

# Engagement (Enter and View) Visit Report - Shenstone House

**Service Address:** Shenstone House, Shenstone, Kidderminster, DY10 4DH.

**CQC Registered Provider:** Golden Nest Care Homes Ltd

**CQC Registered Manager:** Debbie Fidoe

**Date and Time of Visit:** 14<sup>th</sup> October (10.00am - 12.30pm)

**Healthwatch Worcestershire (HWW) Contact:** John Taylor

**HWW Authorised Representatives:** Janet Stephen

**Report Approved by HWW:** 8<sup>th</sup> January 2016



## Acknowledgments

Healthwatch Worcestershire would like to thank the residents and staff at Shenstone House for their warm welcome and the time they gave talking to us about their experiences of living or working at the home.

Thank you also to the Manager of the home for helping us to arrange the visit, showing us round and providing relevant information about the home that had been requested by Healthwatch Worcestershire.

Our report relates to findings that were observed or were contributed in response to our visit. It might not therefore be a fully representative portrayal of the experiences of all service users, carers and staff.

Our findings need to be viewed in the context that some of the residents may have illnesses or disabilities, including a dementia related illness, which may have an impact on what they have said to us. We took account of this during our visit.

## 1. What is Enter and View?

One of the legal powers of Healthwatch Worcestershire (HWW) is to carry out Enter and View visits.

HWW authorised representatives carry out these visits to publicly funded health and social care services to find out how they 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 on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies.

It is important to emphasise that Enter and View is an engagement activity and NOT an inspection. We do not have access to individual care plans or other confidential information. Enter and View is a way that Healthwatch Worcestershire can find out people's views and see for ourselves how services are provided.

## 2. What was this Enter and View visit about?

Healthwatch Worcestershire has a business priority of "Improving the Quality of Adult Social Care."

One of the ways that we are doing this is by undertaking a series of visits to adult residential and nursing care home settings. We understand that all of the settings we visit provide some level of publicly funded care.

The purpose of the visits is to:

- Understand how residents in these settings are being provided with meaningful activities that support their health and well-being.
- Identify examples of good practice

Meaningful Activity is "that in which one is engaged .... that which holds meaning and value for us ..... engages our time, attention and environment"<sup>1</sup>

Meaningful activity includes physical, social and leisure activities that are tailored to the person's needs and preferences. Meaningful activity may involve structured activities (e.g. arts and crafts, quizzes, discussion groups, music etc.), but as important can be people being involved to the level of their ability in activities of daily living (e.g. helping in the day to day running of the home) and brief moments

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<sup>1</sup> Perrin, T. May, H. and Anderson, E Wellbeing in Dementia

(butterfly moments) of connection, engagement and activity that are meaningful to the person concerned<sup>2</sup>.

Statistics from the Alzheimer's Society show that 80 per cent of people living in care homes have a form of dementia or severe memory problems. The Worcestershire Residential Dementia Service Standard<sup>3</sup> is used by Worcestershire County Council and the three Clinical Commissioning Groups. The aim is to promote care that is person-centred. Person-centred care considers the whole person; taking into account each individual's unique qualities, abilities, interests, preferences and needs, rather than focusing on their illness or on abilities they may have lost. Person-centred care also means treating residents with dignity and respect<sup>4</sup>. The Standard covers a range of areas, including meaningful occupation and a dementia specific environment. It is not a requirement for providers in Worcestershire to meet the Standard.

HWW Authorised representatives received, prior to the visits taking place, introductory training in meaningful activity (some of the content was based on the Worcestershire Residential Dementia Service Standard) and also on understanding people living with dementia. This included content on meaningful activity for people living with dementia.

### 3. How did we carry out this Enter and View visit?

Shenstone House provides accommodation and personal care for a maximum of 14 older people, and at the time of our visit there were 10 people in residence, one of whom receives regular respite care. We were told that some of the residents may develop a mild to moderate dementia related illness and the home will continue wherever possible to meet their needs, but in general the home chooses not to admit people with such a condition. Along with other homes it was selected for the visit simply on the basis of various criteria such as achieving a mixture of large and small homes, those that provide nursing care and those that do not, achieving a geographical spread across the County and a mixture of large and smaller providers. It was not selected on the basis of past or present performance. Shenstone House currently does not have the Worcestershire Residential Dementia Service Standard, and the home has no plans to specialise in this type of care.

This was an announced Enter and View visit. We contacted the Manager prior to the visit to explain about Enter and View, and what we intended to do; this was confirmed in a letter. We asked the Manager to let people know we were coming and provided posters and a short questionnaire for residents or visitors to return if they were unable to meet with us on the day. We noted that several posters were displayed prominently around the home.

Prior to the visit we developed structured questions relating to meaningful activity and observation sheets to record what we saw. We developed prompts, based on

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<sup>2</sup> Adapted from SCIE guide 15, [Choice and Control, Living well through activity in care homes: the toolkit](#) (College of Occupational Therapists) and expert consensus]

<sup>3</sup> This is based on the 50 Point Checklist authored by David Sheard in 'Inspiring, leadership matters in dementia care' (2008), published by Alzheimers Society.

<sup>4</sup> Alzheimers Society

the Residential Dementia Care Standard and our training, to help us to interpret our observations about meaningful activities.

The Manager provided us in advance with the names of people who had given their informed consent to talking with us. We also asked for and were given information about activities provided at Shenstone House.

On arrival at the home there were leaflets about our visit clearly displayed for residents and visitors. We had sent in advance questionnaires for resident and relatives to complete; we received several completed questionnaires from family members, friends and residents.

Our visit was mostly based in the main communal lounge area of the home, where several residents were present at different times, and also in a separate small lounge on the ground floor. Most residents remained in the communal rooms during our visit, which appeared to be individual choice. There were family members and friends in the home during our visit.

The visit was as informal and relaxed as possible, with staff and residents being welcoming and open. We spoke formally with the Care Manager, several staff members and had conversations with all of the residents who were in the communal areas and who were happy to talk. We also spoke with other visitors and relatives who were present.

The majority of the information we gathered came from these discussions with staff and visitors, as well as observing what was going on and general discussion with the resident group. We explained to people who we were and what we were doing as appropriate.

Shenstone House was given an opportunity to comment on the final draft of this report and provide a response before it was published - see Section 6 for their response to the report and our recommendations.

#### 4. What were the main things we found out?

- There was a very warm and relaxed atmosphere as we arrived for our visit, where we were welcomed by the Manager and a couple of interested residents. As we went through the main communal lounge there appeared to be a lot of activity and laughter as residents and staff gathered and prepared for some conversation together following breakfast. Shenstone House prides itself on its strong relationships and its family atmosphere and these aspects were quickly apparent.
- A brief tour of the communal areas of the home revealed a comfortable and homely building, with considerable effort having been invested in making the place a pleasant living environment for people to enjoy. In addition to the large communal lounge there was a dining room and a small sitting room - mainly used we were told by the gentlemen in the home - and a small conservatory area. There was an outside paved area by the conservatory which housed a couple of rabbits, and there was also a 'home' cat that brought considerable interest to the residents
- A very helpful initiative in the hallway was a large board prepared daily by staff with a 'Who am I' quiz, dates of historical events, details of the staff on duty and other useful information. This proved to be a real focal point within the home, stimulating discussion and debate among residents, staff and visitors throughout the morning. The home is commended for introducing and promoting a resource of this nature
- It was noted that the home is situated in a rural area some 5 miles from Kidderminster Town, down country lanes and away from public transport routes; there are no pavements or street lighting near the home
- The manager indicated her belief in the importance of person-centred care, and this was evident in the way staff spoke of the needs of residents, and also how they responded to individuals. There was an emphasis on meeting individual needs, while recognising the significance of the group dynamics and the importance of taking account of all views and wishes
- Several relatives and friends of residents were present during our visit, and all appeared to be treated with respect and involved in the life of the home. Those who spoke with HWW confirmed the focus on family/community and the way in which they were encouraged to take an active part
- The feedback questionnaires received reflected the positive attitude of staff and the efforts made to ensure the wellbeing of residents and to provide meaningful activities.

#### 5. Our findings and recommendations

Interaction between staff and residents that we observed appeared to be respectful, with quite a lot of laughter and affection apparent both in the language used and the nature of the relationships. We were told that the emphasis was on person-centred care and there was evidence of this in the way that staff responded

to individuals and sought to engage them in particular activities, recognising and responding to personal choices.

There was considerable coming and going of staff and residents in the communal areas of the home, with relaxed conversations taking place and what seemed to be gentle banter being enjoyed by those present. We were told that the home seeks to be flexible in providing for the interests and needs of residents, recognising that it can be difficult if activity programmes are too structured, and preferring to be opportunistic by responding to residents' views and preferences at any given time. Activities such as dominoes and baking are offered and individual attention is encouraged on occasion.

Relatives and friends were present throughout our visit, mainly in the communal areas, and one resident was using her room to spend time with her visitors. It was noted that Community Transport had been accessed for individual residents to enable them to make trips out with relatives; this facility appeared to be much appreciated and demonstrated a thoughtful approach to individual needs. We were told by residents that efforts were made to enable them to maintain interests and activities outside the home. Mention was made by staff of the 'Shenstone Bubble', by which they meant that generally people who choose to live there appreciate its quiet, rural location. Staff cars are used occasionally for trips out but it was said to be difficult to find the type of trip that would suit everyone, so it tended to be individuals who made use of the option. One resident was said to enjoy visiting a local pub and going out with friends. We were told by some residents that they would welcome the opportunity for more trips out.

We were told by staff that 'the residents tend to run the home', because they live there and have firm views about what they like. There are very few restrictions on visitors and it was evident that their presence was welcomed within the home.

## Activities

There appeared to be a good selection of resources around the home, including puzzles, newspapers, magazines, DVDs, jigsaws, and CDs. We were told that most residents appeared to enjoy quizzes, and certainly there was a lot of interaction between the people in the communal areas with topical issues and conversations about quiz shows during our visit. Picture bingo was said to be a popular pastime. One member of staff takes responsibility for doing the hair and nails of the female residents and this appears to be a popular activity.

We were told that residents were encouraged to stay active and take part in daily tasks if they were interested in doing so; one example given was of a resident who enjoyed helping with setting tables and clearing away cups. We were told that staff have taken individual residents out shopping and for coffee, and one resident has been taken out to play snooker. The home has confirmed that they will continue to persevere in providing opportunities to maintain outside interests.

A local minister visits the home once a month, and we were told that any resident wishing to maintain outside links with organisations such as churches would be supported. Members of staff occasionally brought their children into the home and this seemed to be appreciated by the resident group, introducing another element

of family life into the home. One relative was said to be a member of a local choir and arrangements have been made for them to put on a show around Christmas.

Several people mentioned the wonderful food and mealtimes appeared to be a highlight of life in the home.

### **HWW recommendations**

#### **Shenstone House could consider-**

- **The potential for involvement of volunteers with specific residents so they can have more opportunities to go out of the home for walks, shopping trips, etc.**
- **Identifying a specific activities budget to give additional opportunities**

### **Resources and Environment**

The home, as stated earlier, is a few miles from Kidderminster and in a rural location, situated about half a mile off the main road down country lanes. The home stated that they make it clear to potential residents how rural it is, and everyone we spoke with seemed to appreciate both the peace and quiet but also the outside views.

The garden area appeared to have several outdoor sitting areas and we were told that in the better weather the residents generally make good use of the grounds. There were several areas and paths (with handrails) in the main garden to the front of the house and we were told that residents cope well with the garden and are encouraged to remain active/use these areas whenever possible.

### **Involvement of relatives and the local community**

It was not altogether clear how much involvement the home has currently with the local community, beyond monthly church services and some visits to the local park and shops. However, we were told that consideration is being given to extending links locally, although no firm plans have been developed as yet.

Relatives and visitors we spoke to during our visit - and confirmed by the written feedback forms received - indicated that they were happy with the service at Shenstone House. They were complimentary in their comments about staff and positive about the range of meaningful activities available in the home.

We were told that relatives are welcome to visit the home without any significant restrictions regarding times, other than to respect mealtimes and avoid late evenings where possible, so that consideration is given to the resident group. It was clear from the interactions during our visit that there is a relaxed and informal atmosphere with relatives and friends, and we were told that views from family members and friends were welcome. We were told about a Quality Assurance form (and given copies of the document) that Shenstone House gives out twice a year to residents and their relatives, and the findings/suggestions are collated and considered before being displayed on the notice board.

## HWW recommendations

### Shenstone House could consider-

- Improving links with the local community so that there is greater interaction potential between the home's residents and groups/opportunities locally

There was clear evidence during our visit of a person-centred approach to meaningful activities and a willingness to engage with residents, relatives and other visitors in ways that were aimed at enhancing the quality of life of the people living in the home. Staff demonstrated a commitment to the resident group and a creative desire to involve them in meaningful activities that appeared to be appreciated by the residents and their supporters.

## 6. Service Provider Response to HWW recommendations

The Care Manager responded to the recommendations as indicated below:

- The potential for involving volunteers - Shenstone House is in a rural setting, with no public transport, unfortunately we tend not to have volunteers offering their services. This is a service I will continue to source.
- Improving links with the local community - this is a service I will continue to source.