

## Enter and View Report

Details of visit:	Meadow Court
Service address	Meal Hill Lane
Service provider	Hill Top, Slaithwaite, Huddersfield, HD7 5EL
Date and time	3 <sup>rd</sup> November 2015, 10am-12pm
Authorised Representatives	Katherine Sharp, Dave Rigby, Lisa Hodgson, Lynne Keady
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### Acknowledgements

Thank you to all the service users, staff, visitors and relatives at Meadow Court, residential home who spent time talking to us about their experiences of using services or working here.

Thank you to Debra Whitehead for helping us to arrange our visit and for talking to us about how the service operates and for taking the time to show us around Meadow Court.

### Disclaimer

Please note: This report relates only to a specific visit and the report is not representative of all service users (**only those who contributed within the restricted time available**)

### What is Enter and View?

Enter and View is a visit to a health or social care setting by Authorised Representatives of Healthwatch Kirklees as a means of gathering evidence of people's experiences. Enter and View is one of the many tools used by Healthwatch Kirklees to gather opinion. The visits are not a formal inspection or part of an investigation.

**Healthwatch Kirklees have a right to carry out Enter & View visits under the Health and Social Care Act 2012.**

Enter and View visits give service users, carers and staff the opportunity to speak to an independent organisation about their experiences of health and social care services. They may talk to us about things which they feel could be improved, but we also want to find examples of good practice so that we can recognise and promote things that are working well. The visits may look at a single issue across a few settings or may be in response to local intelligence about a single setting or from an area we have not visited before to understand how services work.

## The Service

### Purpose of the premises/service

Meadow Court is registered to provide residential, day care and respite services to older people.

### Staffing and client numbers of the day of the visit

On the day of Healthwatch Kirklees' visit there were 32 Residents at Meadow Court. It appeared that a new resident may have arrived whilst the visit was taking place. Staff on the day of the visit were Darren, Debra and Stacey (joint owners and administration), 1 manager, 3 care staff, (1 care worker shadowing other staff members), 3 kitchen staff, 2 cleaners and 1 laundry staff member. There was also a student from college at the time of our visit who was speaking to and spending time with residents; we were told this student will be visiting three times per week.

## The Visit

### Methodology

We completed an announced visit of Meadow Court which took two hours and twenty minutes to complete. During the visit we consulted with residents, visitors, visiting health professionals and staff.

We agreed that this visit would be informal. We used prompt sheets with questions relating to food choices, activities and choice and dignity; questions were not asked in a specific order, nor were all questions asked of all people. It was hoped that this unstructured method of speaking to people would help to engage them in free-flowing discussion on their experiences of using Meadow Court. We noted people's comments as they spoke to us, after getting their consent to do this.

In addition, we wanted to report on the overall impression of Meadow Court, including the atmosphere, appearance and smell and whether clients seemed satisfied to be there. We used the five senses method to do this.

### Focus/Strategic driver

The focus for this visit was to gather feedback on how the service ensured that residents were able to make choices about their care. Additionally we looked at activities provided and food and menu choices. Healthwatch Kirklees has not visited this postcode area before and wanted to learn more about the service and how it is run.

### Who we spoke to

Residents, visitors and staff had the opportunity to speak to us directly. Visitors could also fill in a survey about their friend or family member's experience at Meadow Court. Staff also had access to a survey about working at the service which they were able to post in our ballot box at the time of the visit. Service users and relatives were given instructions on how to 'star rate' the service on the Healthwatch Kirklees website.

# Overall Impressions

## Premises

Meadow Court is a family run residential home. It's a two story building which is well maintained; the shrubbery and patio looked well-kept, apart from a number of stacked chairs at the front of the building - some of which had fallen over.

Residents bedrooms are all situated on the first floor, with lift access. These are all single rooms, although they do have a couple of rooms which could be made into doubles if required and they have accommodated couples in the past. The communal lounges and dining rooms were all situated on the ground floor. During our visit we only visited the ground floor. The entrance has double doors; the first of the doors led to the foyer which is open to all visitors. Signing in sheet, leaflets, training certificates and sanitizer gel were in this area and the Healthwatch Kirklees poster was displayed on the wall. We noticed a sign to say one member of staff had a severe latex allergy. The second door was the secure door into the home; we waited a little while before the door was answered in a friendly manner.

The reception area is large with seating areas and the full windows gave a good view of the outside area for residents who sat here. It is a warm and homely area with comfy chairs, pictures on the wall and a dresser with ornaments and photos. There is a building layout plan; the bedroom buzzer system; fire panels plus hand sanitiser gels and a fire extinguisher also in this area. There are homely touches such as flowers and plants throughout the home in the communal areas plus a jar of sweets for residents to guess how many were in.

The communal areas include many different styles of chairs and a good selection of areas where residents could sit. At the time of our visit, the lounges were well lit and décor was fresh with clean looking carpets. There were soft furnishings, lamps and ornaments in all rooms with a well-stocked books and magazines shelf in one of the rooms. A resident budgie was in one of the lounges; this was the second bird obtained, when the previous one looked unwell it was replaced and re-homed so that one resident who was attached to it didn't get distressed when it passed on which shows sensitivity to residents' feelings. The temperature was comfortable and it was noted that residents were using blankets if needed. A resident said *"It's always warm"* (About the temperature) when they were stating the good things about the home. The television was on in one lounge.

The conservatory was a light, bright area with comfortable chairs placed down either side of the room. There was a computer in this area at the end which looked a little out of place, but a good vantage place for staff using the computer to monitor residents' needs. There was also access to an outside area.

The dining room was attractively set for lunch with napkins on the table but the lighting was dark in this room and the floor covering looked a little tired. There was a water dispenser at one end of the room and music from this room could be heard throughout the home.

The outside courtyard 'Secret Sensory Garden' had open door access for all from the dining area. This is a safe, secure and pleasant area with artificial grass, benches, plants, bird feeder and an awning to provide shade during summer. We were told there was an option

to do some gardening if the residents wanted and we were told that a lady often “*dead headed*” the plants. Some upstairs rooms also looked over the courtyard.

Walking frames were available for residents to use and seat cushion pads to make seats higher or more comfortable were available. Two of the authorised representatives said they had witnessed no unpleasant smells while visiting the home. The other two disagreed stating there was a slight unpleasant smell of urine, mainly in the entrance but no masking artificial smell.

The office we initially met in was also used by some residents who wanted to watch television on their own but we were told there are plans for this to be changed. At the time of our visit it seemed to be used for storing various boxes, gloves and equipment.

The bedroom alarm was ongoing at points in our visit which was distracting. This was later discussed with the owner who explained that it wouldn't have been just one bedroom calling but multiple calls. The bell is continuous until the last call is answered. Managers can investigate length of time taken to answer calls and they keep a regular check on this. We were told that visitors have also commented on this before.

## Accessibility

The home had good signage at the drive entrance with a small car parking area available. There is an open door policy for visitors at any time and the home encourages visitors to stay for some meals when a resident first moves to the service so they can feel comfortable in their surroundings. There was ramp access to the rear outdoor area via French windows in conservatory.

Although some areas such as the kitchen had signs which said, “Staff only”, we didn't see many signs on doors for toilets or bathrooms.

## Health and safety

In discussions with staff the positive initiatives that were mentioned were the work on nutrition. The home had taken advice and training about M.U.S.T (**Malnutrition Universal Screening Tool**) scores from Locala. This is a traffic light system for staff to check residents' food and liquid intake. The home focuses on nutritious, calorie boosting meals as opposed to the automatic use of fortified drinks. The checking of BMI which is done on admission is kept up to date by regularly monthly weight recording after bathing.

We were told also about a new system that was being introduced - the individual dosette boxes of medication for residents. The home was looking at changing to another pharmacy who provide this service. Body mapping graphs for creams applied on residents was also in place to make it safer for staff to administer.

The home are currently using the tele-medicine service with Airedale Hospital to get consultations with clinicians when needed. We were told residents' care plans are now electronic and are updated on a regular basis by staff, which overcomes the hand written and sometimes difficult to read plan which was previously in place. There are options to free type any personalised or unusual information in the plans and time is allocated at the end of each shift for updating information. Residents' night observations are taken at two

hourly intervals- midnight; 2am & 4am where staff press a button in individual rooms to confirm checks have been made; this information can be checked as needed.

Staff complete mandatory training plus other training identified, electronic reminders for refresher dates are used. Staff all should have, or be working towards, NVQ Level 2 but some are also on Level 3 and are encouraged to do this, plus specific dementia qualifications. Staff are supervised every two months.

The toilets comprised of an entrance area with a sink, which was carpeted, with the actual toilet in a separate space with lino covering the floor. The décor in the toilet was a little tired. There was a step marked by the change in flooring; this could be a trip hazard. The grab rails were positioned behind doors making them difficult to use when entering or leaving the room. The Home is aware of these issues; changes to the toilets are priority for them.

Two of the staff at the home also work part time as firemen, which means they have expertise in reducing the risk of fire at the home. When we asked, there was some misunderstanding from senior staff about where the fire evacuation assembly point was.

## **Interactions between staff and residents**

Staff were visible during our visit, and easily identified by their uniforms. The interactions between staff and residents were good; when one resident needed support during our visit, their needs were met immediately. We noted that staff spoke to residents before supporting them to move and giving medications, and continued to reassure and chat with them while procedures taking place.

A number of residents at Meadow Court have varying stages of dementia and some staff are specifically trained in this area. Senior staff had knowledge of the residents at Meadow Court and while showing us the lounges, reassured someone who had little verbal communication as well as adjusting their footstool.

Although the home was busy, the staff were focused on their roles and it didn't feel hectic or rushed; staff took the time to talk to residents while continuing with their jobs. The staff were friendly and polite and were happy to talk to us and other visitors; kitchen staff were chatty and collecting orders for lunch. We were told all potential new staff are required to undertake job shadowing prior to a final decision being taken to offer or accept employment.

A resident told us that staff members go with you to hospital when needed which they thought was a good thing.

Comments from residents:-

***“They are very good people”***

***“They try their best to do what they can for us”***

***“I think it's ever so good - the staff are good too”***

***“Can't grumble they will do anything for you”***

***“They look after you”***

The Manager informed us that they tried not to use 'bank staff' as they like the staff and residents to know each other well. She explained that care staff and cleaning staff aren't expected to take on each other's responsibilities, each staff member is there to do their own job.

Visitors said:-

*“The staff care and give excellent care”*

*“The visibility and support is given by the owners, management and the staff. The team is an excellent team who seem to work well together for the benefit of residents. Care of Mum has been excellent and if ever I had a concern it has always been dealt with appropriately”*

Staff opinion was mixed about having enough time to talk to the residents with two saying yes and another saying some of the time, two staff felt they know the residents very well and one said not as well as they would like to. All staff said that the service here for residents was very good and they would recommend to their own family and friends.

Staff said they get to know the residents by:-

*“By been with them every day at breakfast, dinner and tea”*

*“I help with the tea and coffee round so I learn names and meet new people”*

*“Care, plan, family and talking to them”*

## Food

The food is cooked on site at Meadow Court, at the end of our visit there was an appetising aroma from the kitchen. Food is served at various times throughout the day with flexible meal times at both breakfast and supper, served both early and late to accommodate resident's needs. We were told residents can eat when and where they wish. There were two menus displayed in the dining room, one of these showed the cooked breakfast menu with various types of eggs that were available to choose from and an old favourite dripping & bread. The other was the choices for lunch with a traditional Lancashire hotpot on the menu. It was a resident's birthday at the time of our visit and birthday cake was on the menu for tea which was a nice touch. Deborah told us that all puddings are low sugar, as some residents have diabetes and had been disappointed when they chose the 'wrong pudding' that was unsuitable for their dietary needs. She explained they wanted to try and introduce more food choice and variety into the menus, they mainly use seasonal ingredients.

The dining room was also used as a cinema room with a big screen at the end of the room. The tables were set for lunch with dementia friendly mats on the table with pictures of cutlery and plates to make it easier for residents. There were serviettes and condiments on each of the tables. Residents have input into meal choices when they have a residents meetings, the last one was two weeks prior to our visit, but it was confirmed that these needed to be more regular. All residents we spoke to told us that the food was good, one resident told us that there was a good choice explaining that they were looking forward to the Lancashire hotpot for lunch; breakfast was also a big hit. Residents agreed that they

normally ate in the dining room with one saying *“It’s better for you”* [eating at a table] but all residents that we spoke to were aware they could eat in their room or other places in the home.

At the time of our visit a few residents were having a late breakfast and seemed to be enjoying this, drinks and biscuits were served in the lounges during the visit and we were offered numerous refreshments. A day and date board were also displayed in this area. The home was decorated with Halloween decorations and a resident told us about the Halloween celebration that had taken place over the weekend. Another explained that they had pumpkin soup for Halloween and *“Pork pie, but no peas”*

Comments from residents:-

*“Its grand, wonderful meals”*

*“Good too much food, (I was thin before I came here) I know I can ask for a smaller portion”*

*“Dining room is nice and comfy”*

*“Can’t grumble at the food”*

*“The food is very good, really nice”*

*“I can have food and drink when I wish”*

*“It’s ok. You can’t expect it to be perfect, don’t have anything to worry about.” The resident went on to explain “I like a moderate amount of potatoes not with skins and a good vegetable like carrots. I like fish but not a very big amount.” They said they had potatoes with skins on and had to scrape them off.*

*“If I’ve had my porridge and it’s not late I have jam-bread. Not toasted though.”*

Comments from Visitors

*“The food always seems delicious the dining room is absolutely pristine, we are always refreshed with beverages”*

## Activities

The activity worker is employed to do this as her sole role; she doesn’t cover any care duties, however she will help to support residents that need assistance with eating at mealtimes when no activities are being carried out. She also accompanies residents that may need staff support while attending hospital and medical visits. She works Monday, Tuesday, Thursday and Friday 12-7pm. There is no activity worker at weekends as it is busy with people visiting their friends and relatives. No arranged activities were happening at the point of our visit due to the time, the activity worker arrived before we left.

Things that residents can get involved in are reminiscing, past life histories or memory related and seasonal activities. Residents talked positively about activities they could be involved with, both in groups such as listening to music or on their own such as watching a DVD. Residents talked about musical bingo, drawing & painting, crocheting mats and singers coming into the home. One resident explained that the drawing they had made was due to

be put up in their room, *“perhaps with a frame”*, they told us. Another said they enjoyed going to the garden centre. Another resident who was asked about activities was unsure at first but then commented that activities were *“alright”* and that they joined in if *“very good male singer”* came along.

Residents can suggest things they would like to get involved in at the residents meetings. One resident informed us that they were helped regularly to do some exercises to help with their mobility. On Wednesdays, staff provide the activities. These tend to be a film, on the newly installed big screen with ice-cream provided or outside entertainment which is booked regularly. Regular visitors to the home are singers, brass bands, storytellers and wildlife such as birds of prey and a donkey sanctuary. Reading friends come in to help residents get involved with the reading and enjoyment of books, which a resident told us they enjoyed. The home has trips out, recently went to Standedge Tunnel. Resident’s comments:-

*“I miss being outdoors in the sunshine more than anything else - I am an outdoor person”*

*“Concerts come in, a young man entertainer”*

*“Different things come in” (talking about activities)*

*“I would like entertainment at night, such as singing, as it seems a long night”*

Opinions were varied on involving visitors and relatives in choices of the planning of activities provided in the home with three saying yes and others saying unsure or no.

Visitor comments on activities:-

*“I would like a bit more variety with activities in the home and perhaps some social outings for those residents who may not get the opportunity to go out with friends or relatives, also I believe there are opportunities to engage more with relatives in such way as a relative forum. This may help a little with social outing as some relatives may be able to help out, as well as give a voice to those residents with mental capacity issues”*

## Choice and Dignity

Residents can choose to eat where they wish including in their own room should they want to and we were told that if the times for meals are not suitable then residents can eat at different times. When we spoke to residents there was some confusion about eating at different times with the majority explaining that times were set with one resident said the meals were too close together another said you could eat at different time if you were going out or had an appointment.

Residents who have limited verbal communication have been helped in the past by picture cards but this isn’t something they are doing at the moment, but it may be something that is encouraged again. It was said that staff knew the residents very well and were able to understand what their wishes were.

We were told that residents can have their own furniture in their bedrooms and can personalise their own rooms, as long as these are fire retardant. Residents confirmed this when we spoke to them later with one saying, *“I have my own drawers and pictures in my room, it’s nice”*. Another resident told us that although their room wasn’t big it was nice and they had their own television.

We spoke to residents about the choices they were able to make about their care at Meadow Court and it was apparent that they feel happy that their needs are met. A resident told us that if they wanted to go to bed early they could and if they choose to stay in bed in a morning that was fine.

*“I can go to bed when I am ready - I don’t need to ask”*

*“I can go out I’m not a prisoner”*

*“I can have a bath every day”*

*“Sometimes I get to bed later than I want to - they have to take people in turn”*

*“I can get up when I want, I get up same time as I always have 7am”*

*“I have my TV and my word-search books”*

A resident told us it’s a lovely Christmas day here, a tree in every room down here (downstairs lounges) and then a present for everyone *“I got some Charlie Perfume, lovely”*

All visitors filling in the survey agree that the home was catering for the individual needs of the person they visit and that they felt safe at the home.

Three visitors agreed that they felt involved and informed in their care with one saying sometimes and another saying no.

Visitors said the support from other health and social care services who come into the home were:-

*“Good”*

*“I believe that there is good support here and good services are accessed”*

*“Dentist- only one experience where dentist was needed and was informed by the manager that it could be a long wait. Therefore I was able to attend a local dentist with mum at that time. Would be impossible now to attend private dentist as mum is less mobile”*

Other Comments from visitors-

*“They really care about the residents and their individual needs, welcoming atmosphere”*

*“The residents are always well dressed and personal care seems to be addressed well”*

## Additional Findings

A resident told us about the washing service at Meadow Court was really good as not only did they have no washing or ironing to do but the clothes came back lovely and staff put them away too.

Residents told us what they thought was good at Meadow Court:-

*“I’m happy here”*

*“Always clean”*

*“I settled in right from the beginning”*

*“It’s really nice here”*

*“Good place, my daughter found it. We couldn’t find anywhere better”*

*“I’ve been here for 3 to 4 years - it’s a wonderful place”*

*“I would recommend it to everyone”*

*“I wish I could go back to my own home but I can’t manage there anymore - so I am well looked after here instead”*

Visitors on the survey said:-

*“Friendly homely”*

*“I would personally recommend this well run care home”*

The person I visit says *“it’s very clean place and they look after them”*

*“The staff care and give excellent care, our vicar and member of the church come and offer communion, which is greatly received. The home is bright spacious and very friendly. There never appears nay unpleasant odours.”*

The results from visitor’s surveys about how they rated the service was three people saying **“Very good”** and two said **“Good”**. Visitors rated the personal care of the person they visit as positive with three saying **“Very good”** and two saying **“Good”**

All three staff completing the survey agreed that it was very good working at Meadow Court, two agreed they were happy with their workload with the other saying most of the time. Two said they are offered further training and all said they would be comfortable speaking to a senior member if they had any concerns or problems relating to work. Staff told us what they thought was good at Meadow Court and there was nothing they would change.

*“Every member of staff really care about the residents individually”*

*“It’s homely, great Staff, lovely surrounding, great facilities within the home”*

*“Staff here are extremely good. From what I have seen they are VERY caring”*

## Conclusion

Speaking to residents at Meadow Court, the general impression was that they enjoyed living at the home, all commenting on the good food and menu choices.

It was nice to hear about future plans that Meadow Court, including plans to update the décor and new flooring. We felt the things already in place such as 'Tele med', the remote way of contacting Airedale Hospital for face to face diagnosis over the internet and the 'MUST' nutrition scoring tool used for resident's who are malnourished provided really good added value for residents. It seemed to us the owners of Meadow Court were always looking at ways to improve things for residents and staff, for example using a new pharmacy who provide a higher standard of service.

The service had a friendly feel, comfortable and homely, it was a busy environment with lots of chatting between residents, staff and visitors but it didn't appear hectic or rushed and staff interactions were caring which was lovely to see.

## Recommendations

Enter and view Recommendations	Feedback from Owner Debra Meadow Court
<p>We recommend that more regular residents meeting are arranged and a visitor forum be planned at regular intervals.</p>	<p>It has been agreed that our Activity Co-ordinator will arrange these meetings on a monthly basis, this way we will be able to include your recommendation below regarding flexible dining times, especially with any new residents so that they are aware of their choices.</p>
<p>We recommend that better promotion of flexible dining times is shared with residents as some seem unaware of their choices.</p>	<p>As above we will include this in our monthly resident meetings to ensure all our residents' especially new residents are aware of their choices.</p>
<p>We recommend that an activities board is displayed to promote the activities being held at Meadow Court. It can be as flexible as is needed, however it is important for residents to be able to see what is available and have something to look forward to doing during the coming days or week. It will also enable visitors to see what is available for their loved ones at the home and to ask them if they have participated.</p>	<p>Our activity co-ordinator will reinstate our blackboard stating our daily activities for the week ahead</p>
<p>We recommend that the Bell alert system used to inform staff as to which residents need help, needs to be re-assessed. It is misleading for visitors who hear the bell sounding for longer periods of time and mistake this as a resident who has been waiting for help, when it could be explained that the bell indicates many residents. The intrusive noise takes away the homely environment of Meadow Court.</p>	<p>We agree that this takes away from the homely environment and we have been looking on the market for a replacement system. We are currently weighing up these options, as we have quite a few areas we would like to reinvest in.</p>

## Update on recommendations -11<sup>th</sup> October 2016

We contacted Meadow Court for an update on the recommendations made during Healthwatch Kirklees Enter and view visit in November 2015. The chart below gives an updated account of this information -date received- 11<sup>th</sup> October 2016

Recommendation update form for Meadow Court- 11 <sup>th</sup> October 2016	
<p><b>How have the changes made a difference to the residents that live at Meadow Court?</b></p>	<p>Our activity co-ordinator has held meetings more often, but also the care staff discuss choices and changes and care plans with the residents so that if they have anything they want to raise sooner they are able to. We have tried the flexible dinning times. Residents get up at various times and enjoy a varied breakfast. Lunch can be had when residents want it and if they have had a late breakfast sometimes prefer to have their lunch later. On the other hand, some residents like routine. Mainly on the whole residents prefer to eat together. We have not invested in a new call bell alarm yet as a lot of our residents are high falls risk and we need to know who is calling, we have not found another call bell which is any better.</p>
<p><b>Have there been any other changes made to address our recommendations and if so, what difference have these changes made?</b></p>	<p>We have completed some renovations such as a new dining room floor and carpets in the lounges. We feel this has made the home more aesthetically pleasing. We still have quite a lot of changes to make i.e. a new bath which is next on our list of improvements.</p>