

# Enter and View Visit Final Report

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**Name of Service Provider:** The Sycamores

**Premises visited:** Sydenham Drive, Leamington Spa, Warwickshire CV31 1PB

**Date of Visit:** Monday 29<sup>th</sup> April 2019

**Time of visit:** 9:30am

**Registered Manager:** Jo Bullingham

**Authorised Representatives:** Gill Fletcher, Robyn Dorling, Su Jenkins, Alison Wickens, Dilys Skinner.

## 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

- Staff are clear about their roles, appear to be properly trained. We were informed there was a low staff turnover.
- Relatives told us that staff at the home manage challenging behavior well.
- The home has a positive focus on activities.
- A smart phone records system is used, which means relatives can see a record of the care being given at any time using an app on their phone. Staff and relatives told us that they liked this system.
- Staff reported that there is an emphasis on improving communication.
- New staff told us that they had a good induction.
- We saw residents at the home given drinks, snacks and fruit outside of normal mealtimes.
- Residents were happy to talk to us.
- Residents were dressed appropriately for the time of year.
- There is a system that records response times for staff to answer call bell alerts. We observed that 1 call bell was not plugged in and 2 pull cords were tied back.
- Some residents reported that a recent upsurge in the use of agency staff had a negative impact on their care.
- 3 residents said they would like to go out more.

- The lift had been broken on and off for 2 weeks although maintenance men completed the repair on the day we visited.
- The projector in the cinema room was not operable.

### Recommendations

- Try and limit the use of agency staff when possible.
- Routinely check call bells are plugged in and pull cords are accessible.
- Put a comments and suggestions box in the reception area.
- Continue the improvements in communication that were reported by staff.
- WCS Care support the maintenance of the garden.
- Carry out a programme of redecoration/maintenance inside and outside the building.

### Response from the Registered Manager

- The home did use more agency during March due to staff using up annual leave before the next financial year. We have also recruited 5 new carers. This also means we have a pool of bank carers to cover staff when they are on leave and training. We did use more agency that month but this has now significantly reduced to only 2 agency in the last 3 weeks.
- The home has just reviewed their interview process and induction passport which is now being rolled out. The focus is to ensure staff get a thorough induction and feel confident in their new roles.
- You observed 1 call bell was not plugged in and 2 pull cords were tied back. Duty managers are expected to complete daily walkabout at the start of each of their shifts. Part of their walkabout is to observe that residents have access to call bells, assistive technology is in place and pull cords aren't tied back. We are in the process of creating a prompt sheet for the duty manager walkabouts. I will add this check onto the prompt sheet.
- The projector in the cinema room was not operable. The projector is operable but we have had to take it out of action because one of our residents keeps entering the room and dismantling it. We are in the process of redecorating the room and turning it into a relaxation room / quiet lounge. This way there isn't any equipment that can be damaged. We will move the cinema equipment into another lounge area. This lounge is being redecorated on Tuesday 21st May 2019.
- The home doesn't have a Dementia unit. Staff are linked to floors for consistency but also have to be flexible and work across the home to meet the needs of the residents and ensure we have the correct skill mix across the floors.
- The actions from this report will be added to our Service Improvement plan. We do have a decoration plan being put into action at the moment. No timescales have been put in place yet but the small lounge is being redecorated this week and the misted windows are being replaced.

## Conclusions

The visit to the Sycamores was in response to a concern received by Healthwatch Warwickshire. The purpose of the visit was to see if there were signs of these concerns. We did not see any evidence of these concerns on the day of our visit. More detailed findings are in the body of this report.

## Approach Used

6 Authorised Representatives arrived at the home unannounced, which means that no-one knew we were coming. We spoke to The Duty Manager and Care Team Manager, 1 Lifestyle Coordinator, 8 members of staff, 10 residents and 3 relatives and observed the care being given in the communal areas of the home, including the period over lunch.

### 1. Report Overview

The Sycamores is located in Leamington Spa within walking distance of local shops and near the town centre. The owners of the home are WCS Care.

The home provides accommodation and personal care for up to 36 older people who may also have a diagnosis of Dementia. Respite care can also be provided, if there is space, but not booked in advance. End of Life Care is given to residents so they remain in a familiar environment.

When we first arrived at the home, unannounced, we spoke to the Registered Manager on the phone, (who was out on a training day) and confirmed that we were happy for the staff available to support our visit. We then spent time with the Care Team Manager, who answered our questions about the home and, along with the Lifestyle Coordinator and Duty Manager, facilitated the rest of our visit.

### 2. Interview with the Care Team Manager and Lifestyle Coordinator

#### Staffing:

The home has a Registered Manager, Deputy Manager and 3 Duty Managers who cover the home from 8am to 10pm. The senior team also operate an on-call system for night staff to call during the night if they have any concerns. Additional to this WCS Care have an on-call system for the Service Managers to support the Managers 24 hours a day, 7 days a week. The home employs 45 care staff from 8am - 3pm. A lead carer and 2 care staff work on the second and third floor and a lead carer and carer work on the ground floor. From 3pm to 10pm a lead carer and a carer work on each floor with 1 carer floating between floors. From 10pm - 8 am we have 3 lead carers covering the home. each lead carer is allocated to a floor. To support the night staff there is the on-call system for advice and guidance, as discussed above, and a carer comes in at 6am to help during the busy period.

The home has 2 cooks, 2 laundry assistants, 3 cleaners and 3 lifestyle coaches. Lifestyle coaches are Oomph trained to ensure they have the correct skills and tools to meet the socialising needs of residents. WCS Care have 3 maintenance men that cover the homes. 4 new staff are due to start and then the home will be fully staffed.

#### Bathrooms:

Each room has an en-suite, with a toilet and wash-basin, but residents share the bathroom on each floor. The bathrooms were recently refurbished and were clean and tidy with a range of specialist chairs, showers and a wet room.

#### Training:

New staff do a week to two weeks of shadowing depending on previous experience and skills. Additionally, staff attend a WCS Care 6 day induction training which covers values, mandatory training and the Care Certificate which is completed within the employee's first 12 weeks, along with observational practices. WCS Care provide training sessions for all mandatory training. The homes induction passport and interview process has recently been reviewed and is being rolled out with new staff. The home completes in-house training for moving and handling training, fire training and medication training. Additional online training is provided to cover more specialised training in bed-rails, stoma care etc and any additional training required to meet the needs of the residents living at Sycamores. The home also organises workshops to develop required skills around care plan writing, meal time experiences etc... as and when these are required.

The Care Team Manager told us that a daily ten minute information sharing meeting between has recently been introduced. Here Managers can pass on information and care staff can alert Managers to things that are going on. Staff have 3 monthly supervision meetings and a yearly appraisal. Staff told us that communication in the home had improved over the last 2 years.

#### Care Records:

Staff use an electronic care records system (PCS). This is accessed via an app on a phone which staff carry around with them. Staff told us they find this system easy to use and relatives told us that they liked being able to see the care their relatives were receiving through the app on their phone, they said it helped them to not worry so much.

#### Views of residents & relatives & complaints:

The Duty Manager told us that peoples life histories are recorded on the PCS when they come into the home. The RM deals with any complaints and the home has a complaints procedure. The DM did not appear to be familiar with the complaints procedure but was able to tell us how she had addressed a recent complaint from a resident.

We recommend that a comments and suggestions box is put in the reception area.

#### Falls:

The Duty Manager was aware of the concerns raised in the last CQC report and told us that the Falls Prevention Team came into the home.

We saw good practice in falls prevention with special beds, safety and sensor mats being used. Hoist slings now had breathable straps to reduce the chance of skin damage occurring. Moving and handling equipment was in rooms but out of the way. People who stayed in bed were using air mattresses to avoid pressure sores. The lounges had pressure cushions in. Some residents were using frames to get around. Residents able to move around their home were free to do so.

#### Nutrition and Hydration:

The CTM told us that resident's weight; is recorded when they come out of hospital; weekly if there are any concerns; and routinely for all residents every month. Review meetings are held and Dietician referrals made. We observed good practice with drinks and snacks in the lounges and people's rooms.

All food is cooked on site. The cooks can provide a pureed diet when needed. Personal taste is responded to. We saw one resident getting a salad that was not on the lunch menu because this is what they preferred.

#### Doctors:

The CTM told us that a Doctor visits the home regularly.

#### Medication:

Medication is recorded in an electronic medicines system which is accessed by an app on a phone which staff carry with them.

Residents medicines are kept in locked cupboards in their own rooms, apart from controlled medicines which are kept in a staff station and a locked room. Each floor has a trained person to administer medicines.

#### Red Bag Scheme:

The home is introducing the (National) Red Bag Scheme for transferring standardised medical information, medication and the personal property of individuals when being transferred between the care home and hospital. This initiative is to improve communication between care homes and hospitals at all points of the resident's journey.

#### Dentists / Opticians / Podiatrist:

The CTM told us that these all visit regularly; the Podiatrist every 6 weeks.

#### Activities:

WCS Care employ 3 part time Lifestyle Coaches who are Oomph trained and wear the Oomph uniform of a T-shirt with a logo. Oomph support the Lifestyle Coaches to look at nutrition, life stories and carry out risk assessments. They provide weekly programs, site visits to look at the needs of the home and put action plans in place for continuous improvement. Oomph organise training which includes movement and exercise, nature and creative activities, sport etc. There are weekly trips out with Oomph's 'Out and about' bus.

The Lifestyle Coaches provide a positive aspect to the home; it was clear on the day of our visit that the Lifestyle Coach knew all the residents well. Residents told us they liked going out in the bus and would like to go out more. The activities for the week are displayed in each resident's room and in the communal areas.

#### Hairdressing:

A hairdresser comes in twice a week. A volunteer runs a nail bar.

#### Laundry:

The home provides a badge system with room numbers on to identify residents clothing.

#### Spiritual and Cultural needs:

We saw evidence of resident's religious beliefs in their rooms.

A positive aspect of the home is that some of the staff are bilingual.

#### Maintenance:

WCS Care employ 3 maintenance men who work across 12 care homes. The décor of the home looked worn. We were told that WCS Care have a planned programme of refurbishment but staff were unable to tell us when it would start. Plaster work needed fixing by the main stairs, wallpaper was torn in places and the architraves were worn. Double glazed window units were misted and needed repair / replacement.

We recommend that the Registered Manager asks the owners to identify a start date for the planned programme of refurbishment as soon as possible.

The lift was repaired on the day we visited but it had been broken on and off for 2 weeks. This had meant residents who could not use the stairs had at times been unable to move between floors or go out.

#### Pets:

Staff told us that there is a resident cat and 3 other cats visit the home. We saw rabbits in the garden and fish and a Budgerigar in the reception area. Relatives bring their dogs to visit by arrangement.

#### Smoking arrangements:

Staff hold the lighter and staff and residents can smoke in the gazebo outside. Residents cannot smoke in their rooms or elsewhere in the home.

#### Alcohol:

Residents can drink alcohol if they choose (if medically approved). From discussions with staff we think that staff should be commended for managing this skilfully.

Once the Care Team Manager had answered all our questions we were shown around the home and introduced to residents and staff.

### **3. Observations / Findings**

#### **Physical Environment**

##### The building / environment:

The building has been designed as 3 separate households over 3 floors, with the ground floor providing a home for 10 people, while the middle and top floors have 13 rooms on each floor and can be accessed by a lift or stairs. Each household has a communal open plan area with a lounge, dining area and kitchenette, where

people who are able to can make their own snacks and drinks, and staff are able to help. There is also a small sitting room on each floor.

#### Reception:

The reception was clean and tidy with hand-gel, notices and a signing in book. There was a photo album of events. There were no pictures of staff in the reception area.

A birdcage with a Budgerigar and a fish tank were in reception.

#### Bathrooms:

The first and second floor have a bathroom with a hydraulic chair and a wet-room / shower room. The ground floor has a wet room / shower room only. Each room has a toilet and wash-basin, but residents have to share the bathroom on each floor.

#### Corridors / handrails / flooring / trip hazards / safety of the physical environment:

The dining areas have laminate flooring and there is carpet in the corridors and rooms. There are handrails in the corridors,

We did not see any trip hazards.

#### Doors:

Key codes were on stairs and exits. Staff were always available to let us out on request. Bedroom doors had a knocker, residents names and evacuation requirements displayed in red amber or green stickers.

#### How to get help:

The home has a cord / call bell system and the rate of response time is monitored. Every time an alarm rings it goes off on every floor and indicates which room staff should attend. Some staff and residents commented on this 'the bell rings constantly.' We saw that 1 call bell was not plugged in and 2 cords were tied to handrails. The Duty Manager said she would look at this immediately.

We recommend that the call bells and cords are routinely checked.

#### Lighting / Noise / Temperature / Smells:

We found the noise levels to be low and thought the temperature seemed right for resident's needs. The residents appeared happy and comfortable with the lighting and temperature.

Some localised odours were noticeable.

#### Parking:

Parking is available at the home.

#### Gardens:

The garden is currently maintained by staff and residents. It has a good infrastructure, with a greenhouse and raised beds, but is in need of attention, as is

normal at this time of year. A slab was raised in the garden that could be a potential trip hazard.

We recommend that WCS Care support the maintenance of the garden.

## **Staff**

We spoke to 8 members of staff about what it was like working at the home. Staff were positive about the induction they received and liked working at the home. Staff were unrushed, knew what they were doing and were able to get on with their jobs.

We were told the home has a low staff turnover and staff seem to know residents well. Staff told us they were supported to change roles, undertake training and fit shifts in with childcare responsibilities.

All the staff we spoke to were happy with the electronic care records system and felt confident about inputting information through an app on a phone. They found it easy to use and the information it provided useful.

### **Consent:**

We observed the staff requesting consent before carrying out a range of activities.

### **Staff / resident interactions:**

We observed friendly and respectful interactions between staff and residents during the visit. Staff called residents by their preferred name and, where necessary, crouched down so that they were on the same level as the person they were speaking to. Staff were responsive to resident's needs, caring and helpful. We saw staff diffuse a developing disagreement between residents well.

Residents who needed help eating were well assisted, receiving 1:1 support.

We spoke to family members who described how staff had supported their relative when their behaviour was difficult.

Staff are to be commended for managing challenging behaviour with expertise and kindness.

### **Quality of care:**

The quality of care provided by the staff appeared to be of a good standard and did not give any cause for concern.

## **Service User Experience, Dignity and Respect**

We spoke to 10 residents about what it was like to live at the home. Residents were friendly, open and happy to talk to us. Residents had positive things to say about the staff but did not like the recent use of agency staff.

We have recommended that the RM tries to limit the use of agency staff.

We talked to 2 people in their rooms who were comfortable and engaged in conversation relatively easily. They talked positively about the home and reminisced in a happy way about their working lives.

#### Clothing and presentation:

Residents looked cared for and were dressed appropriately. One resident talked about going out shopping with staff for new clothes. A resident also told us that staff encouraged them to shower when they needed it.

Staff told us that residents get involved in choosing things like curtains for the home.

#### Food:

During our visit we observed the lunch period. Residents were participating in the day to day activity of having lunch at the dining table; engaging in discussion, making meal choices, eating well and enjoying their food. The TV was turned off when residents were eating.

Staff had time to support people, who needed assistance to eat, in an encouraging manner. The residents were spoken to individually and addressed in their preferred way. Relatives visited and were made welcome.

Food is cooked in the kitchen and taken to the dining areas where the temperature is tested before food is served. Residents seem to have chosen their meal earlier but were asked again, at the time of serving, so they had the opportunity to change their mind.

Residents can get involved with serving lunch and washing up. Staff told us they like to encourage residents to do what they can for themselves.

#### Dietary Requirements:

We observed that a preference for salad was catered for when it was not on the lunch menu for that day.

We did not have any concerns about service user experience, dignity and respect.

## **4. Feedback from Residents/Relatives/Carers/Visiting Professionals**

### **a) Residents:**

We spoke to 10 residents who were all happy to talk to us and very open about how they felt about the home. They told us:

“Staff always come back to help you”.

“The food is very good”.

“It’s very nice. The girls are really good unless you get agency”.

“happy -yes - sometimes it’s a bit rough and I am in one position for a long time - I need patience and staff need patience with me”.

“I complained about the soup being cold and the cook came to see me”.

“the soup could be better”.

“Everyone is friendly and polite”.

“ I had nice creamy porridge today”.

“Sometimes it seems like more staff are needed, they have so much to do”.

“At first I was not quite so sure but they are all good in there own way, I could not say there is one bad person”.

“I have just been out shopping, at first I was looking for a dress but then I fancied some trousers. They take us and then we have a cup of tea, thay take us to nice places”.

#### **b) Relatives/Carers:**

We spoke to 3 relatives who were all complementary about the staff:

“The staff managed challenging behaviour very well”.

“We are happy with the end of life care the staff gave”.

“I like the app, it was better before GDPR restricted some of the information we could see”.

#### **c) Staff:**

We spoke to 8 members of staff who all said they liked working at the home.

“The induction was good”.

“Communication has improved. “

“I can do training here or at home and I am supported to do it”.

“I’ve seen improvements in the last 3 years”.

“There are lots of meetings where I can raise any problems”.

“I have been here for 4 years and the other carers on this floor have been here longer. We all enjoy working here”.

How do we rate our observations?	
Green	At least 80% of our observations were positive.
Amber	At least 60% of our observations were positive.
Red	Less than 60% of our observations were positive. This rating is also used if safeguarding issues are identified or hazards which have the likelihood of causing harm.

Area of Observation	Rating (RAG)	
Atmosphere	Green	Low noise levels Appropriate temperature
Cleanliness	Green	Clean
Decoration	Amber	Parts of the home in need of repair and decoration
Facilities	Green	Easy access to toilets and bathrooms Toilet and basin in each room Open plan kitchen, dining room and lounge Small separate lounges can be used as a private area
Fixtures and Fittings	Green	Satisfactory Average
Flooring	Green	Carpet in corridors and rooms Wooden floors in kitchen area
Furnishings	Green	Satisfactory
Lighting	Green	Well lit but appropriate

Privacy and Dignity	Green	Residents addressed by name Staff knock doors before entering residents' rooms Staff ask before helping Residents treated with dignity and respect
Signage	Green	The inside and outside of the building are well signposted
Storage	Green	Storage space limited but used effectively
Bathrooms	Green	Toilets and basin in each room One bathroom on each floor and separate toilet. One wet room
Garden	Green	Satisfactory
Laundry	Green	Button badge system for clothes provided
Kitchen	Green	Clean and organised