



## **Enter and View Report**

Topaz House

Friday 16<sup>th</sup> March 2018

# healthwatch

## North East Lincolnshire

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## Report Details

Address	Topaz House 226 Grimsby Road Cleethorpes South Humberside DN35 7EY
Service Provider	Carmand Ltd
Date of Visit	16 <sup>th</sup> March 2018
Type of Visit	Announced / Unannounced (See methodology on page 5)
Representatives	Mary Morley & Carol Watkinson

### 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 volunteer Enter and View Authorised Representatives 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 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; Food & Drink, Safeguarding, Staffing, Personal Care and Medication
- 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 announced/unannounced Enter & View visit.**

An announced/unannounced visit is where we send a letter to the care home 6 weeks in advanced of a date we have in mind, letting them know we intend to visit soon. A letter will then be sent approximately one week before the visit date we have and then we will turn up in that week unannounced.

### **Summary of Findings**

The Manager was very open and answered all our questions. Although we felt that the home itself looked a little tired, if the vocal resident is anything to go by, then there is no reason to believe that they are anything but well looked after.

## Details of Visit

We were greeted by John Terry, the Manager who told us that the home has a maximum occupancy of four people but at present there were only two residents, one who has been there for several years and another only two weeks.

### Environment

Topaz House is a detached property on Grimsby Road, Cleethorpes with space for two vehicles on the drive. First impressions were of a rather tired looking exterior, a note in the window requests using the doorbell, but this was not working.

There was no sanitiser in the entrance hall but a notice telling residents to wash their hands on entering and before leaving. However there was no provision for visitors to do this.

Upstairs there is a very nice, clean bathroom with shower, bath, toilet and hand basin. The bedroom we saw was very clean but not in use at the moment, and we were not able to see one that is in use. The carpet on the stairs was in need of vacuuming but we were told that because of an incident the night before, it had not been done.

The doors and windows were all open and it felt quite cold downstairs, as it was a very windy day. There was a very pleasant, warm front sitting room though with television.

### Food and Drink

We were shown the small kitchen where residents can cook their own meals or the staff will cook as required.

### Safeguarding, Concerns and Complaints Procedure

Safeguarding and complaints procedures are in place.

There is usually one member of staff on duty and we did query the safety aspect of this. If a resident did display any dangerous or disruptive traits, John said that they were told to make themselves safe and to ring for help. We were not sure where the help would come from and what about any other residents who may be there at the time.

### Staff

We went into the office where we met another male staff member and a lady who was from the head office. We asked about Training and were assured that all staff have had the required training and that they have ongoing training, aiming for all staff to have at least NVQ3.

The maintenance man is the fire lead and he checks alarms etc. on a regular basis.

### **Promotion of Privacy, Dignity and Respect**

All residents were treated with Dignity & Respect.

### **Recreational Activities**

The back garden is very small and quite unkempt but John said that a resident had shown interest in doing some gardening in the future. There was also a covered area to allow a resident to smoke.

The long term resident goes to Foresight four days a week and we observed him returning from shopping with a Carer.

### **Medication and Treatment**

The residents have regular health checks and medication and this is undertaken by staff.

### **Residents**

The new resident was very vocal and was keen to tell us that he could do just as he liked, going out, cooking etc. John Terry explained that the house is mainly for supported living and to help residents to move on to independent living. However he said that the long term resident would not be able to do that and would be staying.

### **Relatives and Friends**

John mentioned that relatives and friends are always welcome but they do not get many visitors.

## Recommendations

The Manager was very open and answered all our questions and although we felt that the home itself looked a little tired, if the vocal resident is anything to go by, then there is no reason to believe that they are anything but well looked after.

We would just like to recommend the following.

- That attention be paid to repairing doorbell, and a general tidy of the front entrance.
- Home to develop robust processes to ensure appropriate staffing levels at all times, as well as appropriate safeguarding procedures to protect both staff and residents should a volatile situation arise.

## Service Provider Response

John Terry (Manager) Said:

Thank you for this report. I am happy with the report.

A consultant psychiatrist visits the home every 4-6 weeks to complete a MDT review for every client and to support staff with care planning.

Following the visit the managers have agreed actions to address the concerns raised during the Healthwatch visit.

There is already in place an aesthetics improvement programme for Carmand Ltd and Topaz House has recently undergone some improvements, with more to follow.

## Distribution

This report has been distributed to the following:

- Healthwatch England
- Care Quality Commission
- Caroline Barley (Contracts manager for HWNEL)
- Julia Wong (Quality Programme Officer CCG)
- Lydia Golby (Lead nurse-quality at the CCG)
- Brett Brown (Contracts manager CCG)
- Angela Tew ( CQC Inspection Manager Hull, NEL, & NL)
- [www.healthwatchnortheastlincolnshire.co.uk/enter-view](http://www.healthwatchnortheastlincolnshire.co.uk/enter-view)