

Enter and View report

July 2019

Seymour House



Contents

1 Introduction	3
1.1 Details of visit	3
1.2 Acknowledgements	3
1.3 Disclaimer	3
2 What is Enter and View?	3
2.1 Purpose of Visit	4
2.2 Strategic drivers	4
2.3 Methodology	4
2.4 Summary of findings	5
2.5 Results of visit	6
2.6 Additional findings	7
2.7 Recommendations	8
2.8 Service Provider Response	8
2.9 Acknowledgement	9



1 Introduction

1.1 Details of visit

Details of visit:	
Service address:	Seymour House, Mental Health Nursing Home
Service Provider:	Beaumont Supported Living. Owner: Vincent Burini
Date and Time:	Tuesday 23 July 2019
Authorised Representatives:	Zoe Sherry, Jan Weedall, & Thora Deacon
Contact details:	Healthwatch Hartlepool, Orcel Centre, Wynyard Road, Hartlepool, TS25 3LB

1.2 Acknowledgements

Healthwatch Hartlepool would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme.

1.3 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

2 What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share



examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.

2.1 Purpose of Visit

- To Understand the Ethos of the home. The operational standards and staffing on the day to day basis
- To engage with staff and residents
- To Observe interactions within the home
- To gather information from residents and family members about their experiences and feelings about living in or visiting the home

2.2 Strategic drivers

- Care homes are a Local Healthwatch priority
- To ensure and promote standards to meet the requirements of residents and staff

2.3 Methodology

This was an announced Enter and View visit to a Mental Health Nursing Home.

Due to the category of care it was deemed necessary to inform the manager of the proposed visit. This was to ensure suitable access and the safety of the visiting team

The visiting team were able to interview the manager, the psychiatric nurse on duty as well as several staff and residents.

This enabled the team to gather knowledge about the running of the home, and the opinions of the residents about their care.

The home has an open-door policy

The visiting team had access to all communal areas which were bright, comfortable, clean and welcoming



2.4 Summary of findings

At the time of the visit the home appeared to be quietly and efficiently run. Though the team were aware that there may be times when circumstances may disrupt this.

All the residents at that time had capacity and staff support those residents to make personal decisions.

Residents are able to access the wider community with permission; there is access through the garden at the side of the property

There was a good variety of food. The menu being posted daily on the notice board, It was noted that there was a good choice of healthy eating options but it was not always to the residents' liking. 'too much bread' 'gets boring 'but others thought it was good.

At present the home has 18 residents out of a possible 20. Some of these have shared rooms. Many of the residents have lived there for many years,

There is a complexity of diagnoses, but all are given general care with the physical and mental health monitored in each resident and changes responded to appropriately.

The home has a pleasant atmosphere, it appears light and airy thought there is a darker corridor from the front door, but this is part of the building structure. The decoration was light with pictures on the walls. The corridor area is used to house a notice board which displays menus and a variety of daily events and activities. Bingo, bike rides excursions, pamper days and shopping trips.

The rooms were comfortably furnished and dining- lounge area led into a large conservatory which opened onto a small but well kept garden with a smoking area.

Staff were professional, informative and friendly. They are very well aware of the needs of each resident. Staff receive all mandatory training with a moving and handling instructor being a member of staff. The manager is keen to expand the training programme.

Staff can access E learning and are paid for time taken for study.

The home is staffed at all times.

The day shift 8 am to 8 pm has 5 staff, at least one MH nurse and the rest are support staff trained to level NVQ 3

The night shift has 1 MH Nurse with 1 support worker. There is an 'on call' list for back up if required

Medication is dispensed by qualified staff

It is a credit to the home that there have only been 4 changes of staff in 2 years.

All residents are supported to make appointments with their own G.P., Dentist and Optician

2.5 Results of visit

Environment

The Team were courteously met by a member of staff, the manager was in a telephone conversation. The team were conducted to a lounge and offered refreshments.

The manager ensured we completed the visitor book and later a comments sheet at the end of the visit.

The building has been in service for several years. It is a Mental Health Nursing Home. This is registered with the Local Authority and staff from the Tees Esk Weir Valley (TEWV) M H Trust community mental health team support the residents.

The Registered Manager has been in post for approximately 2 years. Under his guidance with support from the owner the CCG rating has improved to overall good.

Staff are assigned to residents to ensure all personal needs, privacy and dignity are met.

All residents at the time of the visit had capacity though staff ensure that the residents understand any information they are given. This is to assist them with personal decision making even though at times the decisions may not be wise ones.

There is an I.D card system in place which residents can use if they wish; this has contact details of the home. This is offered to residents, but it is not compulsory as all residents have capacity. The home operates an open door policy.

The manager is considering the use the use of the 'Hartlepool Borough Council Buddy system' to monitor residents who have physical as well as mental health needs and wish to go out alone.

The manager is also looking at the possibility of CCTV but needs to decide on the benefit of the use of this system in this home.

Promotion of Privacy, Dignity and Respect

Each resident has an assigned member of the care staff assigned to them which they see at least once weekly. The Link Worker manages the residents personal care, showering, bedroom issues, weekly weight measurement and works with the family to resolve any issues. Staff told us that they feel they get all the information they require in order to understand an individual residents' needs. The Link Worker's name is shown on the bedroom door along with the photo of the resident.

All the residents we saw appeared well dressed.

The staff told us that the Décor specifically included familiar flower prints to help those with some dementia.

Interaction between Residents and Staff

Staff had a good knowledge of all residents, there was friendly positive exchanges.

The younger men did not feel able to talk to people they did not know,



The manager commented on the good relationship the Social worker Gwenda Cullen has with the residents and how that helps in the home.

Residents

There were several residents coming and going from the local shops.

When asked about their home most felt that they were well looked after.

'I come and go as I want' 'I go to Tesco for a cuppa'

When asked, residents said that they 'felt safe'. There was a general feeling of being safe and secure in their living environment.

One resident was not well and was unsettled. 'I have a psychiatrist, but my problems are not resolved'

Another resident felt lonely 'I miss my Mam and Dad' but another said 'I am happy in a way'

There are regular resident meetings to consult, and inform, about events or changes that may affect the residents within the home.

All residents and their families are aware of how to make a complaint should the need arise. Copies of these are held in the manager's office.

Food

The dining room is only used by a few residents as they choose where to eat.

The daily menu is displayed on the notice board and Diabetic diets are catered for.

There was a drinks trolley in the lounge for residents to use, the trolley is taken round the home at intervals for those not using the lounge.

Staff

All staff wore uniforms. They were friendly but professional. There was good interaction and understanding of the resident's conditions and needs.

2.6 Additional findings

Many residents have regular family visitors and some residents have home leave for overnight or weekends. Some are from Easington and Peterlee which allows more family time.

The residents are aware of the 'open door' system and there did not appear to be any problems on the day we visited.



A previous fire at the home had successfully demonstrated the evacuation process. There is regular fire drill training for residents and staff.

There are proposals to change the use of 3 long stay rooms to make them into short stay flats to help people move toward independent living

One completed questionnaire was returned by a family member/carer of a resident. They commented that "The staff are friendly, approachable and helpful. Mum has settled in well and is always praising the food and staff. The home is always clean and the family are happy with the care and support mum receives at Seymour House.

2.7 Recommendations

The team acknowledge the need for balanced and healthy diets but consultation with residents may resolve some of the issues that they had around the sandwiches and too much bread.

That Hartlepool Borough council assist in facilitating additional identified training and development opportunities for Seymour House care staff.

That the work and development activity which led to the improved CQC report is acknowledged and continued as part of the Home's ongoing efforts to ensure excellent care and support for residents.

That the home's ambition to develop two residential flats to support patients' safe transition back into the community is supported and welcomed particularly in light of the short supply of provision of this type within Hartlepool.

2.8 Service Provider Response

From: Steve McDermott

Sent: 16 September 2019 12:09

To: Stephen Thomas

Subject: Enter and view report amendments

Hello Stephen

Here is a list of points that need amending from the entre and view report

Staff don't wear uniforms due to the nature of the service we provide. All staff wear smart casual clothing when on shift

2.4 Shared rooms

all bedrooms are individual residents none shared



2.5 ID cards

the ID cards are offered to all residents, but it is residents choice if they choose to accept one they still can go out alone as we have a open door policy

2.5 the Buddy system

this system is provided by the local authority its not part of the NHS

Thank you

Lucy Cutter

RMN Clinical lead

2.9 Acknowledgement

In Response to the comments received from the Seymour House Clinical Lead. Healthwatch Hartlepool is happy to acknowledge the factual changes that needed to be made to the document. These changes have now been incorporated.