



ENTER AND VIEW

Branston Court (BUPA Care Homes Ltd)

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: Branston Court (BUPA Care Homes Ltd.)

Address: Branston Road, Branston, Burton on Trent, DE14 3DB

Service Type: Accommodation for persons who require nursing or personal care; dementia; treatment of disease, disorder or injury; caring for adults under and over 65 years

Date of Visit: 1 August 2017

Authorised Representatives

Name: William Henwood

Role: Observer and Author

Name: Robin Bentley

Role: Observer

Name: Olivia Farrer

Role: Shadow Observer

Purpose of Visit

The methodology to be used is to:

- Talk to residents about all aspects of their care and whether this is delivered in a way that promotes their dignity and independence including the ability to make choices about their daily lives.
- Talk to residents about staffing levels and whether they feel safe with the level of the care provided
- Talk to relatives, if they are available to ask if they are happy with the care provided to their relatives and whether they are aware and feel able to report any concerns/ complaints
- Speak to staff about training, turnover, support staffing levels
- Observe interaction at all levels between residents, staff manager, and visitors

And in particular:

- Check on Staff levels, particularly at night, agency usage, staff morale.
- Effect of not having permanent manager.
- Quality of care for residents, activities.
- Staff training - have staff received training on challenging behaviour?
- Have there been any reductions in safeguarding issues, since entering LSE in June 2017?
- How are the noise levels on the first floor?

Physical Environment

External

Branston Court is a purpose-built two-storey building which appeared to be in very good condition. External signage was clear. An unlocked door from the ground floor lounge opens onto an attractive south-facing enclosed garden area with covered and uncovered seating for use by residents. Gates with keypads lead on to a lawn area to which residents have access if escorted.

Internal

The front door to the entrance lobby has a snib lock. Access to the rest of the home, and between areas, is controlled by keypads. The staircases have protective gates.

There was a faint but distinct odour on entry, which permeated the home. Currently re-decorating is in progress. We were asked to sign the visitor book in the entrance lobby, which was neatly laid out with a display of documents, including the complaints procedure and the latest published CQC report.

We were shown the lobby, hallway, lounge and dining areas, staircases and corridors on both floors. The décor, furnishing and lighting was all to a high standard. Having windows on both sides, the lounge and dining areas were particularly light and airy. There is also a hairdressing salon which we were told is used weekly or as needed.

A used incontinence pad was seen on a bathroom floor at a time when all residents had been bathed.

Resident Numbers

The home has 45 places, all in single rooms. On the day of the visit 40 beds were occupied, though 2 residents were in hospital so 38 were present.

Staff Numbers

The home's staffing comprises: 2 nurses on duty 24/7 (12 posts); 10 carers morning afternoon and evening, 3 or 4 at night (43 posts); 2 Activity coordinators, parts of morning and afternoon across 7 days (54 hours); 3 domestics morning, afternoon and evening (6 posts); 3 catering staff, morning and afternoon (4 posts); 1 maintenance; 1 administrator; 2 management posts.

We were told that there had been a number of recent changes in management. BUPA's Regional Support Manager is currently in charge of the home. He was not present during our visit, as he was attending a Safeguarding meeting regarding residents of the home. We were told that a new Manager has just been appointed and they are awaiting clearance of all necessary checks.

We were shown around the home by the recently appointed Deputy Manager.

Agency Usage

Current use of agency staff comprises 1 nurse and 2 care staff on the first floor to ensure 1:1 support for the two residents who exhibit challenging behaviour.

Agencies are also used to cover staff sickness.

Two bank staff are also used, one of whom is a University Student.

Resident Experiences and Observations

All but one of the current residents lives with moderate or severe dementia and we were consequently unable to obtain their views on life at the home.

We were told that regular house meetings with residents and relatives have recently been introduced (or reintroduced), one having taken place in early July with another scheduled for late August.

Among the 21 residents on the first floor were two males who require 1:1 attention at all times due to their complex needs, including making loud noises at frequent intervals. We were told that this does disturb other residents and that currently plans are in hand to move the two from Branston Court to a more appropriate setting.

During our visit, a new call-bell system was being installed with a central control panel to identify when a resident's bell was pressed. We were told that none of the current residents has the capacity to do this, but that that hourly visits to each bedroom are undertaken.

Activities

We observed and heard evidence of a range of meaningful and stimulating activities tailored to the needs of individuals and groups of residents.

The home employs two Activity Coordinators, who between them work 54 hours a week across seven days. On a noticeboard near the entrance we saw lists of activities for each day of the current and the following week, along with photographs of recent activities and an outing. The same noticeboard also advertised a forthcoming religious service.

We watched one of the Coordinators facilitating the planning of a 'virtual tour of Europe' with a group of residents. Residents were encouraged to suggest French objects and cultural highlights that could be included in a first event. Each resident was engaged as an individual, according to their ability. This appeared to us to be a stimulating and valued session.

The Coordinator also told us of other activities this week (a cream tea, music, pet therapy with dogs, and a religious service), as well as a recent outing to a farm. The home uses the local Mobility Link to provide transport for outings.

Family and Carer Experiences and Observations

The relative of a resident who has lived at Branston Court for some months expressed 'reasonable satisfaction' with the home: good facilities and well-equipped with very good staff, though at times they could do with more of them; good food and hydration, but some concerns about the presentation of red meat in meals for someone who finds it hard to chew; awareness of monthly regular care plan reviews though had yet to participate in one; awareness of complaints procedure and having confidence to raise any issues that crop up.

We were separately told that families are encouraged to participate in the preparation of care plans and see the documents if they wish.

We observed that family members are made most welcome at Branston Court with frequent visits any time and staying for a considerable time.

Catering Services

We observed menus, with choices for all courses of all meals, and the availability of food and drink outside meal times.

We saw lunch being served on the ground floor, with residents being offered choices and given encouragement and assistance where needed. Some ate at tables and others in armchairs, according to preference and ability. The meals smelt and looked appetizing.

We were told that regular monitoring of food and fluid intake is undertaken for all residents.

Staff Experiences and Observations

We observed staff and resident inter-actions in the ground floor lounge and dining area and were impressed by the compassionate and person-centred approach of all the care staff on duty, which was clearly tailored to the individual needs and personalities of residents. Choices were always offered and reassurance given when it seemed appropriate. The number of staff present appeared satisfactory.

Care staff spoke enthusiastically about their work. A typical member of staff had been trained to NVQ level 3 and additional training has been offered in the past by managers who have completed this in house. Another told us that all the employees of the home are currently receiving additional training on dementia, delivered in-house by BUPA.

There were five carers working on the first floor, two of whom were working on a 1:1 basis with two residents who exhibit noisy challenging behaviour. A Local Safeguarding Enquiry is currently taking place. A carer said that she had been assaulted on one occasion, that there are currently not enough staff to do the job as they would like, and that two additional carers were needed on the first floor. From observation, the demands of the residents took up all the carers' time, the key factor being that two members of staff are engaged in monitoring two residents constantly, which reduces the staffing ratio for the remaining residents.

Summary, Comments and Further Observations

From sight of the facilities, and observation of and discussions with staff, we concluded that this home provides a good and caring environment. We were impressed by the compassionate and person-centred way in which the care staff and activity coordinator carried out their work, showing respect, energy and humour, and offering choices and levels of autonomy appropriate to the capacity of individual residents.

Caring for the two residents with challenging behaviour is clearly stressful for staff. We were told that this safeguarding issue is being addressed - it needs to be resolved as soon as possible.

Recommendations and Follow-Up Action

A further visit in due course could check that

- Safeguarding issues have been resolved
- The appointment of a new permanent manager has restored stability

Provider Feedback

Healthwatch received the following feedback from Branston Court.

When asked what they felt worked well about the way the Authorised Representatives carried out the Enter and View visit at their premises, they advised

“We thought everything worked really well. The pre visit information was a very good idea.”

When asked if there were any aspect of the visit which they felt did not work well or could be improved, they advised

“No, not at all”

When asked, as a provider of a service, did the Enter and View Visit help you to identify areas for improvement and if so in what way? they advised

“We have been focused on reviewing all agency since the visit”

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.