

HW Reference: 20181218A

Time & Duration of Visit: 10.00 - 12.30

Number of people engaged with: 7

Enter & View Residential Care Report

Accommodation for persons who require nursing or personal care, Dementia, Diagnostic and screening procedures, Physical disabilities, Treatment of disease, disorder or injury, Caring for adults over 65 yrs

Riverhead Hall Residential Home

Riverhead, Driffield, East Yorkshire YO25 6NU

Date of visit: 18th December 2018

Date of publication: 30th April 2019

HWERY Representatives: Denise Lester & 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

Riverhead Hall provides care for up to 45 older people some of whom may be living with Dementia. At the time of our visit there were 40 residents all in single en-suite rooms. We spoke with the manager, a resident, her relative and four staff members.

The accommodation is provided over three floors with a lift to move residents between floors. There are three lounges with one being a quiet lounge. At the time of our visit the home was decorated for Christmas and provided a welcoming and homely atmosphere.

There is a full time activities coordinator in post and residents can take part in a wide variety of social activities and trips out.

Both residents and relatives spoke very positively about the management of the home.

Recommendations/Observations

- We have no recommendations to make at this time.



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.

The home was welcoming, clean and had a fresh odor.

Fixtures and fittings appeared safe and there were no obvious hazards or potential H & S risks to residents.

Some areas of the home e.g. the kitchen, laundry, medicines cupboard are not accessible to residents and are secured with a keypad, as is the front door. We saw that medicines are kept in a locked cupboard and managed in line with current legislative requirements.

There is a call system in place for residents which is due to be updated in the New Year.

Infection control is taken very seriously and we were prompted to use the hand sanitiser on arrival.

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

One resident we spoke with said that the best thing about living in the home was that she felt safe and well cared for and she praised the staff highly for the care and attention she was given. We also spoke with her daughter who said that her mother had been able to sleep without the need for sleeping tablets since moving into the home, largely because she felt reassured that she would be checked on during the night and always had her call button to use if necessary. Neither of these ladies felt there was any cause for complaint but said that they would feel comfortable to speak with the manager if necessary.

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 staff were well presented and wore uniforms which differed according to their role.

When residents were moving to the dining room for lunch we saw moving and handling equipment being used carefully and effectively.

One bathroom was fitted with a tilting bath with a side entry door, other bathrooms used a hoist. There was also a wet room for those residents who preferred a shower.

Residents are weighed monthly and their food and fluid intake monitored. A weekly food diary is kept for new residents or those at risk. There is a four week rotating menu for meals which can be taken in the dining room or in the residents' rooms if preferred. Meals are supplied as 'ready meals' in frozen form by 'Apetito'; these meals include food in a suitable form for residents with swallowing difficulties. One resident told us that she enjoyed the food and looked forward to mealtimes.

Some residents require assistance to eat and we saw staff providing support for this and using specially adapted cutlery and crockery allowing them a greater independence.

Residents have access to all of the services they need e.g. dentist, optician, podiatrist, community nurse and GP. A hairdresser visits each Wednesday and there is a dedicated hairdressing salon.

We saw that there is a lovely, well maintained garden with a variety of outdoor furniture. Residents told us that they use the garden when the weather is suitable.

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 were clean and well-presented, looked a healthy weight and appeared well cared for.

We saw that interactions between residents and staff were friendly and compassionate.

There is a full time activities coordinator in post and residents can take part in a wide variety of social activities and trips out; we were given a printed programme for social activities in December as evidence of the type of activities that take place.

Residents all have a named carer and staff invite relatives to contribute to the writing of care plans. Care plans are reviewed after the first six weeks and thereafter on a regular basis; an end of life plan is included where appropriate.

Residents all have their own room which are personalised, often with their own furniture and other possessions. Residents' money is held centrally and can be accessed to use for the hairdresser, newspapers, shopping etc.

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

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

The home is able to provide both day and respite care as long as space is available.

A complaints procedure is in place and the policy is clearly displayed on the wall in the entrance.

A relatives' and residents' forum is held every three months; this forum is run by a resident who also acts as a residents' champion to help new residents settle into the home.

The home works hard to cater for religious and cultural needs; communion is held in the home and some residents are taken out to attend places of worship which helps them retain links with the local community.

Residents have access to telephones, mobiles and computers; Wi-Fi is currently being extended to cover all areas of the building.

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.

Both residents and relatives spoke very positively about the management. Many of the staff have been in post for a number of years and staff levels appear sufficient for both day and night.

There is an in-house trainer who provides training across all of the homes in the group. All of the mandatory training is covered and recorded on a training matrix, new staff take part in a 3 day induction programme.

Staff were complimentary about working at the home, one staff member said 'It's very enjoyable here; I wouldn't be working here if I didn't enjoy it'. Another said 'management are brilliant, they offer lots of support and training' and another 'I can see the changes over the years and its great here now'.

Response from Setting:

No response has been received from the home (30th April 2019)

Signed on behalf of HWERY	<i>Matthew Fawcett</i>	Date: 30/4/19
---------------------------	------------------------	---------------