

Enter and View Report

Name of Setting: Elizabeth Homes

Name of Manager: Jean Putwain

Insert address: Elizabeth Homes, 67 Hailgate, Howden, DN14 7ST

Date of visit: /11/23 & 05/24

Date of publication:

Healthwatch staff & volunteers involved in the visit: James Dennis & Carrie Frost

Disclaimer: This report relates only to the service viewed on the date of the visit and is representative of the views of the residents who contributed to the report on that

What is Enter and View?

Enter and View is the statutory power granted to every local Healthwatch which allows authorised ambassadors to observe how publicly funded health and social care services are being delivered. Healthwatch East Riding use powers of entry to find out about the quality of services within the East Riding.

Enter and View is not an inspection, it is a genuine opportunity to build positive relationships with local Health and Social Care providers and gives service users an opportunity to share their views in order to improve service delivery. Enter & View allows Healthwatch to:

- Observe the nature and quality of services
- Collect the views of service users (patients and residents) at the point of service delivery
- Collect the views of carers and relatives of service users
- Collate evidence-based feedback
- Enter and View can be announced or unannounced

Purpose of Visit

- To engage with service users of the named service and understand how dignity is being respected in the care home environment.
- To observe the care provided at this home, looking at a number of key themes, environment, food & drink, safeguarding, staffing and personal care.
- To observe residents and relatives engaging with the staff and their surroundings.
- Capture the experience of residents and relatives and any ideas they may have for change.

Elizabeth Homes Background

Elizabeth Homes is a medium sized home in the market town of Howden. The building was not purpose built but was refurbished in 2018 and is currently in the process of being redecorated and has a homely feel. The home is run by Koru Care and registered for a maximum number of 30 residents. Elizabeth Homes is registered with the Care Quality Commission (CQC) for personal care for adults over 65 years with dementia. The home also provides respite care. The home is based in the heart of Howden, with local amenities nearby.

At the time of the visit, 25 residents were living at Elizabeth Homes, 4 of these are there for respite care.

The Visit – On Arrival

On arrival at Elizabeth Homes the Healthwatch Representatives were welcomed into the home by the manager. There was a porch into a small reception area. There is a security lock on the main door with a keypad.

The reception area has a visitors book which is blacked out (carbon copy below) so visitors can't see other visitors names. There was also a hand sanitizer dispenser and a forehead thermometer on the wall. The reception

area also has a notice board with relevant information relatives. There was a staircase with a gate at the foot of the stairs. There were doors off the hallway into the manager's office, an activities room a toilet, clearly marked with a dementia friendly sign, and a couple of living rooms.

Summary of the Manager's Questionnaire

Before the visit, Healthwatch sent the manager a questionnaire to find out some general information about this home.

Staffing and General Information

The manager confirmed she had worked there for many years, as had many of her staff.

Elizabeth Homes employs 16 full time members of care staff but no part time members of staff. The manager explained that their full-time hours are 33/week. This enables staff are able to pick up additional hours when necessary to cover absences. They also have a bank worker to cover care and another to cover domestic. The bank staff are long standing ex-employees who have worked previously for the home and have wished to remain as bank staff and provide cover when they can.

The manager confirmed that there are 5 care staff on shift during the day, 1 senior and 4 care staff. Two care staff cover the night shift. In addition there are 9 other staff members, including an activities coordinator.

The manager confirmed that the home has a fairly low staff turnover and that many have worked there for many years. The manager did say thought that recruitment and retention was a problem generally across the industry and that they had found it very difficult during Covid and had lost 5 staff due to the vaccine stipulations.

Elizabeth Homes have the benefit of being registered with the Home Office to recruit overseas workers which helps to maintain staffing levels. They also have a house in Howden where staff recruited from overseas can live.

The manager also told us that they are taking advantage of a recent incentive from the council gives them £3000 per candidate to train staff.

Staff have face to face training for moving and handling but use e-learning for the majority of their training. The manager said they had recently changed their online training provider and were much happier with this service than the previous one. The home use Elearning – Curve Learning, QCS – Policy and procedures, (provides reading lists for staff and extensive and comprehensive audit tools.

The home has 3 train the trainers (Manager/Deputy/Team Leader) for Moving & Handling, Fire Safety, 1st Aid for practical training, all through Curve Learning and Development.

Safeguarding

Any safeguarding issues are dealt with in accordance with their policies and procedures. Any issues or concerns are investigated and reported to Safeguarding immediately including unwitnessed falls. CQC notifications are also done. All staff trained in ER Safeguarding level 1, seniors undergo training with MCA and reporting concerns. The manager has an open-door policy and encourages staff to speak to her about any concerns.

Care and Responsiveness

All residents have care plans and risk assessments in place. These are done initially through discussion with the GP and SPOC team, along with the resident and their family. Care plans are reviewed every month or if a resident's needs change.

Residents and their relatives are involved in the review of their care plans. The home operate a "resident of the day" system so that each resident is spoken to about their care plan and asked if they would like this to change. They are asked which foods they are enjoying and if there is anything else they would like including on the menu. They are asked whether they feel they are getting the right amount of emotional support and their personal allowance is discussed with them. Care plans and changing needs are also discussed with relatives.

Individual assessments for mobility and ensuring and promoting independence whilst keeping the resident safe is always considered as they try to ensure that the least restrictive practice is used whilst keeping the resident safe to ensure that residents have free will and are able to mobilize independently as far as possible.

If a resident's needs change this is recorded on their care plan and relevant risk assessments done. If different equipment is to be used photos of this and directions of how to use this equipment is included on the care plan, so that all staff fully informed. The manager can see at any time who has had personal care delivered and by whom. Oral health care is included in all care plans.

The manager said she felt fully supported by the management team at Koru Care. They are very proactive and respond positively to things that will make things work better in the home. For example, the home's new Quality Policy System that updates itself automatically and has a built-in auditing system.

The care organisation has a nominated individual, whom the home manager can contact if needed at any time.

The digital Person Centred System (PCS) is now up and running. This is working well, and the manager is very pleased with it. A huge amount of work was involved transferring all care plans, risk assessments and GP notes etc over to the system and this took longer than expected. However, the Manager is extremely pleased with how it is working now. All care can be recorded in real time, as it is delivered, and the system flags up any specific issues.

The Person Centred System records all residents' care plans, risk assessments and doctor's notes. It flags up any issues, for example if a resident's fluid intake is down staff are aware and can be more vigilant to ensure that fluid levels are maintained.

The home also trialled the "relatives gateway" part of the PCS. This enables families to access their relative's record remotely online. They can see what care has been delivered, activities their loved one has taken part in. The home can put photos on the system and if the resident has a mobile the PCS

resident gateway can be used for video calling. Relatives can see their loved one's care plan and individual risk assessments that have been put in place. The relatives' gateway pilot was such a success that the home manager said that the home would be keeping this facility.

Most residents have end of life plans in place. Some residents have capacity to make informed choices and decisions about this and these are respected. Meetings are held with family members of residents who lack capacity to complete end of life plans.

Residents who are assessed through social services and admitted to the home have had a mental capacity assessment completed. The home will prepare an MCA risk assessment for each individual module of their care needs to maintain as much independence as possible and least restrictive methods used to promote health and wellbeing and inclusion. Where an individual's capacity appears to fluctuate or is declining, best interest meetings are requested with GP's, Families, Social services to ensure the individual's needs are met.

Where residents have a ReSPECT form, family or friends are involved and kept informed by the home. These are discussed with the GP and SPOC team.

Dietary Requirements

All meals are prepared on site by kitchen staff. The home has a level 5 food hygiene rating. There is a choice of meals available. Food preferences and dietary requirements are discussed at the pre-admission assessment and residents are regularly asked what meals they are enjoying and if there is anything else they would like to see on the menu.

If there is nothing on the menu that is to a resident's liking the cooks will prepare something different for them.

Resident's weight and fluid intake is recorded on the PCS and action plans completed and referrals made where necessary.

Accessing Health and Care Services

Residents have their sight checked yearly. Some residents with hearing aids have yearly check-ups at the Audiology Clinic. Some family members are able to assist with their loved one's appointments. Hearing aids are cleaned on a daily basis as part of the resident's personal care. Staff check hearing aids weekly and would assist if a resident was struggling with their hearing, checking the battery or make them an appointment at the Audiology Clinic if there was a problem or concern with their hearing aid.

Residents without hearing aids would be referred to their GP if they were observed to be having difficulty hearing.

The manager said that since Covid they have not been able to contact the GP surgery directly. Instead, they use a single point of contact (SPOC) system to report any concerns about residents' health. This is done online but at times it would be more helpful to have a direct conversation. Staff do ring the surgery directly if it's an emergency. The manager told us that if SPOC is contacted in the morning the resident can be seen on the same day, but the doctors' do request that the home take patient observations.

There is a weekly "ward round" for any residents the home has concerns about. This is done by a specialist nurse. We were told GPs rarely visit the home.

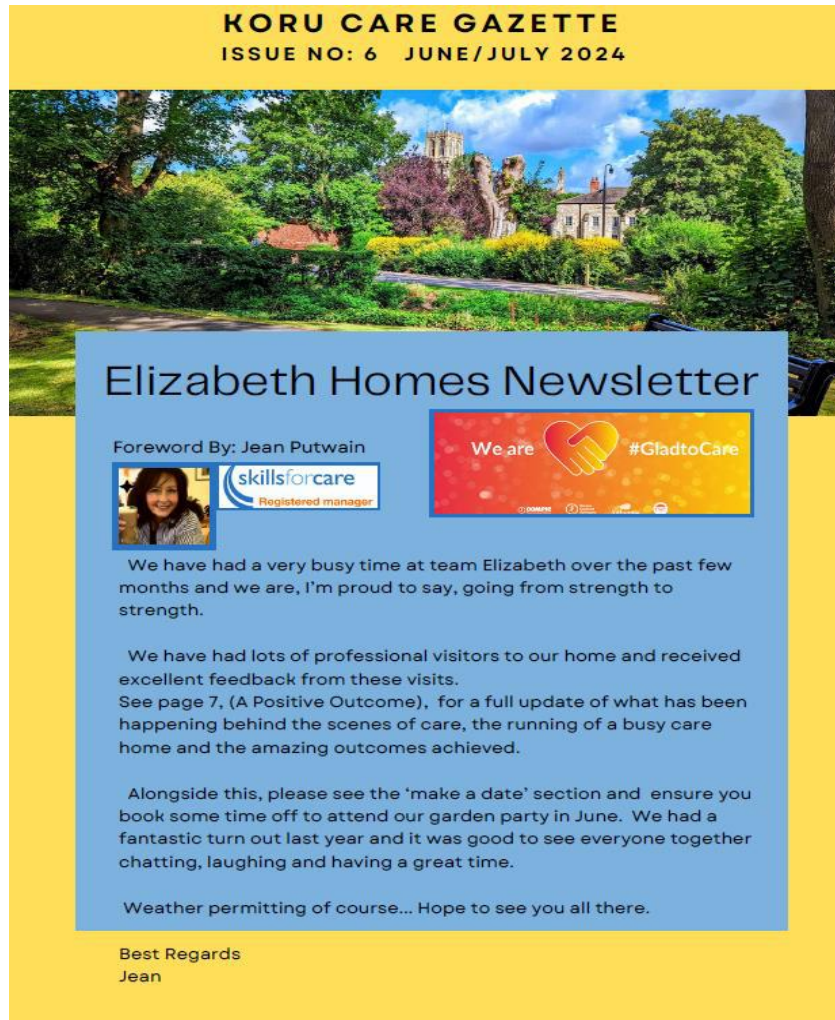
The home said they often experience difficulties with patient transport. You can only ring 3 days before the resident's appointment. There is often a long wait for the phone to be answered and the phone cuts you off after 40 minutes.

The home use the 543 Dentists based in Hull. They carry out home visits for care homes.

Complaints Procedure

The manager said there is a complaints policy in place, and she has an open-door policy where relatives can raise any concerns with staff or the manager at any time. Issues around care are discussed on a regular basis and families

informed about loved one's activities face to face, by email or phone calls. The manager also produces a Newsletter every 2 months.



What Did Residents Say?

The Healthwatch Ambassador was able to observe residents interacting comfortably with staff. The residents seen appeared happy and at ease.

Around half a dozen residents were observed playing bingo in the activity room with the activities coordinator. Everyone appeared to be enjoying the game, all were appropriately dressed and appeared clean and tidy.

Staff were observed interacting with a gentleman who was doing a jigsaw. The carers spoke in a kind and supportive way. Another gentleman was

becoming a little restless as he was anxious to play the piano, but couldn't as there was a group using the room where the piano was. Staff were kind and reassured him that he could play when the group had finished their game of bingo.

Another lady was observed stroking an interactive companion cat. The resident appeared very content and at ease. Another resident told me that the lady was devoted to the cat and very calmed by it.

Residents spoken to said the staff were nice, they enjoyed the food and said that if they didn't like the choices available, they could have something different. Residents said there was a lovely garden and they liked going out there when the weather was warmer.

What did Family and Friends Say?

Family and friends who responded said that they found staff polite, friendly and helpful.

They felt that interactions between residents and staff were positive and friendly.

"Staff are always respectful and polite to mum from my observations"

Relatives who responded said they were involved with their loved one's care plan, decisions about end-of-life care and ReSPECT forms. They were happy with their care their loved one received.

[We] "have attended meetings about mums care which have been arranged with the Community Wellbeing Team"

All said that staff encouraged their loved ones to take part in activities where possible. They told us about the activities their loved ones enjoyed:

"Music and dancing. She told me about playing the piano which she enjoyed"

"Haircuts and quizzes"

"She used to enjoy a sing along, but is not able to engage as she used to"

"Going to the park with Ian and sings songs when singers come into the home"

Relatives who responded said they were happy with the cleanliness of the home and their loved one's room. Most felt that their loved one's room reflected them and that they had been able to make it their own. One said that the décor was not really to her mum's taste but that she did have her own belongings.

"She has a few of her belongings but the décor is not to her taste"

"She has some things from home on the shelving and walls"

All relatives spoken to knew who to speak to if they had any concerns.

One relative told me that her dad loved living at the home. She said he felt really at home there. She told me he had been discharged from York Hospital and sent back to the home on end-of-life care but "the love and care he received from the staff soon had him back on his feet and enjoying his food again." The relative also said that the home were very responsive and would tell her immediately if there were any problems with her dad.

What Did Staff Say?

The Healthwatch representative spoke to the manager and a member of care staff during the visit. 3 staff questionnaires were also returned. The staff members had worked there anywhere from 3 to 15 years, and all felt they had sufficient induction training.

"I felt confident after induction"

"I received up to date training and all the information I need to be confident working in this environment"

"The length of my induction was good but over the years this has shown an improvement and is a lot more thorough and meets my role"

All staff who responded said they felt supported in their role and that they receive regular training. Staff confirmed there was a hybrid approach to training, with some delivered online and some face to face.

Staff felt training was appropriate to their roles and were positive about the training they had:

"We currently have approx. 40 e-learning modules, practical training on moving and handling, fire safety, 1st Aid, policies and procedures. We are given opportunity to progress."

"E-learning over 25 various, safer food better business, NVQ 3, practical training, allergen training, safeguarding with council"

"Infection prevention and control, food hygiene, fire safety etc"

Healthwatch asked staff if they felt that absences were well managed. All staff who responded said that they were.

When asked if they felt there were enough staff on duty during shifts all staff who responded agreed.

Staff said they felt confident to raise any concerns with management.

"I would speak to my manager and yes I am confident things would get sorted out."

Staff who responded said they felt they had adequate time to support residents to meet residents' needs. They said that the home provided person centred care:

"Definitely, allowed time with the residents, needs are listened to, residents are encouraged to make choices."

"Yes, my view the residents are always treated well and with dignity. Given voices."

"Yes, focusing care on the needs of the individual. Ensuring that people's preferences and needs are met."

Staff who responded said they felt supported and could approach management if they had any concerns. When asked if there was one thing you could change about your current setting what would it be and why, staff responded with the following:

"I sometimes wish families would be more involved with the home."

"No thank you very happy."

“Cannot think of anything I so enjoy my job. I work with the most amazing staff; we have a brilliant team throughout the home. Working with the residents is extremely rewarding.”

Observations

Initial observations on arrival. The home is a large green and cream building opposite the cathedral and ice-cream parlour on the street in the heart of Howden town.



Image 1 – Elizabeth Homes

There is a small sign saying Elizabeth Homes on one side of the front door and a notice board on the other.

There is a warm, friendly atmosphere in the home. The manager and staff are clearly passionate about the residents and their care home and describe it as a family.

The door opens into a porch into a small reception area. There is a security lock on the main door with a keypad to ensure that residents cannot leave the home unaccompanied.

There is a hand sanitizer dispenser and a forehead thermometer on the wall

A signing in book with carbon copy below, blacked out so visitors can't see other visitors' names



Image 2 – Reception Area

In the reception area there is a Relatives notice board with relevant information in the reception area



Image 3 – Reception Area, Relatives Notice Board

There was a staircase with a good-sized gate at the foot of the stairs, just off the reception area and a toilet which was clearly marked as such with a dementia friendly sign.

In a small activities room at the front of the home, just off the reception area residents sat around the table in the activities room enjoying a game of bingo. All looked engaged and were well presented. This room also contained a piano, several guitars and a ukelele as well as a record player and radio. The manager told us they had a resident who played piano very well and some excellent singers, so they were planning to start a dementia choir.



Image 4 & 5 – Activities Room

There was another room just off the reception area also used for activities and as a quiet sitting area for those who prefer to be away from the main sitting room. This room had comfortable chairs, another guitar and some large dice that are used for games. With a table and chairs in the Centre of the room. This room also has an activity table and screen. The home applied for funding for this piece of equipment. The activity table can be used for a variety of activities from sensory activities to church services and quizzes.

In the hallway is a large activities board indicating which activities are on and at what time each day.



Image 6 – Activities Board

Down the hallway is a good sized sitting room with chairs around the outside for residents. This room has good light from large patio doors leading into a good-sized courtyard garden for easy access. The garden looked well maintained with patio and seating under a canopy and a lawn for safe easy access for residents. There is a lovely fountain on the lawn with high fencing and mature trees all round making it very private. Residents are always accompanied by a member of staff when they go in the garden. Residents told me they enjoyed going in the garden when the weather was warmer. The manager said they have plans to paint the sheds in the summer.

There is also a large summerhouse in the garden. This is currently being used for storage of garden furniture, but the manager told the Healthwatch representative that they have plans to turn it into a bar with pool table, dart board and general activities for the summer months



Image 7 – Enclosed Courtyard Garden

There are 10 bedrooms downstairs and a large lift that can take up to 8 people upstairs where there are a further 18 bedrooms.

There are plenty of hygiene stations throughout the home. The kitchen was clean and tidy. Decorating has started in the hallways and some rooms. This is a work in progress.



Image 8 – Hygiene Station



Image 9 – The Garden Corridor

23 of the bedrooms have ensuite facilities consisting of a toilet and washbasin. In addition, there are a further 7 toilets and bathrooms around the home.

Overall, the cleanliness of the home was observed to be of a high standard, all bathrooms and communal areas were clean and tidy. The décor throughout the home is in the process of being redecorated. All furniture and soft furnishings were in good repair.

There were pictures on the walls and the home has a comfortable, homely feel to it.

The residents' rooms are furnished but this can be altered and redecorated in accordance with the resident's likes and dislikes.

There are around 3 stairs in the upstairs corridor, but these are very well marked with yellow and black tape which is in good condition and there are clearly contrasting handrails on either side.

Hydration and Nutrition

The Healthwatch representative was told that all food is prepared fresh on site. The Healthwatch representative did not notice a menu board however residents said there was a choice and that they can have something different if they wish. The home monitor nutrition and hydration of residents and this is recorded on the new PCS system.

Activities and Social Participation

There is an activities coordinator in post and an excellent activities board on display in the hallway which shows what is on offer each day and at different times. There are a good range of activities on offer including musical activities. The home has a variety of musical instruments and a record player.

The home ensures that residents feel part of the local community, taking them to the local park, shops, cafes or Howden Minster. Elizabeth Homes is right in the heart of the town, with an ice-cream parlour/cake shop just across the road with seating inside and outside. If the home are holding a Summer Fayre or garden party they put a sign on their notice board at the front of the home to invite the local community to take part. Pastor John comes into the home to say prayers and sing songs with residents who wish to take part. Every other week residents are taken to the dementia café held at the local Shire Hall.

Conclusion

Overall, Elizabeth Homes had a warm, friendly and relaxed feel. Staff were observed interacting very positively with residents who appeared relaxed and at ease. This was also borne out by replies to questionnaires. Activities were taking place and staff were on hand in the sitting room with residents. The home has a person-centered approach. Residents are regularly consulted about the food they enjoy and the support that they receive. There are a wide variety of activities, and the home ensures residents are supported to be part of their local community.

Healthwatch would like to thank the manager, all the staff, residents and their relatives at Elizabeth Homes for accommodating and supporting our Enter and View visit.

Highlighting Good Practice and Recommendations

Healthwatch would like to highlight good practice and make recommendations based on what we observed and were told during the Enter and View visit:

Highlighting Good Practice

Healthwatch Ambassadors observed good practice throughout the Enter and View visit but would like to highlight the following good practice so other similar settings can adopt these systems and processes if they'd like to.

1. There is a real focus on music which is particularly beneficial to residents with dementia. The Manager told us they have plans to start a dementia choir.
2. Elizabeth Homes have a Quality Assurance Policies and Procedures system called QCS System. This provides reading lists for staff to read, understand and sign. Staff have access to this at all times and the system automatically updates and notifies staff of any updates. The manager is able to see which staff members have read and understood any updates. This is a huge benefit.
3. Elizabeth Homes are registered with the Home Office to recruit overseas workers which helps them to maintain staffing levels. They also have a house in Howden where staff recruited from overseas can live.
4. The activities board indicated a good range of activities and is clearly visible to all. The board has hooks with illustrated cards that can easily be changed.

5. The Relatives gateway on the PCS system enables residents' families to stay up to date with all the care their loved ones receive as it happens. They can access their loved one's care plan and all relevant risk assessments, that have been put in place, remotely at any time. This is reassuring for relatives and saves them needing to telephone the home for updates.
6. The manager produces a Newsletter every two months.

Recommendations

1. Ensure clear signage to make it clear where the home is.
[Quotations obtained for signage.](#)
2. Have a menu board on the main sitting room wall with photos of meal choices.

[Please see attached photo of menu board updated daily. We also have photo cards of meals to present to residents when choosing their meals \(See photo\).](#)



[Photo of menu board](#)

3. Level off the ground around the fountain so no edge between gravel and grass.
[Wooden log fencing has been fitted around the water feature \(see photo\).](#)



Photo of fence around fountain

4. Plant sensory plants such as herbs and scented flowers near the patio area.

Pots have been painted, patio area redecorated and additional plants put in. Due to bad weather conditions the plants have been put in a little later than normal.



Photo of planting

5. Have some raised beds/containers and have garden activities for residents.

Recommendation placed on our action plan and residents will be involved in planting.

6. Invite residents to get involved painting the sheds alongside the maintenance man. This could even be an ongoing activity with different coloured paints.

Residents to be involved in painting sheds.

7. Involve those residents who would like to and are able to, in simple household tasks alongside staff member such as laying tables, folding sheets and towels etc.

Perhaps not observed during visit but there are some residents who set up the table with the kitchen assistants and wipe down tables afterwards.

Signed on behalf of Healthwatch East Riding: <i>Carrie Frost</i>	Date:
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Elizabeth Homes Manager Response to Recommendations:

Recommendation 1	
Specific	What is the recommendation?
	Ensure clear signage to make it clear where the home is. Signage for outside area quotes being received. Internal signage – some signage was removed due to redecorating programme and replaced with new.
Measurable	How can you measure your progress and know if you've successfully met the recommendation?
	Action Planned
Achievable	Is the recommendation achievable? Do you have the resources to achieve it?
	Yes
Realistic	Is the recommendation realistic?
	Yes
Time-bound	When will the recommendation be completed?
	Each area of redecoration new signage is being replaced

Recommendation 2	
Specific	What is the recommendation?
	Have a menu board on the main sitting room wall with photos of meal choices. The menu board is in the main lounge area (photo attached) and updated daily. Photo menus also available.
Measurable	How can you measure progress and know if you've successfully met the recommendation?

Achievable	Is the recommendation achievable? Do you have the resources to achieve it?
Realistic	Is the recommendation realistic?
Time-bound	When will the recommendation be completed?
	Already in place

Recommendation 3	
Specific	What is the recommendation?
	Level off the ground around the fountain so no edge between gravel and grass.
	Wooden log fencing has been fitted around the water feature. Staff member in situ in the garden area when residents wish to use it.
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	Already in place
Achievable	Is the recommendation achievable? Do you have the resources to achieve it?
	Achieved
Realistic	Is the recommendation realistic?
Time-bound	When will the recommendation be completed?
	Completed

Recommendation 4	
Specific	What is the recommendation?
	<p>Plant sensory plants such as herbs and scented flowers near the patio area.</p> <p>As an ongoing summer project – pots have been painted, patio area re-decorated and additional plants have been put in. The home employ a weekly gardener to keep the garden area maintained and accessible to residents and family. Due to bad weather conditions the plants have been put in a little later than normal.</p>
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	Achieved
Achievable	Is the recommendation achievable? Do you have the resources to achieve it?
	Achieved
Realistic	Is the recommendation realistic?
	Yes
Time-bound	When will the recommendation be completed?
	Due to weather conditions late planting of flowers. (please see additional photo above).
Recommendation 5	
Specific	What is the recommendation?
	<p>Have some raised beds/containers and have garden activities for residents.</p> <p>This will be placed on our action plan and residents will be involved in planting.</p>

Measurable	How can you measure progress and know if you've successfully met the recommendation?
	Placed on action plan
Achievable	Is the recommendation achievable? Do you have the skills to achieve it?
Realistic	Is the recommendation realistic?
Time-bound	When will the recommendation be completed?

Recommendation 6	
Specific	What is the recommendation?
	<p>Invite residents to get involved painting the sheds alongside the maintenance man. This could even be an ongoing activity with different coloured paints.</p> <p>Residents to be involved in painting sheds. We have several green fingered residents who have planted flowers in their own areas of the garden which they like to maintain. This was delayed due to time of visit, weather conditions and accessibility to garden area.</p>
Measurable	How can you measure progress and know if you've successfully met the recommendation?
Achievable	Is the recommendation achievable? Do you have the skills to achieve it?
Realistic	Is the recommendation realistic?

Time-bound	When will the recommendation be completed?
	Due to weather conditions at the time of visit garden access not viable for painting or planting. This has now been achieved due to change in weather conditions.

Recommendation 7	
Specific	What is the recommendation?
	Involve those residents who would like to and are able to do simple household tasks alongside staff member such as laying tables, folding sheets and towels etc. Perhaps not observed during visit – There are some residents who set up the table with the kitchen assistants and wipe down tables afterwards.
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	Already implemented
Achievable	Is the recommendation achievable? Do you have the resources to achieve it?
Realistic	Is the recommendation realistic?
Time-bound	When will the recommendation be completed?
Realistic	Is the recommendation realistic?
Time-bound	When will the recommendation be completed?
	Already implemented

Signed on behalf of Elizabeth Homes: Mrs Jean Putwain
Registered Home Manager

Date:3/7/2024