

Health Recommendations – CLCH Response and Commentary

<u>RECOMMENDATIONS</u>	<u>ACTIONS</u>	<u>LEAD</u>	<u>DEADLINE</u>
Environment			
1. Remove clutter from communal areas and ensure lounge areas and bathrooms are used for their intended purpose and not as storerooms.	<p>The Home was “de-cluttered” as part of the “Big Tidy Up” organised by CLCH across all of its establishments during March 2015. All staff have been reminded to store all equipment in the appropriate storage areas or return to the appropriate department.</p> <p>We will continue to monitor this and have brought this to the attention of the NHS Property Services and CLCH Estate’s Department</p> <p>The national Patient Led Assessment of the Care Environment (PLACE) inspection carried out in Garside House on 28th April 2015 scored the overall environment as having passed its inspection.</p> <p>Additionally, deep cleaning of the Home by Lakethorne Group (with approx. 14 cleaning staff) took place between Monday 13th April and Sunday 19th April.</p>	Lisa Clarke, Team Lead	Completed but for on-going monitoring
2. Investigate the cause of bad odour and ensure measures are put in place to ventilate problem areas.	<p>The PLACE Assessment noted that there were no odours when carrying out their inspection on 28th April 2015. There are 2 residents who like to smoke and they go outside either to the garden or the garage part of the home under cover if the weather is bad. This is the most likely cause of the odour and it is difficult to know what can realistically be done to address this. There are no extraction fans in this vicinity and it is difficult to know how this could be satisfactorily resolved without major building works. By and large there are no other residents in the vicinity when these residents are smoking and no one has ever noted that the smell of cigarette smoke was encroaching into the floors occupied by residents. We will bring this observation by the dignity champions to the attention of the estates department.</p>	Patrick Geraghty, CBU Manager	June 2015
3. To ensure that residents and families are encouraged to bring in to their rooms personal belongings, sentimental items such as photos or pictures to help feel more at home.	<p>Residents and relatives are actively encouraged to bring in personal items and also all residents have life stories which all of the staff in the home have access to. We will raise this at the next Residents and relatives meeting and actively encourage residents and relatives to create a more homely environment in those instances where this may not be so obviously the case. This action will be carried out by the Home’s Activity Coordinator.</p>	Home Activities co-ordinator	End of June

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4. To ensure that the environment feels as much a 'home from home' environment as well as a place of care and to consider the different types of furniture that may be used.	The client group has a very complex set of clinical needs. This Home is not a general nursing home environment. It is a continuing care home where the medical and nursing needs of the residents have been assessed as meeting the national NHS continuing care criteria. We will continue to strive to get the balance right between the medical model of care and an appropriate social model given the complexity of the residents' medical and social needs. This action will be promoted by the nursing and care staff as part of the care planning process within the Home.	Lisa Clarke, Patrick Geraghty	Initial review by end June 2015
Safety			
5. To ensure that staff habitually close cupboard doors and all doors that may be hazardous to vulnerable residents.	All staff have been reminded to ensure that cupboard and other doors where these may present a hazard to vulnerable residents are closed and/or locked as necessary and appropriate. This action will be promoted through the daily nursing handover discussions. Any intractable issues will be raised with the senior management within CLCH estates department.	Lisa Clarke	Completed and on-going
6. Ensure that the external gate is always closed or is supervised during deliveries etc.	To access the external gate the residents would need to know the code to the exit doors. Therefore the residents who do access this area would do so with the knowledge of staff. The reception staff have been reminded that when deliveries are being made that the delivery staff ensure that the necessary precautions regarding resident and staff safety are adhered to.	Patrick Geraghty	On-going
Bathrooms and toilets			
7. Make sure that bathrooms are not used as store	All staff have been reminded that any items requiring storage are stored in the appropriate areas and not in the bathrooms. This action will be promoted through the daily staff handover discussions	Lisa Clarke	Completed and on-going
8. Ensure that residents have a choice between taking a bath or a shower	All staff have been reminded as part of their duty to ensure that all care is personalised and that the residents are offered choice when personal care is being given. This action will be promoted through the daily staff handover discussions.	Lisa Clarke	Completed and on-going
Eating and nutrition			
9. Review menu choices to make sure that all meals are nutritious and appealing. Ensure that residents have a choice about what they eat.	Over 90% of all meals consumed in Garside House are prepared and cooked in the Home. The Chef also offers a seasonal choice in line with the nutritional, medical conditions and the physical abilities of the each of the residents. The nutritional and textural aspects of food are prepared in line with the clinical assessment of the in-house dietician based on each resident's choice and medical and physical capabilities. Recent NHS England's PLACE Assessment of the 28 th April 2015 noted positive findings in relation to nutrition. The Chef will continue to monitor the choice available for patients. Please see attached summer menu.	Patrick Geraghty	Completed and on-going

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10. Encourage residents to eat in communal areas and help make meal times a social occasion. Many residents are lonely and mealtimes are an opportunity for socialisation.	Those residents, who are able to and wish to, are encouraged to eat in the communal areas. Staff have been reminded to encourage residents to do so as well as providing appropriate support with mealtimes.	Lisa Clarke	Completed and on-going
11. Make sure all staff participate in meal times including helping residents in to wheelchairs so that they can participate in meal times.	Please see comments directly above.	Lisa Clarke	Completed and on-going
12. Ensure assistance is offered to those that need it.	Please see comments directly above.	Lisa Clarke	Completed and on-going
13. Record all food intake and offer an alternative meal for those who do not eat their meals.	Staff have been reminded to ensure that all dietary and fluid intake is recorded in the charts that are kept in the resident's rooms. This is a standing item on all staff daily handover discussions as part of the evaluation of each resident's care plan.	Lisa Clarke	Completed and on-going
Activities			
14. Review activities and record how much activity is actually taking place	The activities coordinator has been asked to review all activities and is developing a new activities schedule for the summer months which will include a review of the garden space to increase the level of outdoor activity during the warmer weather. All activities are being recorded in the residents personalised care plans.	Activity co-ordinator	End June
15. Survey residents and carers to ask what activities they would like to partake in	As above, the Activities Coordinator will survey residents and their relatives as part of the Activities Review and this will be recorded in each resident's care plan and reviewed and evaluated as part of the daily nursing handover discussions.	Activity co-ordinator	End June
16. Introduce activities specifically for people who have dementia such as reminiscence games	<i>Namaste</i> is a programme funded by the Burdett Trust, which we have introduced across all of the CLCH Homes which provides sensory stimulation for residents with profound dementia. We have and are continuing to introduce iPads/Laptops for residents and their carers to upload old photographs and other reminiscence memorabilia. We also have Wii Games available to Garside House. We have created a sensory garden, sensory room and reminiscence staging posts in the dementia unit at PLK funded by the Secretary of State for Health's <i>Improving the Environment for People with Dementia Programme</i> . The learning and experience from this is being rolled out across Athlone House and Garside House Continuing Care Nursing Homes. The Activities Coordinator is in the process of reviewing how this can be taken forward at Garside as part of his review of activity provision for all	Activity co-ordinator	July

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	residents within the home.		
17. Build on links to the wide community (outside of the home) to provide residents with the opportunity of benefitting from community activities.	We have links to local schools and to local choirs and we are actively seeking to develop a larger core of volunteers across all of CLCH. The Activity Coordinator has a programme which runs throughout the year and will also review how this can be embedded more with local community groups and volunteer groups.	Activity co-ordinator	July
Staff and communication			
18. Commissioners and providers should work together to ensure that during any service re-design/procurement that there is clear communication to staff, residents and their families/carers to allay fears and co-produce solutions.	Recently the SHSOP Team from Westminster City Council (WCC) who is leading on the procurement programme visited each of the Homes and answered questions from staff. Additionally, during April 2015, Sanctuary (the preferred bidder) has also run roadshows in the 3 CLCH Homes with representatives of the WCC SHSOP Team. We have requested that Sanctuary and the SHSOP team also make arrangements to speak to residents and relatives across all of the Homes. Once the contract between Sanctuary and WCC is signed it is expected to be easier to put further communication facilities in place as the commercially sensitive nature of the SHSOP procurement programme will have been resolved.	Patrick Geraghty	On-going
19. Contingency planning needs to be a key element and strengthened to ensure the workforce is retrained and valued to maximise staff experience in a challenging recruitment environment and to protect resident experience.	We have just put in place a staff-development programme for all Registered Nurses and Healthcare Assistants (HCAs) across the 3 Homes. This development programme commenced on the 1 st May and will run through to the end of July 2015.	Patrick Geraghty	End July
Privacy			
20. Staff should always knock before entering a resident's room and residents should have the ability to shut and lock their doors if they wish to do so	The expectation is that all staff knock as appropriate when entering residents' rooms and introduce themselves if that is appropriate as well as wear name badges and appropriate uniforms. However, not all residents have the ability due to their medical condition to shut and lock the doors and staff will support residents to maintain their dignity at all times. Staff will continue to work to get an appropriate balance between a social model of care and a medical model of care.	Lisa Clarke	Completed and on-going