

Enter & View Residential Care Report

The Manor House

White Gap Road, Little Weighton, East Yorkshire, HU20 3XE

Date of visit: 15th November 2017

Date of publication: 10/1/18

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 Manor House is part of the Park Lane Healthcare group and offers residential care for 37 service users. It is situated in the village of Little Weighton in East Yorkshire. There are 37 single rooms, 21 of the rooms are ensuite. The property is an older building with attractive grounds.

The home offers a wide range of activities and engages with the local community. Birthday parties are provided for all residents at the home and a trip to the seaside was provided in the summer.

All of the relatives and residents all spoke highly of the home, the staff and the care that they receive at the Manor House.

Recommendations/Observations

Healthwatch correspondence had been given to one of the directors, thus no posters advertising our visit were displayed, and also no questionnaires had been completed.

- The manager should distribute relative and staff questionnaires and return the completed forms to Healthwatch East Riding.



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 not admitted to the home until the manager had been informed we were here, and we were asked to sign in.

A food hygiene rating of 5 was displayed on the entrance door.

On entry the home was clean with no unpleasant odours throughout.

Fire evacuation plans were in place as were Personal Emergency Evacuation Plans (PEEPS). If the fire alarm is activated it automatically activates the emergency exits and fire escapes.

Both infection control measures and a call system were in place and areas where residents are not allowed to go are all protected by coded lock i.e. kitchen, office and laundry.

The call system is displayed on a screen.

The home is not at full occupancy at the moment. The manager is new in post, and is in the process of being registered, although she has worked there as a carer and senior for a number of years.

How effective do service users consider the service to be?

The home has access to a range of external services. A G.P. visits the home every Thursday and the chiropodist every 3- 6 weeks, a dental practice also visits the home. Vision Call visits the premises to provide ophthalmic services. The district nurse also attends every 3 days or more frequently if required.

Fall and accident forms are audited every week and referred to the falls team if appropriate. There are handrails all around the home to aid the independent movement of residents.

Meals are provided by Apettito and reheated on the premises. Tasting sessions have been held with families to ensure the choice of meals is appropriate. Residents are encouraged to eat in the dining room but can eat in their rooms if they wish. Two residents require support at meal times.

How caring do service users find the service?

Residents start on a respite care plan with relatives being asked to complete a social assessment plan. The residents then move onto a full care plan which is checked by relatives.

Residents have a pocket money folder. A hairdresser visits, but some residents prefer to keep their previous one.

The home has two activity coordinators working 09:00-12:00 and 12:00-20:00. During the visit the Enter & View representatives witnessed Christmas tree decoration making. Each resident has their own tree; the home has provided decorated trees for the local church.

One resident was celebrating his birthday and a party with a cake was being held at tea time, this is done for all residents who are celebrating birthdays.

A trip to Cleethorpes was organised in the summer. The home also engages with the local primary school, pupils visit and sing for the residents. One resident helps at a boxing club.

Residents told us;

“If you are not satisfied by what you get here you never will be.”

“The food is lovely.”

“Marvellous staff, they can’t do enough for you, day or night.”

“You couldn’t better the place.”

“If I didn’t like something I would say something.”

We spoke to a relative who told us;

“I can’t fault the care my mother receives, I can visit whenever I want”

We witnessed a member of staff engaging with a resident who was constantly rearranging the cutlery in the dining room; this was done in a caring and sensitive manner.

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

Both residents and relatives meetings are held and relatives can attend the residents meetings if they wish.

Consideration has been given to end of life plans; some residents have DNR directives in place.

There is a complaints procedure in place. One resident told us, “If I didn’t like something I would say something.”

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

Residents all spoke positively about the standard of care; one resident told us “I would give it a score of 150%”.

We spoke to 2 members of staff; one was a senior carer who had worked at the home for 13 years. She told us; “The residents receive a good quality of care, if we need anything we can go to the manager, I have got my NVQ level 4, and feel I would be supported if I wanted to progress further. The staffing is ok 99% of the time, if I witnessed anything that concerned me I would not hesitate in bringing it to my manager’s attention and safeguarding it if appropriate”.

We spoke to a carer who had been at the home for 4 years who said “The manager is lovely and will always listen. It can be hectic but the manager is there for us. There are some good staff and they are very caring. I am well supported and receive lots of training I have got my NVQ level 2 and 3. I would put my Mum in here”.

Maintenance is carried out by an internal team which is part of the care group.

Response from Setting:

The home acknowledged the content of the report (9th January 2018).

Signed on behalf of HWERY	<i>Matthew Fawcett</i>	Date: 10/1/18
---------------------------	------------------------	---------------

HW Reference: 20190122R
Time & Duration of Visit: 9:30am - 10:30am
Number of people engaged with: 4

The Manor House Re-visit Report

Date of first visit: 15th November 2017

Date of publication: 20th February 2019

Date of re-visit: 22nd January 2019

HWERY Representative: Chris Mills

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 The Manor House approximately 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
The manager should distribute relative and staff questionnaires and return the completed forms to Healthwatch East Riding.	

Summary of Key Findings & Progress towards Recommendations

Since arranging the re-visit and the home being sent a new set of staff and relative questionnaires, the home has returned 6 staff and 2 relative questionnaires. Copies of the questionnaire were available for relatives at the front door next to the signing in book. We asked that the home leave questionnaires available for another week to get more completed by both staff and relatives. From the 6 questionnaires we received back, 4 of the staff said they do not get enough time with the residents to support them effectively.

Impact and Additional Observations

At the time of the first visit the home was rated as 'requires improvement' by the CQC. Since the original visit The manor house has made changes in a few areas that have contributed to being rated as 'Good' in all areas at the recent visit by the CQC.

The noted changes are:

- New carpets in all communal areas and corridors.
- New furniture in dining room.
- Created a snug area for residents and relatives to use as a quiet area away from the lounge or residents rooms.
- New person centred software for care plans, daily notes, fluid checks etc. The manager said since its implementation it saves time and gives staff more time with residents.
- The hours the cleaning staff work were changed to suit the running of the home and they changed to products they use which have helped with odours.

Signed: *M. Harvey*

Date: 20/02/19