

HW Reference: 20180628

Time & Duration of Visit: 10:00am to 12:45pm

Number of people engaged with: Residents = 10, Staff: 7 (incl. manager)

Enter & View Residential Care Report

Specialism/Service: Accommodation for persons requiring nursing or personal care, Dementia, caring for adults over 65 years

Summer Court

Football Green, Hornsea, East Yorkshire HU18 1RA

Date of visit: 28th June 2018

Date of publication: 13/8/18

HWERY Representatives: Chris Mills & Peter Horrocks

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. The visit was also formed part of a Healthwatch East Riding programme focussing on the provision and quality of residential care within Hornsea; following over 40% (3 out of 7) homes being categorised as 'Requires Improvement' by the CQC, including two of which that are under at least partial suspension by the Local Authority. 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

Summer Court is a converted large mansion close to the centre of Hornsea and is a part of a seven-home group managed by Hexon Ltd based in Bridlington; there are 30 places in the home and currently 27 residents. The rooms are on two floors; ten have en-suite facilities (an in-room toilet and sink). Externally the home looks rather neglected but redecoration and renewals have improved the internal settings.

Summer Court is now in the process of bringing the home up to date in terms of the environment and the quality of care it offers to its residents. Staff are caring and management is aware of what more needs to be done.

Recommendations/Observations

- Urgently repair or replace faulty door to medicines cupboard
- Lower fire escape signage to eye level where appropriate
- Ensure all call buzzers are at an appropriate height in resident's rooms.
- Look at ways to further promote activities offered e.g. posters/notice board with visual aids
- Review the laundry system to ensure residents are provided with their own clothes
- Display the complaints procedure for residents and relatives.

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.

The front door was locked and on a keypad system but residents have access to two secure outdoor areas/gardens.

The rooms and internal areas have been redecorated and on the day of the visit were clean with no unpleasant odours; infection control units were visible throughout the home.

A fire evacuation process is in place; however some fire signage could be improved as we saw some areas where the signage is too high to view especially in the event of an emergency. Signage on doors also needs to be improved to identify room 'ownership' and various functions of different rooms.

A new Medicare call system is in place in each room with monitoring available at different points around the home; however a relative told us there are 'call buzzers in the room but not in places where residents can actually reach them'.

Management of medication has been reviewed, although we found a closure problem on the main door of one of the medication storage areas which we pointed out and advised that this should be addressed as a matter of urgency.

The home has a Food Hygiene rating of 4/5.

The laundry is very cramped and must make it difficult to achieve the separation of clean and soiled items; we suggested that a second washing machine might be considered in order to speed up the system.

There are handymen shared between the seven homes in the group who attend regularly to complete routine maintenance.

When asked if staff quickly respond to their needs, one resident told us 'To a degree', another commented 'There never seems to be enough staff - I have to wait quite a long time for things'.

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 floor staff were in uniform to make them clearly identifiable to residents and visitors.

Most of the home had good coverage of handrails to avoid trips and falls and we saw wheelchairs being used to aid resident's movement; there were lifts and hoists around the home, although we did not witness any being used during the course of our visit.

We were told G.P. support is prompt and effective and Practice Nurses visit each day and give a good service. Chiropody is provided on an 8-week cycle and the home also has opticians, dentists and hairdressers visiting regularly. Continence services depend on a three month delivery rota causing problems of storage and delay in meeting the needs of newly assessed people.

We were told the hospital 'patient passport' system does not seem to be working well; the home have had instances where the passport does not return with the resident, and times when services have still contacted the home for resident details that were already sent in the patient passport - hospital staff often ring to ask questions which could have been answered by the passport accompanying the patient. Some distressingly late discharges have also happened which the home has to deal with appropriately as they occur.

With regard to meal times, we were told that choice can be exercised by the residents in where to eat, whether to stay in their rooms etc.; however some residents said they have to eat in the dining room. They told us that they were not aware of menu alternatives, just eating what was served up; one resident told us 'The meals are different every day but with no choice', another said 'We have to eat in the dining room'.

How caring do service users find the service?

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

We saw many examples of warm and friendly staff/resident interactions. People told us that they are generally well looked after though delays can occur when staff are busy.

Residents appeared clean, tidy and healthy/well cared for, one resident told us 'Lovely atmosphere' another said 'The staff are very kind and don't rush us'.

The management group has an activities organiser who visits the seven homes in turn; activities seem to be confined to afternoons only at Summer Court. One lady told us 'I'd like to play bingo but don't think it's offered'. Occasional outings are arranged with a hired bus which takes the residents to Hornsea garden centre, Hornsea Freeport and the seafront. Once a month, an external company visits the home to run armchair exercise classes. Schools involvement is being developed. At present there is no gardening activity though a pleasant space is available.

Two residents are well enough to go into town independently.

Relative's feedback that we received suggests that social activities are few and far between and relatives are not invited to take part, comments were made such as 'Not enough activities' and 'The TV is put on in the morning and left on the same channel all day long'; another 'More staff needed. More activities needed to keep residents minds stimulated'.

Another issue raised by relatives was the problem of clothing and garments being lost or misplaced, one stated 'Laundry service is poor, clothing does not go back to the correct resident, and everyone wears each other's clothes'. During our visit we saw arrangements in place using labelled baskets and concluded that laundry and clothing perhaps need to be identified as a separate responsibility for particular members of staff to help minimise the risk of items becoming lost.

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

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

Summer Court told us that they can offer respite care if a vacancy exists.

Individual care plans are created on admission and during pre-assessment and reviewed at least monthly; most do not include end-of-life provision. Care plans are currently completed by the management team until key workers are assigned to individual residents. Currently relatives are not involved in the care plans.

The manager holds an open door policy and complaints are handled as soon as possible, the manager undertaking to receive complaints at any time. One resident told us 'I wouldn't know how to go about making a complaint, but I've never needed to'.

Residents meetings where relatives can also attend are scheduled every 2-3 months. A notice indicating this and the timing of the meetings is displayed at the entrance to the home.

From the relative questionnaires we received, there is concern that relatives do not feel updated or informed about all aspects of care, they also commented that they don't think residents are promoted to act independently all of the time.

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.

Following what was described as a disappointing 'Requires Improvement' CQC report published in November 2017, the current manager is leading efforts to provide a better service.

There are currently some staff vacancies at Summer Court, but the manager is aiming for the following care staffing levels; six staff in the morning, five in the afternoon and three at night. Often the levels fall below this because of sickness or other absences and the current vacancies; however sometimes other homes within the group can help out. Staff we spoke to expressed the need for at least one additional person on each shift to allow for more relaxed transactions with residents. We were told recruitment is working well at present and one new member of staff is waiting to start once DBS is cleared; ongoing recruitment should relieve current staff and improve the overall quality of care for residents.

Staff meetings are scheduled every two months.

Training is organised centrally for the group and staff told us that training needs are reviewed regularly; all staff we spoke to felt the training and support is good. The advice and support offered to the home by the East Riding of Yorkshire Council was also praised.

Different staff members quoted:

- 'The management are approachable to some extent'
- 'I enjoy working here. It's like a little family'
- 'We need more staff members in the morning to get people up; some are not up until 11:30 a.m. for breakfast. One more staff between 6-8am would be better'
- 'Currently only 4 staff on during the day - need more'
- 'No staffroom. We have to eat and take breaks in the residents dining area where we are interrupted by residents needs'
- 'Should have more activities for the residents'

Response from Setting:

The visit on the 28th June 2018 was positive. Thank you from all at Summer Court.

The home clarified the following points raised in the report:

- *The call bells in residents rooms are removable from the wall, they also have an extension lead with a hand-held call bell*
- *Residents are offered a choice of menu daily. This is documented and identifies each residents choice, but these were not asked for on the day, so were not seen. A resident that was spoken to the day of the visit who said that they do not have a choice does have memory problems and said 'that's why I'm here'. Residents do have a choice of where to eat, during the visit some residents were in the lounge and two were having lunch in their own room*

Recommendations Update:

- *Medication door has been replaced (03/07/18)*
- *Fire signage has been lowered to residents can see exit signs*
- *Complaints procedure on view (completed during visit)*
- *New dryer in place in the laundry (11/07/2018)*
- *Arrangements are in progress re an additional washer*
- *Dry area is to be re-vamped with new rack to accommodate residents laundry*

Signed on behalf of HWERY

Matthew Fawcett

Date: 13/8/18