healthwatch Leeds

Enter and View Visit to:

Wykebeck Court Care home

18th December 2018

Your independent watchdog ensuring people's voice are at the heart of shaping health and care services in Leeds

Contents

Summary

Healthwatch Leeds carried out an Enter and View visit to Wykebeck Court Care Home on 18 Dec 2018.

The visit was part of our programme of Enter and View visits to new care homes in Leeds.

The aim of the visit was

1. To find out about residents' experience in the care home in relation to
    - Daily Life
    - Quality of Care
    - Activities
    - Involvement of residents and carers.

2. To identify examples of good practice

3. Highlight any issues or concerns from residents and relatives and any ideas for improvements

We collected 18 responses from a combination of face to face and postal surveys. 10 residents and eight relatives gave their feedback.

During the visit, we also made observations about the environment and asked how the *Accessible Information Standard has been implemented at the home.

* Please see Appendix 3 for more information about the Accessible Information Standard.

Key Findings

People told us that Wykebeck Court Care Home was kept "clean" and "comfortable" where residents feel they are well care for. Most respondents felt that the staff were “helpful” and “attentive”.

Quality of Care

1. Of the 18 respondents, four respondents rated the care home as ‘Excellent’; eight rated it as ‘Good’. A further four respondents described the home as ‘Okay’.

2. The majority of respondents (16 of 18) felt that they or their relatives were well cared for at Wykebeck Court and the care was appropriate to residents' needs. However, five people mentioned inconsistency of staff availability.

3. All residents and their relatives agreed that staff treated residents respectfully and the majority of respondents (16 of 18) said the residents' dignity has been maintained. One resident said sometimes, and another said they did not know.

4. No respondents raised any issues with medication, on the day of the visit.

Activities

5. Fewer than half of the respondents (8 of 18) were happy with the amount and variety of activities on offer in the care home. Five were partly happy and two were unhappy. Respondents have made suggestions for improving the activities programme.

6. Just over half of respondents (10 of 18) told us they knew when and what activities were taking place at the home. The majority (12 out of 18) were not sure whether activities took place as scheduled.

Involvement of residents and relatives

7. Over half (10 of 18) of respondents felt involved in their/their relatives' care. However, the frequency of reviewing the care plans varied amongst residents according to those who did not feel fully involved.

8. Just under half (8 of 18) respondents confirmed they have had the opportunity to give their views about how the home is run, mainly through the quarterly residents meeting.

9. The majority of the respondents (15 of 18) knew who to approach if they had a concern or problem.

10. The environment of the home was spacious, clean and bright, providing a friendly atmosphere for residents. The home promotes dementia friendly practices. However, it would be helpful to relatives and visitors if information about the staff team is clearly displayed.

11. The manager stated that residents' communication needs were assessed and well documented in a designated area of their care plan. These needs were highlighted on the front of the care plan.

Key recommendations

Based on our observations and the respondents' feedback, the majority of residents receive good care. However, consideration of the following recommendations may enhance the residents experience:

- Review the content of the activities' programme and how it is communicated to residents and relatives.
- Consider providing more opportunities for involving people in their/their relative's care and also how the home is run.
- Consider introducing a staff picture board at the home.

Please refer to Page 14 for full recommendations.

Background

Wykebeck Court Care Home is a purpose built home situated in the Harehills area of Leeds.

At the time of the visit, the home provides residential care to 40 residents. The first floor caters for residents living with dementia.

There were 67 staff working at the home during the time of our visit.

Why we did it

As part of Healthwatch's role, we have a statutory right to Enter and View publicly funded NHS and adult social care services, in order to get the views of residents, patients, and their relatives about the service.

This visit was part of planned Enter and View visits to new care homes in Leeds.

For more information about Enter and View visits, please refer to Appendix 1 What is Enter and View?

What we did

This was an announced Enter and View visit.

Four Healthwatch Leeds Enter and View representatives, accompanied by one member of staff, visited Wykebeck Court Care Home between 2pm – 4:30pm on the 18th Dec 2018.

The purpose of the visit was to observe and speak to people about their experience of the care home by focusing on the following areas:

- Daily Life
- Quality of Care
- Activities
- Involvement of residents and carers

During the visit, the team spoke with 10 residents and four relatives. In addition, four relatives returned the completed questionnaires by post. In total, we collected 18 responses about the home.

During the visit, we also took time to observe the environment of the care home and how the *Accessible Information Standard has been implemented.

Please refer to Appendix 2 Methodology for more information about our approach.

The Enter and View Questionnaire and Observation sheet that we used for this visit can be found in Appendices 4 and 5 respectively.

What we found

Overall experience of care home

Residents and relatives were asked to rate their overall experience of the care home and provide comments about the home and their care.

1. Of the 18 respondents, four respondents rated the care home as 'Excellent'; eight rated it as 'Good'. A further four respondents described the home as 'Okay'. two people did not answer this question.

Four out of eight relatives described the home as "excellent" and most residents (6 out of 10) thought the home was "good".

Staff were consistently praised by both residents and their relatives as being "approachable" and "attentive to individual needs". However, two relatives commented about the adverse impact on the care for residents due to recent high turnover of staff.

"issues with staffing. Two good members leaving in December" (relative)

There were mixed responses regarding the quality of food from relatives and residents.

"Food is excellent with a first class chef." (relative)

"sometimes swamped with food but the food is nice. (resident)

"Food often cold and not enough. Not always suitable for older people. Evening hot drinks served cold. Sandwiches for tea are cold and often

*For more information about the Accessible Information Standard, please refer to Appendix 3.

soggy, made early and covered up." (relative)

Quality of Care

Residents and their relatives/friends were asked whether they felt the care met their identified needs; whether staff treated them with respect and their dignity was maintained. We also observed whether residents looked well cared for during our visit.

2. The majority of respondents (16 of 18) felt that they or their relatives were well cared for at Wykebeck Court and the care was appropriate to residents' needs. However, five people mentioned the inconsistency of staff availability.

All residents stated that the care met their needs at Wykebeck Court.

"I feel well cared for in this care home. The staff treat me well." (resident)

Six of the eight relatives felt the care met their relative's needs, while two told us this was only sometimes the case.

"Staff are excellent. Management are approachable and do act quickly" (relative)

"There are times when there is lack of staff to cope with demands. Staff turnover is high, good members of staff leave" (relative)

Whilst the majority of people (13 out of 18) said staff were available when residents needed them, five people commented that the staff availability varied due to staff change or shortage.

"Not always available due to staff shortage" (relative)

"unfortunately, there has been a lot of staff changes not always for the better, the staff are under constant pressure which does not give them time to talk to the residents which is of upmost importance as some do not have family to visit them." (relative)

3. All residents and their relatives agreed that staff treated residents respectfully and the majority of respondents (16 of 18) said the residents' dignity has been maintained. One resident said sometimes, and another said they did not know.

"The staff do treat me with respect and call me by my first name which I like" (resident)

"Haven't had one member of staff who is unhelpful. Very respectful and do their best" (relative)

The majority of residents told us that their dignity was maintained. One resident commented their dignity was maintained sometimes but did not want to offer any examples. Staff provide personal care to residents if required such as bathing, changing and brushing teeth and nail care. One resident commented that the care received was different over the weekends.

"My dignity is maintained and the staff are always willing to help me with my needs. They will help me with eating if I need and will help with brushing my teeth if I ask." (resident)

"It is different on weekends but it's not so bad. Maybe my expectations are too high." (resident)

Residents and their relatives/friends were asked whether there were any issues with resident's medication if they were needed.

4. No respondents raised any issues with medication on the day of the visit.

Relatives told us they were informed if there were any changes to medication and that staff administered them as needed.

"No issues with regards to medication here. Staff provide medication twice daily." (resident)

“I have no issues with my medication. I take them every day and the staff are always helpful and kind.” (resident)

Activities

Residents and their relatives/friends were asked whether they were happy with the amount and variety of activities on offer at the care home and whether the activities took place as planned.

5. Fewer than half of the respondents (8 of 18) were happy with the amount and variety of activities on offer in the care home. Five were partly happy and two were unhappy. Three people did not provide answers. Respondents have made suggestions for improving the activities programme.

"My father has dementia and likes music and there are activities that cater for this.” (relative)

“Unable to participate but staff do try to include resident where applicable.” (relative)

“A lot of crosswords, puzzles but lack of participation. Home seems to lack soul and a centre point.” (relative)

“A bit boring. Limited what goes on.” (resident)

6. Just over half of respondents (10 of 18) told us they knew when and what activities were taking place at the home. The majority (12 out of 18) were not sure whether activities took place as scheduled.

Most respondents mentioned that distributed leaflets were the way they would find out about activities or changes. However, some residents told us they did not know when activities were taking place or had to rely on their relatives.

“Can’t recall any outings or being told about activities.” (Resident)

“Didn’t know about carol service downstairs happening, otherwise I would have joined. No posters or communication about activities.” (Resident)

On the day of our visit, we observed a carol service taking place provided by an external organisation.

Respondents made suggestions for a range of activities to be offered. These included:

"Besides the organised activities, I feel there needs to be more hands on stuff around. Perhaps some live music or quiz game once a month to promote interactive participation. The hairdresser is fine, or the beautician, but this should be in addition to activities and not instead of a daily activity" (relative)

"I like more trips out like going to a restaurant" (resident)

"Would be interested in music activities and being able to play instruments in own time." (resident)

Involvement

Residents and their relatives/friends were asked whether they felt involved in their care.

7. Over half (10 of 18) of respondents felt involved in their/their relatives' care. However, the frequency of reviewing the care plans varied amongst residents according to those who did not feel fully involved.

Six out of eight relatives felt involved in their relatives' care while only four out of ten residents agreed with this. Four respondents said this was only sometimes the case. One resident felt they were not involved. Three residents did not respond, citing not being at the home long enough to answer.

Most relatives felt they were informed of any changes to care plans and that it was reviewed regularly. However, only four residents out of ten felt that they were involved in their care.

"The care plan is behind the door of the resident's room. It's reviewed (every) 4 to 5 weeks" (relative)

"Can't recall having care reviewed but I'm independent in self-care." (resident)

"It is up to me to request but I don't get regular reviews" (resident)

One resident told us that they had to explain the type of care needed to different staff.

In terms of working with the management to resolve care issues, there has been mixed reactions, one relative said they are able to talk to management every day if there are problems; another relative commented that contact with management is rare since they are not very visible.

"Management seem distant and not always interested." (relative)

Residents and their relatives/friends were asked whether they felt they had the opportunity to give views and opinions of how the care home is run and whether they would know who to speak to if they had a problem or concern.

8. Just under half (8 of 18) respondents confirmed they had the opportunity to give their views about how the home is run, mainly through the quarterly residents meeting.

Some relatives and residents attend meetings which take place every three months to provide feedback about how the home is run. Staff were mentioned as approachable. However, most of the residents (seven) answered "don't know" or "no" to the question. One relative said their opinions were rarely taken onboard.

"It's usually brushed aside by management. Standard answer is 'it is B*upa* rules'" (relative)

9. The majority of the respondents (15 of 18) knew who to approach if they had a concern or problem.

Respondents shared with us that they would approach the manager or member of staff they had a concern. We were told:

"The Complaints procedure is being displayed." (relative)

"I would speak to a member of staff if I had a complaint or concerns." (resident)

Environment

We looked at the environment of the care home which included observing whether information was accessible and available to residents.

10. The environment of the home was spacious, clean and bright, providing a friendly atmosphere for residents. The home promotes dementia friendly practices. However, it would be helpful to relatives and visitors if information about the staff team is clearly displayed.

Wykebeck Court is spacious and is decorated in a modern style. There are three floors in the care home. The main first floor lounge was clean and uncluttered, with a large number of residents gathered. A Dementia Unit was located on the second floor. The third floor was opened not long ago for residents requiring nursing care.

There were plenty of smaller quiet lounge areas on all floors giving residents and relatives ample choice for private meetings. There was lots of natural light coming into lounge areas.

Outside the home, there is a large garden which had an accessible pathway for residents. One relative told us they were concerned about the availability of parking spaces in particular when more residents move in.

Corridors leading to residents' rooms were clean and well maintained. Residents had each chosen a picture for their door, which created a more familiar atmosphere and made residents' rooms more personal and recognisable.

During our visit, staff were visibly tending to residents and appeared caring and friendly.

A menu and activity rota were displayed with a mixture of pictures and text. A booklet which illustrates the menu with pictures of the meal is very helpful to elderly residents with poor eyesight or dementia to make their choices.
We did not see any information displayed about the staff team.

Accessible Information Standard

11. The manager stated that residents' communication needs were assessed and well documented in a designated area of their care plan. These needs were highlighted on the front of the care plan.

    The manager informed us that residents' communication needs were identified during the Pre-Assessment stage. There is a menu at the front of the care plan which provides an overview. Sense and Communication is first on the list. Individual's communication needs and support will be highlighted there.

Recommendations

We were pleased to see that the majority of residents were satisfied with the care they received at Wykebeck Court Care Home. Based on the concerns raised by the respondents, we would like the care home to consider the following recommendations to enhance residents' experience further.

Key Findings	Recommendation
1. Of the 18 respondents, four respondents rated the care home as 'Excellent'; 8 rated it as 'Good'. A further four respondents described the home as 'Okay'.	***Keep up with the good work, but also consider some of the recommendations here for enhanced improvement.***

2. A majority of respondents (16 of 18) felt that they or their relatives were well cared for at Wykebeck Court Care Home and the care was appropriate to residents' needs. However, five people mentioned about the inconsistency of staff availability.	***Maintaining the good quality of care for residents*** ***Consider reviewing staffing levels and rota to fill in potential gaps when there are high demands.***
3. All residents and their relatives agreed that staff treated residents respectfully and the majority of respondents (16 of 18) said the residents' dignity has been maintained. One resident said sometimes, and another said they did not know.	***Keep up with the good work***
4. No respondent raised any issue with medication on the day of the visit.	
5. Fewer than half of the respondents (8 of 18) were happy with the amount and variety of activities on offer in the care home. Five were partly happy and two were unhappy. Respondents have made suggestions for improving the activities programme.	***Consider reviewing the activities programme with resident/relative's input. Introducing a better variety of activities, including trips outside of the home and musical activities.***
6. Just over half of respondents (10 of 18) told us they knew when and what activities were taking place at the home. The majority (12 out of 18) were not sure whether activities took place as scheduled.	***Consider using different ways of communicating planned activities to residents/relatives. These may include a dedicated activities board, sending out email alerts to relatives etc.***

7. Over half respondents (10 of 18) felt involved in their/their relatives' care. However, the frequency of reviewing the care plans varied amongst residents according to those who did not feel fully involved.	***Ensure residents and their relatives have regular review meetings about their care plans and are alerted to changes.***
8. Just under half (8 of 18) respondents felt they have had the opportunity to give their views about how the home is ran.	***Consider providing a wide variety of opportunities to residents and relatives to discuss how the care home is managed and run.***
9. The majority of the respondents (15 of 18) knew who to approach if they had a concern or problem.	***At present, a member of staff is the first point of call for both residents and relatives to raise concern. Consider making people more aware of both internal and external formal complaint and compliment procedures.***
10. The environment of the home was spacious, clean and bright, providing a friendly atmosphere for residents. The home promotes dementia friendly practices. However, it would be helpful to residents and visitors if the information of the staff team is clearly displayed.	***The environment of the home is welcoming!*** ***Consider introducing a staff picture board at the reception area.***
11. The manager stated that residents' communication needs were assessed and well documented in a designated area of their care plan. These needs were highlighted on the front of the care plan.	***Good work in following the Accessible Information Standard regulation.***

Next Steps

The report will be shared with Wykebeck Court Care Home, Leeds City Council and the Care Quality Commission.

We will agree with Wykebeck Court Care Home the next steps to be taken in response to our recommendations and work with them to ensure any agreed actions are followed through and implemented.

We will undertake any follow up work required to ensure there are real changes made to the service so that it is a good experience for everyone.

The report will also be published on the Healthwatch Leeds website.

Thank you

This report has been written by Tatum Yip (Community Project Worker) at Healthwatch Leeds, in collaboration with Volunteer Enter and view representatives Devon Watson, Natasha Lambert, Francis Poitier, Helen Joiner.

We would like to thank the staff at Wykebeck Court Care Home. We would also like to thank the residents and relatives for taking the time to speak with us on the day of our visit and those who sent in their feedback via post.

Appendix 1 What is Enter and View?

Part of the Healthwatch Leeds work programme is to carry out Enter and View visits.

The Health and Social Care Act allows local Healthwatch authorised representatives to 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.

Enter and View representatives 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 use the service first hand.

Healthwatch 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 safeguarding policies.

None were raised in connection with this visit.

Appendix 2 Full methodology

This was an announced Enter and View visit. The visit was undertaken by a team of five authorised enter and view representatives, including one Healthwatch staff member and four volunteers and lasted approximately 2.5 hours.

Before the visit, the home was sent a visit plan sheet outlining the purpose of the visit, who would be attending and requesting further information. A poster giving details of the visit and Healthwatch contact information was also sent for the home to display prior to the visit.

40 copies of the questionnaires and prepaid enveloped were prepared and taken to the home. We asked these to be sent out to all relatives before the visit. This gave the relatives an opportunity to feedback in their own time if they were not present at the time of our visit.

The visit was informal and involved a combination of observation and talking to residents, carers and relatives to gather their views and experience of their care, activities on offer and involvement. Observation involved the authorised representatives walking around the home, observing the surroundings to gain an understanding of how the home works and get a feel of the general environment. The information was recorded on an observation sheet.

The Enter and View team also spoke with the manager of the home. She provided detailed information about the home, the activities, menus and a template of the care plan. She also answered any queries that were raised.

A feedback box and several copies of questionnaires were left at the entrance of the home with a letter stating the deadline for completion. Information about Healthwatch Leeds was also given out to residents, carers and relatives.

Appendix 3 Accessible Information Standard

The Accessible Information Standard (AIS) was introduced by the government in 2016 to make sure that people with a disability or sensory loss are given information in a way they can understand.

It is now the law for the NHS and adult social care services to comply with AIS.

As part of the AIS, organisations the provide NHS or adult social care must do five things. They must:

1. Ask people if they have any information or communication needs and find out how to meet their needs.

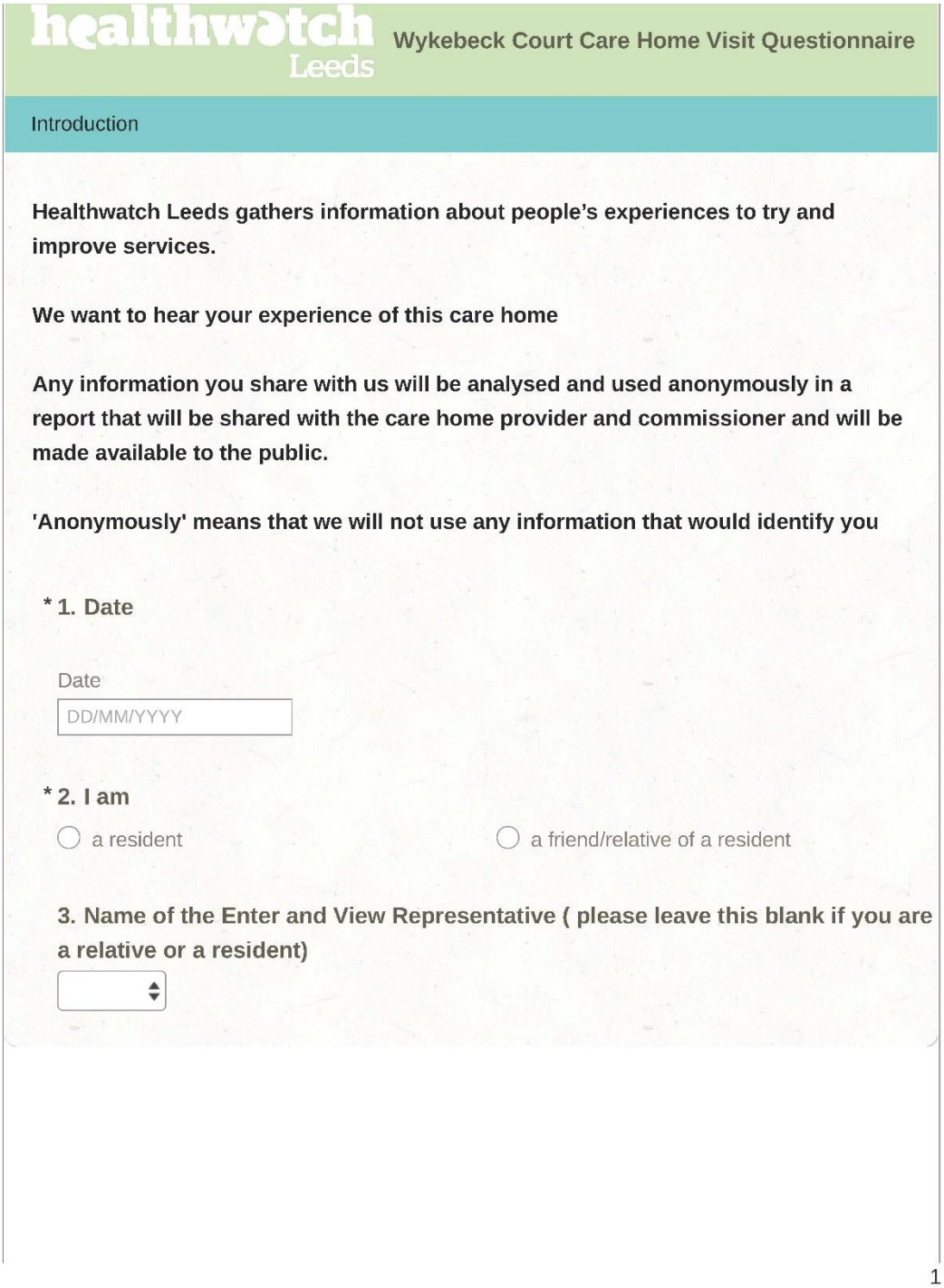
2. Record those needs in a set way.

3. Highlight a person's file, so it is clear that they have information or communication needs, and clearly explained how those needs should be met.

4. Share information about a person's needs with other NHS and adult social care provides, when they have consent or permission to do so.

5. Make sure that people get information in an accessible way and communication support if they need it.

Appendix 4 Enter and View Questionnaire



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Wykebeck Court Care Home Visit Questionnaire

Introduction

Healthwatch Leeds gathers information about people's experiences to try and improve services.

We want to hear your experience of this care home

Any information you share with us will be analysed and used anonymously in a report that will be shared with the care home provider and commissioner and will be made available to the public.

'Anonymously' means that we will not use any information that would identify you

*** 1. Date**

Date

DD/MM/YYYY

*** 2. I am**

○ a resident ○ a friend/relative of a resident

3. Name of the Enter and View Representative (please leave this blank if you are a relative or a resident)

1

*** 4. Do you feel that you or your relative/friend is well cared for at this home?**

- ○ Yes
- ○ Sometimes
- ○ No
- ○ I don't know

Please tell us the reasons for your answer

*** 5. Do staff treat you or your relative/friend with respect?**

- ○ Yes
- ○ Sometimes
- ○ No
- ○ I don't know

For example, do staff respect privacy and knock on residents door before they come in? Do they close the door when providing personal care; address them the way they prefer

*** 6. Are you or your relative/friend dignity always maintained at the care home?**

- ○ Yes
- ○ Sometimes
- ○ No
- ○ I don't know

For example, when resident needs help with eating, drinking, going to toilet, changing, is their dignity maintained consistently including during evening/weekends?

*** 7. Are the staff available when you or your relative/friend need them?**

- ○ Yes
- ○ Sometimes
- ○ No
- ○ I don't know

Please tell us your reasons for selecting your answer

*** 8. If you or your relative/friend need to take medication, are there any issues?**

- ○ Yes
- ○ N/A
- ○ No

Please provide further information

3

*** 9. Do you know when and what activities are taking place at the home?**

- ○ Yes
- ○ Not sure
- ○ No

If yes, please tell us how you know this.

*** 10. Are you happy with the amount and variety of activities on offer?**

- ○ Yes
- ○ Partly
- ○ No
- ○ n/a

Please explain why you chose your answer.

*** 11. Do activities take place when they are meant to?**

- ◯ Yes
- ◯ I'm not sure
- ◯ No

If not , how often do they not happen and are residents told about them not taking place

Involvement

*** 12. Do you feel involved in your or your friend/relative's care?**

- ◯ Yes
- ◯ Sometimes
- ◯ No
- ◯ I don't know

Please tell us more about your involvement in the care, e.g. how you are involved or more about how you would like to be involved.

5

*** 13. Do you have the opportunity to give your views and opinions about how the care home is run?**

- ○ Yes
- ○ I don't know
- ○ No

If yes, how do you do this? (e.g. questionnaire, resident/relative's meetings etc.)

*** 14. If you had a problem or concern would you know who to speak to?**

- ○ Yes
- ○ I don't know
- ○ No

If yes, who would that be?

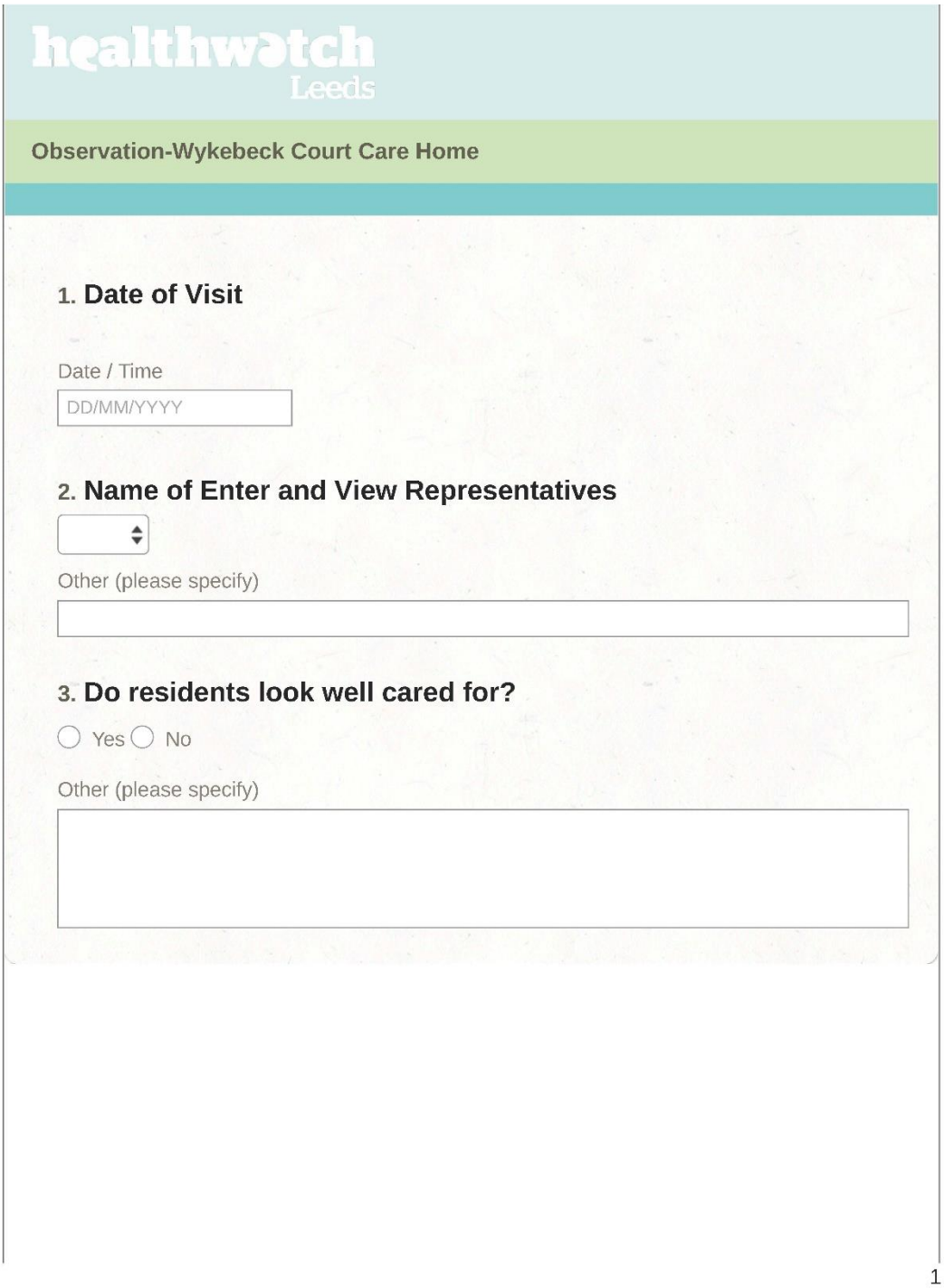
*** 15. How would you rate your overall experience in this care home?**

- ○ Excellent
- ○ Not very good
- ○ Good
- ○ Poor
- ○ Okay
- ○ I don't know

What are the reasons for your rating?

6

Appendix 5 Enter and View Observation Sheet



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Observation-Wykebeck Court Care Home

1. **Date of Visit**

Date / Time

DD/MM/YYYY

2. **Name of Enter and View Representatives**

Other (please specify)

3. **Do residents look well cared for?**

Yes No

Other (please specify)

1

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Observation-Wykebeck Court Care Home

4. **SEE**

(What does it look like? i.e. clean, tidy, cluttered, busy, quiet etc.)

5. **HEAR**

(How does it sound? i.e. quiet, noisy, chaotic, loud etc.)

6. **SMELL**

(What does it smell like? clean, stale, or any specific smells)

7. **Are information clearly displayed and easy read? For example, signage, activity rota, menu, newsletter and staff information etc**

○ yes ○ no ○ mixed

Please give details

8. Has the home followed the Accessible Information Standard?

- [ ] We ask if an individual has a communication or information support need relating to a disability or sensory loss
- [ ] We record those needs clearly either through electronic or paper based record systems
- [ ] We ensure that recorded needs are 'highly visible' whenever the individuals record is accessed
- [ ] Include communication support needs as part of existing data sharing practices(with an individuals' agreement)
- [ ] Make sure people receive information which they can access and understand, and receive communication support if they need it

By law, health and care providers need to identify, record, flag, share and action on residents/patients' communication support needs. Record details here where appropriate

9. Comments from the observer what works well and what can be improved?

3