



ENTER AND VIEW

Abbey Court Care Home follow up visit

Part of the Healthwatch Staffordshire remit is to carry out Enter and View Visits. Healthwatch Staffordshire Authorised Representatives will carry out these visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows 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. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation – so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand. Healthwatch Staffordshire Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Staffordshire safeguarding policy, the service manager will be informed and the visit will end. The Local Authority Safeguarding Team will also be informed.

Tel: 0800 051 8371

enquiries@healthwatchstaffordshire.co.uk
www.healthwatchstaffordshire.co.uk

Provider Details

Name: Abbey Court Care Home
Address: Buxton Road, Leek, Staffs. ST13 6NF
Service Type: Residential and Nursing
Date of Visit: 12th February 2018

Authorised Representatives

This visit was made by two Authorised Representatives of Healthwatch Staffordshire.

Purpose of Visit

At that visit, we noted several areas of concern and made recommendations. The provider responded quickly and advised of multiple actions they had taken or would be taking to address these concerns. This visit is to see the improvements that have taken place.

In order to clarify some of the details of this follow up report, below is a summary of the July 2017 reports, which outlines the areas that we will be observing at this follow up visit.

Extracts from the July 2017 report

There were several other areas of concern that we observed during the visit, details as follows:-

There was a resident walking around the home who didn't look as if she had had her hair combed in some time. * Please see feedback 2 at end of report

We observed commodes left in rooms permanently some with no lids on. * Please see feedback 3 at end of report

The Sluice room and ironing room were not locked. * Please see feedback 4 at end of report

There was a carpet cleaning machine stored in Sluice room. * Please see feedback 5 at end of report

We noted commode pots stored on shelf in a cupboard and not in the Sluice room. * Please see feedback 6 at end of report

No biscuits offered at coffee time was observed – manager stated she would address this immediately. * Please see feedback 7 at end of report

In some rooms and corridors we noticed quite a strong smell of urine – the Manager said they were slowly changing carpets to hard flooring. * Please see feedback 8 at end of report

Our overall impression was that staff are working hard on addressing issues highlighted in the last CQC inspection, that many have already been solved and some are still a work in progress.

Recommendations and Follow-Up Action

We did discuss our findings with the Manager and Clinical lead who noted down our comments and promised, where possible, to act on them immediately.

They were able to respond quickly to our observation that no biscuits were offered at coffee time, and that biscuits are generally appreciated by residents.

One of the main issues was the smell of urine in the corridor and rooms to the left of the Office, we were told that a programme of removing the carpets was in progress. We recommend that this be completed as soon as is possible.

We recommended that during the daytime it would be better if commodes were removed from the bedrooms and put elsewhere and that the spare commode pans are stored appropriately.

We also recommend that if residents insisted on having their own commode in their room continually, then there should always be a lid on it

We propose to make to follow up visit in approximately six months time.

Provider Feedback from the July 2017 report

Since the visit, we have been advised by the Managing Director of Knights Care, the owner of Abbey Court that the issues raised in the report have been addressed as follows: _

1. We are advised that they have addressed this gentlemen's concerns directly with him. We are advised the Group Staff supervisions have now taken place to address the issue and they will continue to monitor how staff interact with residents while providing personal care. In addition, food surveys have been sent out to all residents and relatives to make sure food standards are high. We are advised that if they find any areas for improvement, they will action these immediately.
2. We are advised that the lady mentioned does have her hair combed every morning and is a regular visitor to the hairdressers. She sleeps very regularly and when she wakes her hair becomes a little messy. We are advised that this is being addressed with staff and see if on waking her hair could be combed should she wish it to be combed.
3. We are advised that all commodes that are in rooms are needed. The open lid commode belongs to the same lady as in 2 above and is addressed as part of her care plan.
4. We are advised that the sluice room and ironing room being unlocked has been addressed via group supervision.
5. We are advised that the carpet cleaning machine in the sluice room has now been moved and is no longer stored in the sluice.
6. We are advised that the commode pots which were stored in a cupboard have now been removed and stored appropriately.
7. We are advised that biscuits have been made available on the tea/coffee trolley.
8. We are advised that all carpets that required changing have now been changed to hard flooring.

OUR FINDINGS ON THIS FOLLOW UP VISIT

There was still an unpleasant odour of urine as we entered the home. The manager said that they were awaiting new deodorants which activated when a door was opened, so this should help.

Following further discussion with the Manager, we have been advised that flooring had been replaced in the entrance area, but the odour noted by the Authorised Representatives had now been identified as coming from the toilet that is located near the entrance. This issue is now being addressed by the refurbishment of this toilet including new flooring, redecoration and the installation of door wafter deodourisers.

The Sluice room on the ground floor had a key pad fitted to the door, but it was unlocked and very smelly. The manager said she would remedy this.

Following discussion with the manager, she advised that sometimes the door lock did not catch properly if it was not firmly closed and that she would address this by one to one supervision to try to ensure that this did not reoccur.

With regards to the strong smell coming from the sluice room, the manager advised us that she was arranging for the maintenance man to check all the extractor fans and equipment to ensure that they were working effectively. In addition, they would arrange a deep clean of the sluice room and she intended to mark the cleaning schedule for the sluice room to be given a deep clean on a regular basis.

The manager added that the maintenance man was due to be on site for a number of weeks in order to complete the maintenance work.

The manager also advised that the programme of removing carpets and replacing with hard flooring was very nearly complete, with just the downstairs lounge, which had a mix of carpet and hard flooring, to be done and that this was due to be completed soon. Thereafter, they would replace flooring as and when necessary.

Residents numbers

The home capacity is 52. There are currently 42 permanent residents and two on respite care.

Catering

Since our last visit the kitchen has been downgraded to a 4* hygiene rating.

The manager confirmed that following the previous Healthwatch visit, food surveys were conducted and that as a result of the surveys, some changes were made to the menus. The manager also added that the chef now regularly discusses the menus with the residents and makes changes in line with the residents wishes wherever possible.

Staffing

Since our last visit staff interviews have been completed and further appointments have been made.

There are 6 members of staff, 2 nurses and 4 carers on the upstairs Nursing floor and 4 carers on the downstairs residential floor.

The Nursing Floor is managed by a Clinical Lead and the Residential Floor had a dedicated Supervisor.

The manager advised that Clinical Lead and the Supervisor were continuing to monitor the staff interaction with the residents and that the staff received regular supervisions in order to maintain standards.

Residents

The residents look clean and tidy. The interaction between the staff and residents that we observed on this visit was good. The home was preparing for lunch at the time of our visit, so we were unable to observe any activities taking place with the residents.

Activities

We were advised that the home is looking into employing an Activity coordinator for the weekends, in addition to the two Activity Coordinators that work weekdays. The current Activity Coordinators generally do one to one activities with the residents of the nursing floor and group activities with the residents on the ground floor. We are advised that key workers also take residents out on a one to one basis.

DISCLAIMER

Please note that this report only relates to findings we observe on the specific date of our visit. Our report is not a representative portrayal of the experiences of all residents and staff, only an account of what was observed and contributed at the time.