

Enter and View Visit Final Report

Name of Service Provider: Bupa Care Homes (ANS) Ltd

Premises visited: Canning Court Nursing and Residential Home

Date of Visit: 26th January 2016

Time of visit: 9.45am

Registered Manager: Mrs Johann Phelps

Authorised Representatives: Chris Bain, Jennifer Gilder, Jacqueline Prestwich

and Alison Wickens

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, their relatives and staff, only an account of what was observed and contributed at the time of our visit.

Summary of findings

- Canning Court is a purpose built 64 bedded nursing and residential home located in Stratford, Warwickshire.
- The Registered Manager has been in post for 12 months and has a strong background in dementia care.
- Under new management the home is undergoing a programme of improvements. A Dementia Growth Plan has been put in place, which is centred around a 'Person First' initiative.
- A significant part of the Dementia Growth Plan is the refurbishment of the home to make it more dementia friendly. We observed that this refurbishment programme is already underway with the reception flooring changed to carpet, one of the lounges closed for decoration, and a 'mock up' of a new bathroom in place.
- The residents with whom we spoke were very happy with the care and service they received at the home.
- The visitors of residents with whom we spoke were also very happy with the care and service their relatives received at the home.
- We observed the interaction between staff, residents and relatives and found them to be respectful and friendly and consent was gained from residents when needed.
- We observed the physical environment of the home, which we found to be maintained and cleaned to a good standard.



- Under new management there have also been changes in staff and staff roles, including the creation of a new Senior Carer role.
- Overall, staff at Canning Court were very positive about the home and the support they received. They all clearly expressed pride and enjoyment in their role whilst also adjusting to the programme of improvements underway.

Recommendations

Please use bullet points for the recommendations and if needed any reasoning behind the recommendations.

- Ensure that wheelchairs are safely stored away without restricting access to bathing facilities.
- Healthwatch Warwickshire endorses the programme of refurbishment works underway and the wider Dementia Growth Plan and encourages Canning Court to share learning and best practice on this.

Registered Manager's Response

We have relocated all equipment relating to the safe handling of residents and placed them in a more suitable storage area

1. Report Overview

Provide a short summary of the visit, including a brief description of the service visited (please include the name of the person who conducted the visit if different to the home manager):

The visit to Canning Court was unannounced, which means that no one at the home knew we were coming.

On arrival at the home we were met by the Registered Manager, Mrs Johann Phelps, who was our main point of contact for the visit. Mrs Phelps facilitated our visit and provided access to all relevant areas of the home. We met again with Mrs Phelps at the end of our visit to provide initial feedback. Throughout our visit we were met with a warm and friendly welcome.

Canning Court is a relatively new (6 years old) purpose-built care home with residents living on the ground and first floors. There are a total 64 en-suite rooms at the home. The ground floor (Gower Community) has 32 residential dementia care beds. The first floor (Hamlet Community) also has 32 beds and provides dementia nursing care.

At the time of our visit the home was at capacity with 64 residents and 3 people on a waiting list. All but one resident met the criteria for Deprivation of Liberty Safeguards (DoLS) and one resident required one to one care.



We conducted an in-depth interview with Mrs Phelps on arrival at the home. Mrs Phelps advised us that management are currently implementing a Dementia Growth Plan centred around a 'Person First' initiative. The plan is divided into eight areas of activity that are all designed to put the person with dementia at the centre of care provision.

Under new management there have also been changes in staff and staff roles, including the creation of a new senior carer role. We were informed that the home has recently undertaken two successful recruitment days and that bank staff are used but kept to a minimum.

There are at least four nurses on duty at any one time (two on Gower and two on Hamlet), as well as six care staff, until 8pm each day. At night there are two nurses, or one nurse and a senior carer, on duty.

Staff receive a comprehensive five day BUPA induction that is designed to prepare them for working at the home. Once in their role, staff receive ongoing support, supervision and training. This also now includes a five-day Person First dementia care training programme. Ongoing clinical training is managed by the Deputy Manager.

The cleanliness of the home is overseen by the head housekeeper and a team of staff, with two to three housekeepers on duty at any one time.

We learned of BUPA's 'resident of the day' initiative, which goes by room number (e.g. residents in room number one are 'resident of the day' on the first of the month). This initiative is designed to ensure that residents receive at least monthly care plans checks and consultation with family members, as well as a deep clean of their bedroom. Mrs Phelps advised us that this initiative was good for compliance. She also said that she liked to think that every resident was 'resident of the day' every day.

A laundry team do resident's laundry onsite and we observed a notice advising that clothes should be name tagged to ensure that they are returned to the appropriate person.

The physical environment of the home is maintained by a full time maintenance person, who has been at the home since it opened, and an assistant maintenance person.

The home has undertaken a review of its activity provision and now employs a full time activity leader and two activity assistants meaning that there are always at least one or two activity workers on duty each day, seven days a week.

The Registered Manager told us that 'we always try to build an activity plan for the residents living here' and that the home was particularly aware of the need to provide appropriate activities for men as well as women.

We were shown a copy of an example activity timetable which included activities such as: visiting friends, flower arranging, arts and crafts, the Men's Shed,



Harmonica Ray (the husband of a resident), puzzles and games, afternoon sport and beauty therapies. Therapy babies have also been introduced and have proven popular with some residents

Whilst the home undertakes occasional group trips, there is a preference for low key external activities such as trips to the local coffee shop and supermarket. The installation of a pub and cinema will provide further activities for residents to enjoy.

We were advised that none of the activities are forced on residents but if they want to join in then they are supported to do so. At the time of our visit the activities board on Gower was empty. When we asked about this we were advised that it was waiting to be updated.

All residents are registered with one of two local GP Surgeries and can access a GP at any time outside of the twice weekly GP visits. Dentistry for residents can be accessed by a local NHS dentist, unless a resident's family arranges otherwise, and a private chiropodist visits the home every eight weeks. Pastoral care is supported by a vicar who attends fortnightly and a priest can be arranged to visit on request.

The home holds regular residents and relative's meetings. We saw a copy of the minutes from a previous meeting with items raised and attributed to identified staff members for action. We also observed a 'Bupa Commitment to Openness' notice'.

2. Purpose of Visit

Put in a small paragraph about why the visit was undertaken

The visit to Canning Court was to ensure that residents are treated with dignity and care.

3. Approach Used

The approach used e.g. direct observation; talking to Staff; talking to Patients/Residents; talking to Relatives/Carers/Visitors; evidencing written procedures etc.

The Authorised Representatives observed the activity taking place in the communal areas of the home, including the period over lunch.

The Authorised Representatives also spoke with residents, visitors and members of staff throughout the visit.



4. Observations/Findings

These should be summarised under the following headings:

Physical Environment

Canning Court is a relatively new building (six years old) with its own private garden situated in a new build estate on the outskirts of Stratford town centre. The home has a large car park which has two disabled spaces and an ambulance bay near the entrance. On the roof of part of the building are solar panels installed as part of Bupa's environmental strategy.

Entry to the home is through double doors into a welcoming reception area with reception desk and seating. Reception staff were found to be very pleasant and asked us to sign in on arrival. The Registered Manager's office is situated next to the reception.

Hard flooring in the reception had recently been replaced with carpet as part of the home's wider refurbishment programme. A glass window allows visual access into part of the Hamlet corridor and dining room giving an insight into the home. A communal toilet with disabled access situated off the reception was found to be clean and bright.

Access to other parts of the home was through keypad locked doors. We were taken through to a central stairwell area with stairs and a lift to all floors. Situated just inside this area was a residents and relatives meeting notice board. We observed that all copies of minutes from the last meeting had been taken and needed replacing.

There are four communal lounges and two communal bathrooms with bathing facilities on each floor. The basement houses the onsite kitchen and laundry.

The home was observed to be maintained and cleaned to a good standard with equipment stored away. The only exception to this was in the bathroom opposite room 12 on the Gower where two wheelchairs had been left, one of which was obstructing access to the sink.

We also observed a catering trolley on the first floor situated outside of the lounge. We were advised that staff were now leaving the trolley outside so that it was not so noisy in the lounge area. The walls around the trolley were a little dirty due to the handling of food. We were advised that this would be cleaned as they looked to find a better solution to the problem.

As witnessed during our visit, the home is currently undergoing a programme of refurbishment work intended at making the environment more dementia friendly. Currently, for example, there are patterned carpets and wall decorations that could be disorientating or confusing for a resident with dementia. The Registered Manager has undertaken The Kings Fund environmental audit training and is using this experience to inform the changes taking place.



The refurbishment works will include new carpets and soft furnishing, neutral wall colours, and refurbishment of all lounges and bathrooms. We were shown a 'mock up' bathroom that made use of contrasting colours to help residents identify the toilet. Thought had also been given to the height of the 'toilet' sign in the corridor.

We found the communal bathrooms to be clean but tired in decoration. The planned refurbishments are therefore timely. Hand sanitisers and a foaming soap dispenser were on the walls of all bathrooms.

The home is also currently installing an on-site pub and cinema. We were shown the pub (still in development), which is situated on the ground floor and backs on to the garden and an outside BBQ area. There had been a competition amongst residents to name the pub and they had decided on 'The Canners Arms'. The pub will provide residents with another social space that can be made use of all year round.

Lights are on sensors throughout the home. We were informed that this system was not suitable for all residents and in some rooms, particularly bathrooms, the sensors had been replaced with a traditional lighting system.

Each of the residents' rooms had a memory box outside. Many of these boxes were being used and are helpful for residents in identifying their room. The Registered Manager also participated in this by having a memory box outside her office.

Staff

Our Authorised Representatives observed friendly but respectful interactions between staff, residents and visitors during the visit. Staff called residents by their preferred name and demonstrated an understanding of individual preferences and interests. We observed the staff requesting resident's consent before acting.

As we waited to be met by the Registered Manager we observed a staff member in the Gower dining room giving a friendly morning greeting to residents.

Walking about the home we saw the Registered Manager relating to residents in a caring and sensitive manner to which residents responded positively.

The members of staff we observed all wore name badges and uniforms.



Service User Experience, Dignity and Respect

We were advised that before a new resident arrives at the home they are assessed by the Registered or Deputy Manager in their own home. This gives an opportunity for both parties to meet and establish if the home is right for them.

We were also advised that a resident's preference for the gender of their carer is taken into consideration and, as far as possible, this is accommodated once at the home.

The Registered Manager described the home as 'a home for life'. The home will be working towards achieving the Gold Standard Framework for End of Life Care in the future once the Dementia Growth Plan is well underway.

We observed residents in all of the lounges and moving about the home. The residents appeared comfortable, clean and suitably dressed.

The lunch period was observed during our visit. We were informed that the home had recently instigated protected meal times, which means that residents are free from interruptions to enjoy eating their meal. Respecting this we observed the mealtime from afar.

On Hamlet we observed the mealtime from the corridor to respect the protected meal time. The dining room tables were laid for lunch and there were about five residents sitting at the tables. There seemed to be enough staff to deliver the food in an efficient manner - no one seemed to wait very long for their food. Contact was friendly and appeared to be respectful.

On Hamlet the majority of residents had their meal in their room. Residents eating in their room received their food on a tray. Two residents sat in the dining room eating their lunches unassisted. One of the nurses on duty was sitting eating with them, which appeared to make for an informal, friendly community environment.

Residents at the home have their main meal in the evening and a lighter lunch (typically soup and a sandwich). We were advised by the Registered Manager that this approach tends to reduce the number of falls and helps residents to sleep better.

We observed menus on the walls on both floors which detailed mealtimes in the home, as well as alternative menu options and a night bite menu. Residents have a choice of meal at point of service. All meals are cooked and prepared in the onsite kitchen.



Staff Feedback

We spoke with a number of staff throughout the home. All members of staff were willing to freely engage with our Authorised Representatives. Despite their having been a number of staff changes the majority of staff that we spoke to had worked for the home for a considerable time.

Staff were very positive about the home and the support and training that they received from the management with two members of staff describing being part of a 'good team'.

There is understandably a settling in process taking place as the home implements a number of significant changes but staff seemed to be adjusting well to this.

5. Feedback from Patients/Residents/Relatives/Carers/Visiting Professionals *Please ensure anonymity at all times*

a) Patients/Residents

We spoke with one resident during our visit. The resident said that the staff were very friendly and that she liked it at Canning Court but did want to go home. The member of staff gently distracted her by saying 'why don't we go to the lounge and see what's going on'.

b) Relatives/Carers

We spoke to two visiting relatives during our visit to Canning Court.

One relative told us that she was very pleased with the level of care given to her husband. She expressed her 'relief' at the support and said that the home had taken time to understand her husband's behaviour and had coped very well with it.

We spoke to another resident at length. He told us that he visits his wife every day and described the care as good. He expressed that he would like to see more activities on offer by way of stimulation and volunteered his time to providing a music activity for residents. He also suggested that there could be more one-to-one care.

c) Staff/Other professionals

We spoke with five members of staff, including nurses and care staff, as well as a visiting complimentary therapist during our visit to Canning Court.

One member of staff who have been working at the home for five years described the Registered Manager as 'caring' and 'gentle' and said that she always makes time to sit down and talk with residents. When talking about her own role at the home she said 'you have to have a heart for this role, that's what is important'.



Another member of staff who had been at the home for three years remarked about her role: 'I love it - full stop!' She spoke of an approachable manager and staff meetings every two months. This was endorsed by another long term member of staff who acknowledged the changes in management but said that there was a 'good team' now with 'good communication'.

All staff demonstrated a passion for their role and were committed to making the care home a welcoming and friendly environment for residents and their visitors. One staff member spoke about looking to find ways to support a resident with their depression. She also said she liked to try and take residents out at weekends, although this can be restricted by staff capacity.

Reflecting the person-centred ethos of the home, the activities coordinator described how she was exploring a range of activities to see what works. For example, she spoke about recently purchasing dot-to-dot books which she said some of the residents had really enjoyed doing. She also said that 'some just like peace and guiet and for you to hold their hand for half an hour'.

6. Follow Up Visit: YES / NO (delete as appropriate)

Authorised representatives to state whether they feel a follow up visit should take place, the purpose of visit, and an approximate timescale for this.

A follow up visit is recommended in 12-18 months to review the impact of changes that are currently taking place at Canning Court.