

# ENTER AND VIEW

## Unannounced Visit

**Probert Court Nursing Home  
16 March 2017**



Part of the Healthwatch Wolverhampton remit is to carry out Enter and View Visits. Healthwatch Wolverhampton Authorised Representatives will carry out these visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows 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 Wolverhampton Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Wolverhampton safeguarding policy, the service manager will be informed and the visit will end. The Local Authority Safeguarding Team will also be informed.

## ***Provider Details***

**Name:** Probert Court Nursing Home

**Address:** Probert Road,  
Wolverhampton,  
West Midlands,  
WV10 6UF

**Manager:** Mrs Ann Louise Donnellan

**Date of Visit:** 16 March 2017

### ***NAME***

Dana Tooby  
Yusuf Shafi

### ***ROLE***

Authorised Representative (Lead)  
Authorised Representative

## ***Purpose of Visit:***

Healthwatch Wolverhampton receives feedback on a range of services and treatments received around care homes. This visit was unannounced and was responding to concerns received by Healthwatch in respect of residents at the care home.

## ***Acknowledgements:***

Healthwatch Wolverhampton would like to thank the Home Manager, and the residents, relatives and staff for their co-operation during the visit.

## **1.0 Physical Environment**

### **External**

- 1.1 The front of the home and outside access looked clean and clear, was well maintained and had no litter.
- 1.2 There was disability access.
- 1.3 There was limited car parking space and the access road was narrow.

### **Internal**

#### **Reception/Lobby/Waiting room**

- 1.4 Access to the building was via a coded keypad for staff. We did not need to press the visitor buzzer as a member of staff let us in.
- 1.5 The signing in book was situated in a small lobby. The lobby also had wall mounted hand gel and several information boards.
- 1.6 Visitors were required to sign the book to confirm that they had washed their hands.
- 1.7 Immediately to the right of the lobby, through a set of open doors, was the office. Both the lobby and the office were fresh and clean.

#### **Internal rooms**

- 1.8 The initial impression of the building and throughout was that it was more homely than clinical as it was decorated using pastel colours and wallpaper. There were dressers, pictures, clocks and other furniture that would have been used in a domestic home.
- 1.9 All the rooms were on one level; residents rooms, lounge, laundry, kitchen, dining room, administration and conservatory. Everywhere was clean and fresh and felt very homely.
- 1.10 All bedrooms are single with sinks.
- 1.11 There was wall mounted hand gel throughout the building.

#### **Residents rooms**

- 1.12 All of the occupied rooms had a colourful plaque on the door with the residents name on.
- 1.13 All of the 23 rooms were fairly basic but decorated in warm tones making them seem more 'cosy'.
- 1.14 The Home does not equip the rooms with television; these have to be brought in by relatives if required.

#### **Lounge**

- 1.15 There was a variety of seating in the lounge which was warm and welcoming.
- 1.16 There were several homely touches in the room such as clocks and pictures.

- 1.17 There was a notice board with several greeting cards on and another showing the day, date and weather (up-to-date). There were also newspapers available.

### ***Laundry***

- 1.18 The door to the laundry had a coded keypad but the door was open and the commercial washing machines were operating.

### ***Kitchen***

- 1.19 The kitchen was well equipped.

### ***Toilets and bathrooms***

- 1.20 These were clean and tidy if a little cluttered.

### ***Quiet room***

- 1.21 This room had a fireplace, mantle and mantle clock; together with the comfortable chairs and coloured décor. It felt very warm and comfortable.

### ***Dining room***

- 1.22 The room was nicely decorated with circular tables and chairs laid out around the room; each table was covered with 2 tablecloths.
- 1.23 A large wooden dresser filled with ornaments gave a very warm and homely feel to the room.
- 1.24 There was a large fresh water dispenser for residents.

### ***Administration office***

- 1.25 This was located at the end of a long corridor. It was laid out efficiently and would easily have accommodated two people.

### ***Conservatory***

- 1.26 The conservatory had several types of different seating and was also being used to store Christmas items.
- 1.27 The conservatory led out to a small enclosed garden with a path allowing wheelchair access.
- 1.28 During the visit a member of staff placed a wheelchair directly in front of the door into the garden causing an obstruction.

## ***2.0 Staff Numbers***

- 2.1 We were told that 13 staff were on duty during the morning: 2 Nurses, 5 Carers, 2 Domestic staff, 1 Administrator, 1 Manager and 2 Catering staff.
- 2.2 At night 1 nurse and 2 Carers would be on duty.
- 2.3 The Home does not currently employ an Activities Co-ordinator but someone comes in through an outside agency to deliver music and singing sessions.

### **3.0 Agency Usage**

- 3.1 We were told there were currently 2 agency staff employed on a permanent basis and that the same agency is used for staff shortages.

### **4.0 Resident Experiences and Observations**

- 4.1 “Everything is clean and tidy. Food is good and I am very happy here. My only complaint is that staff can sometimes leave you for too long on the commode and not come back. Sometimes it is 15 minutes after they have been called before they return to take you off the commode.”
- 4.2 “No Activities during the day and just one TV in the lounge so it gets boring.”

### **5.0 Family and Visitor Experiences and Observations**

- 5.1 “It is absolutely wonderful here. It is my father in law’s birthday today and they have provided cake and everything. They are just wonderful.”
- 5.2 “Very content with the service, food, cleanliness and general hygiene- all very good but unhappy because mother is not being moved to a more permanent place.”

### **6.0 Catering Services**

- 6.1 Outside the kitchen there was a notice board with information about food allergies and intolerances.
- 6.2 We were told that food is cooked onsite by two qualified kitchen staff.
- 6.3 We were told that there is a detailed menu for residents who eat at set times throughout the day.
- 6.4 We observed that the kitchen was clean and hygienic.

### **7 Staff Experiences and Observations**

- 7.1 “Very happy and content working environment but there is no programme of activities, physiotherapy, singing, dancing, games or outside visits. Once a week music is played but this is only if nurses have the time. Nurses will do nail varnish but not massages, hairstyling or other beauty care or relaxation services.”

## **8.0 Summary, Comments and Further Observations**

- 8.1 This Enter and View visit was unannounced and took place on 16 March 2017.
- 8.2 Probert Court House Nursing Home is registered to provide accommodation and nursing care for 23 people; at the time of the visit there were 12 residents.
- 8.3 Historically the Home provided long term care but since new management has changed its role, it now provides shorter-term, step up step down care that generally lasts between 4 to 6 weeks. However, there are a few long stay residents who have chosen to remain.
- 8.4 We were told that the Home is in the process of transition since being purchased by Accord. This means that all policies, procedures, recruitment and training are being reviewed.
- 8.5 Two Agency staff are currently employed on a permanent basis whilst management recruit new staff.
- 8.6 On arrival at the Home we were greeted in a friendly manner by a member of staff who took the Healthwatch Introductory letter and then explained that neither the Manager nor the Management Administrator was on site but that the Administrator was due back from lunch.
- 8.7 We were asked if we wanted to look around the building until her return and were afforded full and open unaccompanied access to all areas of the building.
- 8.8 We observed that there was not a clock in the signing in lobby.
- 8.9 Whilst waiting in the office we noted a wipe board with staff allocation to various duties, room number against resident's names and names against step-ups.
- 8.10 When the Management Administrator returned she introduced herself and we moved to a quiet room to continue our discussion.
- 8.11 We were told that an intensive training programme was being developed for staff alongside changes in policies and procedures and that everything was "*in transition stage.*"
- 8.12 We were told that all staff had completed Infection Control, MCA and DoLs training and others were waiting to refresh Manual Handling. Safeguarding and Dementia Awareness Training had been booked - but there were

currently no plans to provide training for Equality and Diversity.

- 8.13 We were told that most staff had been trained in Palliative Care where privacy and dignity was embedded at a high level.
- 8.14 We were shown a copy of the Training Matrix that is currently being revised.
- 8.15 We observed that all the rooms were clean with good ventilation; decor and furniture was of a good standard; a homely environment rather than an 'institutional' one.
- 8.16 We were told by a resident that no activities take place during the day and that the television in the common room was shared by the residents which meant that they "get very bored."
- 8.17 All the residents spoke positively about the quality of food. Meal times are protected times and visitors are discouraged during these times. We were shown a copy of the Welcome pack where this is referred to and explained.

## **Addressing Specific Concerns**

### **8.18 Training issues i.e. Manual Handling, Use of equipment etc.**

We were told that, since the home was recently taken over, new staff were being recruited and the whole training programme was being reviewed. All the current staff have been trained in Manual Handling, Health & Safety and Infection Control. We were shown a training matrix outlining the training programme. As the take-over process has been going on for almost 2 years there needs to be a timeline agreed as to when recruitment and mandatory training for staff will be completed.

### **8.19 Communication between relatives and management:**

All residents are given a welcome pack that explains step down and discharge processes, visiting times, the pocket money facility, extra services that have to be paid for i.e. chiropody and hairdressing, toiletries and laundry (i.e. clothes need to be labelled, no personal laundry is done) and personal inventory of belongings. It also gives instructions in the event of a fire and refers to Compliments and Complaints.

We were told that no meetings take place with residents, family and staff as residents are short stay however, staff are always willing to listen to problems and concerns and there is a formal complaints procedure. Perhaps they could consider a monthly drop-in session where residents and family members could

share their experiences (both negative and positive)?

**8.20 Staff rota for breaks:**

We were shown a daily staff allocation sheet that did not include break times. We were told that staff rarely have time to take a break and there is always 2 to 3 staff on the floor at any one time. We observed staff were busy and were interacting with residents throughout our visit.

**8.21 Care Plans**

We were told that nurses update Care plans on a daily basis and were shown copies of plans that were up to date.

**8.22 Handover process**

We were told that handovers took place on every shift.

**8.23 Room cleaning**

We were told that this is done on a daily basis. We observed a chart in the office detailing room numbers and the cleaning schedule and noted that all the rooms throughout the building were clean, tidy and had no offending smells.

**8.24 Resident's clothing**

The welcome pack makes it clear that all belongings are recorded on an inventory on admission and that any new items being brought in should be added to it.

**8.25 Visiting times**

These are clearly described in the welcome pack.

**8.26 Eating arrangements:**

We were told that there are set meal times but there is some flexibility as some residents will only eat with family members and others prefer to eat in their room.

**8.27 Engagement with other professionals**

We were told that Social Workers visit the home on a regular basis as do CHC (Continuing Health Care) assessors, physiotherapists and external activity providers.



### 8.28 **Care support in the Home regarding medication**

We were told that medication is only administered by trained nurses and should not be done by Carers or family members.

### 8.29 **Medicine Management**

We were told that medications are stored in a locked cupboard or on the medicine trolley in the Nurses room. We were told that all nurses were trained and that the Home had recently been inspected by Infection Control.

### 8.30 **Transport arrangement to hospital**

We were told that family members are encouraged to do this but if this is not possible then staff are released to do it. It would be advisable to include this information in the Welcome Pack.

## 9.0 **Follow - Up Action:**

The following information is to be requested from the service provider.

**None requested**

## **10.0 Recommendations**

10.1 It would be useful to have a clock in the lobby when signing in.

10.2 Consider a loan system for televisions for those residents who only stay for a short term to avoid boredom as there is little activity or stimulus otherwise and it seems an unnecessary inconvenience for family members to install TVs.

10.3 Recreational activities promote health and well-being therefore perhaps local community /voluntary agencies would be willing to provide activities as even short stay residents would benefit from these.

10.4 As residents tend to be short stay, the information in the Welcome pack is key to them and their family members having a clear understanding of what to expect and what their responsibilities are. A more comprehensive pack could be generated that might reduce possible confusion and misunderstandings.

## ***11.0 Provider Response and Intended Action***

Healthwatch received a response from the provider outside the given timescale as a result we are unable to amend the report. But have included the information as an attachment.

## ***12.0 Disclaimer***

Please note that this report relates to findings observed during our visit made on 16 March 2017. The report does not claim to be representative of all service users, only of those who contributed within the restricted time available.

**Factual Accuracy and Improvement Plan following Healthwatch Wolverhampton Enter and View Unannounced visit being undertaken  
16<sup>th</sup> March 2017.**

**Factual Accuracy**

| <b>Clarifications around the accuracy of the evidence in the draft report</b>   |  |
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| <b>Audit section</b>  | <b>Please set out any other challenges to the accuracy of the evidence in the draft report (providing evidence demonstrating the inaccuracy)</b>   |
| <p><b>2.0 Staff numbers</b><br/>We were told that 13 staff were on duty during the morning: 2 Nurses, 5 Carers, 2 Domestic staff, 1 Administrator, 1 Manager and 2 Catering staff.</p>  | <p>Please note the Manager was not present or “on duty” within the service on the day of the audit, they were attending Accord Housing Association Head office for internal meetings.</p>  |
| <p><b>8.0 Summary, Comments and Further Observations</b><br/>8.3 Historically the Home provided long term care but since new management has changed its role, it now provides shorter-term, step up step down care that generally lasts between 4 to 6 weeks. However, there are a few long stay residents who have chosen to remain.</p> | <p>The service was remodelled to a Step Down and Discharge to Assess model –commencing 24<sup>th</sup> May 2016. This remodelling occurred whilst the service was managed by Heantun Housing Association.</p> <p>Heantun Housing Association Limited has been owned by Accord Housing Association, since 2014 but it continued to operate as Heantun Housing Association with Accord acting as the parent company.</p> |

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|   | <p>Since April 2017, Accord have changed its organisational structure so that Heantun Housing Association no longer exists as a legal entity. From April 2017, the services are being operated by Accord Housing Association Limited in line with Accord policies and procedures,</p> <p>Accord Housing Association is currently working with Local Authority/ CCG to review customers who have extended service model's duration of stay so as to find them appropriate long term care solutions.</p> |
| <p>8.4. We were told that the Home is in the process of transition since being purchased by Accord. This means that all policies, procedures, recruitment and training are being reviewed.</p>  | <p>As above, Accord have owned the service since 2014 but it was operated under Heantun's management, policies and procedures until April 2017.</p> <p>The process of transitioning to Accord care and support systems has now begun. Under Heantun's operation, there was access to some Accord Group services and therefore some corporate processes were already aligned.</p>   |
| <p>8.11 We were told that an intensive training programme was being developed for staff alongside changes in policies and procedures and that everything was "in transition stage."</p>   | <p>Where any policies and systems of work are changed, staff will receive the necessary training and guidance,</p>   |
| <p><b>Addressing Specific Concerns</b></p> <p>8.18 Training issues i.e. Manual Handling, Use of equipment etc. We were told that, since the home was recently taken over, new staff were being recruited and the whole training programme was being reviewed. All the current staff have been trained in Manual Handling, Health &amp; Safety and Infection Control. We were shown a training matrix outlining the training programme. As the take-over process has been going on for almost 2 years there needs to be a timeline agreed as to when recruitment and mandatory training for staff will be completed.</p> | <p>As indicated, the service only transferred to Accord's direct management in April 2017.</p>   |
| <p><b>8.19 Staff rota for breaks:</b><br/>We were shown a daily staff allocation sheet that did not include break times.</p>  | <p>Allocation sheets do include staff deployment for breaks- see attached.</p>   |



Allocations sheet

## Improvement Plan

| Area for Improvement  | Action to be taken   | Who By   | When By                               | Date completed/<br>comments   |
|---|--|--|---------------------------------------|---|
| <p><b>1.14 Residents Rooms</b></p> <p>The Home does not equip the rooms with television; these have to be brought in by relatives if required.</p>      | To undertake options appraisal around hire or purchase of tv's.  | Home Manager/ Locality Manager/ Accord finance | End May 17                            |   |
| <p><b>1.18 Laundry.</b></p> <p>The door to the laundry had a coded keypad but the door was open and the commercial washing machines were operating.</p> | <p>Staff to be reminded to ensure the door to the laundry remains closed at all times.</p> <p>Regular observational checks to be undertaken to check for compliance, remedial actions to be taken as required. Any deviations form request to be addressed with respective staff members within recorded supervisions.</p> | Home Manager/ Lead nurse                       | 25/04/17.<br>Daily checks thereafter. | <p>Met. Notice posted on laundry door reminding staff of requirements- 25/04/17.</p> <p>Environmental checks to be undertaken on a daily basis by lead nurse- with effect from 26/04/17</p> |
| <p><b>1.26 Conservatory.</b></p> <p>The conservatory had several types of different seating and</p>   | Removal of items undertaken and stored in appropriate storage facility.  | Home Manager/ Lead nurse                       | 25/04/17                              | Items relocated to storage facility 25/04/17.   |

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| <p>was also being used to store Christmas items.</p>   |   |  |   |                       |
| <p><b>1.28</b></p> <p>During the visit a member of staff placed a wheelchair directly in front of the door into the garden causing an obstruction.</p> | <p>Wheelchairs removed from access/ egress points- relocated to internal storage facility. Polite notice posted in conservatory area reminding staff not to leave wheelchairs in locations which may present as barriers.</p> <p>Staff to be reminded of the importance of Health and Safety / environmental observances. Clear communication cascaded to staff team via communication log.</p> <p>Further communication to be recoded within local learning log- to be shared with team in May team meeting and staff's forthcoming supervisions.</p> <p>Regular observational checks to be undertaken to check for compliance, remedial actions to be taken as required.</p> <p>Planned H&amp;S/ fire inspection audit of Home.</p> | <p>Home Manager</p> <p>Home Manager/Lead Nurse</p> <p>Home Manager</p> <p>Home Manager/Lead Nurse</p> <p>Accord H&amp;S Manager &amp; Fire Officer</p> | <p>25/04/17.</p> <p>Daily checks thereafter</p> <p>By 28/04/17</p> <p>By 28/04/17</p> <p>Daily with effect from 26/04/17</p> <p>27<sup>th</sup> April 2017.</p> | <p>Met</p> <p>Met</p> |
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| <p><b>4.00 Resident experiences and Observations</b></p> <p>4.1 “Everything is clean and tidy. Food is good and I am very happy here. My only complaint is that staff can sometimes leave you for too long on the commode and not come back. Sometimes it is 15 minutes after they have been called before they return to take you off the commode.”</p> <p>4.2 “No Activities during the day and just one TV in the lounge so it gets boring.”</p> | <p>Customer survey / satisfaction questionnaires issued to customer groups. Feedback to be used to improve service delivery.</p> <p>Expectations around customer personalised care to be revisited with staff team within team meetings and supervisions, making clear expectations for service delivery.</p> <p>Discussions held with Snr Pa’s re importance of facilitating activities in house- according to customer interest and preference.</p> <p>Review of activity programme, to include internal and external offers.</p> <p>(Please note –external facilitator attends the Home to deliver sing along sessions)</p> | <p>Accord Quality Team</p> <p>Home Manager/Lead Nurse</p> <p>Home Manager/Locality Manager</p> <p>Home Manager/Locality Manager</p> | <p>From April 17</p> <p>By 8<sup>th</sup> May 17</p> <p>07/04/17</p> <p>By 22/05/17</p> |  |
| <p>8.8.We observed that there was not a clock in the signing in lobby.</p>  | <p>Clock to be sited in entrance area.</p>   | <p>Accord handy person</p>  | <p>26/04/17</p>   |  |

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| <p>8.12 ( &amp; 8.14). We were told that all staff had completed Infection Control, MCA and DoLs training and others were waiting to refresh Manual Handling. Safeguarding and Dementia Awareness Training had been booked - but there were currently no plans to provide training for Equality and Diversity.</p> | <p>Full review of staff training; training matrix has been updated to reflect all mandatory training now having been booked for the forthcoming months/ year, to include Equality and Diversity training ( known as Fairness within Accord)</p> | <p>Home Manager/<br/>L&amp;D team</p>          | <p>Booked<br/>for 4/05/17</p>           |  |
| <p><b>8.20 Communication between relatives and management:</b> Perhaps they could consider a monthly drop-in session where residents and family members share their experiences (both negative and positive)?</p>  | <p>Managers surgery to be set up</p> <p>Customer feedback surveys in situ, feedback used to drive up customer service improvement.</p>  | <p>Home Manager</p> <p>Accord Quality team</p> | <p>By end<br/>May 17</p> <p>In situ</p> |  |
| <p><b>10.4</b> As residents tend to be short stay, the information in the Welcome pack is key to them and their family members</p>   | <p>Review of Welcome pack to be undertaken so as to provide a detailed information pack of roles/ responsibilities of the provider, customer and others involved in the individual's care programme.</p>  | <p>Home Manager</p>                            | <p>By end<br/>May 17</p>                |  |



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| having a clear understanding of what to expect and what their responsibilities are. A more comprehensive pack could be generated that might reduce possible confusion and misunderstandings. |  |  |  |  |
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