

# Enter and View report

Ramping Cat

July 2018



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# 1 Introduction

## 1.1 Details of visit

Details of visit:	
Service Address	White Hill, Burford OX18 4EX
Service Provider	Grace Care Service Limited
Date and Time	5 <sup>th</sup> July 2018 11:45 – 15:30
Authorised Representatives	Jeanne Humber, Veronica Barry, Kanika Lang
Contact details	01865 520520

## 1.2 Acknowledgements

Healthwatch Oxfordshire 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.

# 2 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 Care Quality Commission where they are protected by legislation if they raise a concern.

### 2.1 Purpose of Visit

- To observe how the facility operates and provides its services.
- To collect views from residents, staff and visitors on how services provided may affect the quality of life of residents.
- To identify 'Best Practice' and highlight any areas of concern.

### 2.2 Strategic drivers

In early 2018 Healthwatch Oxfordshire commenced a programme of planned visits to Care Homes in Oxfordshire to look at the quality of life of residents from a resident, care and relative point of view. The visit to Ramping Cat was part of this programme.

### 2.3 Methodology

We held a pre-visit meeting on 5<sup>th</sup> June with the home owner and manager and discussed the purpose of the visit.

We collected information by talking with residents, relatives and staff. We also left feedback forms with stamped addressed envelopes for relatives to complete who were not able to be present on the day. We met with 5 residents, 9 staff and 3 relatives. We received one completed feedback form from a relative via the post.

We checked with the provider if there are individuals should not be approached or are unable to give informed consent;

We were transparent about why we were there ensuring we obtained consent from everyone we spoke to.

We discussed our initial findings with the care home manager.

### 2.4 Summary of findings

- Ramping Cat is a care home which is working very hard on improving itself.
- It is a clean, bright, airy and fresh smelling home.



- Staff are engaged and treat residents with dignity and respect.
- Residents are happy with the care they receive
- Relatives are happy with the care their loved ones receive

## 2.5 Results of visit

Ramping Cat is a care home which is currently home to 17 residents and 29 members of staff. On shift at any one time is one nurse and 4 carers (including one senior carer) plus the manager or deputy manager. The kitchen has a cook and an assistant and there are 2 domestics and one staff member working in the laundry. There is also a receptionist/administrator. We were asked to sign in upon arrival and welcomed very warmly.

### Medical support

The home has a good relationship with their local GP who comes every week and can be called out more often. The home uses a dentist in Witney who will visit residents providing they meet a certain threshold of need. This can be difficult as not all residents meet this threshold but are still not able to visit the dentist. Residents receive physiotherapy where needed with some visiting the Nuffield Orthopaedic Clinic on a weekly basis. The eye clinic has also been out to visit residents.

### Mealtimes

Food is cooked on site in the kitchen. The chef will ask residents about their preferences and at mealtimes provide them with a choice of either plates or pictures of the meals. Food was served at the correct temperature and there was a choice of where to eat. The quality of the food was good with fresh ingredients and vegetables. We were invited to stay for lunch and can say first hand that the food was very tasty. Residents were supported at mealtimes in a timely manner and staff had time to chat to residents over lunch. There was a choice of drink provided. Residents are weighed weekly or monthly depending upon their care plan. The homes use a red tray system for anyone who is considered high risk at mealtimes e.g. requires support at mealtimes, or at risk of weight loss.

### Activities

The home employs an Activities Co-Ordinator who is just about to start working full time, it is this person's job to find out from residents which activities they would like to do. The home holds a resident meeting every couple of months. There is a chart on the wall near the lounge where all the daily activities are displayed. Daily activities include watching movies, singing, therapy dogs. A vicar visits the home twice a month, and a priest also comes to visit.



### Provision of equipment

The home uses a range of equipment such as sensor mats, slings, slide sheets, walking frames and wheelchairs. These are all provided by the home. There is a nominated equipment ambassador who is responsible for the cleaning and maintenance of all equipment.

### Addressing the Care Quality Commission Report and planned improvements

In May 2018 Ramping Cat received an inadequate rating from the Care Quality Commission inspection. Since then a new manager was recruited. The whole staff team have worked incredibly hard at turning things around at Ramping Cat. They have fully engaged with the Care Quality Commission (CQC), local authority and other relevant agencies. They have developed a transparent service improvement plan and the registered provider is very open to new changes.

The deputy manager will undertake a Management and Leadership training course. The home plans to carry out better capacity assessments and better care plans. It has been noted that there are gaps in documentation and the plan to remedy this is to introduce person centred software where each staff will have a hand-held device on which to log resident details/care and as each has their own log on, any gaps can be easily tracked and dealt with immediately.

There are also plans for more resident day trips. A recent fundraising BBQ took place which was very successful, so there are plans for another - the funds raised will go towards days out for residents.

### Resident feedback

Four out of the five residents spoken with shared they were very happy living at Ramping Cat, with one acknowledging they found it hard at first. Other responses included “very nice, very good, been here two years, yes very happy here”; Are you happy here? “Very much. I don’t want to move”. One resident said they were very tired and not happy - this resident did not wish to answer any further questions about the home.

All residents who answered said they felt safe living at Ramping Cat.

When asked about the staff, the residents were very positive about them with some differing views in recent staff changes. One resident had found the changes difficult having felt some excellent staff had left, however another resident felt the ‘pruning’ of the staff had been very good and now there were no weak links. One resident did say how shocked she was at being called by her Christian name and would much preferred to be called Miss XXXX

“(the staff) are very good. If you want something you ask, they are very good”.

When asked about equipment residents said they were provided with the equipment they needed such as wheelchairs, walking frames etc. one resident said



“I’ve got a walker - it’s made all the difference, gives me the confidence to walk. Next week I’m going to start walking without the walker - it’ll be heaven”

Residents said that the best things about the home were the view and the garden. How clean the home is. The food is good, and someone is also about if you need them, having a lovely room by the garden. “I’m spoilt, they really look after me. They’re here because they want to be and they do things happily”.

When asked what they would change and how they influence change about the home, residents responded in a variety of ways. Some said they just ask and changes are done. One said they would like to be in a place of their own when they

When asked how they can influence change? Responses included asking their children, simply saying what they need “I feel heard”. One resident said whatever is said to a carer is also fed back to the owner.

There is a suggestions tree at reception with leaves that are available to be written on. The leaves are red for complaints, amber for comments and green for compliments. The complaints and comments are responded to as quickly as possible and hung on the tree as leaves.

### Staff Feedback

All nine staff spoken to were positive about working at Ramping Cat with many citing the residents as one of the things they enjoyed the most. Other reasons included shift patterns, great relationships with the staff, owner and manager. Staff found the home to be friendly with the staff being like a family. One staff member enjoyed the challenge of the current CQC status noting that things were going in the right way. One staff member who is not employed as a carer said they would like to spend more time with residents than they do saying how they had the time and really missed the company of residents but were worried what the carers and activities coordinator would think if they spent time with residents.

“I love coming here now. Love working for the current manager. She has turned it into a very positive place. It’s very accepting and comfortable”

When it came to training, staff reported that if they hadn’t already received the training they required before they started at Ramping Cat (which a number had) then they certainly received it there. Training had included manual handling, medication training, NVQ Levels 2 and 3, dignity, skin protection, dementia awareness and mental capacity. Training is carried out via both face to face and online providers. First aid training had been booked as the next core training for staff and a training matrix system is used to monitor and identify training needs.

When it came to requests for future training some staff felt that was no need as it had all been covered. Other requests included a specific dementia awareness training called ‘living in my world’, NVQ, end of life training and how to speak with relatives who have lost a loved one, advanced food hygiene, and excel. One



member of staff said “they would never stop people training and boosting their knowledge”

When ask how they discover what residents liked and disliked in terms of activities, food and choice, some staff said they would ask them and provide choices. Staff were aware of care plans and information sheets in resident bedrooms which provided information about each resident. Staff said they knew when residents were happy as they could tell them, or they would go quiet for example when watching a movie. If they were not happy they may cry or move.

Staff said they enjoyed engaging with family members with some having more contact than others. Visitors are warmly welcomed to the home and offered regular refreshments. The home has a receptionist who is there to greet family members and provide updates about relatives. All the staff really enjoyed the recent BBQ saying how lovely it was to see relatives there and how it would have been great to see the owner there too.

### Knowledge of whistleblowing policy

We asked all staff we spoke to “What is the whistle blowing policy here?” to our surprise three out of the five staff did not know or were unsure.

yes	6
No	2
Not sure	1

### Understanding of person centred care and mental capacity

Most staff understood this was linked to care revolving around the residents and about respecting their choices. It is about treating everyone as an individual and following their wishes. Some staff struggled with the term ‘person-centred care’ but did understand it in practice and how it was connected with mental capacity.

“what works for one doesn’t work for everyone”

“There are no rules, it’s not an institution”

Staff did recognise however that they were there to provide the best care for residents and where residents did not have capacity it was still important to ask them and offer them choices. Staff recognised that sometimes residents choose decisions not in their best interests and therefore may need prompting, encouragement or explanation as to why their decision may not be in their best interest. One staff member said that all staff receive training on the Mental Capacity Act and Deprivation of Liberty Safeguards.



## Changes

When asked what changes they would like to make to the home, staff were very positive with suggestions such as having interaction with residents for all staff, have weekly day trips for residents, change the colour of the walls, create a sheltered smoking area for staff, ensure all staff are aware and do job properly and have more interaction between the owner and the residents' families.

## General feedback

Staff had a variety of general feedback ranging from saying what a lovely place Ramping Cat was, to how good the management and that they were trying to change things for the better to sharing frustrations that not all staff appeared to want to change things. One comment was about how hard it is when they are short staffed due to staff sickness. A couple of staff did comment how inaccessible the home was if you did not drive, but there was an option to live on site.

## Relative Feedback

Relatives were happy with the care their loved ones received. It was recognized that moving a relative into a care home was a difficult decision and this had an impact on all concerned. One relative said of the home:

*“it’s fantastic, made to feel very welcome. My husband has been in other care homes with good CQC ratings but they were rubbish”*

Relatives felt their loved ones were safe and compared it to the fact that they had not been safe at home.

Relatives said that the staff very approachable, great and fantastic. They are always pleasant and great at communicating. The only criticism was that some of the staff did not speak English as a first language, but this was not a criticism of the care they provided. One relative noted that the home felt better since the staff changeover giving the example that the television now showed programmes and films the relatives may like and relate to as opposed to Jeremy Kyle. One family member explained how the staff had gone above and beyond by buying a highchair for her granddaughters visit after there wasn't one the first time she asked.

When it came to activities relatives said they offer lots of activities, but it can be hard for staff to engage their family members. They try hard to offer activities which each resident will enjoy, with more success in some than others such as yoga being a success. Families appreciated the effort that staff went to great lengths to involve family members.

Regarding medical care, the family members appreciated the good communication with the local GP. Dental care was a concern for one family as their loved on had

lost a lot of teeth and they were not registered with an NHS dentist. They had not thought to ask the home about this.

In relation to the CQC report, relatives' feedback that the report didn't reflect their experience saying they understood that systems needed changing, but the care is good and that is not reflected.

Medical equipment - as this is all provided by the home, the families are very pleased. One resident has been provided with a lovely recliner/wheeler chair which stops him slumping which the family are very pleased about. They do acknowledge that his reduced mobility makes it hard for him to get regular exercise.

## 2.6 Additional findings

We observed that the complaints policy was not available for carers and family members to access without asking, so we recommended this be changed. Before our visit had ended, the complaints policy was available in reception.

## 2.7 Recommendations

Our recommendations to Ramping Cat are:

- Ensure all staff are familiar with the whistleblowing policy
- Confirm with residents how they wish to be addressed
- Review resident activities with a view to doing more outside the home and engaging more with families
- Review with non-frontline staff how often they can engage with residents
- Review care home décor with staff and residents so they can input in any changes that are to be made.

## 2.8 Service provider response

The provider was given the opportunity to provide feedback on the report. They have not come back with any comments.

