

Enter & View Residential Care Home Report

Beverley Grange

Lockwood Road, Molescroft, Beverley, East Yorkshire HU17 9GQ

Date of visit: 23rd October 2017

Date of publication: 12/12/17

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

Beverley Grange is owned by 'Molescroft Holdings' who also own a home in Hull; it is a purpose built home catering for up to 64 residents on two floors in the main building and 11 bungalows for assisted independent living in the grounds. The top floor on the main building is for the clients requiring qualified nursing care and the ground floor is for those needing only basic care. The home accepts clients for respite care but not for day care. All rooms are single occupancy with en-suites. On the day we visited they had 58 residents in the home - around 60% of residents have some form of early or developed dementia.

Discussion with residents and their relatives on the day of the visit indicated to us that they felt very safe and well looked after.

Recommendations/Observations

- To further enhance the good practice already observed around good nutrition and dementia, the addition of pictures on the menus and notice boards would be helpful for residents.



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 home is spacious, clean and tidy with no odours and in good order generally. Toilet areas were in good order. Some upgrades are happening with the addition of fire place surrounds in some of the communal rooms.

The CQC, Public Liability and Food Hygiene certificates are clearly displayed in the entrance and in date and fire and evacuation procedures were clearly displayed.

There is key pad control at the main entrance to the building and also at other exits and in such areas as the kitchen and the laundry. There are also alarm systems in place at exits.

There is a computerised nurse call system in place in every room linked to the manager's office. Every room bell is checked weekly by the full time maintenance staff.

Medicines are managed well and stored appropriately in locked cupboards in a locked room on the second floor. Control Drugs are on site and managed according to legislation.

Staffing levels required are determined by the use of a dependency tool. Averagely they have 11 staff on the day and 10 staff on the evening shift. 5 carers and one registered nurse managed the night shift. They employ 27 other staff.

Staff training is extensive covering routine annual Fire/Moving and Handling/Control of Infection/safe guarding etc. to Dementia awareness, syringe driver training for the registered nurses.

Discussion with a few residents and their relatives on the day of the visit indicated to us that they felt very safe and well looked after. A daughter said to me (visiting her father) that she was delighted he was so well looked after. He had started his stay in the bungalows but due to deteriorating health had been transferred to the main building. Her father felt well looked after.

How effective do service users consider the service to be?

Residents have access to other services regularly and covering GP's, dentists, opticians and podiatrists as required. Community and psychiatric nurses also visit as required. One Registered nurse is trained in conducting hearing tests and also in 'Ear Syringing'

Beverley Grange has a Food Hygiene rating of 5; all food is prepared on site and the menu offers a wide variety of meals and snacks, the menus are varied and flexible.

All types of diets are catered for and the home recognises the relationship around good nutrition and dementia. Residents are at liberty to eat in the dining rooms, or where ever they want to e.g. their own rooms and sitting rooms. One lady was observed eating her lunch in the main foyer of the home. She likes to watch the comings and goings! Menus are advertised weekly on the notice boards and daily on the black board in the dining room. Families can bring meals in for their relative e.g. fish and chips if they want to.

Clients in the bungalows take general care of themselves including making their own breakfast but they are at liberty to come to the main building for other meals and for activities. Staff spoken to emphasised the need to allow clients to make their own choices in as many ways as they can.

Falls are managed by risk management processes. Those in the bungalows are brought in to the home if they begin to have recurring falls. Footwear is observed to avoid unnecessary falls. All falls are logged as incidents and solutions sought.

Corridors are spacious with hand rails. Rooms are spacious and clients are allowed to personalise them to their own liking.

Laundry is done solely on site and staff are employed to provide that service.

How caring do service users find the service?

All residents have a named key worker. Care Plans and Risk Assessments are commenced on admission and are regularly reviewed by staff and client where able, plus relatives; monthly and 6 monthly or as required. 'End of Life Care' discussions are commenced on arrival if possible but this remains, as in many homes, a difficult discussion to have.

The home employs a full time Activities Coordinator plus 3 part time staff and there is an advertised weekly plan of activities ranging from memory games to music and various exercise sessions and quizzes. Residents have access to a garden area and this is also used for gardening activities.

Hairdressing is available on certain days of the week or the clients own mobile hairdresser can visit as required. There is a mobile shop available on site plus a chocolate vending machine.

Clients' money is managed in house with a pocket money kitty for each resident topped up by relatives as required.

Via the relatives questionnaires provided by Healthwatch East Riding one relative stated 'I am very happy with the care and compassion shown to my mother. I feel confident in leaving my mother here'; another stated 'I am delighted with the whole set up'.

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

The home operates an open visiting policy. Six monthly formal meetings/discussions take place with residents & families and monthly formal staff meetings take place.

Residents spoken to felt they can express ideas and issues to the staff as they happen. There is a formal complaints procedure in place but managers seek to address matters as they arise to avoid escalation of any concerns expressed.

The home accepts clients for respite care but not for day care.

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

On arrival at the home we were welcomed by the registered manager and noted a poster of our visit on display. The manager provided us with her completed manager's questionnaire and other questionnaires complete by staff and families.

The Registered Manager is currently in place for both homes owned by Molescroft Holdings but that will change shortly as they await the Molescroft Manager being accepted by the CQC as the Registered Manager.

Staff spoken to (registered nurse and HCA) felt well supported by their manager quote 'I love working here and would not like to leave'. The carers spoken to state staffing levels are usually good. They get comprehensive training according to need which includes all the statutory requirements, fire etc. plus the specialist training according to the client's needs e.g. dementia awareness. Registered nurses have 'syringe driver' training and other subjects such as wound management. One registered nurse spoken to who has comprehensive nurse experience felt she would not wish to work anywhere else. She felt able to give the residents the care and attention they needed and felt well supported in her role on the nursing floor. 'I love my work' she said.

Via the staff questionnaires provided by Healthwatch East Riding one member of staff stated 'I am very happy here, I feel we provide a very happy homely atmosphere for our residents. I just wish the amount of paperwork could be reduced to enable more time to spend with residents, but I do understand the importance of the paperwork', another stated 'Really enjoy working here. Well supported by management and colleagues'.

The home employs a full time maintenance person who was on site during our visit fitting fire surrounds. Staff log maintenance requirements and he attends to them promptly as he is around daily.

Resident and relatives spoke highly of the staff and their happy positive attitude.

Reported concerns: It is important to continue to point out that this home like many others has issues around the supply of Incontinence pads, wheel chair availability and the collection of large pieces of equipment e.g. beds.

Response from Setting:

Beverley Grange acknowledged the content of the report as being factually accurate.

Signed on behalf of HWERY	<i>Matthew Fawcett</i>	Date: 12/12/17
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HW Reference: 20181121
Time & Duration of Visit: 14.00 - 14.45
Number of people engaged with: 3 inc. manager Christine Wright

Beverley Grange Re-visit Report

Date of first visit: 23rd October 2018

Date of publication: 20th December 2018

Date of re-visit: 21st November 2018

HWERY Representative: Peter Horrocks

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

Healthwatch East Riding conducted an Enter & View visit at Beverley Grange within the last twelve months. From the visit Healthwatch would make a series of recommendations to help drive improvement based on service user feedback.

COMPLETE	PROGRESS HAS BEEN MADE	NOT STARTED
Recommendation	Progress	
To further enhance the good practice already observed around good nutrition and dementia, the addition of pictures on the menus and notice boards would be helpful for residents.		

Summary of Key Findings & Progress towards Recommendations

Key Findings: The home continues to provide good quality care as evidenced by a recent CQC assessment which included an “outstanding” grading for responsiveness.

Progress on Recommendations: An attempt was made to illustrate menus but has been abandoned as being too complex to maintain. There is a five-week menu cycle with previous-day ordering.

Impact and Additional Observations

The home is part of a two-home group with Holy Name Care Home in Hull. Some training is shared.

There are currently 60 residents, about one third requiring nursing care. Dependency levels are unchanged since the previous Healthwatch visit.

Activities are covered by three organisers on seven days a week.

A new feature is the provision of a Vintage Tea Room as an activities focus.

The home continues to be warm and welcoming. On a short visit there was ample evidence of friendly staff-resident contacts and a relaxed atmosphere in this home.

Signed: *M. Harvey*

Date: 20/12/18