



Enter and View Report

The Old Library Care Home
Wednesday August 14th 2019

healthwatch

North East Lincolnshire

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Report Details

Address	The Old Library Residential Home ltd Isaacs Hill Cleethorpes North East Lincolnshire DN35 8JR
Service Provider	Dignity In care
Date of Visit	14.8.19
Type of Visit	Announced / Unannounced (See methodology on page 5)
Representatives	Karen Meadows, Diane Tasker

Acknowledgements

Healthwatch North East Lincolnshire would like to thank the service provider, residents, visitors and staff for their contribution to the Enter & View Programme.

Disclaimer

Please note that this report related to findings observed on the date listed above. Our report relates to this specific visit to this service and is not representative of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

This report is written by the Volunteer Officer for Healthwatch North East Lincolnshire using the information gathered by the Enter and View Authorised Representatives named above who carried out the visit on behalf of Healthwatch North East Lincolnshire.

What is Enter and View?

Part of the local Healthwatch Programme is to carry out Enter and View visits.

Enter and View visits are conducted by a small team of staff and trained volunteers, who are prepared as “Authorised Representatives” to conduct visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement.

Enter and View is an opportunity for Healthwatch North East Lincolnshire to:

- Enter publicly funded health and social care premises to see and hear consumer experiences about the service
- Observe how the service is delivered, often by using a themed approach
- Collect the views of service users (patients and residents) at the point of service delivery
- Collect the views of carers and relatives
- Observe the nature and quality of services
- Collect evidence-based feedback
- Report to providers, the Care Quality Commission (CQC), Local Authorities, Commissioners, Healthwatch England and other relevant partners

Enter and View visits are carried out as “announced visits,” where arrangements are made between the Healthwatch team and the service provider, or if certain circumstances dictate as “unannounced visits.”

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 services first-hand.

Purpose of the Visit

- To engage with service users of the named service and understand how dignity is being respected in the care home environment
- To observe the care provided at this home, looking at a number of key themes; Environment, Food & Drink, Safeguarding, Staffing and Personal Care
- To observe residents and relatives engaging with the staff and their surroundings
- Capture the experience of residents and relatives and any ideas they may have for change

Methodology

This visit was an unannounced Enter & View visit.

An unannounced visit is when the care home is aware that we will be conducting an Enter & View in the near future but the establishment are not aware of the exact date the Enter & View Team will be visiting. A letter will be sent to inform the establishment of the pending visit, along with a Manager's questionnaire.

Our Previous Visit

The Old Library was previously visited by Healthwatch North East Lincolnshire in September 2014. At this time Healthwatch NEL advised the following recommendations:

- Improvements to be made to the corridors in order to raise standards for residents living with Dementia.
- Alterations to the garden to aid Independence and Security

The Healthwatch team found that the planned improvements to the corridors to aid those residents living with dementia was still outstanding, although access to the gardens were found to be secure and accessible on this visit.

Details of Visit

The Old Library is a residential care home, situated in a residential area that provides care for older adults, including those living with dementia. The home was previously utilised as a Library. The property has been extensively extended with residential accommodation situated over three floors, accessed by stairs and a lift. The home accommodates up to 30 residents in single occupancy rooms, some of which have ensuite. At the time of our visit there were 23 residents currently residing in the home. We did not receive the manager's questionnaire prior to our visit.

Environment

The Enter & View Team were greeted in a small narrow Hallway area via an entry control system. This was utilised as a reception area, with hand sanitizer (and a notice to use this), and a sign in book which the Enter & View Team were asked to sign in on their arrival. The homes CQC rating was displayed in a certificate frame on the wall alongside other policy and procedure notices, including a dignity board, and a staff identification board. The Healthwatch team felt, in line with recent CQC guidelines, this needed to be more prominently displayed.

Communal Areas

Leading off from the Hallway were a series of corridors that provided access to the communal areas and downstairs resident's rooms. These were all neutrally decorated and had hand rails. The layout of the corridors throughout is restricted by the architectural design of the home and we had to 'give way' on several occasions, but it was felt that space was utilised as much as practicably possible. There was bold, clear signage throughout, indicating the communal areas and bathrooms/toilets etc. The corridors were mostly a mix of carpet and vinyl, and whilst appearing clean it was noted that they were quite 'sticky' in places, particularly outside the downstairs lift area and on the wooden flooring in the dining area.

Hand sanitizers were frequently and appropriately situated along the corridors to aid infection control. The downstairs corridor has been creatively decorated in a mock 20th century reminiscence street scene style, using local street name signs and shop display fronts mimicking some local old time stores. These proved very popular and were used to initiate nostalgic conversation amongst the residents. The street scene also included the lift door being disguised as an old style telephone box, and whilst this looked in keeping with the theme, we felt that this may prove confusing for those residents living with dementia. There was a pressure mat to the foot of the stairs that alerted staff when someone had descended the staircase, as this was close to the front door.

The upstairs corridors were all neutrally decorated and some effort had been made to decorate the upstairs corridors with coloured prints, however the Healthwatch team felt that these could perhaps be in more of a reminiscence style in keeping with the downstairs décor.

The Old Library has two communal lounges. The main lounge was large, and bright with modern décor and high ceilings. The room was divided into two areas, with a dining area at one end and the seating area at the other. The Healthwatch Team did detect a malodour in this area and there did not appear to be any air sanitisers in situ.

At the time of our visit, this part of the lounge was occupied by a number of residents who were taking part in a reminiscence session with the home's Activities Coordinator. The high back chairs were arranged around the perimeter of the room. The Healthwatch Team noticed that a couple of the residents were slumped really low in their seats, which possibly restricted their ability to see and hear the activity and appeared to them to be quite uncomfortable. The team felt that staff could maybe have offered some supported cushioning for these residents so that they could be made more comfortable and feel more able to join in the

activity. The lounge housed a TV and water cooler and residents each had access to an over chair table.

The other half of this room was designated as a dining area and was set out in a canteen style with square wooden tables and chairs. This area was clean and tidy and had vinyl flooring. At the time of our visit, some of the residents and family members were utilising this area. There were no menus set out on the tables but we were informed that they had previously tried setting these out at meal times but this was unsuccessful.

Similarly, we were told that they tried using pictures of the food for those residents living with dementia but a lot of these residents would simply chose the food once they had physically seen it bought out from the kitchen instead. In view of this the cook always makes extras so that there is always a last minute choice available.

An additional smaller lounge area was designated as a quiet lounge and seemed to be particularly popular with a small group of residents. This lounge was bright and airy with comfortable high back armchairs, modern decor and a large TV. This also had an outside aspect onto a busy street which the residents stated helps them “*See what’s going on*” and enables them to feel more “*in touch*” with the community.

The outside area at The Old Library was of a reasonable size and was beautifully maintained with flower beds and outside seating areas, both to the front of the building and to the side. This space is fully secured and enclosed by adjacent walls and a high metal wrought iron fence. The space enabled the residents to feel connected to bustling seaside resort and commented that they had a good view of some local events, including the football crowds. We were informed that the home does employ a gardener and the residents also get involved in some of the gardening activities.

Residents Rooms

Resident’s rooms were situated off the main corridors on the first and second floors. External room doors displayed a room number but had not been colour coded nor had they adopted any other identification aid (e.g. photograph, memory box) to aid navigation for those residents living with dementia. The Healthwatch team feel that this could be considered in line with dementia friendly guidelines.

The team only had opportunity to observe one residents room (with their consent) and this was found to be bright and airy with modern décor. Residents are encouraged to personalise their own living space and all rooms had water/juice jugs available.

When a room is vacated, the empty room undergoes a programme of refurbishment and redecoration, and at the time of our visit we observed a recently vacated room being redecorated. There are three rooms with ensuite facilities, some only having a toilet and sink and others with a shower unit. All bathroom and toilet facilities were clean and well maintained, with appropriate safety and lifting equipment and raised toilet seats. The Enter & View team felt that the bathing and ensuite facilities could benefit from some additional décor so that they do not appear quite as 'clinical'.

Each room has a mobile call bell system and pressure mats where necessary.

Other Facilities

The Old Library has its own small designated laundry operated by designated laundry staff. We were told that this is due to be extended shortly as part of a programme of refurbishment. There is a designated Medication Cupboard which was locked and a large activities/storage cupboard where craft supplies, puzzles, games etc. are kept alongside storage for the mobile hairdresser. There is a small space that is utilised as a hairdressing area, with a hairdresser visiting once a week.

Food and Drink

The Old Library has two meal settings, the first being for those residents with supported feeding needs. The main meal is served at midday, however, residents can have a choice of an alternative meal and can request snacks at any time of the day. Residents are asked for their food choices in advance of meal times.

All food is prepared on the premises in an onsite kitchen. The Healthwatch Team were not shown the kitchen due to hygiene reasons.

Residents commented that *“there is a lovely choice of food”* and *“lots of choice”*. Residents have access to hot drinks and snacks and each resident has their own drinking bottle that they can carry around with them, as well as having access to juice in their rooms and communal areas.

Some of the residents told us that they also enjoyed having a take away once a month and they could choose from a range of local take out establishments.

Recreational Activities

The Old Library employs an Activities Coordinator who we were told promotes a varied range of activities. We were told that the Activity Coordinator has a full programme of activities that include visits from outside entertainers, storytelling, quizzes and reminiscence activities.

At the time of our visit the Activity Coordinator was leading a reminiscence type activity in the main lounge which some of the residents were engaging well with.

Board games, jigsaws and crafts are also available for the residents but we were told that they have to ask for these to be brought from the activity cupboard. The team felt that these should be more readily available in the communal areas so the residents can access these freely.

The Residents are also offered activities within the community such as trips to garden centres and local restaurants and shops. Access to the seafront is a very short distance from the home. External activities are facilitated via residents meetings and group discussions. At the time of our visit there was an advertisement for a 'Dress party' at the home and one of the residents we spoke to was particularly looking forward to this.

The team also observed that there did not appear to be any photographic displays of residents taking part in the activities provided that could perhaps evidence and reinforce enrichment activities. Similarly, there did not appear to be any board or schedule displayed that showed the activities on offer for that week in pictorial form, so the team were unable to ascertain whether or not activities were specifically targeted to a care based environment and/or individual needs. The team were informed, however, that the Activity Coordinator will often ask the residents on the day as to what they want to do, so we appreciate that a formalised schedule may not always be appropriate but would be useful for residents and relatives to know what activities were on offer each day and to stimulate interest in and participation in the activities.

Residents

During the visit the Enter & View Team were able to speak to a few of the residents although many of the residents were engaged in a communal activity at the time of our visit. The consensus of opinion from those spoken to was all very positive. These residents stated that they were able to get up and go to bed when they pleased, and have access to drinks and snacks when they requested. One resident told us that she was feeling down recently and she was asked by staff what she needed to cheer her up, she replied that a 'nice fillet steak' would do the trick and several days later this was prepared for her as a treat.

This resident thought that this was a wonderful gesture and couldn't praise the staff highly enough. All Residents appeared clean, well dressed and contented. Comments received from the Residents included, *"I am treated like royalty"*, *"I don't think I could get anywhere better than this"*, *"I felt at home straight away"*, *"the girls have banter with us"*, *"the staff really listen"*, and *"if I ring my bell staff come very quickly"*.

Relatives and Friends

The Enter and View Team were able to speak to one visiting relative at the time of their visit. They stated that they were extremely happy with the care their relative received and didn't have any worries at all. They said that they had never had any cause for concern but would feel confident raising any matters with management if there had been. She felt that her relative was happy at the home and she was able to visit as often as she pleased.

Relative and friends Questionnaires were left prior to the visit and during the visit. The responses received via these questionnaires have been very positive and all compliment the home on its cleanliness, location and friendliness of staff.

Comments included *“Staff always go above and beyond in all they do”, “a homely, safe environment with amazing staff, I have found care home gold for my mum”, “end of life care is done with dignity, respect and care”, “second to none care”, “Family are treated with absolute dignity”, “the rooms are spotless” and “we simply love visiting Nana every day and enjoy interacting with the superb staff”.*

Staff

The Old Library currently employs 14 full time and 8 part time members of staff. We were informed that occurrence of staff absences are low and any staff absences are monitored. Staff members are said to be flexible and step in to cover any absences, negating the need to use agency staff and thus maintaining good relationships with the residents.

The Enter & View Team were unable to speak one to one with any members of staff during their visit as they were all busy tending to resident's needs. Several staff questionnaires were completed and returned by staff. Again, these responses were positive with all staff that responded feeling that they were adequately trained and supported in their roles.

The majority of staff stated that the most enjoyable part of their role was caring for and interacting with the residents. *“You feel as though you are making a difference to their lives” and “I enjoy spending time with the residents and helping them with their needs”.* Other comments included, *“The Old Library is the best place to work. Staff are caring and understanding and very supportive”, “it's a hardworking, family environment and we all work together to provide an inclusive home to live” and “It's a home from home”.*

During their visit the Enter & View Team observed that staff that were cheerful and friendly and their interactions with residents were observed to be positive, empathetic and responsive.

Whilst the Manager of the Home was not present on our visit, we were escorted by a senior member of staff who we found to be approachable and knowledgeable. As the visit proceeded, she interacted with both residents and staff in a very natural and accessible manner. We observed that she was motivated to ensure that resident's needs were met and demonstrated that she was aware of day to day operations.

Promotion of Privacy, Dignity and Respect

The home holds staff and residents/relatives meetings every 3 months, with additional meetings being held between these times, if necessary, to relay any changes or important information. We were told that guest speakers are invited to the resident/relative meetings, the previous one being a visit from the fire service.

Residents are each given a One to One hour of personal recreational and activity on a rotational basis. This is a scheme whereby the resident can choose how they would like to spend that hour. This could include a visit to the shops or café, a pedicure or just a one to one chat with a member of staff. This is said to be well received by the residents and provides them with a sense of worth and makes them feel '*special*'. Similarly, the home also attempts to ensure that residents are included in events such as mothering and fathering Sundays. For example the home held a 'girlie' pampering day for mother's day and on father's day the gentleman all received personalised mugs.

During their visit the Enter & View Team saw that staff treated residents with respect and ensured their dignity was maintained. Staff were observed speaking to residents at their physical level and observed knocking on resident's doors before entering. The home has a Volunteer dignity champion, a Dignity board and a Dignity Champions file through which all information is cascaded to the team. We were informed that Dignity is part of the home's agenda at every resident meeting, staff meeting and staff supervision.

Safeguarding, Concerns and Complaints Procedure

Safeguarding and complaints procedures are in place. Staff advised they were aware of the procedures and had attended the necessary training. Friends and Relatives are also made aware of the Complaints procedure and those that responded via Questionnaire confirmed this.

Medication and Treatment

The Enter & View Team found that medication is securely locked in a medication cupboard. The home has access to a range of community health services but we were informed that accessing these services might be delayed as care homes are now unable to refer to these services directly as all referrals now have to go via the GP. The home has adopted the 'Red Bag' scheme. This scheme ensures that residents who have to have care at the hospital have all the information with them that is required. This information is kept in individually pre prepared files (compliant with GDPR) and these go into the Red bags along with any personal belongings. The home reports that whilst the Red Bag scheme appears to be working well at this stage, it is not always working so well when paperwork and information is not returned or is incomplete. We were told that one of the home's residents commented that they felt that the scheme identifies them as coming from a care home which they feel is personal to themselves, and that they did not feel that this needed to be identified.

Recommendations

- To display the CQC rating more prominently, in line with the CQC guidance.
- Deep clean of hard flooring and carpet in downstairs corridor and dining area.
- To consider the use of more reminiscence style décor in the upstairs corridors, in keeping with the downstairs décor.
- To be mindful of the needs of residents who may need support in sitting, especially during group activities.
- To consider adopting identification aids (e.g. coloured doors, photographs, memory box) to aid navigation for those residents living with dementia. The Healthwatch team feel that this could be considered in line with dementia friendly best practice.
- To consider some additional decorative touches to the en-suite and bathroom facilities to create a less clinical appearance.
- To consider placing some recreational activities in the communal areas for ease of accessibility, and residents can make more of an individual choice.
- To consider the use of a weekly activity schedule, preferably in pictorial format, so that residents and relatives are aware of what activities are on offer each day and to stimulate interest in and participation in the activities.

What's working well?

- The Old Library promotes an inclusive, welcoming and homely environment, with compliments from residents and their relatives on the excellent quality of the care provided.
- The Old Library demonstrates the value placed on their residents by including them in decision making and provision of their 'one to one' programme.
- The Old library promotes the importance of hydration by provision of water coolers, and individual portable water bottles.

Service Provider Response

I have checked the CQC guidance and I feel that our rating is prominently displayed above the signing book on the entrance.

The Carpets in the downstairs corridor had been deep cleaned by a contracted company the night prior to your visit so I cannot understand the 'stickiness'. The Hard floor area has been added to the Domestic rota for an extra clean during the day.

We have previously decorated hallways with coloured walls as recommended for dementia residents and these were not proved to be beneficial and residents requested traditional homely hallways. Surveys evidenced this.

Some of our residents that we have at the present time may look as though they are in an uncomfortable position but, as recorded in their care plans, we have contacted OT an Physio and have trialled specialised chairs, these were unsuccessful. The residents with these needs do have bed rest.

We have considered additional decorative touches to the bathroom facilities but we have been advised from infection control that the bathroom should remain clean and clear. Residents who have en-suite rooms have personalised them to their own taste.

We have jigsaws, puzzles and crafts in the sideboards in both lounges. We are unable to leave such items in easy reach without supervision as residents with dementia do not always recognise the difference between edible and non-edible items.

Our weekly activity board was taken down when we redecorated the lounge and this be back in place in the foreseeable future.

In regards to the lift door, the lift door is disguised for the safety of our dementia residents and is to discourage residents with dementia from using the lift without supervision. *(Healthwatch would question however how those residents not living with dementia would identify this as a lift)*

Distribution

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