

# Bowgreave Rise Preston

Enter and View Report

9<sup>th</sup> December 2021

10:30am-13:00pm



## DISCLAIMER

This report relates only to the service viewed at the time of the visit and is only representative of the views of the staff, visitors and residents who met members of the Enter and View team on that date.

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Staff met during our visit:

Jill Maun (Manager)

Date and time of our visit:

9<sup>th</sup> December 2021

10:30am - 13:00pm

Healthwatch Lancashire Authorised

Representatives:

Amanda Higgins (Engagement)

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## Introduction

Our role at Healthwatch Lancashire is to gather people's views and experiences, especially those that are hard to reach and seldom heard, to give them the opportunity to express how they feel about a service. This was an announced Enter and View visit undertaken by authorised representatives from Healthwatch Lancashire (HWL) who have the authority to enter health and social care premises, announced or unannounced. The aim is to obtain the views and experiences of residents, relatives and staff and observe and assess the quality of services.

The team compile a report reflecting observations and feedback. Healthwatch Lancashire is an independent organisation, therefore we do not make judgements or express personal opinions. The report identifies aspects of good practice as well as possible areas of improvement. This is sent to the manager for their opportunity to respond. Where appropriate, Healthwatch Lancashire may arrange a revisit to check the progress of improvements. The report is then published on the Healthwatch Lancashire website at [www.healthwatchlancashire.co.uk](http://www.healthwatchlancashire.co.uk) and sent to the Care Quality Commission, Healthwatch England and any other relevant organisations.

## Acknowledgements

Healthwatch Lancashire would like to thank management, staff, residents and relatives, for making us feel welcome and taking part in the visit.

## General Information

Bowgreave Rise is owned by Lancashire County Council with places for 32 residents. There was 1 vacancy at the time of our visit.

They provide residential care for older adults, as well as dementia care.

## Methodology

The Enter and View representatives made an announced visit on 9<sup>th</sup> December 2021 and spoke to 11 residents and 5 staff members.

Healthwatch Lancashire obtain the views and experiences of residents, relatives and staff. Conversations with each are adapted to capture individual experiences to help assess the quality of services. Conversations with residents were structured around four themes (Environment, Care, Food and Activities). Conversations with staff included their experiences of staffing levels, support and training. Relatives are asked to speak about their general experiences including how they feel about the service, if they feel involved in and informed. The team also recorded their own observations on the environment, facilities and staff-resident interactions.

## Summary:

Bowgreave Rise is a care home for older adults, which provides residential care and specialist dementia care for up to 32 residents. On the day of the visit, HWL representatives spoke to 11 residents and 5 staff members.

There were Christmas decorations displayed throughout the home and the home was mainly clean and tidy. The home was accessible for wheelchair users and public areas were well maintained. The dining rooms were set for lunchtime, with music playing in the background. HWL felt that the cleanliness of the dining room floor could be improved as it was observed to be unclean and sticky to walk on and there was a bathroom that appeared quite cluttered. The manager explained how this bathroom was not one which is used by residents.

We spoke to 5 residents in their bedrooms. These bedrooms were bright, modern, and decorated with residents' personal items. One room smelt of urine. The manager advised us on entering that this was due to only being able to clean properly when the resident left their room for lunch. They also said they were aware of this issue and new carpets were being arranged.

Resident feedback was generally positive, although minor negative feedback was received from three residents. Two of these commented on their bedrooms and another commented on the food. Residents shared very positive feedback on the home environment, their bedrooms, the care from staff and the food. Residents spoke about the activities arranged by the home and about their own hobbies such as reading which kept them entertained during the day.

Staff feedback was very positive with all that we spoke to saying they were happy working at the home, they felt well trained and that they would recommend this care home to a close relative. However, all staff said that having the ability to provide person centred care depended on staffing levels, and sometimes they felt the number of staff was not adequate to meet the high demands and needs of the residents.

Residents were observed throughout the visit; and were seen to be watching TV whilst others were reading. There were positive staff-resident interactions observed, such as staff talking pleasantly with residents on a one-to-one basis and knowing their names.

## Enter and View observations

### The external environment

The outdoor seating areas were pleasant and well maintained.

### The internal environment/reception -first impressions

HWL representatives were welcomed by the manager and asked to show proof of a negative Covid-19 lateral flow test and proof of double Covid-19 vaccination. The home was clean and tidy, with Christmas decorations displayed throughout. There were many noticeboards including pictures of residents participating in events and activities, pictures of staff, Bowgreave compliments, and useful information for staff and relatives including safeguarding guidance.

### The observation of corridors, public toilets and bathrooms

The home was accessible for wheelchair users. Bathrooms were accessible and used contrasting colours on the toilet seat and handles. One bathroom was observed to be slightly cluttered with plastic buckets and washing up bowls, however the manager explained that this bathroom was not used by residents.

### The lounges, dining and other public areas

Public areas were maintained and comfortable. There were various seating arrangements in the lounges and dining areas, with some facing each other to promote social interaction. HWL representatives observed some residents watching TV, whilst others were seen to be reading newspapers at the dining table. The dining room was set ready for lunchtime, and there was a radio playing music in the background. There was a handwritten daily menu displayed, which residents said they were aware of. However, it was noticed that the dining room floor was quite unclean and sticky to walk on.

### Observations of resident and staff interactions

HWL representatives observed friendly and familiar interactions between residents and staff, and they were often seen laughing together. Staff members were seen to be offering tea, coffee, and biscuits to residents.

### Additional information

HWL representatives were invited by 5 residents into their bedrooms to speak with them. The bedrooms which we entered were very pleasant and bright, with modern grey laminate flooring, and the rooms were decorated with

personal items like flowers and pictures. HWL representatives also observed that one of the bedrooms entered smelt of urine. The manager advised us they were aware of this, that new carpets were being arranged, and that this room could only be cleaned each day when the resident went for lunch.

The manager and other staff members also explained to us that they were one staff member short on this day, but informed us that when they are short staffed, they all support each other to make sure all tasks are completed.

## Feedback from residents

### Environment

All residents we spoke to said they were satisfied with the home environment and their bedrooms, although one resident said their bedroom was a bit small and another that it was just alright. Positive comments were made about bedrooms being light, spacious and having nice views.

*“My bedroom is a bit small, but it’s ok.”*

*“It’s very good. I like my room. I get a good amount of my own privacy and then being with the other residents.”*

*“I have a nice room. It’s a good size and has two big windows to let in the light.”*

*“The room is alright, just alright.”*

*“I like everything! Everything is very nice!”*

*“It’s fine.”*

*“I like my room it has a big TV.”*

*“I like the area and I like the view”*

### Activities

The residents we spoke to mentioned a variety of activities which they do at the home, including those arranged by the home and just general hobbies. Two residents mentioned that the home arranges singers who visit for entertainment. Most residents spoke about their hobbies including reading, knitting, watching TV and getting their hair and nails done.

*“I like listening to the singers, especially when they are good”*

*“I’m a book worm and I also like reading papers. I stay in touch with my family. I don’t go out much - I think I’ve done everything I wanted to do in my life, so I’m not bothered now.”*

*“I don’t go out a lot because of the main road. My son writes to me all the time and he’s really happy with it here.”*

*“I watch a lot of TV. I’m a bit lazy and I like watching television, like Philip and Holly. I used to travel but not now. I am limited because of my hip. My daughter visits every Saturday.”*

*“I like to knit. I’m knitting a scarf, and a pair of knickers for my cat.”*

*"We do go out but it depends on the weather."*

*"I just go along with whatever. I can come and go in this room or another room, there's nothing to say you can't go here or there. It's very good."*

*"The hairdresser comes to do my hair in the salon."*

*"I read the paper every day, I like to watch the news. Downstairs is noisy, it's nice and quiet upstairs."*

*"I like doing my nails, I shall have them sorted out before Christmas."*

## Care

All residents we spoke to shared that they are happy with the care they receive at the home and that the staff are friendly and helpful.

*"They're [staff] great, very helpful. You can have a laugh and a joke."*

*"They're [staff] very good. They're there when you need them. If you've got a problem, they'll help you."*

*"We have really good staff. They work very hard and I'm proud of what they do."*

*"They'll [staff] come and get me to take me for lunch and help with cleaning the room."*

*"The staff are all nice. I get on with everyone. Everyone makes us smile"*

*"This one' does everything! She gets things done. She's a lovely lady."*

*"I get on with everyone. I have lost my confidence a bit to ask for things"*

## Food

Feedback about the food was positive, with all but one resident sharing that they enjoy the food. Comments were also made about the good variety of food on offer.

*"The food is good. There's all sorts - salmon, peas and roast potatoes and then chocolate roll and custard. The portion sizes are good too. I just have toast for breakfast, but you could have egg on toast if you want."*

*"It's very good. It'd be nice to have a black pudding every now and again."*

*"I like the soup - potato and leek. I'd like pea and ham."*

*"It's alright."*

*"I always get to choose whatever I want."*

*"We get eggs, bacon and sausage. And tea and biscuits. I could eat a horse"*

*"It is very good food, I have a very good appetite."*



*“It’s very good.”*

*“I had toast for breakfast, I do enjoy the food.”*

## Staff views

Some staff feedback referred to low staffing levels which can be difficult, especially due to the high demands and needs of the residents. They expressed that this can then impact the ability to conduct person centred care. Despite this, all staff we spoke to said that they were happy working at the home, they felt well trained and that they would recommend this care home to a close relative.

### Do you have enough staff when on duty?

*“There is enough when we have 4 carers on duty. You need 4 on the top floor because the residents all need changing regularly and the buzzers go off a lot.”*

*“No, we should have 4 on today. They are recruiting. You just need one thing to go wrong and it becomes very difficult. Sometimes we have 4 staff but not always.”*

*“Not today. If we have 4 staff it is fine. We have a lot of residents who’s needs can be demanding on our time. There are residents in their rooms and we also have medication to do and meal service. We usually have enough but it can be patchy.”*

*“Not always, no. Currently, it gets very hectic, and it is difficult to get agency staff at the moment.”*

*“Normally we have enough staff, we use agency staff a lot, but it has been difficult recently.”*

### Do you feel supported to carry out person centred care?

*“If you’ve got enough staff we can deliver person centred care”.*

*“There is not enough time to spend with residents. It’s hard because there’s a few that are in their bedrooms which adds pressure. You have to make sure the residents are comfortable and support them to eat, and that takes time.”*

*“Not having enough staff really impacts on person-centred care - it means we can’t do it”*

*“We do pretty well but when it gets hectic it is difficult to be thorough in the job. I think there is a lot of unnecessary paperwork that takes time to fill in. I could be helping residents more instead of writing up the paperwork.”*

*“Yes, the managers support us and come in and help when we are understaffed.”*

### Do you feel you have enough training to carry out your duties well?

*“We do lots of training. It would be good if it was more hands on rather than being offsite or online. Like moving and handling is difficult to learn online.”*

*“Yes definitely.”*

*“Yes.”*

*“Yes, I have been here many years, so I have a lot of experience. Things have changed since before, with more people needing care.”*

*“Definitely. We have a training matrix which highlights training courses and acts as a reminder to keep up to date with them.”*

**Are you happy working here?**

*“Yes, we all help each other. We all muck in.”*

*“Yes, we have a good team. A lot have been here a long time. We are friends in and out of work.”*

*“Yes, I’ve been here a long time.”*

*“Most of the time, yes. Sometimes it gets too busy, but the manager comes to help.”*

*“Yes, sometimes I feel underappreciated, and it gets stressful at times, but there is good support.”*

**Would you be happy to recommend this care home to a close relative?**

*“Yes.”*

*“Yes.”*

*“Yes.”*

*“Sometimes I would say no and sometimes yes. It is dependent on the staff. If there is enough staff it feels a lot better and there are smoother days.”*

*“Of course.”*

## Areas for Improvement

The following areas for improvement have been highlighted from resident and staff feedback. These are not Healthwatch Lancashire recommendations but rather, areas for improvement suggested by residents and staff.

Cleanliness standards throughout the home

Staffing levels

## Pictures taken during the visit



## Response from provider

Areas identified for improvement	Action from provider	When by	Comments
Cleanliness standards throughout the home	<p>The home acknowledges that on the day of the visit the dining room floor may not of been up to standards. The cleaning schedule for the dining room floor is currently carried every night, as the dining room is used continuously throughout the day as a communal area by the residents. We will speak with the domestic team to increase the frequency of cleaning throughout the day maintaining the safety of the residents. Increased monitoring will be carried out by the management and staff team.</p> <p>The bathroom that was observed to be slightly cluttered had been removed from use whilst a new sluice was being fitted. The clutter has now been removed and the bathroom is once again fully functional to residents.</p>		
Staffing levels	In response to staffing levels, the home uses a dependency tool which calculates the number of care staff hours that are required for the level of dependency of residents. It is acknowledged on the day of the visit that a care assistant had rung in with Covid symptoms, the duty manager followed policy and procedure for obtaining replacement staff and in the interim period one of the two duty managers stepped in to support care staff with the delivery of person centred care.		

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