



# Enter and View Report

Eden Court

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## Visit Details

### Name and address of premises visited

Eden Court  
Ghyllroyd Drive  
Birkenshaw BD11 2ES

### Name of service provider

Priory Group  
80 Hammersmith Road  
London W14 8UD

### Date and time of visit

Tuesday 22<sup>nd</sup> July, 2014 from 10am to 12pm

### Authorised representatives undertaking the visit

Katherine Sharp and Laila Charlesworth

### Contact details of local Healthwatch

Healthwatch Kirklees  
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## **Purpose of the premises/service**

Eden Court is registered to provide personal and nursing care for 45 older people; care types include respite, palliative, residential and day care. Some residents fund their own care, whilst others are publicly funded through the local authority.

## **Staffing/client numbers on day of visit**

On the day of Healthwatch Kirklees' visit, there were 35 residents at Eden Court, one of whom was in respite care.

On the day of the visit, there were two nurses, six carers, kitchen staff and the manager, Laura Clegg at the nursing home.

## **Acknowledgements**

Thank you to all the service users, staff, relatives and carers at Eden Court who gave us a warm welcome and spent time talking to us about their experiences of using services or working here.

Thank you to Laura Clegg for helping us to arrange our visit and for talking to us about how the service operates

## **Focus of visit**

The focus for this visit was to gather resident, carer and relatives' feedback on how the service ensured that residents were able to make choices and feel dignified, and to speak to staff about working at the service. Additionally, we observed the facility to get a general feel for the place and learn more about the service. Further information relating to the activities and food provided at Eden Court was also obtained.

## Methodology

We completed an announced visit of Eden Court which took two hours to complete. During the visit we consulted with the manager, service users, relatives and staff.

It was agreed that the visit would be informal and that prompt sheets using questions based around choice and dignity would be used, although these questions would not be used in a specific order or asked of all clients. It was hoped that this unstructured method of speaking to clients and relatives would help them to engage in a free-flowing discussion based on their experiences of Eden Court.

We introduced ourselves and noted people's comments as they spoke to us, after getting their consent. Some of the clients had mild to moderate dementia or hearing impairments, so we spoke clearly and naturally talking about one topic at a time.

We offered extra information about Enter and View visits when needed to those that wanted it and generally kept staff conversations to less than five minutes in order to not disturb service delivery.

## Who we spoke to

On the day of the visit, we spoke to residents, relatives and staff. We were unable to speak to everyone as some people were resting, or in their rooms and also because of the limited time we had at the venue.

**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).**

## Overall impression

The two-storey property was modern and well-maintained. It was welcoming with newly purchased patio furniture outside reception, where we observed a resident enjoying breakfast in the sun. There was also a secure garden featuring more patio furniture and a well-maintained lawn bordered by

fencing and some mature trees. Ample car parking facilities are to the front of the property.

After a short period of waiting on arrival, a resident let us into the nursing home making us feel welcome, it was lovely to see that she felt at home enough to do so. A staff member quickly followed and asked us to sign the visitor's book while he went to fetch Laura, the manager. Although there was no formal reception area, the entrance was welcoming and homely with comfortable seating.

After a quick chat with Laura who has only been at the service and in post for two months to obtain some information about the home, we were shown around the lower floor communal rooms. These comprise of a lounge, a restaurant-styled dining room, a smaller second dining room (which is generally unused, but celebrations are occasionally held in there), bedrooms and offices. The remaining bedrooms are upstairs, however Healthwatch Kirklees did not visit any accommodation on the first floor.

The home is open plan with residents being able to sit wherever they want and the environment was calm. Although the staff were busy, no one seemed to be rushed and the staff were friendly and seemed readily available to those residents who needed attention.

The smaller dining room was identified as the area in which we could have private one-to-one talks with staff. When we walked past the room and later accessed it to talk to staff, we saw that medication had been left unattended on a table in there, although there was a staff member nearby. We spoke to the manager about this, who informed us that the room could be locked but also confirmed that the medication had been delivered that day and shouldn't be left unattended. We spoke to another staff member who explained that this was a monthly occurrence and there is no other room in which to "count up" the medication.

The lounge was large and although it was open plan, it was split by a large pillar into two natural sections. When we entered it from the hallway, the front section was darker with a television on the wall. Chairs were in small clusters throughout, encouraging socialising, however many of the residents were asleep. Music was playing rather loudly with the television also on in the background. Another seating area to the rear of the lounge (around the pillar) led to the garden; this area was brighter with the sunshine streaming through. Although the weather was very good that day, no one used the outside space while we were at the home. We also noticed that many of the residents who were asleep in the lounge when we first arrived, were still sleeping in the

same chairs and positions; some of whom had no support for their heads or were bending over quite awkwardly.

When entering Eden Court, one of the Healthwatch Kirklees Advisors felt that the scent of urine prevailed in the entrance, hallway and lounge, however the smell disappeared later in the day. However the other Advisor did not detect any odour. The carpets appeared clean and were unstained.

On the day of the visit a lady was providing head and shoulder massages for those residents who wanted to participate in this activity.

## Comments on activities provided

Although we did not see an activity programme, the manager explained that there is a new carer in place who is also in charge of activities. Unfortunately we didn't have time to speak with her, but learnt of various activities through talking to other staff, residents and visitors.

We were told that a lady comes in to provide head and shoulder massages once a month, a hairdresser visits the home twice a week and foot spas will soon be brought in, providing further sensory activity. However, residents can have a supported home life experience through being able to hang up laundry outside, make their own sandwiches and grow their own produce using a four-tier mini-greenhouse. Another resident likes to make jam, so the staff had intentions of setting up an area in the dining room for this person to cook using a microwave (the resident will then sell the jam at the summer fête). Other residents could read a newspaper every day to keep abreast of issues. We were also told that bands and singers come in to perform for the residents, who really enjoy the music and sing along. In addition they hold games where all residents can get involved such as "Play your cards right".

The lady who provides the head and shoulder massage is a recent addition to the activities introduced at the care home. It was her second time there on the day of Healthwatch Kirklees' visit and the residents seemed to really enjoy it. We spoke to one lady who had just had an Indian head massage and when we asked her if she had enjoyed it, she said "ooh" with a big smile on her face.

When we were in the lounge, we noticed that the music and the television were on together. The music was quite loud and it took effort and concentration to really hear what residents were saying, making us wonder how residents are able to converse with one another. We couldn't hear the

television, but found it confusing as to why both were on at the same time in the same area. While we were speaking to residents we noticed the activity worker throwing a ball back and forth with one resident, she then asked another resident if they would like to have a turn but they didn't want to participate. The activity worker was then called away to help with another task and we did not see her throwing the ball again while we were there.

When asking residents if they liked to go outside into the garden, some told us that they weren't bothered and others said that they like to go and sit or walk outside, but that it can be awkward. After one person told us that they like to go outdoors, we asked them if they went into the garden and they replied "I don't want to put on someone". The staff and relatives we spoke to also felt that residents need to go outside more, not just into the garden but also on excursions. Eden Court has no transport of its own, however its sister home Cooper House has a mini-bus. The manager explained that trips out using the mini-bus, or perhaps hiring coaches and taxis was something she is planning for the future.

#### **Comments from residents:**

*"Not much to do"*

*"The same thing is on TV every day but I like Emmerdale and Coronation Street"*

*"The music is alright"*

*"There are no activities - you make your own activity; talking, being sociable, crosswords."*

#### **Comments from visitors:**

*"The TV and music are on together in the lounge - is the music for the residents or the staff? There is even music in the corridor."*

*"I'd like them to get him out and about and taking him to sit outside."*

## Comments from staff:

*“Most of them (the residents) don’t want to get involved.”*

*“They really enjoy the singers and there was an Irish band in last week - they really interact with performers.”*

*“They need a bit more stimulation here, but we can suggest ideas we if think of them.”*

*“They could do with going out more.”*

*“There should be more activities and definitely more stimulation...definitely step up activities.”*

*“They (the residents) sing together, it’s great”.*

## Comments on choices

The dining room looked very welcoming and had a pleasant atmosphere with table cloths and flowers on each table. There is a four-week rolling menu displayed at its entrance showing the choices of meals available. There is one sitting for each mealtime here, however the majority of residents prefer to eat in their own rooms and they can also choose to eat outside. We asked the manager if residents can make their own food, she explained that residents can make their own sandwiches if this is something they’d like to do, she explained that they would set up an area in the extra dining room for them to do this.

All the residents we spoke to on the day of our visit said that they liked the food. One person said that the dining room was nice but that they eat when the staff want them to. However when questioned further, this person also said that they had never asked to find out if they can eat at a later time. Other residents confirmed on separate occasions that they could “more or less” eat and drink when they wanted.

One dining room staff member explained that they note when a resident hasn’t eaten and then informs the carers or nurses. They confirmed that residents can eat at different times of the day, for example if a client is asleep, they will put a meal aside for that person to eat later.

We also noticed that residents had access to a selection of drinks and were being served tea or coffee by staff when they were in the lounge.

## Comments from residents:

*A resident told us about the bacon and scrambled eggs he had eaten:*

*“You don’t get that in a hotel.”*

*Another couple of residents spoke about food:*

*“Sausages and bacon were nice. The food’s alright here.”*

*“The food varies, but there is always something I like.”*

## Comments from staff:

*“I ask them what they like to eat. It’s their choice and if they can’t tell me, I watch their body language as I say “beef burger” or “fishcake”.*

## Comments on dignity

When speaking to residents, the overriding feeling was that they felt they were treated with dignity, that staff knew them, addressed them respectfully and knew what they liked. A member of staff as well as some relatives confirmed that staff get to know about residents’ preferences through daily interaction, reading care plans and obtaining information from visiting friends or family. Those residents who were asked and could communicate more effectively, confirmed that they could go to bed or eat whenever they wanted and had their own television sets in their bedrooms.

We spoke to residents about privacy and if they felt that this was respected at Eden Court. One person said “people come in and go” and another told us that people respected his privacy at Eden Court.

We also asked residents if they were happy with the way they were addressed, i.e. by their first name or Mr./Mrs. Most of the people we spoke to said that they liked being called by their first name or that it was fine and they weren’t bothered.

When asking residents and their relatives if they felt involved in their care, the predominant response was that this was indeed the case.

A visitor told us that they had purchased some clothing for their loved one. However these items had gone missing even though they had been clearly

labelled. They were frustrated because the staff have not provided an answer when they were asked where the new clothes were.

#### Comments from residents:

*When asked what the best thing was about Eden Court:*

*“Friendly”*

*“My room’s nice”*

*“I like the place. The staff are alright; they must like other people or else they wouldn’t do the job.”*

### Additional Comments

#### Comments from residents

*When asked what they thought about the care home:*

*“Not bad, it’s alright”*

*“Wouldn’t change anything”*

#### Comments from relatives and carers

A visitor explained that they felt involved in their loved one’s care, however didn’t always get answers (e.g. has the optician visited). They also had some concerns; the home seemed to be short-staffed on one occasion and the residents in the lounge were left alone for ten to fifteen minutes so that all the staff could go and get a drink.

Another visitor told us that there should be more staff as they are rushed off their feet and there are a shortage of one-to-ones between staff and individual residents.

*“Staff don’t have the chance to chat - it’s not their fault, it’s the fault of the owners.”*

Other comments:

*“The place itself couldn’t be better”*

### Comments from staff

Staff like working at Eden Court and although they are busy, they enjoy their jobs and every day is different. However one told us that there sometimes is only one nurse working a shift rather than two, which is difficult for the nurse who is working alone.

*“It could be better here...they waited quite a while to get management in place. There should be more support, but waiting for a manager, we’ve suffered a bit. It’s getting better now a manager’s here. It’s a really good home and a nice size. I’d give it four stars but want it to have five.”*

*“I love working here. I love oldies.”*

## Conclusion

The overall impression of Eden Court was good. Clients generally seemed to be satisfied with the service they receive and they feel staff treat them well. Although the staff seem very busy, they have managed to create a generally relaxed atmosphere for their clients.

It seems that the nursing home is taking steps to increase the activities available for the residents and having a new manager in place is having a positive impact on both staff, residents and their relatives.

## Recommendations

1. We recommend that the medication policies and procedures are re-examined to ensure safety procedures are met.
2. We recommend that an activity plan is put in place to ensure that residents are aware of a range of indoor and outdoor activities and can take part in what is available.

3. We recommend that the activity worker is allocated specific times of the day when she can solely focus on the entertainment/activity needs of the residents. Other staff should then be made aware of these times so that they don't interrupt activities or take the activity worker away to help them with other tasks.
4. We recommend that the patio furniture in the garden is moved from around the side of the house, to the section of garden immediately (or as close as conveniently possible) outside the lounge area. Regular exercise, fresh air and natural light are important for a person's well-being and visibly seeing the patio furniture would encourage and invite people to go outside. This shorter distance between an outside seating area and the lounge would make sitting in the garden more accessible to those residents who can walk, make it easier for staff to help those who can't walk as the process is over a much shorter distance and will enable staff to monitor/ physically see those residents who are sitting outside.
5. Although music can be calming to those people who have dementia or Alzheimer's, both media sources playing at the same time could be confusing to some people. The high level of sound could also be making it difficult for people to converse. For these reasons, we recommend that music and the television are not on at the same time.
6. For the two hours that we were at Eden Court, we saw many of the same people left sleeping in the lounge chairs for entire time - some of whom were in really uncomfortable positions without their heads being supported or their backs bending quite deeply. We recommend that Eden Court reviews their protocol regarding people remaining in the same position for an extended period of time.

## Provider Feedback

| Enter and view Recommendations  | Feedback from Laura Clegg<br>Manager Eden Court  |
|---|--|
| We recommend that the medication policies and procedures are re-examined to ensure safety procedures are met. | I note your comment about the medication in the small dining room which we spoke about on the day of the visit. Normally our medication is delivered by Boots straight into the clinic room which is locked. On that day, the nurse asked Boots to deliver |

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|   | <p>into the dining room where she opened the locked bags to commence checking in. One of our other nurses then came in to complete this process. This issue was addressed immediately and staff have been advised that this is not acceptable. The medication is never left unattended normally. Having spoken with all of our other nurses, they have advised that this has never been done before.</p> |
| <p>We recommend that an activity plan is put in place to ensure that residents are aware of a range of indoor and outdoor activities and can take part in what is available.</p>  | <p>To advertise for a full-time Activities Co-ordinator.</p>   |
| <p>We recommend that the activity worker is allocated specific times of the day when she can solely focus on the entertainment/activity needs of the residents. Other staff should then be made aware of these times so that they don't interrupt activities or take the activity worker away to help them with other tasks.</p>  | <p>Once Activities Co-ordinator in place, his/her hours will be protected. All activities to be advertised in the main foyer.</p>  |
| <p>We recommend that the patio furniture in the garden is moved from around the side of the house, to the section of garden immediately (or as close as conveniently possible) outside the lounge area. Regular exercise, fresh air and natural light are important for a person's well-being and visibly seeing the patio furniture would encourage and invite people to go outside. This shorter distance between an outside seating area and the lounge would make sitting in the garden more accessible to those residents who can walk, make it easier for staff to help those</p> | <p>The garden furniture has been used regularly since your visit! The raised area immediately outside the French doors is small and not really suitable due to lack of space, but we have some more we can arrange around the garden, closer to the conservatory.</p>  |

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|---|---|
| <p>who can't walk as the process is over a much shorter distance and will enable staff to monitor/physically see those residents who are sitting outside.</p>   |   |
| <p>Although music can be calming to those people who have dementia or Alzheimer's, both media sources playing at the same time could be confusing to some people. The high level of sound could also be making it difficult for people to converse. For these reasons, we recommend that music and the television are not on at the same time.</p>  | <p>Normally we only have the television OR music on; this has been rectified and has not happened since your visit. The domestic also had some music on her trolley which I have told her to stop.</p>  |
| <p>For the two hours that we were at Eden Court, we saw many of the same people left sleeping in the lounge chairs for entire time - some of whom were in really uncomfortable positions without their heads being supported or their backs bending quite deeply. We recommend that Eden Court reviews their protocol regarding people remaining in the same position for an extended period of time.</p> | <p>Staff have referred four residents to the Occupational Therapist for suitable chairs. All residents who are high risk on their waterlow assessment tool are moved every two to three hours which is PRIORITY policy and documented on a position change chart.</p> |