

HW Reference: 20190718  
Time & Duration of Visit: 2 hours  
Number of people engaged with: 6  
Managers Name:

## Enter & View Residential Care Report

Specialism/Service: Accommodation for persons requiring nursing or personal care, Dementia, caring for adults over 65 years

# Orchard Court

Bacchus Lane, South Cave, East Yorkshire, HU12 2ER

Date of visit: 7 November 2019

HWERY Representatives: Pam Wakelam and Denise Lester

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## Main Purpose of Visit

Orchard Court have requested the help of HWERY (Healthwatch East Riding of Yorkshire) to move forward with service improvements, following a disappointing CQC rating report in August 2018.

HWERY were recommended to them by the Manager of one of the company's sister homes, 'The Old School House' in Gilberdyke, who HWERY are currently helping for similar reasons. This is the fourth visit made to this home and is now seeing significant improvements.

The recent CQC report of June 2019 gave the home an overall rating of 'Good'. The Manager was quick to recognise the support and hard work of the staff for making this possible.

As this will be the last of these specific visits, we aim to address all the recommendations made from previous visits to review overall progress. The intention will be to revisit in six months' time to review further.

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## 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

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Under its remit of 'Community Voice & Influence', Healthwatch has a responsibility to support local people to share their experience and opinions of local services.

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## Introduction

Orchard Court is a 42 bed care home in the village of South Cave in East Yorkshire situated not far from the centre of the village. It is part of the 'Roseville Care Home Company' and is one of 5 homes. All the bedrooms are for single occupancy, most with en-suite toilet and sink and a couple with en-suite shower as well. The rooms are of a fair size and residents can bring personal items with them to put in their rooms. The home is a two story building with rooms on both floors. There is lift access to the upper floor and as required from the CQC report this has recently been replaced. There are garden areas for residents to make use of. The manager outlined plans to redesign one of the garden areas to include a summer house and seating area for the residents.

The home currently has 28 residents. Sanctions on taking in new residents had previously restricted the home to one new admission a month. It was pleasing to hear, that on this visit, that the restriction had now been fully lifted and the home open to all admissions. However, the manager informed us that they were taking things slowly to ensure residents were managed appropriately.

The home has a mix of residents, male and female, low and high dependency. They offer long and short term care, respite and day care and about 40% of the residents have some form of dementia.

The home is in the process of appointing a new deputy manager.

## Recommendations/Observations

Our intention for this visit was to concentrate on all of the key recommendations that we had made since our initial visit in March 2019.

**KEY GREEN = completed    AMBER = in progress    RED = not yet commenced**

**Name Badges** - All staff were observed to be wearing the new bright yellow corporate name badges and staff commented that they were pleased to be wearing them.

**Environment** - Due to the continued investment in the overall décor, including painting and decorating and replacing carpets etc., not everything is yet finished. However, positive progress is evident. One of the toilets has been decorated, as a trial, to simulate a 'BeachHut'. The plan is to roll this style out to all of the other toilet/bathroom facilities.

The top main corridor is being decorated as a street scene. The 'front door transfers' on the resident's room doors are as yet incomplete but will be completed as the decorating progresses. Gardens are currently being attended to ready for the resident's to use in the Spring. All of these developments seek to improve the living experience for the residents.

**Maintenance** - This is provided by on-site working and corporate assistance as required.

**Activities** - a new full time Activities Coordinator has now been appointed; the person who originally accepted the post having now declined. The new Coordinator has a good understanding of the company as she has come from one of the other homes. She started in post this week and was present on the day of our visit. She appeared very enthusiastic.

This is an area of care that we feel still requires improvement but things are beginning to happen, including some events planned for the coming weeks. The importance of activities is fully understood by the manager and her staff. The New Coordinator will also take responsibility for displaying what is happening on a daily basis and for displaying the posters celebrating events around the home.

The previously reported Pen-Pal club between Orchard Court and another home in the group has yet to be pursued.

Healthwatch representatives made the home aware of a good practice idea from another home. Each resident is given a small photo album for them to keep and add in meaningful photos. This has been noted as being very positive in the other home, where the residents walked around proudly with the albums to show people their photos.

**Key Worker system** - The system is in place but requires an audit. The notices regarding this process and identifying the resident's Key Worker still requires implementation. This notice needs to be copied and signed/dated by the care worker in question for their personal file so that the evidence of their understanding of the role is agreed. One staff member that we spoke to had a very limited understanding of the role, despite being designated a 'Key Worker'. Education for the staff is still required.

**Food Provision** - Menu boards in the dining area now have pictures to illustrate the menu choices on offer that day. The new regular chef is responsible for updating the board daily. On speaking with the Chef, she was incredibly enthusiastic about her role and the home overall. She feels that recent changes have made the home a better place. Management is now very supportive and open to new suggestions and ideas.

Fluids are available all day on Trolleys within the communal areas.

There are still improvements to make, but everything seems to be going forward positively.

**Staff training** - This process continues to be enhanced. Regular training takes place and is usually ran by the company's appointed trainer who visits the home as required.

**Care Doc** - The home have not introduced the system as yet. All paper systems have been reviewed and updated for all residents. The manager wishes to ensure that the changes have been embedded with the staff before any computerisation takes place. Additionally, they are not convinced that the Care Doc system will help them, or be as informative as, the paper system.

This is a decision for the home as the paper system satisfies the requirement for care.

**Meetings** - A program of meetings with staff, relatives and residents take place regularly. A newsletter is still planned to keep everyone up to date with things happening in the home.

**De-Choker** - this is an aid to be used in emergencies to relieve residents who may choke on food and was considered for purchase for this and all other homes in the group. The device costs approx. hundred pounds each and is proven to work and alleviate emergency care requirements, e.g. A&E admissions.

## SUMMARY

As always, we were greeted warmly by the staff. We were expected to sign in and hand gel was provided in the entrance lobby. The main reception area continues to be upgraded to facilitate a 'café style' environment for residents and visitors alike.

The new senior staff at head office continue to support the home in order to make improvements and the Manager feels fully supported by them. She also feels that staff are more supportive of changes being made.

She expressed gratitude for the support given by HWERY.

All staff spoken to had nothing but praise for the new systems and management. They stated that they felt fully supported and, most importantly, they felt listened to.

Residents spoken to felt that the staff cared for them and appeared generally happy in the home.

## Future Plans

A review visit in approximately six months' time will be organised with HWERY. For this review the team will focus on any changes made, including the amber and red areas of this report.

**Response from Setting:**

*[To be completed by office once received]*

Signed on behalf of HWERY

*K meadows*

Date: 15.11.19

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Time & Duration of Visit: 2 hours  
Number of people engaged with:  
Managers Name:

## Enter & View Residential Care Report

Specialism/Service: Accommodation for persons requiring nursing or personal care, Dementia, caring for adults over 65 years

# Orchard Court

Bacchus Lane, South Cave, East Yorkshire, HU12 2ER

Date of visit: 19 September 2019

HWERY Representatives: Pam Wakelam and Denise Lester

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## Main Purpose of Visit

Orchard Court have requested the help of HWERY (Healthwatch East Riding of Yorkshire) to move forward with service improvements, following a poor CQC report in August 2018. HWERY were recommended to them by the Manager of one of the company's sister homes, 'The Old School House' in Gilberdyke who HWERY are currently helping for similar reasons. This is the third visit made to this home and are now seeing significant improvements. The recent CQC report of June 2019 gave the home an overall rating of 'Good'. The Manager was quick to recognize the support and hard work of the staff for making this possible.

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## Introduction

Orchard Court is a 42 bed care home in the village of South Cave in East Yorkshire situated not far from the center of the village. It is part of the 'Roseville Care Home Company' and is one of 5 homes. All the bedrooms are for single occupancy, most with en-suite toilet and sink and a couple with en-suite shower as well. The rooms are of a fair size and residents can bring personal items with them to put in their rooms. The home is a two story building with rooms on both floors. There is lift access to the upper floor and as required from the CQC report this has recently been replaced. There are garden areas for residents to make use of. The manager outlined plans to redesign one of the garden areas to include a summer house and seating area for the residents.

The home currently has 22 residents. Sanctions on taking in new residents have now been lifted. The home is not open to new admissions at the rate of one a month. They do however have one respite care resident who stays at the home for short periods as required by her family.

The home has a mix of residents, male and female, low and high dependency. They offer long and short term care, respite and day care and about 40% of the residents have some form of dementia.

The company's 2 new appointees Business Manager, Steve Davies, and Operations Director Jo Harrison- Taylor continue to give regular support to the management of the home. This support is both helpful and welcomed.

## Recommendations/Observations

We were greeted warmly by a staff member who ensured we signed in correctly. The entrance door taking you into the reception area was locked as expected.

The manager was not immediately available having been held up at a meeting in York. The Deputy Manger was on annual leave. We were asked to wait in the seating area near reception, this area is in the process of being refurbished as a 'café'. Once the manager arrived, we spent an hour talking, followed by a tour of the building to observe developments since our last visit in July. We established that they would continue to welcome our assistance to move forward, and arranged to next visit for November. This will probably be followed by a visit in December, after which we will withdraw and review in a further six months.

We believe the home is now under good daily management with support from head office. This central support appeared to be lacking prior to the poor CQC report.

We used the observations and recommendations from that first visit to conduct this visit.

**General décor** - continues to be improved. General painting continues new carpets for communal areas have been requested and chosen. The door coverings continue to be added to more rooms and now client's photos and names have been framed and added to the rooms front door. These frames are also colour coded with a red or green edging to denote a DNR in place or not. Unoccupied rooms also are noted as unoccupied by a framed photo of for example flowers etc.

The manger outlined her plans for a change to the top corridor to make it a Street, using appropriate décor and placing a post box at one end as a focal point and in which the residents will be able to post letters/cards etc. We visited this area and observed that work has progressed with the ends and corners of the corridor walls being decorated with a brick effect wallcovering.

They also hope to redecorate the reception area as they are creating a Dementia Cafe and new coffee machines are being ordered for this purpose. Small tables with tablecloths and easy chairs are already in place.

**Staffing** - Staffing continues to be planned by use of a dependency tool. Due to reduced occupancy the care staffing numbers have been reduced slightly per shift to:-

- 5 mornings + managers / kitchen and laundry staff/domestic and maintenance staff
- 4 evenings
- 3 over night

It was noted that the manager and her deputy are often in the home working late so do see the night staff and they occasionally call in at weekends to see the staff.

We noted that all staff working on the day seemed to be happy and committed to their role. One staff member is using her creative craft skills to begin to prepare for Christmas, preparing personalised stockings for the residents. We brought her attention to a felt wall hanging xmas tree available on line that may be a useful addition, with the residents being able to hang felt baubles on this.

**Staff appraisals** - Staff appraisals have commenced and continue to move forward.

**Name Badges** - Badges, (Oval and bright yellow with black inscriptions) continue to be in use by all staff. These badges have now been adopted across the company.

**Meetings** - The needs have been addressed for all groups of staff and residents/relatives. Plans are as follows:-

- Huddles to address urgent matters happen as required
- Senior care staff will meet 2 monthly - we suggested Monthly
- All staff attend HUDDLES as required
- Residents/Relatives - bi - monthly. We saw a poster in the entrance giving dates of future meetings, the next one being the following week.
- The suggestion of a monthly newsletter for relatives is still to be progressed.

**Activities** - a new staff member has now been appointed to the post of Activities Coordinator. This is a full time post of 40 hours, to include weekends once a month. We were advised that the appointee has a number of years of care home experience and will be responsible for the publication of the above mentioned newsletter.

**Key Worker** - This concept is developing well but still needs to progress. A document has been produced detailing the roles and responsibilities of key workers. The plan now is to post this in a plaque which will be on the wall of each bedroom. Healthwatch stressed that this document need to be read, agreed and signed by the relevant Keyworker and copy held in the staff member's file for reference.

**Care-doc** - The computerised care document on hold until the written document is fully reviewed and improved. We saw a sample of a care plans that had been updated to include very detailed diet and fluid charts.

**Catering** - A new chef has been appointed. Picture menus showing choices each day for breakfast, lunch and tea, are now on display in the lounge area.

**Medication management** - No further discussion on this subject at this visit as the issues of concern seem to have been resolved. Will review again at the next visit.

**End of Life care** - The home manager is, as previously stated, an 'End of Life Champion' and so has a special interest in this very important aspect of care. She is planning the allocation of a room for this final act of care where families can stay with their relative at this time. We queried whether allocating a specific room is a good idea but the manager seemed to think it would enhance the care at that time for the resident and family. Use of the room would be a matter of choice. At the time of the visit the room had yet to be utilised. We again expressed concern that families may feel nervous about moving their relative to this room. The Manager stressed it would be 'on offer' and if not wanted that would be residents and families choice.

**Training** - No further discussion on this subject on this visit. There was evidence of the training taking place by means of matrices and notices displaying dates and subjects on offer, e.g health and safety training. E-learning has taken place for the new medication presentations (blister packs to boxes).

**Activities** - A new staff member needs to be appointed and is in the recruitment process. This will be a full time post.

## Manager Awareness

Opportunities were again taken to share some good practices from other homes to assist in the improvement processes:

- Paint all toilets and bathroom doors a colour only used on them to assist residents and visitors to identify them. This is an ongoing process within the home's overall improvement plans.
- Ensure all corridor hand rails are in a bold contrasting colour to assist clients and so reduce the possibility of falls. This is an ongoing process within the home's overall improvement plans.
- Night staff in PJ's and dressing gowns - the manager had seen that from a home in the South of England. It appears to settle residents with dementia when they wake at night and do not realise it is still time to sleep. The manager has discussed this with staff who expressed reservations for practical reasons.
- Re displays advising of staff on duty and information re day and time etc. Again work has progressed already at the Old School House which may be helpful to see.
- DE-CHOKER - a devise to assist when a resident chokes on food. This dislodges the food - known makes include DE-CHOKER and LIFEWAND. This has not progressed. We suggested that this could be a company wide purchase - one for each home.

## Objectives for Return Visit

It was pleasing at this visit to have a good meeting with the manager and a tour of the home to note the many improvements already made. We would hope to see further progress on the following at our next visit:

- **Key Workers.** We hope to see this process finalised at the next visit. We advise the managers to ensure all key worker staff sign an agreement for roles and responsibility to provide proof that they understand this new role; and that the document is displayed on resident's bedroom walls. A copy would be kept in the staff's personal file as evidence of the agreement and understanding of the new role. We would also like to suggest the creation of an AUDIT TOOL to monitor this new role and responsibility.
- **Activities** - It is hoped the new appointee will be in place and activities will be planned and ongoing. It would be helpful to see a planned programme of activities and a summary of activities for the day/week posted for residents and relatives to see.
- **Posters** - posters displaying information for residents and relatives/friends visiting the home are very important. A display in the lounges stating the day/week/month/year and the daily weather outlook would be a good starting point. We did note a large neon digital clock in the lounge area.
- **Décor** - Continued improvements to the décor and further maintenance on the gardens to maximise the potential use over the warmer weeks/months of summer. The manager has outlined plans to redesign the rear garden area. Work on this hopefully to start next spring.

- **Meetings** - We would look to see the notes of any meetings that have taken place.
- **Training** - Continued evidence of training completed and planned.
- **Pen-Pal club** - The manager spoke about the development of a 'pen-pal' club which This has not been progressed but the manager is talking to the manager of the sister home The Old School House in Gilberdyke, to seek to develop this idea. We will need to explore more at our next visit.
- **Care Documentation development** - continued observation of this process.
- **Events** - due to the relative close proximity of the Orchards and the Gilberdyke home, it may be worth exploring the possibility of sharing events.

## Summary

It was pleasing to note the tremendous improvement since our first visit. Some matters, however, relate to the availability of increased finances. The managers have a very good grasp of the issues facing them to improve the home. Relationships between management and staff seem to be very positive. The findings of the CQC inspection on June 2019, in which the home was rating overall 'Good', are a testament to the amount of work already carried out. The manager is grateful for the ongoing support from Roseville Care Home Company.

We discussed ongoing support from Healthwatch and the manager agreed she now has good support from Head Office, though she was keen to point out that she has appreciated Healthwatch's Support.

We agreed a visit in early November when we will review every recommendation made since our first visit. We will then agree the process going forward from that.

Planned return visit Thursday 7<sup>th</sup> November at 2pm.

### *Response from Setting:*

*[To be completed by office once received]*

Signed on behalf of HWERY		Date:
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- **Activities** - It is hoped the new appointee will be in place and activities will be planned and ongoing. It would be helpful to see a planned programme of activities and a summary of activities for the day/week posted for residents and relatives to see.
- **Posters** - posters displaying information for residents and relatives/friends visiting the home are very important. A display in the lounges stating the day/week/month/year and the daily weather outlook would be a good starting point. We did note a large neon digital clock in the lounge area.
- **Décor** - Continued improvements to the décor and further maintenance on the gardens to maximise the potential use over the warmer weeks/months of summer. The manager has outlined plans to redesign the rear garden area. Work on this hopefully to start next spring.
- **Meetings** - We would look to see the notes of any meetings that have taken place.
- **Training** - Continued evidence of training completed and planned.
- **Pen-Pal club** - The manager spoke about the development of a 'pen-pal' club which has not been progressed but the manager is talking to the manager of the sister home The Old School House in Gilberdyke, to seek to develop this idea. We will need to explore more at our next visit.
- **Care Documentation development** - continued observation of this process.
- **Events** - due to the relative close proximity of the Orchards and the Gilberdyke home, it may be worth exploring the possibility of sharing events.

## Summary

It was pleasing to note the tremendous improvement since our first visit. Some matters, however, relate to the availability of increased finances. The managers have a very good grasp of the issues facing them to improve the home. Relationships between management and staff seem to be very positive. The findings of the CQC inspection on June 2019, in which the home was rating overall 'Good', are a testament to the amount of work already carried out. The manager is grateful for the ongoing support from Roseville Care Home Company.

We discussed ongoing support from Healthwatch and the manager agreed she now has good support from Head Office, though she was keen to point out that she has appreciated Healthwatch's Support.

We agreed a visit in early November when we will review every recommendation made since our first visit. We will then agree the process going forward from that.

Planned return visit Thursday 7<sup>th</sup> November at 2pm.

### *Response from Setting:*

*[To be completed by office once received]*

Signed on behalf of HWERY	<i>K meadows</i>	Date: 24.10.19
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