

Enter & View Residential Care Report

Magnolia House

42 Hull Road, Cottingham, East Yorkshire HU16 4PX

Date of visit: 29th January 2018

Date of publication: 20/3/18

HWERY Representatives: Martin Davies & Pam 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

Magnolia House is a large care home currently with 89 residents, owned by Park Lane Healthcare.

Both residents and relatives spoken to on the day were very happy with the level of care received, some relatives describing the home as being ‘..a very efficient and loving care home with excellent friendly staff’.

Residents state that they feel safe living at the home and there are of activities on offer; some residents also particularly enjoy the gardens and duck pond. Opportunities are provided that allow residents to maintain as much independence as possible.

Recommendations/Observations

- In response to information received via staff questionnaires, review staff training records to ascertain that everyone’s training needs are up to date and adequate. Some staff requested additional training in areas such as dementia, diabetes, epilepsy, Parkinson’s disease and challenging behaviour.

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 site was clean with no unpleasant odours.

Drug management is in line with legislation; all drugs are kept in a locked cupboard within a locked room and the keys are held by one senior member of staff per shift. Controlled drugs are held on site as required by individual residents and are correctly managed and regularly audited.

Infection control procedures are in place. There is also call system in place which is audited on a regular basis.

The home has a food hygiene score of 5 (the highest score possible).

The areas which resident cannot access are controlled by key pads. One resident told us, 'I feel safe here there are buzzers everywhere, the staff always know where you are'.

How effective do service users consider the service to be?

The residents have access to services they need such as opticians, chiropodists and dentists. GP service can be "mixed" but Faith House surgery is said to be excellent.

One resident told us, 'If you need anything they are there'.

The home was very roomy with hand rails in every corridor. Falls were monitored with accident forms which are then audited by the unit manager.

The food is provided by Appetito and menus are changed quarterly after consultation with the residents. The main meal is at lunch time; there is a cook on site with some meals being freshly prepared such as the full breakfast on a weekend. This system of cook chill food is more expensive, however the manager stated is easier to track nutrition. Any residents who have difficulty eating are fully supported.

Relatives told us 'Very efficient and loving care home' and 'Excellent friendly staff'.

One member of staff told us, 'I have only been employed for a short time and I find it a very happy home to work in. Everyone works as a team and puts the residents first. The care that is given is of a high standard'.

How caring do service users find the service?

Care plans are reviewed monthly and include a social profile; all residents have a key worker and they are included in the care planning. One resident's social profile highlighted he used to be a boxer, as result trips were organised for him to visit a boxing club in Hull.

Most residents have their own room which they can personalise as they wish. Residents have access to their own money which is kept in a safe with an electronic ledger in place. Some families send BACS payments for their loved ones.

There is an activities coordinator in place who produces a newsletter called 'Magnolia News' this lists all activities, highlights residents' birthdays and reviews activities for previous weeks. There is also a hairdresser called Tiffany's.

One relative told us, 'My mum is very happy, she always said she wouldn't come into a care home but she is very happy here'.

We witnessed residents enjoying a game of card bingo with the activities coordinator; however one member of staff stated 'I think there should be more entertainment throughout the week'.

There are lots of reminiscence photographs in the corridors.

One resident told us, 'The gardens are nice, it is a nice walk round and you can feed the ducks in the pond', another said 'I love my room overlooking the garden and I am very happy in the home. The food is excellent'.

An ice-cream van visits once a week and this is very popular with the residents.

One gentleman lives independently in a flat and joins other residents for meals.

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

The home provides respite and day care. A relative told us, 'My mum has only just become a full time resident here. She has had periods of respite over the last few years and I have always found the staff to be very good'.

Some end of life plans are in place, however in common with many care homes, they find this a difficult subject to broach. Also many residents and their families are reluctant to discuss this sensitive issue.

Wi-Fi is available in the home.

A complaints and concerns procedure is in place. One member of staff told us, 'Resident and family meetings are held regularly and the activities coordinator is open to suggestions'. The 12 staff questionnaires returned to us were consistent in that residents were consulted about what they wanted regarding activities.

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

There are quality assurance procedures in place and maintenance is provided by a full time employee. Daily handovers are done on-line.

The staff were very positive in their comments regarding leadership.

We spoke to a carer who said, 'I wouldn't change anything, the residents receive good care, and my induction was thorough. The team is well led by seniors and management'.

We spoke to two seniors who said 'The management are easy to talk to and good at sorting out problems, the residents do not go without. Training is available; there is nothing I would change'.

Three staff questionnaires highlighted training needs such as dementia, diabetes, epilepsy, Parkinson's disease and challenging behaviour.

Response from Setting:

Thank you for the opportunity to demonstrate the care we provide. It was a pleasure to have Healthwatch visit us.

Although we do provide mandatory training that covers most of these areas, there is potential for increasing this further in key areas.

Signed on behalf of HWERY

Matthew Fawcett

Date: 20/3/18

HW Reference: 20190322A
Time & Duration of Visit: 9.00 - 10.00am
Number of people engaged with: 4
Managers name: Lindsay Altoft

Magnolia House Re-visit Report

Date of first visit: 29th January 2018

Date of publication: 17th April 2019

Date of re-visit: 22nd March 2019

HWERY Representative: 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

Healthwatch East Riding conducted an Enter & View visit at Magnolia 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
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Recommendation	Progress
In response to information received via staff questionnaires, review staff training records to ascertain that everyone's training needs are up to date and adequate. Some staff requested additional training in areas such as dementia, diabetes, epilepsy, Parkinson's disease and challenging behaviour.	

Summary of Key Findings & Progress towards Recommendations

Progress has been made against the original recommendation; as well as mandatory training additional courses have been added in dementia, diabetes, epilepsy, Parkinson's disease and challenging behaviour.

There is also access to more long distance learning and there is a current project around the physical environment helping to decrease slips trips and falls and also to increase awareness of potential threats or future needs.

Impact and Additional Observations

Speaking to staff, they are happy with the changes to staff training and feel to new courses to have improved them both personally and professionally.

Management liked the different approach of an Enter & View and would recommend it to other homes, they liked the patient/resident perspective and found the Enter & View process of great benefit.

Signed: *M. Harvey*

Date: 17th April 2019