



healthwatch

Cumbria

Swarthdale Nursing Home
2nd March 2017



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counts

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Introduction

About Healthwatch Cumbria

Healthwatch Cumbria (HWC) is an independent community based organisation for the people of Cumbria. It was set up to champion the views of patients and people who use health and social care services in Cumbria. The goal of HWC is to make services better and improve health and wellbeing. HWC achieves this by talking and listening to people in all parts of Cumbria and telling providers of these services local people's views and challenging organisations that need to do better and highlighting examples of good practice.

HWC is part of Healthwatch England who act as the national consumer champion for all local Healthwatch.

Details of visit

Service Provider	Vishmoil Ltd.
Service Address	Swarthdale Nursing Home Rake Lane, Ulverston, LA12 9NQ
Date and Time of visit	02/03/17 10:30am
Authorised Representatives	Sue Hannah Robin Powell
Healthwatch Cumbria contact details	Healthwatch Cumbria, The Best Life Building, 4-8 Oxford Street, Workington, Cumbria, CA14 2AH Tel: 01900 607208

Acknowledgements

Thanks to Mandy Nunley and her staff, the residents who spoke to HWC for their support during the visit and their valued contributions.

Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

What is Enter and View?

Healthwatch Cumbria has a statutory right (Health and Social Care Act 2012) to carry out Enter & View visits to health and social care services to gather the views and experiences of customers, patients, families and staff for the purpose of service improvement. Service providers have a duty to respond to our reports and recommendations.

Healthwatch Cumbria will share its findings with Healthwatch England, the Care Quality Commission, services and the public.

The Health and Social Care Act allows local Healthwatch 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. This is so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Purpose of the visit

To engage with residents in care homes in Cumbria to collect and record their experiences of accessing health and social care services, primarily the out of hours GP service Cumbria Health on Call (CHoC).

To identify and champion examples of best practice with regard to resident experience including: surroundings, activities and meals.

Methodology

Healthwatch Cumbria contacted Swarthdale Nursing Home by telephone to speak to the Manager Mandy Nunley and inform her of the Healthwatch Cumbria programme of Enter & View visits to Care Homes in the South of the county. Following the conversation Healthwatch Cumbria confirmed by way of email the conversation that had taken place and provided the home with an attached letter informing the recipients of the role of Healthwatch and the purpose of the Enter & View visits.

Mandy informed Healthwatch that she welcomed the visit and that we could visit the home at any time.

The visit was undertaken by two Healthwatch Authorised Enter & View representatives.

The representatives were shadowed throughout the visit by a member of the homes nursing staff.

Findings

Swarthdale is a large period building with a façade of traditional Lakeland slate that externally appeared in a good state of repair; the only garden areas Healthwatch saw was a small garden area to the front of the building that was overlooked by the residents lounge and a sloped area which was made up of woodland.

On arrival at the home received a friendly welcome; the visitor sign in book and hand sanitiser were immediately visible on entry to the home. There were many thank you cards displayed on the walls and in files on the entrance hall table.

We met with Mandy the manager and had a conversation about the purpose of the visit and what would happen with the final report following the visit. She then asked a member of her nursing staff to show us round the home and introduce us to residents and staff. We were accompanied throughout the visit, which was helpful when navigating the building and being introduced to residents and staff but was not helpful in the course of conversations with the residents. We spoke to 3 residents and 8 staff members, We felt there was an uncomfortable atmosphere by being accompanied and felt that their purpose was to over see conversations with residents and correct any negative comments that were made by residents.

Some of the communal corridors upstairs that HWC saw were untidy with stains on the carpet and general debris e.g. crumbs, leaves from outdoors that needed cleaning away, many of the residents personal room doors were decorated in the style of traditional front door with its furnishings and door numbers.

One resident invited us into her room to talk to her. She told us "I am very happy in my room and with the care I get". The room was clean, tidy and spacious and the resident told us "I am pleased to be able to have all my personal photos around me these are very important to me".

Access to Health Services

We spoke with 3 residents who were sat together in the lounge and told us that they receive visits from healthcare professional including a doctor, and out of hours doctor for CHoC, Dentist and Chiropodist and that if they feel ill a member of staff will call for a doctor to visit. One resident told us "I would not know who to contact as a named person/ member of staff", the chaperone told us that this was incorrect and that all residents have a named nurse who is identified in their care plan and room information pack and they went to get a copy to evidence this to us.

Residents we spoke with said they were happy and knew how they could access healthcare services.

Activities

The lay out of the residents lounge was such so as to encourage residents to interact with one another, chairs were facing each other and the television did not dominate the area. The atmosphere was calm and staff clearly knew the residents on an individual basis - this was evident in the relaxed manner with which they talked with the residents.

There was a rabbit in the residents lounge (in a clean caged area) that residents were interacting with. The home also has a dog that the residents said they enjoy and a stocked fish tank. The addition of home pets was viewed positively by the residents although one resident told us "I don't like rabbits".

Residents we spoke to told us they were happy with the variety of activities on offer, one was enjoyed listening to CD's while another told us "I enjoy the trips out but we only go out twice a year on trips".

We observed one resident receiving 1-1 fine motor skills therapy support from the activities coordinator in the dining room whilst another resident was sitting opposite at a dining table having a drink. This did not appear to disturb either resident.

The activities coordinator had recently been appointed to the role and told us "I feel well informed about any residents who may need more 1-1 activities to support conditions such as arthritis, poor mobility and usually am informed by a member of nursing or management staff. We did not observe an activities schedule on display informing us of what activities were planned for the week.

Meals

Breakfast had finished when we arrived at the home and the dining room was set up ready for the lunch time meal. One resident told us, "I don't like the food it's far too spicy for my taste and there is little other choice provided". The staff member provided us with a list of menus for the forthcoming 6 weeks that had a wide range of choices on them, including non spicy dishes (this paperwork was available in all resident rooms and a display board of the menu dishes was available in the entrance hall). Staff were available and offered to make residents drinks if they didn't already have one. Tea, toast and fresh fruit was available throughout the day. This facility was available in the dining room. We noted that they were easily accessible and staff had created a laminated list of individual resident's preferences of hot beverages. However, the laminated list was unclean and had tea and coffee marks on it. We spoke to the cook who told us "We have a menu plan but if anyone doesn't like something I will make something else for them where I can." A member of staff showed us a menu that had been removed from display on the table

Recommendations

The staff we spoke to told us they were aware of procedures for accessing health professionals on behalf of the residents and the residents individual care requirements. The large numbers of thank you cards on the walls in the entrance are testament to the standard of care the home is providing for its residents.

HWC could see that the inclusion of pets was well received by the residents as they enjoyed talking about the pets and interacting with them. This simple idea is one that other homes may wish to follow.

Signage seemed sparse, especially upstairs where the corridor and bedroom layout appeared mazy. The main corridor downstairs had wall decoration above the dado rail that had a mixture of bright colours and plastic flowers woven between a wooden trellis pinned to the wall which appeared a little "busy" and might be confusing for some residents who may have impaired vision or dementia . HWC would recommend simplifying the décor.

HWC observed there were no clocks, date, day or weather condition displays available in the public spaces for residents to see. HWC would recommend that some provision for this should be implemented to give residents a more informed sense timings and weather conditions e.g. It's 4pm in the afternoon and the weather outside is sunny but cold!

Some of the information leaflets on display looked unkempt and unappealing. HWC would recommend the use of a display stand, other organised means of display and remove any unkempt or out of date information.

Whilst residents receiving 1-1 personal physical activities in front of other residents didn't appear to bother either resident, HWC would like to recommend that the use of a private space be considered to maintain each other's dignity.

Provider Feedback

Home manager Mandy Nunley wrote:

I have checked through the report for factual accuracy and just have a couple of comments to make as follows:

- We allocated someone to show you around and introduce you to the residents/staff as a courtesy because some of our residents get quite distressed by faces in their Home that they do not recognise. Similarly some of our younger staff often feel intimidated by what they see as 'officialdom'. The objective was to put everyone at ease not to chaperone you, nor was it our intention to make you feel uncomfortable. Moreover, the opportunity for private conversation with both residents and staff was both provided for and taken.
- The meadow flower corridor wall is an interactive tactile wall display designed specifically for our dementia residents in keeping with David Sheard's 'Dementia Care Matters' philosophy. Residents pick the flowers from the wall as they would pick them in a field or garden, put them in vases, give them to carers/friends etc and at the end of the day we collect them up and start all over again. The flowers are in colours recognised by the University of Stirling's Dementia Services Development Centre as those most easily seen and recognised by dementia clients. We can add scents to the flowers and birdsong to the display to bring the meadow alive. It brings the outside in for those dementia clients for whom the outside is a scary place that they will not venture out into. It is one of the displays by which we put activity at the centre of our care in keeping with our NAPA commitment.

- The home has a clock and also a date, day and weather board display in the main communal corridor that Residents traverse walking between the lounge and the dining room (opposite the office).
- Next to these is the picture board displaying the week's activities. The monthly Activity Programme is displayed on the parallel Residents noticeboard and in each resident's own room folder.
- All leaflets displayed were of current information. Some a little worn from Resident/relative use, which we would consider to be a positive thing.

