



Care UK - Ellesmere House care home

Dignity Champions' spot check

23/2/16

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## Executive summary

Healthwatch CWL is the consumer champion for better standards of care in health and social care services. Its team of Dignity Champions are volunteers recruited from the local community who work to improve standards of dignity in health and social care services. This report presents the findings of the Dignity Champions' spot check of Ellesmere House care home, located in Chelsea and run by Care UK. The spot check is a follow-up to a full assessment of Ellesmere House, performed on 23 February 2015.

The Dignity Champions found that residents seem happy at the home. The Dignity Champions commend the positive attitude of the staff who felt to be interacting well with residents. The standard of care generally seems to have improved since the last report. The newly refurbished ground and lower ground floors offer modern and spacious facilities with benefits such as a cinema room, hairdresser's salon and 1950s-themed tearoom. The home was found to be generally very clean.

On the day of the visit the following concerns were raised in regards to; odour control on the lower ground floor, the "homeliness" of the recently refurbished floors, ability of residents to interact with other residents who had similar capacity, the weight loss of one resident and another resident who had injured herself.

## What is the Dignity Champion project?

In April 2013, Local Healthwatch was established under the auspices of the Health and Social Care Act and became the successor of the Local Involvement Networks (LINKs).

Healthwatch CWL is the independent consumer champion for health and social care services across the London Borough of Hammersmith and Fulham, the Royal Borough of Kensington and Chelsea and the City of Westminster.

Our Dignity Champions' key priorities are to listen and understand the views and experiences of local residents, and to speak up about dignity to improve the way services are organised and delivered. The Healthwatch CWL Dignity Champions follow the 10 standards set out in the Department of Health's 'Dignity Challenge'<sup>1</sup>.

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<sup>1</sup> [http://www.dignityincare.org.uk/Dignity\\_in\\_Care\\_campaign/The\\_10\\_Point\\_Dignity\\_Challenge/](http://www.dignityincare.org.uk/Dignity_in_Care_campaign/The_10_Point_Dignity_Challenge/)

## The Dignity Challenge

High quality care services that respect people's dignity should:

1. Have zero tolerance of all forms of abuse
2. Support people with the same respect you would want for yourself or a member of your family
3. Treat each person as an individual by offering a personalised service
4. Enable people to maintain the maximum possible level of independence, choice and control
5. Listen and support people to express their needs and wants
6. Respect people's right to privacy
7. Ensure people feel able to complain without fear of retribution
8. Engage with family members and carers as care partners
9. Assist people to maintain confidence and a positive self-esteem
10. Act to alleviate people's loneliness and isolation

## What is a 'spot check'?

The Dignity Champions perform spot checks on local health and social care services they have already assessed and reported on. This enables them to revisit the service and follow up on previous recommendations. They usually take less time than a full assessment and give the Dignity Champions a snapshot view of what is going on.

## Background

Ellesmere House provides residential care for up to 70 older people. The lower ground floor caters for people who are publicly funded. The majority of residents have dementia (but no nursing needs), require assistance with personal care and are totally mobile or can get around by themselves with a walking aid (or in one case a wheelchair).

The ground floor was previously a day rehabilitation centre which has now moved. It caters for 20 residents, 18 of whom are publicly funded and two who are self-funding. These residents have nursing needs but no dementia.

The first and second floors have 15 ensuite rooms each. Residents have nursing needs and some also have dementia but their nursing needs outweigh their dementia.

## Previous findings

The Dignity Champions performed a full assessment of Ellesmere in February 2015. The report made the following conclusion:

*Many aspects of Ellesmere are positive. The physical environment was praised and overall, there seemed to be a genuine effort on behalf of the majority of staff to interact with residents during our visits. Positive interaction between residents was also noted. The activity observed by the Champions was felt to be interactive and enjoyable for residents with a great turnout. The Manager and several staff members were very welcoming, honest and realistic about the challenges Ellesmere faces.*

*However, there are a number of concerns. These include the standard of food, which seems to be deterring some residents from eating and meaning that others are requesting food from friends and family.*

*The lack of confidence in the complaints procedure is concerning. Some residents suggested they would be too scared to complain. It is unclear whether a specific incident has caused this problem or whether it is more that residents are uncertain about the complaints procedure and perhaps do not have strong enough relationships with staff members to trust them with their concerns.*

*Whilst many of the staff members were commended by Dignity Champions and residents, it seemed that others were not as communicative and some could be unfriendly and lacking in patience at times.*

*While reports of personal care and privacy for using the toilet were good, personal space was not always respected. Some bathrooms were being used for storage and some staff members entered bedrooms without knocking.*

*Some residents also suggested activities were not always geared to the significant spectrum of need in the home and therefore did not suit their needs. With several residents reporting loneliness it was suggested a greater focus needed to be placed on activities and in ensuring staff interactions were appropriate and*

*supporting wider engagement in line with stated personal outcomes.*

The following recommendations were made in the original report:

### Environment

- *Improve plant care so that all plants look fresh and healthy.*
- *Ensure storerooms and cupboards are closed and secured when not in use*

### Bathrooms and toilets

- *Ensure bathrooms are not used as storerooms so that all facilities are available for use and residents can bathe or shower in a safe and hazard-free space.*

### Eating and Nutrition

- *Make sure residents do not have to wait too long for their food once they are seated at the table.*
- *Some residents do not like the food at Ellesmere. It is suggested that the management carries out a survey to find out if there are any general issues with the food. Residents could also be asked what their favourite meal is so preferences can be reflected on the menu and whether there are any specific meals they really do not like. In the cases of residents who are losing weight and/or dehydrated, the underlying issues must be urgently addressed.*
- *Ensure that everyone knows that snacks are available throughout the day as required.*

### Activities

- *Review the activity programme to ensure that there is something for everyone and all levels of mental capacity are catered for.*
- *Ensure there are enough opportunities for everyone who wishes to and is able to, to make visits outside the home*
- *Make sure staff are trained to identify the signs of loneliness and to make extra effort to support people who are not socialising or take part in activities. Look at general ideas such as befriending schemes with local volunteer agencies. Ensure that people are asked at care planning meetings whether they are feeling lonely and what might make a difference to them.*

### Staff and communication

- *The majority of staff seemed to be polite, courteous and friendly in their interactions with residents; however, reports from several residents*

*suggested that a few staff were not always so polite. Management should keep an eye on staff interactions and ensure that any reports of bad communication are dealt with effectively.*

- *All residents and families should be asked their opinion of the services they receive at Ellesmere on a regular basis, which does not seem to be happening at the moment. Feedback should be used to make ongoing improvements.*
- *The importance of being patient with all residents at all times should be emphasised to staff. Dementia training might help staff to communicate effectively with some residents.*
- *Staff need to make more time to talk to residents and get to know them, especially considering several of the residents reported loneliness. This should be included as a key target in their work performance. New staff members should be encouraged to introduce themselves to residents and get to know them from the outset.*
- *Look at whether staff levels, especially nursing staff, are presenting a risk to residents' health and wellbeing.*

#### Care planning

- *Residents need to have more involvement in the planning of their care. All residents should be aware of their care plans and should have regular meetings with a staff member to review their care and give feedback on their experiences.*

#### Privacy

- *While it may be considered unsafe for some residents to lock their bedroom doors, every attempt should be made to respect their personal space. Staff members should be trained to always knock and wait before entering residents' rooms unless in case of emergency. Do not disturb signs could be provided to give residents some measure of privacy if locks are considered unsuitable.*

#### Feedback and complaints

- *The lack of faith in and even fear for a minority, of complaining is very worrying. Management needs to investigate the cause of this and ensure that a clear complaints procedure is put in place which reassures residents they will not be treated differently for making a complaint and ensure they are informed about how the complaint is followed up.*
- *Staff, especially managers, need to build better relationships with residents so that they are more likely to trust them with their concerns.*

- *A comments/complaints box could be introduced to facilitate anonymous feedback.*

## Methodology

The spot-check assessment was carried out using four methods:

- 1) Introductory meeting with manager
- 2) Observation
- 3) Interviews
- 4) Conversations with staff members
- 5) Documentation
- 6) Report is collated
- 7) Report for manager to review
- 8) Follow up meeting with manager/s to discuss response to Dignity Champion Report

- 1) An introductory meeting with the manager by a Healthwatch member of staff was conducted on 22 February 2016 prior to the Dignity Champion visit.
- 2) The Dignity Champions recorded their observations regarding the environment of the care home.
- 3) They spoke to individual residents who were happy to talk.
- 4) Informal conversations were conducted with a range of staff members on duty at the time of the visits.
- 5) The Dignity Champions reviewed documentation including activity timetables, menus and background information on the service.

## Assessment dates

The spot check was carried out at the following time:

- ◆ February 23<sup>rd</sup>, 12-2pm -Spot check
- ◆ 5 July 2016, 12pm - informal tour of the home taken by two Healthwatch members of staff

## Findings

### Environment

The Dignity Champions assessed all four floors of Ellesmere House. Recently there has been refurbishment to the kitchen and laundry room on the lower ground floor. At a pre-assessment meeting, the Manager of Ellesmere said she recognised that the other two floors are tired looking and the intention is to refurbish them in the middle of this year (*At Healthwatch's follow up meeting in July 2016 this was underway*). This will also include refurbishment of the main kitchen and laundry room as well as the installation of WiFi.

The ground and lower ground floors have been refurbished to a very high standard. The Dignity Champions felt the décor and furnishings to be 'excellent'. The environment is bright, clean, welcoming and modern. Both floors have dining areas that are spacious and bright. On the lower ground floor there are dementia friendly areas. A tea room is decorated in a 1950s style. Bedrooms were felt to be spacious on both floors and the Dignity Champions were impressed by the bedrooms and bathrooms they saw. Communal areas on both floors are also spacious. On the ground floor there is a luxurious cinema room, which is decorated with classic film posters and has comfortable-looking chairs. There is also a hairdresser. The corridors throughout the ground floor have dementia friendly items attached to the walls such as tambourines and other musical instruments; there are also dementia friendly corners such a laundry corner where residents can "put up washing". Some dignity champions felt, though the refurbishment of the lower and ground floor were to a high standard, the layout of having long corridors could feel somewhat isolating.

**Ellesmere House response 13 July 2016:** The large/wide corridors on the lower and ground floor have been designed to be dementia friendly, the larger corridors allow residents to walk around without feeling claustrophobic.

The first and second floors had a more lived-in feeling. Décor and furnishings were rated as average to good by the Dignity Champions. The dining space on the first floor felt spacious but also homely. The dining area on the second floor felt quite compact, but also had a homely feeling. On the first floor, a room was signed as the hairdresser but was locked and no longer in use; it was felt it would be good to take the sign down as there is a new hairdresser salon downstairs.

**Ellesmere House response 13 July 2016:** The hairdresser sign on the first floor has been removed.

Cleanliness was felt to be of a high standard throughout. However, a strong odour of urine was noted on the lower ground floor. Otherwise the home had a pleasant odour.

**Ellesmere House response 13 July 2016:** Odour in a particular section of the lower ground floor is known to be an issue, the reason for this is that one resident on a daily basis urinates on the floor of their room. Cleaners clean the room daily but unfortunately the odour cannot be eradicated.

The gardens were not in use because of the cold weather but looked attractive from inside the building. The manager said residents can plant their own flowers if they wish.

Residents are able to bring their own possessions and furniture to personalise their rooms. One resident had brought an old writing desk and had laid out trinkets on the spacious window sill area. Each resident's room has a box to store photos of family members, pictures of things the person likes, and sometimes pictures of spiritual significance.

On the informal tour of the Ellesmere House on 5 July 2016 the Healthwatch members of staff noted that the ceiling panels on the lower ground floor had been removed as part of refurbishment works. Healthwatch staff were concerned this might be disorientating for residents on this floor as this was the dedicated floor for residents with dementia.

**Ellesmere House Response 13 July 2013:** The ceiling panels have been out for 3 weeks as part of the planned refurbishment work, to date they had not found that residents found it disorientating. On the contrary some residents had enjoyed the interaction of having external people and enjoyed talking to the workman. The refurbishment as whole was anticipated to be finished by November 2016.

### **Bathrooms and toilets**

Generally the bathrooms and toilets were felt to be of a good standard. On the ground floor the Champions saw one bathroom with an assisted bath and nice décor. There are showers in all bedrooms. One resident felt her bathroom was one of the best things about Ellesmere House and showed the Champions the automatic light which comes on when you open the bathroom door and goes off when you leave the bathroom.

On the lower ground floor communal bathrooms were felt to be very well equipped.

On the ground floor it was noted that a toilet next to the nurse's desk had damage to its pipe covering.

**Ellesmere House response 13 July 2016:** Since the Dignity Champion visit this has now been fixed.

On the second floor the Champions saw one bathroom which was less modern than those on lower floors but appeared to be clean.

**Ellesmere House response 13 July 2016:** As part of refurbishment the bathrooms are been updated, all the refurbishment is part of Care UK's cyclical refurbishment programme.

### Resident safety

It was noted on the day of the Dignity Champion day visit that a resident had a bruise on her eye. A staff member said that the resident slept in her chair rather than a bed and that they had fallen off the chair. The manager confirmed this and said the resident was currently under a Deprivation of Liberty Safeguards order (DoLS).

**Ellesmere House response 13 July 2016:** This resident is known to the Mental Health Team and is currently under a Deprivation of Liberty Safeguards order (DoLS). This resident will only sleep on their chair which has risers on either side. The resident is made as comfortable and as safe as possible with pillows chair which has raisers on the side. The resident whilst sleeping slipped to one side and hit their eye. The management said the resident's team including their social worker were aware of the risks to this resident and this are being actively managed by:

- Supervision in communal areas
- Regular 15/30 minute checks
- The resident is made as comfortable and safe as possible in their chair.
- As part of the DoLS consent of care the residents key is padlocked
- Interagency support

The Clinical Quality Commissioners (CQC) had been to the home 8 months prior to the July 2016 meeting and was aware of this resident and was satisfied with the care plan in place for this resident.

Another resident had a plaster on their head and one of the Dignity Champions asked if they had fallen. The resident did not seem sure what had happened but

said that the person who had looked after them and put on the dressing was very nice.

One resident did not have their call bell within reach of her bed. It seemed the area they were in was quite quiet and it might be difficult for them to attract attention if they needed to. She also reported an issue with her furniture and said it was very hard for them to reach down to a low cupboard where personal items were stored.

**Ellesmere House response 13 July 2016:** Staff members ensure call bells are in reach of residents and all possible adjustments are made to enable residents to carry out all activities as easily as possible.

There was a safeguarding issue open at the time of Healthwatch's meeting 13 July 2016 in regards to one resident who pulls out their call bell. The resident is on 15 minute checks and has the assistance of two staff at all times. This resident has also been provided with a litter picker as they had raised the concern that they could not reach items in their cupboard.

The Dignity Champions noted positively there was a 'Public Concern at Work' poster displayed, which advises staff members what to do if they are concerned about anything untoward taking place in the home, including telephone numbers to call.

During Healthwatch's informal tour of the home Healthwatch members of staff asked two members of Ellesmere staff what the small labels on each residents' room represented. The two members of staff were not sure what the labels represented. One member of staff said she would find out the information and get back to Healthwatch.

**Ellesmere House Response 13 July 2016:** The labels identify which resident in the event of fire will need assistance. The management said staff should know this but may have in this instance panicked on been questioned. Staff also learn differently and may have not retained all the information given in training. The following activities are in place as part of fire safety procedure at Ellesmere House.

- All staff receive mandatory training every 6 months
- There is an evacuation plan on every floor and at reception and staff are informed of this at induction.
- Regular internal fire audits are carried out regularly
- Unit managers on a regular basis speak to staff about fire safety

## Eating and nutrition

In a pre-assessment meeting, the manager informed Healthwatch the menu at the home is changed every three weeks and the Manager has regular meetings with the chef.

The menu provided by the home showed that two main course options were provided at lunchtime. A menu with pictures of the meal options was on display in the home and was welcomed by the Champions for being dementia-friendly. However, this menu only shows one option for the main course. It was unclear how residents looking at this menu would know about the other option.

**Ellesmere House Response 13 July 2016:** The picture on the board does not represent the meal options for the day but it is to show residents that the room been entered into is a dining room. Meal options are displayed on the menus placed on the tables, staff also assist residents with meal choices.

In order to improve the nutritional uptake of residents we have implemented Dining with Dignity where staff sit and talk with residents while they eat. On the ground floor residents have their meals served on blue plates as the research shows this improves food intake for people with dementia.

For breakfast cold and hot options are available, including a full cooked breakfast. The main meal is served at lunchtime with a choice of soup, two main courses, dessert and cheese. In the evening a lighter meal is served with the option of a snack such as sandwiches or beans on toast.

The Dignity Champions observed lunch on the lower ground floor. Some staff members were sitting with residents and at times encouraging them to eat. However, one member of staff sat with residents was not interacting at all. It was noted that staff were polite to residents and always asked for permission before helping them get up or taking a plate away. Generally the staff seemed very friendly. At a resident's request a staff member changed mashed potato for chips. Another resident said they had the wrong order and that was also promptly exchanged. One resident was eating in their room and a staff member said she had been feeling tired and had made this request. It was noted that one resident did not receive help until all the other residents had finished eating and it was only when one of the Dignity Champions went over to help them that a staff member came to assist. The food appeared to be hot, but the vegetables looked overcooked.

The Dignity Champions also observed lunch on the ground floor. The dining area has a brightly coloured purple and green theme and is laid out nicely like a restaurant. Residents were given the option of soup and helped with menu choices - either beef casserole or turkey cobbler. Support was available for those who needed it. The presentation of the meal looked very good. Residents were offered a choice of apple juice or water. Classical music was playing creating a relaxed atmosphere. The food had a nice smell. Residents were seated in two tables of two people and two tables of one person.

Out of the 11 people who were living on the ground floor, six had come to have lunch in the communal area. The Champions saw other people who had chosen to eat in their rooms - some when they were being asked what they would like to eat, one lady when she was being given assistance with her food. One resident had chosen to eat his meal in the communal TV area.

The Champions saw the end of lunchtime on the first floor. It appeared that people were receiving the assistance they needed with food and the atmosphere was friendly and sociable. Three people were eating in their rooms.

On the second floor, there was felt to be a very communal atmosphere. The residents seemed to know each other well and were chatting to each other a lot. Several people were receiving help with eating in chairs apart from the other tables and alongside one another. This dining area is more compact than the areas on the lower floors. Residents seemed to be enjoying their meals.

Overall the impression of the dining areas was that the facilities on the two lower levels are of a very high standard but the atmosphere was not as sociable. On the first and second floors, the dining areas are smaller and less modern but had a friendly and communal feeling. One resident was told that she could move between floors to eat her meal if she wished which seemed like a good idea.

One resident said they would like to have other people to talk to in the home. The resident said the other residents on her table did not interact very well (they lacked the capacity to do so). The resident seemed to know the residents on their table by name and encouraged them to eat when they forgot.

A cooler with a hydrating drink is available on each floor. One resident said they liked the chocolate machines.

Most residents the Champions spoke to said they liked the food. One liked the fact they could get second helpings. One person said staff should take account of the fact that residents like different portion sizes. One resident said the food can get boring.

One resident had lost weight in the home because they did not like the food. Family members said they had tried the food and it all tended to be overcooked, especially the vegetables. They felt the food in general was 'dreadful' with the exception of breakfast which is good. The family said their family member did not like having her main meal at lunchtime and found the meal too heavy. At the time staff were saving the lunchtime meal and microwaving it for her in the evening. The family were trying to get the lady to change her eating pattern but were concerned a plan had not been put in place to address her weight loss.

**Ellesmere House response 13 July 2016:** All residents are regularly weighed and monitored, residents who show weight loss maybe weighed more frequently. In relation to this resident the home is aware of the weight loss and the resident is in ongoing consultation with the catering team.

Lighter and heavier meal options are available to all residents. The chef also meets with the manager and residents on a weekly basis to discuss any preferences and concerns. The home also follows the nutritional guideline booklet put together by Care UKs' nutritionists.

### Activities and wellbeing

Ahead of the visit, the Manager told the Dignity Champion Facilitator that there are two activity coordinators at Ellesmere and a third will be starting soon. There is also a university student who volunteers Monday to Friday evenings and comes to talk to the residents. The home would like to introduce a befriending scheme but says a lot of these services are now chargeable so it is working with the Royal Borough of Kensington and Chelsea to see what can be arranged.

The Dignity Champions were provided with activity schedules for the different floors of the home. Each floor appeared to offer the same activities. Activity programmes for individual residents were also provided, but again these all seem to offer the same activities. A fully packed schedule seemed to be available including activities such as skittles, baking bingo, 'guess the country', film night, colouring, singalong, party and an exercise class. There were also activities relating to key dates in the year such as Mother's Day when a tea party was being held and family members were encouraged to bring in photographs for reminiscence.

On the day of the visit, the Dignity Champions observed the end of a nail painting session. There were three residents having their nails done at the time but one of the staff members said 15 people had had their nails done that morning. The activity co-ordinator was felt to be friendly and warm and seemed keen to bring

various activities to the home. Two residents who the Champions spoke to seemed to be happy to have the opportunity of a manicure.

Residents are able to get their hair done in a purpose-built hairdresser on the ground floor. Details of the hairdresser were advertised on a noticeboard, which also had details of a tea party and resident's meeting.

As already mentioned there is a cinema room where regular film screenings are held.

Everyone the Champions spoke to at the home, residents and their visitors, said that visitors were made to feel very welcome at the home. One resident said they were able to make trips outside the home with the assistance of a family member. The resident took part in activities including exercises, TV, dancing and singing, and said they enjoy them. They felt there was enough to do at the home.

It was unclear what activities are available outside the home and whether trips are organised. The activities coordinator told the Champions there are links with local schools and churches. A priest comes to visit residents who are interested and there are also volunteers who visit from a local church.

The Champions were told there are activities in people's own rooms for those who do not want to join in with the group. One resident was aware of this and had taken part in activities in their own room; another was unaware this was possible.

A doctor comes in on a Monday and Wednesday to see specific residents, does a full round on a Thursday, operates a call out service and has a relatives clinic on the first Monday of each month where relatives can ask questions about resident family members.

Several residents said they enjoy living at Ellesmere.

A family member of one resident said that the resident felt isolated and did not like to mix with other residents because they seemed very sick and their family member had no one who they could really talk to. The same resident felt a bit lonely because they lived at the end of a long corridor. They had chosen the room because it had access to the garden and they liked it, but nevertheless felt a bit apart from other residents.

**Ellesmere House response 13 July 2016:** Should residents wish and if they are able or if necessary assisted to go to any of the floors in the home to mix and staff also encourage residents to mix. The home has 3 volunteers, who are students of Social and Health Care, who come weekly.

The home is working with Age UK to provide a befriending service, but had found this difficult because the home is a private provider. Therefore the home is looking into community connections.

### Staff and communication

The Manager of Ellesmere has been in post for over two years. She supervises the lower ground and ground floors while the Deputy Manager supervises the two upper floors. The Champions were told that the intention is to over-recruit the home to cover for staff absence and holidays. There will soon be a team leader for each floor, which is a new introduction.

Most staff members seemed very friendly, often smiley and happy to talk to the Dignity Champions. There seemed to be a good team-working ethos and generally positive attitude. A nurse doing the medication round during lunchtime was felt to be professional and friendly. Staff members seemed to know residents by name and to have a caring attitude towards them. They were noted to knock on residents' doors before entering. They were felt to be polite and courteous to residents and listening to their requests.

One staff member was felt to be a little stern in her manner, though she was talking to a woman who had hearing difficulties so it was hard to tell whether she was just raising her voice to be heard, or whether her tone was a bit cross.

One resident said that staff members are 'lovely' and if you call they come straight away. Another said 'the girls are very nice and come in and talk to me all the time'. Another resident was very complimentary about staff and said they come quickly even at night-time.

One lady felt staff were polite and friendly, said staff take the time to talk to her and in general had found the home to be a very welcoming place. She had only been at the home for six days but said she had been greeted with smiles and hugs and made to feel that nothing was too much for the staff.

One lady said she likes 'everything' about the service at Ellesmere. She felt like she was always treated courteously, that staff were always patient with her and had got to know her 'quite well'. She felt staff 'absolutely' listened to her needs and wants. She also felt involved in decisions about her care. She said staff members always explain what they are doing and ask her permission before doing it.

**Ellesmere House response 13 July 2016:** To ensure better communication the home has implemented the Dining with Dignity programme as mentioned earlier and the following actions are taken to ensure better communication:

- Regular Dignity audits are conducted and fed back every 2 weeks to staff.
- When actions are put in place as a consequence of an, they are followed up through ad hoc audits to ensure the actions are been carried through.
- Any points on communication and dignity are followed up with staff through appraisal and supervision and covered in practice.

There are a small number of agency staff members; however, the home uses the same agency which is preapproved by Care UK. The home also tries to ensure to give one week's notice to the agency to ensure they get the same care worker.

### Privacy

The Dignity Champions got the impression that people's privacy and personal possessions are respected at Ellesmere. One lady said that staff are respectful of her belongings. She also said she could lock her door if she wished but chose not to do so. Dignity Champions witnessed staff members knocking on doors before entering. It was not clear whether Do Not Disturb signs were available to residents.

### Feedback and Complaints

Each room has a welcome pack which includes 'A Making a Complaint Guide'. The Champions were provided with a copy of this.

One lady said she would definitely complain if she needed to and felt complaints would be taken seriously. She would also feel able to tell someone if she were treated badly and would choose a staff member or manager. She said she couldn't think of anything the service could do better.

No one the Dignity Champions spoke to said they would be frightened to complain, as was the case during the last assessment.

As already discussed in this report, it seemed a couple of issues reported by residents had not yet been addressed. One related to a resident's furniture and her inability to reach it. The other related to the lady who was having issues with the food and was losing weight.

One lady had requested a swivel chair for her desk but did not know whether this was possible. She also said the bed frame made it difficult for her to get in and out of her bed which was problematic because she had a bladder issue.

**Ellesmere House response 13 July 2016:** The home has a “Resident of the Day event” this is a day where a resident is celebrated. This event is rotated so that all residents have a day. On this day a resident’s family will come in to talk to the manager about care plans, concerns and the caterers. The following actions are also carried out to ensure complaints and feedback is actioned properly and followed through.

- The manager explained that the families all have the manager’s email address so they can address all concerns direct to the manager. Currently there is a relatives meeting every 2 to 3 months.
- Every resident has a care plan and suggestions are incorporated into main plan.
- Each resident has a key worker and that staff review activity plans.
- Every resident has a complaints policy in their room.
- Complaints are logged onto Care UK’s central system and are monitored.

A meeting with Ellesmere House was set up to discuss the initial report on 13 July 2016. In October 2016 Ellesmere House was sent a further draft of the report and Ellesmere House sent a further updated response by email on 14 October 2016. Both responses to the recommendations have been inserted into Appendix 1 Action Plan. On **14 October 2016 Ellesmere House added this overall comment also made an overall comment that:**

*"We are concerned that since the visit took place in February and we have only just received the report in October from you, that a lot of the detail is now very out of date especially around the refurbishment of the other nursing units, bathrooms, including comments on ceiling panels; use of the garden and work completed on this with residents and relatives; further actions have also been completed to eliminate the odour on lower ground."*

*One of the comments about ‘not having a homely feel’ [was felt to be] very personalised. The residents and relatives all like the new environment and surroundings. We have had good feedback from the Councillor’s visit that took place in September 16 and other outside organisations that have visited the home recently. "*

## **Conclusion**

The Dignity Champions found the majority of residents they spoke to at Ellesmere were happy and positive about their experience at the home. The attitude of staff was felt to be enthusiastic, caring and friendly. The lower ground and ground

floors have been refurbished to an excellent standard. As well as bright and spacious communal spaces, residents benefit from facilities such as the tearoom, cinema room and hairdresser.

Food was identified as an issue in the last report. During the spot check the Dignity Champions found most residents were happy with the food they were eating. Staff were responsive to resident's needs during mealtimes, supported residents in choosing their meals and most made the effort to interact with residents. However, it was a concern that one lady was losing weight as the diet did not seem to be suiting her and it must be ensured that food options in terms of variety and portion size should be better communicated to both residents and their families. It must also be ensured anyone who needs assistance with eating is given it while other people are eating, not after. On the upper floors lunchtime was felt to be a sociable and lively occasion; on the lower ground and ground floors some residents who seemed they would have benefited from interaction with other residents were sitting on their own. Nevertheless staff members were proactive in chatting to residents, both at mealtimes and in their rooms.

The new facilities are impressive but it is still important for residents to feel they are in a homely space. A couple of residents reported feeling lonely because they were not physically close to other residents or had not got to know other residents and perhaps this is more likely to happen in the spacious environments of the lower floors. There are a lot of new residents in the home so it must be ensured they get to know one another and residents are able to mix with others of a similar capacity.

Overall the spot check showed improvements have been made since the last assessment and the Dignity Champions felt positive about their visit.

## Recommendations

### Closed Recommendations:

#### Environment

- 1.1 Address odour issues on the lower ground floor.
- 1.2 Remove hairdresser sign from the first floor which is no longer used as a hairdresser.

#### Bathrooms and toilets

- 1.3 Replace pipe cover in ground floor toilet next to the nurse's desk.

## Recommendations to be carried out:

### Environment

**1.4** Carry out a fire audit to identify gaps in knowledge and a follow on audit to review progress to ensure that members of staff including agency staff understand the procedure in the event of a fire.

### Bathrooms and toilets

**1.5** Carry out renovation of toilets/bathrooms that are not up to high standard of others in the home.

### Resident safety

**1.6** Ensure call bells are always within reach of residents and if a resident is moved from their bed to a chair or vice versa, their call bell is moved with them (especially when they have little or no mobility).

**1.7** Explore alternative sleeping arrangements for the resident who injured their eye to maximise their safety.

### Eating and nutrition

**1.8** Ensure all staff members engage with residents as much as possible at mealtimes.

**1.9** If someone requires support with eating, ensure it is given in a timely manner while the other residents are eating.

**2.0** Encourage residents to eat on different floors if they wish. The Dignity Champions were concerned that some residents who were able and willing to talk were seated with other residents who were not really able to interact during mealtimes.

**2.1** Reinforce to both residents and family members that residents can eat on different floors at next residents meeting and when families see the manager.

**2.2** Offer residents the choice of portion size they wish for.

**Ellesmere House response 13 July 2016:** Residents are given a choice of a lighter or heavier meal and are offered second portions.

**2.3** Advertise that different food portions are available on the menu. Reinforce message at next residents meeting and when family members come in to see manager.

### Activities and wellbeing

**2.4** Ensure everyone is aware that one-to-one activities are available in their rooms if they do not wish to join the group.

**2.6** Staff to check in on residents more frequently who are physically further apart from other occupied rooms to help reduce feeling of isolation.

### Feedback and complaints

**2.7** Ensure any resident requests or complaints are dealt with in a timely manner and residents are informed what can be done and how long it will take.

As an overall recommendation, it is suggested that this report is put to the residents' committee for their feedback and ideas.

## Contact details

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