# **Enter and View Report | Single Provider**



**Details of visit** 

Service address: 58 Selborne Road, Crosspool, Sheffield, S10 5ND

Service Provider: Cairn Home

Date and Time: 6<sup>th</sup> June 2015

Authorised Tony Blackbourn, Ryan Stuchbury and Nicholas

Representatives: Bennett

Contact details: Healthwatch Sheffield, The Circle, 33 Rockingham Lane,

Sheffield, S1 4FW

# **Acknowledgements**

Healthwatch Sheffield would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme.

#### 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?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. 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 – so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit. In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.

# Purpose of the visit

The visit is part of an ongoing planned series of visits to residential homes looking at the care provided. As part of our work with the Health and Wellbeing Board, we will be asking a specific set of questions about dignity, to find out whether people's dignity and privacy is respected. Specifically we looked to find out whether the care provided meets people's needs, whether people's needs and wishes are respected. We also wished to discover what people and their families think about the services that are provided and to find out how the home connects with the wider environment.

This list is not exclusive. We do gather other information that adds to this list and aim to identify examples of good working practice.

# **Strategic drivers**

- To continue with a planned series of Enter and View to residential settings started by the former Sheffield LINk
- To ask particular sets of questions about dignity, oral health and dementia.

# Methodology

This was an announced Enter and View visit. Residents and relatives were alerted to our visit by staff.

With the team leader on duty, we discussed many areas of the home including residents needs, staff training, end of life care/advanced care planning, residents dignity, input of health and allied professionals, food and nutrition.

We had the following discussions:

• Talked to 4 residents, 1 family member and 3 members of staff.

Semi structured interview questions were prepared before the visit. We were advised by staff as to individuals who were able/ suitable to be approached.

We observed the interaction between staff and residents, and the public and communal areas in the home.

Our findings were briefly discussed with the Team Leader before leaving.



# **Summary of findings**

The residents and family member spoken to were all complimentary about the quality of the care they received at Cairn Home. The building and garden was well maintained and has an airy and welcoming atmosphere. The staff appeared well trained and caring. The dignity and privacy of the residents was clearly respected and efforts were made to ensure that residents had choice in their lives.

The care provided appeared to meet a range of residents needs. The needs and wishes of residents were not only respected but also sought by staff. Residents are free to come and go from the home and staff routinely support people on trips to the local pub and shops.

Overall, the outcome of this Enter and View is very positive. No concerns, areas of improvement or recommendations have been raised. The Authorised Representatives leading this visit felt that not only are care standards been met, but are being exceeded in many areas.

## Results of visit.

#### **Residents and Families Views**

During our visit we spoke to a number of residents who had been at Cairn Home for varying lengths of time. Some residents had been living at Cairn Home for a number of years and others were only there for a week or two. We received a range of comments, such as, "All right for me, all good meals", "It's ok here, they are pretty good" and "it's very nice here."



One resident expressed that she enjoyed the company of others and that she thought the staff listened to her and were very good.

One lady who was in Cairn Home for respite care expressed that she was very nervous about coming in but said that now she was here "it's lovely." She expressed here enjoyment of the cocktails she had had in the garden. She also said "I would come back... I would like to finish up here... They spoil you."

Another resident shared that she had been in Cairn Home for 12 months and initially found the transition from moving from her own home to a residential home very difficult. This resident stated that she felt very supported by all the staff, and that she especially enjoys the "lovely garden". She finds the other residents and staff keep her active and enjoys the social interaction she gains from living at Cairn Home.

Whilst we were talking to the team leader and safe guarding champion a relative asked if she could speak to us and commented that her mother was in Cairn Home for a few days respite and was "very happy". Her "mother wants to come back", "this is lovely" she also said she felt relieved.

#### **The General Environment**

Cairn Home is a clean, airy and welcoming home. 29 rooms are allocated for permanent residential care and 1 room is allocated for respite care, however, the home does provide more respite beds when permanent beds are vacant. At the time of the visit there were 25 residents and 3 people staying for respite. The home also has facilities for family members who wish to stay overnight. The communal spaces were clean and nicely presented. The décor throughout was neutral and pleasant. The hallways are carpeted to make navigation for the visually impaired easier and there are hand rails throughout. Whilst visiting we observed residents navigating using the hand rails.

We observed one unoccupied residents room and with the permission of the resident one occupied room. They were both of a good size with en-suite bathroom faculties (toilet and shower). The rooms were neutrally decorated and residents were encouraged to use their own furnishings and decorations if desired. Communal bathrooms with baths were also available for the residents to use with or without assistance.

The communal areas were spacious and clean. Most of the residents congregated in the downstairs lounge. Two further lounges were available upstairs. Behind the house was a large garden which was very well maintained and often used by the residents.

### **Management of Care**

Cairn Home supports a range of residents needs. The residents are elderly (most over 90) and have some form of visual impairment. Any medical needs are addressed by the GP who visits every Friday and by the district nurse who visits on Tuesdays and Fridays. The home is covered by the local dentist. They are also regularly visited by a chiropodist, massage therapist and hairdresser, dental inspections every six months or as required.

#### **End of Life Care**

The home has a designated end of life champion who we were able to speak to. She was still completing her training and had been offered the role and training after expressing her enthusiasm for palliative care to the management. The end of life champion acts as the homes facilitator for end of life care.

On admission to the home the GP discussed end of life and advanced care planning with residents. The home takes care to note people's preferences and desires in end of life care. Where medically appropriate the home is happy to facilitate end of life care. With the support of the GP, community nurses and St Luke's Hospice nurses the home is able to cater for a range of needs.

### **Dignity and Respect**

Cairn Home clearly respects its residents and does a lot to maintain their dignity. Three times a year residents have care plan reviews with the safeguarding champion where their feedback on all aspect of their care is sought. Residents are also encouraged to discuss their views at the monthly residents meetings. The home also has an appointed Dignity Champion.

Residents each have their own room with a locking door and key. Only the team leaders and managers have master keys. Staff are trained to knock and wait before entering and to enter tentatively if there is no reply. They announce who they are as they come into the residents rooms. We observed a staff member doing this during our visit.

Residents have choice in many aspects of their lives. There are no set times to be awake and residents have the option to stay in bed all day if they desire. They are also assisted to leave the home if they want and the back door is not locked.

Meal times are flexible and it is always possible to get something to eat and drink. Residents' feedback is sought regularly on all aspects of the running of the home.

#### Staff

All staff we observed were friendly and well presented, wearing appropriate uniform and name badges. The staff members we spoke to were friendly and passionate. Residents were very complimentary about the staff.

Staffing levels seemed appropriate and no one complained that they were under staffed. All new staff undergo care standards training followed by a period of shadowing a more experience member of staff followed by a period of being shadowed. Staff are also supported with further training.

#### **Training**

All new starters undergo a three day care standards induction course which covers the fundamental aspects of care including; MCA/DoLS, moving and handling, effective communication, safeguarding, health and safety, person centred care and support, infection control. All care assistants are trained (or undergoing training) to an NVQ Level 2 in Health and Social Care standard and all Team Leaders have completed their NVQ Level 3 qualification. NVQ's are provided by a third party. Staff members have the opportunity to train and progress in a specific area they are interested or passionate about. These training courses include; dementia awareness, palliative care and are also provided by a third party. Specialist training for visual impairment is provided by The Sheffield Royal Society for the Blind. Senior Care Staff are also trained in medication management by a nationally recognised pharmacy.

### **Interactions between Staff and Residents**

Wherever we went we saw staff in attendance who were both attentive and helpful, asking residents if they needed anything, and helping them to sit down/get up and to/from wheelchairs. We felt this was significant evidence of positive relationships between staff and residents.

### **Food and Hydration**

Cairn Home operates on a fortnightly menu plan which is developed by the cook. The home has scheduled meal times and provides many options. Breakfast is flexible as residents wake up at different times throughout the morning. Breakfast options include cold choices and the menu also states that residents can order any cooked breakfast choice they wish. Lunch is served at 12pm and residents have 2-3 meal options. Lunch is typically a hot dinner and residents have the choice to select a meal this isn't on the menu if desired. Afternoon tea is served at 4.15pm with 2 meal options, and supper is served at 8pm.

In between scheduled meal times, snacks are available upon request. Jugs of water are available in every resident's room, and residents can also ask for a hot/cold drink at any point during the day or night. A hot drinks trolley goes round twice a day.

#### **Recreational / social Activities**

There are two activities coordinators. We were impressed with the range of activities available including: cocktails in the garden, book readings, quizzes, outing to the local pub and shops, making pizzas and baking bread, reminiscing, larger trips to the sea side, a barge trip and a News Week presentation to get residents involved in the goings on at Cairn Home. Residents are asked what they would like to do and staff try and facilitate them. They have a minibus and a company car to facilitate residents' travel.

### Recommendations

No immediate service improvements were identified.

# **Service Provider Response**

Whilst we at Cairn Home welcome any inspection from authorised bodies we believe that your inspection was particularly meaningful and worthwhile.

Whilst we appreciate that many boxes need to be ticked to comply with both the care standards act and other different areas of legislation we have often found it to be very disheartening and frustrating when we are criticised for minor technicalities that have absolutely no impact on the care and support we offer to our residents.

We believe that the necessary and most welcomed feedback in any report is the views of the people that use our service.

Comments from residents, staff, relatives, friends and professional community services that support us with the delivery of care will always capture the ethos and atmosphere of the home, that we appreciate your report / feedback did exactly that.

We therefore appreciated the content of your report that we found easy to read, straight to the point, informative and as we would expect very positive and complimentary.

