

HW Reference: 20180820A

Time & Duration of Visit: 9:30am-12:30pm

Number of people engaged with: 5 staff, 3 relatives and 8 residents

Enter & View Residential Care Report

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

Westfield Residential Home

16 Carr Lane, Willerby, East Yorkshire HU10 6JW

Date of visit: 20th August 2018

Date of publication: 16th October 2018

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

Westfield Residential Home currently has 23 residents with no beds available. Eleven of the rooms have ensuite facilities; the site has five additional bathrooms and toilets.

Nine relative's questionnaires were completed and all felt the home to be safe, effective, responsive, caring and well led.

Eight staff questionnaires were completed and staff felt that the home was safe, effective, responsive, caring and well led.

Recommendations/Observations

- Introduce hand sanitiser at front door for guests to use to aid infection control
- Improve dementia friendly signage throughout home at an appropriate eye level; specifically to toilets, bathrooms, lounge and dining room
- Fire route directional signage should be reviewed & increased throughout the home. Some fire exits were full glass doors and need a sticker to avoid people trying to walk through them whilst closed; a fire exit sticker would be ideal
- There is a suggestion box in the entrance hall but no suggestion slips for residents and guests to write on, ensure these are freely available



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.

We found the home to be clean with no odours or obstructions throughout; all fixtures and fittings appeared safe and there were hand rails throughout the home as a means of falls prevention.

There were fire extinguishers around the home as well as fire call points, though we did point out that directional signage to the nearest exit was sparse and should be improved. Some fire exits were full glass doors and need a sticker to avoid people trying to walk through them whilst closed; a fire exit sticker would be ideal.

The home employs a handyman to deal with day to day jobs around the home including general maintenance and repairs.

There were numerous areas that residents could not access; these included the kitchen, laundry and medicine cupboard. In the medicine cupboard all meds were locked away and temperature controlled medicines were in a refrigerator. All cleaning substances that could be harmful were also locked in the laundry.

We noted that the food hygiene rating for the home was 5 (the highest score possible); this was displayed in the kitchen.

Infection control was evident around some parts of the home, in places like toilets; however there was no sanitiser at the front door to capture any germs on guests as they entered and left the home.

All rooms have a call system in place which is linked to a central control computer and has an audible alarm until a carer has responded to the call.

One relative stated 'I'm fully confident in the home, I trust them completely; the staff are second to none'.

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 staff were in clean uniform and were very well presented, their uniforms have their names embroidered on to avoid name badges falling off.

All the food is prepared on the premises with the cook catering for different dietary requirements; there is one Jewish lady and six residents who have diabetes (one being insulin controlled) which is catered for. The residents are asked about their daily food choices each morning for their meals that day; we also witnessed a few of the residents taking the decision to eat in their rooms rather than in the dining room. We sat with residents while they were taking lunch; it was a happy and social occasion with relaxed conversation between residents and staff. The food looked appetising and was well received by residents and help with eating and drinking was given where necessary. One resident said 'The food is very nice and good size portions', although another commented 'The food has no flavour, no seasoning - not how I'd cook it'.

Residents are weighed monthly or weekly if requested by the dietitian and records are kept on a fluid and food record chart.

The home has access to all local services including GP's, Dentists, District Nurses, Falls team etc. and also accesses reflexology. The manager did mention that mental health and incontinence assessments can take some time, and noted that there can be issues with residents returning from the hospital. One relative felt there should be more activities for residents and the home should provide hearing aid testing.

We saw moving and handling equipment around the home but did not witness its use as it is mainly used to assist resident getting in/out of the bath or bed.

There is a garden area and one resident told us 'It's nice to go in the garden sometimes'.

How caring do service users find the service?

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

All of the residents appeared to be in very good health, clean and well cared for. Care plans for each resident are done at pre-assessment and reviewed monthly by their keyworker.

Transition into the home is made easier with key workers spending time with new residents and introducing them to other residents. Residents have a keyworker, and each member of staff is only allocated one resident to make sure that one to one care is regular and the residents care plans are kept up to date.

Residents are allowed to personalise their rooms with furniture, ornaments and pictures.

Residents can access their own money which is kept in the safe in the office.

One of the relatives we spoke to said 'I was asked about end of life wishes when mum moved in as part of the care plan' she also said that 'The home asked about mums past so they could make a reminiscence sheet for her as part of activities and supporting her capacity'.

The interactions we saw between staff and residents during our time at the home were very positive and friendly; the same can be said for interaction between staff and relatives. A relative we spoke to said 'The home discusses everything with me, every GP appointment, health updates etc. I feel very supported by the home'.

Residents meetings are held six monthly at a minimum, with more regular meetings if required; the manager told us her door is always open.

The home does not have specific visiting times and relatives can visit when it suits them. The home uses the mobile library, the church does a service every month, school children visit and residents are taken on walks into Willerby Square. Some outside entertainment is provided, these include singers and flower arranging or crafts and external trips happen around four to five times a year; the external trips include places like Ellerker Garden Centre or Hornsea. The secretary of the home arranges the daily activities which are things like dominos, board games and quizzes; there is one activity in the morning and one in the afternoon - staff state the residents are consulted on the activities they want. Two residents we spoke to said 'There are lots of activities for us to get involved with if we choose to'. Other comments made were 'The staff are lovely, I can't complain' and 'Staff are kind and lovely'.

Comments from relatives' questionnaires included;

'The staff at Westfield far exceed any expectations of care for the residents. They are all amazing'.

'Mum gets excellent service'.

'We chose this home on the advice of social services and researching CQC information'.

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

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

Respite care is provided depending on vacancies.

We saw that there is a complaints procedure in place and the policy was printed and displayed on a noticeboard in the entrance hall.

Residents have end of life plans in place and these are asked about at assessment, one member of staff stated she did not understand resident's choices for end of life care.

The home ensures they cater for religious and cultural needs, contacting the most appropriate person to visit and catering for any special dietary needs.

Residents also have access to telephones, Wi-Fi, computers and Skype.

As relatives meetings are not always well attended, the home produces a seasonal newsletter four times per year; this is emailed to all relatives and displayed on a notice board outside the residents lounge. There are also pictures of the residents taking part in activities in and out of the home for guests and residents to view on these notice boards.

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.

The home employs five full time care staff, nineteen part time care staff and ten other staff members. The home does not face any recruitment issues at present and is fully staffed, staff retention is very good. The registered manager has worked at the home for over twenty-nine years and has been the registered manager for the last seventeen years. Staff meetings are held bi-monthly to discuss ongoing development and any changes to the home. The home owner is also very involved with day to day tasks around the home and is often helping in the kitchen or assisting activities etc. and offers the use of his seven seater

car for external trips. One member of staff stated; 'I feel as though the management team are really helpful and understanding if I have any problems or concerns'.

All the residents we spoke to said positive things about the staff, managers and owner.

The manager is clearly enthusiastic about the home and its values and strives to improve on its recent CQC rating.

All the staff we talked with said they enjoy working at Westfield, they feel staff levels are sufficient, training is up to date and appropriate; they feel supported and that the management is approachable and also their views are listened to. Staff also said that the manager and owner help with tasks around the home; we saw the manager helping serve lunch whilst we were there.

Staff training is provided in house, by e-cert and outside training providers. All of the staff we spoke to said that their training was fully up to date and they could even suggest additional training which was normally welcomed.

Further staff comments were:

'The managers' door is always open, I went to her with something this morning and it's already sorted'.

'I feel we have a great team'.

'They offer additional training'.

'I really enjoy working here, it's like a family'.

'The manager chips in with anything'.

The only area staff think the home could improve is with the opportunity to give the residents more outside trips and activities and thought a minibus would be fantastic to have.

Response from Setting:

Although an independent fire risk assessment and health and safety assessment was in place, it was not seen at the visit.

All recommendations have been addressed.

The provider was not present as they were on annual leave, so some issues raised would have been addressed at that time and would possibly not be seen on this report.

Signed on behalf of HWERY

Matthew Fawcett

Date: 15/10/18