



Details of Visit

Service Name and Address	The Pines Residential Home, Bishops Castle
Service Provider	Castlehaven Care
Date and Time	Friday 7 th August 2015 - 2pm
Visit Team (Enter & View Authorised Representatives from Healthwatch Shropshire)	Anthea Fell Steve Price

Purpose of the Visit

To observe the quality of life experienced by service users in this care setting in relation to Dignity, Choice & Respect.

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 experience of all service users and staff, only an account of what was observed and contributed at the time.

Context of Visit

In the wake of the Winterbourne Review, Shropshire's Health & Wellbeing Partnership Board requested that Healthwatch Shropshire carry out Enter & View visits to learning disability facilities in Shropshire. This is one of a number that are taking place in response to this request. The visits are taking place over a number of months. Each visit will produce an individual report. Once all the visits have taken place Healthwatch Shropshire will produce an overarching report.

This visit was announced and a pre-visit was made a fortnight previously to introduce ourselves to residents and staff and explain the reasons behind the Enter & View visit.

What we were looking at

We looked at some key things that affect an individual's quality of life: whether they experience choice, dignity and respect in this care setting.

Do individuals experience choice?

- Choice of activities, including socialising and participating in 'activities'
- Choices to shape their daily routine
- Choices over personal appearance and space

Do individuals experience dignity and respect?

- Personal privacy
- Supported as an individual and the individual's needs are recognised
- Management of group dynamics
- Involvement of family and friends in an individual's care
- Facility to complain
- Access to healthcare services

What we did

Healthwatch Shropshire arranged a pre-visit to The Pines Residential Home with the purpose of introducing the Authorised Representatives on the Enter and View visit team to the residents. This took place on Friday 24th July, two weeks before the actual Enter and View visit. Care staff were asked to contact residents' families and advocates (if appropriate), to inform them of the Enter and View visit and encourage them to attend or to communicate with the visit team.

What we found out

The Accommodation

The Pines Residential Home is part of Castlehaven Care and comprises three distinct units which can accommodate up to 13 adults with learning disabilities aged between 18 and 65:

- The Pines House is home to seven residents
- The Pines Unit is home to three residents who have difficulty living with others and also has one respite bed
- The Pine Cone accommodates two residents who live separately in self-contained flats with 24 hour care [each of the self-contained units has a staff refuge area in case there are difficulties with residents]. Communal living and general visitors present difficulties for these residents and we did not enter these flats during our visits.

In terms of layout, the main house is divided into two adjoining units, The Pines House and The Pines Unit, and to the rear of the house is the separate Pine Cone.

The Care and Support Team

A carer told us that staff were long serving and covered each other for holiday periods etc. negating the use of agency staff. There appeared to be a team ethos. Residents were generally longstanding and we were informed by staff that, where appropriate, arrangements can be made for residents to receive palliative care within the home and this has happened in the past.

During our pre-visit to The Pines Unit we were informed by a carer that a resident had just returned from a long stay in hospital. We were informed by two separate carers that during this hospital stay the resident was accompanied by Castlehaven staff. At the time of our pre-visit this person was the only resident in the unit, however on our Enter and View Visit the unit was full, with three residents.

Do individuals experience choice?

Choice of activities, including socialising and participating in 'activities'

One of the residents was due to go away on holiday shortly with one of the carers, which they had done on three previous occasions.

Another resident had been gardening, with a carer, and had harvested salad for lunch.

Three residents told us that they had a choice of food, what they wore and time of getting up and going to bed.

Choices to shape their daily routine

While in The Pines House, we sat round a table and spoke with one of the carers and four residents; there was a relaxed atmosphere. One resident was asleep in their room and another was volunteering at a local care home. Another resident was watching television and chose not to take part.

We were told by residents that they had choice in how they lived their lives, including meal times, sleeping hours, activities and family/friend participation.

We were told by both the carer and the residents that residents help with laundry, breakfast/teatime meals and do some of the washing up.

Choices over personal appearance and space

At the time of our pre-visit to The Pines Unit, two rooms were being prepared for new occupants from Castlehaven House, which was due to close. We were told by two carers that prospective residents choose the décor. In one of the rooms, a mirror had been deliberately covered in matching wall paper as the prospective resident did not like seeing reflections of themselves.

In The Pines House we found that bedrooms were decorated to individual taste and had photographs, memorabilia and collections to suit.

Do individuals experience dignity and respect?

Personal privacy/Management of group dynamics

In The Pines House all bedrooms could be secured to suit the preferences of residents but staff told us that all preferred them to be unlocked unless they were on holiday. One resident said that they wanted their door left wide open; this was a self-closing fire door that had been propped open but the resident and carer told us that the resident knew how to close the door in an emergency.

We observed and were told by carers that residents and staff were mindful not to intrude upon residents' personal space. We were told by a carer that this was reinforced at three-monthly group meetings between residents and staff.

One of the residents offered to show off their collection of items that is kept in their room and invited us to go and see them. The carer was at pains to make sure the resident was happy for one of the Authorised Representatives to go into their room by asking them directly and getting their explicit agreement.

Our perception was that the relaxed and homely atmosphere promoted mutual respect between all those in The Pines House.

Supported as an individual and individual's needs are recognised

We observed that there was a range of abilities amongst the residents and that staff dealt appropriately with each resident to ensure good communication.

Involvement of family and friends in an individual's care

During the course of our discussions with residents we heard that some were taken back to their family home by relatives or taken out for meals and trips by staff and family members. One of the residents commented that their brother joined them for meals in The Pines House.

Facility to complain

We saw evidence of a complaints system in the form of a complaints book. One resident told us that they had complained about another resident and action had been taken to resolve the problem. One of the residents explained to us the hierarchy of the complaints system.

Access to healthcare services

We were told by a carer that there was appropriate and extensive access to health services, including dentistry and chiropody. Those clients able to access local surgeries were encouraged and supported to do so while others received care at The Pines Residential Home. A carer told us that a GP from the local practice had recently taken on the role of Clinical Lead for Learning Disabilities and that this is the GP who regularly visits The Pines Residential Home.

Additional Findings

We observed that the care home manager had to authorise the administration of medication and kept the key of the medicine cupboard.

The general atmosphere in The Pines Unit we found to be friendly, calm and relaxed.

We were told by a carer that residents knew where safe houses are in the main local towns, as some of the residents travel around independently. These safe houses are houses that have been identified as being somewhere residents can safely go to if they become fearful when they are away from The Pines Residential Home.

There was no apparent security on the front door to The Pines House as the door was wide open on both of our visits. Our concern here was about unwanted visitors as opposed to freedom of residents.

It was observed that the signing in book was apparently not routinely used. On our Enter and View visit we observed that our signatures from our pre-visit were the last entries in the book.

On leaving the premises following our Enter and View visit we observed a resident of The Pines Unit using a keypad on the exit gate (albeit with a member of staff present). This resident appeared to know the code to enter in to the key pad giving them access to The Pines House and the potential dangers arising of them entering the car park and the nearby main road. This raised a possible concern for resident safety.

Summary of Findings

Although the buildings that comprise The Pines Residential Home appear to have evolved rather than being purpose built/designed, there was a homely and caring atmosphere throughout. It did not give the feeling of an institution but rather a home.

Staff informed us that residents choose the décor in their room.

The staff appeared to be genuinely caring and responsive to residents' needs.

The residents we spoke to told us that they had choice in how they lived their lives, including meal times, sleeping hours, activities and family/friend participation.

We were told by both a carer and the residents that residents help with laundry, breakfast/teatime meals and do some of the washing up.

Three-monthly group meetings take place between residents and staff where issues around personal privacy are discussed and reinforced.

Our perception was that there is mutual respect between all those in The Pines House.

There is a complaints system.

Residents have access to healthcare services by going to local surgeries or by services attending the home if necessary.

Recommendations

- Ensure the signing in book is routinely used
- Ensure appropriate controls are in place for residents entering and leaving the premises.

Service Provider Response

In response to the recommendations Rachel Hicks (Manager) has provided the following information:

Ensure the signing in book is routinely used

‘The Pines house does not have a regular schedule of visitors, it varies from week to week and it is not uncommon for us to go weeks without visitors which was perhaps the case when the volunteers visited. It just happened that their visit fell in a quiet couple of weeks. When we do have visitors they all sign in following our procedure.

We will continue with measures already in place although the sign in for visitors will be moved to a more visible location to allow for summer months when the door could be open.

Staff will continue to monitor the use of signing book when visitors arrive and leave the building.’

Ensure appropriate controls are in place for residents entering and leaving the premises.

‘The controls that are already in place are:

- The doors are locked between 10pm-8.30am unless a resident is out.
- 24hr CCTV is active and monitored daily
- As recorded in individual risk assessments, our residents at the Pines house are free to access the garden, carpark for re-cycling and 2 of our residents access the community during the day unsupported. Any other controls would flag a DOLS requests.

The gentleman who was observed using the keypad in Pines Unit has capacity to have this code, which again is recorded in his individual risk assessment.’

Overall comment:

‘It was lovely to meet Steve and Anthea and we look forward to reading the final draft of an already informative and positive report of one of our homes within the company of Castlehaven Care Limited.’ Rachel Hicks (Manager)

Acknowledgements

Healthwatch Shropshire would like to thank the service provider, service users, visitors and staff for their contribution to this Enter & View visit.

Who are Healthwatch Shropshire?

Healthwatch Shropshire is the voice for people in Shropshire about the health and social care services delivered in their area. We are an independent body providing a way for people to share their experiences to help people get the best out of their health and social care services. As one of a network of Local Healthwatch across England we are supported by the national body Healthwatch England, and our data is fed to the Care Quality Commission (CQC).

What is Enter & View?

Healthwatch Shropshire gather information on peoples experiences of health and social care services and there are times when it is appropriate for Healthwatch Shropshire to see and hear for ourselves how services are being delivered: these visits are called 'Enter & View', they are not inspections.

Teams of specially trained volunteers carry out 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 Healthwatch authorised representatives to observe service delivery and talk to services users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies.

Get in Touch!

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