

Leyland Rest Home.

Enter and View Report

Contact Details: 109 Leyland Road
Southport
Merseyside
PR9 0JL

Date and Time of visit: Monday 19th September 2016. 2pm

Healthwatch Sefton Authorised Representatives: Wendy Andersen
John Black
Brian Clark
Bridget O'Toole

Acknowledgments:

Healthwatch Sefton would like to take this opportunity to thank all of the staff at Leyland Rest Home for their assistance. We would also like to thank the residents for taking the time to speak to us and for their contribution to this unannounced Enter and View visit.

Disclaimer:

This report relates only to the service viewed at the time of the visit, and is only representative of the views of the staff, visitors and residents who met members of the Enter and View team on that date.

Introduction.

This was an unannounced Enter and View visit undertaken by authorised representatives from Healthwatch Sefton who have the authority (Health & Social Care Act) to enter health and social care premises, announced or unannounced, to observe and assess the nature and quality of services and obtain the view of people using the services.

This visit was arranged as part of Healthwatch Sefton's work plan. The aim of this programme of work is to observe services provided by Sefton based; residential, nursing and care homes, consider how services may be improved and share good practice. The team of trained Enter and View authorised representatives record their observations along with feedback from residents, staff and where possible residents families and friends.

Enter and View visits are not intended to specifically identify safeguarding issues, however if safeguarding concerns arise during the visit, they are reported in accordance with Healthwatch Sefton safeguarding policies.

The team write a report reflecting these observations and feedback, making comment where appropriate. The report is sent to the manager of the service to check the facts/information within the report. Any response from the manager is included within the final version of the report which is published on the Healthwatch Sefton website: www.healthwatchsefton.co.uk

General Information.

Leyland Rest home is located close to Southport promenade and the town centre, and provides accommodation and care for up to 33 people. The building is a large Victorian property with gardens to the front and back. The home has three lounge areas, a dining area and lift access to all floors. http://www.cqc.org.uk/sites/default/files/new_reports/INS2-2505500186.pdf

At the time of the visit the manager informed us that there were 13 residents residing at the home.

The Visit.

The Enter and View team visited the home on Monday 19th September 2016, 2pm

When we arrived, signs for the home were clearly displayed. From the front entrance, a reception area and desk were visible. The front entrance was locked and we were buzzed in. The manager was sitting at the desk and greeted us warmly and reviewed the authorisation letter which we presented. The manager asked us what we would like to look at and explained that only a few residents would be available to talk to us as most stay in their rooms. 1 (one) resident was out for the afternoon with family and another resident was in hospital.

We were given a tour of the home by the manager. The manager explained that the home was being refurbished on levels 1 (one) and 2 (two).

We spoke with 4 (four) residents, structuring our conversations around the following areas: care, comfort and connection (see appendix 2) , designed to gather information concerning residents overall experience of living at Leyland Rest Home.

The team also recorded their own observations on the environment and facilities available at Leyland Rest Home using an observation sheet (see appendix 1)

Enter & View observations.

Observations were scored on a scale of 1 to 5:

1 = unacceptable, 2 = poor. 3 = Average, 4 = Good, 5 = Very Good

Exterior

On arriving at the home we considered the external environment including upkeep of the grounds, parking, signage and physical access.

The home is situated on a quiet suburban road which is wide and has the option of on street parking. Leyland Rest Home has its own small private car park.

The home had a nice front garden which had a mixture of trees, flowers and plants. There was also a bench in the garden. There was both a front and rear entrance to the home, the rear entrance not having a disabled ramp. The front entrance had good disabled access and the upkeep of the grounds were observed as being in good condition.

The garden area was accessed via the basement section of the home and we were informed that residents did go into the garden on days when the weather was nice. The garden was observed as being kept in good condition. The garden was all on one level and had a sheltered seating area.

The following areas were observed/ scored as;

- | | |
|---|------------------------|
|  Parking | 2/5 (poor) |
|  Signage | 4/5 (good) |
|  Controlled access (including directions on how to gain access & security) | 5/5 (very good) |

 Physical Access (including Disability access)	4/5 (good)
 Upkeep of Grounds	4/5 (good)
 Upkeep of buildings exterior	4/5 (good)
 Hygiene, cleanliness (free from odours)	4/5 (good)

Reception

On arrival the front door was locked and the manager greeted us and welcomed the team in. During the visit we also observed visitors being buzzed in and out of the front entrance the use of controlled access being very good. On the doors there were clear bold signs outlining the homes 'closed door' policy and reminding staff and visitors not to leave the building unsecured.

The food standards agency rating was also displayed clearly on the front entrance doors (5, very good).

Within the reception area there was no information about Leyland Rest home apart from information about upcoming events. This included a planned trip to Blackpool. The manager informed us that the previous week residents had visited the museum. Certificates from the Care Quality Commission (CQC) were visibly displayed. There was a visitor's suggestion box in the reception area and a visitors signing in book. There were also leaflets available for people to review the home via 'carehome.co.uk'. The reception area was free from obstructions.

 Information provided on the care home	3/5 (average)
 Decor	4/5 (good)
 Freedom from obstructions and hazards	5/5 (very good)
 Lighting (including natural light)	5/5 (very good)
 Hygiene, cleanliness (free from odours)	5/5 (very good)

Corridors, Lifts and Stairways

During the tour of the building. We were shown upstairs. The stairs were narrow and steep, this being due to the era of the building. A lift was available and although relatively small it provided access to the bedrooms and also to the lower floor (basement) where the kitchen, staff area and toilet were located. You could also access the communal garden area from the basement.

In navigating from the dining room to the nearest toilet there were 4 steps to navigate. A grab rail was in place. At the top of the steps rooms 1 (one) and 2 (two) were located.

Overall the home was bright and airy with natural light. There were large glass windows in every room.

 Physical access (including grab rails for example)	4/5 (good)
 Decor	5/5 (very good)
 Freedom from obstructions and hazards	5/5 (very good)

- 6 Lighting (including natural light) 4/5 (good)
- 6 Hygiene, cleanliness (free from odours) 3/5 (average)

Dining Area.

The communal dining area had lots of natural light and a new floor. A resident was sat in this area during the visit looking out of the window. There were no curtains or blinds up at the time of the visit.

The dining room was observed as clean and there was a radio on. We observed that there was no disabled access from the dining area to the nearest toilet/bathroom facility and to the 2 residents rooms which were located in the same area.

- 6 Physical access (including disability) 3/5 (average)
- 6 Decor 5/5 (very good)
- 6 Freedom from obstructions and hazards 4/5 (good)
- 6 Hygiene, cleanliness (free from odours) 5/5 (very good)
- 6 Dining area (ambience/atmosphere) 4/5 (good)
- 6 Lighting (including natural light) 5/5 (very good)

Communal sitting area(s).

We observed a number of new chairs in the communal areas, the communal areas being newly decorated and clean. New flooring had recently been fitted. During the visit a church service was taking place in the communal/living room area and Holy Communion was being offered to residents.

There was a small communal room/ office, located by the dining area. This room would offer privacy if required.

 Physical access (including disability)	5/5 (very good)
 Décor	5/5 (very good)
 Freedom from obstructions and hazards	5/5 (very good)
 Hygiene, cleanliness (free from odours)	5/5 (very good)
 Communal /sitting area general ambience	4/5 (good)
 Lighting (including natural light)	5/5 (very good)

Kitchen facilities/Food preparation area.

During the visit, we observed staff providing residents with tea and snacks. The manager offered to take the team to the basement area where the kitchen was located. We went into the kitchen area and spoke with the chef who was

friendly and was at this point preparing fresh food for residents. The kitchen was modern and was observed as looking clean.

In the basement area we also observed a staff suggestion box which is a brilliant idea as staff can feedback anonymously to management.

 Facilities (e.g. sinks, fridges, equipment)	5/5 (very good)
 Décor	4/5 (good)
 Hygiene, cleanliness (free from odours)	4/5 (good)
 Health and Safety (e.g. are knives stored safely)	4/5 (good)
 Lighting (including natural light)	4/5 (good)

Bathroom/Washing/Toilet Facilities.

We only observed one (1) toilet facility during the visit, which was located near to the dining area. The toilet area was bright and had modern décor. There was no door lock but there was an option to let people know if the toilet was occupied or vacant. The toilet roll holder was broken and the toilet roll was located above the toilet. We observed some urine on the floor near to the toilet bowl but we are unable to say how long this had been there for. As we only observed the one area, we noted that resident's rooms would have en-suite facilities.

 Physical access (including disability)	3/5 (average)
 Decor	3/5 (average)
 Freedom from obstructions and hazards	5/5 (very good)
 Hygiene, cleanliness (free from odours)	4/5 (good)
 Assistance equipment available.	Not scored
 Lighting (including natural light)	5/5 (very good)

Residents Views.

On arrival, the manager had explained that only a few residents would be available to talk to us as most stay in their rooms. There were only 11 present at the home during the visit as 1 (one) resident was out for the afternoon with family and another resident was in hospital.

We spoke with 4 residents who were using the communal area during the visit. All 4 residents were not able to answer the majority of questions we would usually ask during the visit and the below details the main points shared with us.

-  2 residents told us that they have access to regular drinks and 2 residents said they didn't. During the visit staff were observed with a drinks/food trolley.

“They make a nice cup of tea”.

“Not offered drinks”

 2 residents told us that they enjoyed the food on the menu

“Its nice, but there is no choice”

During the visit we were asked by the manager if we would like to speak to residents who were in their rooms. We declined but on walking down a corridor, 1 (one) residents door was open and staff were looking after them. We were told by staff that this resident had been allowed to keep their pet budgie which Enter and Team members felt was a nice gesture.

The team were able to observe that all 4 residents spoken with appeared to be happy, were well clothed and were comfortable. They appeared to know the staff well and were happy to speak with us.

Conclusion.

Enter and View members were impressed by the home and its surroundings. The light and temperatures made for a nice environment. Importantly staff attitudes were great and they were accommodating, helping to show us around. The team were able to observe the home's layout and talk to residents at their own pace. The manager was welcoming and was able to provide lots of information about the home, knew about their resident's history. An update on improvements being made following the last inspection from the Care Quality Commission (CQC) was also provided.

Areas of the home were being redecorated and at the time of the unannounced visit the number of residents living at the home was low. It was therefore unfortunate that the team were unable to speak to many residents and gain an understanding of their experience of living at Leyland Rest Home. It is important to note however that the manager/staff invited us to enter residents individual rooms but this was declined by the team.

Recommendations.

From our observations we would recommend:

1. The garden is utilised as much as possible for residents as the homes outside areas are well maintained.
2. Toilet/bathroom areas are checked on a regular basis to ensure they are kept clean.
3. The steps up to the toilet by the dining area and rooms 1 and 2 are reviewed to make sure they are as accessible for all residents.

Response from the provider.

Results of the Enter and View visit were fed back to the provider who provided the following response:

The response from the provider was due by Monday 28th November 2016 and this was not received.

On contacting Leyland Rest Home we were made aware that Manager, Patricia Shanks had left her role as manager and a new manager was in place, Lea Jones.

The following response was received by Lea Jones Manager (January 2017) and although the response is detailed on work undertaken since the new manager came into post, the 3 recommendations made by the Enter and view team have not been specifically addressed and will be followed up by Healthwatch Sefton.

Dear Diane

My name is Lea Jones I have been the Manager of Leyland Rest Home since 13 th October 2016

I have read your report and answered your report lots of changes have took place since your visit as below:

I have written you an account of changes.

The personal hard back files for all the residents have been updated they include the following:

Full pre-Admission

This is me (All completed)

Statement of purpose

Emergency care plans

Medication

Hospital Documentation

Contracts

Capacity assessment

Consent Forms

All above documentation is in place and any update or changes are updated by senior.

All documents are index for easy read.

All Medication consent forms have been signed.

All care plans have been reviewed by the residents and care review meetings have taken place all documented are in the main office in the meetings file.

All DOL's have been submitted and residents involved have had an assessment from social worker I am waiting for documentation and I will report to appropriate bodies. All residents have a mental health assessment in place to support the DOLS.

I have attached a up to date training matrix's as you can see out training is ongoing and every week we improve. We have 4 members of senior staff signed up for level 5 management.

All staff have had a supervision and I have started appraisals all will be completed within 1 month.

All staff have read and understand 10 policy's and procedure this will be an ongoing exercise until all up to date.

Audits have been started under our quality policy by myself they include

Residents Care plans, Accident and incidents, Hospital admissions, DOLS, Bed rails, Pressure Areas, Safeguarding, Chest infections, UTI, diet control.

All so staff files are Audited and all checks are followed before a new member of staff is appointed, full induction is in place and followed by myself or Adam Homes our team leader.

Building Audits are in place including risk assessments, water temps, infection control, COSHH, health and safety room improvements and legionella.

We have had annual checks all lifting equipment has had a LOLAR inspection and are all in working order. Our lift has had an inspection and is in good working order.

Residents, staff, and relatives has received a survey the first week of my employment, all surveys have been returned and read and improvements have been made following all information, new surveys are to be given out at the end of this week (6 week) this will help me improve our services and see are improvements, there is a comments book at the front of the home and relatives have put very encouraging notes in place.

We have got a new team in place the structure of the shifts are 1 senior 1 team leader 2 care staff 2 domestics 2 cooks, we have dismissed members of staff for using poor practices.

The cook has been dismissed and a new cook in place all menus have been reviewed and a residents meeting has been held residents had lots of input towards the new menus.

Activities are in place and all residents are enjoying a new way of life lots of plans for Christmas for the residents and relatives have been asked to attend events.

Building has been improved dining room tables are set to a high standard after every meal there is a rehydration sideboard in place that residents can access though out the day also 2 cold water systems have been put in place.

First and second floor is in the process of being decorated and all new bedroom furniture in place, resident have been asked about what colours they would like their rooms one lady has requested her room not be changed this is documented in her care plan as her choice.

Leyland Rest home was inspected by 4 inspectors on the 24/11/2016 all my feedback was positive I attend to improve our service and my goal is outstanding.

Regards

Lea Jones

Appendix 1: Observation Sheet.

Exterior	Very Good	Good	Average	Poor	Unacceptable
Parking	<input type="checkbox"/>				
Signage	<input type="checkbox"/>				
Controlled Access (inc. directions on how to gain access & security).					
Physical Access (inc. disability access)	<input type="checkbox"/>				
Upkeep of grounds	<input type="checkbox"/>				
Upkeep of building's exterior	<input type="checkbox"/>				
Hygiene, cleanliness (free from odours)	<input type="checkbox"/>				
Reception	Very Good	Good	Average	Poor	Unacceptable
Information provided on care home	<input type="checkbox"/>				
Décor	<input type="checkbox"/>				
Freedom from obstructions and hazards	<input type="checkbox"/>				
Lighting (inc natural light)	<input type="checkbox"/>				
Hygiene, cleanliness (free from odours)	<input type="checkbox"/>				
Corridors, Lifts and Stairways	Very Good	Good	Average	Poor	Unacceptable
Physical Access (inc. grab rails etc)	<input type="checkbox"/>				
Décor	<input type="checkbox"/>				
Freedom from obstructions and hazards	<input type="checkbox"/>				
Hygiene, cleanliness (free from odours)	<input type="checkbox"/>				
Lighting (inc. natural light)	<input type="checkbox"/>				
Dining Area	Very Good	Good	Average	Poor	Unacceptable
Physical Access (inc disability)	<input type="checkbox"/>				
Décor	<input type="checkbox"/>				
Freedom from obstructions and hazards	<input type="checkbox"/>				
Hygiene, cleanliness (free from odours)	<input type="checkbox"/>				
Dining Area (ambience/atmosphere)	<input type="checkbox"/>				
Lighting (inc. natural light)	<input type="checkbox"/>				
Communal / Sitting Area	Very Good	Good	Average	Poor	Unacceptable
Physical Access (inc disability)	<input type="checkbox"/>				
Décor	<input type="checkbox"/>				
Freedom from obstructions and hazards	<input type="checkbox"/>				
Hygiene, cleanliness (free from odours)	<input type="checkbox"/>				
Communal / Sitting Area General ambience	<input type="checkbox"/>				
Lighting (inc. natural light)	<input type="checkbox"/>				

Kitchen facilities/ Food Preparation area.	Very Good	Good	Average	Poor	Unacceptable
Facilities (e.g. Sinks, Fridges, is equipment there?)	<input type="checkbox"/>				
Décor	<input type="checkbox"/>				
Hygiene, cleanliness (free from odours)	<input type="checkbox"/>				
Health & Safety (e.g. are knives stored safely)	<input type="checkbox"/>				
Bathroom / Washing/ Toilet Facilities	Very Good	Good	Average	Poor	Unacceptable
Physical Access (including disability)	<input type="checkbox"/>				
Décor	<input type="checkbox"/>				
Freedom from obstructions and hazards	<input type="checkbox"/>				
Hygiene, cleanliness (free from odours)	<input type="checkbox"/>				
Assistive equipment available	<input type="checkbox"/>				
Lighting (inc. natural light)	<input type="checkbox"/>				

Please record other observations made here: (for example is the home Dementia Friendly)

Appendix 2: The 3 Cs



Questionnaire: Care Comfort and Connection (3C's)

Who did you speak with (resident / family / friend?)

Age (if willing to share)	
Gender	M / F

Date of visit	
Time of visit	
Location (where you spoke to the resident):	
How long has the resident lived at the home:	

CARE (**information in italics is for you to observe and note or try and ask more about when talking to residents*)

	YES	NO	DON'T KNOW	COMMENTS
Do you have access to hand cleanser/sanitizer? <i>*Did you observe arrangements for the prevention and control of infections?</i>				
Do you have access to regular drinks?				
Is the menu appropriate? Do you enjoy the food on the menu? <i>*Is the menu designed for the client group?/ what is the menu repeat cycle? Do residents get any input into the menu?</i>				
Is there an efficient alarm/call system? Does it get answered quickly?				
Is noise a problem?				



	YES	NO	DON'T KNOW	COMMENTS
Are you aware of how to express any concerns or how to make a complaint? Would you feel comfortable about making a complaint?				
Do staff treat you with dignity and respect? <i>*Do staff talk to residents appropriately?</i>				
Are you asked for your consent/permission when staff want to care, treat or support you? <i>*Are families listened to? *Do residents have access to advocates?</i>				
<i>*if appropriate - Are Dementia patients cared for sympathetically?</i>				

COMFORT (**information in italics are for you to observe/ try and ask more about when talking to residents*)

	YES	NO	DON'T KNOW	COMMENTS
Is the home too hot/too cold? <i>*Do the premises smell nice/Are the premises smelly? *Are the premises crowded?</i>				
Are you able to wear your own clothes? <i>*Does the resident look clean and neat/ hair brushed *Make up/ false teeth/ hearing aid (if appropriate)</i>				
Do you see a dentist on a regular basis? <i>* Does the resident go to the dentist/ does the dentist visit the home?</i>				
Do you receive foot care checks on a regular basis? <i>* Does the resident go to the Podiatrist/ does the Podiatrist visit the home?</i>				



	YES	NO	DON'T KNOW	COMMENTS
When you first came to the home were you allowed to bring in small items of personal furniture, pictures, and favourite ornaments?				
<i>* Does the home meet the residents needs in relation to their cultural background, language, gender, disability, age, sexuality, religion or beliefs</i>				

CONNECTION

*(*information in italics are for you to observe/ try and ask more about when talking to residents)*

	YES	NO	DON'T KNOW	COMMENTS
Are regular trips/ outings organised?				
Do you go out/ are taken out to the local community?				
Do you go out/ are taken out to make personal purchases? For example to buy your own clothes or other things you like?				
Do you have anyone/ organisations which come into the home for example, local history group/ arts.				
Do staff make sure that you don't feel lonely? <i>*if the resident has any hobbies do staff help them to keep up their hobbies?</i>				
Can you access the garden?				
Is there a private area for you to be able to talk to family members/friends other than the main communal area/lounge?				
<i>* Are residents with a sight or hearing loss socially isolated? / What arrangements are there to ensure they play a full part?</i>				



If you have any additional comments or questions please feel free to include them below:

If you would like a copy of this report please provide contact details below. Your details will not be shared with the provider or any other organisation.

Name:	
-------	--

Healthwatch Sefton
Company Limited by Guarantee Reg. No: 8453782

Healthwatch Sefton Registered Office:
FREEPOST RTCG-HGXH-LHRS
Sefton Council for Voluntary Service (CVS)
3RD Floor, Suite 3B,
North Wing, Burlington House,
Crosby Road North
Waterloo,
L22 0LG

www.healthwatchsefton.co.uk

info@healthwatchsefton.co.uk

Twitter: @HWatchSefton

Facebook: <https://www.facebook.com/healthwatchsefton2013>