

Enter and View Report | Meadow House

Details of visit	Meadow House
Service address:	47 - 51 Stubbington Avenue North End Portsmouth PO2 0HX
Service Provider:	Suresh Sumar Kureda
Date and Time:	6 December 2017 10 am
Authorised Representatives:	Fergus Cameron, Alison Nicholson, Kirsty Hayles (Observer)

**Acknowledgements**

Healthwatch Portsmouth would like to thank the home manager, service provider, service users 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 2012 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 to look at the implementation of the Multi-speciality Community Provider Project (MCP), an initiative across seven Care Homes selected to be part of a pilot group. These homes are receiving planned frequent visits from Community Nurses and healthcare specialists.

Meadow House is one of the seven Nursing and Care Homes in the city taking part in the MCP. Meadow House is one of the homes selected to receive frequent and regular support led by Community Nurses. This support is hoped to:

- improve the support offered by primary care teams to Portsmouth Care Homes
- educate Care Home staff and through this reduce inappropriate callout for conveyance of patients to hospital
- improve the quality of care for patients
- create a feeling of shared decision making for patients and families with increased offer of care plans for all residents
- make a positive impact on Care Homes ability to comply with CQC requirements.

This visit was arranged to gather feedback from staff, residents, clients, relatives and carers of the pilot project.

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 home manager, members of staff, residents and friends and family.

Summary of findings

The residents commented to Representatives that they felt safe and cared for. Residents seemed happy and engaged in a friendly manner with the Representatives. Representatives were told that the food was good, but that the house could be quiet and more activities could be offered. The home is receiving regular visits from the Community Matron. The home had a very relaxed atmosphere and was quite peaceful.

Environment

The Representatives felt that parts of the home were cramped and furniture was in need of updating. First impressions are that it could be improved, including a cracked pane of glass to the front door. There are areas of flooring that are taped over and again this detracts from the general appearance. Representatives felt that with some smaller changes and renewal the initial impression for visitors could be improved, made friendlier and relaxed.

The garden was clean and tidy and also had privacy for the residents who might wish to spend time out there. There has been a concerted effort to make the garden more attractive and user-friendly. The home had a very relaxed atmosphere and was quite peaceful. Representatives observed that there weren't any significant hand rails anywhere especially in the bedrooms and felt this could be quite dangerous. We saw a lady walking without her frame who we felt would have benefitted from some steadying hand rails; Representatives were concerned that if she lost her balance there would be nothing to help prevent her from falling, resulting in injury. We were informed that regular risk assessments are in place.

Representatives noted that every doorway was raised and some of the flooring wasn't even. We felt more consistent and barrier free flooring would be beneficial.

Personal Care

Staff monitor residents' behaviour; the mental health team visit and offer advice when required. To date, the home had not required support from Speech and Language therapy (SALT) or Physiotherapists but they felt sure it would happen, if required. The staff we spoke to felt they would be concerned that regular GP visits might delay treatment for residents and prefer the system they currently have in place, to contact the GP when appropriate. The home is receiving regular visits from the Community Matron, a focus of these has been to address tissue viability. Staff identified a small number of residents at higher risk of hospital admission. If staff are unsure of treatment options they continue to use 111 as a first point of contact for advice and support.

Dignity & Independence

Representatives could see effort going in to creating an environment that was dignified but felt that further attention to being consistent with this was needed; for instance a dementia friendly clock was well positioned, the calendar and day was correct, but the clock itself had stopped. That would have been disorientating and it hadn't been picked up on by staff who were regularly walking past it.

Representatives saw that Residents had personalised care plans which drew on each individual's needs.

Recreational activities and methods of reducing social isolation

It was felt that the activities on the activity sheet were normal everyday things that the residents have access to and were not particularly engaging. Representatives felt the residents should be consulted further on what they would like to do and be a bit more adventurous in activities being promoted.

The Views of relatives

Representatives acknowledge that despite the advance notice of the visit the timing was not appropriate for many friends or family to be available. We did not meet with relatives on the day.

Staff behaviours & attitudes

Representatives felt the staff had a positive approach to the residents. One conversation was interrupted and made more difficult by a member of staff putting the television on in an automatic manner; greater consideration should have been made to people talking, being aware and enabling that to happen. The new manager was introduced and this was positive after a period of acting up arrangements. There were management approaches evident including a quality assurance programme visible in the staff room so that staff could be aware of improvement and staff development could be tracked. The care home team has helped staff identify training needs and find training for staff.

Food and Drink

Each of the residents we spoke with praised the quality of the food. Drinks were being offered as part of a morning break, this seemed rather uniform with everyone sitting with a cup and plate. The quality of food was making a difference to residents and played a big part in feeling cared for and the creation of a warm atmosphere.

Recommendations

- Representatives were told about developments to the environment and the garden was clearly an area that already had attention, it is hoped that will continue for updating other areas of the house, particularly hazards in the hallways (supply grab rail handles, repair uneven flooring and remove raised door treads).
- Representatives heard about the benefit of regular, weekly, access to health professionals and would like to see clear systems for communicating the outcomes of these across the team.
- Representatives would like to see a more energetic and creative approach to the activities on offer at the home. Residents commented that the house could be quiet and more activities could be offered.
- The timing of the next Enter & View visit should allow the interviewing of visitors.



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