

Details of visit
Service address:
Service Provider:
Date and Time:
Authorised
Representatives:

St Ronan's Nursing & Residential Care Home
23-31 St Ronans Road, Portsmouth, PO4 0PP
St Ronan's Nursing & Residential Care Home
18th November 2016 11.30am - 16.00pm
Fergus Cameron
Alison Nicholson
Brenda Skinner



Acknowledgements

Healthwatch Portsmouth would like to thank the home manager, service provider, service users, relatives and staff for their contribution to the Enter and View programme.

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 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 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 need to 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 Care Quality Commission where they are protected by legislation if they raise a concern

Purpose of the visit

Healthwatch Portsmouth was invited to carry out an Enter & View visit by the home.

Healthwatch trained Enter and View representatives have statutory powers to enter certain funded health and social care premises to observe and assess the nature and quality of services and obtain the views of the people using those services.

Our aim is to report the service that is observed, to consider how services may be improved and how good practice can be shared.

Methodology

The registered manager was notified prior to the visit. Posters and leaflets notifying staff, residents and visitors about the visit were sent to the home to display along with details about how to get in touch with us if they were not available on the day of the visit.

During the visit, the Enter and View representatives observed the facilities, practices and spoke with the Matron/Registered Manager, Business Manager, residents, relatives and members of staff.

The home provided full support and cooperation to Healthwatch Portsmouth.

Summary of findings

St Ronan's is a Nursing & Residential care home located in a residential street in Southsea. It is registered to provide accommodation for 46 service users who require nursing or personal care. The home can take clients with low to medium dementia care needs.

At the time of our visit around 80% of residents were receiving nursing care. During the visit we spoke to several senior members of staff including the Matron/Registered Manager and the Business Manager. We also spoke to members of staff, residents, relatives and a visitor who was at the home providing seated exercise to some of the residents.

We were invited to join the residents for lunch and were able to sample the food on offer.

As a well-established home, staff and the management team told us they see training as a priority and have developed a robust in-house induction and training programme which is comprehensive and supports the individual's professional development. During our visit we saw some of the ongoing training taking place.



Results of the visit

Environment

The houses that make up the care home are covered by a large first floor banner promoting the home, and a domiciliary care company also run from the premises. The first impression from the street and to the public feels impersonal and that of a large business premises. We felt this detracts from promoting a valued, personal and dignified place to live. The banner dominates the road and neighbouring houses.

St Ronan's response: We are 5 houses and a banner spans across the front door, another two on the end house. The original signs were changed as visitors told us they thought larger signage would clarify who and where we are. We have enquiries from the local community because they see our signage. We will review this over the coming year as we are asking visitors to share their thoughts with us

However, once inside the home is warm, bright and free from odour. Fresh flowers and photos of staff and residents are placed around the home adding to the welcoming feel throughout. There are several rooms that make up the ground floor communal spaces and allow the residents to have the freedom to choose where they spend their days. We did feel some of the smaller lounges that were located some distance away from the main hub of the building were a little cluttered although we did appreciate that these would be ideal rooms for family visits. There is a sign on the "New Look" lounge reminding staff it is not to be used to store equipment but in the room opposite which we were told the hairdresser uses was very cluttered and it was difficult to imagine how this room could be used as a lounge.

St Ronan's response: The sign was temporary to ensure kept free for residents and their visitors who choose to sit in a quieter part of the building. The hairdressing lounge has been decluttered; we were in the processes of auditing the wheelchairs and frames

The two larger lounges that were located by the nurses' station appeared to be where most residents preferred to spend their time. Each lounge had a large TV which was on for most of our visit with the exception of lunchtime and at times created a very chaotic and noisy environment.

St Ronan's response: Residents choose in which areas they would like to spend their days - residents who prefer quieter areas choose other parts of the building.

The dining area where some residents preferred to spend their time as it was quieter appeared to be on the main route through the building with what felt like a constant stream of staff with laundry bags and trolleys.

St Ronan's response: Laundry bags come down twice a day; trollies are required for the service of food a drinks throughout the day. The resident who chooses to sit in that area loves "her corner"

Personal Care

We were shown the booklet "About Me" which each resident receives. This gives simple essential information about their personal care needs and key information in a dignified manner. Each resident also has a named carer.

Chiropodist, physio, dentist etc. regularly come to the home. One resident we spoke to was very pleased to have had an eye check and new glasses as this had been neglected prior to moving in. He also spoke of how well looked after he felt. Another resident spoke warmly of their named carer Julie.

Dignity & Independence

Staff told us they encourage residents to do what they can for themselves and care plans are regularly reviewed to ensure residents can be supported to remain independent whenever possible.

Residents choose where they spend their time and this was confirmed by a resident who spoke about the flexibility they have on getting ready for bed or getting up. Another resident told us how he preferred to spend his days in his room where he has tea making facilities but goes downstairs for the quiz or exercise and outside for a cigarette. However one resident did comment that they had rung to be walked down to the lounge at 7.30 but had to wait until 10.45 for assistance.

St Ronan's response: We wish you had shared this with us during your visit so we could have looked into it and rectified any problems.

One resident said they felt nervous living there and felt some of the other residents can be a little bossy however we did not witness this during our visit.

St Ronan's response: This resident chooses to sit in a quieter area as the lady she used to sit next to was bossy, we have resolved her worries

Recreational activities and methods of reducing social isolation

There is an activities board displayed in the hallways showing the various activities planned every day including visiting informal therapies, reminiscence, manicure, massage. A resident had her nails and hair made up ready for an outing to the theatre that week. She enjoyed what she called her "pampering".

We were told there is a Quality of Life worker who focussed on how people spent their time and promoted involvement and choice and that one downstairs room was being set up to be a cinema and music venue. A seated exercise class was in progress when we arrived. This is provided on a weekly basis by Vitalyz.

A resident told us of their continued involvement with the Salvation Army through visits, she did tell us however that she missed the congregational meetings.

St Ronan's Response: Now we are aware of this we have spoken to her carer and she is going to the congregational visits

One resident spoke spontaneously that they had friends at the home and another said they didn't join in "stuff" but they did like to go to the quieter lounge and feed Harley the parrot. They also told us they went out to the pub with a family member quite regularly and the felt well set up in their bedroom.

Staff told us that if residents appear to be becoming isolated in their rooms this is noted and staff try to identify different ways to spend time and offer choices. A CD player & Headphones is available for residents to listen to their own music.

Almost every resident we spoke to mentioned Trixie, she comes in & does a lot of things with residents including the gardening which won Gold in Portsmouth in Bloom. One resident described her as marvellous.

View of relatives

We spoke to a few relatives and they were all very happy with the care





provided. One told us they felt they can talk openly with staff re any concerns and that they feel listened to. Another relative told us that they were moving their relative to another home, they explained this was because they felt their relative would have a larger room and more freedom to move around as they felt the size of their relatives wheelchair restricted where he could go at St Ronan's. After talking with the relatives and staff it became clear that the move into St Ronan's had not been a planned one and the move to their preferred choice was now taking place as a space had become available.

Response from St Ronan's: The resident has chosen to stay at St Ronans as they didn't want to move.

Staff behaviours & attitudes

A resident spoke about the kind and caring nature of the care provided and we witnessed staff stopping and spending time with residents. There was a feeling of flexibility and warmth in the way staff worked.

Staff appeared friendly and happy in their work. A Nurse on the team spoke how well they felt the home was organised and of the improvements made to the environment. They were able to work flexible hours meeting their own family needs which took pressure off and improved their quality of life, they were then happy in their work. None of the staff we spoke to had any concerns, all felt residents were well cared for and on the whole that is what we witnessed. However one of our team did overhear a staff member saying to a resident who wanted to change the seat they were sat in that if they were to move they would need to be toileted first. This did not appear to be person-centred care as the resident clearly expressed that they did not wish to go to the toilet at that time.

Response from St Ronan's: We would have wanted to know about this immediately so we could look into the situation and rectify any problems, or be assured it was a nursing assistant assisting with promoting continence with a resident that had a level of confusion / dementia. Healthwatch response: We have now reviewed our Enter & View processes to ensure all items of concern are raised and addressed at the end of the visit.

We were told of a comprehensive staff induction and training programme and the Deputy Matron had initiated research on sleep deprivation as this was a noted difficulty for some residents.

Senior staff spoke of the regular application of the Mental Capacity Act (MCA) and the Deprivation of Liberty Safeguards and talked through their application and how challenges were addressed

The home appeared well equipped and staff were particularly happy with the caterpillar chair as an aid to help residents upstairs.

Food and Drink

Water and squash were available in lots of areas of the home and on many occasions we saw and heard staff offering refreshments to the residents. St Ronan's operates protected meal times to ensure everyone's meal is a priority. No visitors are admitted during this time but the meal times are clearly displayed in the entrance to inform relatives and visitors. The Matron was clear that although fiercely protected there were occasions where there was flexibility in this as long as it was in the best interest of the resident and not detrimental to other residents.

Residents can choose where they eat their lunch; the majority had lunch in the lounges. Some residents were given paper bibs to wear which to us seemed routine and institutional but one resident said it was very sensible as it protected her clothes. Help was on offer for those who required it and appropriate cutlery and eating aids were available.

Response from St Ronan's: We are researching nutrition and hydration, protecting clothing at meal times is part of the research, we hope to improve the current situation. On admission residents are asked if they would like protected mealtimes. Healthwatch response: We would be keen to return in 3-6 months to review how this research has shaped the way you are approaching nutrition and hydration at St Ronan's.

A resident spoke about knowing the chef and another said they were given a choice or could ask for something if they wanted to.

There was no daily menu on display and there appeared to be only one option available, which was fish, chips and mushy peas on the day of our visit. One resident joked that the choice was with or without peas. We were given the opportunity to join the residents for lunch and one of our team who is vegetarian was provided with a cheese omelette as an alternative. We found the food to be well cooked and well presented.

Response from St Ronan's: Daily menus are in all dining areas; at the beginning of the week a weekly menu is given to all residents (a copy is kept in their bedroom). Some residents go through the menu with Trixie and preferences communicated with the kitchen. All residents let the kitchen know if they want something different to the main and it is prepared for them, as staff ask throughout the day. The kitchen check at least twice during service on the walkie-talkie system that all residents are happy with their meal and / or if anything else is required.

During lunch a resident became at risk of choking during her meal, we observed her trying to eat her white napkin; it appeared as if she had mistaken her napkin for her bread. It was 3-5 minutes before a member of staff passed by and could be called for help. This was discussed with the registered manager during the visit and reported later to PCC Adult Social Care as a Safeguarding concern. *We received confirmation by email from PCC that they had followed up with the provider and they were satisfied all necessary measures are in place at the home.*

Response from St Ronan's: This is an assumption, the lady has dementia. It was felt she was distressed with the distraction of others at the table that she was not familiar with, our staff would otherwise have softly monitored her throughout her meal to encourage and observe. Protected mealtimes are in place for the well-being of our residents. Safeguarding didn't contact us with regards to this instance



Recommendations

This report identifies the good practice we witnessed whilst visiting St Ronan's and reflects how staff and residents feel about the support provided

From the visit, Healthwatch Portsmouth recommends the following:

1. All lounges that are designed for communal use should be kept free from clutter and where practical accessible to all.

Response from St Ronan's: This was in the process of being completed; regular audits are done to clear areas in the Home

2. Provider could review if napkins should be brightly coloured to prevent confusion at meal times.

Response from St Ronan's: A brightly coloured napkin will not deter someone who has dementia from displaying unusual behaviours. We closely monitor our residents who are at risk

3. Where the layout of the building permits, alternative ways to move laundry around the building should be investigated to prevent the dining room feeling like a corridor.

Response from St Ronan's: We have established a focus group who are looking into minimising this

4. The management team from St Ronan's should continue with the good practice observed during the visit and continue to share their expertise with other homes and networks in the city.
5. Healthwatch would like to return in 3-6 months to review the improvements following the current research.



Healthwatch Portsmouth
Unit 3 St George's Business Centre
St George's Square
Portsmouth
PO1 3EY
Tel: 02393 977 079

Any enquiries regarding this report should be sent to us at:
info@healthwatchportsmouth.co.uk

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