

HW Reference: 20181127A

Time & Duration of Visit: 09.45 - 13.00

Number of people engaged with: 10

## Enter & View Residential Care Report

Specialism/Service: Dementia, caring for adults over 65 years

# Woodlands

Riverhead, Driffield, East Yorkshire YO25 6PB

Date of visit: 27<sup>th</sup> November 2018

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HWERY Representatives: Denise Lester & 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

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

Woodlands care home has space for fifty residents and at the time of our visit had forty people living there. Fifteen rooms have basin and toilet facilities; there are an additional ten bathrooms/toilets available throughout the home. Woodlands offers respite care when rooms are available.

The home is well maintained, clean, and tidy and feels welcoming. The rooms are being redecorated and refurbished on a rolling programme, producing an environment which is very pleasant and comfortable; the manager and owner are keen that the surroundings should be as homely as possible. The staff were welcoming and hospitable making our visit pleasurable which was reflected in the majority of conversations we held with the team and residents.

### Recommendations/Observations

- The identity of all visitors should be established before entry is gained and all visitors should be required to sign in.
- Cleaning equipment should not be left unattended at any time (particularly if it holds potentially harmful substances).
- Dementia Friendly signage should be extended to all communal areas to maintain the work already done on bedrooms, toilets and bathrooms.
- Planned activities need to increase to include all days of the week, have more variation and include everyone in the home, specifically those with higher needs or dementia.



## 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 arrived at Woodlands care home we had to press a doorbell and await entry, the front door was fitted with a security lock which stops people entering without staff knowing and also for the safety of residents; there was also a hand sanitiser in the reception area to aid infection control. A member of staff buzzed us in without checking ID or asking who we were there to see, the reception desk was not manned at the time. We were waiting a while before the reception staff returned and we were not asked to sign in.

The care home had a welcoming reception area, which was clean and tidy.

During our walk around the home we saw that all residents' rooms have a call system in place if they need assistance.

We were shown the areas that residents do not have access to, which included the laundry, kitchen, staff room, medicine room and cleaning areas, all of these areas had number locks on to prevent access. When in the medicines room we saw that all temperature controlled drugs were being stored accurately and the medicine management control was in place. However, we also witnessed an unattended cleaning trolley, including cleaning substances that had been left unattended and was propping a residents room door open.

Woodlands employs two handymen who work forty hours between them to make sure the home is well maintained and repairs are dealt with promptly. Any work which the two handymen can't do is contracted out.

The home has a food hygiene rating of 5. We were impressed by the level of detail of a spreadsheet that was being used in the kitchen to highlight any dietary requirements, special diets and food and fluid requirements.

### **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 of the staff we saw were clean and tidy and in uniform, although we did not see any of the staff wearing a name badge to help identify them to residents, relatives or visitors.

There were plenty of handrails throughout the home to help maintain independence and these were painted either blue or purple to highlight them to residents as they walk around the home. All residents' bedroom doors are painted different colours to help identify them; they also have dementia friendly signage on them, consisting of a picture of a bed, number and space to display the resident's name. All toilet doors were painted yellow and bathroom doors green, also with dementia friendly signage so they are easily identified.

There was plenty of moving and handling equipment throughout the home but we did not get opportunity to witness it being used during our visit. Some residents were in wheelchairs and we saw staff supporting those residents effectively.

The residents are encouraged to personalise their rooms to make them feel more homely and residents also have access to the garden area and outdoor spaces.

The kitchen was kept clean and tidy and the home employs two chefs to cater for the residents - all food is freshly prepared on site. There is a four weekly rolling menu to give the residents a varied diet and always choice of alternatives if they do not fancy the food planned on any given day. Residents mainly eat in the dining room but can choose to eat in their own rooms or lounges if requested. We also saw that juice and water was available around the home and in some rooms to maintain healthy hydration levels.

There were two residents who we were told require support during meal times and their needs are met by the staff team by not having breaks during meal times. One lady sat we with at lunch time had visited hospital the previous day due to difficulties with swallowing and eating. During the lunchtime of the visit she felt she couldn't eat and only requested water to drink; we witnessed her regurgitated a large quantity of what appeared to be a clear fluid and she became somewhat distressed. No-one came to help her until we called for assistance, whereupon a carer removed the saucer of fluid which she had produced, brought a pile of clean serviettes before moving straight on to assist elsewhere in the dining room. Despite this incident the lady was very positive about the care she was receiving at the home and didn't express any concerns. Another lady couldn't praise the home enough, she said 'it is the best thing since sliced bread', she said that she felt safe, well cared for and really enjoyed the food.

Woodlands care home has access to all services it may need from outside services, such as 543 dental care who visit 6 monthly, both GPs in Drifffield, daily visits from the community nurse, a fortnightly visit from the chiropodist and also the podiatrist, and the mental health and falls team when needed.

There is a well maintained garden at the home with planted areas and seating. There are plans to convert a section used as a small allotment into an outdoor bowling lawn.

### **How caring do service users find the service?**

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

As we were shown around the home we noticed that all residents we encountered looked in good health, were clean and well presented.

All of the interactions we saw between staff and residents were positive and friendly, staff were compassionate and appeared to have the resident's needs as their priority. Each resident has a keyworker assigned to them; a keyworker will normally be assigned three to

four residents' dependent on experience and contracted hours. Each resident has a care plan which is started at pre-assessment and updated monthly or when a change is required. Residents and relatives are encouraged to be involved in the production of care plans.

Residents have their own money to pay for shopping and services when they like it. Money is kept in the safe in the admin office and signed in and out when the residents want it. A hairdresser visits the home weekly and the home has set up a room as a salon. There is also a shop run by the home which has everyday essentials for the residents to purchase such as shampoo, toothpaste and soap etc.

We were told that the home employs one activities coordinator who plans and runs the activities for the residents. The manager admitted that external activities don't happen as often as she would like, though they are planning a coach trip to Sewerby Hall next year. She said they do get external entertainment into the home on a more frequent basis. In the last year they have had singers, ponies, Zoo-lab, Salvation Army, a Halloween party, cheese and wine nights and they invite Kingsmill School at Easter and Christmas to sing with the residents.

We were told that the activities coordinator is planned to work two days of the week downstairs, two days upstairs and a day for planning; although we were told by both staff and residents that there are no activities planned for the activities coordinators days off and that activities rarely take place upstairs in the dementia unit.

During the visit and via staff questionnaires, staff told us:

'There should be more activities and specifically for higher level of dementia residents. The activities coordinator isn't upstairs much. If we as carers didn't use our initiative and do things ourselves then the upstairs residents would rarely have activities to take part in'

'I wish we could do more external activities for the residents'

'I'd like to see activities more frequently in the home. The coordinators not always doing what he should be'

'We don't get enough time to spend with the residents'

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

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

To help meet the needs of the residents, the home hosts a residents and relatives meeting monthly and at differing times of the day to try and meet relative's needs around working times and school runs etc. Staff meetings are also held monthly to discuss residents requests, staff issues and training needs etc.

The home has a complaints procedure in place should any residents or relatives have a need to raise any issues, although the manager is happy for people to come and speak with her at any time; none of the residents we spoke with had ever felt the need to make a complaint.

End of life care is first mentioned at pre-assessment but not pushed if the individual is uncomfortable talking about it. It would be something they look at when the family or resident is ready to discuss.

We saw a couple of residents with mobile phones so they could keep in contact with their loved ones and Wi-Fi is available in some parts of the home.

The activities offered at Woodlands appeared to better cater for the residents on the ground floor where residents have capacity and are less dependent. The choice and regularity of activities occurring upstairs where residents have a higher level of dementia seems limited and appears to not be person-centred towards the individual resident's needs. A carer told us 'There should be a wider range of activities, more person centred and catered for those with higher levels of dementia'.

## 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 manager at Woodlands care home has been in post since November 2017, it is evident that she has passion for the job and has a vision for how she sees the home going forward. The home currently employs eighteen full time care staff, eight part time care staff and eighteen other staff, such as domestic and kitchen staff. We were told that there is six care staff on duty during the day, plus a senior with four on the night shift. There is also kitchen staff, admin staff and domestics on duty during the day. Any absences try to be covered by agency staff or by offering overtime; some staff thought that staff numbers are a little short during the day for the number of residents that they have.

Residents and staff generally spoke positively about the manager and leadership of the home on the whole, but there was some variation of opinion, overall they seemed to feel supported in their jobs and that all training needs were being addressed. Most told us that they enjoy working at the home and their views are listened to and considered during staff meetings; however a couple suggested that they were not completely confident in approaching the management with issues they may have and are concerned about staffing levels - comments were made such as:

‘I feel I work in a high standard of care home’

‘I enjoy all parts of working here, it’s all rewarding’

‘I love my job’

‘I enjoy spending time with my key clients’

‘If I could change just one thing it would be the tit for tat mentality and improve staffing numbers’

‘It would be good to have an extra pair of hands at busy times, such as meal times’

‘Staff levels feel short for the amount of residents we have’

‘I don’t feel there are adequate numbers of staff on duty most days’

‘There is a divide between the upstairs and downstairs staff teams’

‘The management team are not approachable’

### **Response from Setting:**

*The report appears factual on the day. Activities have been increased, especially on the upper floor (Dementia Area). Although we try to provide a happy work place for staff, unfortunately we are not always able to please all staff members.*

*Woodlands will aspire to improve our service.*

*Staff do have extra help at lunch-time, the domestic team assist.*

Signed on behalf of HWERY

*Matthew Fawcett*

Date: 18/1/19