

Report of Enter and View Visit

Trinity Lodge

Published 31 August 2016



| | |
|----------------------------|---|
| Care Home Visited | Trinity Lodge |
| Date and Time of visit | Friday 15th July 2016, 10am - 3pm |
| Address | Quorn Way, Binley, Coventry CV3 2JU |
| Size and Specialism | Up to 40 residents. Adults aged 65+ requiring residential care, specialising in Dementia. Mixed Gender |
| Authorised Representatives | Kerry Vieira, Sawsan Elhuda, Ravinder Singh Kundra & Barbara Mullenger |

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.

Copyright

The content of this report belongs to Healthwatch Coventry. Any organisation seeking to reproduce any of the contents of this report in electronic or paper media must first seek permission from Healthwatch Coventry.

What is Enter and View?

The Health and Social Care Act 2012 allows local Healthwatch authorised representatives to observe and report on 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. This is so we can learn from the experiences of people who interact with these services at first hand.

The Healthwatch Coventry Steering Group has agreed that Enter and View Visits to care homes for older people form part of the current Healthwatch work programme.

Healthwatch Authorised Representatives carry out these visits to find out how services are being run and to gather the perspectives of those who are using the service.

From our findings we look to report accurately a snapshot of users' experiences, highlight examples of good practice and make recommendations for improvements.

Reasons 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 5 residents, 5 members of staff, 1 manager and 1 visitor. We also gave out some questionnaires for visitors to complete and return in our freepost envelope.

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 provided the care home manager with a 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.

Before and after the visit we had a look at the website¹ for the home and the most recent CQC report² to see how it compared with our findings.

Summary of findings

This was a large residential home specialising in dementia care. There was capacity for up to 40 residents in single en-suite rooms. On the day of our visit there were 36 residents.

The residents all have moderate to severe dementia. It was difficult to speak to most of the residents due to their confusion and memory issues. During the Enter and View visit, we spoke to the home Manager, 5 other members of staff, 5 residents and 1 visitor.

Residents appeared happy and comfortable. We felt there was a good atmosphere amongst the staff and residents.

There were 3 separate units and each corridor had a different theme to help residents recognise where they were in the home. Décor around the home consisted of magnolia walls along corridors and in most rooms, the lounges on each unit were brightened up with red carpets, cream and red curtains and colourful pictures on the walls.

Although there were items along corridors which linked to different themes, i.e. a piano, framed pictures. We felt that more colour needed to be introduced to the

¹ <http://www.anchor.org.uk/our-properties/trinity-lodge-coventry>

² <http://www.cqc.org.uk/location/1-126242334>

décor around the corridors in the home because the dominance of magnolia made all areas look the same. Communal lounges had more colour and felt more homely.

The home was secure and also had secure, well maintained gardens. There was plenty of natural light and dementia friendly signs and features throughout.

The manager told us that all residents are referred from Coventry County Council. There was a mix of male and female residents. There was also a mix of male and female staff. We found the home to be well managed and there was a calm and friendly feel.

Bedrooms and communal lounges on the units were spacious but the main communal lounge seemed small for such a large home.

Initial Impressions

As we approached the building from the road it was easily recognisable from the outside due to the blue exterior walls and the large, clear sign near to the entrance. The building was purpose built and looked fairly new and modern with facilities for parking. The pictures and description on the Anchor website were a true reflection of the home.

We entered into a foyer area and alerted staff via an intercom. We were welcomed in through the secure entrance which was operated by staff. We signed into the visitors' book in the entrance hall which had a large reception desk next to a staff office. We were taken through another secure door and introduced to the Manager on duty who was in her office. The Manager showed us around and answered our questions.

The home had a calm and friendly feel.

Facilities and environment

It was difficult for us to have conversations with many of the residents as they had moderate to severe dementia. Therefore, most of our assessment was based on observations.

The home was all on one level and consisted of three separate units containing spacious, en-suite bedrooms, a communal lounge and kitchen. The Manager told us that one of the bedrooms was used for short stay respite care. Each unit was located along a corridor, which had a separate theme to enable residents to recognise different areas of the home e.g. along the music corridor there were pictures of famous singers, vinyl records and a piano. There were positive slogans around the home in the form of transfers on the walls.

We felt that the corridors could do with being more clearly separated by introducing colour, as all of the corridors had magnolia walls.

Décor in the communal lounges was colourful and gave the rooms a homely feel with a fireplace as a focal point and chairs gathered in small groups at one end and dining tables and chairs at the other end. There were colourful pictures on the walls and ornaments around the room. The use of magnolia was also in the main communal lounge with shades of green in the carpet and curtains.

All resident's rooms were single en-suite and there were a total of 40. There were 36 residents on the day of our visit. Residents' rooms we saw were decorated in magnolia and contained a single bed, chest of drawers or a dressing table and a wardrobe. The Manager told us that residents can personalise their rooms if they wish. Bedrooms had a personalised sign on each resident's door with pictures relating to their past and their interests e.g. one resident who had a picture of the old Owen and Owens store and there was also a large black and white picture of Owens and Owens outside their room in the communal corridor; others had pictures relating to things such as golf and fishing etc.

We saw one resident in a wheelchair being wheeled around by staff. This resident was asked if they wanted to get out of their wheelchair and move to a comfortable chair but they said no and asked for a table to be moved closer to them so that they could put their drink down. Staff were obliging and attentive to the resident's requests. This resident was making jokes with us and with staff and seemed comfortable in the company of staff.

We saw that there was a room which had been set up as a hair salon, with excellent facilities. Staff and residents told us that a hairdresser comes in twice a week. There was a notice on the door of the salon showing prices for various options i.e. men's haircut, blow dry, perm etc.

The Manager told us that all referrals to the home are from Coventry City Council and that there have been more referrals for male residents in the past year than in previous years. She told us that she has not known of any referrals of couples wishing to live together but said that if the home could meet the needs of both, they would try to offer them rooms next to each other as they do not have any shared rooms.

We found the home to be clean. We saw domestic staff busily Hoovering and cleaning throughout the morning.

All communal areas had large internal windows so that staff could see into the rooms from the corridors. The home was well lit and there was plenty of natural light around the home. Furniture was comfortable and fit for purpose. It was a humid day and we found the temperature around the home to be comfortable but felt some areas could have done with having some windows open to let some air circulate.

We observed that many of the residents were wandering around, some with the use of a walking frame and others being supported by staff. Residents were allocated a key worker but were not restricted to staying within one unit and could walk around and have their meals in any of the three units. The Manager told us

that if all of the residents decided to congregate in one unit the staff from the other units would move around to accommodate them, however, she added that residents tend to go to the same unit and staff are always ready to assist them to get to where they want to be. We noticed that there were a few residents on each unit who remained in one place and did not walk around; staff regularly checked that they were okay and made eye contact with them or spoke to them as they passed by.

Residents told us that they had a TV in their room. The Manager told us that they supply a TV for all residents.

Communal bathrooms were large and the bath had plenty of space either side for staff to assist residents. There was a chair which could be used to lower residents into the bath and a shower attachment. There were sturdy hand rails and a pull cord to alert staff in an emergency. Doors were lockable and could be opened from the outside by staff.

A visitor said that finding the right home for their relative was a difficult decision but that they had no regrets about choosing Trinity Lodge. They added that they would like to see the doors to the inner gardens left open so that residents could access outside space whenever they wished. The inner gardens were secure and were overlooked by windows all around. We were not shown around the internal or external gardens, from the windows we saw that they were attractive and well maintained with white painted benches and bedding areas. We did not see whether there were any handrails installed in the internal gardens (to enable residents less confident with walking to move around them without falling).

Corridors and doorways were wide enough for wheelchairs to get through. Doors to communal lounge and dining areas were left open and there were no steps in the home.

We found that the description on the Anchor website for Trinity Lodge provided a good description and images were a true reflection of the home. We also found that Trinity Lodge and Anchor Trust have twitter accounts as they do for some of their other local care homes (@Trinity_LodgeCH). They use social media well to share news and stories.

Staff

Staff spoke positively about working at Trinity Lodge and told us that the management are very good and supportive. We observed staff working well as a team and being supportive of each other, there was a friendly and cheery atmosphere among staff.

Staff told us that training provided was good, they are given an induction followed by ongoing training which is regularly updated. The training is partly online, partly face-to-face and staff can carry out their online training at home or at work.

The Manager and staff told us that there are regular staff meetings every 6 - 8 weeks as well as regular supervision and annual appraisals.

We were told by the Manager that there were usually, 7 care staff on in the early shift, 7 on the late shift and 5 care staff on duty at night. In addition there was a handy man, domestic staff, kitchen staff and 1 activity worker.

Staff told us that they feel involved in the running of the home and that they are encouraged to input their suggestions.

Food and drink

Staff and the Manager told us that meals are prepared on site and that they use a meal checklist to monitor and record nutrition and any individual requirements for each resident. A visitor told us that their relative "*loves the food.*"

The Manager and staff told us that residents have their breakfast when they get up; there was no set time to get up or go to bed. She said that the chef serves cooked items for breakfast at 9am but if residents are early risers and want breakfast earlier, staff will be available to prepare them whatever they want to eat. Lunch is served at 12.30pm, evening meal is at 5pm and supper is between 7-9pm.

Each unit had a snack basket with things such as biscuits, crisps and fruit for residents to help themselves. Each lounge had a light weight plastic jug of cordial and glasses. Throughout our visit we observed staff offering residents a drink or snack and helping them to choose what they wanted.

There were menus available on each table in the dining rooms on each lounge. The menu showed the main meal being served in the evening and lighter meal at lunch time. However, in one of the dining rooms we pointed out to staff that the menus had not been refreshed and were showing the previous day's menu. The menu also showed a page with choices which were available in addition to the set meal such as omelette, salad, jacket potatoes with various fillings. We did not see any residents using the menus, most relied on staff showing and telling them what choices were available.

We observed a staff member trying various options to encourage a resident to eat who was rejecting all that was being offered, they showed the resident the menu and read out a variety of choices to do their best to find something they liked the sound of. This resident eventually had the cake with some cream on and seemed satisfied with that.

We observed staff calmly prevent a resident from pouring their drink on their sandwiches and then try to eat their paper napkin. Staff showed patience, compassion and understanding towards residents.

Residents told us that they liked the food and the residents we observed looked like they were happy with their meals. On the day of our visit lunch was started with celery soup, followed by a selection of freshly prepared sandwiches and then cake. We tried the cake which was more like a scone or rock cake and tasted nice but was very dry to eat on its own. We saw staff offer some residents cream with their cake and they seemed to enjoy it.

We saw some residents been given fortified drinks in place of lunch and staff gently encouraging residents to eat. Staff showed us that there was a water cooler in the corridor and plastic cups for residents and staff to access water when they wanted it.

Dignity and Care

We observed that staff showed patience, respect and care towards residents. The atmosphere around the home was calm even when some residents displayed challenging behaviour.

The Manager told us that each resident has a '*living story*' at the front of their care plan which is completed when they move in and based on the resident individual resident's likes and dislikes and what they did in their past. This is used to determine how to personalise their door sign and find out what activities they might like.

We observed staff attending to the needs of residents in a timely manner whilst respecting their dignity and showing patience even to those who were more challenging, e.g. one resident asked for a blanket but then began shouting at staff and threw the blanket on the floor, staff spoke to the resident respectfully and supported each other to attend to resident's needs and keep the atmosphere calm.

She also told us that visitors can come at any time and there were a few residents who did not have any visitors, staff tried to spend more time with them.

We were told that there were two residents who spoke English as their second language and that there were staff within the team who could interact with them in their own language when they were on duty e.g. Punjabi, Ukrainian.

During our visit paramedics arrived to attend to a resident who had fallen over in his room. After the ambulance staff had left the resident looked emotional and we observed staff sitting with him in one of the communal lounges to offer him comfort and reassurance.

We spoke to a member of staff who said that they felt there were too many residents on one unit that needed more than one carer to assist them. The resident fell when they tried to get out of bed by themselves without staff knowing. Staff were dealing with another resident in the next room who required two staff. This staff member felt more staff were needed because there were not

enough staff to enable the one-to-one or sometimes two-to-one attention that was required.

We observed staff showing dignity and care whilst patiently spoon feeding some residents and talking to them calmly during meal time.

Staff told us that all residents are weighed regularly and closely monitored. If they miss meals and show signs of losing weight or changes in their condition they are referred to the doctor. Most residents are registered with the local GP who visits the home every week.

A visitor told us that they do not have any concerns and they think the home is clean and well run. Their only concern was over some issues with resident's clothes getting mixed up or lost. Staff told us that the home has introduced a new system of marking clothes which they hoped would stop items getting lost. The Manager told us that all clothes were being fitted with a tag to identify which resident they belong to.

We observed that residents were clean, well presented and appropriately dressed for the climate. Staff told us that they offer residents a choice of outfits to wear when helping them to dress and they assist them to match styles and colours.

Staff told us that residents are asked each morning whether they would like a shower, a bath or a wash.

Activities

The Manager told us that there is one Activity Worker who works 9-3 five days per week and rotates her working days so that she is sometimes in during weekends.

The Manager also told us that the Activity worker plans activities for care staff to deliver when she is not there. Staff told us that they do not have time to do activities with the residents as much as they would like to and there are ***“not usually activities at weekends”*** and added that visitors usually come at weekends but some residents don't have anyone to visit them and there needs to be more things for them to do.

We spoke to the Activity worker who was overseeing the coffee morning, she told us that she organises activities such as physical fun, weekly coffee mornings, musical activities.

Another member of staff told us that they would like to take residents out in the garden more but felt that there were not enough staff in the home to enable them to do this. They also told us ***“It's a really good home but there are not enough activities”*** and also said ***“we need another activity worker because it's a lot of work for one worker to organise activities for up to 40 residents.”***

There were items left around the home for residents to interact with such as musical instruments, balls with different textures and sizes, dolls and knitting needles with wool. However, some residents did not realise what these items were for, one resident saying *“they aren’t mine, other people left them”*. There were also canvas shoe holders on the walls in the corridors which contained items for residents to interact with and use including a hair brush, a woollen scarf and a teddy bear. Again a resident told us that they thought they were items for sale and that staff were hoping someone would *“take them and leave some coppers in there for them”*.

We saw some residents enjoying quietly playing with dolls and moving things around the home as though they were tidying up. Residents and staff were calm and the atmosphere was relaxed.

At a central point within the home there was a communal lounge with a selection of chairs and tables. In the corner there was a fish tank and there was a large flat screen TV on the wall. During the morning this lounge was being used for a coffee morning which we were told is a regular thing on Fridays. The lounge seemed quite small for the amount of residents but not all residents went along to the coffee morning, some residents chose to stay in the lounges on the units, we did not see many residents staying in their bedrooms.

A member of care staff told us that they like to have activities in the garden when the weather is nice. Outside one of the units there was a lovely beach scene which had been created by the home’s Handyman. This was brightly decorated with a large beach theme picture, a blue beach hut and colourful deck chairs. The manager said they have previously had a 'travelling' activity where they pretend to take the residents to Blackpool.

Many of the residents feared going outside in case they fell or because they were confused. This was confirmed in our conversations with some residents and staff.

Dementia Friendly Design

We saw residents walking around with teddies and dolls that were around the home for them to access if they wanted to.

We saw dementia friendly signs being used throughout the home. Doors were painted blue to indicate a communal room which had a toilet. Taps were marked red and blue for hot and cold.

There were handrails around the corridors and in the bathrooms. Handrails were white against a magnolia wall and were visible. Carpets and flooring were in contrasting colours to the walls around the home.

Each corridor looked very similar and was painted the same colour; we thought that some introduction of colour could help to distinguish the separate areas.

Healthwatch Recommendations

We thought that Trinity Lodge was a well planned home with hard working staff that had the best interests of the residents at the heart of what they were doing.

Following our visit Healthwatch recommends:

1. An additional Activity Worker, additional care staff or volunteers, so that there can be more activities organised either for groups or one-to-one and more residents are able to be accompanied to go out in the garden (weather permitting) whilst not impacting on staffing ratios within the home.
2. Consider introducing more colour into the décor in corridors, perhaps a colour theme for each corridor so that residents can distinguish them more easily.
3. Ensure that handrails are installed and maintained in the internal gardens. Doors to inner gardens to be left open on warm dry days to:
 - a. Allow more air to circulate around the home.
 - b. Encourage residents to access outside space independently but safely.

Response from Care Home Manager

1. We are currently recruiting extra members of staff for over recruit of 10% and have vacancies out for volunteers.
2. We have spoken to our property team about incorporating some more colour into the corridors.
3. We have put in our budget for planned works to get handrails installed into the garden areas. Doors and windows are being opened in nicer weather to allow air to circulate around the 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.

| | |
|--|--|
| Healthwatch Coventry 29 Warwick Road Coventry CV1 2EZ | Telephone: 024 7622 0381 Email: yoursay@healthwatchcoventry.co.uk Website: www.healthwatchcoventry.co.uk |
|--|--|