



Enter & View

Tamar House Nursing Home

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1 Introduction

1.1 Details of visit

Service provider	Tamar House Nursing Home
Service Address	175 Old Ferry Road, Saltash, PL12 6BN
Date and time	2 nd September 10am–1pm
Authorised representative	Abi Harding-White & Nigel Oakes

1.2 Purpose of visit

The visit was part of a programme of visits to residential care homes across Cornwall. The aim was to observe the home in action, speak with residents and staff, and gain insight into how care is experienced. Healthwatch Cornwall makes recommendations where improvements may help strengthen the quality of care and support residents' wellbeing

1.3 Acknowledgements

Healthwatch Cornwall would like to thank residents and staff for their contribution to this Enter and View visit and the subsequent report.

1.4 Disclaimer

This report relates to findings observed on the specific date above and is not a representative portrayal of the experiences of all residents and staff, only an account of what was observed and contributed at the time of the visit.

1.5 About Healthwatch Cornwall

Healthwatch Cornwall is an independent organisation committed to amplifying the voices of Cornwall's residents in the planning and delivery of health and social care services. Through public engagement, we gather their views and experiences with these services. We ensure these perspectives are represented in decision-making processes both locally and nationally, driven by the belief that community feedback is vital to improving standards of care.

1.6 What is Enter and View?

As a local Healthwatch we are authorised to "Enter and View" health and social care services through the Local Government and Public Involvement in Health Act 2007 and Local Authorities Regulations 2013 (part 4). These services can include hospitals, residential homes, GP practices, dental surgeries, optometrists, and pharmacies.

Enter and View visits are an opportunity to see services in action, listen to and understand the experiences of individuals who use them, and make recommendations where there are areas

for improvement. The visits are organised based on feedback received about individual services or in response to themes identified in our research.

2 Visit Summary

Conversations with staff

Healthwatch Cornwall spoke with staff and met with the service manager to discuss the service and view the facilities.

Conversations with residents

Four residents were asked about their experience of living in the home. These were a representative mix of both residential care and nursing residents

Observation of facilities

Observations were made throughout the visit, focussing on the condition of the facilities, administrative procedures and resident experience.

3 Initial Impressions

The home is situated in the heart of Saltash next to a busy main road on a private plot with driveway parking and an elevated position with pleasant views of the river Tamar and beyond. It is within walking distance of the town centre, which has a wide variety of retail outlets, catering establishments and pleasant riverside walks/parkland. There is ample off-road parking without restrictions on the road adjoining the property.

Access to the building is via a well signposted security door with 2 separate call buttons and a security keypad for staff use. There are clear instructions on how to call for assistance on arrival and posted on the door is a large notice which very clearly details the fire alarm testing procedure/times.

There is a visitor entry log immediately inside the door, but we were not asked to sign this as we were met by the home manager, who escorted us in having checked our identity. Upon entry, the home was a comfortable temperature, smelt pleasant and staff appeared to be working well as a friendly team. Décor was adequate and in good order, if somewhat dated.

There were clocks in many of the rooms and corridors all of which had large and clear numerals/hands and all of which were showing the correct time.

4 Resident Feedback

Resident feedback was overwhelmingly positive, with a common theme of the friendliness of the staff and the overall homely atmosphere.

One resident described staff as friendly and attentive, though they felt less comfortable when agency staff were on duty, as they did not know them as well. They would welcome more variety in activities and meals and noted that the Wi-Fi connection was not always reliable in their room.

Another resident commented that the home was '**Brilliant, and the staff are all so nice**', they added '**The food is so nice, it always smells so good**'. They thought that there were however not a lot of activities, and they sometimes felt a bit bored and asked for something to do, which the staff were always happy to help with. They reported that they didn't use the communal lounge area as nobody else did. They said that the open visiting policy was '**Lovely, as I get to go out a lot with my friend, and am free to go anytime**'. This resident had a visitor with her who agreed that the staff were all very caring and considerate.

A third resident said that their experience of living in the home was '**Not bad, the food is nice, and the staff do a good job**'.

5 Manager feedback

The manager is an experienced Registered nurse, with significant NHS experience in a variety of front-line clinical service roles. She has been in post for two years and secured the position after a rigorous interview process. She appeared extremely competent, knowledgeable and efficient, with an obvious caring approach to her role. She described the family that run the business in terms of great affection and said, ***'They have nurtured me, and given me great support'*** In terms of the residents she said ***'We would rather have an empty bed than an unsuitable patient'***

She said of her staff that they were ***'A really lovely team, most have been here for 10 or more years and some over 20'***. She was very honest about the challenges that had been experienced under previous management, during which time there had been a challenge with both staff morale and retention, but noted that several staff had subsequently returned to work here when she took over as manager. She described her management style as 'Honest and approachable' with an open-door policy and felt that staff could speak up about anything with confidence that they would be listened to. She confirmed that several changes had been made after the last Care Quality Commission visit in 2022. These changes were to make improvements to medical management, training, paperwork and staff morale. She reported that the changes had led to a more open and honest learning culture amongst the team.

She said that as a registered nurse, the home management deferred to her clinical judgement on all matters relating to suitability of clients for admission, this was seen as an extremely positive, healthy and caring attitude, which inspired confidence in the home organisation and setup.

The home uses a single agency for locum carers when needed, they have been using them for a long time, and they have built up a good working relationship. Agency staff all go through an induction process when first coming to work in the home and where possible, the agency will provide staff who have previously worked at the home and are familiar with their way of working.

Feedback is collected from staff and residents on weekly basis from a comments box and by using resident and family feedback forms. Each resident is assigned a member of staff as a key worker, and they take a special interest in that residents' care. There is also a 'resident of the day' each day, and on these days, particular attention is paid to their needs, highlighting any additional support that might enhance their experience of living here.

The manager reported that they had an activities coordinator that works in the home 5 afternoons a week, who engaged the residents in such activities as arts & crafts, singalongs and games. They also have an activities therapist (tranquil moments) who comes in every 4th Wednesday to do different activities with residents. They had a good relationship with the local

GP surgeries, who visited the home to see residents who were registered with them as patients on a weekly basis or on an emergency basis if required. They also had a local hairdresser who came in once a week. She also reported that the menus were in the process of being changed to a more seasonal selection with a greater choice.

6 Staff feedback

One health care assistant, who had been with the home for five years, described it as a pleasant environment and explained that while paperwork sometimes took time away from direct care, the team always aimed to provide a high standard of support.

A second health care assistant who has worked in the home for a total of 13 years commented that the home was a pleasant place to work and that the team worked well together. They felt that they provided a good level of care, and that the home had a good family feel to it.

A Registered Nurse who has worked in the home for 18 months described their experience of working here as very positive and felt that the team were all committed to delivering high quality care.

7 Observations

Tamar house is dual registered as both a residential and care home. It is a family run business which has been owned and operated by the same family for over 40 years.

Tamar house has capacity for individual 17 residents but does have some rooms suitable for double occupancy (typically by a married couple with similar care needs), which would increase the capacity to 21 clients. It provides both residential and nursing care. On the day of the visit there were 16 residents.

There appeared to be an adequate number of staff on duty, who were friendly and working well together in a variety of roles such as direct care, cleaning and laundry. The environment at Tamar house was warm and personalised, Infection control measures were clearly in place, with well-stocked supplies of personal protective equipment such as gloves and disposable gowns and up-to-date guidance clearly displayed. Equipment such as hoists and mobility aids had been safety tested and were clearly labelled. All the beds seen had air flow mattresses which can contribute to the avoidance of pressure sores. It was noted that there are no reported pressure sores at present. Many of the carpets were quite old but management have a programme of continual improvement, and the carpets are due for replacement soon. The food seen coming out of the kitchen was appetising, well presented and of sensible portion size.

The staff room was bright and spacious, with a good selection of chairs and worksurfaces. This room doubled as an administration work area, with files stored in a separate cupboard in a well-ordered manner. There were large number of informational posters on the walls, all of which were relevant and appeared to be in date. As an example, the most recent guidance on urine testing was prominently displayed, as were numerous articles on health & safety. There was a calendar detailing religious holidays for a variety of faiths, along with notes on cultural significance. All locally produced paperwork was under document control and all the documents on display had been revised within the past year.

During the visit a resident pushed their emergency call button and several staff responded to this in a quick, calm and efficient manner.

Staff and residents all appeared to be happy and content. Interactions between staff and residents were kind and conducted with dignity and respect.

8 Recommendations

Healthwatch Cornwall have offered some recommendations based on observations and feedback from both residents and staff to improve experiences in the home

1. **Expand the range of activities:** Increase the variety and frequency of activities, ensuring they are tailored to individual interests and abilities. Encouraging greater use of communal areas may reduce isolation
2. **Improve Wi-Fi connectivity:** Ensure reliable Wi-Fi throughout the home to help residents stay connected and engaged. Installing extenders may be a solution
3. **Increase menu variety:** Consult residents on meal preferences and provide seasonal options and alternatives to increase choice and satisfaction

9 Provider Response

Response to recommendations:

1) Activities: We have an activities coordinator that works with our residents 5 afternoons a week, she spends 1:1 time with residents every day and always aims to tailor these activities to that particular resident. We always aim to get resident feedback on what changes we can make or the residents would like to see more of that suits them. This is something we will endeavour to always improve on what we can do for activities to enrich our residents lives. We always try to encourage residents into the communal lounge whenever possible, however at present many do not wish to. However, we can normally encourage residents for group activities such as our Xmas party.

2) Wi-Fi: We are a very old building with very thick walls making Wi-Fi connection tricky, particularly since we have more residents wanting to use the internet more in their rooms. We have invested in extenders and sometimes still have issues. However improved Wi-Fi is on our maintenance plan, and we are looking at change it in the next 6 months to get ready for digital care planning. This should see an improvement in our residents Wi-Fi connections.

3) Menus: We are currently in the process of revamping our menus and intend to move towards a more seasonal menu planning going forward. We always aim to get feedback from our residents on meals they would like to see or not too keen on. This will remain something that we continually try to improve on and change wherever necessary for our residents enjoyment of their meals.

Thank you again for your visit and complimentary report.

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