



# Enter and View Visit Report

## Birkdale Residential Home

Visit Date: 29<sup>th</sup> September 2019

Publication Date: 6<sup>th</sup> November 2019



Station Hill, St George's, Telford TF2 9AA

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## Terminology and Acronyms

HWT&W - Healthwatch Telford and Wrekin

CQC - Care Quality Commission

N.O.K - Next of Kin

MDT - Multi-Disciplinary Team



## About Healthwatch Telford & Wrekin (HWT&W)

Healthwatch Telford & Wrekin is the independent health and social care champion for local people. We work to ensure your voice counts when it comes to shaping, delivering/receiving and improving services. We address inequalities in health and social care to help make sure everyone in Telford and Wrekin (T&W) gets the services they need.

There are local Healthwatch across the country as well as a national body - Healthwatch England (HWE).

## What is Enter & View?

Healthwatch Telford & Wrekin gathers people's experiences of health and social care services and there are times when it is appropriate for Healthwatch to see and hear for ourselves how services are being provided. These visits are called 'Enter and View', and can be 'announced', 'partially announced' or 'unannounced'. 'Partially announced' visits mean the service provider is told we will visit but not the date or time of the visit.



The responsibility to carry out Enter and View visits was given to local Healthwatch in the **Health and Care Social Act 2012**.

Enter & View visits are carried out by a team of specially trained and DBS-checked staff and/or volunteers called Authorised Representatives. These volunteers are not experts in health or social care and report only on what they see and hear during the visit. They make observations and collect people's views and opinions anonymously and produce and publish a report.

Enter & View visits are not an inspection, and always have a 'purpose'.



## Details of the Visit

Visit Details:	
Service	Birkdale Residential Home
Provider	The Keepings Limited
Date and Time of visit	29 <sup>th</sup> September 2019 - 10am to 12pm
Visit Team	2 x HWT&W Enter & View Authorised Representatives (ARs) and 1 x Authorised Representative "In-Training" (T-AR)
Service contact details	Name: Frances Louise Phone: 01952 620278 Address: Station Hill, St George's, Telford TF2 9AA

## Purpose of Visit

How dignity, respect, quality of life and independence is being respected and supported in the person's care, and how 'activity-based' care supports people to continue to be as active and independent as possible.

We want to hear about resident experiences and those of any relatives and visitors present, and we will observe the residents engaging with the staff and their surroundings. We want to identify examples of good practices and hear about any ideas the residents or staff may have for change.

### 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 users of the service and staff, only an account of what was observed and contributed at the time.



## Context of the Visit

In August 2017 Healthwatch England published a report: ‘**What’s it like to live in a care home?**’ Between January 2016 and April 2017, local Healthwatch staff and volunteers across England visited 197 care homes across 63 different local authority areas to find out what day to day life is really like for many of those living in care homes. These homes collectively provide care for almost 3,500 residents ranging from elderly people with dementia to those with severe learning disabilities.

During these visits local Healthwatch spoke with residents, their families and staff, compiling people’s experiences with their own observations to produce visit reports. These were shared with the providers, the public, CQC and Healthwatch England. Healthwatch England reviewed what people told local Healthwatch and identified the common issues that need to improve as well as eight quality indicators for a good care home. Healthwatch England identified that a good care home should:

1. Have strong, visible management
2. Have staff with time and skills to do their jobs
3. Have good knowledge of each resident and how their needs may be changing
4. Offer a varied programme of activities
5. Offer quality, choice and flexibility around food and mealtimes
6. Ensure residents can see health professionals such as GPs and dentists regularly
7. Accommodate residents’ personal, cultural and lifestyle needs
8. Be an open environment where feedback is actively sought and used

As part of the engagement programme Healthwatch Telford & Wrekin will visit Care Homes in the borough, and those elsewhere in the county where funding support is provided by Telford & Wrekin Council Adult Social Care. Individual visit reports will be published on each home visited. Over-arching theme reports will be published focusing on person-centred care and the quality of life experienced by residents, relating to their dignity and respect and exploring topics such as activity-based care, access to health professionals, and living with dementia.

Birkdale Residential Home in Telford & Wrekin is currently rated ‘Good’ by the Care Quality Commission (CQC).

The visit was ‘**partially announced**’; we told the manager of the visit but not the actual date and time.



## What we were looking at

The focus of this visit was to find out if the residents of Birkdale Residential Home were happy living in the home. We wanted to learn about:

- the environment - supporting dementia, accessibility and activities
- the experiences of people living with dementia
- supporting people to continue to be as active and independent as possible
- food and drink
- choices available to people
- staffing levels and staff training



## What we did

We arranged a meeting with the Home's Manager on a day prior to our actual visit, which provided useful background information and guidance. This allowed more time, on the day of our visit, to talk to people about their experiences and to observe staff and resident interactions. When we arrived at the Home, after signing-in, we spoke to the Deputy Manager on duty. Our questions about the Home were answered and we took advice on whether any residents should not be approached due to safety or medical reasons, or any issues regarding ability to give informed consent. After explaining our focus on engaging with any residents, visitors and relatives present in the home who were willing to talk to us; we spoke with residents in the lounge and were invited to speak to other residents in their rooms. A staff member accompanying us knocked on the residents' bedroom door, prior to entering and asked if they would be happy to speak to us.

We were informed that there was one (1) senior on duty and three (3) care staff with twenty-four (24) residents.

We spoke to 8 residents, 3 relatives and visitors, and 3 staff.

## What we found out

### **About the Home** (*brief summary providing context about the home*)

Birkdale is a residential Care Home situated in Oakengates, Telford. Oakengates is a small family friendly town with good transport links, both in terms of bus routes and a near-by railway station. The Care Home was formed from the conversion of 2 existing houses with an added extension. It has a small paved garden area at the rear of the home and comprises two floors accessible by lifts and staircases.

The home is registered with Care Quality Commission (CQC) for 27 residents; however, the Manager confirmed its current capacity was 26. The home received a 'Good' rating after an inspection in May 2019, prior to that, it had a 'requiring

improvements' rating. The manager informed us that that they were currently working through the CQC recommendations following their previous inspection. It also had a 5-star food hygiene rating.

The Home had a car park at the front of the Home, with had relatively few cars parked there at the time of our visit. The Home benefits from having its own minibus.

The Home has two named sections, Ashdale and Dove. Ashdale encompassed a lounge, hairdresser, toilet, bathroom and 9 bedrooms. The Dove section of the Home comprised a lounge, bathroom downstairs and wet room upstairs, toilets, dining room, conservatory and 17 bedrooms. Only one bedroom had an ensuite facility (toilet only).

In the reception area we noticed a bench, a table with visitors' book, feedback box (white with smiley stickers over it). We also noticed a folder identifying Next of Kin (N.O.K). Inside the folder were individual poly-pockets with residents' names and room numbers, this was marked 'private and confidential'. Relatives/N.O.K. named in the folder could thereby be authorised to pick up a letter on behalf of the named resident. There was a notice board on the wall that was not overcrowded with information, a Home newsletter dated July 2019 was pinned to the board.

As we made our way over to Dove lounge, we passed through the dining room, we could smell an aromatic roast dinner cooking. Breakfast was being prepared and served, along with hot drinks. All food was cooked from fresh on site. The corridor wall leading from reception to the kitchen area also featured a pleasant picture, painted by a local student.



We started our visit in Dove lounge, through the lounge, residents have access to a conservatory and garden area. This was a large lounge with a vivid blue patterned carpet which appeared too colourful for its current environment, however, overall it was nicely decorated and looked homely. We noticed there was a staff call button hidden behind a flower vase, this could distract from residents' ability to locate the call button in order to summon assistance. We raised this matter with the Manager on the day of our visit.

The lounge area was decorated with photos of residents and to mark special occasions. The residents in the lounge area enjoyed talking to us about the lovely memories they had to share.

Staff calls bells were not wireless and were fixed to the wall. Each had a press button on a lead so residents could access them from their bed. One person had a pendant alarm brought by the home at the request of the resident's family.



Birkdale also had a Day Centre offering some respite to people and their Carers. It currently opened between 9am and 3.30pm, 7 days a week. People could also be picked up and dropped off via their own transport or the Home's bus.

### Views of the residents

All residents appeared happy and comfortable in the lounge area, one resident asked for the television to be switched on. We observed a staff member explaining that they were just pouring a cup of tea and would switch it on for the resident; which they did.

Residents were generally very positive about their experiences of living at Birkdale and told us;

- *"We have a giggle a day",*
- *"I love the ladies (staff) they are always happy"*
- *"We do activities, I like to do knitting"*
- *"We are a very lively bunch; we like to laugh"*
- *"I am always comfortable"*
- *"The staff always join in with our singing!"*
- *"It's not home, but I'm happy here"*
- *"We are as happy as can be!"*
- *"(Manager) is wonderful"*

### Topic 1 (dignity and quality of life respected in person-centred care)

We observed staff speaking to residents and relatives in an appropriate and friendly way. Relatives said, "staff always offer me a drink".

A resident informed us they had been at the home a while. They had plenty to eat and drink; food was mostly nice. We were told they did not have choices but when we asked what they had for breakfast, we were told they had the choice of cereal, and toast. Staff were nice and friendly "sometimes they talk to me, but it depends if they are busy" They had no issues and felt safe at the home.

### Topic 2 (choices and preferences, including meals, personal care and activities)

People informed us that the food was good. Even pureed food looked appetising and one person said, "you can tell what the food was, and it's not mushed up together". We heard from a relative that a resident had not been in a good place, but the staff had brought in specialist help and this had helped the person. After visiting the Day Centre and watching how their relative got on well with staff and other residents, they knew this was the home for them and that it would provide the support that was needed.





We observed menu choices on the dining tables for breakfast.

We could not see an Activity Board displayed around the home; we did raise this with staff who informed us they don't use a board as residents often change their minds. The Activity Coordinator asked residents what they would like to do, this could involve multiple activities and residents did have a choice. We were also informed that they organised several different activities in the home such as; music, pom-pom lady, magician and sign along. They also offer nail care.

We asked a relative of a resident if they felt they had been offered choices by staff and they said, "yes from what they had seen". All staff were very helpful, and they seemed to know all the residents well. The relative knew what to do if they had a compliment or complaint.

The Home catered for residents on special diets for religious, personal choices or health reasons, such as; vegetarian, Halal and soft foods. Any resident requiring special diets was referred to the Speech and Language Therapy team (SALT) and measures were put in place to support residents.



### **Topic 3** (experience of care meeting the needs of those living with dementia)

We spoke to several people on how the Home and staff met the needs of people living with dementia. We heard from a resident's relative that they could visit at any time and be involved in the resident's care and support; "they are very flexible". Staff were always welcoming, friendly and relaxed even when under pressure. "They are brilliant, they offer me/my family drinks and let us have dinner together".



We were invited to view a resident's bedroom where we found the room spacious, clean and individually decorated. All doors had signage including residents' rooms. We did feel that some signage would benefit from the inclusion of appropriate pictures to reinforce their purpose, for residents living with dementia. We noticed bedrooms with resident's name and door number displayed.

We also noticed that some flooring and carpets were not dementia friendly.

## **Staffing levels and training for staff**

During our meeting with the Manager, we were told the Home has 34 staff in total, employed in various roles. There was a mixture of full and part-time staff employed at the Home.

There were normally six (6) care staff on duty between 8am and 2pm with a 'breakfast person' helping to serve breakfast between 7am and 10am. Between



2pm and 8pm, the Home had three (3) or four (4) care staff on duty and during the night, three (3) care staff were on duty. Each shift would have a designated senior on duty.

The Manager informed us that the Home rarely used agency staff, as the regular staff would often cover or swap shifts. The manager informed us that they only had to use agency twice in the last four (4) years due to specific needs of residents. If they needed to use agency staff, they would employ the same agency and the same staff members to ensure consistency. The Manager also ensured the currency of DBS checks, mandatory and refresher training for staff to ensure residents were adequately supported and protected.

Birkdale has worked with an agency on a training programme, supporting agency staff back into work through the job centre, helping them back into work. Staff would work at the home for a two (2) week period, gaining experiences while being supervised by permanent staff.

On the day of our visit, the staff on duty made us feel welcome.

We heard from staff how Birkdale hit rock bottom about two and a half years ago, but it has since improved both in terms of management and staffing. We were told that all staff received mandatory training (Fire safety, First Aid, Food Hygiene, Dementia and general specialist training) and felt well supported by colleagues and management. Staff were also trained in oral hygiene. The Manager was approachable and helpful and would pull out all the stops to help staff, residents and relatives. The Manager had worked here as a Senior before becoming Manager after the previous Manager left. The shift pattern varied, some staff elected to work 12-hour shifts, but other shift patterns were accommodated for people with home and childcare commitments. No agency staff were on duty, on the day and at the time we visited.

We heard how staff were recruited to the Home following a thorough interview process, which included a DBS check and two (2) supporting references to ensure their suitability for this demanding role. All new staff progressed via an induction checklist and once completed; they were signed off by the Manager. One member of staff said, *"I am being supported well, shadowing members of staff and getting to know staff, residents and relatives"*.

Other staff comments included:

- *"I have had sufficient training; it has been very useful"*
- *"It is a lovely home"*
- *"Been here for (x) years, It's a lovely home"*
- *"Management are supportive"*
- *"Feels like a home away from home"*
- *"I have always loved it here, its friendly and happy"*
- *"The friendliest home I have worked in"*



- *“They couldn’t be more supportive”*

## Observations

The Home was generally clean and tidy and presented a welcoming environment. There were no unpleasant odours apparent in the Home, with the only noticeable smell coming from the appetising aroma of food cooking in the kitchen.

We noticed that the staff call system was activated in a room and the nurse responded very quickly to that call.

## Staff interactions with the residents

During the visit the ARs observed good interactions between staff and residents.

Staff and residents appeared to have a good rapport, and this was confirmed through various conversations with residents and relatives. People spoke highly of the manager.

## The environment of the home

On entering the main reception, we noticed a small raised lip on the threshold of the door. For wheelchair users this could present an access problem.

Some of the toilets and bathrooms were on the small side, but nothing could be done to increase their size due to building constraints. We noticed areas of the Home in need of repair and maintenance, although we were subsequently informed that certain areas of the home were due for a makeover and upgrade.

In Ashdale and Dove lounge and corridors we noticed a CCTV camera, however, the only sign we could see to alert people of CCTV was on the side of a wall leading adjoining Ashdale and Dove lounge. We reported this back to the Manager who printed a sign off and attached it to the main entrance door before our visit ended.



The Manager was exploring the option of having different coloured doors for certain areas of the Home (e.g. toilet, bathroom etc) and different coloured toilet seats. Only one bedroom had an ensuite (toilet).

We found hallways clear, with no obstacles in place. One corridor was observed to have a slight gradient, although this was not considered a risk hazard to anyone at the time of our visit.

## Additional Findings

Most residents had family support with some residents receiving daily visitors. The Home produced a newsletter every two (2) months and they had a family support group which met every six (6) months. This enabled families to connect with others who were in a similar position and although meeting attendance numbers had been low, they had started to pick up. During our visit we asked people if they attended any residents and relatives' meetings. One relative did but apparently it wasn't well supported by other relatives, which was a shame to hear.

The Home had a complaints policy, one person said "we try to resolve complaints as soon as we get them. If we are unable to resolve the issue, we pass it on to the Home Manager. All compliments and complaints are recorded". We heard that the Manager analysed complaints information every 3 months.

The home had a minibus that residents do not have to pay for. We heard how residents had used it when going on trips to 'Cosford and British Ironworks'.

We heard from the Manager how local medical services (GP, Dentist) were used to help support residents in the home.

The Home operated the red bag scheme (a scheme to help provide a better care experience for care home residents by improving communication between care homes and hospitals and ambulance staff, known as the hospital transfer pathway). There were good links with the Multi-disciplinary Team (MDT) for residents returning to the Home.

## Summary of Findings

- People were offered choices.
- People felt all staff were nice, friendly and relaxed.
- Staff were doing their best.
- Management were supportive to residents and relatives.
- Staff felt supported by management.
- Relatives felt supported and could talk to any staff in the Home.
- Staff got to know residents well in order to provide them with the right support.
- Staff communicated well with residents and relatives.
- The home uses symbols for doors but adding pictures would make things clearer.
- Some areas of the Home needed maintenance, specifically around flooring & carpets in some areas to ensure they were dementia friendly. The Home also needed decorating and freshening up.
- The lift was very small and some larger wheelchairs (such as electric) would not be able to access the second floor.



## Recommendations

- Continue with good interactions with residents and relatives.
- More notices for CCTV to be made available around the home.
- Explore options to mitigate problem with lip on entrance door.
- Consider introducing an Activity Board or booklet to advertise what the Home offered.
- Implement programme for maintenance and improvement of décor.
- Make all staff call points accessible.

## Service Provider Response

Healthwatch Telford & Wrekin received the following response to this Enter & View visit and report from the manager of Birkdale Residential Home in September 2019.

The carpet in Dove lounge has now been replaced with flooring that the residents that use Dove lounge the most helped to choose, the walls have been freshened up with a new coat of paint and furniture rearranged accordingly. The flooring has also been replaced in Ashdale lounge.

The Vase of flowers has been removed from in front of the call bell and all staff have been instructed not to obscure the call bell in future.

We are looking at ways of improving the raised lip at the threshold to ensure easier access.

We have freshened up the decoration since your visit and have a plan for the future.

I have placed more signage around the building informing people of the CCTV cameras that are situated in the corridors and communal areas.

I would like to thank you and your colleagues for also being considerate towards staff, residents and their families for making everyone feel at ease on the day.

## Acknowledgements

Healthwatch Telford & Wrekin would like to thank the residents and staff of Birkdale Residential Home for their contribution to the visit and our Enter & View programme.



## Get in Touch

Please contact Healthwatch Telford & Wrekin to share your views and experiences of this service or any other health and social care service in Telford & Wrekin or received elsewhere by people living in Telford & Wrekin.

We gather comments anonymously and share them with the public, service commissioners and providers to highlight areas of good practice and identify areas for improvement.



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