all food is freshly prepared. Menus are well thought out and regularly reviewed. Clients and families are consulted on likes and dislikes before changes are made. Taster sessions are held when reviewing the menus to allow resident, relatives and staff to be involved and comment. On viewing a new pictorial menu we all (including the home representative) commented that the font used was too small and this will be changed prior to launch. Food can be requested other than the menu e.g. something on toast, and drinks are readily available and residents can eat meals in the location of their choice - dining room/own room.

Rooms can be personalised with the occupants family photos, pictures etc.

How caring do service users find the service?

Clients and their families are involved in the care plan development from admission and they are regularly reviewed.

Each client has a named carer but all staff are encouraged to care for all clients.

Client/staff interaction observed was excellent in terms of attentiveness and quality.

Daily activities are planned but are also responsive to change and need so quite spontaneous. Such activities include banjo playing, walks, an annual Strawberry Fayre and Pantomimes. An activities coordinator is soon to be employed.

How responsive to their needs do service users find the service?

The home holds quarterly management and relative meetings meeting and half yearly resident meetings. A complaints procedure is in place and is well-advertised.

'End of Life' care-plans are in place. The staff feels well able to deal with this but do use the specialist team if they feel the need. Getting families to talk about this matter remains problematic at times.

How well-led do service users consider the service to be?

Those spoken to felt the home was well managed. Staff spoke positively about the working environment and leadership. They felt sufficiently trained and supported. We were impressed at the induction programme for all new staff, who are supported by the Human Resource Officer to fulfil this programme.

Maintenance and repairs are dealt with promptly. Regular audits of need for maintenance are completed.

The home operates a no cash policy for residents so invoices for extra services e.g. hair dressing, relatives are then invoiced accordingly. There is some flexibility for those with no relatives but by exception only and things like “Lasting Powers of Attorney” are scrupulous checked for authenticity.

This home suffers from the ongoing problem of supply of incontinence pads and large equipment management.

Response from Setting:

The home has offered no response to the report (27th September 2017).

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| Signed on behalf of HWERY | <i>Matthew Fawcett</i> | Date: 9/10/17 |
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