

Engagement (Enter and View) Visit Report - St Johns Court Nursing Home

Service Address: St Johns Street, Bromsgrove, B61 8QT

CQC Registered Provider: Somerset and Redstone Trust

CQC Registered Manager: Laura Wilkes

Date and Time of Visit: 30th September 2015, 10:30 a.m. - 13:00 p.m.

Healthwatch Worcestershire (HWW) Contact: Margaret Reilly

HWW Authorised Representatives: Margaret Reilly, Alan Richens, David Saunders, Janet Stephens

Report Approved by HWW: 8th January 2016



Acknowledgments

Healthwatch Worcestershire would like to thank the residents and staff at St Johns Court who gave us a warm welcome and spent time talking to us about their experiences of living or working at the home.

Thank you also to the management of the home for helping us to arrange the visit 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 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 care home (residential and nursing) settings. We understand that all of these settings provide some level of publicly funded care.

The purpose of the visits are 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”¹

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

¹ Perrin, T. May, H. and Anderson, E Wellbeing in Dementia

brief moments (butterfly moments) of connection, engagement and activity that are meaningful to the person concerned².

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 Standard³ 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 respect⁴. 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?

St Johns Court provides accommodation and nursing care for a maximum of 42 people. 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. St Johns Court has not currently applied for the Worcestershire Residential Dementia Service Standard.

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 St John's Court 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.

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

St John's Court provided us in advance with the names of people who had mental capacity and had given their informed consent to talking with us. We also asked for and were given information about activities provided at St Johns Court.

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

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

⁴ Alzheimers Society

We spoke with the Manager, Activities Coordinator, and had structured conversations with 7 residents who had given consent. We also had informal conversations with a number of other residents.

Some of our visit was based in the downstairs conservatory area of the home, where an activity was taking place and 9 residents were present. During our visit there were no residents in the upstairs lounge area. Many of the residents were in their rooms during our visit. This is where our structured conversations with residents took place. St John Court told us, in response to our Draft Report, that “this was due to personal choice or frailty & the communal activity on that day did not interest all residents.”

We received 6 completed surveys from residents at St Johns.

The majority of the information we gathered came from discussion with staff, conversations with residents and observing what was going on.

We explained to people who we were and what we were doing as appropriate.

St Johns Court was given an opportunity to comment on the final draft of this report and provide a response before it was published. We have included the comments made in our Report. Section 6 sets out St Johns Court response to our recommendations.

4. What were the main things we found out?

- All the residents that we spoke to spoke well of staff.
- Residents told us that staff work hard and seemed very busy.
- As most of the residents were in their rooms during our visit we did not ourselves observe much of the staff / resident interaction. What we did see seemed positive and respectful.
- There are 74 staff hours per week dedicated to Activities across all 7 days of the week.
- During our visit we saw a craft group take place. We were also shown the activities plan for St Johns Court. We were told that this could change according to residents' wishes. We were also told about one to one activities that take place.
- The Activities Coordinator told us that themed days take place each month; there may be opportunities to further link these to residents interests e.g. sporting events
- St Johns are developing rooms to act as a “pub” and a “pamper” area
- We noticed some resources available to support meaningful activity in the communal areas, but there may be scope to extend this or make the resources more easily available to people.
- St Johns take people on a monthly minibus outing. An entertainer and a Tai Chi instructor come into St Johns on a monthly basis. Some residents are supported to attend church and clubs.
- St Johns has involvement from local schools, NVQ students and volunteers

5. Our findings and recommendations

Interaction between staff and residents

All the residents that we spoke to spoke well of staff.

A male resident commented that he appreciates being provided with care by male members of staff. Another resident said that they could have a joke with staff. A survey respondent described the care staff as helpful and friendly.

Residents told us that staff work hard. A couple of residents that we spoke to felt that the home may sometimes be short staffed as the staff seemed very busy. One resident told us that staff sometimes come quickly but at other times it can take quite a long time to respond to a buzzer. A resident suggested a “two tone” buzzer system, with a different sound if something was an emergency.

We also observed that staff, perhaps due in part to the size of the building, do not seem to be able to contact each other (e.g. housekeeping staff being able to contact care staff) when the need arises, other than by going to look for each other.

As most of the residents were in their rooms during our visit we did not ourselves observe much of the staff/resident interaction.

What we did see of relationships between staff and residents seemed positive and respectful. We did observe the structured activity session which is described below.

HWW recommendations St Johns Court could -

- **Reassure themselves that sufficient staff are available to respond to residents who require assistance**
- **Consider whether there is scope to improve the buzzer call system**
- **Consider whether there is scope to improve direct communication between staff members**

Activities

In the conservatory area on the ground floor we observed 9 of the residents being led in a craft session. Whilst not every resident seemed to be actively participating in the craft session the activity was being used to prompt discussion and conversation by the person leading it. They appeared to know the residents well and animated conversation on a variety of subjects related to the residents' life experience were prompted by the activity leader.

In their response to our Draft Report St Johns Court told us that “all residents had been asked if they would like to attend the activity session (glass decorating & crafts) that morning & those who wished to did attend. Unfortunately some residents choose to stay in their room or are too frail/poorly due to nursing condition. Other activities which took place this day & are recorded are: Walk to the town & coffee, laying dining tables, one-to-one chats, sing a long, played scrabble & one to one exercise session.”

Some of the resident's that we spoke to described activities that they joined in such as exercise classes (Tai Chi), scrabble and card games. 3 of the residents that we spoke to said that they chose not to take part in organised activities. Residents who responded through the survey told us that they were aware of the activities available. 4 survey respondents told us that they were happy with the range of activities on offer. A couple of residents (including through Survey responses) told us that they would like more activities to be available.

One resident told us that they would like to start a Bridge Club. One resident told us that they would welcome some further physiotherapy. Another resident reported that they found it

difficult to use the garden area as the doors are locked. It was not clear whether residents had spoken to staff about these issues.

One of the residents we spoke to described how they are involved in day to day tasks in the home. We were told by the Activities Coordinator that some of the residents were involved with activities such as sorting laundry and laying the tables, although we did not observe this during our visit.

The Manager and Activities Co-ordinator told us that there are 74 staff hours per week dedicated to Activities across all 7 days of the week. As well as the Activities Coordinator two other staff members have hours dedicated to activities. Alongside this we were told that activities is seen as the responsibility for all staff members.

There is a weekly activities programme, this is displayed on the notice board. The programme includes activities like exercise, craft, gardening, flower arranging, “pets as therapy”, group reminiscence, and morning and afternoon teas. We were told that things can change according to residents’ wishes, and factors such as going out when the weather is good. The Activities Coordinator told us that she speaks to the residents to let them know what is happening on that day. We saw that there is a monthly newsletter which includes information about activities as well as other news (e.g. birthdays and anniversaries). We were told that there are bi-monthly residents’ meeting, and activities are one of the items discussed.

The Activities Co-ordinator told us that they hold themed days throughout the month, for example linked to events such as Halloween.

One resident we spoke to told us about their interest in sport. There may be potential to use this as a theme for activities linked to current sporting events.

Both the Manager and the Activities Coordinator told us that it could be difficult to get residents in the nursing home to engage in organised group activities. The Manager told us that some of the residents may require end of life care or have high levels of physical dependency which may limit joining in with group activities.

We were told by the Activities Coordinator that activity also takes place on a one to one basis. This can include “pamper sessions”, chatting, reading and “informal” outings like going to the pub.

We asked how activities were designed to meet individual resident’s needs. The Manager told us that there is a section in the Care Plan called “Before We Met You” that sets out people’s life history and interests. A resident told us that they would welcome more opportunities to review their care plan.

The Activities Co-ordinator gave examples of how she spoke to people about their likes and dislikes and history and used this to tailor activities. We asked if each resident had a personalised activity plan setting out what they liked to do. This is not currently the case.

The Manager told us that St Johns Court has recently introduced an initiative called “Magic Hour”. During this time care workers can ask one of the activities staff to take over their duties

so that they can spend some dedicated time with the 1 or 2 residents for whom they are a keyworker. This time can then be spent in any way that the resident and care worker decide.

The Manager and Activities Co-ordinator both told us that they would welcome a “network” for activities co-ordinators so that ideas around activities could be shared and there was opportunity to learn from what others were doing.

HWW recommendations

St Johns Court could consider whether-

- Individualised activity programmes could be drawn up for each resident, or more emphasis could be placed on this within care plans, so that there is shared information about the sorts of things that the individual enjoys doing and also information about which residents are participating in activities
- There is potential to further pick up on residents interest - for example by linking activities / themes to sporting events
- There is potential to start a Bridge Club at St Johns Court
- There is currently safe and easy access to the garden areas when residents want to use this

Resources and Environment

We saw that there were some resources available to support meaningful activity in the upstairs lounge area. These include a dolls house, a couple of board games and some DVD's and magazines (dated from 2014). The television was on in this lounge but there were no residents in the lounge area at the time.

The downstairs conservatory area was set up for the craft activity that was taking place. There is a “tea shop” area, and a variety of books in a large book case. There was music playing in this area.

There did not appear to be any activities resources available in the smaller downstairs television room.

We did not notice up to date newspapers in any of the communal areas, although individual residents may have these in their own room.

St John's Court are currently setting up a room on the top floor as a “pub”, where alcohol, pub games and TV will be available. On the same floor a “pamper” area is being developed to support one to one activity. There are also plans to make the roof terrace accessible for people to sit outside.

St John's Court has just obtained a piano, we were told by a resident that this needs to be tuned before it can be used. The Activities Coordinator told us that this is being organised.

A “pets for therapy” dog comes into St Johns Court on a regular basis. There is also a budgie in the upstairs lounge area.

We asked whether St Johns used resources such as tablets /MP3 players so that individuals could have personalised access to music and could access resources via the internet which might reflect their current or previous interests. This is not currently the case, although the Activities Coordinator said she was open to this.

There is a small monthly budget for meaningful activity. This is supplemented by fundraising by staff.

The Manager mentioned that it would be useful if there was a library / resource base shared across care and nursing homes for activities - so that resources could be borrowed and returned, and there was an opportunity to try things out.

HWW recommendations

St Johns Court could consider whether-

- Further resources that individuals can use can be made available in communal areas or in other ways that make them easy for residents to access
- Funding could be identified to introduce technology that can be used to further individualise activities
- Local newspapers (such as local free papers) could be made available in lounge and TV areas to help keep people in touch with local news
- Corridor and other spaces could be used to display photographs or items (e.g. records or film posters) that stimulate interest or conversation

Involvement of relatives and the local community

We were told that once a month an entertainer and a Tai Chi instructor come in to St Johns Court.

There is a monthly trip out in the minibus for those that want to go. We were told that residents who are unable to go on these trips are offered shorter local outings such as to the park, shops or pub. Some of the residents we spoke to did not seem to realise that the opportunity to go out on trips was available.

The Activities Co-ordinator acts as the Community Links lead. There are two regular volunteers, and St Johns have links with Bromsgrove School whose students also visit. An NVQ student also helps at St Johns once a week during term time.

We were told that two of the residents continue to attend groups that they were involved in prior to moving to St Johns. Other residents are taken to church if they wish to attend.

Relatives are involved through the newsletter, activities such as coffee mornings, the annual fete and through the annual survey of both residents and relatives.

HWW recommendations

St Johns Court could consider whether-

- Opportunities to go on trips and outings could be further promoted to residents

6. Service Provider Response to HWW recommendations

Interaction between staff and residents

The Trust have a robust dependency tool which calculates staff hours in proportion to residents needs and takes into account the geography of the building. We staff over and above the hours recommended by the dependency tool and this is reviewed monthly or as residents needs change.

The home runs on very good staffing levels at all times above what our dependency tool indicates are required - typically 1-4 in the morning & 1-5 in the afternoon, which excludes the Nurse in charge & Management Team. The care team are aware of the importance of frequently popping into rooms so residents know that they are around.

Our Director of operations is currently in consultation with a provider of software to improve the call bell systems but it is unknown at this time if it is compatible with our system.

There are telephones located throughout the home to contact members of the team however, carers are often in residents rooms & this may contribute to other members of the support team not being able to locate them particularly when they are behind closed doors. A pager system may resolve this & again this is linked to the call system which is under review.

Activities

Senior members of the team & the activity staff regularly discuss individuals care plans so that we can build on these & they are included within their care plan on the history section & choices. We are planning to improve this further with life history books which will be completed in participation with the team, resident &/or family/friends

We regularly hold theme days & events which are discussed at residents meetings & planned for. In the summer we had a 'cruise' & docked in a different country each week & that day the food, clothes & décor represented which country we were in. We also regularly hold themed events around the football, tennis, rugby etc. all of which are promoted within our monthly newsletter & on the Activity Boards

Resources and Environment

All resources are made available to residents in their rooms and other areas of the home

Many residents have their own newspapers or magazines but we will look at ensuring that current magazines etc. are available in communal areas

We are purchasing a touch screen pad & we will then start building music play lists for residents who would like to listen to music, this could also potentially be used for Skyping etc. Some residents already have their own computers & are supported with this

We have contacted the local papers as the delivery is often missed here but when they are they are distributed within the home & they are also used as part of the activity discussions & reminiscence

There are already photo display boards titled 'Our Family Album' around the home which display photos taken during events & activities. We also have information boards around the corridors but we can build on this with themed areas.

Involvement of relatives and the local community

All trips are promoted within the monthly newsletter which is distributed to all residents in their rooms & they are discussed prior at resident meetings for them to say where they would like to go. They are also advertised on the Activity boards on both floors - we will look to see if we can improve this further.