

Details of visit**Service address:**

Roden Hall Nursing and Residential Home,
Nr High Ercall, Roden, Telford, Shropshire
TF6 6BH

Service Provider:

Caring Homes Group Roden Hall

Date and Time:

15th July 2015 14:00

Contact details:

Healthwatch Telford and Wrekin, Meeting Point House,
Southwater Square, TELFORD, TF3 4HS

Acknowledgements

Healthwatch Telford and Wrekin would like to thank Roden Hall, residents (service users), relatives/visitors and carers, and Roden Hall 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. Telford and Wrekin Healthwatch representatives carry out these visits to health and social care services to find out how the services 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 at premises such as hospitals, residential and nursing 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 View visits 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 will inform their lead who will inform the service manager, potentially ending the visit. In addition, if any member of staff wishes to raise a safeguarding issue regarding their employer, they

will be directed to the CQC, where they are protected by legislation if they raise a concern.

Purpose of the Visit

- To engage with residents as service users of Roden Hall Nursing Home to understand how dignity is being respected in the care home environments.
- To identify examples of good working practice
- To observe residents and relatives/visitors interaction with their surroundings and with staff.
- To capture residents, relatives/visitors' experiences and any concerns they may have or ideas or change.

Strategic drivers

- The visit is part of a Healthwatch Telford and Wrekin programme of work on 'Dignity and Respect' in health and care settings, responding to evaluations of feedback received from community engagements.
- Nursing and Care homes are a strategic focus of local, regional and national programmes of the CQC, PHE/NHS, local Councils, and Healthwatch organisations.

Methodology

This was an announced Enter and View visit.

Four authorised representatives were assigned to the visit. They met with a member of management before speaking to anyone in Roden Hall Home and took their advice on whether any residents should not be approached due to their inability to give informed consent, or due to safety or medical reasons.

The representatives explained to everyone they spoke to why they were there. They spoke with 9 residents, and 2 relatives/visitors who were present with the residents at the time, to ask them about their views and experiences of the residential services.

We talked to the Roden Hall staff, management and other professionals present to hear about their contributions to the service provide; quality of care, safety, dignity and respect, and acknowledging resident and families' wishes. During the visit we would also observe the delivery of the service. Observations were gathered while walking around the care home (public/communal areas) to gain an understanding of how the home actually worked and how the Residents engaged with staff members and the residential facilities. A guidance-list of dignity and respect topics - was also prepared to support the observational activities.

When the representatives had finished speaking to staff, the residents who received the services, family members and visitors/carers, they thanked them for their time.



Summary of findings

At the time of our visit, the evidence was that the home was operating to a good standard of care with regard to Dignity and Respect.

- The report highlights the good practices we observed and shows the appreciation that the residents felt about the care they received from the nurses and carers which helped make it feel like a 'home from home'.
- We observed carers showing dignity and respect to the residents.
- Residents told us they were very happy with the care they received, and they said that the carers were really thoughtful and caring; nothing was too much for them.
- Residents feel it is their home and said they missed staff when they went on holiday.
- Residents liked the meals - they were good, and if they didn't like what was on the menu, staff would cook something else for them.
- They said that staff were quick to answer call bells, and we observed this during the visit.
- If Residents wanted privacy, they explained, they went to their room which was respected by staff.
- Staff said that it was a good place to work in and it felt homely - they treated the residents as they would want to be treated themselves.

Results of Visit

Environment and Facilities

Roden Hall is a Victorian-building residential home with nursing care. It's set surrounded by beautiful well maintained lawned areas with trees and shrubs and is located in a rural area. There is a well maintained visitors' car park to the front and a large staff parking area to the back of the house. Wheelchair access is to the rear along a rough track, entered via a ramp into the rear of the home. In a lawned area where there is a patio and table and chairs, we observed one member of staff sitting with a resident enjoying the sun and fresh air. There is a small reception area with a visitors' signing in book. Near reception is a list of quarterly and weekly activities and a notice board with names and photographs of staff who work in the home. Everywhere looked and smelled clean. A lift gives access to the two upper floors but not for wheelchairs, as there were steps from the lift to each floor level.

Note Service Provider amendment: The lift goes to all the floors in the home, except the dining room on the residential unit which has a chair lift to access this level

Roden Hall can cater for 50 residents; 24 of the rooms are en suite. They accommodate people with nursing care needs and / or residential needs. Some of the care specialisms were: cancer care, colitis and Crohn's disease, hearing impairment, motor neurone disease, muscular dystrophy, orthopaedic, speech impairment, stroke, cerebral palsy, epilepsy, heart disease, multiple sclerosis, neuropathic, Parkinson's, visual impairment, spina bifida and hydrocephalus.

Promotion of residents privacy, dignity and respect

We observed that when nursing care was being delivered to a resident, the door was closed to the resident's room. Staff asked residents if we could talk to them before we went into their rooms, or the lounge areas

Interaction between staff and residents

We observed laughter between staff and residents on several occasions; the staff seemed to get on well with the residents, and a doctor who visited residents during our visit. The staff appeared cheerful in their work, and when talking with the residents there seemed to be a good rapport between staff and residents. Residents told us that staff encouraged them to do things and praised them when they did, which made them feel good about themselves.

Top Unit

The top unit has 8 residents who required personal care and general assistance. There was one carer, who could call for assistance if the need arose. The carer told us that she had been in post 22 years. The unit was very bright and clean with a pleasant dining area and sitting area overlooking the grounds and kitchen. Residents have a menu each day to choose from, and if there is nothing to their liking, a separate meal of their choice is provided. Residents could choose to have meals in their room if they wished. We were able to speak to one resident in this area, who had been helping to dry dishes in the kitchen. The resident was very contented in the home and praised staff who cared for her. Although the resident had slight dementia she was able to knit and read. The local library provided books for the residents which were kept in a bookcase in the sitting area. The residents room was very bright with Velux windows the resident had personalised the room to their taste. The rooms had en-suite, and residents had a weekly shower, or more often if required or they asked.

Another resident we spoke with had a clean and bright room, and commented on how happy they were with everything - that the staff were outstanding. We observed that 3 alarms were in the resident's room so that the resident had access to an alarm wherever they were in the room. The resident said the staff are quick to answer the alarms. We observed this practice throughout the home whilst we were there. All residents we spoke to say this felt like their home, and family members could visit at any time, and were made to feel welcome. Another resident told us that they were very happy with their care.

Middle floor

This floor had 19 residents with nursing needs. On this floor there were two small pleasant sitting and a dining kitchen areas. We spoke to 3 residents who were all pleased with their care and their rooms. One of the residents was offered a larger room but they turned it down as their present room felt like home.

One of the residents told us the staff are wonderful and when they were on holiday they really missed them. The resident explained that they currently had a medical problem but hadn't seen the doctor. We raised this with the manager who indicated that the resident saw the doctor regularly, but may have forgotten; although she undertook to investigate the issue.

Ground Floor

We spoke with 4 residents of the 15 in the nursing unit on the ground floor. A doctor was visiting, he was well known by the residents who seemed to have a good rapport with him, as did the staff. Residents told us that the staff took them outside when it was good weather, which they enjoyed. They told us that the staff were very caring and they were well looked after, even though they hadn't been in the home long. Two residents were sitting in the lounge with the TV on, but they turned it off so that they could speak to us. The Residents told us they got on well with each other and looked out for each other; they enjoyed playing bingo and had chocolate. One of them said they would like to have things to do, because they get bored; they would like to make craft things. Although one of them said they had done some knitting, they didn't know what to do with it. One of their family members hung a bird feeder outside, as they loved to see the birds. Another family member brought in cake when she visited and they shared it, it was usually chocolate. Residents said they would like to see more cake! They told us that they have drinks regularly throughout the day but it seemed to be at set times. Two residents told us they don't have a choice at meal times but they liked the meals. The roast meals were good but if they didn't like what was on offer, staff would make them something they liked.

One of the residents told us that they had been encouraged to exercise their legs and now they could walk a few steps with a frame; staff praised and encouraged them, which made them feel proud of themselves. Another resident told us they had enjoyed being taken outside today, as they hadn't been out in months because they had been unwell. They said it was lovely outside to feel the sun, and they wanted to have a window box as they loved gardening and seeing flowers grow.

[Service Provider Response:](#) We have just purchased a window box for one gentleman to have outside his room with plants in it.

Residents commented on how marvellous the carers and nurses were. One carer in particular had done a lot for them. The residents we spoke to said the carers helped them to choose the clothes to wear during the day. Residents can get up when they wanted and go to bed when they wanted to, although on one occasion they had been asked to get ready and get into bed. One resident went on to say they told them (staff) they didn't want to get into bed yet, so staff had left them until they were ready. One carer was greatly praised by all we spoke to because they helped the residents to settle in their new home.

Relatives

We only spoke to two relatives, they were settling with a family member who had recently moved into the home.

Additional Findings

In the residential unit there was one carer day and night, and a nurse was available if required. On the nursing units during the day there were two nurses and three carers; the same for the evening shift. If available an extra carer could assist with getting the residents ready for bed. The home normally used their own staff to cover shifts, but on rare occasions they had used agency staff. All residents had a key worker and a named nurse; we observed posters in residents rooms with the names on. We also observed fluid charts in residents' rooms, which were completed regularly by carers. We noticed some residents had exercise posters on their walls, tailored to the resident's ability.

One resident mentioned that before she came to the home she had lost the use of her legs, but with the help of staff she could walk a few steps with a frame. She was so proud, and praised the staff for encouraging her, and the staff told the resident how proud they were of her. Volunteers were used - mainly students, who could help out with drinks for the residents.

Meeting with the manager

Risk assessments were undertaken before a resident came to the home followed by an admission assessment when the resident was admitted to Roden. This covered 'prone to falls', use of frames, sticks, and wheelchairs.

Medication was given to residents by nurses on the nursing floors, and on the residential floor a trained carer who had completed her medication training and was confident in administering medicines to residents. Residents who could administer their own inhalers etc could do so (as they would in their own home) but carers ensure they did not overuse them.

Fire training was done regularly; there was also extinguisher training as well as videos available for staff training. Staff members were fire marshals and there was an evacuation door on the residential top floor. One evac chair and sledges were observed on other floors.

When new residents entered the home, all their clothing should be labelled, but if it became loose overtime, staff would sew labels back in, or go re-mark them with a clothes marker pen. Residents wearing glasses have them marked with their name on the arm of their glasses; that seemed to work. One of the residents told us that an optician came to the home to test her eye sight and she was waiting for her new glasses.

We were told that a chiropodist came to the home regularly to check and attend to residents with diabetes. Other residents had their own foot care people to do their feet, otherwise the home could arrange this.

Some residents developed Dementia over the years, but staff were trained. The home used its own training which was called "Living in my world". Roden Hall had recently achieved "The Gold Standard in Palliative Care". Resident meetings were held every 2 months, and relatives of the residents could attend if they wished.

Staff were trained in moving, handling, emergency first aid and infection control.

Pull-cords in the residents' rooms were by the beds, and by the chair in residents' ensuites. For residents unable to use pull-cords, a hand bell(s) was provided. Residents commented on the quick response time of staff.

We noticed that ramps were in evidence throughout the building, and often instead of steps in many areas. Corridors were not suitable for motorised large wheelchairs. Assisted bathrooms and showers were provided, for residents who were less able-bodied.

If residents wanted to go out on trips, a local mini bus was hired. Residents were able to order daily/evening and weekend newspapers. Some residents ordered magazines, but if the resident wanted to cancel anything, the staff were happy to cancel them. Residents who had hospital appointments were accompanied by a family member or a member of staff

Recommendations

- Provide additional bird feeders and a bird bath to be installed outside / near residents lounges/ bedrooms, to give residents enjoyment in watching the birds.

Service Provider Response: There are some bird tables and feeders around the patio area, but I can get some more for the residents as I know they do enjoy watching the birds, we have also decided to purchase a bird bath.

- Identify small craft items suitable for residents to make for their rooms or the lounges, as the residents wanted to make something different and useful.

Service Provider Response: The activities co-ordinator is arranging more craft sessions with the residents, sometimes they don't always want to join in.

- Residents commented that the seating outside wasn't comfortable, perhaps cushions would help, or seat pads.

Service Provider Response: There are always seat cushions available for the outdoor chairs and benches to make it more comfortable for the residents sitting outside.

Service Provider Response

The Service Provider Responded: The ladies that did the visit were all very nice and please thank them for me.

Resident Feedback: *Two residents told us they don't have a choice at meal times, but they liked the meals.*

Service Provider response: There is a good choice of meals on the menu, so residents are able to choose what they would like to eat, particularly if they don't like the first choice offered.