

### Clarendon Nursing Home - Enter & View Report

<b>Service</b>	Clarendon Nursing Home
<b>Address</b>	7A Zion Place, Thornton Heath, Croydon, CR7 8RR
<b>Manager</b>	Charlotte Bonsu-Kyeretwie
<b>Date and time of visit</b>	Wednesday 23 <sup>rd</sup> September 2015 10.30am - 2.30pm
<b>Status of visit</b>	Announced
<b>Healthwatch Croydon Enter &amp; View team - Authorised Representatives</b>	Annamika Koomoshan, Kay Kakad, Michael Hembest and Robert Goldsmith
<b>Lead Authorised Representative</b>	Annamika Koomoshan
<b>Healthwatch Croydon contact details</b>	Healthwatch Croydon, 24 George Street, Croydon, CRO 1PB

**Acknowledgements:** At the time of the visit Charlotte Bonsu-Kyeretwie the Manager was called away for jury service. Healthwatch Croydon would like to thank Charlotte for agreeing to the visit taking place in her absence. Our thanks to Sharon the Administrator for showing us round and to the rest of the Clarendon staff and residents for their co-operation during the visit.

#### Purpose of the visit:

The Health and Social Care Act allows Healthwatch Croydon representatives to observe service delivery and to talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. The visits can happen if people tell us there is a problem with a service, but equally, they can take place when services have a good reputation - so we can learn about shared examples of what they do well from the perspective of the people who experience the service first hand.

On this occasion, 4 Authorised Representatives in a team of 2 pairs (including a Healthwatch staff member) carried out observations and engaged with residents and staff. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations on areas for improvement.

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 policy. If at any time an Authorised Representative observes a potential safeguarding concern, they shall inform their lead and service manager. The lead Authorised Representative will then end the visit. In addition, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to Croydon Council's Safeguarding Team.

## About the service

Clarendon Nursing Home accommodates up to 47 people with various complex needs including dementia, mental health and learning disabilities. There are currently 44 residents, none of whom are self-funding. The majority of residents are from the London Borough of Croydon and a few are from Lambeth, Lewisham, Southwark and Bromley.

A member of staff provided the Authorised Representatives with a tour of the home. Clarendon Nursing Home offers en-suite rooms that are bright and airy, with shower rooms that have been recently refurbished. The rooms we visited had call bells situated by the side of the beds and a call monitor system has recently been installed to monitor the response time of staff. The Healthwatch Croydon poster was displayed advertising the visit to residents and relatives. The poster included the phone number and email address of Healthwatch Croydon so that individuals could provide feedback on the services they received.

Clarendon offers a hairdressing and a chiropody service which residents must pay for themselves. Staff offer hand and nail care to all residents except those with diabetes. The home has a dementia unit which has its own lounge and dining area. The dinner area contains a small kitchenette area that is only open during meal times for staff to make hot drinks for residents.

## Observations

### **Reception/Foyer area:**

**Security:** Healthwatch Croydon Authorised Representatives were not asked for identification on entering the building. A member of staff did ask the team to sign in on arrival as part of health and safety. On arrival, residents were smoking outside at the front of building and were accompanied by a member of staff. The reception/foyer area was bright and clean. A new computer system is in the process of being installed for staff to log in and out after their shift. Above the signing in book was a pictorial display board of scheduled activities for the week for residents to observe. The CQC rating was displayed on the opposite wall. This was moved after the new computerised system was installed. The complaints procedure was displayed on the ground floor notice board. The team were informed that every room has a service user's guide with information on the complaints procedure.

The Authorised Representative enquired about the fire safety procedure and established that the fire Marshall was waiting to be certified. The notice displaying the first aiders was difficult to read.

**Lounge:** The ground floor had the biggest lounge area which was bright and airy with new brightly coloured modern-designed high back chairs. Smaller lounge areas were situated on each floor for residents to access at their own leisure.

**Odour:** The rooms we visited were clean and fresh.

**Tidiness:** The majority of areas visited were clean and tidy. The conservatory area which is out of use was a bit cluttered with wheelchairs. Sharon explained there are plans to redecorate the areas to encourage residents to use the area and the rear garden.

**Noise:** Within the ground floor lounge and Dementia Unit lounge, the television was on for residents to access at their own leisure.

**Information displayed:** A menu was displayed on the ground floor outside the dining room. The font of the text was too small for someone with a visual impairment to be able to read it. On one of the ground floor notice boards there was too much information displayed. This may be due to lack of display space. The ground floor had information on care in dementia, dignity in care, safeguarding, photographs of residents and an order of service.

**Recommendation:** To offer residents a pictorial and large print menu.

### **Choice of food and refreshments:**

**Diabetic Meal options:** The Healthwatch Croydon Authorised Representative established that there were no diabetic meal options available. It was confirmed that diabetic residents are provided with similar meals but offered a smaller portion of potatoes and rice.

**Refreshments and meals:** A trolley of juices was brought round. Tea and coffee is offered at breakfast, 11am, 2pm and dinner. In between these times residents can request additional refreshments. Two meal options are offered and meal alternatives are provided if a resident refused to eat their meal. A Caribbean meal option is offered every two weeks.

Staff were observed interacting with residents during meal times and supporting residents who required assistance with feeding during the lunch period.

**Recommendations:** That Clarendon to implement a diabetic meal option(s) for residents.

**Response from Clarendon:** Clarendon was aware that diabetic residents were offered smaller portions of potatoes and rice but did not realise that diabetic puddings were not available.

**Staff and levels of interaction:** One member of staff was observed providing a reminiscence activity to residents. The member of staff interacted well with residents by actively engaging with the individuals and encouraged them to participate in the activity. A member of staff explained about the 'person-centred care' provided to one of the residents who likes to maintain their independence by purchasing their own clothes. A member of staff accompanies the resident into Croydon to purchase these items. Also, the team observed staff explaining to residents about the type of care they were providing; continuing interaction with the resident.

From observation after the lunch period, one member of staff was looking after 10 residents in the downstairs lounge area.

**Recommendation:** Clarendon to either have two members of staff or one member of staff and a volunteer in the lounge area to look after residents after lunch.

**Response from Clarendon:** This issue was also raised by the CQC and the home was looking at options of having another member of staff on duty in the lounge area after lunch.

**Activities:** Within the foyer areas a large pictorial activity display board listed the schedule for the week that included bingo, quiz, reminiscence etc.

**Accident reporting book:** The Administrator explained that the accident reporting system is stored within the office.

**Bedroom:** Each bedroom had a photo of a key worker and nurses displayed on the door. A member of staff showed the Authorised Representative a selection of the bedrooms. All rooms visited had recently been re-decorated and were airy and light. All rooms had en-suite toilets and hand basins. Call bells were accessible by the bed and a new monitoring system was installed a few weeks ago to monitor the response times on a regular basis.

**Other observations:**

- Each floor had a key code for the lift to prevent residents from wandering.
- Residents used the front entrance driveway as a smoking area. After lunch it was noted that residents were waiting in their wheelchairs in the foyer to be taken for a cigarette.
- The rear garden is not currently being used by residents.

### **Resident's comments/feedback**

The majority of residents found it difficult to fully understand and answer all the questions, the information below is a snapshot of their responses.

The residents talked about the activities they enjoy participating in such as bingo, quizzes and musical activities. One resident commented "There was not enough entertainment" but did not elaborate. When asked if staff knew their interests and hobbies a resident said "Staff don't encourage my hobbies". There was mixed feedback regarding the food and some individuals said they liked the puddings. One resident said "Whatever is on the menu you don't get, it depends on the Cook. Sometimes the food is too spicy". Regarding morning and bedtime routines one resident said "They wait for the day staff to get them up at 8am with a cup of tea. Don't think the night staff would like the residents getting up early". Another resident commented "I get up after 8am without pressure and could go to bed when I like. Staff help residents to get ready for breakfast". Overall the general impression was that residents are happy with the care they receive from Clarendon.

## Interview with staff

### **Favourite things about working at Clarendon?**

One particular member of staff commented “They felt supported and valued by management. Confident with raising any issues to the manager and enjoys the role and the environment. The advantage of the job was working with the residents, positive interaction.” Another member of staff said they “Like chatting to residents.” One commented “I always enjoy being with people and learning from their experiences. The best part of the job is working with the residents”.

### **Any challenges or difficulties encountered whilst working for Clarendon?**

Feedback from a few members of staff “Some residents were too aggressive especially when providing personal care. I need to be vigilant whilst dealing with aggressive residents who have violent tendencies who punch or pinch.” Staff raised concerns about the challenging behaviour of residents. Staff commented “Incidents are reported to Management who take photographs and log the incidences within the report book but nothing happens thereafter. What support is available to protect staff from aggressive residents?” It was raised that sometimes agency staff who are on leave can put pressure on staffing levels.

**Recommendation:** To seek support and training from Croydon Council on how to help staff deal with challenging behaviour from residents and establish the reason for the change in behaviour pattern. From a Health and Safety perspective, Clarendon needs to identify support mechanisms for staff on how to deal with challenging behaviour.

**Response from Clarendon:** “We have informed the Care Manager and the GP of this particular resident and the home are currently waiting for the resident to be transferred to another home. Incidents are photographed and reported.”

### **Type of training and development opportunities offered to staff?**

Staff are provided with a variety of training including Challenging Behaviour, Control of Substances Hazardous to Health, Safeguarding Adults, Protection of Vulnerable Adults, Fire Safety training and End of Life Care training by St Christopher’s.

### **Are residents involved in reviewing their care plan? How are care plans structured?**

Nurses try to involve the residents and relatives in reviewing their care plan, but the majority of time residents lack the capacity to contribute to it.

### **Do you feel supported by Management? What improvements could be made?**

Feedback received “More team working and more training on how to raise issues, concerns and improvements.”

Another member of staff said “The support from management is brilliant. It would be helpful to have another staff member or volunteer to support in group sessions”.

### **Procedure for reporting a safeguarding issue?**

Staff were aware of the safeguarding procedure and any issues are reported to the Manager. Any concerns regarding bad practice would be raised directly to the Manager.

### **Staffing level**

Dementia Unit (Day) 1 Nurse 3 Carers

First Floor (Day) 1 Nurse 4 Carers

Ground (Ground) 1 Nurse 2 Carers

Night - 2 Nurses and 4 Carers

1 Nurse and 1 Carer to remain on Dementia floor

1 Nurse covers Ground and 1st Floor during the night  
1 carer remains on ground and first floor with a carer allocated to float where needed.  
1 activity coordinator

### **Meal times**

Residents have a mixture of dietary requirements; from soft food diets to meals being cut up for residents who have suffered from a stroke and individuals requiring assistance with feeding. Care staff inform nursing staff of residents who refuse to eat their meals. Menus were displayed outside the lounge area.

### **How are faith, spiritual and cultural needs catered for?**

Every Tuesday morning a Christian service is held in the home. Roman Catholic sister and father visit on a Friday. Every third Sunday of the month Pentecostal Service is held.

**Recommendation:** Clarendon to offer a more varied cultural programme reflecting the spiritual needs of its residents.

## Conclusion

### Good practice

Overall, the team thought the home was well maintained and nicely decorated. The rooms visited were bright and airy.

- Staff interacted with residents in a caring and respectful manner
- Staff felt supported by management
- Staff are provided with a variety of training opportunities
- Residents are offered a selection of activities
- Re-decorated rooms were clean, bright and airy
- A wide variety of information was displayed
- Staff interacted well with residents by actively engaging with them
- An example of the person-centred care provided is that one resident likes to remain independent by purchasing their own clothes and a member of staff accompanies them into Croydon to purchase the items.
- The team also observed staff explaining to residents about the type of care they were providing

## Summary of recommendations

- Residents to have their photographs displayed on their door to help them recognise their room.

**Response from Clarendon:** Immediate outcome - Meeting held with residents, the general consensus is that residents prefer not to have their photographs displayed on their door.

- Clarendon to implement diabetic meal options for residents.

**Response from Clarendon:** Action plan - To provide training for the Head Chef and Catering Department. Immediate outcome - Operations Director arranged for an experienced Chef to undertake training with the Head Chef.

- Clarendon to have either a member of staff or volunteer to assist the Activity Coordinator during the Activity sessions.

**Response from Clarendon:** Action plan - To arrange for additional staff to support the Activity Coordinator during the Activity sessions. Immediate outcome - The home has made arrangements for care staff to support activities coordinator after lunch.

- To seek support and training from Croydon Council on how to help staff deal with challenging behaviour from residents. Review areas of Health and Safety to identify support mechanism for staff on how to deal with resident's challenging behaviour.
- Clarendon to offer a more varied cultural programme reflecting the spiritual needs of its residents.

**Response from Clarendon:** Every Tuesday morning a Christian service is held. Roman Catholic sister or father visits on Fridays. Every third Sunday of the month Pentecostal Service is held.



**Disclaimer**

*This report is a representative sample of the views of the residents and staff that Healthwatch Croydon spoke to within this timeframe and does not represent the views of all the residents and staff at Clarendon Nursing Home. The observations made in this report only relate to the visit carried out at Clarendon Nursing Home on Wednesday 23rd September 2015 10:30am - 2:30pm.*

*Clarendon Nursing home confirmed they were satisfied with the report.*