# Healthwatch Doncaster Enter and View Adeline House Care Home

30 August 2018

# **Contents**

1		Introduction4
	1.1	Details of visit
	1.2	Acknowledgements
	1.3	Disclaimer
2		What is Enter and View?5
	2.1	Purpose of Visit5
	2.2	Strategic drivers 5
	2.3	Methodology 5
	2.4	Summary of findings6
	2.5	Results of visit6
	2.6	Recommendations
	2.8	Service provider response

# 1 Introduction

### 1.1 Details of visit

Details of visit:			
Service Address	Adeline House Care Home		
	Queen Street		
	Thorne		
	Doncaster		
	DN8 5AQ		
Service Provider	Every Sensation Care Limited		
Date and Time	Thursday 30 <sup>th</sup> August 2018		
Authorised Representatives	Sandra Hodson, Sharon Faulkner,		
	Kathleen Bowes, John Burke		
Contact details	Healthwatch Doncaster		
	3 Cavendish Court		
	South Parade		
	Doncaster		
	DN1 2DJ		

# 1.2 Acknowledgements

Healthwatch Doncaster would like to thank the service provider, residents, visitors and staff of Adeline House 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 residents and staff, only an account of what was observed and contributed at the time.



# 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 be undertaken if people tell us there is an issue 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.

## 2.1 Purpose of Visit

Healthwatch Doncaster is undertaking a series of Enter and View visits in local care homes to build a picture of the quality and range of care provision in Doncaster from a resident's perspective.

# 2.2 Strategic drivers

Healthwatch Doncaster are undertaking visits to local care homes as part of a wider piece of work to look at the quality of care provision in Doncaster.

# 2.3 Methodology

- The Healthwatch Doncaster Enter and View Planning Group met to discuss the methodology for the visit. A checklist was devised outlining key observation areas (outlined in results of visits).
- The group decided who would undertake the visit and as it was our first
  official Enter and View visit it was decided that the 4 eligible members of
  the group attend, as it was felt that this would help us to evaluate our
  approach more effectively post visit. As the home is relatively compact it
  was agreed that the group would split into 2 pairs so as not to overwhelm
  the residents.

- During the visit one pair spent time in the lounge area joining in with
  activities and observing the interaction between the residents and residents
  and staff, talking to residents and staff and speaking to a visitor. The
  second pair covered the rest of the home. The whole group were shown
  around the newly opened Huntingdon's Unit. A member of the team sat in
  the dining room at lunchtime, for a period of around 15 minutes observing.
- Observation sheets were used throughout the visit and collected by the Lead Representative at the end of the visit. The Lead Representative pulled together the findings from all the sheets and created a summary sheet for discussion at the report meeting.
- A meeting was held for all Authorised Representatives involved in the visit
  the day after the visit. The findings were discussed and an agreement
  reached around items for inclusion in the report. Recommendations were
  also discussed and agreed.
- Before terminating the visit, we spoke with the Administrator and one of the Directors as the home Manager was on annual leave.

# 2.4 Summary of findings

- The Authorised Representatives felt that the home had a very good atmosphere generally.
- The interactions between staff and residents/visitors were very positive.
- The environment was clean and tidy.

### 2.5 Results of visit

The home currently has 19 residents consisting of 6 nursing and 13 residential, 2 of whom are on respite. The home now has a separate 6 bed Huntingdon's Unit, recently opened, currently unoccupied but developed in response to local need.

The findings of the visit are summarised below:

### **Environment**

- There are 2 lounges, one of which is a quiet lounge, a dining room, a small café area, 2 outside spaces with garden furniture and a small seating area immediately inside the entrance of the home.
- The home is well decorated and clean.
- As rooms become vacant they have been re-decorated.
- Fire Safety An evacuation procedure is displayed in the foyer with actions for visitors. Fire zones are clearly identified. Fire exits are easily identifiable.
- There is a tablet on display in reception area with the time, time of day (for example morning), day and weather.
- There were room temperature thermometers located around the home.
- Hand gel stations are situated around the home.



- The Dementia signage is good on all main rooms and on all rooms in the new wing. Secondary signage in the original part of the building is being replaced on a rolling programme. On the whole the Dementia signage is good.
- Notice boards were up to date and safeguarding posters were displayed around the home. One noticeboard was displaying the newly re-instated newsletter.
- Residents can bring in their own furniture (as long as it complies with fire safety regulations) and own electrical items (providing they are PAT tested).

### Promotion of Privacy, Dignity and Respect

- We noticed that some of the bedroom doors were left open, even when residents were sleeping. On enquiring we were told that this is as a result of the residents expressing a preference for this. Some residents did prefer the door to be closed and this was observed. It was also observed that when the maintenance man came round to inform residents that there was going to be a fire drill and their doors would close automatically he reassured them that they would be opened afterwards for their peace of mind.
- We observed that a resident who used a wheelchair was included in and enabled to participate in the bowls activity.
- Another resident was sensitively moved into a chair.

### Promotion of Independence

- A resident told us that they were bringing in a rise and recline chair from home to better enable them to be independent.
- Residents were encouraged to be mobile.

### Interaction between residents and staff

- The interactions between residents and staff that we witnessed were very good.
- The Activities Co-ordinator (Lauren) interacting with residents in the lounge made for a very happy atmosphere.
- Residents in the lounge interacting with each other and all know each other by name. Residents also address staff by their names.

### Residents

### Residents told us that:

- "The staff are very helpful"
- "There is a good choice of food and staff are very good if you don't like what is on offer"
- The staff are very good, they do things that I wouldn't like to do and they don't get paid enough"

- Gentleman on respite waiting to get a full time place at the home told us "My wife passed away here when it was the previous owners and the place
  was awful but it is now much improved. The staff are great and good at
  giving out medicine. If you can find me a better home to go into I will go
  but you would be hard pressed. It is spotlessly clean"
- "The food is great, excellent cook"
- All residents looked clean and well dressed.
- A resident on respite was very happy, food and staff good, no complaints.
- A lady who enjoyed crafting before moving into the home would like to do more.
- One resident has been at the home for 3 months and really enjoys the company.
- A resident of the home has her husband visit every day and he is made very welcome by the staff and other residents.
- One resident told us that if they had still been living alone in their own home they would not now be alive. This is because they suffered a minor heart attack which was picked up by the staff in the home and they received prompt medical attention. If they had been at home they would not have recognised the seriousness and not sought medical attention.

### Food

- Drinks in lidded containers with stickers on indicating the day were situated in both lounges.
- Residents told us there is a good choice of food.
- The menu is on a 4 week cycle. The breakfasts are the same weeks 1-4 with a choice of main meal at lunchtime and a light meal in the evening.
- Residents can take their meals wherever they wish for example in the lounge, dining room or in their own rooms.
- Mealtimes are protected.
- There is a coffee lounge with a mixture of drinks available and milk in the fridge. No water source.
- Menus are displayed and put in residents' rooms
- "Good food, great cook"

### Recreational Activities, Social Inclusion and Pastoral Needs

- We observed a game of bowls and throw and catch in the lounge and a couple of residents were playing connect 4, music was playing in the background, 8 residents were present at the time of the observation.
- Lauren (1 of 3 Activity Co-ordinators) works alternate days. She told us that each resident has a journal with a record of activities, we saw evidence of this. A co-ordinator also has a chat monthly with each resident to assess their activity needs.
- The activity taking place in the lounge was fully inclusive.
- Quiz, word search and dot-to-dot sheets were readily available.



- The quiet lounge had stores of craft materials, dressing up, books and jigsaws.
- There were photographs on display showing residents attending the Thorne 1940's event and a Christmas celebration, both were quite some time ago.
- The lounge inside the front door has a CD player and a large selection of CDs.
- There is a notice board tracking "pen pals" of the home.
- The activities notice board was displaying information on the following activities:
- Trips to The Deep in Hull, Tropical World in Leeds
- A cheese and wine evening
- Pampering, Hairdresser
- A pub lunch
- DVDs
- Crafts
- Chair aerobics
- One-to-ones
- Bingo
- Dominoes
- Food tasting
- Baking
- Family gathering
- Buffet
- Gardening
- McMillan Coffee Morning
- There was also an evening of clairvoyance planned
- As not all residents were accessing trips to the theatre it has been arranged that pantomimes and shows are now delivered in house to enable all residents to participate.

### Involvement in key decisions

Residents are allowed to choose the décor for their rooms.

### **Concerns and Complaint Procedure**

The complaints procedure is clearly displayed on the wall.

### Staff

- The staff were all very pleasant, friendly and polite.
- The Activity Co-ordinator was interacting well with the residents in the lounge.
- The Manager was on annual leave (we were aware of this prior to the visit).
   The Deputy Manager post is currently being advertised.
- The staff were friendly and engaging with residents and address residents by their names.

### **Visitors and Relatives**

There was one visitor in the home at the time of our visit, a gentleman who visits his wife daily. He was joining in the activity and feels very at home and welcome. He feels reassured that his wife is safe, happy and well looked after, which is a weight off his mind.

### Additional

The new revenue source (Huntingdon's Unit) shows initiative in identifying a gap and seeking to address it.

### 2.6 Recommendations

Overall we were very impressed with the outcomes of the visit. There are a few suggestions for minor changes that we feel we could further enhance the experience for residents:

- That the home's newsletter be provided in a larger print version for those residents that require it. This would enable them to read it when they wish to rather than having to wait for assistance.
- The Dementia friendly tablet in reception could be relocated to the lounges for the benefit of the residents.
- The home should consider replacing toilet seats with a coloured ones. As this would be Dementia friendly and facilitate dignity and independence. All toilets in the newly refurbished section do already have these.

# 2.7 Service provider response

Teresa and the team very much enjoyed welcoming Healthwatch into the home to observe the good quality care we provide to our residents. The positive feedback obtained from residents and visitors is so lovely to hear and demonstrates the good work our team of loyal staff do each and every day!

As stated in the report areas of the home have been refurbished to a very high standard with all other areas highlighted on our decoration programme. We have worked very hard to ensure the environment is safe and comfortable for our residents with a homely atmosphere and it is lovely to have this recognised.

The newsletter is now displayed in larger font. The home will consider the purchase of more dementia friendly tablet clock for the communal areas and the purchase of coloured toilet seats has already been identified as part of the decoration programme.

