

Healthwatch Greenwich

Enter and View:



Riverlee Residential and Nursing Home

January 2020

1. Details of the visit

1.1 Purpose of our visit

Healthwatch Greenwich is carrying out a series of visits to Residential Care Homes in Greenwich to ascertain the quality of life, experience and views of residents.

Name and address of premises visited	Riverlee Residential and Nursing Home Franklin Place, Off John Penn Street, Greenwich, London SE13 7NJ
Service Provider	Sanctuary Care
Care Home Manager	Cecilia Agadzi
Date/time of visit	16 th January 2020 - 10AM - 12PM
Healthwatch Greenwich Authorised Representatives	Jummy Alabi, Daphne Barnett and Nnamdi Onwura
Admission Information	Residential and Nursing care home for adults aged 65+
Number of beds	75 - there were 71 residents in-house at time of visit
Staffing levels	Daytime: 14 care assistants, 4 nurses, 1 team leader Night time: 8 care assistants, 2 nurses, 1 team leader
At our visit	We spoke to 5 residents, and 2 members of staff. The registered Care Manager was not in the home at time of visit, so we arranged a follow-up telephone interview. We observed the care and interaction between staff and approx. 20 residents in 3 lounge areas. In addition, we viewed all communal areas and a few resident rooms.

1.2 CQC inspection

The Care Quality Commission (CQC) carried out an unannounced visit to Riverlee Residential and Nursing Home on the 8th and 9th February 2018. The home was rated as ‘good’ overall (https://www.cqc.org.uk/sites/default/files/new_reports/INS2-2513052001.pdf), however, the care element was rated as “requires improvement”

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Requires Improvement ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

1.3 Other ratings

Riverlee had a rating of 9.1 from Carehome.co.uk (<https://www.carehome.co.uk/carehome.cfm/searchazref/20001005RIVA>)

1.4 Healthwatch Greenwich Enter and View 2018

In May 2018, we conducted an enter and view visit to Riverlee Residential and Nursing Home, in which we provided 4 recommendations:

- Ensure all areas are clean and odourless
- Introduce a clearer signage towards the home’s front entrance
- Address the issue of space in communal areas and remove clutter
- Increase and improve signage around the home

1.5 How our visit was conducted

The visit was unannounced.

We notified the registered manager that we would be attending at some point in January, without specifying the date or time. During our visit, we provided the home

with leaflets and letters (to share with residents, relatives, carers and visiting healthcare professionals) giving an opportunity for further feedback.

1.6 Acknowledgements

Healthwatch Greenwich would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme. Healthwatch Greenwich would also like to thank the Healthwatch volunteers and representatives who assist with the visits.

2. Summary

Overall, we felt that Riverlee Residential and Nursing home provides a calm, welcoming and homely environment. Feedback from residents is positive, staff are approachable, friendly, and know their residents well. It is reassuring to see that issues raised in our previous report have been addressed.

The communal areas are clean, odourless and the corridors well lit. We were pleased to see the use of dementia-friendly colour schemes across the home. Having memory boxes outside each room contributes to the personalised feel at Riverlee.

We are concerned with overall safety in respect of trip hazards. Excessive clutter and inappropriate storage in areas accessible to residents increases risks of falls and accidents, particularly for frail residents. We recommend the home reviews how best to utilise the space it has for storage, to ensure communal areas remain clear.

3. Our Findings

3.1 Communal spaces

External space

The front of the home is pleasant and well maintained. In our 2018 report, we recommended introducing clearer signage towards the home's front entrance, as the home is located within a residential road. This has since been rectified with clearer signage in the carpark. Looking forward, plans include refurbishing the main entrance.

The home has three communal garden spaces, with the main garden having been refreshed to improve the space for residents. The home hosts an array of outdoor activities for residents in the summer, including BBQs, and a "cruise" week, which involves decorating the outdoor area with the flag and national symbols from a particular country, matched with menu choices, giving residents the chance to try the food as well.

Reception area

The home has a secure entry system and a calm and welcoming reception area. In the reception area, various certificates are displayed, including the latest CQC rating. Multiple leaflets are on display, including a notice providing visitors with information about how to provide feedback to Sanctuary Care, "Review us" forms, as well as advice and contact information.

Bathrooms



All resident rooms include a toilet. Bathrooms and showers are communal. There are 2 bathrooms and 2 shower rooms on each floor, except the ground floor, which has 1 bathroom and 1 shower room as it caters for fewer residents.

We felt the number of bathrooms and showers to be low for a capacity of 74

residents. However, residents can use bathrooms and shower rooms in other floors and the home uses a timetable system to bath or shower residents at different times.

Bathrooms and shower rooms are clean, spacious, and well kept. The use of dementia friendly signs enables residents to locate the bathrooms and shower rooms.

Lounge and dining areas

Each floor has a different colour scheme, all of which are dementia friendly. The lounge areas across all floors are open plan with both dining tables, dining chairs and comfy armchairs. The layout of tables and chairs encourages interaction between residents and staff. In addition to the TV and stereo, the local library provides videos for the home and residents can choose films to watch.

All residents we spoke to told us that they spend most of their time in the lounge and dining areas.

The guest room (on the ground floor) is a designated space for relatives to speak to care staff and management in privacy. During our visit, this room was cluttered, used as storage for new furniture, making it unusable for confidential conversations.



3.2 Personal spaces

Resident rooms are spacious and personalised with photos of family members and mementos. On the door of each room is a memory display, containing information about the occupier, including how the resident likes to spend their time, food and drink preferences, and their previous occupations.

Residents can have a TV in their room, if this is organised by their family. Smaller items, such as radios, are provided by the home on request. Residents told us they are happy with their rooms, and none reported wanting any changes to be made to their room.

3.3 Activities



There is a large and spacious activity room on the ground floor, containing sofas, a dining table, keyboard, TV, videos, and tea and coffee facilities.

The home provides a weekly (paid for) hairdressing facility. In addition, care staff often give (free) minor beauty treatments. During our visit, we observed a resident having their nails painted by care staff in the lounge area.

Riverlee employs two part-time activity coordinators who work throughout the week - Monday to Saturday, and occasionally on Sundays if there is a special event.

A weekly activity timetable is displayed in the reception and communal area of each floor. When designing activities, staff consider the life history of each resident and any preferences, skills or interests they may have. Residents are actively involved in delivering activities. One resident told us they organise raffles and help in reception.

Not all residents engage in activities organised in the home, but many enjoy spending their day sewing, knitting, and playing card games with other residents or staff.

“I love it. I was in hospital and they brought me here, and I’ve been here nearly 16 years, and I’ve done so much since being here, like doing the raffles”

The home provides residents with the opportunity to practice their faith. Morning church services are offered, and there is a small worship area on the ground floor of the home. This area is not closed off and is adjacent to a corridor, limiting tranquillity. Plans are underway for a dedicated space for multi-faith worship.

3.4 Food and mealtimes

Food is prepared by the in-house chef, and the menu is changed daily. If preferred, residents can have their food served to them in their room. Meal choices are not fixed and (if notified by 10am) the kitchen will try and make an alternative. The kitchen provides meals to meet the needs of residents from a variety of ethnicities. However, views on food were mixed, with some residents enjoying the food and others not as happy with the food on offer.

“Yes the food is good”

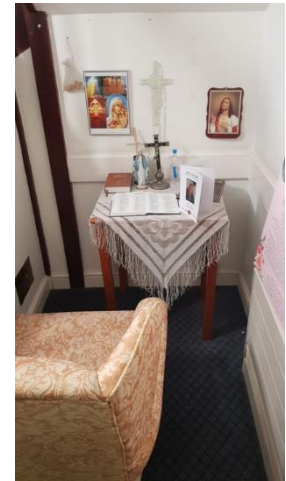
“The food is okay, no favourite (meal)”

The home operates protected mealtimes when all other activity ceases to allow residents to enjoy their meals without distraction. Relatives can eat with residents - especially if this encourages residents to eat - as long as they do not disturb others. Feedback on the food offered is collected at regular relative and resident meetings.

3.5 Staff and resident relationships

Riverlee has a keyworker system. Staff have specific responsibility for 3-4 residents, in addition to supporting a larger group of residents less intensely. Key workers have oversight of daily duties carried out by other members of staff, such as checking residents' rooms are adequately cleaned.

Care plans are regularly reviewed and “Resident of the day” is used to ask residents and their families if there is anything they would like to add or discuss about the care plan.





The home uses an app called Kradle¹ to document care plans. Notices reassure residents and visitors that staff using mobile phones are doing so legitimately. Staff like using the app (rather than paper and pen) as it allows care plans to be updated quickly and in a timely manner, reducing administrative burden increasing time available to spend with residents.

During our visit, we observed interactions between staff and residents sitting together in the dining and lounge areas. Staff are very friendly and attentive to residents. Residents told us that they are happy with the staff and feel cared for.

“They help you”

“A lot of the staff have been here since I have”

“Good company. You meet people and get involved in everything. I feel cared for”

“They look after you well”

¹ <https://www.sanctuary-care.co.uk/enriching-lives/kradle-innovative-care-planning-app>

3.6 Relative and resident feedback

The home employs an open-door policy, allowing both residents and relatives to provide feedback as and when. This is in addition to scheduled relative and resident meetings - which staff are encouraged to attend.



Staff speak to visiting relatives and build positive relationships with families. More formally, the home contacts relatives with updates following GP/hospital appointments, or other changes to resident's care.

Riverlee provides a newsletter every two months for relatives keeping them informed and updated about the activities and outings in the home.

3.7 Addressing Healthwatch recommendations from 2018 enter and view

The table below demonstrates what changes the home has made following our previous 2018 Enter and View report:

Recommendation	Action
Ensure all areas are clean and odourless	There is now a robust cleaning system and improved liaison with facility team. The home is also flexible with resident's flooring - residents can have carpet or laminate in their room once a risk assessment has been conducted. This also contributes to the cleanliness of the home.
Introduce a clearer signage towards the home's front entrance	Signage has been changed at the carpark
Address the issues of space in communal areas	There are now 3 sheds outside of the home to put things away, and are currently discussing adding another shed
Increase and improve signage around the home	At the time of the previous visit, signing was inconsistent and not across all floors. Signage is now across all floors with use of contrasted colours.

4. Recommendations

Recommendation 1: Continue to address the issue of removing clutter in communal areas

Whilst we acknowledge the ongoing plans to add another shed to eliminate clutter in communal spaces, we strongly suggest the home reviews how to best utilise the space it has in preparation for big deliveries, so that this does not hinder the use of communal spaces, e.g. the guest room.

Recommendation 2: Create adequate provision for residents' spiritual needs

Opportunities for residents to practice their faith (outside of their bedroom) are limited with only a small public area available. We are pleased to note this issue has been noted by the home and is on their list of improvements.

5. Service providers response

All providers are given the opportunity to review our Enter and View reports prior to publication, check for factual accuracy and provide a formal response.

Comment from provider:

Bathrooms

The tabulated shower/bath chart is a guide to prompt staff. However, residents are offered choices on a daily basis.

Cecilia Agadzi, Home Manager

6. What is an Enter and View?

Part of the Local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch Authorised 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 2012 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 good practice, from the perspective of people who experience the service first hand.



6.1 Our approach

To collect information, our Authorised Representatives complete an observation form. Where possible, we also speak to residents, service users, patients and staff as appropriate. We emphasise to all service users and patients that participation is voluntary. We always check with staff if there are individuals who we should not approach or who are unable to give informed consent.

6.2 Disclaimer

Please note that our reports relate to findings observed on the specified date of our visit. Our report is not necessarily a representative portrayal of the experiences of all service users and staff, simply an account of what was observed and contributed at the time.

7. Contact us

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If you require this report in an alternative format, please contact us at the address above.

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