

Enter and View Visit Report

Name of Service Provider: Culpeper Care Limited

Premises visited: Willow Tree Nursing Home, 12 School Street, Rugby CV21 4BW

Date of Visit: Tuesday 18th November 2014

Time of visit: 10.30am

Registered Manager: Nicola Pepper

Authorised Representatives: Michelle Williamson and Ann Forster

Observer: Robyn Dorling

Summary of findings

- Willow Tree Nursing Home is a 47 bedded home with providing nursing and dementia facilities.
- There are 45 members of staff who work at Willow Tree Nursing Home in a range of Nursing, Care and Domestic roles.
- The current Manager Designate has been in post since September 2014 and outlined a number of planned improvements to the home during our visit.
- There are quarterly residents and relatives meetings to gather the views of the service users and comments and suggestions are welcomed via a suggestion box.
- The residents whom we spoke to were overall happy with the service they received at the home.
- Overall the staff at Willow Tree Nursing Home were very positive about the home and the current Registered Manager. There were few improvements that the staff could suggest to improve the quality of the service provided to residents.
- The relatives that were spoken to as part of the visit, were generally positive about Willow Tree Nursing Home, however some concerns were raised about the level of supervision in the communal areas and the laundry service within the home.
- We observed the physical environment of the home and highlighted some concerns around:
 - Safety and security of deliveries to the home
 - Condition of the flooring within the Cedar Unit
 - Date and menus being incorrect in the communal dining rooms
 - Access to the activities room for residents



- We observed the interaction between staff, residents and relatives. Interactions were respectful and friendly and consent was gained from residents when needed.
- We observed Service User Experience, Dignity and Respect during our visit. The experience of those people who required assisted eating raised some concerns during the visit. A recommendation has been made to this effect.

Recommendations

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

- The menu board in both the Cedar dining room and Oak dining room to be updated on a daily basis. This is to assist residents with their date recognition and allow residents the opportunity to make appropriate meal selections.
- Deliveries are not left unattended in the unmanned reception area. This will ensure the safety and security of all items to the home and remove trip hazards.
- That any individuals requiring assisted eating are attended to on a one to one basis. Additional members of staff should be available to assist other residents with their needs. If it is not possible to assist all individuals at the same time then meals should not be served until the staff member is available. This will improve the service user experience and ensure that food reaches them at the correct temperature.
- That concerns raised by relatives about the level of supervision within the communal areas is addressed. This could be done via the next Residents and Relatives meeting.



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 Willow Tree Nursing Home 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, Nicola Pepper who was our point of contact throughout the visit. Nicola facilitated our visit and provided access to all relevant areas of the home.

Willow Tree Nursing Home is a purpose built home with 2 separate units. Cedar is their nursing unit which accommodates up to 22 residents, whose primary need is nursing care. Oak is their dementia unit which accommodates up to 23 residents, whose primary need is dementia care.

There are currently 41 residents at Willow Tree Nursing Home and 4 vacancies. There are no shared rooms at present. All bedrooms have en-suite facilities and there are 2 communal bathrooms in each unit.

Each resident has access to a call bell in their own room.

We conducted an in-depth interview with Nicola, the Registered Manager who has been in post since September 2014.

Nicola confirmed that usual staffing for the home was 2 Registered Nurses during the day and 8-9 Care Staff across both the units and 1 Registered Nurse and 3-4 Care Staff overnight. There is also 1 fulltime activity coordinator and 4 domestic staff working at the home. There were 45 members of staff in total at the home, with 70% of staff having worked in the home longer than 12 months.

Nicola went in to detail about the plans which she has for the home and some of the work which she has had carried out since her appointment. There has been refurbishment in the dementia unit, with the addition of pictures and wall art in the corridors. There are plans to update the resident's doors with pictures of them when they were younger and for a 1950's reminiscence room to be created.

Nicola explained that the views of residents and their relatives were important to Willow Tree Nursing Home and quarterly residents and relatives meetings were being held. The last meeting was held on 8th October 2014 and a copy of the minutes and actions could be found in the reception area.

2. Purpose of Visit *Put in a small paragraph about why the visit was undertaken*

The visit to Willow Tree Nursing Home was in response to concerns received by Healthwatch Warwickshire about the standard of care provided at the home and dignity of residents.



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, relatives and visitors and members of staff throughout the visit.

4. Observations/Findings

These should be summarised under the following headings:

Physical Environment

Willow Tree Nursing Home is located off the main road, at the rear of residential properties. There is a large car park available for staff and visitors, which was clean and tidy.

Entry to the home is through an unmanned reception area, and the entry buzzer is answered by nearby members of staff.

The reception area was spacious and displayed a number of thank you cards from residents and their relatives. There was also a resident/relative information board which was kept up to date displayed in the reception area. A suggestion and comments box was available. A copy of the homes policies were available in the reception area.

During the day a number of deliveries had been received at the home and some of these items were left in the unmanned reception area. These items could be vulnerable to loss or damage or could cause a trip hazard if placed on the floor. The flooring throughout the Cedar unit was in need of repair. There was black tape on the floor to mask joins in the flooring. The Registered Manager confirmed that the flooring was being replaced in December.

The Oak unit showed signs of recent redecoration and the communal corridors had been adorned with photographs, pictures and wall art. There was a handrail around the communal corridors and the flooring was free of slip and trip hazards.

There was an activities room within the communal lounge in the Oak unit. This room appeared cluttered and was also being used by the visiting hairdresser to carry out their treatments. If a resident wished to access this room they would require support from a member of staff or a relative.

In both the dining rooms there was a menu board. It was noted that both the boards had 'Friday 14th November 2014' on although our visit was carried out on Tuesday 18th November 2014. During our visit these dates and menu options were changed.

There are 3 gardens at the home. As our visit took place during winter there was, understandably, some decline the in the condition of the gardens. We did not enter the gardens due to inclement weather.

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Staff

Our Authorised Representatives observed interactions between staff, residents and relatives during the visit.

We saw friendly but respectful interactions between the staff and the people who lived there. Staff called residents by their preferred name and where necessary, they crouched down so that they were on the same level as the person they were speaking to.

We observed the staff requesting the residents consent before carrying out a range of activities. For example, a member of staff needed to move a wheelchair to gain access to the communal lounge and asked the person's consent before doing so.

We also observed the staff speaking to relatives and visitors to the home in a friendly and welcoming manner.

During our visit we observed an activity being delivered in the communal lounge by the activities coordinator. It was an 'around the world quiz'. The residents present in the lounge were all involved in the activity, with the activity coordinator making their way around the room to engage with residents on a one to one basis. The relatives who were also present were encouraged to join in with the activity.

The members of staff we observed were all wearing a name badge except one member of staff who had only started recently. All members of staff were wearing their uniform and were well presented.

Service User Experience, Dignity and Respect

We observed residents in both the communal lounge of the Cedar unit and Oak unit. The residents appeared to be comfortable, clean and well dressed for the current weather conditions.

The noise level in the communal lounge was at times during the activity loud, there did not appear to be quiet areas throughout the home which residents could use if they did not wish to be part of activities.

The lunch period was observed during our visit. In the Cedar Unit residents were either moved in to a separate dining room or ate in the communal lounge using lap tables. All residents were asked if they wished to have a napkin to protect their clothes during lunch and their wishes were respected. A member of staff provided drinks and interacted with the residents whilst they were waiting for their lunch. It is worth noting that there was a wait of 30 minutes from when the residents were moved into the dining room before lunch was served. There were 2 residents who required assisted eating in the dining room. There was one member of staff available to provide the assisted eating. It was observed that one resident had to wait until the other resident had finished their meal, before they could be assisted. During this time their meal remained on the table, uncovered. The member of staff providing the assisted eating encouraged



the residents to eat and provided praise during the meal. It was also observed that this member of staff was also interacting with other residents during the assisted eating, and the individual did not have their exclusive attention. This could impact the experience of the individuals being assisted. We were unable to verify this by speaking to the resident concerned.

One member of staff was present in the lounge area to support the dining experience. One resident requested support with eating and this was provided in a dignified manner.

We observed consent being gained from residents during the lunch period. For example, a resident had stopped eating, but they were asked if they had finished before their plate was removed.

In the Oak Unit, there was a different dining experience as the communal lounge had a 'café' set up. The residents were seated for lunch and it was a wait of 30 minutes before lunch was served. The tables were not laid for lunch until the residents were seated and again the residents were offered a choice of having a napkin to protect their clothes during the meal.

There were two residents who were being assisted with their lunch by family members and one resident being assisted by a member of staff. All other residents were eating independently.

One Authorised Representative observed a resident struggling to drink from a normal cup. The drink was knocked over and 25 minutes later the spillage was cleared and the resident given a cup which they could manage.

Service User / Relative or Carer story

Due to the complex needs of some of the residents and timing of the visit we were unable to obtain a service user story.

Staff Feedback

We spoke to five members of staff during our visit to Willow Tree Nursing Home. All members of staff were willing to freely engage with our Authorised Representatives.

All members of staff we engaged with were very positive about the home and the Registered Manager.

A member of staff told us that they were happy working in the home and felt well supported by the manager and other staff.

Another member of staff told us that they loved working at Willow Tree Nursing Home, it has a nice atmosphere and the staff were the best thing about working there.



All members of staff whom we spoke to confirmed that they received regular support from their manager and the opportunity to undertake additional training and qualifications.

One member of staff said there was nothing they would improve about the home. Another member of staff wished they had more time to spend with residents although a different member of staff felt that they had enough time with the residents.

Another comment received was that the member of staff thought it would be nice is a trip out for residents could be organised.

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

a) Patients/Residents

We spoke to two residents during our visit to Willow Tree Nursing home.

One resident said that they felt well looked after at Willow Tree Nursing Home. They praised the staff and said the nurses come 'like lightening if I call them'. The resident also said they 'wished all homes were this good'.

The other resident said they felt there were plenty of staff around and that the staff were good. This resident had not eaten their dinner, as they were feeling unwell, and were offered an alternative meal to suit their needs.

b) Relatives/Carers

We spoke to five relatives and carers during our visit to Willow Tree Nursing Home.

One relative told us that they had two members of their family living at the home. They had chosen the home based on recommendations, and knew the local area well. They said that Willow Tree Nursing Home was 'a home from home' and had 'a family feel'. They could suggest no improvements for the home and had no concerns about their relatives living at Willow Tree Nursing Home.

Another relative told us that they would recommend the home to others. Willow Tree Nursing Home was 'better than previous homes and that they had no concerns about the care their relative received. They were asked if they felt they could make a complaint. They confirmed that they did and knew the process for making a complaint.

We spoke to another relative who informed us that their family member had recently experienced a fall at the home. They had some concerns about the fall and felt that they had not received enough detail about the fall. Healthwatch would recommend in this instance that the resident's family were supplied with



details from the accident investigation and have the opportunity to discuss their concerns with the Registered Manager.

We received comments from 2 relatives who were concerned about the level of staffing in the communal areas. One comment received was 'a resident could fall and no one would know' another said 'sometimes there are no staff in the room for an hour, but they will come if you call them'.

Another relative raised a concern about the laundry service within the home. They said 'clothes can get mixed up, it's not worth buying clothes for Christmas because you will come in and see another resident wearing them'.

One relative said 'the food is good, my mum is well fed'.

c) Other professionals

We were unable to speak to any visiting professionals on the day of the visit.

6. Follow Up Visit : YES (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 6 months to follow up on the proposed improvements discussed with the Registered Manager and Healthwatch Warwickshire's recommendations and report back on these.