

Disclaimer: This report relates only to the service viewed on the date of the visit and is representative of the views, visitors and residents who met members of the Enter and View team on that date.

Date of visit:	16 th April 2014
Name of Establishment:	Albemarle Rest Home
Name of Manager:	Michele Foster
Address:	50 Kenilworth Road, Leamington Spa CV32 6JW
Email address:	
Telephone number:	01926 425629
Names of Enter and View volunteer visitors:	Roger Copping, Jacqueline Prestwich
Time at the home:	From: 10:00 am To: 2:45 pm

SUMMARY

Purpose of the visit:	To listen to the views of residents, families and carers about the home and learn how dignity in care is achieved. Also to have some discussion about end of life care.
General impressions of the visit overall:	This is a small privately owned home where staff work hard to achieve person centred care and treat every person as an individual with their own needs and requirements. On the day of the visit there were 22 residents although the home is registered for 24. The home has a beautiful conservatory and lovely gardens.
Any recommendations:	Repairing the external notice board which shows people where the home is situated. This was discussed with the owner.

NOTES OF VISIT

1. What did you notice about the home when you first went inside?	There is a very homely atmosphere and a pleasant attitude between staff and residents. Residents are comfortable with the staff. There are plenty of activities going on. There are no unpleasant odours.
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<p>2. How did the residents you spoke with describe their home? What adjectives did they use?</p>	<p>We were able to speak to 6 residents in the residents lounge. They seemed to get on very well with staff. Some residents were able to say that they were “comfortable” and that it was “lovely here.” Other residents who were not able to talk because of their dementia were able to smile and nod when asked if they were “comfortable.”</p>
<p>3. What sort of activities took place?</p>	<p>On the day of the visit Easter Bingo was taking place. There was also a daily activity list which showed sessions of “keep fit,” a Holy Communion service, crosswords, board games, memory work, reminiscences, newspaper discussions and hair & nail beauty sessions. Members of staff try to engage residents in the lounge with activities before lunch.</p>
<p>4. What kind of links are there with the local community?</p>	<p>The home has the usual links with local churches, doctors and nurses. Relatives seem to be frequent visitors.</p>
<p>5. How did the staff relate to the residents and vice versa? What did you see to demonstrate this?</p>	<p>The residents appear to be at ease with the staff, who seem to know the residents well and understand their likes and dislikes. Staff were able to tell us which residents would like to meet and talk to visitors. Staff also treated the residents kindly and with respect and tried to include them in conversations.</p>
<p>6. How does the home hear the views of its residents?</p>	<p>When asked, relatives stated that if they had any concerns they would speak to the manager, owner or staff and would always be listened to. One relative had noted that a concrete path would be helpful for his wife to get into the garden. This had been done and the path had been named after his wife! Residents are certainly listened to. One resident does not like bingo and made her views felt!</p>
<p>7. Did you see any issues related to the dignity of the residents being compromised? Describe what you saw.</p>	<p>No. The staff listened to the residents about their needs and wishes and tried to support them.</p>

<p>8. Were you able to discuss the home's Policy / practices around advanced care planning / end of life care?</p>	<p>This was discussed with relatives, the owner and the manager. All agreed that this is a sensitive topic and not always easy to talk about. Residents wish to stay at the home rather than go into hospital. The ethos of the home is to only send a resident into hospital if it cannot be avoided. Several residents had been distressed and their condition had deteriorated by their hospital experience particularly being discharged from hospital very late at night. DNR protocols are currently being redone according to new regulations.</p>
<p>9. What did you like most about the home?</p>	<p>There is a homely atmosphere and caring staff who know the residents well.</p>
<p>10. If you met the care home manager, what did they talk to you about?</p>	<p>The manager and owner gave an overview of the home and described the way that every resident is considered to be an individual. End of life issues were also discussed.</p>
<p>11. What would be the (at least) three positive things and three suggestions for improvement you would make about the home?</p>	<p>The care is person centred and reflects each person's individual needs. The staff know each resident well and the care is compassionate and supportive. There is a good staffing ratio to residents. Repair the notice board (already noted) A link with local school sixth forms, particularly those students who might be interested in health and social care, might be helpful. Also perhaps local schools would entertain the residents at Christmas and Easter etc. The manager and owner have been trying to get residents to make more use of the lovely conservatory. This might be beneficial for the residents.</p>
<p>12. Would you like a relative or friend to live in the home?</p>	<p>Yes, because of the person centred care and the residents looked at ease and well cared for.</p>
<p>13. Were the staff happy to talk to you? What did you talk about?</p>	<p>When asked the staff told us how long they had worked at the home. One member of staff had worked somewhere else but had come back "because it is better here and the staffing levels are better." If staff had any concerns they could speak to the manager</p>

	and they felt “supported” by the management.
14. Did you talk to anyone else i.e. relatives of residents?	Three relatives discussed the care received by their family member. One relative had looked at many care homes before deciding on Albemarle and felt that she had made the “right” decision and was very happy about the good standard of care that her mother received. Another relative stated how much her mother’s condition had improved since coming to the home and she felt that her mother was being “safely looked after.”
15. Any comments on the lunch time period from the residents’ perspective?	Residents and their relatives said that the food was “good” and that residents’ choices and special diets were taken into account. It was not possible on the visit to sit with the residents during lunch time. Several residents require assistance with food and the dining room is not large enough for both carers and visitors. Some residents prefer to eat lunch in their room and the staff accommodate this choice.
16. Did you have any final impressions when you left?	The residential home is able to care for residents with varying levels of dementia. It is run by a local owner with experienced and caring staff.
17. Anything not covered above that you feel Healthwatch should know about from this visit.	It is pleasing to note that some staff have good levels of NVQ qualifications. It was also noted that the home’s kitchens had achieved the highest grading in hygiene from the FSA.