

HW Reference: 20180730B

Time & Duration of Visit: 13.00 - 15.15

Number of people engaged with: 6

Enter & View Residential Care Report

Specialism/Service: Accommodation for persons who require nursing or personal care, Dementia, Physical Disabilities, Caring for adults over 65 years

Promenade

8-10 Marine Drive, Hornsea, East Yorkshire HU18 1NJ

Date of visit: 30th July 2018

Date of publication: [Office to complete]

HWERY Representatives: Martin Davies & Denise Lester

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 focussing on the provision and quality of residential care within Hornsea; following over 40% (3 out of 7) homes being categorised as 'Requires Improvement' by the CQC, including two of which that are under at least partial suspension by the Local Authority. It should be noted that Promenade is one of the homes rated as rated as 'Good'.

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 Promenade is situated on Hornsea seafront. It currently has 22 residents with 2 beds available. None of the rooms have en-suite facilities; however there are 7 bathrooms/toilets within the home.

The home employs 15 full time care staff and 4 part time care staff. 8 staff are on shift at any one day with 2 covering night shifts. Thirteen other staff are employed along with a maintenance person.

Feedback from residents and relatives indicated that they consider the home to be a safe, caring and happy environment.

Recommendations/Observations

- Ensure all visitors sign in and out of the premises and staff are made aware of the importance of this as a standard safeguarding procedure
- Undertake a review of activities with staff and residents to ascertain whether the home is achieving its maximum potential in this area
- Ensure that the complaints procedure is clearly displayed for residents and relatives



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?

By safe we mean people are protected from abuse or avoidable harm.

When we were permitted entry into the home we were not asked to sign in by the member of staff who answered the door.

From our observations, the home appeared clean and uncluttered and there were no unpleasant odours.

Fire evacuation, infection control procedures, a call system and medicine management procedures were all in place and areas where residents cannot go are controlled by coded locks.

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

Feedback from relative's questionnaires all stated they considered the home to be a safe environment, one relative stated, 'All staff are lovely, keep us updated and well informed. We feel our dad is in a safe happy environment'.

Some staff told us that they felt that there were not adequate numbers of carers on duty.

How effective do service users consider the service to be?

By effective, we mean does residents care, treatment and support achieve good outcomes and promote a good quality of life?

All care staff were observed to be wearing a uniform making them clearly identifiable. Staff do not wear name badges as they have had issues losing them; however there is a board with pictures of carers with names and all residents have a key worker.

Throughout the visit staff were observed fully engaging with residents.

The food is all home cooked on a 3 weekly rota and menus are on display; any residents with eating difficulties are fully supported as necessary.

The home has access to all services that they need; dentists, podiatrists, opticians and Community Nurses are all readily available. Residents are weighed on a monthly basis and the results recorded on a graph for monitoring.

All relatives' questionnaires evidenced that they considered the home to be effective in dealing with concerns and updating of care received. Relatives felt that staff encouraged residents to act independently and make their own decisions.

The site has a laundry system which uses minimal water and reduces infection. The home also uses a sanitation system in the rooms which acts like a dehumidifier in removing possible sources of infection from resident's rooms.

How caring do service users find the service?

By caring, we mean that the service involves and treats people with compassion, kindness, dignity & respect.

Residents appear well cared for, clean and tidy and staff were observed interacting positively with them. One resident told us, 'This is my home, we have a choice of food, the staff are very nice and you can't fault them. There is plenty to do and you want for nothing, they love us to death'.

There is not a specific activities coordinator employed at the home as the existing staff organise all entertainment and activities; examples of entertainers that have visited the home include 'Animal Tuition' and a birds of prey exhibitor. The staff state that residents are given a choice of activities and the residents decide what they would like to participate in. Feedback from staff questionnaires suggested that staff believe that there should be more activities on offer and maybe an activities coordinator in place.

We spoke to a gentleman who had been married whilst in the home; unfortunately his wife had died, but the home has planted a rose tree in the garden in memory of her; he was pleased he could 'speak' to her every day. His room is personalised with his wedding photographs and sporting memorabilia.

All the rooms that we looked at were clean, homely and were personalised with resident's personal possessions.

From feedback received via relative's questionnaires, relatives felt that the home was caring, stating;

'Very happy with all care provided'

'Friendly atmosphere, big light windows, Mum is well cared for and happy'

'Excellent care and staff'

One relative suggested visits by the library with talking books as a suitable activity for the home.

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

By responsive, we mean that the services meet people's needs.

The site has a lovely garden which is easily accessible and includes a summerhouse. The room to the rear of the building overlook the garden whilst the rooms at the front have an unobstructed sea view.

Respite care is provided by the home when required.

Residents do not have end of life plans in place.

Residents /relative meetings are held every three months which are well attended and there is a complaints procedure in place, however as far as we could see it is not on view.

There are no restrictions on visiting times except at protected meal times.

Residents have access to the internet via a computer which the home provides with a large print keyboard to make it more accessible to all residents.

The home has on-line emergency admission plans which are that given to ambulance staff when a resident is admitted to hospital; they have a photograph of the resident included to avoid confusion and give a current picture of the resident's needs and medication requirements. These have been praised by paramedics when admitting patients.

From the relative's questionnaires that were returned, all were positive about the homes responsiveness to the needs of their relatives.

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

By well-led, we mean that the leadership and management assures the delivery of high quality and person-centred care, supports learning and innovation and promotes an open and fair culture.

The registered manager has been in post for three years.

Feedback from relatives questionnaires show that relatives consider the service to be well led and that the residents speak positively about the management/leadership.

A training matrix is in place for staff and staff are consulted about training needs and personal development; the majority of staff feel that their induction, training needs and support from management is good.

Staff questionnaires state that staff feel that the home is well led, but some staff say that they consider shifts could be better covered as there is not enough time to interact with residents as other duties such as laundry and kitchen assistance need to be done.

Response from Setting:

The home has offered no response to the report (4th September 2018).

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| Signed on behalf of HWERY | Matthew Fawcett | Date: 07/09/2018 |
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