



Report of Enter and View Visit

Belvedere Park Nursing Home

Report published 31 March 2015



Care Home Visited	Belvedere Park Nursing Home
Date and Time of visit	Monday 8 December, 11.00 - 15.30
Address	2 Belvedere Road, Earlsdon, Coventry, CV5 6PF
Size and Specialism	Up to 25 places, including 2 council funded places. Nursing or personal care, respite and residential care for adults.
Authorised Representatives	Karen Keates and Frances Lindsay

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.

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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 to gather the perspectives of those who are using the service. We aim to both make recommendations for development and to look for good practice examples of care through our Enter and View visits.

The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers in premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies so we can learn about and share examples from the perspective of people who experience the service first hand.

Reason for the visit

To gather information about the experience of living in care homes in Coventry including quality of life factors such as activities and choices. To look at homes from the perspective of ‘would I wish my relative to live here?’



Methodology

We collected our information by speaking to 3 of the 23 residents and 2 members of staff. Information was recorded on semi structured questionnaires asking open questions to establish what people liked most and what people felt could be improved.

Before speaking to each person we introduced ourselves by name, explained what Healthwatch is and why we were there. We established that the resident or staff member was happy to speak with us. We confirmed that their name would not be linked with anything they told us and that they were free to end the conversation at any point. We wore name badges to identify who we were and carried with us a Healthwatch information sheet and letter of authority from the Healthwatch Coventry Chief Officer.

We made observations throughout the visit and made notes of what we saw around the home. We were invited to join residents for lunch which gave us an opportunity to sample the food while we chatted to residents and staff and observed mealtime.

We left some questionnaires for completion by visitors which can be posted back to our Freepost address.

Impressions

The home was bright, clean, well furnished, spacious and friendly. Furniture was fit for purpose with high backed arm chairs and footstools in communal areas.

The temperature in the home felt quite cool. The residents that we spoke to said that they felt warm enough. Radiators were on but it was a large building to heat covering four floors and a basement. The doors separating the reception area from the lounge, the lounge from the conservatory and the conservatory from the dining area were all kept open. The manager put a heater on in the conservatory while we were there but it still did not get very warm in there.

All of the staff were well presented and wore uniforms.

There was a communal lounge upstairs, which no one was using during our visit.

Summary of findings

All of the residents we spoke to said they were happy in the home and that they felt well cared for.

The two members of staff that we interviewed during our visit said they were happy working at the home and did not specify anything which they felt needed to be improved.



Staff also commented that they were well supported by the Owner/Manager. They told us that if the Owner/Manager was not on the premises they can call her at any time.

The staff seemed well-trained and told us that they had received dementia-awareness training as well as attending other courses such as training on the Mental Capacity Act.

Staff were approachable and friendly. There was a relaxed atmosphere in the home amongst staff and residents.

We observed laughter being shared between staff and residents. Residents were smiling and looked relaxed and content.

Results of visit

Many residents spent a lot of time in their rooms. We were told by the Owner/Manager that this may be because most of the residents are receiving end of life care which is what this home specialises in and others may have chosen to stay in their rooms. However, we were not able to find any reference to a specialism in end of life care in relation to this home on the home's website or on the CQC report. From our observations we concluded that although many of the residents were physically able to leave their rooms, for whatever reason, they chose to remain in their rooms.

One resident told us that they didn't feel that they had anything in common with the other residents and that they did not socialise with her.

Residents did not go out of the home unless their relatives took them out. The home overlooks Spencer Park and we asked staff whether the residents were taken out in the summer in wheelchairs. We were told that residents are not taken out unless relatives take them out.

There was no garden, only a small paved area with a very steep step to access it. This area was not used by the residents during our visit. We felt that this heightened the need for residents' trips out.

We saw one communal bathroom, which was well equipped and large, with specialised equipment for bathing and showering.

We saw a large notice board which displayed "thank you" cards from relatives of residents. Another notice board listed menus and activities and asked for suggestions for improvement.

Staff told us that the manager was approachable and willing to take on board suggestions.



Residents said that they felt comfortable and able to raise issues and concerns. One resident said that they had recently raised a concern with staff and been satisfied with the outcome.

Food and drink

All but one resident chose to stay in their own room until lunch time when four other residents came down to eat at the table in the dining room.

We sampled the lunch of chicken a la king, broccoli, carrots and duchess potatoes with a mousse for pudding. The food we had was excellent.

There was a varied menu which was rotated monthly. A resident told us that they are given one option at meal time and they are not given a choice. Residents could request something else such as a sandwich, if they didn't like what was being offered.

The meal looked appetising and well presented and residents seemed to be enjoying it. The residents we spoke to said that they liked the food.

A resident told us, they sometimes feels hungry between mealtimes and will ask for cheese and biscuits or a banana which care staff will provide them with.

Staff told us that some residents receive help with eating and three of the residents were peg-fed.

A cook was employed who supervised two staff. The Cook told us that the Manager orders whatever ingredients are requested. The catering staff always had everything they needed in order to provide meals for the residents including baking cakes.

One visitor who was there during our visit completed a questionnaire and handed it to us. The visitor mentioned that there was no choice of food at lunch time and their relative was not told in advance what was available. Another resident said they could have sandwiches if they did not want the dinner provided but they did have to give the kitchen staff some notice of this.

Care

Staff told us that there was plenty of staff. There is a Clinical Lead who is a qualified nurse, two other nurses employed, plus bank staff. There is a Team Leader who supervises seven Care Assistants. The Owner/Manager also works at the home and we were told that she is very 'hands-on'.

Staff said that only nurses are allowed to give medication.



Staff told us that local GPs would come out at any time of the day and night to visit residents if they needed to. A number of practices were used, including the Govind Centre, Broomfield Park Medical Practice and Kensington Road Surgery.

The Manager was fully aware of the provisions of the Mental Capacity Act and gave us some examples of where they had followed through with actions in line with the act and where freedom of choice was exercised. One resident who had COPD but refused to give up smoking, was allowed to do so (outside the home) because they had been assessed by their GP as having mental capacity. The Manager also said that a resident who had liked a drink of alcohol was allowed to do so, although they were not given access to enough alcohol to allow them to get drunk.

All rooms had well equipped en-suite toilets and vibrating beds were provided in residents' rooms to prevent pressure ulcers.

Residents told us they could ring for assistance when they needed to and that if they pressed their buzzer, staff responded quickly.

During our visit we noticed that doors to resident's rooms were always left open. A resident told us that the door is left open, even at night.

Activities

A singer came and performed for the residents while we were there. We were told that she had been once before in the summer.

Staff and residents told us that hairdressing and chiropody services were provided.

We were told that there are activities with exercise balls available twice a week,

We were told by staff that there were dolls for people with dementia which the residents enjoy cuddling and playing with.

Staff told us that a Christian pastor came in every Wednesday to provide a religious service and Roman Catholics could receive communion.

We observed that there were plenty of books to read and a well-furnished lounge on every floor with a large television. We were told by staff that every resident's room had books and a television.

Residents told us that they would like more art and craft activities to take part in.

There was a very happy and relaxed atmosphere in the home and staff seemed to get on well with each other and residents.

We were told that residents could have visitors whenever they wanted to and pets could also visit.



Dementia Friendly Design

The furniture and carpets had contrasting colours.

There were no dementia friendly signs on doors including communal toilets and bathrooms.

Healthwatch Recommendations

Following our visit we would like to recommend:

- Some organised outings for residents should be provided. We felt this was particularly important as we did not see any access to a garden and residents spent most of their time in their rooms. This may make residents feel isolated, unstimulated and bored.
- We noticed that the home did not feel very warm in most of the communal areas and that this may be helped by closing some of the doors where possible to conserve heat.
- More activities made available to encourage residents to mix and socialise especially in the winter when they are less likely to be taken out by relatives.
- We were told that doors to bedrooms were left open night and day. Residents should be asked whether they would like their door left open, especially at night.
- Residents seemed to be expressing that they would like more than one hot meal choice at lunch time. We recommend more options being available on the menu.

Comments from care home manager

May I thank you for the recommendation of the team that visited our home on 08/12/14. I have reviewed their recommendations relative to my service users capabilities and disposition with my staff and I make the following observation and comments:

- We are unable to provide organised outings as the uptake of this service will be generally low considering their physical condition. Also based on the economies of scale it is impractical. In our brochure and Service User package we do not offer to provide that service.
- The temperature in the home is monitored based on the guidelines set by the Department of Health for cold or hot weather. Temperature in individual rooms are adjusted with supplementary heaters or opening the windows depending how they feel at different times of the day. In communal areas this is more challenging as some are cold and others are hot, if people are cold they get blankets and with people who are hot windows are opened.



- The doors to residents' rooms are left open or shut at their request. Only one of our residents chooses to have the door to their room shut. Majority like their doors left open for fear of isolation.
- We continue to offer activities depending on the group of residents we have. More activities are offered over a period where the uptake or people willing to engage in these activities are proportionate.
- I feel confident that our residents are offered a wide range of menu choice for breakfast and tea time but I also accept lunch time menu choice is less so. The reason for this is that we have to cater for diabetics, softs, pureed meal and people with different food allergies. Our residents generally do not favour any carbohydrate other than potatoes which is offered to them in different forms. This choice extends to the beverages they like. A lady likes Bournvita which is no longer manufactured by Cadbury's UK but this is ordered for her from abroad by the home. The important thing is that they are offered choice daily by the cook and it is not uncommon tea time to see that 4 people at least are seen having 4 different meals which they all seem to enjoy. It is also not surprising that when their chosen meal is served they change their mind so the important thing is that at the point of serving they get what they want. ACTION: we have therefore decided to be saving a month worth of their menu choices.

- Chinyere Anyanwu, Belvedere Park Nursing Home

Acknowledgements

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

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