



Stockport Local Involvement Network

Davenport Manor Care Home Enter and View Visit Tuesday 30th March 2010

A report compiled by the Stockport Local
Involvement Network

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What is the Stockport LINK?

The Stockport LINK is a network of groups and individuals from across Stockport coming together to ensure that health and social care services are planned and delivered to meet the needs of the people that use them.

The LINK will:

- **Find out what people like and dislike about health and social care in Stockport.**

We are always here to listen at the LINK Support Office, if you know of a wider health and social care issue in Stockport, let us know. The LINK is proactive in producing questionnaires and feedback forms that are circulated around the Stockport area for a wider balanced view.

- **Suggest ideas to help improve these services and consider specific issues of concern to the community.**

Because the LINK is made up of Stockport residents, these issues and the ideas to help tackle them are being formulated by you and people representing you. The LINK wants to hear about your experience of health and/or social care services in Stockport.

- **Visit premises in Stockport where care is provided or those providing care to Stockport residents.**

This is called Enter & View, and is undertaken by trained LINK members. Authorised LINK members can visit care premises to view the quality of care, write a report and feed back to both the organisation providing the care and the wider public.

- **Work with and influence those who make decisions about new services or existing services to help make them better.**

The LINK has the power to make statutory bodies listen; they are under an obligation to respond to LINK requests and reports within a given amount of time, meaning that the LINK can really make a difference.

- **Be flexible, providing many opportunities and different ways in which you can get involved.**

One of the great things about the LINK is that you can be as involved as much or as little as you like. From being a Core Group member, attending meetings, participating in Enter & View, participating in subgroups or you can simply choose to receive the Newsletter or provide us with your feedback. The choice is up to you.

Davenport Manor, Davenport

Tuesday 30th March 2010

Report from: Stockport LINK Enter & View Team

Visiting Members: Mike Lappin, Patricia Fraser and Janet Jackson

Report Date: 20th April 2010

Subject: Enter and View Visit

Appendix i: Star ratings used by the Care Quality Commission

Introduction

Davenport Manor is one of two residential care homes owned by the Davenport Manor Nursing Group. The registered provider is Davenport Manor NH Limited; Directors are Mr Kiran Patel and Mr Dilip Patel. Mrs Wendy Drabble is the registered manager.

The Care Quality Commission (previously known as the Commission for Social Care Inspection) carried out an inspection to the home on 4th February 2009. The Commission gave the home 2 stars. For Star rating please see appendix 1. For a copy of the Inspection Report please visit:

<http://www.cqc.org.uk/registered-services-directory/RSSearchDetail.asp?ID=0000008551&Type=CRH> or call the LINK Support Team to forward a copy by post.

Number of Residents: 34 places

Number of Places with dementia care: 34 places

Purpose of the visit

The Stockport LINK decided it would be a good chance to check on any progress since the visit made by the Care Quality Commission. The LINK would like to acquaint themselves with the manager and staff of the establishment and view the quality of care received within the home.

Building and accommodation

The building is converted from two houses. The team were greeted straight away and were asked to sign a visitor's book. There was ample parking for visitors and staff. The decoration of the home was nice, although the team did not see any

bedrooms, 17 have en-suite. The house is free from dust and clean. There is good access for wheelchairs and no clutter.

There is no specified space for meeting in private but residents are free to use their own rooms. All the common room's have TVs. The team liked that the residents had a choice of rooms to spend their time in.

The team were given copies of the home's policies, which were appeared comprehensive.

The member of staff that escorted the team around had her own antibacterial hand gel and no bad odours could be detected.

Resident Engagement

There are currently 32 residents and there is an open door policy for communication with the manager. Patients and staff spoken to during the visit had a positive attitude. A list of daily activities was on display and the staff carries out meetings with the residents to find out what activities they would like. There is a hair dressing room in the home. All religions are catered for and there is an activity programme on display in the home.

The home seems a happy and well run environment but the team did feel that there was no viable space available in the home for stimulating activities. One resident spoken to said that there were not enough activities and that sometimes the person who carries out the activities does not always come in.

Staff

The home offers dementia and intermediate care. It also offered respite when there is space available. There were two students working at the home at the time the team visited. There is a training book available and all staff have NVQ qualifications or are training towards them. 3 staff are male and 21 staff are female. There are 3 part time staff. All staff appeared very cheerful.

Nutrition and dining

The home had recently been given a "Scores on the Doors" environmental award from the Food Standards Agency and during the evening, residents are given a choice of 3 meals. The team were given the opportunity to view a four week menu.

Residents are weighed every month and nurses use a MUST (Malnutrition Universal Screening Tool) to measure the residents' fluid intake by a district nurse if required. The kitchen was clean.

General Support

All members of staff are trained in palliative care and continence care. The home is aware of the Dignity in Care Campaign but is not participating. Drugs are administered during a drug round except where the resident requests to keep their own (and are considered capable). The home provides access to GPs, podiatry, dentists, district nurses and opticians.

Residents are assessed for intermediate care needs before being admitted to the home.

The home has a complaints procedure available, which is available in the brochure and was given to the team, as well as a whistle blowing policy. A LINK poster along with other services such as Age Concern and Care Aware are on display in the home to give the residents and their families a full idea of the services available in Stockport.

The home staff wanted the team to know that Home Equipment service is excellent. As a result of transfer letters going astray, the ambulance personnel are asked to sign that they have received one when they take the residents to Stepping Hill. Residents are often discharged with medication missing, late at night and sometimes distressed in an undignified manner.

Conclusion

The team were impressed with the home. The general atmosphere was very pleasant. The home felt very stable and relaxed and the garden looked to be of a good size and is used often in the summer. The team could not find any poor features of note.

Recommendations

To The Home

1. In common with many homes visited more stimulating activities would be ideal. On the residents' memory day, memory boxes could be produced by and for residents. *Since the LINK visited the home has introduced a personalised individual memory plan.*

2. The LINK would encourage the home to take part in the Dignity in Care Campaign, and identify a member of staff to become a Dignity in Care Champion. Also to sign up to the local partnership agreement being put together by Stockport Council / PCT. (A draft copy is enclosed) and full details will be sent to all homes in the near future from the PCT.
3. The home considers extending an invitation to the LINK to their summer fairs.
4. The LINK and the home to keep in contact with any health & social care issues that may arise.

To The LINK

1. Also similar to other homes visited, this home has problems with the hospital discharges. This will be passed onto the LINK's Hospital Discharge Group.
2. The LINK and the home to keep in contact with any health & social care issues that may arise.

The views in this report are of the collective team of Enter & View Representatives who visited Davenport Manor and only apply to the day on which the visit was made.

Stockport LINK 20th August 2010

Appendix 1 – Star Ratings Used by the Care Quality Commission

The Care Quality Commission is the independent regulator of health and social care in England. their aim is to make sure better care is provided for everyone, whether that's in hospital, in care homes, in people's own homes, or elsewhere.

They regulate health and adult social care services, whether provided by the NHS, local authorities, private companies or voluntary organisations. And, they protect the rights of people detained under the Mental Health Act.

Following a key inspection of a service the Care Quality Commission publish a rating that describes the quality of care it provides.

The ratings scale is:

- 0 stars - poor
- 1 star - adequate
- 2 stars - good
- 3 stars – excellent

Inspection reports include a description of the outcomes that people using services should expect. They use the outcomes in the national minimum standards (NMS).

- When assessing the quality of care services the outcomes allow them to focus on the experiences of people who use services and what's important to them.
- They make judgments about the quality of services against each of the outcome areas. They then use these judgments to work out the overall quality rating for that service.

For more information about ratings or the national minimum standards please visit the Care Quality Commission website: www.cqc.org.uk

Or contact the Stockport LINK Support Team on 0161 477 8479