

# healthwatch

## Liverpool

### **James Nugent Court**

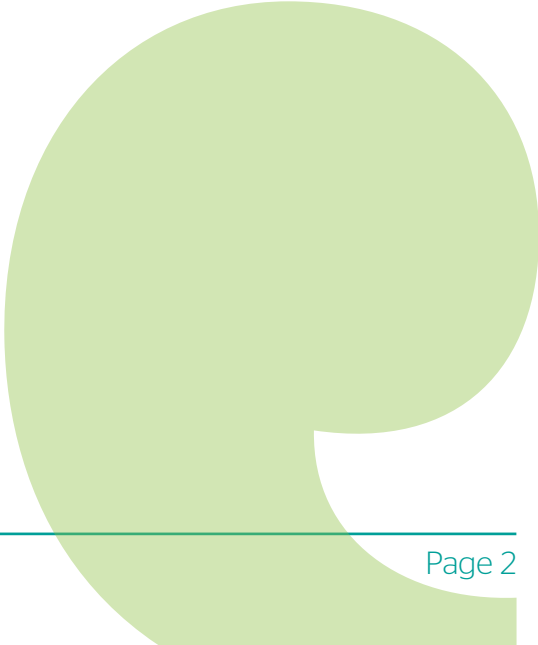
14 Ullet Road, Liverpool L8 3SR

**Enter and View Report**  
**27 February 2018**



# Table of Contents

<b>Introduction</b> .....	<b>3</b>
<b>General Profile of the Service</b> .....	<b>4</b>
<b>Observations</b> .....	<b>5</b>
<b>Feedback from residents, relatives and staff</b> .....	<b>6</b>
<b>Summary and recommendations</b> .....	<b>7</b>
<b>Safeguarding</b> .....	<b>7</b>
<b>Our Contact Details</b> .....	<b>8</b>
<b>Appendix I</b> .....	<b>8</b>



# Introduction

## What is an Enter and View Visit?

Healthwatch Liverpool has powers to carry out what we describe as 'Enter and View' visits. This assists us in our role as independent local champion for patients' rights regarding health and social care services (see the Appendix for more information). These visits are carried out by small teams of trained members of Healthwatch Liverpool staff and volunteers who observe health and social care services at work, for example at a GP practice, care home, or hospital. We only visit services that are publicly funded, e.g. through the NHS or via local authorities.

## What happens at an Enter and View Visit by Healthwatch Liverpool?

During an Enter and View visit, we talk to people who use the service, whether patients or residents, and their relatives where appropriate. We also speak to staff to find out where they think the service is working well, and where it could be improved. Observations and feedback from the visit are then collated in a report, which is sent to the provider of the service, as well as to regulators such as the Care Quality Commission (CQC), the local authority, and NHS commissioners when appropriate. If there are recommendations in the report, the service provider is asked for a response, which we later publish online alongside the Enter and View report.

## Details of the Enter and View Visit:

**Name of the service:** James Nugent Court

**Address:** 14 Ullet Road, Liverpool, L8 3SR

**Website:** <https://www.wearenugent.org/service/james-nugent-court/>

**Date and time of visit:** 27 February 2018, 10am - 12pm.

### The Healthwatch Team Members that undertook the visit were:

Amanda Brown: Volunteer

Amanda Stonehouse: Healthwatch Information and Project Officer

Laura Yallop: Healthwatch Information and Project Officer

This was an announced visit. It was judged that announcing the visit on this occasion would enable us to liaise with the service provider to publicise the visit to friends and families of residents. This would provide friends and family the opportunity of informally advocating on behalf of those residents who, for one reason or another, may not be in a position to speak for themselves e.g. some residents who have dementia can find it difficult to articulate their views.

## Why did we carry out this visit?

Enter and view visits can take place for a variety of reasons, for example to find out more about a particular service, or in response to public feedback. The Enter and View visit to Greenheys Lodge was to learn more about the service, and to find out from observations and speaking with people where the service appeared to be doing especially well, as well as finding out if any improvements could be made. The visit was not in response to any prior feedback or concerns identified relating to the quality of this service.

## General Profile of the Service

Upon arrival at James Nugent Court Healthwatch representatives were met by the home manager, Graham Penny.

### Background

James Nugent Court is a purpose built home which opened in 2013. The home is owned by Nugent, and the manager is Graham Penny. The home cares for older people (over 65) including those with a diagnosis of dementia. The homes CQC registration includes Nursing Care, but the home currently isn't providing this.

James Nugent Court has 56 ensuite bedrooms and had 51 residents at the time of our visit. There are 14 bedrooms on the ground floor and 22 bedrooms on each of the first and second floors.

The home charges £800 per week for self funders, and charges an £80 weekly top up fee for local authority funded residents.

### Discussion with the Manager

Graham Penny is very new to the role having been recruited in December and starting at the home on the 8th January 2018. Graham told the team he has identified a number of areas where he would like to make changes and spoke about his future plans.

These include:

- A recruitment drive to develop a stable staff team, and not rely on using agency staff
- Updating documentation including care plans, Personal Emergency Evacuation Plans (PEEPs) and staff files
- Changing the resident review process from annually, to six monthly. Graham said this review will also include family
- Making the home more dementia friendly, including decorating 5 areas around the home to look like a library, kitchen, laundry, pub and post office
- Creating a multi faith room which can be used by residents, family and staff

Graham told us that they have 13 care staff and 3 seniors on during the day, and 8 staff at night. They also have a full time chef and kitchen assistant, two laundry staff and three full time cleaners. Graham also told us as the manager, it is part of his job to alter staffing to ensure they are meeting the needs of the people living there.

Graham spoke about his wish to increase the amount of 1-2-1 type activities they offer residents, also about how the home are purchasing 3 or 4 Rempods (pop up reminiscence rooms) for use by the residents for reminiscence activities.

We were told there should be a key worker system in place, but currently, this isn't always happening in practice.

Graham also gave us some feedback about the GP practices that residents are registered with, the teled system and people being discharged from hospital to the home. This feedback will be included in other Healthwatch project work.

# Observations

## Observations of the Building and facilities

Healthwatch Liverpool representatives were shown around the home by Graham Penny.

- i. The home was very clean, with wide, bright corridors with sections painted different colours. There was also some tactile wall art along the corridor
- ii. There were picture frames on each door and 'memory boxes' on the wall by each room for residents and family or friends to add things to
- iii. We were shown an empty bedroom which was decorated to a high standard. Each room has an en suite toilet and shower, and the family are able to decorate the room, including choosing flooring such as carpet or laminate
- iv. One of the quiet lounges couldn't be used at the time of the visit as a delivery was being stored there. Graham explained the deliveries are now every three months instead of every month so he is planning to build two storage units outside to accommodate the extra equipment. The lounge was a quiet space with lots of old pictures of Liverpool on the walls with a nice view of the garden
- v. Upstairs along the main corridors were shelves with books and board games available for residents or visitors to sit and read or play a game
- vi. Each room has an en suite shower and the home has two assisted baths on each floor
- vii. In one of the bathrooms we saw some broken equipment and a discoloured toilet seat. The manager said he would look into this following our visit
- viii. There were toiletries and clothes in the other bathroom. The manager said he would speak with staff to check whether the room had just been set up for a resident to take a bath or if these had been left there
- ix. The home has a café decorated to look like a coffee shop. There is a menu and opening times displayed. It is available for residents and visitors to use, they don't charge but ask for a donation
- x. We saw a member of staff on duty conducting a medications round wearing a tabard to ensure everyone knows they are not to be disturbed
- xi. There are three dining rooms, one on each floor. The dining tables are set up with cloths, glasses and flowers. Each dining room has a kitchen area which can be used by residents and visitors to make food or drink while it isn't being used to serve main meals

## Observations of the Kitchen and catering area

- i. We were asked by the manager to wear white coats before entering the kitchen
- ii. We were told that food is cooked fresh on the day. The home has bread machines and they make their own bread regularly
- iii. The catering team also make cakes for afternoon tea, birthdays and other celebrations. At the time of our visit the chef was making a cake for a 65th Wedding Anniversary
- iv. Residents are offered two choices at each meal time, with other food such as jacket potato, soup, sandwiches and cheese, beans or egg on toast
- v. The staff cater for a number of diets, including medical and cultural. Graham and the chef explained they speak with family and friends to get recipes and meal ideas. Details of resident's diets are displayed on the wall for all staff to be aware of
- vi. Food is prepared in the main kitchen and is served from the kitchen area in each dining room

## Observation of Activities

- i. Graham told us they have two activities coordinators
- ii. They have commissioned OOMPH Wellness (Our Organisation Makes People Happy) to work with the staff to support their delivery of activities within the home
- iii. There was a board displayed along the main corridors which show a range of activities across the week
- iv. Many of the residents can only go out with support of staff or family members
- v. A local school visits the home each week
- vi. Occasionally a ukulele band comes to the home

## Engagement with Friends, Family and Residents

- i. We asked about resident and relatives meetings, Graham explained there hasn't been a meeting since he began working at the home. This isn't the start he would have liked but he told us he felt he needed to prioritise spending time in the office looking at practical administration tasks, e.g. Deprivation of Liberty Safeguarding (DOLS) etc.
- ii. Graham is also planning to change the review process so that this happens six monthly rather than annually. Graham said that these reviews will take place including the resident and their family where appropriate

## Feedback from residents, relatives and staff

### What did residents, relatives and staff tell us?

Healthwatch spoke with one resident on their own and another with their family.

- i. Resident said about the Home -

***[I] love this room, very, very lucky to be here. It's like a hotel. I've been here since it opened, I'm really well looked after. I was in [another home] before and they had mice.***

***When people come round looking at it for their family I tell them they couldn't put them in a better place, I've never regretted it.***

***My wife went off and the TV stopped working, they got onto head office that day and someone came out. She was here for 2 hours but got my TV working. Can't praise this place enough.***

About the manager and staff -

***He'll do, we'll keep him. It's like this all the time, it's not put on. Over Christmas a number of staff and people living here were ill and I got in touch with head office and asked them to write to the staff to praise them, they did a fantastic job.***

- ii. Family of another resident said their family member is

***A hundred times better, [they] have got better colour and posture, we are so happy and most important (resident) is happy.***

# Summary and recommendations

## Summary

The building is relatively new, purpose built and as such is well designed for use as a care home. It has wide corridors, en suite rooms and a variety of large and small communal spaces to suit a range of preferences.

The home was very clean and fresh smelling and had a number of decorations and features to make it feel homely. The corridor areas were bright and airy and the team looks forward to seeing the planned improvements.

**We observed positive interactions between residents and staff during our visit and a group of residents enjoying an activity in one of the large rooms. All the feedback we received from residents and family members we spoke with was positive, particularly about the staff.**

The manager gave us a lot of information about his short term plans for the home and as such, we are going to revisit the home in June. The purpose of this visit will be to see these changes and to speak with residents and family members to find out their views of improvements made.

## Our Recommendations and Requests

We aren't making any recommendations at this time. The manager has invited us back to the home in three months to see the changes he has planned; this visit will take place in June.

## Safeguarding

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies, and the Local Authority will be notified on the same day as the Enter and View visit.

There were no safeguarding concerns identified during this enter and view visit.



## Our Contact Details

Get in touch if you have any questions or feedback about health and care services in Liverpool:

**healthwatch**  
Liverpool

**Call: 0300 77 77 007**

**Text / WhatsApp: 07842 552 878**

**Email: [enquiries@healthwatchliverpool.co.uk](mailto:enquiries@healthwatchliverpool.co.uk)**

**Write: 4th floor, 151 Dale Street, L2 2AH**

**Website: [www.healthwatchliverpool.co.uk](http://www.healthwatchliverpool.co.uk)**

**Twitter: @HW\_Liverpool      [facebook.com/HWLiverpool](https://www.facebook.com/HWLiverpool)**

## Appendix I

### Healthwatch Liverpool - Powers to Enter and View Services

Healthwatch Liverpool was established under the Health and Social Care Act (2012) and came into being in April 2013. We work to give local residents a stronger voice to influence and challenge how health and social care services are provided. We enable people to share their views and concerns about local health and social care services to help build a picture of where services are doing well, and where they can be improved.

Enter and View visits are undertaken in accordance with the remit of Healthwatch Liverpool and assist us in carrying out our statutory functions under the Health and Social Care Act (2012). Enter and View visits are not designed to be full inspections, audits or an investigation of the service, rather they are an opportunity for us to get a better understanding of the service by seeing it in action and by talking to staff and service users.

We seek to identify and share good practice wherever possible. However, if during a visit, we identify any aspects of a service we have serious concerns about, then these are referred to the appropriate regulator or commissioners for investigation or rectification. Any safeguarding issues identified will be referred to the Local Authority for investigation. Addressing issues of a less serious nature may be done directly with the service provider.

For more information about Healthwatch Liverpool please visit our website [www.healthwatchliverpool.co.uk](http://www.healthwatchliverpool.co.uk) or contact us using the details in Section 7 of this report.

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