



Details of visit

Service address:	Knoll House, Studham Lane, Studham, Dunstable LU6 2QJ
Service Provider:	Silvertree Care Ltd
Date and Time:	10th March 2015 10:00 – 12:00
Authorised Representatives:	Dave Simpson, Linda Grant
Contact details:	Healthwatch Central Bedfordshire Capability House, Wrest Park, Silsoe, Bedfordshire, MK45 4HR Tel: 0300 303 8554

Acknowledgements

Healthwatch Central Bedfordshire (HWCB) would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View visit.

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.

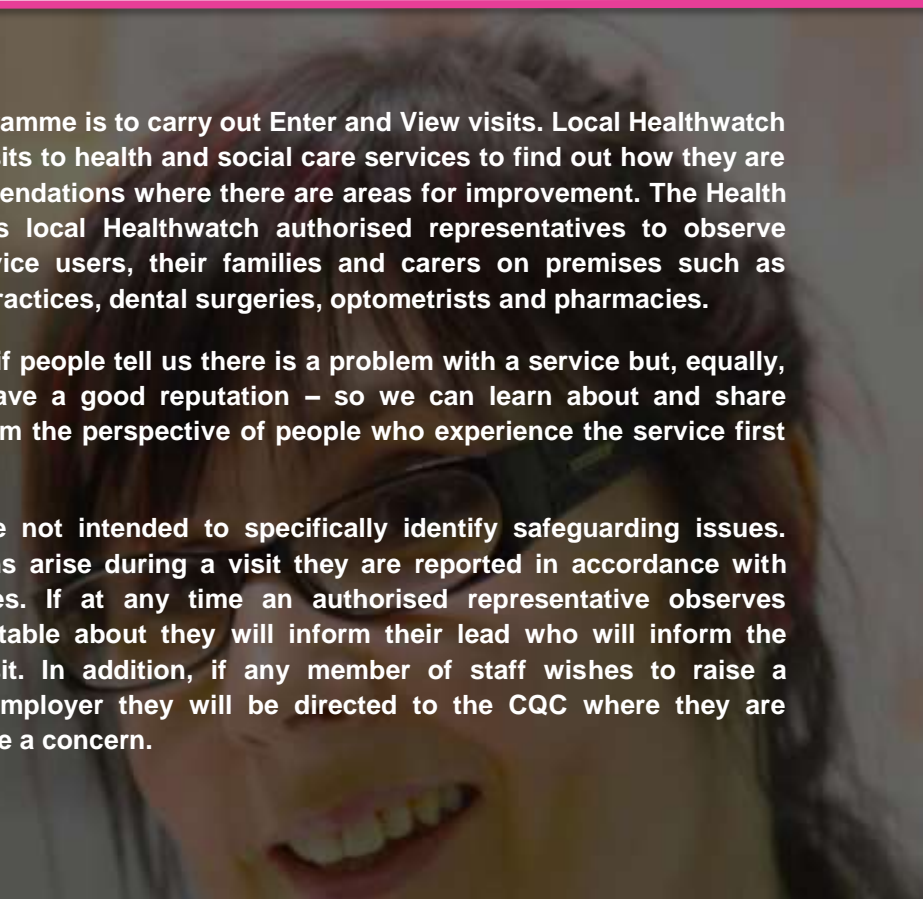


What is Enter and View?

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 managed and make recommendations where there are areas for improvement. The Health and Social Care Act 2012 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.

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 will 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 CQC where they are protected by legislation if they raise a concern.



Purpose of the visit

- To engage with service users of care homes and understand how dignity is being respected in a care home environment;
- Identify examples of good working practice;
- Observe residents and relatives engaging with the staff and their surroundings;
- Consult with residents, relatives and staff about their experiences of the environment within the home and how care is delivered.



Strategic drivers

- Care Quality Commission dignity and wellbeing strategy
- Care homes are a Local Healthwatch priority

Methodology

This was an announced Enter and View visit.

Representatives were pleased to see the Healthwatch Central Bedfordshire poster notifying residents and relatives of our visit clearly displayed within the building.

On arrival, representatives were met by the Manager and Deputy Manager, who gave us a verbal introduction regarding the home, its history, the number of beds and residents, staff etc.

Authorised representatives also approached residents at the care home to informally ask them about their experience of the home. Several family members and members of staff were also spoken to.

The authorised representatives explained to everyone spoken to why they were there and took notes.

After speaking with the residents and staff, on leaving, Healthwatch Central Bedfordshire leaflets were given to the Deputy Manager for distribution and display in the home.



Summary of findings

At the time of the visit, the evidence is that the home was operating to a very good standard of care with regard to dignity and respect.

- Residents looked tidy, clean and well cared for, representatives saw no evidence of dignity not being respected.
- Representatives saw evidence of staff interacting with residents positively and regularly, including just checking on them if they appeared to be soporific.
- Residents spoken to were generally happy with the meals, the menu was balanced and nutritious and mealtimes were suitable for the residents. Residents could also choose where to take their meals.
- Clear evidence of social activities was evident and the residents spoken to were given the option of taking part in organised activities along with their relatives.

The Manager advised representatives that the current capacity of the home is as follows:

- 22 beds, with seven currently unoccupied over two floors.
- Ten residents are mobile, five are immobile.
- Funding for residents is currently 50% funded by the Local Authority and 50% privately funded.
- The home does not currently have beds specifically for rehabilitation however empty rooms may be used for respite care.
- A total of 22 members of staff are employed; carers, including four senior carers, cooks, laundry, gardener/maintenance, and cleaners.
- Three or four carers are on duty in the morning, three in the afternoon and two at night.
- The types of residents catered for includes those with dementia and the frail elderly. All residents are over the age of 65.



Results of Visit

Environment

On entry, representatives found the environment to be clean, warm, light and airy. The atmosphere was 'neutral' in that there were no apparent smells, good or bad.

The home is contained in a former country house in a secluded woodland environment. The home has recently undergone refurbishment to a good standard.

Each bedroom includes a wash basin and a commode if required (no en-suite bedrooms). Toilets are on each floor and there are three wet rooms including a bathroom with full sized hoist and a wheelchair accessible shower.

The two communal lounge rooms were being well used at the time of the visit. The home also has a dining room with a quiet area and library. The patio garden is accessible to residents including those in wheelchairs, with seating, bird feeders, tables and flower beds which residents are able to help cultivate with additional views over the estate.

Promotion of Privacy, Dignity and Respect

All the residents seen at the time of the visit appeared to be well dressed and cared for. Representatives were advised that each resident has a key worker who also works with the family.

The bedrooms are all lockable by the residents for security and peace of mind. Residents may take their meals in their rooms if desired.

A laundry is situated in the home; each resident has their own laundry bag which is changed daily and all their clothes are labelled. All bed linen is changed weekly or as necessary.

Each resident Care Plan is kept available for residents and their family to view. 'Turning' charts, night charts, food and drink and bowel movement records, for bedbound residents, are also kept at hand. Resident's photos are displayed on the front sheet of the Care Plan, and DNR notices are also kept in the Care Plan folders

Representatives were advised that the home provides the following visiting services:

- Hairdresser – twice weekly.
- Chiropodist – six to eight weekly.
- Mobile library – monthly.
- Optician – annually.
- Audiology – as required, by L&D hospital
- Dentist – management is currently negotiating with a service.

Promotion of Independence

Residents are encouraged to bring personal possessions, photographs, pictures, ornaments and small pieces of furniture to create familiar surroundings.

All residents are offered the opportunity to be involved in social activities organised at the home, including trips outside of the home, with relatives included in the planning.

Representatives observed residents in wheelchairs being moved around the home without undue difficulty; there is sufficient space to facilitate this.

Interaction between Residents and Staff

HWCB representatives spoke with residents in the communal lounge. The residents spoken to stated they were comfortable in the home and quite happy. Residents were impressed with the activities available and the care received. Representatives witnessed a group of residents playing 'bouncing ball' with a member of staff.

One resident is of Indian nationality and representatives observed the Deputy Manager conversing with her in Punjabi.

Residents

The most important aspects of the home, according to some residents, were feeling warm, safe and secure; the friendliness of staff and other residents; the cleanliness of Knoll House and it's '*homeliness*'.

Representatives were advised that residents are all registered with the Markyate GP Practice. A GP from the practice visits twice weekly.

Potential residents are assessed, prior to entry to the home, in their own homes or hospital by the Manager, to confirm that Knoll House can meet their needs. Residents are given a copy of the Service Users Guide to the home on acceptance.

Food

The daily menu is managed on a four week cycle and appears to be comprehensive. The home has Food First certification. The menu is available to view in both written and pictorial format and the kitchen has a Five Star Hygiene rating.

Representatives witnessed residents and relatives being offered refreshments during the visit. The residents appeared content with the care they received at mealtimes and were able to choose where to take their meals; in the lounge dining area or in their rooms. The residents, representatives spoke to, all thought the standard and variety of food served was very good.

Recreational activities/Social Inclusion/Pastoral needs

The Deputy Manager organises events to involve residents and their relatives as much as possible. Communal lounges are used for the majority of activities and representatives witnessed music and singing being played.

There was no evidence of residents being forced to take part in activities; it is optional for all residents. Representatives were advised by both staff and residents that activities included trips outside of the home, cake baking, and other interests. A trip to the local village hall to see a musical production was imminent and a canal trip and summer fete are planned for later in the year. Visits to the home by local schools and their choirs are encouraged.

Representatives were advised that there are regular visits from a Church of England vicar and the home also encourages visits from other religious denominations.

Involvement in Key Decisions

Representatives were advised that meetings with residents and their relatives are held every three months. The purpose is to give both residents and their relatives the opportunity to raise any issues and/or concerns.

Concerns/Complaints Procedure

The Manager, Deputy Manager, residents, relatives and members of staff, all confirmed there is a complaints procedure, although no resident or relative spoken to mentioned having used it.

Staff

All staff seen and spoken to during the visit were friendly and helpful to the representatives and to the residents they were observed interacting with. Staff observed speaking to residents, clearly knew them well, using their first names. The staff appeared to be well trained and representatives were confident the residents were well cared for.

Representatives were advised that residents' medication is distributed by a trained senior carer at all times although this was not witnessed. Representatives were also advised that DNRs (Do Not Resuscitate) notices (if appropriate) are kept within each residents care plan, which was later visually confirmed.

There is an ongoing training matrix for staff, who are encouraged to study for NVQ levels in all relevant disciplines. All staff are DBS checked before being allowed to work with residents.

Visitors and Relatives

Representatives observed family members visiting residents in the home and spoke to several of them, all of whom spoke highly of the care afforded to their relatives.

The Healthwatch Central Bedfordshire notice was displayed in the care home advising relatives of the visit; however Healthwatch Central Bedfordshire was not contacted directly by any relative prior to or since the visit to the home.

Additional Findings

The new Manager at the home is attentive to all suggestions for improvement and has a 'suggestions box' for ideas to be posted in.

Recommendations

This report highlights the good practice that was observed and reflects the resident's and relative's satisfaction with the care and support provided.

- A few residents and relatives spoken to by HWCB representatives expressed the view that if family members had not arrived to help feed residents who required it, there could be too few staff to cope at mealtimes. HWCB therefore suggests that staffing levels at mealtimes should be reviewed as a matter of urgency and additional staff recruited as necessary.
- Healthwatch Central Bedfordshire recommends that this report is shared with the residents and family members of Knoll House, to advise that if they should wish to contribute any additional comments about the report, they should contact Healthwatch Central Bedfordshire direct on 0300 303 8554.



Service Provider response

Thank you for the report and we at Knoll House are very pleased that the residents and relatives are happy here. With regards to mealtimes, the deputy manager will be assisting at mealtimes, so residents that need assistance do not have a delay in receiving their meals. We have also recruited more staff, subject to references and DBS clearance.

Theresa Martin
Manager, Knoll House
Silver Tree Care Limited

