

Enter and View Report | Kinross Care Home**Details of visit**
Service address:**Service Provider:**
Date and Time:
Authorised
Representatives:**Kinross Care Home**
201 Havant Road, Drayton, Portsmouth PO6
1EE
Portsdown Estates Limited
15th February 2017 11.00am - 1.00pm
Fergus Cameron, Alison Nicholson
Steve Cope & Sue Cope**Acknowledgements**

Healthwatch Portsmouth would like to thank the home manager, service provider, service users, relatives, visitors and staff for their warm welcome and 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, 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

This visit was arranged following a meeting with the home manager to discuss the steps taken and were still being taken to ensure the standards of service provision meet those set out by the regulator

Healthwatch 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.

The 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 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 Registered Manager, residents, relatives and visitors. Due to the number of relatives and visitors who wanted to talk to us we did not have time during our visit to talk to any members of staff.

Kinross is an Approved Provider to Portsmouth City Council and Hampshire County Council, taking referrals from families, individuals in their own homes and on discharge for hospital.

Summary of findings

Kinross is an Approved Provider to Portsmouth City Council and Hampshire County Council taking referrals from families, people in their own home and on discharge from hospital.

There appears to be a strong commitment to residents as customers who therefore have rights to a good service.

During the visit we spoke to the Registered Manager, residents, relatives and visitors. When it comes to the family and friends test Kinross is a clear Yes.

Kinross is of a size that staff can be supported on a daily basis and there appears to be clear and informed leadership, Mr Lingaloo is a Registered Nurse and he brings a depth of experience, knowledge and confidence to residents. Unfortunately we were unable to speak to any of the care staff during our visit so we are unable to comment on what it feels like to work at Kinross.

Results of the visit

Environment

Kinross is located in a residential area of Drayton, Portsmouth; the garden is attractive and well maintained. Access from the street is into a conservatory where seating and tea/coffee making facilities are available for times when staff cannot immediately answer the door.

The home has a calm atmosphere with no unpleasant smells. The only sounds we were aware of throughout our visit were people chatting. We found the home to be clean, tidy with a reasonable amount of room. There was a choice of rooms where residents could spend their time with ample space for their relatives or friends to join them when they visited. We felt the main lounge was a little gloomy but this may have been the time of year we visited. We felt the layout of the lounge chairs seated around the outside of the room might make it difficult to encourage conversation or interaction with the residents. There were French doors which lead out into the garden which we felt would be very pleasant during the warmer weather.

The residents and relatives we spoke to appeared happy with the home describing it as “homely and extremely clean” and having a “nice room”. The bedroom accommodation we saw was light and spacious, one resident informed us she generally stayed in her room but it had everything she needed and she seemed very comfortable.

Quality is a part of their Resident Contract and right to complain and make changes, an example given by the manager was a change in décor and curtains to a bedroom. This was confirmed to us separately by some relatives who told us the home had redecorated their relative’s room prior to him moving in.

Personal Care

The residents we spoke to told us they were happy with the personal care offered at the home. We spoke to several different relatives and they all expressed how happy they were with the care their family member received. One relative told us their family member had gained weight since living in the home and thanks to the encouragement of staff he was spending less time in his room which was improving his overall wellbeing.

One of our team was shown comprehensive individual files with person centred information on likes, dislikes, communication needs, moving and handling and risk assessment. One of our team saw medication being administered and there appeared to be good secure equipment, lockable trolley storage and record keeping. Kinross is well provided for by a nearby GP practice and a 24 hour NHS Community Pharmacy. There was also a notice of a planned visit by an optician for residents.

We were informed multi agency working was working well with residents coming in after Joint Assessments of 24 hour care needs, risk assessment, information from the family and often a social history completed by a Social Worker

Dignity & Independence

One visitor we spoke to explained that the spiritual wellbeing of her friend was very important and all staff but particularly Mala had been very considerate of his spiritual needs.

A resident told us she was able to get out at least monthly to church and out with friends who visited if they were able to push her in her chair.

Several residents and relatives described how access to taxis could be difficult. If the taxi parked in the car park at the rear of the home it could only be reached if the staff were available to push the wheelchair up the hill. This was reliant on staff being available to assist.

Response from Kinross: Access to taxis - The entrance to the home is via Portsdown Avenue, which is less than 5 metres from the front door of the home. It is on the same level as the road and easily accessible on foot or wheelchair.

The car park off the main road is purely for visitors and staff only and used for delivery of goods.

Unfortunately during our visit one resident was seen sitting on the toilet with the door open in full view of anyone in the corridor. There were no staff around at the time to raise this with.

Response from Kinross: Privacy and dignity - A couple of our more independent residents have the habit of leaving the toilet door part open. All the staff have been reminded of this, to ensure privacy and dignity are maintained at all times, to the best of our abilities.

Recreational activities and methods of reducing social isolation

There were activities taking place in one of the sitting rooms during our visit but the residents did not seem engaged or interested. There was an activities timetable on display in the dining room although we were told some of the entertainment was repeated fairly regularly. One resident reported seeing the Elvis impersonator 15 times in 2 years. One relative voiced some doubts about the level of stimulation/activity in the home. It was also difficult to tell how much the residents were encouraged to take part.

It was reported by some residents and relatives that they were not able to participate in some activities due to physical restrictions. We were unable to clarify with staff if this was the case. There was a good selection of books available in the main lounge where one resident told us they spend most of their time reading. However they went on to inform us that their spectacles had been misplaced, they felt they may have been stolen. This had been reported to staff but as yet the spectacles had not been located.

Response from Kinross: Recreational activities - Residents are consulted on choices for activities on a daily basis, but many choose not to participate as they get tired easily and their concentration span is very short. Their age and functioning level have to be taken into account as well.

The service acknowledges that participating in activities can help to prevent boredom, maintain skills, self-esteem and independence.

We aim to tailor activities to fit in with each person's preferences and abilities, ensuring they are able to cope with them physically while ensuring the activities are positive and enjoyable for each person.

Physical restrictions - As mentioned above, some residents choose not to participate in a number of activities as they get tired easily but please be assured that no one is restricted in any way, physically or otherwise, from involvement in any of the activities.

With regards to the missing spectacles, we can confirm that same was found in the person's bedroom on the same day.

There are two large lounges where residents have the choice to rest and relax or engage in a number of activities, including card games, dominoes, jigsaws and puzzles, reading books, newspapers and magazines.

The seating arrangements are varied depending on the activities taking place at the time. In the morning and evening, there are a number of physical activities, like ball throwing

and catching, stretching, seat marching, stand and squat, a list of which can be seen in the physical activity book.

As much as possible we encourage interaction and conversation with other fellow residents with the opportunity for mirroring, but some prefer their own company and watch television or listening to music instead, while others prefer frequent naps or retire to their own room.

View of relatives

All of the relatives and friends of residents we spoke to spoke highly of the home. Comments included “really good care”, “bedding is always clean” and nothing is too much trouble”. Many told us they were made to feel welcome at the home; this included being offered a drink when they visit to being invited to the Christmas lunch. One relative told us she was “more than happy” with the home and would happily recommend it, several families we spoke to had picked the home based on recommendations. We were told us it was less clinical and more homely than the previous home a relative had been.

One of our team spoke with a visiting relative whose family member had been resident for 4 years. He said that staff were easy to talk to and Mala could easily be spoken to. He said his relative amusingly accused him of “wanting to put her in one of those homes” he stated she obviously didn’t feel she was in “one of those homes.” He told us he had visited several care homes before choosing Kinross and felt it had been a good decision. One relative wanted to let us know that they were very surprised by the CQC report as they didn’t feel it was a true reflection of the home and had nothing but praise for the staff and accommodation. Stating their relative loved it at Kinross.

Staff behaviours & attitudes

As a team we felt welcomed by all the staff on shift that day. When one of our team was being shown around by Mr Lingaloo, the Manager, they felt that staff and residents responded cheerfully to him.

We were told there is regular staff supervision every 8-12 weeks and a formal staff meeting every other month although much of the communication comes through the daily verbal handover.

Residents and relatives said they found the staff were very good and took time to know the individual. They also told us staff regularly check on their relatives throughout the day and night. The interaction we witnessed between residents, relatives and staff felt natural, warm and friendly.

The staff team is 22 and Mr Lingaloo spoke of some of the difficulties of recruiting staff and retaining, he felt that some left once they had completed their 3 month induction training and had transferable skills. Safeguarding training and other core areas were delivered on line. We were told how recruiting in staff from an agency incurs release costs but that did not ensure staff stayed despite the homes obvious commitment to employing them.

Food and Drink

The weekly menu plan in the dining room is in written and picture form, however a couple of relatives informed us their family members had problems with their vision and it was unclear

how this would be addressed. There appeared to be a choice of meals available but the vegetarian option was not evident. We spoke with the chef who was aware there was a new resident who was vegetarian and was able to cater for their needs. As the menus are planned in advance there had not been time to amend the plans on the wall. Meals are served at set times, one resident told us although her tea was brought to her at 4pm she didn't eat it until 7pm. Residents described the food as "OK" or "good" and "like you get at home" although there was not always a choice.

Response from Kinross: Food and Drink

A choice of vegetarian meal has always been available to the residents, whenever they wish to opt for a vegetarian dish. We ensure this option is more evident by inserting the choice in the daily menu plan in both written and picture form.

For residents with vision impairment, we have an A4 copy of the menu for them to see beforehand to support them with their meal choices.

While meals are served at set time to maintain routine and continuity that are important when attending to persons with dementia, we ensure each person's preferences are respected.

Recommendations

This report identifies the good practice we witnessed whilst visiting Kinross and reflects how staff and residents feel about the care provided

From the visit, Healthwatch Portsmouth recommends the following:

1. The home develops a suitable vegetarian menu which should be made available to all residents.
2. The home reassures Healthwatch how residents with vision problems are supported with their meal choices.
3. Residents are consulted on choices for activities and measures are put in place to ensure that everyone who wishes to can take part.
4. The home plans further how to ensure privacy and dignity is maintained.



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