



Healthwatch Liverpool Enter and View Report
Brooklands Care Home
44 Albany Road
Old Swan, Liverpool
L13 3BJ

April 2016



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Section 1: Introduction

Healthwatch Liverpool has powers to carry out what we describe as ‘Enter and View’ visits in order to assist us in the role as an independent local champion for patients’ rights concerning health and social care services (see the Appendix for more information about this). These visits are carried out by small teams of trained members of Healthwatch 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. Healthwatch only visits services that are publicly funded, e.g. through the NHS or via local authorities.

During an Enter and View visit Healthwatch talks to people using 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. Feedback and observations are 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 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.

Section 2: Basic Details about the Enter and View

Name of the service visited: Brooklands Care Home

Address: 44 Albany Road
Old Swan, Liverpool
L13 3BJ

The Date of the Enter and View Visit: 28th April 2016

The Time of the Enter and View Visit: 9:30am - 11:30am

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

Sarah Thwaites - Healthwatch Manager
Kasia Janiga - Healthwatch Information and Project Officer
Laura Yallop - Healthwatch Support

This visit was unannounced; a phone call was made to the Care Home half an hour before we were due to arrive to inform them of our intention to visit.

Healthwatch Liverpool would like to thank Brooklands Care Home staff and residents for facilitating the visit and for taking the time to talk to us.

Section 3: General profile of the service that was entered and viewed

Brooklands Care Home is owned by the Dovehaven Care Group which owns and manages a number of homes across the North West. The home has 43 beds, one of which was empty at the time of our visit split across two floors with 20 on the ground floor and 23 on the first.

Brooklands looks after people with a range of ages currently from 50 to 102 with a range of care needs. The home takes a number of people on 21 day placement from hospital through the bed brokerage service.

Section 4: The reason for the Enter and View 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 Brooklands Care Home 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.

Section 5: Information received and observations made by Healthwatch Representatives

Healthwatch representatives met Stephen Rodgers who is currently the acting manager at Brooklands, his usual role is as a care plan mentor at another Dovehaven Care Home. A new manager has been recruited and will be starting in a couple of weeks.

Observations of the Building and facilities

- i. On arrival the front and grounds looked well maintained, the grass had been cut and trees and hedges trimmed.
- ii. We observed both the downstairs and upstairs dining rooms to be well decorated but in need of cleaning, there was food on the surfaces including the tables, chairs and floor. Flies were sitting on food on the table and a chair in the upstairs dining room.

- iii. We observed two toilets, work had been done in these rooms to improve cleaning, rust around the toilet had been sanded down and repainted. The grout between the tiles was dirty and should be cleaned or replaced. The team observed undersink electric water heaters which were not boxed in and did not appear to be locked to prevent the water temperature being altered.
- iv. Grab rails at the home were at times blocked by equipment and were being used to store equipment such as gloves.
- v. Upstairs we saw an area (which had previously been the nurses station) now being converted into a seating area as the home finds it difficult to fit everyone into the lounge.
- vi. There were signs up from the manager asking for the heating to not be switched off. Many areas of the home were not warm at the time of the visit, particularly the corridors.
- vii. The team observed a shower room before it had been cleaned and found personal items left by a resident and a commode which was in need of cleaning. The team went back to the room after cleaning and found both the personal items remained and the commode had not been emptied.

Observations of the Kitchen and catering area

- i. Staff were observed to be not using blue aprons on entering the kitchen.
- ii. The home uses external caterers Apetito Food. The frozen meals are delivered and heated when needed. Margaret showed us the log book and explained the process for speaking with residents to find out what they would like and how this is recorded. Staff also record how much food residents eat and whether they like it or not. Apetito then modify what they send to the home based on this information.
- iii. Margaret provides a cooked breakfast as well as toast and cereal for residents each day. Margaret is also able to provide an 'anytime' menu of soups, sandwiches, a variety of things on toast and salads for those residents who prefer something lighter.
- iv. The chef tries to cater for cultural diets and will cook individual meals for some residents who prefer an alternative menu.

- v. The chef is very aware of particular preferences for many of the residents.

Activities

Whilst the team were at the home a delivery from Body shop arrived, this was following a pamper session run by the Body Shop for the residents. Jeanette runs bingo on a Monday and occasionally takes residents out on a Wednesday. Jeanette explained many of the residents join in with activities but for some it can be difficult to find activities for them to do. Sometimes they have parties for the residents, one resident has a family member with some music equipment and they help to run a disco. The home doesn't have a room big enough for all the residents so activities have to be run twice - one upstairs and one downstairs.

A little while ago they invited Zoolab to the home who brought snakes and spiders for the residents to see and touch. Many of the residents enjoyed this, we saw pictures of this visit on one of the notice boards upstairs.

The home raises money for activities through raffles and donations from families and friends.

Hygiene and infection control

The home has 3 domestic staff on each day the team were told bedrooms and bathrooms are cleaned each day but the team would benefit from having someone who can float to clean up after accidents/meal times. This was observed to be the case when we visited the dining rooms. Care Home staff use an audit and maintenance book to log any issues for example damage to furnishings. Staff members we spoke with clearly understand infection control and the reasons for it.

Engagement with Friends, Family and Residents.

The team were told the home holds regular family and residents meetings. We were informed that recently the home held a large consultation when the owners wanted to make Brooklands residential only and Churchview (owned by the same group) nursing only as both were dual registered - residential and nursing. The manager told us this is working well for Brooklands.

The team were told families are encouraged to work with the home particularly around issues of controlling habits like smoking.

The home operates unrestricted visiting times to encourage families to visit when they choose or are able to.

Through discussion with staff at Brooklands

- There is always a senior on each floor, during the day there are 3 carers upstairs on the dementia unit and 2 carers and the manager downstairs. At night there are one senior and three carers to cover both floors with each resident having a two hourly check unless otherwise specified in care plan.
- These staffing levels are calculated using a dependency ratio. The team were informed this is reviewed monthly by the home or more regularly if there are changes.
- We spoke about discharge from hospital as this an issue Healthwatch Liverpool are working on. The home receive pre admission assessments and care plans from the social worker, the staff at the home said there has been an improvement in information received from the social workers recently. The care home feels there is a pressure from hospitals to take people as they in turn are under pressure

Brooklands has one resident who has been with them since December and is now ready to go home with a care package in place but they are unable to until a profiling bed has been arranged.

- The home has several staff members who have been working there for a number of years providing continuity for residents.
- The home has a training plan in place with new starters all receiving Manual handling and infection control training.
- The home operates a 'home for life' policy and if a residents care needs increase the home would look to other services for example community matron or palliative care team to support the person so they don't have to move.

Section 6: Feedback from residents, relatives and staff

Healthwatch spoke with a number of residents at the home during the visit.

We spoke with one resident who said 'Yeah kinda cool, there was an activity today, Jeanette interacts with the OAPs, doing bingo, craft work, games, days trips out. There are days out on a Wednesday as that is when the bus is here but I have to go for (treatment) on Wednesdays. I like to paint using acrylic or oil paints. We plays quots Jeanette gets people involved.' When asked about the food we were told 'the foods not bad but I buy my own out of personal choice the home doesn't mind me doing that. Margaret and Chris the chefs sort it out.' When speaking about the staff at the home the resident said 'love them all, they've been good to me since I've been here and are caring staff. There are enough in, you don't have to wait too long, I have a buzzer on my pillow and they come straight away there is no hesitation.' The resident explained they like to take themselves out shopping as they enjoy the independence they are able to use the same taxi company. The resident also told us they have a care plan but doesn't know what's in it they trust the staff. The resident told us they 'get right balance it's a dam good place'

We spoke with another resident who said 'it's alright, better than alright. I don't like the food I'm not a fan. I'm not fond of the menu, it's not my cup of tea, I'm not a lover of pasta. The carers are alright, not got enough time they always seem to be busy. I've got enough to do, there are games if you want. I seem to be able to fill my day. I think it's a nice place to be my bedroom is nicely decorated. I'm settled here, it has become a home.'

Another resident we spoke with told us 'I like it, there are good laughs. I've been here 3 years, it's good. The food is good, if I don't feel like cooking they do it for us. The carers are lovely, the cleaners are lovely and we all have a laugh.'

One of the residents we spoke with said 'I like it here, it's nice and clean, I think we have enough food'

Section 7: Summary/Conclusions & Recommendations

Brooklands has a temporary manager whilst recruitment of a new, permanent manger takes place. Staff were very open allowing us to look around the home and were friendly and happy to speak with us.

Healthwatch Liverpool would like the opportunity to return to Brooklands and meet with the new manager to discuss the report once they have settled into their new role.

Section 8: Safeguarding

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

Section 9: Healthwatch Liverpool Contact Details

Healthwatch Liverpool

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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. Healthwatch Liverpool works to give local residents a stronger voice to influence and challenge how health and social care services are provided. Healthwatch Liverpool enables 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. Healthwatch Enter and View visits are undertaken in accordance with the remit of Healthwatch Liverpool, and assist Healthwatch Liverpool in carrying out its statutory functions under the Health and Social Care Act 2012. Healthwatch Enter and View visits are not designed to be full inspections, audits or an investigation of the service, rather they are an opportunity for Healthwatch Liverpool to get a better understanding of the service by seeing it in action and by talking to staff and service users.

Healthwatch Liverpool seeks to identify and share good practice wherever possible. However, if during a visit Healthwatch Liverpool identifies 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 or contact us using the details at the end of this report.