



The Old School House



Getting to Good

A report on how this residential home worked with Healthwatch East Riding of Yorkshire to use the Enter & View process to support them in achieving a CQC rating of 'Good'

Address	Main Road, Gilberdyke, Brough, HU15 2SG
Service Provider	Roseville Care Homes
Registered Manager	Jeanette Hudson (Temporary Manager)
Date of Visit/visits	30 th March 2021
Representatives	HWERY Representatives: Pam Wakelam, Denise Lester & Caroline Frost

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.



It is important to note that Enter & View, and by extension Getting to Good, 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.

Main purpose of visit

The purpose of the 6-month review visit is to ascertain if the changes and improvements made during the project are still in place and possibly built upon so demonstrating that they have been embedded into the organization. Also, to establish if the home is continuing to seek to develop and improve in a proactive way.

At each visit opportunities had been taken to share good practice which may have been found in other homes and/or noted in the news.

Due to the current Pandemic, we have been unable to visit the home so this meeting, which is 18 months overdue, is being conducted via Zoom.

Meeting Findings

All though we were delayed in conducting this review we still used last report dated 20th August 2019 to inform this meeting.

Below is the colour code key use with each objective.

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

Objective 1	Progress Achieved
Name Badges	Green
Progress made	
The home solved the problem early on in Healthwatch’s involvement changing to a distinctive Yellow oval badge. This stands out well, is easy to read and is safe as it has no hard edges. This badge has now been adopted by the company as the cooperate badge and is used in all its facilities.	

Objective 2	Progress Achieved
Decorating	Amber
Progress made	
It is important to make it understood that this will be an on-going matter for always. However, the home has made great strides in improving the presentation of the home. Our virtual tour of the home towards the end of	

<p>this visit showed new and striking colour schemes in the corridors and handrails being painted a contrasting colour so assisting residents to locate them and hopefully in so doing reducing the likelihood of falls.</p> <p>An air conditioning unit has been added to the office and the previously cluttered room has been sorted into a better configuration.</p> <p>Residents' rooms are being decorated and residents are helping to choose the colour scheme for their rooms.</p> <p>The room's occupant is now identified by a picture of them on the entrance door to the room.</p> <p>Lounges were also being decorated and the bottom lounge is finished. Again, the residents took part in the choice of colour scheme.</p> <p>Residents' door transfers not yet in situ but on order.</p> <p>Residents' rooms are also being furnished with new furniture. We saw some in situ and they look good.</p> <p>Overall a lot of progress has been made since we were last there.</p> <p>NB. <i>Please note that an Amber score does not identify a problem in this case - just an indicator that this issue is on-going.</i></p>	
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<p>Objective 3</p> <p>Signs & Posters</p>	<p>Progress Achieved</p> <p>Green</p>
<p>Progress made</p> <p>The home has made good improvement on this issue. Our virtual tour of the home allowed us to see several signs and posters.</p> <p>We noted a number of improvements to the walls since previous visit. Menu boards, continue to be used though we were advised they had been taken down temporarily to allow decorating to take place. Other items usually in use but also taken down for decorating included clocks, and electronic calendars which include the date and day of the week.</p> <p>Photo posters were noted regarding events that had taken place.</p> <p>Staff boards are now in place with photos of the staff on duty.</p> <p>Dementia friendly signage is on site awaiting the completion of the decorating before being put in place.</p> <p>This objective has been met but there are always other/new opportunities to add posters and signs to any home.</p>	

<p>Objective 4</p> <p>Dining Area</p>	<p>Progress Achieved</p> <p>Green</p>
<p>Progress made</p> <p>Previously very few of the residents sat at the table to eat their meals. Generally, they sat in their chair and had meals on tables placed in front of them.</p> <p>Now the staff encourage them to sit at the tables, which are set with cutlery and condiments often by one or more of the residents. This is beneficial in many ways ie. the opportunity for a little mobility and they can interact with their fellow residents. Also eating at a table is better for digestion as the body's position is better and residents also have the opportunity took out of the window and see the world.</p>	

<p>Objective 5</p> <p>Staff Training</p>	<p>Progress Achieved</p> <p>Green</p>
<p>Progress made</p> <p>The company appointed a trainer for their homes, and she ensures all have the training required. Much of the training is via E-learning process. We have seen the new 'Staff Training Matrix'.</p>	

<p>Objective 6</p> <p>Care Doc</p>	<p>Progress Achieved</p> <p>Green</p>
<p>Progress made</p> <p>The home has reviewed the paper records and ensured they are fit for purpose and complete. The decision has been made NOT to purchase Care Doc. For the time being they will continue with paper records which they believe are better.</p> <p>They have embedded the concept of the KEY WORKER within the care system and care staff have been allocated their own residents to take day to day responsibility for.</p> <p>They are placing a notice on the wall in the resident's room with an explanation of the Key Worker system and his/her responsibilities plus a</p>	

picture of the resident's Key Worker.	
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Objective 7	Progress Achieved
Gardens	Amber
<p>Progress made</p> <p>The maintenance staff, which have increased by 1 since we last visited, have improved the outside space including the front area facing the main road which gives the first impression of the home to the public.</p> <p>Raised beds and a sensory garden are being constructed and it is hoped some of the residents may like to help in the garden. The raised beds will help them to do that.</p> <p>The rabbits have now left the home and been replaced with DUCKS & DUCKLINGS who follow the maintenance staff around. They have built them a house outside and they attend to their food etc. They also collect their eggs. Videos of the ducks have been made to show the residents.</p> <p><i>NB. Please note that an Amber score does not identify a problem in this case - just an indicator that this issue is on-going.</i></p>	

Objective 8	Progress Achieved
Meetings	Green
<p>Progress made</p> <p>The new management recognize the importance and value of good communication and have enhanced the issues and processes.</p> <p>Meeting schedules in place:</p> <ul style="list-style-type: none"> ● Chatter Times with residents ● Staff Huddles weekly ● Senior staff meetings ● Supervision meetings <p>All meetings are minuted.</p>	

***Other Notable Improvements:**

Activities

A new 'Activities Coordinator' has just been appointed and will be expected to seek to

enhance the programme of activities on offer plus take responsibility for many of the posters/photos displayed around the home.

Relatives visiting

The new pod used for visiting is an excellent development and is regularly booked.

New Uniforms

Different grades have different colours. This is a company-wide initiative. Well received by the staff

Medication Management.

Robust systems now in place with regular audits and staff competencies completed. The CQC manager praised the staff for this aspect of care.

Call System

Not yet updated but finance is being sought again for this upgrade.

Bungalow

Will be incorporated into the home's bed numbers adding 4 to the total. It will be classified as residential.

Appraisals

Have been completed as necessary and are monitored regularly.

Changes to and in the home since last visit

The home has 36 bedrooms, all with sinks and a few have en-suite toilets as well.

The home's manager changed since we first visited, he had been at The Old School House for a number of years. In the interim 2 managers have been appointed and since left. We were pleased to meet Jeanette, who is on loan from the sister home 'Orchard Court' in South Cave, and Cheryl, the new deputy manager who will be remaining at the Old School House once a new manager is appointed.

The home has capacity for 36 residents but currently they have 28.

The Management of the home has changed since our last visit in August 2019 (the pandemic has prohibited a visit any earlier than this).

The original plans for the bungalow for the Mental Health services has been superseded by being incorporated into the overall capacity of the home.

As yet the latest CQC Report is not available. However, in the last CQC Report from January 2020 the home were classified as Good in all areas.

Summary of key issues/findings and recommendations

The home has made excellent progress which has continued during the present pandemic. The relationship between staff and management has changed in a positive way, the home is looking brighter and more homely. The virtual tour we took highlighted the positive changes to the décor, the cleanliness and uncluttered corridors

What is working well?

It is pleasing to note that the relationship with their sister home 'Orchard Court' in South Cave has continued to develop and that they offer regular support to each other. A pen-pal system is being considered and explored between the two homes. This would be a great activity for the residents to participate in.

The local community assisted the home to provide the POD for visiting purposes. The Blue Lounge, which was rarely used, has been utilised for this purpose. The process appears to be well thought out and well received.

Most importantly the staff and management are working as a team now. Communication from Management to the team has improved immensely and so the communication from staff to management is also improving as the trust develops. All the staff, we are advised, have worked hard to embrace and implement the changes and they are to be commended for their positive attitude and hard work.

We would like to thank the home for inviting us in to assist them and for their cooperation and hospitality. We hope it has been a positive experience for all at the home as it has been for us at Healthwatch East Riding of Yorkshire.

Service Provider Response

The provider was sent the report and asked for a response within 20 days. A response was received within X days, as follows:

Please tick as appropriate

- The Enter & View report provided is factually accurate and I consider it to be ready to be published by Healthwatch.
- I would like to correct the following in-accuracy included in the report (please detail below):

The report reads well. Thankyou.

However there are some inaccuracy's around management.

- Mike was there for a number of years and we have had two other Managers, then me covering.
- Also it states the CQC report was good in all areas apart from well lead This is not the case, Achieved all good.