

## Enter & View Residential Care Report

# Parklands Care Home

Station Road, Rawcliffe, Near Goole, East Yorkshire DN14 8QP

Date of visit: 19th December 2017

Date of publication: 24/1/18

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

Parklands care home provides residential care for up to 30 older people. Currently 75% of residents have a dementia related condition. There are various communal areas including lounges and a dining room. Residents have access to outside gardens and seating areas which are provided in secure settings.

The premises were bright and clean and decorated ready for Christmas festivities.

## Recommendations/Observations

The planned investment and subsequent work by the owners to improve the building are much needed. The re-sighting of the main entrance door which presently leads directly into a communal lounge will be of particular benefit to the comfort of residents.

- Room temperatures should be monitored and/or recorded and adjusted as necessary for the comfort of residents; particularly in relation to the individual bedrooms of residents.
- Residents should be given the opportunity to suggest what activities they would like



# 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?

When we arrived at Parklands care home we noticed the grounds were well maintained, tidy and free from any litter. The main entrance door is through the conservatory which is used as the main lounge by residents. We had to ring a doorbell to enter the home as the door was locked. When we entered the home we were asked to sign in by a member of staff and led to the manager's office. As we walked through the home throughout the length of the visit it was clear that the home has a high level of cleanliness, with no odours evident. We had a chance to see the kitchen and dining room which were also very clean and well organised. The home has a food hygiene rating of 5

All residents' rooms were locked during the course of our visit which led us to ask ourselves whether residents are allowed into their own rooms throughout the day or only use the communal lounges; this query was not answered in our conversations with residents. Each individual room did have a sink area and call system in place. Other locked areas of the home were the COSHH room, laundry and kitchen.

Apart from one resident who uses her inhaler none of the residents are self-medicating. Medication is recorded as required on MAR sheets. We saw that medicines including controlled drugs are kept within a locked room and cupboard.

### How effective do service users consider the service to be?

Whilst speaking to the manager we found out that they have a local GP visit the home every two weeks; half the residents see the doctor at first visit with the other half seeing the GP at the second visit, meaning all residents are seen on a monthly basis. They also have a chiropodist visit every 6-8 weeks and a dentist who comes when needed. The district nurse visits the home daily to help administer insulin and help with other matters.

The manager told us that she was aware of the local falls team and would use them if necessary.

The home runs a three weekly menu for the residents for main meals, with snacks available in-between meal times. The daily menu is on the wall and supported by pictures. All the chairs in the dining room had extra supports to the base to stop the chairs from tipping. Residents are also weighed every month or every week if their weight has dropped significantly. The residents can choose where to eat and we saw evidence of this with some residents eating their evening meal in the main lounge. We also saw evidence of residents making their own choices around what they were doing throughout the afternoon and which area of the home they wanted to be, such as a gentleman who wanted to watch a film on his own in the dining room away from the other residents. All of the staff interactions with residents were effective and looking for the residents' needs.

The home was fitted throughout with handrails and non-slip floors to help the residents with their independence

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

Before going into the home all residents have a pre-assessment where vital information is gathered, such as the individual's short term care plan, capacity and food allergies etc. Once in the home the care plan is adapted to meet the needs of the resident over the longer term and would include end of life care. All residents also have a keyworker assigned to them.

The home has an activities coordinator employed on a part time basis that organises trips to the seaside etc. in the summer months and guests to come in and entertain the residents over the colder months. The guests have been singers, local school choir and carol singers, she also runs activities with the residents such as bingo and dominoes; some residents told us they are not encouraged to take part, or do not like the choice of activities.

Residents have access to a hairdresser who visits each Wednesday and currently uses a bathroom as the salon.

Each resident has their own room which they can personalise with their own furniture and ornaments. The home also allows small pets such as fish or small birds. Each bedroom door is painted in a different colour to help the residents identify their room. We noticed some dementia friendly signage around the home; this included small pictures on some doors such as bedrooms, laundry room, bathroom and toilet. The images were a little dated.

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

The home has 30 bedrooms, two are double rooms and two have en-suite facilities. At the time of our visit 22 rooms were occupied. There are two bathrooms and 7 toilets for residents' use. The home also offers respite care if there is space available. This can be booked in advance.

We were told that there are currently no regular residents' meetings although there have been in the past. The manager is planning a new approach by calling a meeting in January and inviting relatives, they are going to promote it as a wine and cheese night to try and improve attendance. The plan is to start residents' meetings again after the wine and cheese night.

The home has a compliments and complaints procedure in place and we were told that all residents know how to use it if necessary.

The communal areas of the home were extremely warm, one resident complaining that she was too warm. On the other hand some residents complained that their bedrooms were cold at night.

### How well-led do service users consider the service to be?

On the day of our visit we spoke with the manager, the chef, a care worker and several residents. We observed interactions between residents and care workers in the communal areas and at mealtimes. We had a full tour of the premises and looked at an individual care record.

The completed staff and relatives' questionnaires gave very good feedback about the home in general. The only area being less positive, concerned the amount of contact time that staff had for residents. Four out of the nine staff questionnaires said there was not enough time with residents. This was backed up in conversation with a resident.

Staff said they enjoy working at the home. There are four members of staff working during the day and three overnight.

One care worker we spoke with said she was very happy in her post, had received all the required statutory training but would like to do more First Aid as there were times she felt under skilled in this area.

The manager told us how plans for improving the home in the New Year had been approved by the new owners. These included moving the main entrance doors from the conservatory as cold air entered the conservatory every time the doors were opened; the improvements also include a new kitchen and outdoor space.

All the residents we spoke to praised the staff and the home in one way or another.

One gentleman said 'I love it here, I wouldn't want to be moved anywhere else' he also mentioned how 'it's sometimes cold in the lounge with it being the way in'.

One lady said 'I feel well looked after and the staff are very nice'. This lady also told me how the staff often change her dessert for ice cream or a yogurt if she doesn't like what she had.

Two residents told us that the bedrooms can be cold at night.

#### **Response from Setting:**

*Parklands acknowledged the content of the report as being factually accurate.*

Signed on behalf of HWERY	<i>Matthew Fawcett</i>	Date: 24/1/18
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HW Reference: 20190128Rd  
 Time & Duration of Visit: 3.00 - 4.30pm  
 Number of people engaged with: 4  
 Managers name: Debbie Bose

## Parklands Re-visit Report

Date of first visit: 19<sup>th</sup> December 2017

Date of publication: 20<sup>th</sup> February 2019

Date of re-visit: 28<sup>th</sup> January 2019

HWERY Representative: Michelle Harvey

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### Main Purpose of Visit

Healthwatch East Riding conducted an Enter & View visit at Parklands within approximately the last twelve months. From the visit Healthwatch would make a series of recommendations to help drive improvement based on service user feedback.

COMPLETE	PROGRESS HAS BEEN MADE	NOT STARTED
Recommendation		Progress
Room temperatures should be monitored and/or recorded and adjusted as necessary for the comfort of residents; particularly in relation to the individual bedrooms of residents.		
Residents should be given the opportunity to suggest what activities they would like		

### Summary of Key Findings & Progress towards Recommendations

We were shown a copy of the test records of room temperatures (routinely completed by the maintenance man) to ensure that all rooms are maintained at an appropriate temperature; these are then reported to the manger for monitoring purposes.

A new activities co-ordinator has recently been appointed and the next residents meeting has been scheduled for 6<sup>th</sup> February, which will give resident the opportunity to discuss the forthcoming activities programme, summer trips and an opportunity to raise any other concerns. Posters were on display throughout the home advertising the meeting and residents spoken to said that they were aware of the meeting and had matters that they were looking forward to raising; they also said that they were confident that their concerns would be addressed.

### Impact and Additional Observations

Since the last visit, planned improvement to the kitchen have been completed, one of the lounges has been re-decorated and some improvements have been made to the garden area which now has a pergola to provide shade during the summer months. Plans to change the main entrance doors have been delayed due to other improvements taking priority that will have more of a positive impact upon the lives of residents. The development of a proper hairdressing salon is planned as well as the development of the inner courtyard which will have a ramp installed and be re-levelled to make it accessible for all residents. Staff are also shortly due to change to a 12 hour shift pattern to offer residents better continuity of care and consistency of staff during the daytime and allow keyworkers more time to spend meeting individual residents specific needs. An employee of the month scheme (chosen by residents) and a 'Staff Champion' scheme has also just been introduced.

Signed: *M. Harvey*

Date: 20/02/19