

# Stapely Residential and Nursing Care Home



**Enter and View Report, July 2022**

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# Introduction

## What is an Enter and View visit?

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

## What happens during an Enter and View visit?

During an Enter and View visit we talk to people using the service, whether patients or residents, and to friends and relatives where appropriate. We speak to staff to find out where they think the service is working well, and where it could be improved. We also make observations about the service.

We write up our observations and the feedback we receive and publish it as a report. Our report 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 visited: Stapely Care

Address: North Mossley Hill Road, Liverpool, L18 8BR

Website address: <https://www.stapelycare.co.uk>

The Date of the Enter and View Visit: Thursday 14 July 2022

The Time of the Enter and View Visit: 2pm – 4:30pm

The names of the members of the Healthwatch Enter and View Team which undertook the visit were:

- Sarah Thwaites, Chief Executive Officer
- Mohammed Taher, Engagement and Project Officer

- Natalie James, Engagement and Project Officer

This was an announced visit.

We would like to thank Stapely Care staff, particularly Shirley Smith, the home manager, the trustees and residents for facilitating the visit and for taking the time to talk to us.

## **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 Stapely Care 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, in addition to 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.

## **Safeguarding**

Healthwatch Liverpool 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 Liverpool safeguarding policies. 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 to Stapely Care.

# About the Service

## Background

Stapely Care is owned by Stapely Jewish Care Ltd. The home is made up of several large converted Victorian buildings. The home is a Jewish home and was originally opened to provide care for members of Liverpool's Jewish community. It also takes residents who are not from the Jewish faith. The home is kosher licenced.

The home has three units: a residential care unit, a nursing care unit, and another unit known as Fernlea. Fernlea unit was closed at the time of our visit, and the home has plans to develop it. They are interested in creating an EMI (Elderly Mentally Infirm) unit on-site, so that residents can remain at the home as their needs change. EMI units typically provide care for residents with more advanced dementia, who benefit from more specialised care and support.

Upstairs in the residential unit there are six suites. These rooms have some kitchen facilities. They are available for older people who have less support needs and are able to live more independently, but want to live in a Jewish community. We were told there is a lot of interest and a waiting list for these suites. The home are interested in developing a 'retirement village' style accommodation option on-site.

The home has space for 97 residents across the three units. At the time of our visit, there were 22 residents living in the residential unit and 22 residents living in the nursing unit.

The home charges a top-up fee of £50 a week. This largely goes towards increased costs linked to the home only providing kosher food.

Prior to the Covid pandemic, the home had its own morgue, which could be used by other members of the Jewish community in Liverpool. This was closed during the pandemic and was closed at the time of our visit. The home also has its own synagogue.

## Discussion with the manager

When we arrived at the home, we sat down with the manager, Shirley Smith, who told us about the home. Shirley has worked at the home for over 15 years, and was a care worker before becoming the registered manager. She told us that lots of the staff at the home had worked there for a long time – over 10 members of staff had been there 15 years, and the longest-serving member of staff has worked at the home for 35 years. This has real advantages in terms of staff expertise, training, and their familiarity with the residents' needs and lives.

Shirley also told us that the home's trustees play a big part in the running of the home. We were able to meet with one of the trustees, Philip Ettinger, during our visit.

Shirley told us that, when non-Jewish residents move into the home, she will sit down with them to talk about the Jewish culture and kosher food restrictions, to make sure that the home is the right place for that person. She told us that some non-Jewish residents can struggle with keeping a kosher diet, or not celebrating Christmas, and she did not want people to be unhappy living in the home.

The home works with a number of GP surgeries, including Greenbank Park Surgery and Greenbank Drive Surgery. GPs come to do 'ward rounds' at the home every week on Tuesday afternoons and Wednesday mornings. Shirley told us that all residents have seen a GP at least once a fortnight for the past 6 months.

The home also works with a Multi-Disciplinary Team (MDT) which includes a GP, a community matron, a pharmacist, and a social worker. This MDT visits fortnightly. Shirley told us this support from an MDT had been really helpful. She told us how the MDT had helped her with the care of one resident, who needed bariatric adjustments but wanted to stay living in Stapely instead of moving to a bariatric unit in another care home because they were of the Jewish faith, and living in a Jewish home was the most important thing for that resident. The MDT had made sure a fire risk assessment was done by the local fire service, and had helped with bariatric adjustments for this resident. A community podiatrist also comes out to the home once every 12 weeks.

Shirley told us that all residents had been fully vaccinated against Covid-19, and had also all received boosters. All members of staff, except for one person, were also fully vaccinated. The member of staff who was not fully vaccinated did not work at Stapely while it was a government policy for all care staff to be fully vaccinated, and only came back to work at the care home once that policy was dropped.

We asked about the home's experience during Covid. Shirley told us that the residential and nursing units had been separated during the pandemic, and that staff did not cross over between units. Communal space, like the home's coffee lounge, was shared during the peak of the pandemic, with residents from the nursing unit and residential unit having access to it on different days. A number of Stapely residents passed away early on in the pandemic, which Shirley told us had been very upsetting for everyone.

Shirley told us the home kept activities running for residents during the pandemic, and shared pictures on the home's Instagram page for families to see. This meant family members could see their relatives looking well, happy and engaged. She told us the home had used agency staff to cover staff illness, but that she block-booked these staff, so the same agency workers would come into the home if they were needed. The home is doing their best to move on and keep positive now that residents had been vaccinated, and restrictions have been eased.





- The home provides furniture for all rooms, but residents are also able to bring their own furniture when they move in if they choose.
- The residential unit has multiple stories, and the upper floors can be accessed via the stairs or a lift.
- Upstairs in the residential unit were the suites for more independent residents. We were shown several rooms, with residents' permission. Each suite had some kitchen facilities, so that residents could prepare some food and drink for themselves, as well as an en-suite bathroom. These rooms were more spacious.
- The rooms on the ground floor of the residential were smaller, but were still light and nicely decorated. Rooms on this floor were arranged in a 'street', and each resident had a number on their door and a letterbox. There was artwork, including World War 2 posters, on the walls of the communal corridor.
- Residents shared single-sex showers, baths and toilet facilities on this floor. The shared showers, baths, and toilets all looked clean and well-maintained.
- The ground floor of the residential unit also had a large lounge, which looks out onto the home's garden. There lounge had armchairs for residents to sit in, as well as some tables and chairs for people to sit around. There was a TV in the lounge.
- In the corridors of the residential unit, there were also rest spaces for people to sit down in chairs if they wanted.
- The nursing unit has rooms on the ground floor. The corridors in the nursing unit were wide and uncluttered, so that people could get around easily.
- There were handrails along the corridors. As the colour of these was similar to the colour of wall, these handrails were perhaps not dementia friendly.
- We saw two rooms in the nursing unit. The rooms were still small, but larger than in the residential unit, and were also light and bright. Most, but not all, rooms in the nursing unit were en-suite. There were also shared single-sex toilets, a shower, and a bathroom on the nursing unit.
- The nursing unit also had a lounge, which opened out into the garden. The lounge was large and bright, with armchairs and space for residents in wheelchairs.
- There is also access to a visitor's room on the nursing unit, which also opens out into the garden. This room had chairs, a TV, and a toilet for people to use.
- The home has its own enclosed garden, which looked tidy and was nicely maintained. There were grass areas, and shrubs.

## **Observations of the kitchen and catering area**

- The home has two kitchens, in accordance with Jewish dietary law. There is a meat kitchen (where food with meat is prepared) and a milk kitchen (where food with dairy products is prepared), as meat and dairy must be served and



prepared separately for food to remain kosher. The meat meal is typically served in the evening.

- The home employs their own chefs, who have a 4 week menu. Residents are also offered an alternative meal if they don't want the 'main' meal on the menu.
- Residents are encouraged to eat meals together, although they can eat alone if they choose. As staff are not permitted to bring their own food on site, they also eat with the residents each day.
- The home only offers kosher food, and cannot cater to other religious diets, such as halal. However, the chefs will make sure that food is suited to the other dietary and nutritional needs of residents.
- We saw the milk kitchen on the day of our visit. It was a spacious kitchen, and looked clean and well-maintained.
- During our visit, we saw care staff going around the residential lounge, asking residents what they would like to eat for lunch and tea the following day. Staff had a printed menu, with the options and alternatives for each meal written out. There were no photographs of the food options to accompany the menu. We saw them address residents individually by name, explaining what food would be available, and answering questions residents had.
- Where residents expressed a preference for different kinds of food, staff said they would speak to the chefs to see if it could be made available.

## Observation of activities

- Staff employ 3 members of staff to help with activities. The activities staff talk to the residents about what they'd like to do before planning activities.
- We saw activities boards, with pictures of activities available that week, placed in communal areas around the home



- Residents have the option to go out on a trip once every week. Recently, they have been to a concert at the Sefton Park Palm House, Strawberry Fields, the Museum of Liverpool, and to New Brighton.
- Stapely Care also work with a number of external organisations who provide activities for residents. The home has a literary group, facilitated by The Reader. Residents can also take part in a physiotherapy programme called Love To Move. In August, a young theatre group will be working with residents to create a play about their lives.
- Stapely have also worked with House of Memories, a dementia-awareness programme created by National Museums Liverpool. Members of the House of Memories Team have been in to talk to residents about the old Jewish butchers, and have bought in Jewish memory boxes for residents.
- As well as group activities, one-to-one activities such as hand massages were also provided for residents.
- As well as lounges for residents in both the nursing and residential units, the home also has a coffee lounge which all residents can use. This is an area styled to look like a coffee shop, which is open six days a week. The lounge can be used by residents, and by their friends and family. The lounge currently also has a visiting 'pod', where visits took place during the pandemic. Shirley told us the home has decided to keep this pod, in case it is needed again in the future.



- Stapely also has a purpose-built cinema on site. The cinema has space for 50 people, with fixed cinema seats and space for wheelchair users in the front row. The home has matinee screenings three times a week. They would like to start holding film screenings that friends and family can also attend.



- Stapely also has its own synagogue on site. The synagogue contains memories to former residents of the home, and other members of the Liverpool Jewish community. Each memorial has a light which comes on automatically when it is someone's anniversary.





# Feedback from residents, relatives, and staff.

We were able to speak with some residents during our visit. We asked them what they thought about Stapely, and what it was like to live there.

Some residents told us they knew other residents living at Stapely before they moved in. People said they liked being able to live with people they knew previously.

One resident told us they enjoy the activities that are available at the home.

One resident told us they liked the location of the home, and enjoyed being able to go for walks in the local parks.

One resident said that when agency staff worked in the home, they were not as good as the regular care workers. One resident said they felt the home was short staffed. Other feedback we got about the staff was positive.

One resident told us they were happy that restrictions on visiting had been eased, so they could see their family more often.

Below are some more anonymised comments from residents:

- “The food is good and healthy, but a bit bland for my taste.”
- “I don’t always like the food, it’s not always to my taste. The sweet potato chips are nice.”
- “It’s alright. It’s not like being in your own home, but that’s the way it goes.”
- “The girls are very good, but they are short staffed.”
- “When I came here, I was not able to do anything for myself, I could not walk or feed myself. Today I am able to do those things thanks to Shirley and the staff here. I think the staff are committed to their job and they do it with passion. They have been superb.”

# Summary and recommendations

## Summary

Stapely Care was clean and nicely maintained. The atmosphere throughout the home felt homely, and not clinical. Although some of the rooms we saw were small, particularly in the residential unit, they were clean and pleasantly decorated. The outdoor areas, including the garden, were also tidy and well-maintained. We did not notice any fire or health and safety hazards on the day.

We saw caring interactions between the staff and residents as we walked around the home, and when we spoke to residents in the residential lounge. Residents seemed calm and relaxed. Most feedback we heard from residents was positive.

As she was showing us around, Shirley told us lots of stories about current and previous residents, and it was clear she had a lot of knowledge about and care for the people living at the home.

We thought the Coffee Lounge and cinema were nice additions to the home.

## Recommendations

We make the following recommendations for Stapely Care:

- As the home has expressed an interest in developing an EMI unit, this facility can be designed and planned with dementia-friendly principles in mind. This could be a good opportunity for the management of the home to consider doing an audit of how dementia friendly the environment in the rest of the home is. A dementia friendly audit could help identify areas that might further improve the experiences of residents with dementia throughout their time living in the home. An audit could look at:
  - Fixtures and fittings throughout the home, such as hand rails and grab rails to ensure they are easily visible to those whose sight may be effected by dementia;
  - Use of dementia-friendly signage;
  - Use of photographs on food menus, to support residents with dementia who may struggle to make decisions about food.

# Appendix

## 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, helping 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 aim to identify and share good practice wherever possible. However, if during a visit we identify any aspects of a service that it has serious concerns about, then these concerns are referred to the appropriate regulator or commissioners of the service 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 by telephone or email.





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