

NOVEMBER 2015

# Healthwatch Richmond Enter and View Report Roy Kinnear House

**Address:** 289 Waldergrave Road, Twickenham, Middlesex, TW1 4SU  
**Date and time of visit:** Monday 10<sup>th</sup> August 2015, 11:00 -14:00  
**Authorised Representatives:** Penny Alexander, Keisha Forteau, Yvonne Lincoln  
**Service provider:** Choice Support, Company Reg No. 2189556, Charity No. 298149  
**Registered Manager:** Ms Carole Britton is currently Registered Manager for Roy Kinnear House. The home informed us that Pretty Sibanda is currently awaiting registration with the CQC as the Registered Manager.

<p><b>Background</b></p>	<p>Roy Kinnear House is registered with the CQC as ‘Accommodation for persons who require nursing, personal care, diagnostic and screening procedures, learning disabilities, physical disabilities, sensory impairments, treatment of disease, disorder or injury, caring for adults under 65 years’. Roy Kinnear House was selected for review because concerns were raised at a Quality Information Sharing Group meeting on the 5th June 2014. Concerns raised were about a safeguarding incident that occurred in December 2013.</p>
<p><b>Outcomes</b></p>	<ul style="list-style-type: none"> <li>• Management plan to include any news regarding new people moving into the home in relatives meeting.</li> <li>• Management have changed the rota to ensure sufficient levels, particularly at night</li> <li>• Staff at Roy Kinnear were thanked for their hard work in Choice Supports issue of Choice Voice and have been put forward for Choice Supports annual star awards</li> <li>• Staff are referring residents to a local hydrotherapy pool on a regular basis</li> </ul>
<p><b>Further recommendations</b></p>	<ul style="list-style-type: none"> <li>• Roy Kinnear continue to monitor and improve relationships between staff, residents and relatives and Choice</li> <li>• Management share the Choice Support policy for selecting new residents with relatives</li> </ul>

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## Findings

### Environment

Following Choice Support's takeover the capacity of Roy Kinnear was reduced from eight residents to six. By reducing capacity at the home, Roy Kinnear were able to increase the size of the bedrooms and communal rooms and add an extra bathroom. On the day of the visit construction work was being carried out and internal walls were awaiting cladding for protection against wheelchairs. Management informed us that the works on the house were completed on the 17th August 2015.

Residents rooms, located on the ground floor were recently refurbished, large, modern and personalised to the resident's taste. Management informed us that as part of an induction to the home for new residents staff worked with residents and relatives to select the décor for their room.

One of the rooms had a large enclosed bed with padded walls. We were informed that this bed was secure and was locked using secure bolts, this was to ensure the resident did not harm themselves whilst in bed. We were informed that this resident had 24 hour care and was not left in the bedroom alone. The home assured us that the bed was in the resident's best interests and recommended by an Occupational Therapist that has worked with the resident since childhood.

Rooms, corridors and communal rooms had space to enable large wheelchairs to manoeuvre around the home. Bathrooms were large and spacious and sinks were located in corridors for easy access after providing personal care. The communal room which opened out to the kitchen was lacking any furniture, it was difficult to identify alternative places other than the table located in the kitchen where relatives would be able to sit and socialise with residents. Management told us the sofa and soft furnishings, chosen by residents and relatives were due to be delivered in the next few weeks.

The home had a multi-sensory room for residents to visit with care staff, the room contained a sofa and easy chair, a large TV screen, a sound system, with CD, DVD equipment and a variety of coloured lights and a spinning screens that changed colour. The room had space for three large wheelchairs and three or four carers at a time meaning that not all residents could have access at once. Staff informed representatives that there were ongoing discussions on how to improve the sensory room for residents.

### Quality of life

Relatives mentioned that a particular resident was causing disturbance in the night due to challenging behaviour. The relative expressed concerns about the impact of the noise on quality of life for the residents and the homes relationships with its neighbours. Relatives made us aware that they had not been assured by management that a full assessment had been carried out to ensure this person was suitable for the home. We were not made aware of any official complaints raised to management about this however. We suggested the home looked at improving how they inform residents and relatives about new residents in the home.

## Outcome

1. Management recognised room for improving this process and have put plans in place to include any news regarding new residents moving into the home in relatives meeting.

## Further recommendations

1. We thank management for providing us with Choice Supports Policy for selecting new residents, we would like to further recommend that this policy is shared with relatives

## Care

Staff appeared to be dedicated to providing a high quality of care, when they spoke to the team they were passionate about the high quality of care they provided. All staff said to us that they would recommend the home to a relative that met the criteria for Roy Kinnear. One member of staff added that they would definitely offer this home to a relative as they **‘offered the best care, and made sure the ladies were well looked after’**. Management advised us that they feel the time taken planning and reviewing care plans made a difference to the individual care offered.

Staff and residents advised us that flexible working is facilitated and shift patterns are often altered according to residents’ needs for each day, whenever possible. We were informed that when residents are unwell and need hospital care the home ensure that they have care staff to support them for 24 hours a day during their hospital stay. This was due to previous negative experiences as hospital staff were unable to engage and communicate with residents effectively when providing treatment.

The home assured us that they had informed West Middlesex Hospital of their concerns. They told us ***‘Due to their complex needs the residents have allocated one to one hours. These one to one hours are also provided to the residents even when they are in hospital. Sometimes staff spend additional time at the hospital to ensure hospital staff have been provided with all the necessary information and have a good understanding of how to support the individual. On some occasions when the hospital is not able to provide the one to one support required by the individual whilst in hospital, the house will provide the additional support and liaise with the commissioning authority to request the additional support as required. Families are actively involved in the care of their relatives and will willingly also provide additional support at the hospital’***.

## Care plans

All of the relatives that spoke to representatives were aware of the care plans for their respective residents and were comfortable raising concerns. Management advised us that the implementation of care plans could often raise conflict between carers and relatives.

Relatives commented that they felt that staff should be more aware of individual care plans and felt that they did not follow them meticulously. Relatives mentioned carer workers not changing a dressing or medication patch as often as the care plan stated. Another resident required a regular procedure that was outlined in their care plan but was provided with an alternative procedure in order to save time. Staff assured us that staff are briefed on care plans.

Management told us *'All staff are asked to read the care plans as part of their induction. Care plans all have signing sheets attached to indicate that staff have read, understood and signed the care plan on file. Care plans are reviewed on a regular basis and any changes made are notified to staff through supervision and staff meetings. These adjustments are usually made by the keyworkers and signed off by the key nurse.'* Management also assured us that all care plans were written with full involvement of families and all plans are given to families to make final changes and sign off.

## Staff

Roy Kinnear currently employ 16 full and part time staff and three bank staff. Management informed us that most bank staff have previously been employed on a full or part time basis at Roy Kinnear. The staff team are made up of support workers, senior support workers and registered nurses. There was one nurse in training, undertaking a placement at the Home.

All staff that engaged with Authorised Representatives reported enjoying working at that home and felt they were making a positive difference to resident's lives.

Due to funding reasons all staff were being trained to carry out physiotherapy tasks as NHS funding ceased to provide the residents with this. Two relatives were unsure how the skills of the staff were adequate to carry out the role of a skilled trained physiotherapist. Residents also felt that if the practice of having care staff do this was to carry on that care staff would need more training. Management assured us that staff are trained by a qualified physiotherapist and given access to training videos. They informed us that staff are only given this task if they are fully competent to do so, and at present this is also limited to only very specific support to one or two individuals. Management were confident that if the physiotherapist thought this practice was unsafe in any way they would be notified.

## Staffing levels

We shared concerns with Roy Kinnear shared with us by relatives and staff about low staffing levels, particularly at night.

## Outcome

Management have changed the rota to ensure sufficient levels, particularly at night, management assured us the family concerned are now satisfied.

## Staff and resident interaction

Enter and View Representatives witnessed positive staff and resident interactions, and team work. On one occasion staff were observed catering to individual needs for an outing and explaining a delay in leaving the building. It was suggested that management commend staff on their excellent staff and resident interaction.

## Outcome

Management informed us *'In the last company issue of Choice Voice there was an article thanking the staff team at Roy Kinnear for their hard work. The staff team has also been put forward for our annual Organisations Star awards.'*

## Activities

Staff informed us that they were involved with all activities, and told us that there were a range of activities offered on a daily basis. The majority of the activities were performed by care staff on behalf of residents, but where possible residents were encouraged to interact with the activity as much as possible.

On the day of the visit representatives witnessed an activity being carried out in the sensory room and trip to Kingston by bus to go bowling was arranged. There was no evidence of any activity plan on display during the visit, however relatives knew what was on the activities agenda and told us they would get involved if it coincided with their visit. One relative complimented the range of activities that Roy Kinnear offered but requested that the home locate a suitable swimming pool as this activity is no longer offered. We asked management to take this into consideration.

## Outcome

Management informed us that issues at a local suitable hydrotherapy pool had been resolved and one resident was accessing the pool weekly and that staff are referring other residents to take up swimming in this pool.

## Transition to Choice Support

Management told us that all staff were given an induction to Choice Support following the takeover of Roy Kinnear, most staff confirmed this. One member of staff identified issues with lack of sufficient inductions to Choice Support. Management identified the move to a national organisation as a positive one which meant increased access for staff to training and development, staff we spoke to agreed with this.

All staff reported feeling positive when they were informed that management of Roy Kinnear was to be taken over by Choice Support. However, following the takeover, staff reported changes as being *'slow'*. Staff reported that in the beginning they had *'high hopes of being part of a larger organisation with more support'*, however they felt that this had not happened.

One relative reported that it had been ‘**hard to get used to a big outside company taken over**’ and had experienced issues such as ‘**impersonal decisions**’ which they believed were connected to financial restraints of Choice Support.

Management informed us they had a representative for relatives of Roy Kinnear’s residents on the Choice Support panel. We were unable to speak to this relative on the day.

Choice support stated ‘***we realise there has been a number of changes that the staff especially, have needed to adjust to, but are confident these changes will be better for individuals involved***’. ***We further recommend that management at Roy Kinnear continue to monitor relationships between staff, residents and relatives and Choice Support to ensure positive relationships***’.

### **Further recommendation**

1. We further recommend that management at Roy Kinnear continue to monitor and improve relationships between staff, residents and relatives and Choice Support to ensure positive relationships.

### **Engagement with relatives**

Management advised that when there was a dispute between carers and relatives, carer staff would be taken out of the discussion to avoid affecting relationships with residents. A member of staff informed us that currently residents meetings take place with staff and meetings are to be set up for relatives. We recommended that Roy Kinnear consider a relatives meeting to allow relatives and staff to discuss issues.

### **Outcome**

1. Management informed us they are currently in the process of setting up a relatives meeting

### **Further recommendations**

1. We thank management for providing us with Choice Supports Policy for selecting new residents, we would like to further recommend that this policy is shared with relatives
2. We recommend that management at Roy Kinnear continue to monitor relationships between staff, residents and relatives and Choice Support to ensure positive relationships.

### **Disclaimer**

This report relates to the service viewed on the date of the visit only, and is intended to be representative of the views of the patients and staff who met members of the Enter & View team on those dates, and the views of relatives who spoke to us.