

healthwatch

North Somerset



Enter and View Report

Cherrywood House

16/05/17



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Visit Overview

Service Name and Address: Cherrywood House, 6 Eastfield Park,
Weston-Super-Mare BS23 2PE

Registered Provider: Priory Adult Care

Type of Service: Care Home Only (Residential Care) - privately owned. Registered for a maximum of 14 Service Users. Learning Disabilities and Mental Health Condition

Specialisms: Autism/ASD and Challenging Behaviour

Registered Manager: Melanie Ben Khadra

Date and Time of Visit: 16th May 2017, 9.30am to 12.00 noon

Enter and View Team: Delyth Lloyd-Evans and Karen MacVean

About Healthwatch North Somerset

Healthwatch North Somerset is the local independent voice for health and social Care services. We work with local people to improve services for people who live, or access services in North Somerset, gathering local views and experiences and acting on them to make local services better, now and in the future.

Healthwatch North Somerset's statutory function and remit, which is laid out in The Health and Social Care Act 2012, is to provide a voice for people who use health and adult social care services, by:

Influencing

- Giving people an opportunity to have a say about their local health and social Care services, including those whose voice isn't usually heard
- Taking public views to the people who make decisions - including having a representative on the Health and Wellbeing Board (People and Communities Board in North Somerset)
- Feeding issues back to government via Healthwatch England and the Care Quality Commission (CQC)

Signposting

- Providing information about health and social care services in the local area
- Advising people on where to go for specialist help or information (signposting)
- Helping people make choices and decisions about their Care
- Working closely with other groups and organisations in the local area.

Enter & View

In order to enable Healthwatch North Somerset to gather the information it needs about services, there are times when it is appropriate for Healthwatch North Somerset staff and volunteers to see and hear for themselves how those services are provided. That is why the government has introduced duties on certain commissioners and providers of health and social care services (with some exceptions) to allow authorised Healthwatch North Somerset representatives to enter premises that service providers own or control to observe the nature and quality of those services.

Healthwatch North Somerset Enter and Views are not part of a formal inspection process, neither are they any form of audit. Rather, they are a way for Healthwatch North Somerset to gain a better understanding of local health and social Care services by seeing them in operation. Healthwatch North Somerset Enter and View Authorised Representatives are not required to have any prior in-depth knowledge about a service before they visit. Their role is to observe the service, talk to service users and staff if appropriate, and make comments and recommendations based on their subjective observations and impressions in the form of a report.

This Enter and View report is aimed at outlining what they saw and making any suitable suggestions for improvement to the service concerned. The report may also make recommendations for commissioners, regulators or for Healthwatch North Somerset to explore particular issues in more detail. Unless stated otherwise, the visits are not designed to pursue the rectification of issues previously identified by other regulatory agencies. Any serious issues that are identified during a Healthwatch Enter and View visit are referred to the service provider and appropriate regulatory agencies for their rectification.

Legislation allows ‘Enter and View’ activity to be undertaken with regard to the following organisations or persons:

- NHS Trusts
- NHS Foundation Trusts
- Local Authorities
- a person providing primary medical services (e.g. GPs)
- a person providing primary dental services (i.e. dentists)
- a person providing primary ophthalmic services (i.e. opticians)
- a person providing pharmaceutical services (e.g. community pharmacists)
- a person who owns or controls premises where ophthalmic and pharmaceutical services are provided
- Bodies or institutions which are contracted by Local Authorities or the NHS to provide health or Care services (e.g. adult social Care homes and day-Care centres).

Key Benefits of Enter & View

To encourage, support, recommend and influence service improvement by:

- Capturing and reflecting the views of service users who often go unheard, e.g. Care Home residents

- Offering service users an independent, trusted party (lay person) with whom they feel comfortable sharing experiences
- Engaging Carers and relatives
- Identifying and sharing 'best practice', e.g. activities that work well
- Keeping 'quality of life' matters firmly on the agenda
- Encouraging providers to engage with local Healthwatch as a 'critical friend', outside of formal inspection
- Gathering evidence at the point of service delivery, to add to a wider understanding of how services are delivered to local people
- Supporting the local Healthwatch remit to help ensure that the views and feedback from service users and Carers play an integral part in local commissioning.

Purpose of the Visit

Healthwatch North Somerset is carrying out a series of visits to Social Care/NHS funded accommodation/services in North Somerset to ascertain the quality of life and experience and opinions of residents. Cherrywood House was selected because it provides services to adults with learning difficulties and mental health conditions.

This report relates only to this specific visit and feedback we have received directly at Healthwatch North Somerset during the same time-period. It is not representative of all service users, only those who contributed within the restricted time available, through interviews or other feedback.

How was the Visit Conducted?

The visit was an announced visit with the Manager being given 2 weeks' notice. We sent letters, posters and leaflets to the home to inform residents, relatives/carers and staff about our visit and about the role of Healthwatch North Somerset. We observed the condition of the premises, the interaction between the staff and residents and we spoke briefly to approximately 6 residents, and 4 staff members who were on duty at the time of the visit. We also spoke with the Manager at the start of the visit and at the end to clarify any questions that had been raised. We did not speak to any family members, as there were none present at the time of our visit to Cherrywood House.

Observations and Findings

We found Cherrywood House to be a large detached pleasant looking Victorian house set in its own mature well-kept green and leafy grounds. Cherrywood House is situated on a very quiet road at the top of a hill with wooded parkland opposite and views over Weston Town and the Bay.

To enter the building, we made our presence known by pressing the call button on an intercom key pad situated on the wall. The door was opened by a member of staff who introduced themselves with their name and title and asked for our names and our reason for visiting. After we introduced ourselves, the staff member asked to see and physically checked our identity badges before allowing us to enter the building. We were also asked to register in the visitor's book located in the hallway.

We noted that the hallway was large, quite bare and could do with being decorated, however we observed everywhere looked very clean and there were no unpleasant smells. There was a service user notice board with a complaints policy located on it. We saw some pictures on the wall of the main part of the hall but further down the hallway there was art displayed that had been completed by residents as well as some 3D colourful shapes. We were also greeted by 3 residents who shook our hands and introduced themselves and asked our names. The residents appeared to be very at ease and called the care worker by her first name. We noticed that the care worker responded in a friendly, familiar, appropriate and caring way.

We were taken up to the first floor where we met the Manager and we noted that her office was very tidy and organised. The Manager introduced herself and gave us some background information about Cherrywood House. The Manager told us Priory Adult care (the registered owners of Cherrywood) had transferred her from another residential home in Bristol 7 months ago. This was because there had been lots of issues at Cherrywood House which had resulted in a 'Needs Improvement' rating from CQC.

The Manager also explained that Craegmoor (who had been the original registered provider) had recently merged with Amor Care to become Priory Adult Care. The Manager identified to us some of the issues she had dealt with already and the future detailed plans she was going to implement to ensure the home got a higher rating at the next CQC inspection. More importantly the Manager advised, she wanted to meet the needs of all the residents and make Cherrywood House a safe and happy home where residents could achieve their full potential.

The Manager advised that she had had to dismiss a number of staff quite soon after taking over the management of Cherrywood House as they were not treating residents appropriately or behaving professionally, this situation had meant she had used agency staff extensively to start with, but now has a permanent full team of 43 staff including a chef which they didn't have before. The Manager also told us Cherrywood has a register of bank staff, which gave real continuity and security to residents. All staff the Manager explained, now received a comprehensive induction and ongoing training both face to face in-house and e-learning on line. The Manager showed us the staff supervision matrix that she had introduced.

The Manager explained that there were still a lot of safeguarding issues at the home, which she felt was mainly down to inappropriate placements of some of the past and current residents. The Manager advised she is currently trying to rectify this situation, through supporting some of the current residents who have complex needs to move on to a more appropriate and safer setting in a planned way. In the meantime, even though she does not receive the full funding she has implemented a 2 staff to 1 resident ratio for some individuals especially at certain 'high-risk' times of the day. By using this aforementioned measure, the Manager hopes to ensure the safety and well-being of all of the Cherrywood residents and staff members.

The Manager clarified that Cherrywood House presently has 14 beds, 2 of which were in self-contained flats, with most of the single rooms being en-suite. The Manager went on to explain that all the current residents are Local Authority funded from outside of North Somerset and there were currently 2 vacancies at Cherrywood House.

The Manager told us that it was her goal to make Cherrywood House safer for residents and staff by reducing the number of beds at Cherrywood House to 12 in total. The Manager plans to achieve the reduction in beds by converting some of the single rooms into self-contained flats and would like to make all the single rooms en-suite at the same time.

We observed that some staff had walkie talkies which they used to keep in contact with colleagues around the building.

The Manager advised that she had an open-door policy for staff, residents and visitors which we saw in action when a resident popped in and had a brief conversation with us. The office door was locked when the Manager left to show us around.

The Manager gave us a tour around all the areas of Cherrywood House which included (with the resident's permission), some of the occupied rooms and a flat. We also looked round at a couple of empty rooms that had been newly decorated and included neutral, modern curtains and furnishings. We observed that most of the single rooms, bathrooms and the flat were clean and mostly in good decorative order. We saw evidence that the rooms were personalised with items and photos of the resident. In one of the flats which was occupied by an autistic resident we saw a 3D textured painting which the Manager told us had been purchased recently and put on the wall for the resident to feel as well as look at because touch was a sensory process he used.

As we walked round Cherrywood House the Manager pointed out the changes she planned to make and we saw evidence of the implementation of these plans by the building work and decoration that had already been started.

The lounge and music room were quite bare and sterile looking, but the Manager pointed this out to us herself and told us she had plans to re-model and decorate these rooms along with the hallway quite soon. The lounge did have comfortable sofas and a wide screen TV and there was a resident using the lounge with their carer. We saw a conservatory which was being used as an art room which the Manager told us is currently under used. The Manager said to us that it had come up at the resident's monthly meeting recently that the residents would like a gym, so the manager is now looking in to how much it would cost to convert this area.

The dining room looked like it had been recently decorated and had a bright and cheerful feel with nice pictures on the wall. There were modern round tables that seated 4 people each, with very comfortable looking faux leather chairs. We observed a resident sat in the dining room engaged in an activity with their carer.

The Manager took us to the office where another resident was also involved in an activity with a carer. We were shown the Kitchen, laundry room and locked medicine room. Every room we saw apart from the medicine room looked accessible, neat, tidy, clean and very well organised. The Manager told us she had got an additional sink put in the kitchen which was nearer the cooker. Previously the staff had to carry pan up a very big step to drain them in the sink.

Personal Care and Dignity of Residents

All the 6 residents we met appeared to clean and appropriately dressed. We observed Carers communicating with residents using verbal and hand signs and pictures.

Independence of Residents and Control over Daily Life

There were not many residents around Cherrywood House at the time of our visit, the Manager explained that a lot of the residents went out to work, college or outings either independently or with their Carers.

The residents that staff introduced us to, we observed, were wearing clothes and wore their hair in quite individual styles which appeared suitable to their age group and showed individual choice.

The Manager told us that if appropriate, residents did get encouragement from staff working alongside other agencies, to independently access the community. For example, go out to college, work/voluntary placement or external social/sports groups, but ultimately it was down to the residents' choice about what they did. Residents can also choose to go out into the community with a carer if they can't go independently.

The Manager advised that residents could get up and go to bed when they wanted, she told us that there were still 3 younger residents in bed at that time we visited (10.30am approximately).

The Manager explained that the residents with the support of staff were encouraged to be as independent as possible, including personal care and dressing, getting up and going out to activities or work, doing their own washing in the laundry, helping themselves to drinks and making their own breakfast or snacks, so the residents could really feel it was really their home.

We observed a resident from one of the self-contained flats in the main lounge who their carer told us, had communicated that this is where they wanted to be. This resident was using a home-made type of fidget device which they were spinning repetitively, the resident appeared calm when we were introduced to them.

The Manager told us that she had introduced monthly residents' 'Your Voice' meetings so all the residents could have a say in the running of the Home and the facilities/activities being offered. She reiterated to us that this is where the idea of the Gym had come from.

Staff Behaviour and Attitudes and Relationship between Residents and Staff

We observed throughout our visit that all staff including the domestic help interacted with the residents at an appropriate level of respect, care and warmth which appeared to be based on a good knowledge of each individual resident's need.

We saw an example of this positive attitude when we first arrived and one young resident told us they were sad, the carer kindly reminded them verbally and with hand signals about what they needed to do if they felt sad (which was to think about their memories) to help them smile again. We were later told by the Manager that this residents father had passed away recently and staff had come up with a range of strategies to help them understand and cope with the situation. One strategy staff used was to support the bereaved resident to compile a memory box with lots of personal items in such as photos etc.... We saw that the resident kept this memory box next to their bed.

As we were being shown round we went into the office where we were introduced to another resident who was working with a member of staff. The member of staff was using simple language and the wall clock to support the resident recognising the time of day and what happened next. All the residents we met appeared happy, content and relaxed with the staff and quite happy to talk to us.

Activities for Residents

The Manager explained that each resident has an individual activity plan which is reviewed regularly and is very flexible. However, the Home offers a range of general activities based on residents wishes such as art and music which residents can join in any time. As previously mentioned the monthly residents meeting has led to plans to convert the art room to a gym.

The Manager told us that an Aromatherapist comes in regularly and Cherrywood House hosts external entertainers for the residents' such as 'Spangles' who came along recently.

Food and Drink and Meal Times

We observed that there was a menu on the wall in the dining room with a varied, balanced choice of 2 mains options each day. The Manager told us the chef buys and prepares the food from fresh and that though the main evening meal was served at a certain time, residents can eat it later. She also explained that if the resident prefers they can make their own choice of food for themselves with or without staff support at a time that suits them. The residents can also eat in their own rooms/flat or together in the dining room which the Manager stated is usually the preferred option for most of the residents.

Staff told us that residents have access to the kitchen to get water or make other drinks at any time. Staff are also always on hand to support residents in meeting their needs.

Relationship between the Home and Relatives/Carers

The Manager told us that the residents very rarely get visitors because their families and friends mostly live out of area and a lot of the residents go home regularly anyway. However, she explained that if visitors do come they are very welcome and there are no specific visiting restrictions in place.

The Manager explained she has an open-door policy for relatives to come and discuss with her any concerns or issues that they have about their family member, families can also arrange to see their relatives care plans at any time. The Manager advised that families are always notified immediately of any issues, or incidents that occur. The Manager told us about her plans in the near future to implement annual questionnaires for relatives and residents, to collect their feedback and views.

Staff Satisfaction

All the staff we met were friendly, helpful and appeared confident in their roles. The Manager told us that all the team received an induction which includes essential training, there is also a programme of ongoing training. All training is delivered either on-line or in-house from either Priory Adult care or by herself as the Manager. The training programme includes Positive Behaviour Management, Proact restraint techniques and the Care Certificate Standards.

The Manager advised she holds monthly staff meetings and bi-monthly senior staff meetings in which she encourages ideas and consensus team decision making. The Manager explained that to ensure all staff who can't attend the meetings are still involved, by making sure the minutes are made available for staff to read and sign.

The Manager further encourages staff development by having a medication champion and an employee of the month suggestion box for staff to vote for their colleagues. Nationally, Priory Adult care produce a monthly newsletter for staff which we saw in the office.

The Manager showed us the matrix she has implemented to ensure all staff received individual regular 1-2-1 sessions.

The Manager stated she has an open-door policy for staff and she completes out-of-hour checks to ensure all staff receive consistent support.

Other Observations and Comments from Resident, Staff and Relatives

Excerpt from the April publication of 'Top Priority' the Staff Magazine:

Jack a resident, moved to Cherrywood in April. He has only lived there a month but already he says, "I absolutely love it here, I don't want to leave", and "I am just happy that I now have my own bed, I have never had my own bed before".

Examples of Good Practice Noted

- Strong Management, transparent about issues/problems and planned actions
- Service user involvement
- Staff involvement and support
- Well-kept Grounds

Recommendations

- The team would like to come back next year to see if all the plans discussed have been put into place
- Drinking water is available in all communal areas

Acknowledgements

Healthwatch North Somerset would like to thank Melanie Ben Khadra and all the residents and staff of Cherrywood house for their assistance in planning the visit and the preparation of this report as well as the provision of opinion and feedback.



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