



Orchard Court



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	Bacchus Lane, South Cave, East Yorkshire, HU12 2ER
Service Provider	Roseville Care Homes
Registered Manager	Gemma Mills (Acting Manager)
Date of Visit/visits	23 rd February 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 this visit was to close out the GtoG project with the home, commenced in 2019 and interrupted by the Pandemic.

This meeting is overdue by a year due to Pandemic caused by the Covid virus. This subject will be addressed at the end of the report.

The involvement by the home with Healthwatch East Riding was at their request in 2019 following a CQC visit that determined the home 'Required Improvement'. We agreed to help and commenced the 'Getting to Good' process developed by Healthwatch East Riding with previous homes with good results.

We commenced this meeting by recognizing that the last CQC visit (9th June 2019) rated the home 'GOOD' and we therefore congratulate them on reaching that goal. However, it still had one area of 'Requiring Improvement' namely 'Well Led' but the report also noted that the manager had only been in post 6 weeks and had already recognized the improvements required, particularly in the area of documentation.

Due to the long delay in this meeting taking place we commenced by noting any change to the home regarding clientele, building and staffing and any new good practice.

The Manager has now been lent out to the sister home for 3 months due to their manager leaving so this home is now in the hands of the Deputy, now acting Manager.

We had advised in advance that we would go through the last visit's (7th Nov 2019) objectives one by one to establish where they were and advise accordingly

Meeting Findings

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

Objective 1 Name Badges	Progress Achieved Green
Progress made The staff now all have corporate yellow name badges which are distinctive and easy to read	Achieved

Objective 2 Environment	Progress Achieved Amber
Progress made This is an ongoing objective that needs to remain on the table. Much has changed. A second toilet has been given the Beach Hut theme. All client's rooms now have the room door dressed with different coloured plastic transfers to reflect the front door of a house so the corridors look more like a street. This should help residents recognise their own doors more easily and makes the	Partially Achieved

<p>corridors look bright and cheerful. More decorating has been completed.</p> <p>Laminate flooring is replacing carpets in many areas.</p> <p>Note - Some hand rails still need to have the colours changed to contrast with the walls to allow for easy recognition.</p>	
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<p>Objective 3</p> <p>Maintenance</p>	<p>Progress Achieved</p> <p>Green</p>
<p>Progress made</p> <p>An on-site staff member takes care of all these requirements.</p>	<p>Achieved</p>

<p>Objective 4</p> <p>Activities</p>	<p>Progress Achieved</p> <p>Green</p>
<p>Progress made</p> <p>This is an ongoing development. There is a Coordinator still in place with a weekly programme. There are an increased variety of activities on offer including music various, gardening, colouring and chair exercises as well as special themed parties eg Halloween & Valentines Day. The new Coordinator is a trained hairdresser so she has been setting hair and doing nails as well as hand massages. A poster showing the weekly programme has been forwarded to Healthwatch. It was very colourful with pictures as well as words.</p>	<p>Achieved</p>

<p>Objective 5</p> <p>Key Worker</p>	<p>Progress Achieved</p> <p>Green</p>
<p>Progress made</p> <p>Good progress made. All residents have a key worker and the Roll and Responsibility document is being progressed with a photo of the staff member to go up in the client's room and in the staff member's file. Each of them also has a key responsibility in the home, eg Medicines management.</p>	<p>Achieved</p>

<p>Objective 6</p> <p>Food Provision</p>	<p>Progress Achieved</p> <p>Green</p>
<p>Progress made</p>	<p>Achieved</p>

<p>Much improved. New chef who was already a staff member. Menu boards up in the dining room have pictures and explanations. There is a good choice including light meals eg things on toast, jacket potatoes etc. Residents have easy access to a fluid trolley which also carries small snacks.</p> <p>Residents are weighed regularly and fluid charts are regularly reviewed.</p>	
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<p>Objective 7 Staff training</p>	<p>Progress Achieved Green</p>
<p>Progress made The company have a full-time trainer who gives or arranges all the sessions for the staff. Due to the Covid situation much has moved to E-learning. We were advised by the acting manager that all are up to date with the mandatory requirements. Subsequent to the meeting a training matrix has been forwarded to Heathwatch.</p>	<p>Achieved</p>

<p>Objective 8 Care Doc</p>	<p>Progress Achieved Green</p>
<p>Progress made The home have made a decision that they prefer to stay with written documents so will not be purchasing the Care Doc programme. They regularly review the documentation and audits are in place for this.</p>	<p>Achieved</p>

<p>Objective 9 Meetings</p>	<p>Progress Achieved Green</p>
<p>Progress made Regular “Huddles” take place, often daily, particularly with care staff. 3 Monthly staff and resident meetings planned. The last one was in January 21. The next will be April 21. The meetings are minuted. Query - Did they expect relatives to attend? They believe they have a good relationship with the relatives as they have been very supportive. One relative recently bought the home a “Fogger” to help with cleaning the visiting room</p>	<p>Achieved</p>

De-choker - This is not an objective but an example of good practice brought to the manager's attention from another home by Healthwatch.

The home intends to purchase one imminently. For information regarding the purchase you could ask the following homes - Magdelane House in Hedon and/or Aarondale House in Hornsea. The cost is approximately £100 including training information and replacement parts when used.

Infection Control

This work is highlighted due to the presence of a Pandemic in the UK at this time.

The home has had deaths as a consequence of the Pandemic. In total 9 residents died in 2020. All residents bar one are now vaccinated. (One client tested positive for Covid so has to wait). Most staff have also been vaccinated. The manager said their GP surgery, The Ridings in Brough, is excellent and the follow up vaccinations are due imminently. 4 or 5 staff have been trained to carry out "Lateral Flow Testing".

The East Riding Officer for Infection Control has been a good support and the owners of the home invested in plenty of PPE so they have never been without it.

The home has been able to facilitate visiting in one of the bottom lounges on a one to one basis with a robust cleaning schedule between visits.

A Zoom facilitated tour of the home revealed how far they have come and was appreciated by the Healthwatch Volunteers, Pam and Denise who have facilitated the project with the home since the beginning.

Changes to and in the home since last visit

Due to the long delay in this meeting taking place we commenced by noting any change to the home regarding clientele, building and staffing and any new good practice. The resident numbers are lower, being 28 at our last visit. There are currently 22 and otherwise no change to the make up of the clientele.

A Good Practice outcome is the building of an old fashioned Sweet Shop in the Reception area. One of the residents has taken responsibility for the shop. Unfortunately, it is closed at the moment for infection control reasons. The sweets are NOT individually wrapped. The home is trying to sort this out.

Work is centred on the gardens to get them ready for the residents to use in the spring/summer. They are putting raised beds in, amongst other things, for vegetables so that the residents can use them if they wish.

A suggestion of scattering wild flower seed in an area was made by Healthwatch. Wild flower seed is cheap and the residents will recognise the flowers.

Summary of key issues/findings and recommendations

It is suggested that the changes that are on-going are paid attention to ensure they keep improving.

What is working well?

The staff overall are a more cohesive team now and the Manager feels there is a good atmosphere at Orchard Court. With help from The East Riding Team the home has put more infection control measures in. The home have trained staff to carry out Lateral flow tests to enable visiting.

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):

Gemma Mills, Acting Manager, spoke to the Healthwatch East Riding Volunteer Coordinator and explained that Orchard Court were including resident's preferences of activities in their care plans as suggested during the Getting to Good visit.

The Manager therefore requested that Objective 4 – Activities, be upgraded from amber to green.

The Manager sent a redacted care plan which showed the inclusion of the resident's preferred Activities. As such it was deemed that they had fully achieved the progress required with the home's activities and Objective 4 was changed from amber, partially achieved, to green, achieved.