

HEALTHWATCH HERTFORDSHIRE

Enter and View Visit Report

Alexandra Care Home

46 Alexandra Road

Hemel Hempstead

Hertfordshire

HP2 5BP

Four Seasons Healthcare

Healthwatch Hertfordshire Enter and View Visit Report

Premises visited: Alexandra Care Home, 46 Alexandra Road, Hemel Hempstead, HP2 5BP

Date and Time of Visit: 12th June 2014 10.30am

Visit Conducted By: Doreen Bratby, Madeleine Donohue, Edith Glatter

Acknowledgements:

Many thanks to the manager, Ms Patricia Nichols who was very informative and generous with her time and to all the members of her team who assisted us throughout.

Purpose for the Visit:

To look at the individual's quality of life in respect of environment, leisure and services, digital inclusion and food and drink.

To see if NICE guidelines 1 and 2 of Quality Standard 50: Mental Wellbeing of Older People in Care Homes 2013 are being considered by providers.

QS50 states:

1. Older people in care homes have opportunities during their day to take part in activities of their choice that help them stay well and feel satisfied with life. Their families, friends and carers have opportunities to be involved in activities with them when the older person wishes.
2. Older people in care homes are given support and opportunities to express themselves as individuals and maintain and develop their sense of who they are, for example, this can include helping people to maintain their relationships with family, friends and carers.

Methodology:

A rolling programme of care homes/nursing homes in groups of 12 in order to review results, methodology and outcomes at defined intervals.

We have consulted with the Clinical Commissioning Groups, Hertfordshire County Council, Hertfordshire Care Providers Association and our local Care Quality Commission Compliance managers as well as looked at feedback from the Community to choose our first 12 homes.

Announced visits using questionnaires for residents, staff and observation from 10.30 am to 1pm

Disclaimer

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

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1. INTRODUCTION

Alexandra Care Home is owned by Four Seasons Health Care. It is in a central location in Hemel Hempstead on a residential road. It provides nursing and dementia care for 75 residents. There are three floors with a dementia unit of 25 and two floors accommodating 50 frail residents.

All bedrooms are en-suite, single occupancy. There are two entrances one on Alexandra road and the other from the main car park at the rear. There are steps at the back from the car park which is below the level of the building as well as a ramped walkway for wheelchair access. There are four car park spaces at the front.

The garden is to the rear of the building and though small the seating area makes it attractive and inviting. The garden could be made secure though there was a second gate that had been removed and we were told that this was being repaired.

2. FIRST IMPRESSIONS

2.1 Arriving by car you are immediately directed by the signage to the rear of the premises to access the car park and reception though there is also a front entrance that can be used.

Unfortunately when we arrived the car parks were already full and as the road and other nearby parking areas were 'permit holder' only that posed a problem for us. This must impact on friends and relatives visiting. It also meant a climb up stairs to access reception.

2.2 The garden seating area looked inviting and the entrance is attractive with hanging baskets.

2.3 The small internal lobby is not particularly inviting but beyond this there is a large open reception area where drinks are available for visitors.

2.4 The home was clean, recently refurbished and odour free. The decoration is in good order and corridors free of any clutter or equipment as each floor has its own storeroom. The dementia unit was particularly bright and attractive with colourful historic posters, such as the railway travel ones and old films.

The carpets, curtains and furniture were all clean and in good order. In fact a member of staff was going through the home replacing curtain hooks during our visit.

3. FINDINGS

3.1 Environment

3.1.1 The entrance lobby is small with two signing-in books, one for visitors and the other for staff. As visitors, we found the presence of two signing in books confusing. Keypad and codes are used to keep residents secure. There were Healthwatch leaflets and posters on the noticeboards on the wall.

3.1.2 Each floor of the home is based on a T and accommodates self-contained units with their own teams and unit managers. There are two wet rooms and a bathroom on each floor and toilets. The wet rooms were in excellent order but one of the bathrooms was full of equipment and clearly being used as a store room. All toilets were clean, odourless, equipped and fully stocked with hand wash and paper towels.

3.1.3 Each floor has a dining room. The most attractive is on the ground floor with white cloths and tastefully arranged napkins. As meal times are protected there were a large number of staff to help take food round to those residents who wished to eat in their rooms and to help those who needed assistance in the dining room. Wipes were provided.

3.1.4 There are two lounges on each floor. One was used for activities. The home does have a problem of being quite dark so that occupied lounges had all their numerous lights on. There was a problem with temperature control. It was a warm but not hot day and corridors and lounges had industrial fans going so there was a constant hum and they were obtrusive.

The most comfortable environment was in the dementia unit where air conditioning had been installed. The dementia unit was welcoming and bright and it benefitted from having a sensory room and activity lounge with a piano and other instruments. Residents have thermostats in their own rooms.

3.1.5 Residents' rooms are not large but were equipped with beds appropriate to the needs of the residents, e.g. with special mattresses, side rails or low to the floor. Each room had an armchair, chest of drawers and wardrobe and there was evidence that residents had brought in their own pictures and personal belongings. We were told that residents could choose their own wall

paint, curtains, bed spreads etc. as each room was newly decorated for every new resident. They could also bring in odd pieces of furniture, space and equipment (such as hoists) permitting.

3.1.6 The home, being in a central town location, has a small garden which is attractively presented with comfortable, smart garden furniture under a gazebo. It is a garden for sitting in but there is little space for much activity or walks. There was no-one in the garden on the morning we visited. We understood though from a visitor to whom we spoke that staff had been taking her husband out in the garden over the past year, even though this is very difficult, involving two staff and the use of a hoist. This had not happened in the two previous years he had been there. He and his wife were very appreciative of this.

3.1.7 As each floor is run by a different team there are slight differences between the floors. The dementia unit was particularly impressive, quiet with a feeling of calm. It was lunchtime and the staff who were feeding residents did so gently and sensitively. In fact throughout there was a sense of purpose, of staff knowing what was needed and having a genuinely good rapport with residents.

3.2 Leisure and Services

3.2.1 There are two members of staff responsible for leisure activities. Forty hours are allocated to one member of staff responsible for activity in the dementia unit and forty hours are shared between the other two units. The home is working towards pearl accreditation for the dementia unit.

There are planned activities each day which are displayed on a notice board in the corridor. These are changed weekly and are illustrated with a picture and title, for example, quiz, reminiscing, flower arranging, bingo and large skittles. One resident's wife told us how her husband who used to be "left out of activities" because of his serious mobility problems is now included. Another resident said she was kept occupied and she was seen to clearly have a good rapport with the activities organiser.

The manager informed the team that they had a minibus and were able now to take residents to the park or seaside. The Brownies and a choir visited. A resident remembered some children coming once. The church runs a service every fortnight.

3.2.2 The manager holds residents' meetings herself quarterly where she keeps them informed and they are able to raise concerns with her. Their favourite topic is food and as a result there have been changes to the menu. There are also relative's meetings held regularly. One regular family visitor said that the manager was readily available to discuss concerns and would come to her since she has mobility issues herself.

3.2.3 Staff would be happy to involve residents in routine daily activities but find they are not interested. There is a high level of very frail residents. The most physically able residents were in the dementia unit.

3.2.4 The garden is used for sitting out, having ice-cream or quizzes though no-one was using it on the morning we visited. We were told that there were songs under the gazebo for D-Day.

3.2.5 The centre is not a member of the Herts Care Providers Association (HCPA) but was approached by them the day before our visit. We gave the manager the relevant leaflets.

3.2.6 The home was not aware of the Hertfordshire Library Reminiscing Service. The manager was given a leaflet about it.

3.3 Digital Inclusion

3.3.1 Alexandra Care Home does not provide Wi-Fi access to residents and the manager said its provision would be a company decision. We understand that this facility has not, as yet, been requested by residents.

3.4 Food and Drink

3.4.1 Meals are prepared on site and there is a choice for both courses. The lunch we observed included chicken and ham pie with vegetable fingers as the alternative. Dessert was chocolate sponge and custard with alternatives being fresh fruit from the fruit bowl or yoghurt. The pie was very popular. The chef keeps a profile of residents' likes and dislikes and gets feedback on the food from family and residents.

3.4.2 Residents can have snacks between meals and in the lounge there was evidence of residents having had a drink and a resident pointed to the crumbs on her table from some biscuits that she had had. Residents can eat in their own rooms or in the dining room and there was evidence of this. Residents were seen to be helped by care staff in a patient and sensitive manner.

3.4.3 On the dementia unit, the home has looked into different ways to help residents make their own choices from the menu. The manager said it is often difficult to get residents with dementia to eat. Finger food is sometimes used as they will pick it up and eat it themselves.

4. MONITORS CONCLUSIONS

We are satisfied that NICE guidelines 1 and 2 of Quality Standard 50 (Mental Wellbeing of Older People in Care Homes 2013) are being considered by the provider.

5. AREAS OF GOOD PRACTICE

1. The dementia unit was impressive with its calm atmosphere, the sensory room and the very attractive decor in the public areas with the beautiful old posters.
2. The addition of air-conditioning has improved the environment for the residents and avoided the need for fans.
3. The staff we saw should be commended for their clear sense of purpose and industry and the sensitive and caring way they treated residents.

6. RECOMMENDATIONS

We recommend that further attention is given to the following:

1. Reserving spaces in the car park for visitors.
2. Making clear that there is access from the front of the building.
3. Review arrangements for cooling on the two units which were not air conditioned.
4. Discussions with the company on providing internet access for residents and the use of iPads and tablets to engage people with dementia.
5. Review the potential benefits for residents and staff of becoming a member of the Herts Care Providers Association.
6. Consider contacting Hertfordshire Libraries about the Reminiscing Service.
7. Consider contacting Herts Sports Partnership with a view to obtaining a grant to assist with physical activity in the home.

Alexandra Care Centre response:

Action Plan following monitoring visit on 12th June '14

8.

Recommendations	Actions	Responsibility
Reserving places in the car park for visitors.	The car parks are used for both staff and visitors. It is recognized that the car parks are small in relation to the size of the Home. There is no available space to expand the car park size. To reserve places for visitors may prevent staff from parking their cars and it is vital that staff are not prevented from parking for a reserved parking space as this could prevent them reporting for duty. However on days when it is excessively busy staff will be encouraged to double up on parking to free up spaces for visitors.	All staff
Making clear that there is access from the front of the building	A cone is placed in front of the building to discourage drivers from parking in this slot.	All staff
Review arrangements for cooling on the two units which were not air conditioned.	To be referred to the Regional Manager for consideration with the Operations Manager	Home Manager
Discussion with the Company on providing internet access for Residents and the use of I pads and tablets to engage people with dementia	To be referred to the Regional Manager for consideration with the Operations Manager	Home Manager

Recommendations	Actions	Responsibility
Review the potential benefits for Residents and Staff of becoming a member of the Herts Care Providers Association	Contact to be made with Herts Care providers	Home Manager
Consider contacting Hertfordshire Libraries about the Reminiscing Service	Contact to be made with Hertfordshire Libraries	PAL
Consider contacting Herts Sports partnership with a view to obtaining a grant to assist with physical activity in the Home	Contact to be made with Herts Sports Partnership	PAL

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