

Enter & View Residential Care Report

The Green Residential Care Home

The Green, Ings Lane, Ellerker, East Yorkshire HU15 2DP

Date of visit: 15th November 2017

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HWERY Representatives: Martin Davies & Steve Mottershaw

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

The Green is situated in Elleker, a village in the East Riding of Yorkshire. It has a 20 bed capacity with 6 en-suite rooms and 5 extra bathrooms. The home offers respite as well as residential care. The home also offers a domiciliary care service. The home is centred on an old property with purpose built extensions to the rear.

Residents speak highly of the staff and of the care that they receive. A wide range of activities are offer, responsive to residents' requests and trips out are also offered to residents.

Recommendations/Observations

- A sign be placed on the front door stating where the entrance to the home is for easier access for visitors/relatives.
- The food hygiene rating should be prominently displayed within the home for information.



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?

The setting was clean with no unpleasant odours.

There were fire evacuation procedures in place and every resident had a personal emergency evacuation plan (PEEP) in place.

There is a nominated infection control lead member of staff.

A call system is in place in all of the rooms.

The home has a food hygiene rating of 4 (Good).

The areas where the residents cannot go are all controlled by coded locks and all upstairs room have sensors fitted to the doors.

There were handrails fitted throughout the home, the upstairs can be accessed by both a lift and a stair lift.

The homes newsletter reminds relatives of the need to sign in when visiting due to fire safety regulations.

How effective do service users consider the service to be?

The home has good relationships with external services including G.P.s, dieticians and opticians; although access to dental care can be more difficult

Residents are provided with fall pendants as required following assessment, these set off an alarm if a fall occurs, and can be activated by the resident when they need assistance.

If the home cannot continue to meet a residents needs measures are put in place to obtain 1-1 care, maybe at another setting if absolutely necessary; though the manager stated this is always done reluctantly.

The home also offers domiciliary home care, some clients have moved from home care into the home and vice versa.

The menu is on a four week rolling cycle and is cooked on the premises. One resident had helped to design the breakfast menu.

Clients from the home care portfolio are invited to join in activities in the home and are also offered a Christmas dinner delivered to their home.

Residents told us “We have a nice variety of meals” and “I have no complaints”.

The home produces a newsletter called “The Green Grapevine” This letter advertises forthcoming activities and also seeks feedback from relatives. It also updates on any works being done in the home.

How caring do service users find the service?

Care plans are updated monthly and after every professional visit. Every resident has a key worker and both parties have an input to this process. Residents have their own personal money, the balance being held under locked key. The residents pay the hairdresser themselves, thus promoting independence.

The residents were all very well dressed and appeared well cared for.

One resident told us “I have been here for 4 years as I kept falling at home, I couldn’t wish for better care” and others stated “The staff are very caring” and “staff are very dedicated”.

The home does not an activities coordinator in place; however the staff are encouraged to provide activities. The activities provided included chair exercise, bingo, gardening, walks around the village, trips to the garden centre, a Christmas meal at a local social club and a Hull Fair evening. A theatre company are providing a pantomime for the residents. Relatives are welcome at all events.

One member of staff told us, “I love to see residents singing and joining in activities, even though sometimes they don’t understand, it’s great for them to be encouraged”.

The staff questionnaires all stated that the residents decided what they wanted to do regarding activities.

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

The home does discuss end of life plans and find some families are described as relieved that the home broached this difficult subject.

The home holds both residents meetings and family meetings, there is an open door policy for relatives and a complaints procedure in place.

Staff questionnaires evidenced that residents decide what they want in respect of menus, trips and activities.

One resident told us that the home was “just the job”.

An additional lounge area has been created for residents. The manager considered it important that the residents could access another lounge area and made this possible by moving the office to a smaller upstairs room.

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

The manager told us “People who come here don’t leave their home they just change where they live”.

We spoke to two members of staff who were very complimentary about the management stating they had no concerns in raising issues. The staff we spoke to both enjoyed working at the home.

Training was documented and the home supported any training provided by EYRCC. Staff felt there was “good progression and training”.

One member of staff mentioned a “person-centred approach”.

The home has a handyman on site and use specific plumbers and electricians for more specialised work.

Response from Setting:

A sign is now displayed on the front door showing easier access for visitors/relatives.

The food hygiene rating is now also prominently displayed in the main entrance for information.

Signed on behalf of HWERY	<i>Matthew Fawcett</i>	Date: 24/1/18
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