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Premises visited: Hallgarth Residential Home Hallgate Cottingham HU16 4DD	Date of Visit: 8 th February 2016	HW Reference: HWERY 20160208
	Duration of visit: 2 ½ Hours	
	HWERY Representatives: Eric Botheroyd Caroline Frost	Staff met during visit: Michael Everard (Manager) Jason (Deputy Manager) Leah Lee (Activities Coordinator)

PURPOSE OF VISIT

The visit was part of a HWERY programme to review the quality of provision of residential care in East Yorkshire.

INTRODUCTION

The home is a former purpose built care home formerly run by the Council. It is a large well maintained building on 2 stories. The entrance is into a front porch with seating and a signing in book for visitors. The porch also helps to keep the draft out and the entrance to the home warm.

The home is situated in the centre of Cottingham. It has a large mature garden to the front and a pleasant enclosed courtyard in the middle of the home, with a water feature and large table where residents can eat out in good weather. The courtyard is paved and well maintained with access from 2 paved ramps with sturdy rails on either side. The home is clean, warm and airy with no odour. The effect is homely and cheerful with pictures of resident's enjoying events on the walls.

POLICIES, PROCEDURES AND CARE PLAN

Each resident has an individual care plan. These are written with input from the resident, their families and Social Worker and include the resident's and their family's wishes for end of life care. Each resident has a named Care Manager and Keyworker. Care plans are reviewed each month by the Care Managers and any changes discussed with the resident or their family and a signature obtained where possible. Care Managers have a day each week which they can devote entirely to reviewing care plans.

Residents with capacity are given the option of taking their medication themselves but the administration of medicines is tightly controlled and audited by the Deputy Manager. All medication is supplied from Wilberforce Pharmacy who specialise in

medication for care homes. They provide labelled medicines for each Resident on a monthly basis. Medication is kept in locked cupboards and only Care Managers or the Deputy Manager are permitted to give it out.

The Manager explained there were storage problems with walking frames and said they found it very difficult to get anyone to pick these up as they don't want them back. As the home have very little storage space and this was a real problem.

Another problem is the storage of continence pads, supplied by the NHS, as these are delivered on a quarterly basis and it is difficult to accommodate so many at a time. The Manager also told us that the supply of these is limited to 3 per day so the home and the resident's family have to supplement the supply as required.

ENVIRONMENT

Although somewhat dated now the home is in a good state of repair. There is a homely atmosphere. There are 2 lounges downstairs and 1 upstairs which is used to provide respite care. When we visited a music activity was taking place in the "lively" lounge. Residents were observed enjoying and joining in with the activity. There is another quieter lounge for residents who prefer more peaceful pursuits.

There is a large dining room with an open counter through to the kitchens. Everything looked clean, well decorated and in good order. The dining room was bright and welcoming.

The home has 45 bedrooms. Efforts have been made to update the building and around half of these rooms now have ensuite facilities. Some of the older rooms are rather small. Current residents have first choice if a larger room with ensuite facilities becomes available. The rooms are decorated in accordance with the resident's wishes. They can bring their own furniture and effects to decorate their rooms and the home's Handyman carries out any alterations or decorating they require.

There is a board on the wall in the hallway near the dining room where the day's menu is displayed there is also a board showing what activities are available during that week. The home use pictures as well as words to help residents with dementia to understand.

They also use pictures on toilet doors and bedrooms are either numbered, have the resident's name on or if they prefer a picture of themselves on the door to help them remember their room.

There are 2 sets of stairs and a good sized lift.

PRIVACY, DIGNITY AND RESPECT

Staff were observed interacting in a respectful and friendly manner towards residents. The home is signed up to the E R Dignity in Care Charter and this appears to have been taken on board throughout the staff team.

Residents are able to access their own money either directly from a local bank or from the safe in the home. The Home Manager audits the books and receipts are given for services paid for or money given out. Those residents who have capacity

go out into Cottingham and can come and go as they wish. Residents with diminished capacity would be accompanied. Residents who wish to can attend a local church but a local service is also held in the home by a visiting clergyman for those who wish to attend.

There are regular residents Committee meetings. A Quality Assurance Manager takes the minutes and gives these to the Home Manager to type up and take action as appropriate. For example residents raised the issue that there were insufficient emergency pull cords in one of the lounges so the Manager arranged for more to be fitted.

Residents are asked each day what they would like to eat for the following day. Choices are put up on a board outside the dining room but sandwiches or homemade soup can be provided if someone prefers. Drinks are served with each meal and mid-morning and afternoon. Jugs of juice are provided during activities and there is also a water dispenser available at all times.

The Manager used to be a Senior Nurse in the NHS and is well aware of the importance of hydration for older people, particularly those with dementia.

Food such as meat is obtained from a local butcher and they prefer to serve locally bought fresh produce rather than frozen. Feedback obtained from residents is used to inform where to buy the food and when residents weren't happy with the meat the home changed their butcher.

RELATIVES

There were a number of relatives visiting the home at the time of our visit. We spoke to several and it was evident that they felt welcome to visit and to participate in decisions regarding their family member. The manager has an open door policy and welcomes input from resident' families and is happy to address any concerns they may have.

STAFF

The Manager said there were 50 staff in total. The staff team includes Care Managers, Carers, an Activities Coordinator, Administrator, Handyman, Kitchen staff and Cleaners.

Care staff start at 7.00 am, and Cleaners at 8.00am. During the morning there are 6 Carers, a Care Manager and the Deputy Manager on duty. In the afternoons there is a Care Manager and 5 carers and at night a Care Manager and 2 Carers.

Most of the staff are local to Cottingham. Upon appointment staff have a 6 month probationary period and are initially issued a temporary contract in order that their contract can be terminated if they are found to be unsuitable. The Manager said he had very low staff turnover. The home encourage whistleblowing among the staff team if anyone has any concerns these are swiftly addressed.

SAFE

The front door is controlled by a keypad and there is a door with a keycode at the top of the stairs. Residents with capacity know the keycodes. Most of the

residents who have diminished capacity come downstairs during the day as there are more staff available to assist them. Each room has a call bell and there are emergency pull cords in all bathrooms and lounges.

Medication is kept locked and only trained senior care staff allowed to give it out. Locked facilities are provided in client's rooms if they wish to self-medicate and have capacity to do so.

The home was clean throughout, kitchen and bathrooms looked very clean and in good order. The home are very proud of their kitchen and there is a 5 star hygiene rating displayed on the front door.

WELL LED

The Manager has been in post since the home was taken over from the local authority. He appeared to have a good relationship with both residents and staff. Ensuring that new staff are trained appropriately and that there are sufficient staff to resident ratios at all times.

New staff receive training when they start. The Manager believes that it's essential to get staff with the right attitude and values as they can be trained in the skills they need. Good communication skills are seen as an essential requirement of a Carer's role. 95% of care staff are trained to a minimum NVQ level 2 in Health & Social Care. The Manager believes that staff need to feel valued and invested in. The Deputy Manager carries out regular training and refreshers in Moving & Handling, Health & Safety, First Aid etc.

EFFECTIVE

Residents are regularly weighed and their health monitored. Most residents have a local GP. There are three surgeries in Cottingham. If a resident came from outside the area the home would recommend Dr Hancock's practice as they have an excellent relationship with him. He visits the home regularly and is particularly good in attending residents needing end of life care.

The home is visited daily by District nurses and Social Workers. The home also have opticians called Vision Care at Home who visit the home and provide glasses which have the resident's name on and also the type of glasses they are in case they should get lost. Residents are welcome to visit another optician if they prefer. Dental care is more difficult to arrange so residents are taken to a dentist in Hull when needed. The Manager said that it would be a huge help to have a visiting dentist or dental technician and if dentures could be engraved with the resident's name.

CARING

There was evidence of good care during our visit. Positive interactions were observed between staff and residents. Each resident has a named Care Manager and Keyworker who look after them so that they know them well and are better able to monitor their health and wellbeing.

Residents are treated as individuals. All the residents looked clean and well cared for. They were happy to speak to us and confirmed that the staff were kind and

they felt safe and well cared for. Most residents said they enjoyed the food and the company. They said they was always plenty going on and seemed eager to chat. They also liked being in the centre of Cottingham so that those who were able could go into the village if they wanted and they still felt part of the community.

We also spoke to relatives, most of whom were very happy with their relative's care. One lady told us that she was very happy with the care her mum received but she was a bit upset because her mum's glasses and teeth had gone missing which was affecting her ability to eat and partake in activities. The Manager had told us that clients losing their glasses or teeth was often a problem and while Vision Care (the visiting Opticians) put a client's name on their glasses other Opticians did not do the same. It is more of a problem for denture wearers however and it could be quite a lengthy process to have a client refitted for dentures, particularly if they suffered with dementia.

Hairdressers attend every week and use the purpose-built salon in the home.

RESPONSIVE TO NEED

The Activities Coordinator told us that she is in the process of carrying out lifestory work with clients so that she can carry out person centred activities with residents. She has also asked clients' relatives for memory boxes as these are particularly good for connecting with clients with dementia.

The Activities Coordinator told us that while clients who tend to frequent the "lively" lounge like music and playing group games, resident's in the quiet lounge prefer more peaceful activities. She tries to cater for all tastes for example they have a bingo game where they play for money and a money free game for those who don't want to gamble.

The home have entertainers who come in on a monthly basis and some social activities are also provided by the church.

Quite a few of the clients have capacity and it can be difficult if the behaviour of clients with Dementia impacts upon those with capacity. All staff have had Dementia training.

The Home Manager always tries to resolve such situations, meeting with the client's family and doctor to try to resolve any health issues which may affect their behaviour eg urinary tract infection. Sometimes if a resident's condition has deteriorated and nothing can be done to resolve the situation they may have to move a client on to a home more specialised in dealing with clients with dementia. This is always seen as a last resort however.

RECOMMENDATIONS

The only recommendation would be to suggest that noisier tasks, such as hoovering, be carried out later in the shift once most of the residents are awake.

CONCLUSION

This is a well run home which was a pleasure to visit. It was clear that the staff and Management care about the residents and the home has a lovely homely atmosphere which reflects that. Given the limitations of the somewhat dated building management have done what they can to update and modernise by extending bedrooms and where possible providing ensuite facilities.

Signed on behalf of HWERY	<i>Carol Dyas</i>	Date: 03.03.2016
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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.