



Healthwatch Liverpool Enter and View Report
Greenacres Care Home
Pighue Lane
L13 1DG

September 2015

Contents

Section 1: Introduction

Section 2: Basic Details about the Enter and View visit

Section 3: General profile of the service visited

Section 4: The reason for the Enter and View visit

Section 5: Healthwatch Liverpool's observations: Greenacres care home's environment and facilities

Section 6: Feedback from residents, relatives and staff

Section 7: Summary/Conclusions, including the provider's response to the recommendations

Section 8: Safeguarding

Section 9: Healthwatch Liverpool Contact Details

Appendix: Healthwatch Liverpool- Powers to Enter and View Services

Section 1: Introduction

Healthwatch Liverpool has powers to carry out so-called ‘Enter and View’ visits (see the Appendix for more information about this). These visits are carried out by small teams of trained members of Healthwatch staff and volunteers who will observe a health and social care service at work, for example at a GP practice, a care home, or a hospital. These services have to be 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 regulators like the Care Quality Commission (CQC), and the local authority where appropriate. If there are recommendations in the report, the provider is asked for a response.

Section 2: Basic Details about the Enter and View

Name of the service visited:

Greenacres care home

Address: Pighue Lane
Liverpool
L13 1DG

The Date of the Enter and View Visit: 14th September 2015

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

Names of the members of the Healthwatch Enter and View Team undertaking the visit:

Moira McLoughlin - Healthwatch Volunteer

Lynne Butterworth - Healthwatch Information and Project Officer

Inez Bootsgezel - Healthwatch Information and Project Officer

This visit was announced, i.e. a date and time had been agreed with the Greenacres care home manager beforehand. Healthwatch asked the care home to inform residents, their relatives and visitors that the visit was to take place, and a flyer for display was emailed over to this end.

Healthwatch Liverpool would like to thank the Greenacres care home manager and other staff for facilitating the visit, and the residents, their relatives, friends and staff for taking the time to talk to us.

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

Greenacres care home has 41 bedrooms with en-suite toilets and can house a maximum of 42 residents in total (there is one double room for couples). It provides general care for people over 65 years of age. Greenacres care home is owned by Greenacres Nursing Home Limited.

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 Greenacres care home took place 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 whether any improvements could be made. The visit was not in response to any feedback or concerns identified relating to the quality of this service.

Section 5: What Healthwatch Liverpool observed regarding Greenacres care home's environment and facilities

On arrival, Healthwatch representatives found that there were ample parking spaces outside of the main entrance, and that the area was free of rubbish. The outside of the building appeared well-maintained. The main entrance door to the reception area was locked and had to be opened by staff using a key pad, a security measure to help ensure the safety of those residents who would be at risk if they were to go out unaccompanied.

Greenacres care home added after reading a draft version of this report that *"The front door has an intercom access connected to CCTV for added security for admitting visitors; the residents do have access to the code"*.

There were a number of informative leaflets on noticeboards in reception for residents & relatives during their stay.

The building is laid out around an enclosed rectangular courtyard/ garden. The garden was well-maintained, and could be reached by doors opening out from conservatory rooms at either end of the garden. These doors had slightly raised ridges at the bottom which had not been covered, and could be potential trip hazards. Healthwatch representatives noted that as there were no ramps, anybody using a Zimmer frame or rolling walker/ rollator might find it more difficult to get in and out of the garden unaided.

The residents had a choice of 3 communal rooms to sit in, all with comfortable seating, and a dining room. A large lounge with two separate seating areas and two televisions, one at either end, was clean and well-used by residents at the time of the visit.

Additionally, two conservatory rooms at either end of the garden provided a quieter space for residents to sit in. One of these rooms looked tidy with comfortable chairs, a sofa and a bookcase although there were noticeable

cobwebs along the ceiling which seemed to have been there some time. In response to the draft version of this report that was shared with the provider they wrote:

“The cobwebs have been removed from the blue lounge. An extra-long feather duster has been bought to alleviate this problem from re-occurring”.

The other conservatory room was more cluttered; equipment and a trolley with incontinence pads were stored there, which Healthwatch representatives felt might have been better tidied away.

The dining room looked clean and functional with bare walls, although the tables had been laid nicely with cloths and napkins. The menu for the day was clearly displayed on a board.

The corridors were free from obstructions and clutter, and bathrooms and toilets were clearly marked. There were pictures and images displaying Liverpool’s history on the walls. Residents’ room doors showed the individual’s name.

Healthwatch representatives did notice two ceiling lights flickering in the corridors. This was near to a bathroom that looked clean, but a bit dated.

Healthwatch representatives were shown the kitchen, which appeared clean and well-organised. They were told that fresh food is prepared for residents every day by one of the chefs employed. Glasses and cups were on a work surface, drying; the chef explained that a part-time kitchen assistant does the washing up by hand, and that residents and relatives could use the kitchen at any time to make a hot drink for themselves. The only foreseeable problem Healthwatch representatives noted with this is potential risks around hygiene standards / cross-contamination of work surfaces, and the potential for spills of hot liquids causing scalding or slip hazards.

In response to the draft version of this report Greenacres care home wrote:

“We employ two chefs and two kitchen assistants who work on a weekly rota. I have addressed your concerns regarding residents and or their family accessing the kitchen to make tea; the chef informed me that’s not what she meant, they don’t go into the kitchen but are welcomed to come anytime and they will provide a drink or something to eat whenever they are there. The kitchen is locked when not attended to ensure everyone’s safety”.

Section 6: Feedback from residents, relatives and staff

Healthwatch representatives were met by the manager of the home. The manager explained that the home was taking part in a study by Liverpool University, “Embedding a Human Rights approach in dementia care”, and that two visitors involved in the study would be observing residents and activities in the lounge during the Healthwatch visit.

The manager showed the Healthwatch representatives around the communal areas of the home, and told Healthwatch representatives the following:

Residents: At the time of the visit there were 39 residents living at the home. The Deputy Manager told Healthwatch representatives that the home tried to care for residents as long as they could, and one resident had been there for seven years at the time of the visit. However, sometimes individual resident's needs could no longer be met by Greenacres care home, at which time they would have to move to other accommodation with more intensive support. Several residents had anticipatory care plans, and staff aimed to discuss the residents' wishes for end of life care both with the residents and their relatives where appropriate. Healthwatch representatives thought it positive to hear that a Marie Curie study was supporting the home with this.

Staffing:

Healthwatch representatives were pleased to be told that the home had very good staff retention; the manager herself had been in post for 11 years. Apart from one long-term member of staff all staff had completed at least one level of NVQ training. Staff recently had also received training from a specialist dementia nurse. The home had not used agency staff for 5 years; when short-staffed, regular staff usually would work extra shifts.

Healthwatch representatives observed positive interaction between staff and the residents during the visit. The staff looked professional in appearance, wearing clean uniforms.

Two chefs working different days of the week and a kitchen assistant ensured that the kitchen runs smoothly.

Food: Healthwatch representatives were told by the chef that residents are offered a daily menu, with a breakfast of their choice in the morning. Residents are asked after breakfast if they like the available option for lunch that day; alternative options are provided for those who ask for something else. The main meal of the day is in the early evening, and residents are asked after lunch if they want an alternative to what has been planned. In the evenings sandwiches and snacks are available. Homemade cake is also regularly made available.

In response to a question, Healthwatch was told that dietary requirements are catered for; at the time of the visit the home had two residents with a vegetarian diet, and vegetarian meals were provided.

Residents choose where they want to eat, some prefer to eat in their rooms for example. Visitors can sit with the residents at meal times, and at Christmas residents can invite relatives to have dinner. The chef emphasized that this was the residents' home.

Before tea time, afternoon biscuits & tea were provided which were also offered to residents' visitors.

Activities: During the Healthwatch visit a game of bingo was underway with some of the residents in the large lounge. Healthwatch representatives were told that some residents attend local churches, and volunteers from a nearby church visit the home regularly.

Occasionally entertainers visit, for example the previous day there had been an

entertainer to celebrate a birthday, and Healthwatch representatives were told by several residents that both residents and staff had been dancing. The manager mentioned that the home also organises outings for residents, for example to Blackpool or the safari park.

The home is visited every Thursday by a hairdresser.

Medical care: Healthwatch representatives were told that most residents had stayed with their own GPs after moving in. Most were registered with two local GP practices. Other residents were registered with 3 further GP practices. All GPs would come out to see the residents when necessary. The home also had regular visits from the Community Matron, as well as district nurses. At the time of the Healthwatch visit a visiting optician was attending to several of the residents.

The manager told Healthwatch representatives that overall there had not been many problems with hospital discharge. The hospital, usually the Royal, had improved in letting the home know when their residents were about to be discharged, and the residents were discharged at a reasonable time. She said that sometimes there was a lack of information, including about medication, and there had been an occasion when someone had been discharged without all of their medication, but the hospital had sent it over by taxi.

6.1 Feedback from patients and relatives

During the visit Healthwatch spoke with four residents, a visitor and 2 relatives.

Although two of the residents said they would rather be back at their previous home, most of the feedback was positive.

Three of the four residents Healthwatch spoke with were very positive about the home, singling out the staff for praise: “Staff are friendly”. One resident said most staff were good, but not all, but did not want to go in to detail. Three residents also said that the food was good, and that you were given a choice.

One resident mentioned that they found the dining room ‘a bit much’, with many people there, and preferred to eat in the conservatory. The same resident said that they had asked for a different room, and had been offered another when it had become empty.

A relative told Healthwatch: “I recommend this place to anyone I talk to, everyone treats my mum really well (...) I’ve got peace of mind, they contact me immediately when something is wrong”.

The same relative mentioned that several members of staff had come in on their day off, which also was a bank holiday, to come to her mother’s birthday party, to celebrate getting to a significant age.

Several relatives mentioned looking at several care homes before deciding on Greenacres. One visitor said that it was the best one in the area.

Section 7: Summary/Conclusions & Recommendations

Overall, Healthwatch representatives gained a positive impression of this service during the Enter and view visit. Nothing was observed that gave grounds for concern about the quality of the environment and facilities.

The home appeared clean and, apart from some items in one of the conservatory rooms, uncluttered. However, during the visit there was a smell of urine in some parts, especially near the main entrance.

Residents appeared relaxed and well-cared for, and the feedback from residents and the relatives Healthwatch spoke with was mostly positive.

Recommendations with provider's response:

Healthwatch Liverpool has the following recommendations for Greenacres care home:

- That incontinence pads are tidied away and not left on display in communal areas
Provider's response: *The incontinence pads are not normally left out in view and we do have a pad room for this purpose; the staff had prepared the trolley and been distracted and put it away after you left. We will endeavour to ensure it is not left unattended again.*
- That staff deals with the origins of the smell of urine that was noticeable in some parts of the home, and informs Healthwatch what plans will be put in place to monitor this
Provider's response: *We were disappointed you encountered a malodour around parts of the home as we have a stringent cleaning regime. We have taken advice from our product supplier and purchased Magic which eliminates odours.*
- That the home considers putting some form of ramp onto the raised door frames within the two conservatories to avoid trip hazards & ensure all residents have equal access to the gardens when using mobility aids.
Provider's response: *We have spoken to the owners regarding the ramp into the garden. They have promised to look into this, as they are concerned the ramp would create a trip hazard itself for people who don't use walking aids; all of our residents who have balance issues are supervised by staff should they want to access the garden to ensure their safety.*

Section 8: Safeguarding

There were no safeguarding concerns identified during this enter and view

visit.

Section 9: Healthwatch Liverpool Contact Details

Healthwatch Liverpool

*151 Dale St
Liverpool
L2 2AH*

Main Number: 0300 77 77 007

Fax: 0151 237 3998

Email enquiries@healthwatchliverpool.co.uk

Website www.healthwatchliverpool.co.uk

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.