

**Enter & View
Allenbrook Nursing Home
May 2024**



Background

Allenbrook Nursing Home is situated in the Halesowen area of Dudley borough and provides accommodation for 32 residents.

There are currently 25 residents staying at Allenbrook, 17 of whom have a dementia diagnosis, and one resident is receiving end-of-life care.

The most recent Care Quality Commission inspection in July 2023 rated Allenbrook as good in all five domains.

Healthwatch Dudley has been working with the Care Quality Partnership to identify care and nursing homes to visit throughout the year, with a view to listen to the experiences of residents and relatives.

Enter & View

Healthwatch Dudley has the legal power to visit health and social care settings.

Enter & View visits provide an opportunity to make observations and speak to service users, carers, and relatives to understand their experiences.

Feedback and perceptions from service users, whilst sometimes negative, form part of an Enter & View report. This is a valuable opportunity for care providers to receive unbiased feedback and improve their service.

We publish our findings at www.healthwatchdudley.co.uk and share with relevant organisations.



Healthwatch Dudley has the legal power to visit health and social care settings.



What we did



Healthwatch Dudley visited Allenbrook Nursing Home with Dudley Council's Quality & Safety Officers in April 2024 to discuss a proposed Enter & View visit. We met with the registered manager, director and Isla the resident dog.

We provided posters displaying information of the visit. This was so residents and their friends and family would be aware of the visit, should they wish to be present to share their views.

We also provided details of a survey that friends and family could complete two weeks before and a short time after the visit, if they were unable to attend on the day.

We carried out the announced Enter & View visit on Wednesday 15th May 2024. Two members of staff visited Allenbrook Nursing Home from 10 am to 11.30 am and 2.30 pm to 4 pm to speak to residents and their friends and family about their experiences.

On the day of the visit the registered manager alerted us to rooms where residents were currently being cared for at the end of their life or who were too unwell for us to speak to and therefore not to be approached.

Who we heard from:

- Seven online survey responses
- Three received by post
- Four surveys completed during the visit
- Four residents and two family members provided feedback but did not complete a survey

Several residents and visitors declined to speak to us or said they did not have anything to feedback.

As Allenbrook is home to people with dementia, we were mindful not to distress them and some residents were unable to respond to our questions. These conversations have not been included in our findings.

Who we heard from



Care of staff and care needs

“[From] what I have seen and know I am very satisfied with Allenbrook.”

-Relative



43%
of people
felt staff
were caring

“I feel a more stable team would enable a more person-centred approach.”

-Relative

43% of people said that staff were caring. 50% of people said that some staff were caring and 7% said they didn't know or weren't sure.

“Staff show compassion and endless patience.”

-Relative

People made comments on the “very caring” permanent staff.

“The permanent staff are very caring.”

-Relative

However, there was some concern on the “shortage of staff”.

“On occasions there appears to be a shortage of regular staff.”

-Relative

People commented on inconsistency of staff members.

“Never see the same one twice, by the time you have got used to them they've left.”

-Resident

50% of people felt their or their friends or relatives' care needs are being met all of the time, 21% said most of the time and 29% said some of the time.

Several people mentioned staff turnover as an issue which has impacted on them or their relative.

“Some days the staff are so busy residents are not getting their needs met, also if bank staff are on this puts a strain on the regular staff.”

-Relative

We observed staff offering residents food and drink, reassuring them while they were moving them around, holding their hands, or walking with them if they appeared unsettled.

“I feel [the staff] should be commended for the care they give under such challenging conditions.”

-Relative

During our visit we observed staff who were busy attending to residents. Some residents remained in their room during the day and staff were seen going in to care for them.

Round the clock care



21% felt care was consistent,



29% felt care was better during the week



50% not sure

People told us about different experiences of the care provided at the weekends compared to the rest of the week.

“The main difference is the absence of management and admin staff at the weekend, but there appears to be no difference in levels of carers and nurses.”

-Relative

“There are times especially at weekends when there is a lack of permanent staff. This affects the care staff are able to give.”

-Relative

Healthwatch Dudley has visited Allenbrook on weekdays, so has not observed care during evenings and weekends.

79% of respondents felt that they or their friend or family member were safe at Allenbrook. .

“Someone does roam around but I don't worry about it. I feel safe.”

-Resident

7% of respondents felt that they or their friend or family member did not feel safe at Allenbrook and 14% said they were unsure. .

“Sometimes there are not enough staff in the communal area to deal with the residents.”

-Relative

We observed external and internal doors requiring codes to enter and exit.

We noticed that some bedrooms and the bottom of the stairs had barriers across to stop people from entering.

Health & safety information was on display in the reception area, including fire evacuation procedures.

We received feedback that there is a lack of signage informing people that there is CCTV on the premises.

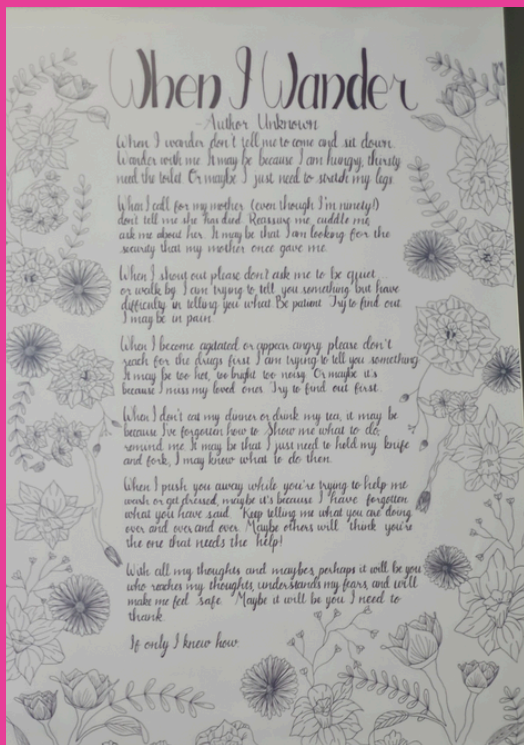
Safety



“I do not feel it is fully safe because there are not always enough staff.”

-Relative

Activities



“I like bingo.”

-Relative

“We have had some excellent activities leaders but they have not stayed more than a few weeks.”

-Relative

57% of people said they were unsure about the activities provided at Allenbrook. The respondents who did know about the available activities provided mixed feedback. 15% of people felt that activities were good and the remaining 28% said activities were poor or very poor.

“There was little when my relative moved in, but this has improved with activity co-ordinators joining the team.”

-Relative

“We used to do Wake & Shake. It would be good to do physical things like play skittles.”

-Resident

“After sitting with no activities person for eight months and watching residents care suffer we had three wonderful new activities people start. Things were looking great and residents were alive again, but we have now had two of them leave.”

-Relative

During our initial visit in April, we observed printed copies of activity timetables for the week on the reception desk and in the communal living space. These included days and times of the activities, which included bingo and seated exercises. We did not see any updated copies of the timetable available during the Enter & View visit.

On the day of the Enter & View visit, we were informed that there were no activity co-ordinators on shift that day, therefore no activities would be taking place.

We received feedback that there were previously more activity co-ordinators in post but this number has recently reduced to two. Also, one person said they had not seen a copy of the weekly schedule and did not know the home published them.

Isla, the resident dog at Allenbrook was present at both visits.



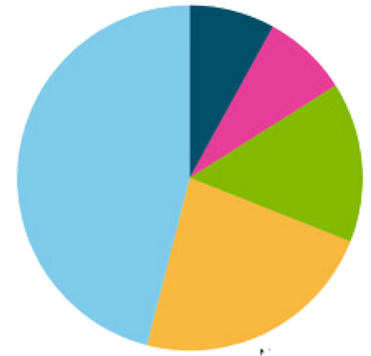
Daily routine



“The activity programme is very limited. Residents appear to sit in same place in lounges day after day.”

-Relative

When asked if they felt there was enough choice in the daily routine there was a mixture of responses.



During our visit, we observed residents sitting in the communal lounge with the television on. Some residents were seen talking to members of staff or visitors. We saw visitors arriving throughout the day.

17% of people we asked said that Allenbrook supported their religious needs. A small number, 8% said their religious needs were not met. 42% said they were not sure and 33% felt it was not applicable to them.

“I don't know, I haven't seen anything around the home to say they support religion.”

-Relative

We observed that several residents had religious items displayed in their bedrooms.

A resident shared that the representatives from the Catholic Church visit the home to give Holy Communion.

Religious needs or preferences

“I believe a Church of England minister visits.”

-Relative

Involvement in care plan



42% of people told us they were involved in the development of their care plan

“I requested to view the care plan and was told I could not have a copy by management, but I made numerous corrections to the plan which has been addressed.”

-Relative

50% of people said they were not involved in their care plan and 8% were not sure.

“The care plan was made without consultation.”

-Relative

Our team did not view any care plans as this does not form part of an Enter & View visit. We observed there were folders in each room which we believe contained personal information.

Supporting independence

When asked if they felt supported to maintain independence, 37% of people agreed.

Some residents shared that they liked to care for themselves, requiring minimal support from staff.

However, 27% felt there wasn't sufficient support to remain independent and 36% answered not sure.

"Sometimes I feel more could be done to support a level of independence."

-Relative

We observed some residents who were unable to stand or walk unaided, they relied on the staff to help them with moving around and caring for them.

"My mum is not forced to do anything that would compromise her health and safety."

-Relative

62% of people felt they had the opportunity to share feedback with staff. However, 38% did not feel they had the opportunity to feedback.

"This can be done informally, but organised meetings with the manager are a good idea and should continue."

-Relative

We were informed that a 'Residents Meeting' had been held in February. One person said they felt listened to and that things had started to change, however someone else did not feel the meeting was helpful. We received feedback that there had been one meeting in the last 12 months.

"We have been told by management to take any problems to them, not to the staff."

-Relative

We noted that the managers' office is based next to the communal living room and the door was open during the majority of the visit.

We found the staff and manager welcoming, approachable and friendly.

There was a sign in the entrance informing visitors that the manager would be holding a clinic the following day.

Sharing feedback

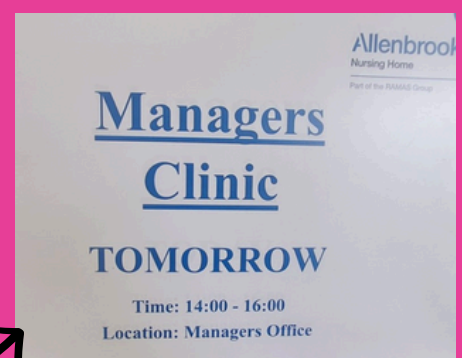


69%

of people know where to go if they want to make a complaint

"I can talk to the carers."

-Relative



Environment

“[The] cleanliness in bedrooms is good.”

-Relative

“Always clean and tidy.”

-Relative

“[The] communal area is not big enough for everyone and therefore the conservatory is used, both are very hot in winter and summer. The communal room has no windows to open.”

-Relative

“There is no odour around the home.”

-Relative

100% of people said their (or their friends or relative's room) was clean and comfortable.

We spoke to several residents in their bedrooms. Before entering we asked permission and entered in pairs.

The rooms were pleasantly decorated and furniture appeared to be in good repair. Each resident we spoke to had personal items on display such as photos, ornaments and cushions.

We noticed that some rooms had a photo of the resident displayed outside, but others did not.

85% of people said communal areas are kept clean and tidy. 15% said they were not sure.

“[The home] always appears clean, although furniture in lounges is dated and rooms could do with a little more attention to make them more homely.”

-Relative

“Perhaps could benefit from redecoration or inclusion of art work.”

-Relative

“The opening of a reception area in the entrance is a welcome initiative.”

-Relative



Environment -our observations

Reception Area

Allenbrook has a reception area with seats for visitors and a desk. This space appeared clean, well-presented and contained health and safety information for visitors.

Hallways & Lift

We observed hallways to be clean and clear of clutter. On the day of the visit the lift was in working order.

Outside space

Allenbrook has a communal outside space with benches for residents to use located at the front of the building. We did not see anyone using the garden during our visit. The outside area appeared to be clean and well maintained.



Lounge, dining & garden room

The communal lounge is also used as the dining area for the residents and is furnished with a selection of tables and chairs. The managers office is located directly off the lounge area. The garden room is a large conservatory with seating for residents.

The kitchen is located next to the lounge and there is a tuck shop where residents can purchase sweets and snacks.

Food and drink

“They’ve introduced stuff in sauce, but I can always have a jacket spud if I want one.”

-Resident



33%

said the food was very good

When asked what they thought of the food and drink at Allenbrook 33% said it was very good, 25% good, 42% neither good or poor.

“My relative appears to enjoy their food.”

-Relative

“Food always looks appetising and varied and well presented. Good that snacks can be offered at all times if residents have not eaten at designated meal times.”

-Relative

We heard that visitors were previously offered a meal whilst visiting residents but this has recently stopped.

We were informed that visitors could previously make drinks for the person they came to see, but are now unable to as they are not allowed in the kitchen.

“I am concerned that we are no longer able to make drinks, after all this is their home. We should not need to ask for drinks.”

-Relative

They need to ask staff to make the drinks, but are concerned that the staff are already busy caring for residents. They felt this had happened without consultation with visitors.

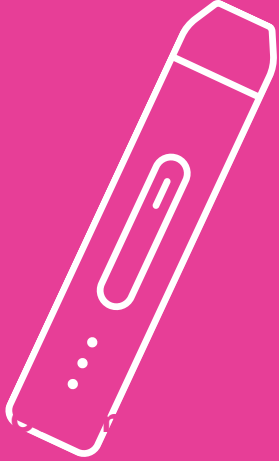
Allenbrook have confirmed that they made the decision to remove the hot drink station without consultation. The decision was made to prioritise the health and safety of residents.

During the Enter & View visit, we were alerted that a resident had been given a drink that was too hot and may have resulted in injury. We were informed by staff that the resident had been checked by nursing staff and was not injured.

Food choices for the day were displayed in the dining room on a large chalkboard.

Menu choices for the month were also displayed in the hallway.

Vaping



Feedback was received from several people about the use of vapes in communal areas of the home. Concern was expressed as to the impact this may have on other residents and visitors.

E-cigarettes are not covered by smokefree legislation and there is no evidence that passive exposure can cause harm other than to people with pre-existing respiratory conditions.

You should base policies about vaping on evidence of relative harm compared with smoking, and e-cigarettes' role in supporting smokers to quit or stop during their inpatient care. This includes designating areas within the hospital grounds and buildings where e-cigarette use is allowed or prohibited.

Source – Public Health England 2020

Nursing homes should closely follow legalisation and any changes to future legislation regarding vaping and try their best to meet the needs of all residents.

We received feedback from relatives about communication between them and Allenbrook.

People suggested using social media and email for updates for families and friends.

In addition, one person would like to see ways to keep in touch when they are unable to visit by using video calling.

We were told that a welcome pack for families with information about the home and any additional costs would be helpful. They felt this would save them from asking staff questions. It was suggested that an 'All About Me' form would be a good way to get to know new residents.

“It was difficult to get regular updates during the recent norovirus outbreak when the home was closed to visitors. More use of email (blind copied to named contacts re: data protection) would be an efficient and effective way to communicate.”

–Relative

Communication



Recommendations



Sharing information

- Explore using social media to share information.
- Information pack for new arrivals at Allenbrook. This could include information about activities, visiting times, costs for services and a list of frequently asked questions.
- Display posters in communal areas informing people that there are CCTV cameras in the home.
- Communicate day-to-day changes to residents, families and friends and where possible consult with them beforehand.
- Consider displaying staff photos with names.



Personalised care

- Provide 'All About Me' forms for all residents when they first arrive at Allenbrook, to share information about likes, dislikes, family members and interests.
- Display photos of all residents outside of their bedrooms.
- Share care plans with residents, and where appropriate relatives, and capture their feedback.



Actively seek feedback

- Conduct exit interviews and develop a survey for staff who leave to capture feedback. Utilise supervision sessions to discuss any concerns.
- Gather feedback from residents, friends and family members via regular meetings, anonymous feedback boxes, surveys and newsletters.



Enrich residents lives

- Include more artwork and points of interest for residents.
- Provide a variety of activities for residents including quizzes, games, and experiences. Share the activity schedule with relatives and visitors.
- Consult with residents and visitors as to what activities they would like to take part in.
- Look at offering a range of dementia friendly activities that encourage reminiscence, such as developing memory boxes.



Other

- Use technology to help families and friends keep in touch with residents when they are unable to visit.
- Explore ways to manage residents who vape, such as using designated areas to help reduce the impact on other residents.

Response from Allenbrook

“We appreciate everyone’s differing views.”

*“Thank you for the time taken during your recent visit at Allenbrook.
We have found your results to be very insightful.
We find that in part, the report does contradict itself slightly, however
there are many useful points to take from this.”*

-Samar Sidhu, Director



Allenbrook told us that “staff turnover rates [are] in line with [the] sector” and “below sector averages”. They have also said that they “do not employ bank staff” and rotas are completed with permanent staff.



Allenbrook told us that decorating has been completed and artwork agreed on.



Allenbrook agree with the comment from a relative who told us it was difficult to get updates. Email will be used more frequently and people will be blind copied to maintain data protection regulations.

Thank you

Thank you to the residents and their friends and family members for sharing their experiences with Healthwatch Dudley.

Thank you to the staff at Allenbrook Nursing Home for making us welcome on the day.

We hope our observations and recommendations contribute to improving the experience for residents and staff at Allenbrook.

We hope that the comments made by residents and the recommendations formed from our discussions with relatives and residents will be considered.





**Committed
to quality**

Healthwatch Dudley is committed to providing a quality service, from how we collect data, to the information we provide. Every three years we perform an in-depth audit, in conjunction with Healthwatch England, to ensure we meet this high standard.

If you would like this report in another language or format please contact us.

Healthwatch Dudley

7 Albion Street
Brierley Hill
DY5 3EE

03000 111 001 (local rate number)

hello@healthwatchdudley.co.uk
www.healthwatchdudley.co.uk
@HWDudley