



healthwatch
East Riding
of Yorkshire

Virtual Care Home Engagement Project



Report

Tamarix Lodge

July 2021

Healthwatch East Riding of Yorkshire
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Overview/Background

Tamarix Lodge is a residential care home which is situated in the seaside town of Withernsea. It provides care to service users aged 65 and older, and is registered with the CQC to provide care for Dementia and Old Age. There is a specialist care category of Alzheimer's care, registered to care for a maximum of 37 service users, under the HICA group.

Located close to local amenities, with the beach and shops are within walking distance, there is a secure enclosed gardens to the rear, hairdressing facilities and a designated activities lounge.

Tamarix Lodge has the CQC rating of 'Good'.

Methodology

Engagement with Kirkella mansions began the week commencing the 27th of June 2021 by advertising Healthwatch's weeklong visit on the home's provider, Burlington Care's Facebook page making relatives/friends aware of the visit and how they could access the the survey to ensure they had the opportunity to give their views.

We gave notice to the Home that we would be conducting the virtual engagement, this consisted of a letter for the manager explaining the days and times of the engagement, posters and flyers to distribute to staff and residents, advertising the purpose of our visit, and paper questionnaires that could be completed by staff and residents if they chose to. They were also given Healthwatch's freepost address to send material to.

Staff were then able to contact our volunteer coordinator to book an appointment to discuss their experiences at a mutually convenient time during the weeklong engagement.

Managers section

The manager is Brian Johnson, who has been a managing care homes for 3 months, and a manager of Tamarix lodge for four weeks.

Brian believes that Tamarix' CQC rating of 'Good' accurately reflects the level of care that they provide.

There are currently 31 residents and the home has 34 beds, 29 of which have en-suite facilities and there are 3 additional residents' bathrooms and toilets.

There are 10 full-time members of staff, and 15 employed part-time. During the day, 5 care staff are on shift including the team leader, which goes down to 3 members of staff after 10pm. There are 16 other staff employed. Staff absences

have been covered through existing staff picking up overtime and Brian required over 10% percent over budget as per policy to accommodate.

Maintenance and repairs are dealt with by an employed 'handy person'.

Life at the home

Rather than being prepared on the premises, the resident's food is provided by a service called Apetito, who make ready meals for hospitals and care homes, and caters for a variation of diets. The home have two staff who are also trained to cover in the kitchen so that they can provide other choices if a resident wants something else like a sandwich or a jacket potato.

Food preferences are documented in care plans and specific food types are ordered to meet individual's dietary needs. Menu options are clearly displayed however table menus have had to be removed due to COVID. The homes food hygiene rating is 5.

Resident's weight and fluid intake is monitored through food diaries and for residents who require monitoring closely have food and fluid charts in with their daily records.

Health care

Residents who wear hearing aids are to communicate with staff if their devices are not in a working order, and any concerns expressed by the resident or a staff member regarding their sight or hearing will be referred to a GP or specialist if registered. For the residents who may not be aware or comfortable raising this, if there is any cause for concern by the care team then this is raised with the team leader who will refer to GP or auditory clinic. The home does not have an auditory team coming in so there are currently no hearing tests for those without a hearing aid.

Residents have their sight checked bi-annually which is carried out by a company called Vision Call, who provide an on-site screening test for the residents. This is normally done on a regular basis, every other year.

Residents have foot care every 4-6 weeks which is documented in professional visit logs in each individuals care programme. There was a gap over COVID where the residents did not have any nail care and there was some confusion over which professionals were allowed to come in. If the residents mobility is affected or they are causing pain than the home would arrange for them to be seen.

Tamarix Lodge also has access to a variation of other services, such as dieticians, wheelchair services, hospital transport, the falls team, and pharmacies, for example. Brian has not had any problems accessing any of these healthcare services or experienced any issues with the hospital discharge process.

Care

Staffs training needs are identified and provided through a learning management system the company uses. This provides and records e-learning courses, and the

home also have access to face to face sessions for some courses which are currently done via teams. Staff are also able to request additional training and Brian encourages staff to ask for this.

Tamarix Lodge also provides day /respite care.

Residents have end of life plans in place. Care plans are reviewed on a monthly basis by the senior team and a monthly audit is carried out by the deputy manager, and care plan updates occur at the point of change. In most circumstances both residents and their relatives are involved in this process, but for those who have capacity it is their discretion as to whether their family is involved.

Resident's family and friends are kept informed of any updates or concerns at every visit they have at the home. The home also update relatives through phone calls and post, and families are encouraged to contact Brian whenever necessary. The home does not tend to email relatives or engage with them using social media, however this may change in the future.

Residents meetings are held bi-monthly and relatives meetings are held three times a year.

Tamarix has previously not organised external trips with the residents, however this is going to be arranged moving forward. Residents are able to access the garden facilities and can have walks with their families outside.

The home ensures that the residents feel connected to the local community through maintaining links with the local school and the local crèche. In order to identify loneliness or difficulties amongst new residents when transiting into the home, Tamarix ensures that each resident is personally welcomed to the home by the manager, team leader and activities team. At pre admission assessment stage it is identified if social services or the resident's families have any concerns the home needs to be aware of. Religious and cultural needs are catered to by the home via the home supporting the residents to continue to meet with their congregation on a virtual basis.

The home has facilities such as computers/laptops, online meeting platforms such as Zoom/Teams and tablets.

COVID

Tamarix Lodge is being kept up to date with current COVID guidance through their head office, and feel that they are adequately supplied with PPE, sanitiser and tests etc.

There are 2 areas for visitors to come within the home- their large activity lounge and a summer house which has screens and PPE. The current visitation rules within the home are for visitors to telephone in advance to book. A visitor's diary is kept as a live document and team leaders manage visiting through this format. Visits can also take place for residents who are bed bound. In this instance the relative having to take lateral flows before entering the home and then putting on PPE, and being through the nearest entrance to the resident's room.

The vast majority of the homes staff have received the vaccine. The staff were cautious at first but wanted to act in the residents best interests. Risk assessments are in place for staff that have not received the vaccine.

The home's future plans for keeping everyone safe is to continue to follow Government guidance, promote use of PPE as per infection control policy and support staff where required to discuss vaccination options/ top ups if required moving forward.

Support

Brian feels supported in his role of the manager and has not experienced any difficulties with staff recruitment and retention. Brian has also not experienced any difficulties dealing with staff absences. This has been navigated through staff picking up overtime and the home recruiting 10% budget.

Staff meetings do take place however have not been held regularly for some time due to COVID restrictions, and were not restarted with the previous manager.

Brian works with various organisations to support care provision within the home, such as the local authority, the safeguarding team, multi-disciplinary teams and Clinical Commissioning Groups (CCG).

There are specific Quality Assurance Systems in place, in the form of monthly audits which are recorded on the internal compliance system.

Tour of Tamarix Lodge

As Brian showed us around Tamarix he spoke to several residents. He appeared to have an excellent rapport with them. The home looked light, airy and clean.

In the main reception area there are stairs as they do have a number of bedrooms upstairs. There is a gate at the bottom of the stairs and a lift. There is a reception desk and a thermometer checker. Everyone has to have their temperature taken when they come into the building. Brian showed us a large activity board but said unfortunately they can't put things on it at the moment as it's considered a COVID risk. There was lots of information on the walls including their recent CQC inspection report, and a staff notice board. How to raise comments and complaints. Hairdresser prices. There is also a *“donning and doffing”* area in reception for all visitors.

There was a hair dressing room off reception. A shampoo and set costs £8-£10 pounds and a trim £6 to £8.

Brian showed us the activity room which was nice and large so they had been able to distance chairs. There were patio doors in this room open to outside. Brian showed us a lovely large, mainly grassed garden with well established shrubs and stopped to have a chat with a resident who was sitting outside. There was plenty of seating outside so that visitors can use the garden for visits on nice days.

There are raised beds, pots and a greenhouse for outdoor activities which are encouraged as they recognise that it's good for residents' wellbeing.

Brian showed us the summer house which is used as a visiting room with a screen and PPE.

Brian showed us their interactive TV and large tablet which is fixed on a stand near the main TV. He told us they have 3 residents who are able to attend weekly meetings with their church via this big tablet. Residents were also able to attend a general Church service commemorating lives lost during COVID via the tablet.

The big tablet enables residents to play bingo, quizzes etc. Brian said they signed up with an online activity provider at the start of lockdown. This service promotes a variety of activities. They teach drawing, pottery, and exercises as well as memory lane and reminiscence. You can set up individual files and folders for residents on this so it's personalised to their interests. The home's Activity team have all been trained to use this system. Brian said it wasn't cheap but it's been well worth it. He said it's like a working pc but in tablet form. Residents can access it themselves or through a carer.

Brian showed us an area where the staff room and laundry room were. There are no railings in this area as only staff and more independent residents access this area.

The staff room had a large notice board with lots of info including Team leader development training. Nutrition and hydration info, health & safety and other policies. There was seating a sink, microwave, a fridge and PPE. Brian said staff have breaks individually since COVID as the staff room is quite small.

Brian showed us a large laundry room. He said that they have a contract with Procter & Gamble who provide all cleaning items and equipment. They have 2 bespoke laundry staff 2 and 7 domestic workers, some do laundry too. The washing machines are connected to a special pump service which ensures that the right amount of detergent and softener is added to the wash to minimise skin irritation issues. Tamarix rent their laundry equipment from a company that come and service the machines every 6 months.

There was a smaller lounge with a conservatory off it. Several residents were sat in this area. There was access to the garden through the conservatory. There were plenty of garden chairs and tables again and a bird table and apple trees.

The servery has a shield in place due to COVID. There is a gap at the bottom so that meals can be passed through but they usually do table service. There were dining tables and chairs for residents who like to sit together when they eat but some resident prefer to eat in the conservatory or in front of the TV so it doesn't get too crowded.

The kitchen looked very clean and tidy. They like the meal time experience to be as good as possible for the residents.

Drinks are provided in residents' room with jug of juice or water in room according to personal taste. In the morning tea coffee and juice are provided with breakfast. At 10.30 there is a drinks trolley. More drinks are offered with lunch

and there is a mid-afternoon drinks trolley and at supper time hot milky drinks are offered. They also offer milk shakes and Brian is currently promoting smoothies and fruity milk drinks to encourage healthy eating.

Brian showed us corridors where the majority of residents' rooms were. There were blue handrails against cream walls down these corridors. Resident's rooms are mostly in blue although individual residents could choose to have their door painted in different pastel colours. All doors were numbered. Bathroom and toilet doors are painted yellow to help residents identify them more easily. The corridors looked clean and light with lots of pictures on the walls.

At the far end of the corridor there was an outside door. There was a fire door in the corridor so that this area (with 4 rooms) was able to be separated from the rest of the home. This area contained "Step down beds" for people discharged from hospital but not well enough to go home. Brian said the CQC inspector was very happy with this facility. They had allocated one room to be a small lounge during this time. There was direct access to a sluice room and they designated staff to work in this area.

Tamarix did have a COVID outbreak during the first lockdown and unfortunately lost some residents.

Residents section

The residents we spoke to found Tamarix lodge to be homely and were fairly content living at the home. Most residents said that there wasn't anything they did not like about the home, however some residents did say they were unhappy about not having baths or showers as much as they would like.

"Yes homely enough"

"Welcomed by staff, ok, suits needs, not exactly what would want but not unhappy"

"Not being many walk in showers and only have only a shower every two weeks and loneliness"

"Strange to start with but I was made to feel very welcome"

"Not happy with the food; problems getting a bath when required"

Residents explained that the hobbies and interests they had from coming into the home were things like sport and listening to music, and said they are supported to do these things within the home if they want to take part. For instance one resident is a practising Jehovah's Witness, and they explain that the home helps them to facilitate their Jehovah's Witness meetings once a week. The home activities the residents we spoke to took part in bingo, dominoes, listening to music, socialising with other residents. All residents said that they are invited to take part in activities within the home by the staff. There is currently no activity board on display due to COVID but the residents are told the scheduled activities on a daily basis. Themed evenings or entertainers coming into the home are

currently not happening to due to COVID. Residents are able to use the garden facilities on their request. Residents are not able to have any external trips currently however when it is safe to do so the home does do mini bus trips out to Hull, Hornsea, the Garden centre, the coast etc.

“Listen to a music, talk to people, wander around, can’t do a great deal, OK but lonely”.

Living in the home

Most residents we spoke to like the food provided and none had any special dietary requirements.

“The food is excellent better than in a hotel. No menu they ask what we would like there are three choices but you can change to anything you want, you can also have seconds if you want”

“There is choice, but not happy with what’s on offer”

Residents said that there are lots of various drink choices on offer which are made readily available for the residents. Residents are also able to have extra snacks and drinks on request.

All residents we spoke to explained that they feel safe and secure within the home and said their room was adequate for their needs, residents had their own things around them, such as photos of their family and their own television. Most residents said that their bed is comfortable enough for them, however one resident said that they “don’t like the sides they are hard, but otherwise comfortable”. Some residents explained they often feel cold, especially first thing in the morning, and one resident said that they often feel too warm at times- however residents did explain they can tell staff if they are unhappy with the temperature. Regarding views from their window, some residents we spoke to had a view of the outside garden which they enjoyed, however one resident answered that they do not have a view from their window. All residents we spoke to answered that their room feels fresh and clean, with them explaining that it is cleaned very regularly.

When asked if they have buzzer to call staff if needed residents said there is a buzzer within the toilets and en-suit facilities that they can pull if they need assistance .

“There is a buzzer in the toilet room and they are very quick to answer. Needs help with his shoes and socks and he doesn’t have to wait long for them to come. He realises they are busy”

Residents answered that the staff are very friendly and that even though none of the residents we spoke to said that they had a key worker (that they knew of), they said that they could go to any of the staff members for help if needed. All the residents felt supported and cared for by the staff and within the home.

“The staff are very friendly”

“Yes, no argument with any, do what they have to do well.

“You can shout out for anything and it comes”

Residents we spoke to explained that they do know the system in place if they are feeling unhappy about something.

“[resident] didn’t at first but he does now and is used to the system”.

“Talk to daughter, don’t moan to staff because they have a difficult job. Daughter will sort things”.

When asked about accessing health services, some residents answered that they have been able to see various services such as the optician- Vision Call- who has come into the home to adjust glasses, Chiropodist who visits the home for foot care, and some residents have also been in person to visit their doctor. One resident has had a few hospital visits also.

“Optician came in person to adjust my glasses. No doctor but has been to castle hill twice this week. Went to the chiropodist in his wheelchair. Has had injections from doctor, no-one seen about glasses but happy with what have, someone does feet chiropodist, no dentures, hearing is good enough”.

“(Visit from) the head nurse- she’s nice, gives us cuddles”.

None of the residents we spoke to have had their hearing or hearing aid checked whilst at the home, however most of those we spoke to do not experience any known hearing problems.

“Has not had hearing checked and is slightly deaf”

“Does not remember having hearing aid or hearing checked since living there”.

Visiting

Family are now able to visit the residents within the home. The visits can occur inside or outside in the garden area, however there are restrictions on how long the visits can take place inside of the home. Residents still use video platform services to contact their loved ones, such as face time, and continue to speak over the telephone.

“Anyone can come now restrictions are lifted His grandchild came last week and they are able to visit in the garden, summer house, lounge or in his room”.

Conclusion

In conclusion, Tamarix Lodge is being kept up to date with current COVID guidance through their head office, and feel that they are adequately supplied with PPE, sanitiser and tests etc.

The home tries to ensure that their residents feel connected to the local community through maintaining links with local services and does endeavour to identify loneliness or difficulties amongst new residents.

Brian feels supported in his role of the manager and has not experienced any difficulties with staff recruitment and retention.

Residents feel that staff are very friendly and feel safe and secure within their room, and the overall home environment. Residents know who to speak to if they are unhappy with anything regarding their care. Residents are now able to regularly see

Unfortunately we did not get to hear from any members of staff or family/relatives of loved ones.

Recommendations

- 1. The introduction of yearly hearing tests for all residents. Hearing aids should be checked twice yearly by an Audiologist.*
- 2. More frequent access to bathroom facilities, ensuring residents' wishes are met. Consider adding an additional bathroom to enable this.*
- 3. Welfare checks on residents, as some residents reported feeling lonely.*

Acknowledgements

Healthwatch East Riding of Yorkshire would like to thank Tamarix Lodge, Brian the registered manager, and all the staff at the home for their help and involvement with the enter and view. We would also like to thank all the residents and relatives for their engagement. Thank you to our Healthwatch East Riding volunteers who helped us facilitate the project.

Distribution

This report has been distributed to the following:

- Healthwatch England
- The Care Quality Commission (CQC)
- East Riding Clinical Commissioning Group
- East Riding of Yorkshire Council
- The Healthwatch Humber network