



**Enter and View Visit**

**To**

Culverhayes Nursing Home

Bath

BA2 1AY

**Date and time of visit:**

Wednesday 13<sup>th</sup> May 2015 11:00-12.30

**Authorised representatives undertaking visit:**

- Christina Chow
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## **Acknowledgements**

The Enter and View team would like to express their gratitude to the residents of Culverhays Nursing home, who generously participated in conversations with Healthwatch.

They would also like to thank the acting care home manager and all the care home staff who were willing and able to engage and answer numerous queries.

## **Purpose of the visit**

Enter and view visits are part of an ongoing programme of work being implemented by Healthwatch Bath and North East Somerset to understand the quality of residents' experience within local care homes; particularly where residents have, or could be expected to have, dementia.

## **Consumer rights examined by visit**

- The right to satisfaction of basic needs
- The right to choose

## **Methodology**

The visit took the form of a series of semi structured conversations with some residents but mainly with staff.

The data collected were the representative's subjective observations and notes taken during conversations. Observations were gathered by the enter and view representatives, being recorded contemporaneously and then collated into a report afterwards.

## Background

Culverhayes is a large (65 bed) nursing home set in attractive grounds with panoramic views of Bath.

The home is comprised of 3 main units:

- the Hayes unit - 27 beds for residents with advanced dementia and palliative care
- the Lymore unit - 20 beds for residents with a range of conditions (dementia, bi-polar disorder & schizophrenia)
- the Culver unit- 19 beds for residents with complex needs, some requiring one to one care

There are 3 qualified nurses on duty both day & night. All units have at least 6 care assistants

The manager of Culverhays is Ms Rhian Rowley. She had a business-like, pleasant manner. The other staff spoke highly of her stating that she regularly participated in group activities and had a good rapport with all the patients.

Many of the nursing staff spoke English as a second language; however, they all spoke English to a high degree of fluency and were given the professional development opportunity to enrol on an English course if they had language difficulties. Additionally, all staff receive standard training and most nursing staff have a PIN (or are in the process of obtaining work).

Other staff include:

- a chef and 2 kitchen assistants,
- 2 activity coordinators (one due to start in June)
- an administrator and an assistant
- maintenance staff

It is worth noting that staff were very welcoming and went out of their way to assist us with our enquiries.

Furthermore, a local GP from 18 Oldfield Park visits the home three times per week. Residents are also assessed by a psychiatrist from St Martins. There are outstanding DOLS reports for some residents. This is however the responsibility of the local authority and not under Culverhayes' control.

Most of the residents are funded by their local authority although there are some privately funded residents.

The CQC visited in September 2013. They reported that the home met the required standard in all but one area. They found people were at risk of unsafe & inappropriate care because appropriate records were not maintained. They revisited in February 2014 when this standard was now being met.

## Observations

### **The right to satisfaction of basic needs:**

- there is no restriction on the number and times of showers/baths per day
- drinks were available whenever required
- relatives are able to visit at any time

### **The right to choose:**

- we were very aware of a resident-centred approach
- residents have a great deal of autonomy over their lives/habits. For example there are no set times for getting up or going to bed
- although mealtimes are at fixed times food, is available outside this time
- although there is a set menu, individual requests are met and honoured. For example, one patient who comes in daily for respite has omelette/eggs with chips every day. Another couple will eat only sausages with mashed potatoes and this is catered for
- residents are also able to choose any lounge to sit in / spend their leisure time in

### **The Environment:**

- the general impression was of a well-maintained light spacious home. There is a central roof-light glass atrium allowing daylight to reach interior areas
- everywhere was extremely clean, well maintained, well presented & decorated. (nevertheless the home is in the process of being redecorated)
- some areas are colour coded to ensure easier access for dementia patients. This system is set to be rolled out throughout the home upon redecoration
- hallways and corridors have interesting pictures, mostly prints of old advertisements, travel posters and pictures of old Hollywood stars. These would provide conversation stimulants for many of the residents
- all the residential rooms appear to be quite large with the majority having en-suite facilities.
- each room has a frame outside to contain a photo of the occupant to aid recognition of their room. Although some rooms were still awaiting a photo

- the garden was well landscaped with accessible paths, benches, shaded areas and a dedicated smoking bench
- there is good parking at the facility with some on street parking nearby
- the location of the home is well signposted and overall the home is easy to find

**Food/Hydration:**

- food is prepared on site. One to one feeding was observed and extra support given where necessary
- food smelt appetising and looked attractive. Portion size very generous
- different texture meals were available for those who had swallowing problems
- the home has been awarded a 5 star catering award
- family members have the option to provide help at meal times

**Activities:**

- the activities co-ordinator was attending a course on the day of our visit. Therefore no activities were scheduled that day
- an additional coordinator is due to start work shortly
- a notice-board with planned activities was displayed by the Manager's office
- some entertainment is brought in from outside; for example, the "Alive" singing group
- quieter activities are provided by staff on one to one basis such as puzzles, games, plate painting & pampering
- skittles on Culver ward daily

**Care:**

- the staff seemed to know the residents and their likes/dislikes well
- we observed some very good interaction between staff and residents. Staff knew how to interact in an effective manner with residents whilst maintaining their dignity & respect
- staff assured us that if they witnessed any treatment, which they did not think was good practice, they would report it

## Recommendations

Overall we came away with the impression of a well run home where the staff seemed to enjoy their work, appeared to be well motivated and were caring towards the residents. Our recommendations therefore refer to fairly minor matters:

- several doors to resident's rooms had no names or pictures to aid identification. These are in the process of being renewed and should be completed as soon as possible. We were told that the original idea was that these pictures would be from the past but most residents supplied recent photos. We would argue that any photo would be better than none
- hand wipes/hand washing should be available for residents prior to eating
- some residents resolutely refuse to eat vegetables & fruit. The manager assured us that all is being done to remedy this. We understand that residents must be respected in their choice of food preference; however, we would suggest a nutrition awareness raising programme or a healthy eating day/presentation

Recommendations	Response from nursing home
<p>➤ Several doors to resident's rooms had no names or pictures to aid identification. These are in the process of being renewed and should be completed as soon as possible. We were told that the original idea was that these pictures would be from the past but most residents supplied recent photos. We would argue that any photo would be better than none.</p>	<ul style="list-style-type: none"> <li>• We have contacted family members to bring in photographs for their loved ones and are hoping to complete this very soon.</li> </ul>
<p>➤ Hand wipes/hand washing should be available for residents prior to eating</p>	<ul style="list-style-type: none"> <li>• We will order some wet wipes for each unit for this to happen. However, if residents go to the toilet before meals then their hands are always washed.</li> </ul>
<p>➤ Some residents resolutely refuse to eat vegetables &amp; fruit. The manager assured us that all is being done to remedy this. We understand that residents must be respected in their choice of food preference. However we would suggest a nutrition awareness raising programme or a healthy eating day/presentation.</p>	<ul style="list-style-type: none"> <li>• With regard to the residents refusing to eat fruit and vegetables all we can do is encourage but if they have capacity to make their own decision then we can only guide and suggest. I will speak to my Training Officer with regard to nutrition awareness programme, however, my staff do understand what a nutritional meal consists of.</li> </ul>



## **Disclaimer**

- This report relates only to a specific visit (a point in time)
- This report is not representative of all service users (only those who contributed within the restricted time available)

## Appendix 1

### How were the views of residents gathered?

Residents and their visitors were approached and asked open, non-leading questions around the following subjects:

#### Questions for residents

- What has been your overall experience of.....?
- What do you think about the quality of .....
- Do you have a choice about when/how/what.....?
- Is there anything you would like to see done differently?
- Food / activities / routine / washing / clothes

#### Questions for relatives:

- How do you feel about the care your relative receives here?
- Are you happy with the appearance of your relative when you visit?
- Clean / shaven / hair / clothes

## Appendix 2

### Comments from residents

Best home I've been in

I love it here

I love the food; I have egg and chips or omelette & chips everyday

Food is very good

Staff are exceptional

Place is very clean

### Comments from relatives one of whom wrote 3 pages of her thoughts

Food is very good

Staff are exceptional

Place is very clean

My husband was in another home where he lost weight and was poorly cared for

Fact that many of the staff have worked at Culverhayes for a long time can only be a good thing

Staff are thoughtful, considerate & proactive

Would like to see more evidence of the type of qualifications & training which staff receive – certificates etc displayed

Would like to see more prompting by staff to encourage taking fluids and better training for this

The feeding cups are unstable and easily knocked over

Rubber gloves not available in public area toilet only on walls in corridor

Would like to see more activities and not just 1 hour /day. Why not involve local groups more who would provide their performances free. Anything to offer musical & visual stimulation

In addition one relative phoned the Healthwatch office to praise the alacrity with which her loved one was taken to the toilet.

## Appendix 3

### How was practice observed?

It was determined at the planning meeting that practice would be observed as follows:

Environmental practice:

- Does it smell?
- Is it welcoming?
- Appearance / décor
- Cleanliness
- Accessibility
- Parking / easy to find
- Atmosphere / is it cheerful?

Staff practice:

- Do they seem organised?
- Are they welcoming?
- Interaction with residents
- Interaction with each other