

### Enter and View Report

Name of Setting: Carseld Residential Home

Name of Manager: Mrs Katrina Jane Smith

Insert address: Brickhills, Broughton, Brigg, North Lincolnshire DN20 0BZ

Date of visit: 14/05/2024 Date of publication:

HWNL staff involved in the visit: Carrie Duran, Lucy Wilkinson and Rebecca Price

Disclaimer: This report relates only to the service viewed on the date of the visit and is representative of the views of the residents who contributed to the report on that date.

## What is Enter and View?

Enter and View is the statutory power granted to every local Healthwatch which allows authorised representatives to observe how publicly funded health and social care services are being delivered. Healthwatch North Lincolnshire use powers of entry to find out about the quality of services within North Lincolnshire.

Enter and View is not an inspection, it is a genuine opportunity to build positive relationships with local Health and Social Care providers and gives service users an opportunity to share their views in order to improve service delivery. Enter & View allows Healthwatch to-;

- Observe the nature and quality of services.
- Collect the views of service users (patients and residents) at the point of service delivery.
- Collect the views of carers and relatives of service users.
- Collate evidence-based feedback.
- Enter and View can be announced or unannounced.

## Main Purpose of Visit

The purpose of Enter and View can be part of the Healthwatch prioritised work plan or in response to local intelligence. Broadly, the purpose will fit into three areas of activity:

1. To contribute to a wider local Healthwatch programme of work
2. To look at a single issue across a number of premises
3. To respond to local intelligence at a single premises

This visit forms part of the Healthwatch North Lincolnshire programme of work and was carried out in response to feedback Healthwatch received about the care home.

## Carseld Residential Home Background

Carseld Residential Home is a privately owned residential care home, registered for a maximum number of 22 residents. Specialist care categories registered with the Care Quality Commission (CQC) include caring for adults over 65 years, caring for adults under 65, Dementia, physical disabilities, and sensory impairments. At the time of the visit, the care home was not at full capacity with 18 residents living permanently at Carseld and one person staying for respite. The home employs 20 staff in total, 10 full time care staff and 5 part-time care staff, an activities coordinator, 2 housekeeping staff and 2 cooks. Any absences are covered by bank staff and the Deputy Manager and Registered Manager. Some staff will also pick up extra shifts.

## The visit - on arrival

The Enter and View visit (E&V) was announced, so the Registered Manager of Carseld knew that Healthwatch would be visiting during the week commencing the 13<sup>th</sup> of May 2024.

On arrival, the Healthwatch team were welcomed into the care home by a member of staff, and we were asked to sign in. We were then introduced to the Registered Manager. After a quick introduction the Registered Manager gave the Healthwatch team a tour of the care home including all communal areas and facilities on the ground and first floor. We were introduced to staff as we met them around the building and the homes resident cats.

## Summary of the Registered Manager's Questionnaire

Healthwatch spent time with the Registered Manager, to find out some general information and to complete the managers questionnaire.

The Registered Manager confirmed she has worked for the company for over seven years and had been the deputy manager before stepping up to become the Registered Manager for eighteen months. Carseld is currently not at full capacity, work was being completed to transform a downstairs bedroom. Planning permission has been

approved for a six-bedroom extension, there isn't currently a start date for the work to begin. The Registered Manager confirmed that the team is currently stable and staff absences are mainly covered internally with staff from Carseld. The Registered Manager and Deputy can be pulled out of the office if needed and they also cover the on-call rota. The Registered Manager confirmed that three floor staff are on shift each day as well as two house keepers, an activities co-ordinator and a cook.

### **Latest Care Quality Commission (CQC) Report**

The last CQC visit to Carseld was June 2023. They received a rating of 'Good' from the CQC. CQCC had made recommendations and had requested that flammable creams were risk assessed, specific health concerns had condition identified care plans and that fire evacuations were timed. The Registered Manager confirmed that they had implemented the changes that had been recommended from the CQC report and felt that the inspection process had been a positive experience.

### **Safety**

The Registered Manager uses a national system QCS to ensure all policies and processes are up to date and in line with CQC and government guidance. All new and updated policies are shared with staff via email notification. The manager can monitor what staff have received and if they have read and are up to date with the most recent information.

When asked about how they manage risks such as falls, the Registered Manager told Healthwatch that all falls were recorded in daily notes, handover and on the Nourish recording system. They have a reporting of accidents policy and complete a fall risk analysis monthly. This information is used to review and update risk assessments and ensure that everyone is aware of the incident. The information is used to feed into monthly and yearly reports. The Registered Manager was able to show the outcomes of the audit and what had been put in place to safeguard further incidents where possible.

All staff are trained in infection control and follow reporting and recording procedures. Care plans and daily records were recorded on and accessed via the Nourish system. This has been a new implementation into the team, but everyone has adapted well to using it and records are much more streamlined.

All staff complete thorough training via Blue Stream (the Registered Manager shared the training platform used) Staff receive email notifications when training is due for renewal. Again, the Manager can monitor staff training progress by logging into the system. Currently training stats were at 98.5% complete, 50% of staff had completed the Oliver McGowan training. Training is set to specific job roles and can be adjusted as required.

There was a call bell system in place that residents and staff could use to alert others if they required support or in an emergency situation.

## Resident's Health and Wellbeing

The Registered Manager confirmed that there are no restrictions on visiting and have an 'open door' policy. Friends and family can meet with their loved ones in their bedrooms, communal areas or use the outside pod. A party in the garden has been arranged by family members.

A part time Activity Coordinator is employed in the care home, she works on Monday, Tuesday, Thursday, and Friday from 9-4 the activity schedule is displayed on the wall for the residents to see. Activities have included a trip to Brigg Garden Centre, bingo, baking, flower arranging, talking/remiscing therapy and gardening (they grow and sell plants and the proceeds go towards the residents' fund) They have had school visits and a performance from a singer. A Summer Fayre is planned for later in the year and a trip to Cleethorpes. The Care home has its own Nail and Hairdresser Salon.

## External Health Services

The Registered Manager stated that residents have access to their own GP Practice, Riverside Surgery in Brigg is particularly supportive. Other external services that come into the care home include the hairdresser once a fortnight, Chiropody, Occupational Therapy, District Nurse, Palliative care team, Single Point of Access Team, React to Red, Dietician if needed and Social Workers from the DoLS Team.

When asked if there have been any issues accessing healthcare in the last twelve months, the Registered Manager confirmed that they are persistent with getting what they need and haven't had any issues.

The Registered Manager confirmed that residents are included in any changes or developments within the care home through residents' meetings and discussions. The manager expressed it is their home and they are included and given a choice, recently when they were decorating, they were shown decorating samples to choose from.

## What did residents say?

During the Enter and View visit, Healthwatch spoke to six residents. Residents spoken to had lived there from just a few months to over eight years. When asked 'How do you feel about living here, tell us what a normal day looks like?' residents responded with the following:

*"Everybody is lovely, they look after us well. I get up when I am ready."*

*"I am okay. I have some friends. I don't want to live anywhere else."*

*"It's okay. Good mixture. I get up about 8:30am."*

When asked if they felt safe, all residents responded yes. When asked what made them feel safe, residents responded:

*“I’m quite comfortable. Staff are kind and helpful.”*

*“I don’t feel like a prisoner. I can do as I like. Good company, everyone is friendly.”*

*“Don’t get me wrong, I would rather be at home, but I like it here.”*

When asked ‘How do you find the staff?’ residents told Healthwatch:

*“Kind and helpful.”*

*“Okay, plenty of them around.”*

*“All the staff are brilliant. I would tell them if I was unhappy.”*

*“Carers are so nice, busy, they do everything for you.”*

*“I was left once for a long time in bed, I thought I might die of thirst!”*

All residents said that if they wanted to raise a concern, they would feel confident to tell a staff member or family. Most residents spoken with said that they have friends or family who come and visit. When asked ‘Do you feel lonely?’ most residents spoken with said they did not feel lonely. However, one resident said sometimes, and one said yes. Both said that they felt less lonely in the care home, particularly when all the chairs were full. When asked ‘Have you been able to take part in any activities in the care home?’ there was a mixed response. Three residents said yes, between them they had taken part in bingo and had enjoyed the singer, and a trip to Cleethorpes. One resident said they couldn’t take part as they weren’t very good on their feet and one resident said none, they were moving to a new care home that had more activities on offer. All residents spoken to confirmed they could go out in the garden if they wanted to.

All residents spoken to said they enjoyed the food and got a choice of meals. One resident did say that the food was cut up too small.

Overall, residents thought well of their care home. One resident stated that they would recommend it to others.

## What did family and friends say?

Healthwatch got the opportunity to speak to one family member and a friend during this visit. Both residents that they were visiting hadn’t been living there for long. When asked ‘Tell us about the standard of care your relative/friend receives?’ they responded:

*“All seems to be okay; everyone seems well looked after.”*

*“Impressed with it, staff are familiar with residents.”*

*“I visited the care home at 11.10 am and ----- was still in bed. She had been awake some time but was unable to get out of bed independently and became very distressed - she told me that she thought she was going to die (she was thirsty) Once alerted to this, the staff brought her a drink, and I complained to the Manager. I felt that I could complain, and there is open communication. I was assured this would not happen again”.*

Visitors said that they would feel comfortable to raise any concerns with the Registered Manager. One had already done this on behalf of their friend. They find the staff all very friendly and good and felt that their family member wanted for nothing. When asked ‘Can you tell us about any activities or entertainment that takes place in the care home?’ one visitor answered that they were only aware of a singer. When asked ‘Is there anything else you would like to tell us about the care home?’ One visitor stated that they were very pleased with how their family member had settled in. Staff knew all the residents and it had a personal touch. They would recommend the home to others.

## What did staff say?

Healthwatch spoke with five members of staff during the visit. The staff spoken to had worked at Carseld anywhere from six months to over eight years. The five staff members said they enjoyed working there, felt supported in their role, and felt management were approachable and helpful - they felt they could raise any concerns if needed and that they would be acted upon. When asked ‘What is the most enjoyable part of your job?’ staff responded:

*“I like to care for the elderly.”*

*“Being with the residents.”*

*“Helping to support with choices of clothing, having time to allow people to look nice.”*

*“Seeing the residents happy and laughing.”*

*“Residents are lovely.”*

Staff spoken to feel the setting provides person centered care and that they were able to respond effectively to resident’s needs and had adequate time to support residents. Staff felt they knew residents’ personal preferences, backgrounds and history and that residents are treated with kindness and compassion. Staff also felt they had time to adequately support residents.

When asked ‘Do you feel there are adequate members of staff on duty?’ Everyone asked said yes. All staff agreed that staff absences were well managed. Staff

confirmed that they had completed induction training when they first started in their role and that training was ongoing. When asked 'Is there any additional training you would like?' one staff member told Healthwatch they would prefer more face-to-face training rather than online.

Healthwatch asked staff 'If there was one thing you could change, what would it be?' Staff answered saying they wished that there was less staff turnaround. Another staff member wished for more storage space.

When asked if you'd like to tell us anything else. Positive comments or concerns? staff told Healthwatch:

*"No concerns."*

*"No problems, it is all good."*

Overall, staff enjoyed working there, that they understood resident's needs and could approach the management if they had any problems.

## Observations

Healthwatch spent time observing interactions in the care home during the visit. The main activity in the home takes place on the ground floor which is where observations took place.

### Control Over Daily Life

Healthwatch observed staff supporting residents to meet their needs. There appeared to be several staff on duty in the communal areas supporting residents to move around the care home and access the toilet when needed. Healthwatch witnessed a member of staff promptly getting a cardigan for a resident, after they mentioned that they were cold.

### Personal Cleanliness and Comfort

Healthwatch observed that all residents looked clean and tidy, had neat hair and nails. The Registered Manager confirmed that their hairdresser salon/nail bar is well attended. Staff also looked clean and tidy. All staff wore a uniform with different coloured tunics for their different job roles. They informed us that they keep their ID cards in their pockets.

### Safety

During the visit, no safeguarding concerns were observed or raised with the Healthwatch team. Lack of storage and narrow corridors, sloped floors and the stairgates could all be a potential slip/trip hazard. This was acknowledged by the

Registered Manager and agreed this was due to the limitations/structure of the actual building itself. Healthwatch observed staff wearing PPE (gloves and aprons) to dispense tea/coffee/snacks and medications.

The call bell system was observed working and staff responded promptly. Different sounds alerted for different reasons. There were alert systems in various places and two residents were observed wearing a call button that they could activate.

The care home had two pet cats that lived in the care home. It was evident that the residents enjoyed the interaction of petting them. They were older, well fed and were not seen to be getting in the way. One followed the Registered Manager on our tour upstairs, taking advantage to try and settle on one of the beds in a bedroom.

The bedrooms were locked once a resident had left their bedroom, this was to stop residents wandering into other resident's rooms, the key was on a hook next to the door frame of the room. A toilet seat was broken in one of the resident's bedrooms and had been covered with tape.

### **Accommodation and Cleanliness**

Overall, the cleanliness and décor of the care home was to a good standard. All furniture was well kept and there was a choice of different styles of chairs around the care home. The décor had a homely feel, in some places the walls were a bit scuffed, and paintwork chipped. There was building work going on during our visit, some doors were waiting to be painted. There was a slight smell of drains in the visitors' toilet.

When invited into resident's rooms, Healthwatch noted that they were personalised with photographs and resident's belongings. On some of the doors were pictures that represented resident's hobbies, previous work roles or interests.

All bathrooms and communal areas were clean and tidy. Staff were observed polishing and cleaning chairs.

There was no smell from the cats that reside there or any sign of cat litter trays.

### **Food and Nutrition**

Healthwatch saw a food menu written (no pictures) on the whiteboard in the dining room. There were two choices offered.

Healthwatch observed the drinks round take place just before lunch. A member of staff confirmed that residents can ask if they'd like a drink. Cold drinks stations were usually available in the living room area.

Adaptive cutleries were observed available on the tables in the dining area. Some cutlery had visible water marks present.

Residents' food and fluid intake is recorded on Nourish and a monthly MUST (Malnutrition Universal Screening Tool) is completed. Should a resident have a decline in weight, advice would be sought via the dietician.

## Activities, Social Participation and Involvement

Healthwatch did not observe any activities during the visit. The TV was on in both lounges and a group of residents were sat watching/listening/sleeping through this. Some residents were observed sat together in the dining area, singing.

A written activity schedule (no pictures) was displayed on the notice board. This stated that it was subject to change and had little content. The activities coordinator was present during the visit but mainly delivers 1-1 support during mornings. Group activities take place during the afternoons.

## Conclusion

Overall, Healthwatch reps found the care home to be warm and welcoming and staff and residents appeared happy and relaxed. Concerns had been raised by a relative about a resident that had been left in bed and was found to be thirsty. The Registered Manager was open and transparent and shared examples of how they work and systems they use with Healthwatch. Carseld was clean and tidy, and staff were observed supporting residents to get around the home, serving drinks and meals and generally seemed to really care about all the residents. Information provided to the residents was in written format and not always accessible to all.

Healthwatch would like to thank the Manager and all the staff at Carseld for accommodating the Enter and View visit.

## Highlighting Good Practice

Healthwatch would like to highlight the following good practice observed during the visit:

- Healthwatch found the staff to be personable and knowledgeable about the residents who live there.
- Healthwatch found the Registered Manager to be open and transparent about how they work, sharing examples of their work with Healthwatch around monitoring and reporting falls, activities and staff training.

## Themes and Recommendations

The following themes and recommendations are being made based on the feedback and observations made during the visit:

### Theme: Resident Choice

#### Recommendation: The Care Home manager should

1. Consider offering a more varied activities schedule with a pictorial guide.
2. Consider further care call systems (pendants/bracelets) being put in place to allow residents to call for assistance if required.
3. Consider developing a monitoring system to ensure the good health and wellbeing of residents that may remain in bed and are unable to call for assistance.

### Theme: Communication

#### Recommendation: The Care Home manager should

4. Consider the use of picture menus alongside written text menus so residents can visually select their food choices.

Signed on behalf of Healthwatch North Lincolnshire:  L.Wilkinson	Date: 28.05.2024
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### Provider response to recommendations:

Providers have 20 working days to respond to recommendations. This can include why they may or may not take on board the recommendations.

Theme: Resident Choice   Recommendation 1	
Specific	What is the recommendation?
	The Care home manager should consider offering a more varied activities schedule.
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	Activity audit will be completed to measure the progress along with regular feedback from the service users
Achievable	Is the recommendation achievable? Do you have the skills to achieve it?

	Yes, Activity coordinator will create a weekly activity rota with different activities on a daily basis based on the interest of the service users. Activities will be short to ensure maximum participation of service users. Pictures of the activities will be developed and posted on the activity board
Relevant	Is the recommendation relevant?
	Yes
Time-bound	When will the recommendation be completed?
	4- 6 weeks

Theme: Resident Choice   Recommendation 2	
Specific	What is the recommendation?
	The Care home manager should consider further care call systems (pendants/bracelets) being put in place to allow residents to call for assistance if required.
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	Service users will be assessed to understand their requirement to have a pendant. All service users have a call bell system in their bed room which is accessible for them.
Achievable	Is the recommendation achievable? Do you have the skills to achieve it?
	Yes
Relevant	Is the recommendation relevant?
	Only for very limited service users. Call bell is in all bed rooms for service users to call for help. Staff will ensure that call bell is accessible for all service users
Time-bound	When will the recommendation be completed?
	All residents will be assessed for further call system in next 2 weeks

Theme: Resident Choice   Recommendation	
Specific	What is the recommendation?

	The care home manager should consider developing a monitoring system to ensure the good health and wellbeing of residents that may remain in bed and are unable to call for assistance.
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	All residents care would be delivered in a timely manner
Achievable	Is the recommendation achievable? Do you have the skills to achieve it?
	Yes
Relevant	Is the recommendation relevant?
	Yes
Time-bound	When will the recommendation be completed?
	Staff to monitor on a daily basis to ensure all service user have their call bell accessible for them. If they are in the room check them regularly to ensure they are comfortable

Theme: Communication   Recommendation 3	
Specific	What is the recommendation?
	Consider the use of picture menus alongside written text menus so residents can visually select their food choices.
Measurable	How can you measure progress and know if you've successfully met the recommendation?
	Service users who lacks mental capacity have more ways of deciding what they like to eat
Achievable	Is the recommendation achievable? Do you have the skills to achieve it?
	Yes
Relevant	Is the recommendation relevant?
	Yes

Time-bound	When will the recommendation be completed?
	Pictorial menu will be introduced