



# Hungerford Care Home

Enter & View Visit Report April 2016

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## 1. Introduction

### 1.1. Details of visit

Details of visit:	
Service Address	Hungerford Care Home Wantage Road Hungerford Newtown RG17 0PN
Service Provider	Four Seasons Health Care Ltd (trading as brighterkind)
Date and Time	<b>31<sup>st</sup> March 2016, 11am</b>
Authorised Representatives (Lead in bold)	<b>Cléa Knight</b> , Annette Arlow, Karen Dodd, Martha Vickers
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### 1.2. Acknowledgements

Healthwatch West Berkshire would like to thank the service provider, service users, visitors, staff, and our volunteers for their contribution to the Enter and View programme.

### 1.3. Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time, and any feedback received relating to the visit.

## 2. What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and

carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

*The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users to make recommendations.*

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the Care Quality Commission (CQC) where they are protected by legislation if they raise a concern.

## 2.1. Purpose of Visit

- To engage with service users of care homes and understand how dignity is being respected in a care home environment
- Identify examples of both good and poor working practice
- Observe residents and relatives engaging with the staff and their surroundings
- Capture the experience of residents and relatives and any ideas they may have for change
- To introduce Healthwatch West Berkshire as an independent champion who seek to make changes and improve communication between residents, visitors, carers, staff and management

## 2.2. Strategic Drivers

- Recommendations made by CQC visit in September 2015
- Anecdotal evidence from multiple contacts to Healthwatch West Berkshire
- Vulnerable groups (the elderly, those living with dementia etc.) are a priority area for Healthwatch West Berkshire 2015-16

## 3. Hungerford Care Home

Hungerford Care Home is a 52-bed residential home provided by Four Seasons Health Care Ltd, trading as brighterkind, offering nursing and dementia care in different units. Hungerford Care Home was rated 'Good' following an inspection by the CQC, which was carried out in September 2015.

### 3.1. Methodology

This was an announced Enter and View visit.

As part of the briefing before the visit, a representative from a dementia charity talked us through effective communication with people living with dementia and authorised representatives were given the opportunity to ask questions about the specific information we were looking at on the visit.

When we arrived, the receptionist rang through to another member of the team to show us around. A senior nurse came down to take us around the care home. The manager of the care home wasn't in as she was attending an external meeting, so Healthwatch West Berkshire corresponded via email following the visit.

We split into two groups to talk to residents in different communal areas using short questionnaires, which were adapted to each resident to enable effective communication. Questions covered general feelings about the care provided, activities, food and access to additional health services (e.g. GP, chiropodist, dentist etc.).

Shortly before lunch, the team reconvened and took a short break while staff and residents were getting ready for their meal.

When we came back into the care home, we split into the same two groups to observe the lunch time period and talk to residents and staff if appropriate. We also gave the receptionist the pack we have been sending out to providers to explain more about who we are, including some posters and feedback forms.

Following lunch, group 1 talked to staff and group 2 talked to residents (with input from staff) as this was appropriate to the time and setting. Questions for staff covered topics concerning care for the residents (choice, dignity, respect, access to additional services) and training and development (training opportunities, supervision, support for staff).

We reconvened as a team for some final conversations with staff, including the receptionist, before ending the visit.

A large part of the visit was observational and authorised representatives were able to get a feel for atmosphere of the home, and see first hand how staff interacted with residents at an everyday level, as well as the general mood of residents in the home. Each authorised representative completed an observation checklist (based on the [NHS 15 Steps Challenge](#)) throughout the course of the day to capture these more general feelings.

*“As with any Enter and View visit, authorised representatives attended to capture the experiences of residents...not to cause any distress or harm.”*

As with any Enter and View visit, authorised representatives attended Hungerford Care Home to capture the experiences of residents, visitors and staff, and not to cause any distress or harm to anyone in the service. This meant that talking to residents was generally kept short, and authorised representatives were mindful of adapting questions to ensure respect and dignity was upheld at all times.

The team of authorised representatives met for a short debrief following the visit, where observations and notes were collated and any issues discussed thoroughly for input into the report.

### 3.2. Summary of Findings

#### General Impressions

- A lot of refurbishments had taken place and this was seen positively by residents spoken to
- There was a homely feel while still being clean and practical
- No evidence was seen of vinyl flooring in communal areas, which has been carpeted upon recommendation from CQC
- There were no unpleasant or overpowering smells
- It was peaceful and quiet with no bells going off or staff rushing around

#### Reception Area and Welcome

- There is a receptionist in post (since October) who was welcoming on arrival
- Unfortunately, staff didn't seem to have been made aware of our visit despite our efforts to liaise with the manager prior to the visit

#### Safety

- Safety is important - front door is locked with a doorbell, the stairs have gates which are latched shut, each unit has a digital code for access, files are not kept out in communal areas
- One minor incident was witnessed but staff dealt with this efficiently and effectively
- A spill was noticed by an authorised representative, but was assured by staff that they were in the process of cleaning this up while residents were not using the room

#### Dignity and Appearance of Residents

- Residents were well presented, in clean and appropriate clothes
- A hairdresser comes in once a week to cut and style residents' hair
- Choice was respected as to what the resident wanted to do that day
- Residents each had a named nurse and key worker to ensure that care plans were kept up to date

#### Contact Between Residents and Staff

- Staff seemed busy but were friendly, caring and patient, speaking to residents next to them and not shouting across the room
- Staff called residents by name and knew a lot of about their preferences

- Residents were positive about staff, but also noted missing some of the old management and team

#### Activities for Residents

- The home has two activities coordinators in post, with a wide range of activities for residents including arts and crafts, music, yoga and a sensory room
- There are residents meetings once a month, and 1:1 visits for those who don't make it
- We were told that residents can have their make up done and nails painted by staff if they wish, and a qualified masseuse comes in to do massages

#### Food and Drink

- Drinks are kept out in communal areas and dining rooms but staff were not always there to help them drink
- A new catering company is being used and some residents complained about the taste and portion sizes of the new food. Sometimes what comes isn't what has been ordered
- Most of the menus around the home were displaying the correct day but there was one that was showing a different day
- A staff member told us that they have different menus with pictures etc. for some residents to access but we didn't see any evidence of these
- There are kitchenettes attached to the dining rooms, so staff don't have to go back and forth to the kitchen all the time - this gives them more time and keeps them closer to the residents over meal times
- Residents are asked the day before for their menu choice - one staff member mentioned that there was usually some extra things made in case people change their mind, but another staff member said differently

#### Cleanliness and Hygiene

- The home seemed to have a high level of cleanliness. Rooms were kept tidy to make residents feel calm and comfortable
- There was antibacterial hand gel by reception

#### Access to Medical Staff

- Access to optician and chiroprapist is easy as they come to the home, however this isn't the case with the dentist
- There is a house GP who comes and communicates well with the nursing staff to make sure they are able to follow up with care

- We received mixed reviews from residents about the house GP

#### Visitors

- Visitors are encouraged to come to the home at any point during the day (until 10pm). We saw a number of visitors who were there to help their relative eat over lunch time
- We saw a letter from a relative thanking the staff for making an extra effort to make a particular event special
- Visitors get tea and biscuits with the person they are visiting

#### Staff

- There were quite a lot of new members of staff but also many who had been there for longer
- Positive comments about the previous managers who had been there for a long time, although important to reinforce that the new manager has made a lot of positive changes
- One resident who had been there over a year said staffing levels and consistency were good
- General feeling from residents is that the staff are really friendly and caring and they are happy here

#### Other

- One resident said they were very lucky to be somewhere like this and others agreed
- One resident & visitor said they couldn't think of anything negative about the home
- A few residents mentioned separately that there were a lot of staff from other countries and sometimes this made communication difficult

### **3.3. Results of visit**

#### General Impressions

The home had seen a lot of refurbishments and all the residents who mentioned this were very positive about this, especially with regards to their own room.

The atmosphere was felt to be comfortable and homely whilst still maintaining a high level of cleanliness, and practicality for frailer residents. The smell was pleasant - no overpowering scent of cooking/waste/cleaning/air freshener etc. It was peaceful and

although staff were busy they weren't rushing around or using raised voices to communicate at a distance.

*“The home has been decorated well...One resident commented on how lovely the flowers were in the communal area we were in.”*

The home has been decorated well, with memory boards on display and hand-painted murals. From what was observed on the day, each communal room is distinctive and decorated differently. We didn't see any evidence of vinyl flooring in any of the communal areas, which are now carpeted throughout. This had been a recommendation from their last CQC inspection. One resident commented on how lovely the flowers were in the communal area we were in. It was observed in the dementia unit that residents' doors are painted in different bright colours to help identify them.

One sign displaying the day and date had not been changed since the previous day, and some of the menus at lunch time were displaying a different day's menus, which did add to the residents' confusion about what food they were supposed to be getting.

Staff uniforms were distinctive, with clear name badges, making it easy to identify them.

The sign at the entrance to the care home wasn't very clear on the day the Enter and View visit took place. Feedback from people at the care home explained that this may have been due to stormy weather conditions, and that it used to be clearer.

### Reception Area and Welcome

Hungerford Care Home has a receptionist during office hours (Monday-Friday 09:00-17:30) who has been in post since October and was very welcoming and accommodating.

It appeared as though staff and residents were not made aware of our visit, which resulted in some confusion. However, the team managed this well and were welcoming in spite of any confusion our visit had caused. There was no evidence of our posters or leaflets, but once we gave these to the receptionist again, they were put up straight away.

### Safety Issues

Safety seems to be highly considered by staff. On the occasion that an authorised representative noticed a spill, the staff explained that residents had just finished their mid morning tea and that the room was still being cleaned. No residents were using the room at the time this was noticed.

The front door to the care home was locked with a doorbell for visitors, the stairs had gates at the top which were latched shut, and each unit had a digital code for access. Files were not kept out in communal areas. We were informed that each resident's file was kept in their room, and old files archived.

One incident was witnessed, involving a resident knocking into a piece of furniture. Staff attended to this straight away. The issue was raised that perhaps the environment could be looked at in this specific case to suit the needs of this particular resident. However, the environment generally is conducive to the safety of the residents so this may be an isolated incident.

### Dignity and Appearance of Residents

Residents were well presented in appropriate, clean clothes and we were informed that a hairdresser comes in once a week to cut and style residents' hair

We observed that choice was respected at all times - if a resident wants to stay in their room, go to an activity, or sit in a communal area, staff enable them to do this.

Over lunch time, residents were allowed to consume their own drinks. Some people had their own puddings/snacks in the fridge and these were offered to them. Staff involved residents in conversations about their meal, asking if they were finished/ready for their pudding, wanted more water etc.

Residents each had a named nurse and key worker to ensure that care plans were kept updated.

### Contact Between Residents and Staff

Staff seemed to be fairly busy, and Authorised Representatives observed that they sometimes didn't have enough time to talk to the residents for very long, but were always friendly, caring and patient when talking with residents.

Staff called residents by their names, rather than generic terms of endearment. It was clear they knew a lot about the residents and their preferences (e.g. food choices, what they could and couldn't have). Staff approached residents to talk to them rather than yelling across the room, which contributed to the peaceful environment.

Residents were generally very positive about the staff, although there was a feeling that there had been a lot of changes and some residents and staff missed the old management who had been there for a long time.

*“Staff seemed to be fairly busy...but were always friendly, caring and patient...Residents were generally very positive about the staff...”*

### Activities for Residents

We found that the home has two activities coordinators who have been in post since October, and seem to have a wide range of activities for residents including arts and crafts, music, yoga. We were informed that visitors are also generally welcome to take part. They will be having a fete soon and families and friends of residents will be invited to join. Feedback from a relative showed that there was a wide range of activities on offer which was really enjoyable for the resident.

We were told that as well as the hairdresser who comes in, a qualified masseuse comes to do massage with the residents, and residents can have their make up and nails done by staff at the home if they wish.

The home has a sensory room with music and lights for residents who are distressed or would like time out in a calming environment

Activity timetables were on display with some visual support and pictures of residents taking part in past activities.

There are residents' meetings once a month, and 1:1 visits for those who aren't able to make the main meeting.

### Food and Drink

Drinks were kept out in communal areas and dining rooms. Staff were generally around where residents were, but there was one case we observed where a resident was thirsty and there were no staff around to offer a drink. We didn't observe residents in their rooms, so we are not able to know whether staff are on hand to provide residents with enough to drink outside of meal times if they choose to stay in their room.

*“A new catering company is being used and some of the residents complained about the taste of the food...portion sizes are too small...sometimes what comes isn't what has been ordered...”*

A new catering company is being used and some of the residents complained about the taste of the food not being as good as the old food, some of the portion sizes are too small (e.g. fish portion) and sometimes what comes isn't what has been ordered - this was confirmed by staff. One resident said they had been able to feed this back to the staff in a residents meeting. Some staff members we spoke to thought the system had worked better for the residents before the change.

The pudding for lunch on the day was an apple tart and some of the residents said the crust was a bit hard.

Most of the menus around the home were displaying the correct day but there was one that was showing a different day, leading to confusion for some residents as to what they were supposed to be eating that day. We didn't see any evidence of different menus with pictures/visual aids for residents to access but a staff member told us that they have these.

Residents are asked the day before for their menu choice. There was a discrepancy between different staff members we spoke to as to whether residents could change their mind on the day.

There are kitchenettes attached to the dining rooms, so staff don't have to go back and forth to the kitchen all the time - this gives them more time and keeps them closer to the residents during meal times.

### Cleanliness and Hygiene

The home seemed to have a high level of cleanliness. Rooms were kept tidy to make residents feel calm and comfortable. There was antibacterial hand gel by reception.

### Access to Medical Staff

Access to optician and chiropodist services is fairly easy as they come to the home, however there is no dentistry service available within the home and one resident said they were having difficulty organising an external appointment. Another resident said they arrange all their appointments externally as they have the ability to do this, with support from relatives.

There is a house GP who comes, and it was mentioned that they communicate well with the nursing staff to make sure they are able to follow up with care. However, the service from this GP has mixed reviews - one resident said they were very happy with it, while another said it wasn't very consistent and they had sometimes been let down by the GP who hadn't always visited when they had asked.

*“Visitors are encouraged to come to the home at any point during the day...”*

We weren't able to find much out about the newly launched Rapid Response and Treatment service, part of the better care fund initiative, but one resident did mention that if someone has a fall the ambulance would be called straight away and they would get taken to hospital. This is inconsistent with what the RRAT service aims to achieve, but as this is a fairly new service, we can't conclude anything from this statement alone.

### Visitors

Visitors are encouraged to come to the home at any point during the day (until 10pm). We saw a number of visitors who were there to help their relative eat over lunch time.

We saw a letter from a relative thanking the staff for making an extra effort to make a particular event special

Some residents told us that visitors get tea and biscuits with the person they are visiting, and the staff aim to make them feel comfortable while they are there.

### Staff

There were quite a lot of new members of staff but also many who had been there for longer. We heard a lot of positive comments about the previous managers who had been there for a long time. Staff fed back that the new manager has made a lot of positive changes, but there was a feeling that they would like to see more of her day to day.

One of the residents who had been there over a year said that the staffing levels were really good and it had felt quite consistent with not too many changes in staff.

The general feeling we got from residents is that the staff are really friendly and caring and that both staff and residents are happy at Hungerford Care Home.

### Other

One resident said they were very lucky to be somewhere like this and others agreed. Another resident & a visitor said they couldn't think of anything negative about the home.

One observation from a few residents in separate conversations was that there were a lot of staff from other countries and sometimes this made communication difficult.

## **3.4. Recommendations**

This report highlights the good practice we observed at Hungerford Care Home, and the changes that have been made upon recommendation from the CQC inspection in September to improve the quality of care received by residents. The residents' meetings were mentioned to us, and we believe that some of the following recommendations may have been fed back to Hungerford Care Home staff and management through this so may already be in the process of being actioned.

Our recommendations are as follows:

*We have made a number of recommendations from what was observed on the day. These were across areas of: Food/Catering, Access to Medical Staff, and Signage*

#### Food / Catering company

Although we know residents may have fed this back in a residents' meeting already, from our conversations and observations on the day we recommend reviewing the new catering system in terms of choice and taste of food.

We also recommend ensuring all staff are aware of the visual aids available to help residents choose their meals so that it can be used throughout the home where necessary.

#### Access to Medical Staff

We recommend monitoring this to make sure the GP is getting round to everyone who needs to see them.

We also recommend looking into the possibility of a dentistry service in the home, or a way to ensure the residents have access to a dentist when they need this.

#### Sign with wrong day/menus

We recommend that staff ensure that the menus are correct for the day, and make sure that displays of the day/date are correct to minimise confusion for the residents.

### **3.5. Service Provider Response**

“I have been informed of Health watch visit into Hungerford Care Home which I embraced. In order for you to have a real feel of this place and your report to be the true reflection of Hungerford Care Home, I have not informed the team about your visit. An unannounced visit captures much more than a planned one. Other professionals have been informed

about Health Watch visit: GPs, Monitoring Team - West Berkshire, Care Home Support Team and RRaT.

I am happy to hear that our signature elements with Oomph [activity provider], Vision Call [optician services], Amplifon [hearing services] and Compass [catering] improved the quality of care for the people living in Hungerford Care Home.

In regards of dentistry service we have already contacted DenproCare in March 2016. They have been invited into our Friends and Family committee meeting booked for 14th May 2016.

Following our weekly residents meeting and daily walk about, residents feedback regarding Compass's menus have been taken into consideration and changes have been made. The chef ensures that picture menus are available in dining rooms.

Menus and signage are now checked daily by Home Manager/Unit Manager.”

*“I can't think of anything negative about [Hungerford Care Home]” - resident.*