



Details of visit

Service address:	The Birches, 44 Hitchin Road, Shefford, SG17 5JB
Service Provider:	Central Bedfordshire Council
Date and Time:	21st April 2015 10:00 – 12:00
Authorised Representatives:	Dave Simpson, Peter Biernis
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.



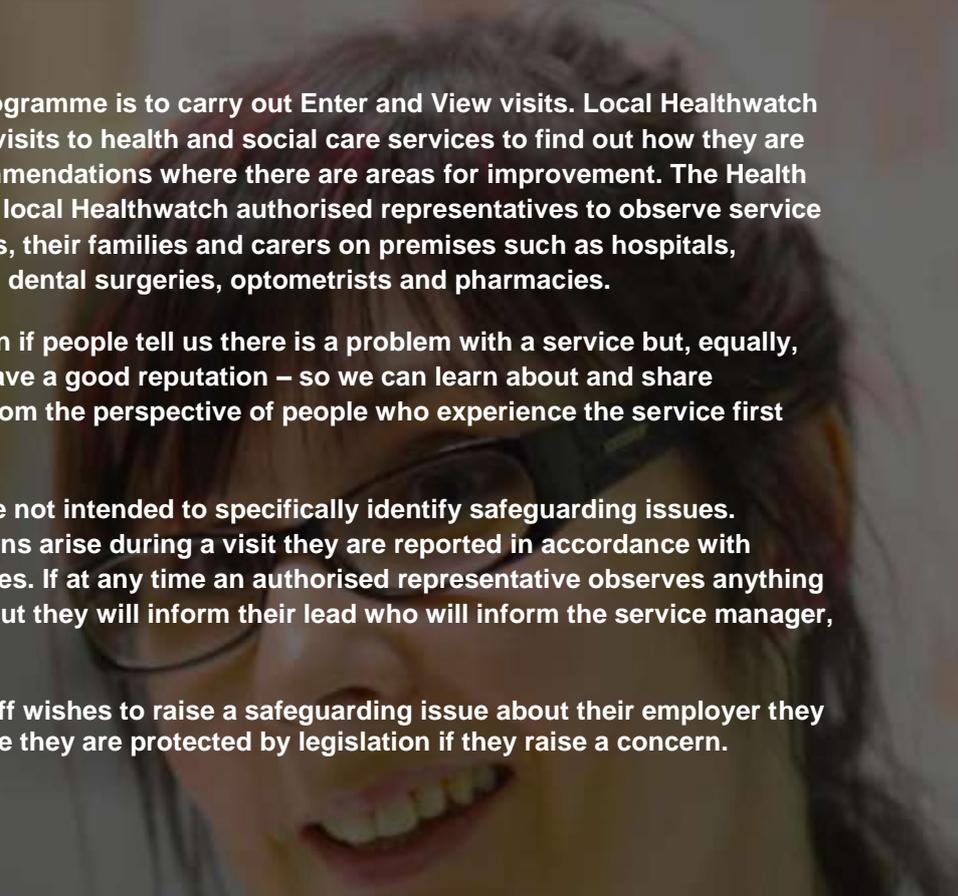
What is Enter and View?

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.

On arrival, representatives were met by the Manager, who gave 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, HWCB leaflets were given to the Manager to be displayed in the home to enable residents, family members, friends and staff to contact HWCB at any time



Summary of findings

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

- On entry, the representatives were pleased to see the Healthwatch Central Bedfordshire posters displayed within the home.
- Residents looked tidy, clean and well cared for; representatives saw no evidence of dignity not being respected.
- Residents spoken to were generally happy with the meals; the menu appeared to be 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 displayed on the activities board with photographs of visiting entertainers. 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:

- 31 beds, with five currently unoccupied.
- All rooms are single occupancy; no en-suite rooms.
- Two beds are available for respite care.
- There are no rehabilitation beds.
- Care categories of residents include those with mild memory loss, dementia and the frail elderly.
- All residents are over the age of 65 with the oldest resident currently 96 years.



Results of Visit

Environment

The Birches Residential Care Home operates over three floors of a building which was built in the mid-1980s. Access to the upper floors is by stairs or a lift.

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, and in the main reception area there are notice boards showing statutory notices, activities etc., plus a large fish tank with tropical fish. The home has a 'resident' dog which belongs to the Deputy Manager and two Guinea Pigs called Frank and Flopsy.

The home has four bathrooms and several WC's throughout the premises and a shower room on the ground floor, which is currently out of commission awaiting repair. The home also contains three lounges and a smoking room (currently one resident at the home who smokes).

A second fish tank is sited in the small seating area adjacent to the dining room which also has a view over the large garden. The garden contains a fish pond (currently in need of some attention) seating, bird tables and feeders, which is in the process of being 'spruced up' following its winter dormancy.

Promotion of Privacy, Dignity and Respect

All the residents seen at the time of the visit appeared to be well dressed and cared for. Resident names are displayed on a laminated notice on the door to each resident's room. Representatives were advised that each resident has a key worker who also works with the family and the key worker's name and photograph is displayed on the door to each resident's room.

HWCB representatives were advised that all bed linen is changed regularly or as necessary. Each residents individual Care Plan is kept in the office, available for residents and/or their family to view on request.

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

- Hairdresser – two times weekly.
- Chiropodist – six to eight weeks.
- District Nurses - as required.
- Optician – annually or as required.

Promotion of Independence

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

All residents are offered the opportunity to be involved in social activities organised at the home. The home does have access to a community minibus for organised trips outside of the home although it was not clear how frequently this was accessed. Relatives are also included in the majority of activity planning.

Residents' rooms all have 'nurse-call' points which activate beepers carried by care staff.

Interaction between Residents and Staff

HWCB representatives spoke with residents in the communal areas. The residents spoken to stated they were comfortable in the home and quite happy. The residents appeared to be pleased with the care received however some residents felt that the activities on offer were very limited.

Representatives observed staff members engaging with residents and calling them by their first names which included instigating contact and conversations with residents.

Residents

The Manager informed representatives that all potential residents are pre-assessed in hospital or at their own home prior to admission. At present, the home does not issue a 'welcome pack' for residents; work is in progress to replace the former BUPA pack.

Representatives were advised that residents are all registered with the local Shefford Health Centre GP practice and can be taken to a local dentist if needed. There is a weekly visit to the home by a GP on a Tuesday. Representatives were aware of this happening during the visit.

Representatives were advised that residents' medication is distributed by medication trained Team Leaders at all times although this was not witnessed. Representatives were also advised that DNRs (Do Not Resuscitate) notices (if appropriate) are kept within each resident's Care Plan. The Care Plans are kept in the keypad-protected Duty Office and a

separate list of DNRs is kept in the senior's office. Resident's photographs are included in the Care Plan and on the medication charts.

Representatives were advised that work is under way to produce a newsletter which will be issued quarterly for residents and relatives.

Food

The daily menu is managed on a four week seasonal cycle and appears to be comprehensive, with specialist diets, e.g., 'soft', religious, medical, diabetic etc., catered for. The menu is displayed on the tables in the dining room and on noticeboards.

All food is prepared and cooked on site in the well-equipped kitchen. Residents have at least two choices at mealtimes, and the tea trolley, with drinks, cakes, biscuits and fortified drinks makes regular rounds. The home has Food First certification and regular contact with the Food First dietician is maintained.

Representatives witnessed residents and relatives being offered refreshments during the visit and were informed by several residents that tea and biscuits are available '*at almost any time*'. The residents appeared content with the care they received at mealtimes and were able to choose where to take their meals. All the residents spoken to thought the standard and variety of food served was very good.

Recreational activities/Social Inclusion/Pastoral needs

A part-time Activities Co-ordinator organises events to involve residents and their relatives as much as possible. The communal lounge is used for the majority of activities. 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 themed nights, Bingo, crosswords, knitting, films, animal visits by 'Safari Stew' and Falconry demonstrations, cake baking, arts and crafts and singing.

There were also trips organised outside of the home using the local community Volunteer Bus, including visits to local attractions such as Woburn, Shuttleworth, Wrest Park and garden centres.

Visits to the home by local schools and their choirs are encouraged and spiritual needs are met by a monthly church service at the home. Residents are able to visit the local church should they wish.

Involvement in Key Decisions

Representatives were advised that meetings with residents only are held monthly in small groups and meetings with relatives are scheduled to be held every quarter. The main purpose is to give both residents and their relatives the opportunity to raise any issues and/or concerns.

Concerns/Complaints Procedure

The Manager, residents, relatives and members of staff all confirmed there is a complaints procedure, although no one mentioned having used it.

Staff

All staff seen and spoken to during the visit was friendly and helpful to the representatives and to the residents they were observed interacting with. All the 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.

- A total of 32 members of staff are employed, including a Deputy Manager, three Team Leaders one of whom does five hours per week as Activities Coordinator, 19 carers, two domestics, a chef, an assistant chef and one kitchen assistant, two maintenance men and one laundry lady.
- Carers are on duty as follows:
 - 07:30 – 14:30 1 Team Leader + 4 carers
 - 14:30 – 21:30 1 Team Leader + 4 carers
 - 21:30 – 07:30 3 carers

Staff training is delivered either in house or externally by Central Bedfordshire Council in the following disciplines:

- Health and Safety
- Food Hygiene
- Fire Awareness – CBC in Dunstable
- Moving and handling
- Infection Control
- Mental capacity
- Dementia awareness
- Medication
- Equality & Diversity
- Safeguarding (SOVA)
- Emergency First Aid

All staff currently employed has English as their first language.

Visitors and Relatives

Representatives observed family members visiting residents in the home. The family members, representatives spoke with, were appreciative of the care given to their relatives however several were concerned with the level of staffing and expressed the view that there could be more staff on duty at busy times.

It should be noted that HWCB representatives were advised by the Manager that a number of staff had left following BUPA's withdrawal from management of the home last year. The remaining staff had been TUPE transferred across to Central Bedfordshire Council who now owned and managed the home.

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 management of the home is attentive to any suggestions for improvement and voiced plans and ideas for the future of the home.

HWCB representatives were advised by some residents, relatives and staff members, that there are times when staffing levels are not optimum.

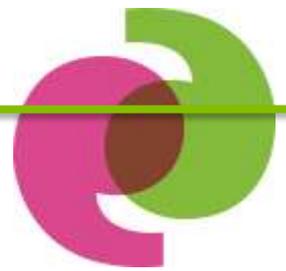
Some members of staff expressed concerns that they had not yet been issued with new employment contracts following the TUPE transfer, from the previous company managing

the home, to CBC last autumn. They were concerned over the delay in issuing the new contracts.

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.

- Healthwatch Central Bedfordshire recommends that the current issue of staffing levels be closely monitored, reviewed and adjusted as necessary.
- HWCB also recommends that the concerns of staff with regard to contracts are addressed with Central Bedfordshire Council as a matter of some urgency to ensure the continuing support and motivation of staff members.
- HWCB admires the use of volunteers to tidy and develop the garden areas and recommends this is sustained to include addressing the cleaning and improvement of the fishpond.
- Healthwatch Central Bedfordshire further recommends that this report is shared with the residents of The Birches and their family members, to advise that if they should wish to contribute any additional comments about the report, to contact Healthwatch Central Bedfordshire direct on 0300 303 8554.



Service Provider response

HWCB did not receive a response to the report from the Provider, despite a reminder requesting their response to our recommendations.

HWCB
26.06.15

