



Details of visit

Service address:	Swiss Cottage, Fairways, Plantation Road, Leighton Buzzard, LU7 3HU
Service Provider:	Roseberry Care Centres UK Ltd
Date and Time:	19th July 2017 10:00 – 15:00
Authorised Representatives:	Dave Simpson, Diana Blackmun, Dee Dillistone
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.



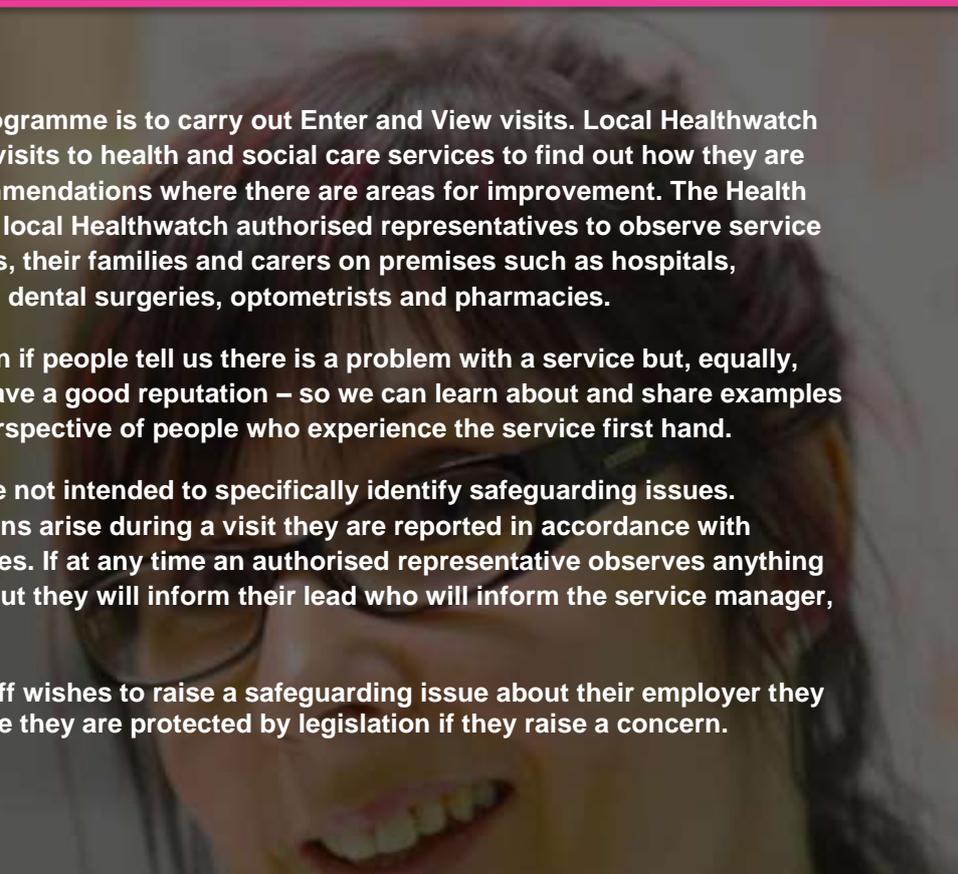
What is Enter and View?

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.

Healthwatch Central Bedfordshire's visit to Swiss Cottage Care Home was scheduled following a comprehensive CQC inspection in February 2017. The unannounced CQC inspection rated the service as 'Inadequate' in four of the five inspection categories; Safe, Effective, Responsive and Well-led, (Caring was rated as Requires Improvement). As a result the service was placed in special measures. It should also be noted that the home had not had a Registered Manager since October 2016.

The CQC carried out a further unannounced inspection in May 2017 to check the Home had followed their improvement plan and to confirm that they met legal requirements. The CQC published their report on 24th July 2017 which upgraded the service to a rating of 'requires improvement' in four of the five categories. 'Is the service responsive' remains rated as inadequate. A new Manager was appointed to the home in May 2017 who is in the process of applying to become the Registered Manager.

On arrival, HWCB representatives were met by the Manager and the Quality & Compliance Manager from the parent company, Roseberry Care Centres, 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. Some family members were available at the time of the visit and several 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, Healthwatch Central Bedfordshire (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, HWCB representatives were asked to sign in. Representatives noted the Healthwatch Central Bedfordshire poster displayed in the reception area and also in two other locations in 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 current menu appeared to be balanced and nutritious and mealtimes were suitable for the residents. Residents could also choose where to take their meals and the newly appointed Executive Chef was happy to accommodate resident's alternative choice of food if they did not find their original selection appealing.
- There was clear evidence of social activities at the home, with photographs of previous events displayed on the activities board. 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, which is divided into four units (Pines, Cedars, Oaks and Acorns), is as follows:

- 81 single rooms and one double room.
- There are currently 45 residents at the home. (The Manager explained to HWCB representatives that they have a self-imposed embargo on accepting more residents until the home is out of the CQC's 'Special Measures' status).
- One ten-bedded unit (Acorns) is currently not in use; however there are plans to re-open it as a palliative care unit.
- Pines – nursing/dementia, 12 residents.
- Pines staff on duty: daytime 3 carers, 1 nurse, night-time 2 carers, 1 nurse
- Oaks – frail elderly nursing unit, 17 residents.
- Oaks staff on duty: daytime 4 carers, 1 nurse, night-time 2 carers, 1 nurse
- Cedars – dementia/nursing, 16 residents.
- Cedars staff on duty: daytime 2 carers, 1 senior, night-time 1 carer, 1 senior
- Currently, no beds are available for respite care.
- There are no rehabilitation beds.

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, situated in four acres of woodland and gardens, operates over two floors and is divided into four units (Acorns, Pines, Oaks and Cedars), with pleasant views over the large, secure garden areas which are accessible to the residents and contain several bird feeders. Each unit has its own lounge; the lounge in 'Pines' being used as the activities lounge. All the units include dining areas and kitchenettes which relatives are encouraged to use.

Many of the corridors contain pictures, books and other items designed to act as reminiscence aids for dementia residents. HWCB representatives also noticed a simulated bus stop/shelter, cleverly designed within the home by the maintenance man, with particular attention to detail. The Manager advised representatives that some residents regularly sit on the bench in the bus shelter for '*a quiet moment or two*'. In-house 'Post boxes' were also

available for comments and suggestions which were sited throughout the home. Decorative and creative murals were displayed on several corridor walls, painted by a previous resident.

Promotion of Privacy, Dignity and Respect

All the residents seen at the time of the visit appeared to be well dressed and cared for, and representatives observed all members of staff addressing residents by their preferred names in a friendly and courteous manner.

The recently introduced 'person-centred care plan' for each resident is available for residents and/or their family to view on request. HWCB's representative was given sight of an individual care plan which clearly showed DNR instructions and the space in which annotations are recorded when any amendments to the Plan is discussed with residents and/or relatives. The Manager advised representatives that 'Person-centred care plans' are now embedded in practice at the home.

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

- Hairdresser – as required, a hairdressing salon is being refurbished on the first floor.
- Chiropodist – six weekly.
- Dentist – Residents normally go to the surgery, but a dentist will attend at the home if required.
- Optician – six monthly or as required.
- District Nurses - attend as often as required

Promotion of Independence

Residents are encouraged to bring their personal possessions, photographs, pictures, ornaments and small pieces of furniture, including televisions, and families are also encouraged to personalise the residents' rooms.

All residents are offered the opportunity to be involved in social activities organised at the home. HWCB were advised that the home has access to a minibus for organised trips out and a risk assessment is underway to enable external activities, however it was not clear how often the minibus was accessed. Relatives are also invited to become involved with the planning of activities. Two relatives have recently undergone training and DBS checks to become volunteers at the home.

Concerns/Complaints Procedure

The Manager, residents, relatives and members of staff all confirmed there is a Complaints Procedure and a Whistleblowing Policy. These are on display and 'Suggestion Boxes' are also situated in various locations around the home.

Representatives were informed (also witnessed by HWCB representatives) that the Manager conducts daily 'walk-rounds' to talk to both staff and residents/relatives to identify any issues or complaints and to gather general feedback on the operation of the home. The Quality & Compliance Manager from Head Office also conducts 'walk-rounds' during her regular twice weekly visits to the home.

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 only some of the residents spoken to said that they knew the name of their nominated carer which may be due to their medical condition.

Representatives observed staff members engaging with residents and calling them by their first names and saw residents being attended to and moved by appropriate numbers of nurses and carers.

Residents

Residents are pre-assessed before acceptance at the home to ensure that their needs can adequately be met. The Manager or Deputy, along with a nurse will generally visit the resident at their own home or at the hospital. They will identify the resident's likes and dislikes, ask for a 'Life History' and, if accepted, encourage families to personalise the residents' room. A Service User Guide is given to residents and families on admission.

Representatives were advised that residents are registered with the Leighton Road GP practice unless they choose to remain with their own GP. GP visits are scheduled for Monday and Thursday. Residents can also be taken to a local dentist if needed. Further information with regard to current residents at the home is as follows:

- Care categories of residents include those with mild memory loss, dementia and the frail elderly.
- Some nursing residents are bedbound.
- Residents' ages range from 65 to 100.
- Residents care is funded by both Bedfordshire Clinical Commissioning Group (Continuing Health Care), and by Local Authorities in Central Bedfordshire, Hertfordshire, Milton Keynes and Buckinghamshire.
- Nine residents are privately funded.

HWCB representatives were advised that residents' medication is issued by medication trained nurses and/or senior carers, who wear red 'Do Not Disturb' tabards and remain with the resident while the medication is taken, although this was not witnessed by representatives.

Comments made by Residents

'During the day I always have a female carer, at night it can be a male. I object to the man physically checking that I am wearing a pad especially when I tell them I am.'

'At mealtimes I am quite fussy, but there are always choices.'

'I feel safe here.'

'I always said I'd leave if it wasn't right. It's very hard to get it perfect for everybody.'

'The home is lovely, all staff are very nice.'

'I came here for the company. I have a TV in my room, but I'd rather sit in the lounge and have the company.'

'It's a shame there's not many men here!'

Involvement in Key Decisions

Representatives were advised that meetings with residents only are held every month. Meetings with both residents and relatives are also held regularly however these are poorly attended by relatives. The main purpose of these forums is to give both residents and their relatives the opportunity to raise any issues and/or concerns.

The Manager was conscious of the poor attendance of relatives at group meetings and was keen to ensure that relatives were aware of the 'open door' policy adopted at the home to encourage all relatives to raise any issues or concerns at any time.

Visitors and Relatives

Several family members were visiting residents at the home during the visit, and HWCB representatives spoke directly with them.

HWCB representatives joined residents and relatives in the dining area for lunch and engaged in discussions concerning the food and the care provided at the home. One relative advised representatives that *'there is no apparent record of when his mother's hearing aid batteries are changed and they only appear to last two weeks. Her spectacles have gone missing as have some of her clothes and blankets'*. HWCB fed this back to the home

Manager who said she would investigate. Other relatives expressed their satisfaction with the home, stating they were '*very pleased with the choice of home*' for their relative.

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.

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. All the staff, observed speaking to residents, clearly knew them well, calling them by their preferred 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 medication trained staff 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. Care plans are kept in the nurse's stations.

- Members of staff employed include: nurses, carers, a clinical lead, activities coordinators, an executive chef (appointed two months prior to the visit), kitchen staff, administrators, cleaners, maintenance and laundry staff.
- One member of staff is a qualified trainer and is also the Infection Control Lead.
- The recently appointed Executive Chef has completely overhauled the menu, with special emphasis being on the provision of properly fortified foods and drinks.

Staff training is monitored by Roseberry Care Centres and further in-house training is carried out to NVQ levels. Training includes the following:

- Induction Training for all staff.
- Fire Safety and Fire Drills.
- Food Hygiene.
- Nutrition.
- Moving and handling.
- COSHH.
- Health & Safety.
- Infection Control.
- First Aid.
- Abuse, POVA
- Safe Use of Bedrails.
- Pressure Care.
- Dementia Care.
- End of Life Care.
- Challenging Behaviour.
- Mental capacity/Adult incapacity.
- Deprivation of Liberty (DOLS)
- Safe handling of Medication.
- Care Planning.

The new Care Home Manager recognised that many of the staff had not previously received appropriate training and she was currently working closely with the Care Home owners, the Local Authority and the Care Quality Commission on a robust training programme which includes Dementia Awareness and DOLS training for all staff, to ensure that staff can meet the complex and changing needs of service users. A training matrix has been developed and each member of staff is allocated a training file.

The majority of staff have been at the home for long periods, and the impression given to representatives is that they are happy and fully engaged with the new management team's ethos of improving the quality of care at Swiss Cottage.

One team leader spoken to, when asked how she ensures residents are treated with dignity and respect, stated, *'I treat all residents in the way I would treat my own grandmother; if she wouldn't like it, I don't do it!'*

Other staff comments included:

'This is the best home I have worked in, it is improving all the time and we feel very upset about the bad newspaper reports and feel they are unjustified.'

'I believe we're moving in the right direction, with more training and systems in place.'

'Things have improved in the home since the new manager was appointed. I have started new training – NVQ2 which I have wanted to do for a long time. I really like working here.'

Food

The daily menu is managed on a three-week cycle and appears to be comprehensive, with specialist diets, (religious, medical, diabetic etc.) catered for. Fortified meals and drinks are always available with menu choices at all mealtimes. All food is prepared and cooked on site in the well-equipped kitchen. The kitchen staff personally serves the food to the residents in the dining rooms to enable staff to deal directly with subsequent issues relating to menu selection and food choices.

Representatives witnessed residents and relatives being offered refreshments during the visit and were informed that the 'tea trolley' goes round at 11:00 am and 3:00 pm; the supper trolley at 8 pm. Lunch is served at 12:30 and Tea is at 5:00 pm. Visitors are encouraged to join their relatives at mealtimes.

Representatives were also given the opportunity to eat lunch with the residents. A choice of meal was offered and the meal served was well presented and of good quality. During lunch one of the residents at the table, sitting with the HWCB representative, decided she did not like the meal she had ordered and staff immediately had a discussion with her and brought her an alternative selection.

Staff encourage all residents, including those with physical disabilities and challenging behaviours, to join other residents and relatives in the dining area to eat their meals. HWCB representatives witnessed staff supporting residents who are less able to manage independently, to eat their meals. All staff were very attentive and caring, however one resident found the behaviour of another resident disruptive, she stated that *'she can be very loud and annoying; she puts me off finishing my food'*.

The residents appeared content with the care they received at mealtimes and were able to choose where to take their meals. The majority of residents and relatives spoken to thought the standard and variety of food served was very good.

Recreational activities/Social Inclusion/Pastoral needs

The home had previously employed three part-time Activities Co-ordinators to organise events to involve residents and their relatives as much as possible. However, one had since left and two were currently on long term sick leave at the time of the visit. The home has recently engaged a full-time Activities Coordinator who started in the week of HWCB's visit. Unfortunately representatives were not able to meet with her as she was undergoing Induction Training.

During discussions with the Manager, she acknowledged that the activities programme was inadequate, which was echoed by several staff members spoken to, however HWCB was reassured that steps will and are being taken to improve this.

Activities, many of which take place in 'The Pines' lounge, are currently organised on weekdays, however the home is looking to extend this to include alternate Saturdays. The home has acquired a minibus, which will be utilised for various trips, including shopping trips on alternate Wednesdays. A Risk Assessment is currently in preparation.

Representatives were advised by both staff and residents that activities include cake baking, painting, sing-alongs, table top games, Bingo, flower arranging, various entertainers and musical sessions. There is a small cinema complete with a Popcorn machine for film nights.

Trips outside of the home are undertaken when possible, including visits to the pub, local Safari Park, Garden Centres and Nurseries, although it was not clear how often these took place.

Visits to the home by local schools and their choirs are encouraged; a local primary school will be coming in at Christmas to sing for the residents. A sixth-form student from Van Dyke School previously undertook a week's work experience at the home, helping with tea making and distribution and chatting with residents. The Manager is keen to expand the work experience programme. Local schoolchildren also help residents tend the raised flower beds in the garden areas. Relatives are encouraged to bring pets in when visiting.

There are also other local volunteers and a 'Friends of Swiss Cottage' group is being initiated. A Newsletter is currently being developed to keep residents and relatives updated on a regular basis regarding activities, progress and development at the home.

Residents' spiritual needs are met by visits from Father John the Roman Catholic priest. Residents are able to visit the local church should they wish.

Additional Findings

The management of the home is attentive to any suggestions for improvement and voiced creative plans and ideas for the future of the home. There is also an 'open door' policy in which relatives and visitors are encouraged to talk to the Manager, or a member of her team, at any time to give feedback on the quality of care or raise any issues or concerns.

The Manager has instigated 'cross-discipline working' where appropriate, encouraging all members of staff to become involved; interacting and engaging with residents and supporting each other regardless of their job title. To enhance this positive ethos, a large 'Shout-Out' notice board is situated in the communal staffroom where all members of staff are encouraged to use post-it notes recognising and praising good practice and achievements by other staff members. This both encourages and promotes full engagement by all staff.

HWCB representatives noted that the 'Shout Out' notice board was almost completely covered with post-it notes. From the comments given on the notice board, a 'Staff Member of the Month' will be identified and recognised. Relatives and visitors are also encouraged to post their comments about the staff in the various post boxes throughout the home to ensure a 360° approach.

Recently the home used Skype to facilitate a consultation between a resident and a consultant professor in Huntingdon. HWCB recognises and supports the innovative use of this technology as best practice which saves time and travel for the consultant and, more importantly, the resident.

The Quality & Compliance Manager from Head Office advised representatives that she visits homes which have received a poor CQC report or are placed into 'Special Measures'. The Manager has been visiting Swiss Cottage twice per week since February 2017 in order to

'get the home back on track.' The Regional & Operations Manager also visits the home once a month.

The Quality & Compliance Manager advised HWCB representatives that she has been very well supported to progress the homes improvement plans by the Local Authority who have requested that her visits continue.

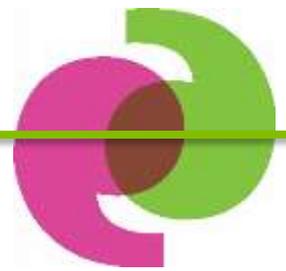
The Quality & Compliance Manager's initial impression of the home was that a great deal of *'instability existed amongst the staff who were working in silos.'* This has now been addressed and the ethos is to engage all staff, including domestic staff, in all the homes activities. The Manager confirmed that *'It is everybody's job to talk to residents and to help do each other's job,'* and also stated that *'One of the main improvements is the attitude of staff which is now more person-centred. We want staff to think more about the individuals they care for, even outside of work. We want to instil a **whole team** approach with staff.'*



Recommendations

This report highlights the good practice that was observed at the home along with the ongoing effects of the improvement programme recently instigated, and it reflects the resident's and relatives general satisfaction with the quality of care and support provided. HWCB would recommend the following:

- Residents and some members of staff spoken to felt that activities should be increased for the benefit of residents and HWCB representatives were informed by the Manager that a full-time Activity Coordinator has now been recruited. HWCB would therefore recommend that the Activity Co-ordinator is fully supported to develop a suitable engagement programme that provides stimulation for the residents and engagement opportunities for the relatives.
- HWCB further recommends that a programme of external outings and activities utilising the minibus is implemented as soon as possible.
- Wi-Fi and Skype are not fully available in the home at present and HWCB would recommend that Swiss Cottage investigates ways to improve access for residents to use these services.
- HWCB recognises that improvements have been achieved across various areas at the home and would recommend that the programme of improvement continues to enhance the wellbeing of residents and the morale and dedication of staff.
- Healthwatch Central Bedfordshire recommends that this report is shared with the residents of Swiss Cottage, their family members and staff, and 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

Recommendations;

The activities full time staff member is now in place, group activities are taking place twice daily and 1:1 activities are being given outside of these sessions.

The new activities coordinator is spending time taking residents out in the grounds or doing sessions of their choice in their own rooms and getting to know individuals likes and dislikes as well as needs and abilities so risks and matching of residents for community activities of personal interest can start.

We had the summer fete where relative and friends attended for the afternoon and plans for other activities engaging them are underway.

Wi-Fi - the Company is currently implementing a program of installing this in all our homes - this should be completed in next 3months

Kind Regards

Lisa Galloway

Home Manager
Swiss Cottage Care Home
Plantation Road
Leighton Buzzard
LU73HU
Tel: 01525 377922
Fax: 01525 381326

