healthwatch Cheshire West

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# Enter and View Report
# Gleavewood Care Home

Care Home Contact Details:
Gleavewood Residential Care Home
Farm Road
Weaverham
Cheshire
CW8 3NT
Tel: 01606 853395

Date of Visit: 20th November 2019
Time of Visit: 1.45pm
Healthwatch Cheshire Authorised Representatives:
Katie Tierney and David Crosthwaite

Staff Present: Manager – Brenda Read

## What is Enter and View?

Healthwatch Cheshire (HWC) is part of a network of over 150 local Healthwatch across England established under the Health and Social Care Act 2012. HWC represents the consumer voice of those using local health and social services and trades as both Healthwatch Cheshire East and Healthwatch Cheshire West.

The statutory requirements of all local Healthwatch include an 'Enter and View' responsibility to visit any publicly funded adult health and social care services. Enter and View visits may be conducted if providers invite this, if HWC receive information of concern about a service and/or equally when consistently positive feedback about services is presented. In this way we can learn about and share examples of the limitations and strengths of services visited from the perspective of people who experience the services first hand.

Visits conducted are followed by the publication of formal reports where findings of good practice and recommendations to improve the service are made.

**Contact Details:** Healthwatch Cheshire, Denton Drive, Northwich, Cheshire, CW9 7LU. Tel: 0300 323 0006

### 1. Description & Nature of Service

**Details of home (Some details taken from Carehomeuk)**

Gleavewood is an attractive, residential home situated in Northwich. It has a qualified and caring staff team who work hard to support the well-being of residents in a warm and friendly environment.

Quality of life is promoted through a wide choice of activities, and mealtimes are treated as a relaxed and social occasion, with residents supported to make choices about what, when and where they eat.

**Group:** Minster Care Group

**Person in charge:** Brenda Read (Home Manager)

**Local Authority / Social Services:** Cheshire West and Chester Council (click for contact details)

**Type of Service:** Care Home only (Residential Care) – Privately Owned , Registered for a maximum of 30 Service Users

**Registered Care Categories*:** Dementia • Old Age • Younger Adults

**Admission Information:** Ages 55+.

**Single Rooms:** 30

**Rooms with ensuite WC:** 2

**Facilities & Services:** Day Care • Respite Care • Convalescent Care • Own GP if required • Own Furniture if required • Pets by arrangement • Close to Local shops • Near Public Transport • Lift • Wheelchair access • Gardens for residents • Residents Kitchenette • Television point in own room • Residents Internet Access

**Latest CQC Report** – February 2018 with the report being published in April 2018. The overall rating was GOOD.

Website information: The service has its own website indicating the services and accommodation available. It is clear and easy to use and also has information regarding complaint process.

## 2. Acknowledgements

Healthwatch Cheshire would like to thank the service provider, care home manager, residents, visitors and staff for their contributions to this Enter and View visit.

## 3. Disclaimer

This report relates to findings gathered on a specific date of visiting the service as set out above. Consequently, the report is not suggested to be a fully representative portrayal of the experiences of all the residents and/or staff and/or family members/friends but does provide an account of what was observed and presented to Healthwatch Cheshire Representatives at the time of the visit.

## 4. Purpose of the Visit

- To enable Healthwatch Cheshire Representatives to see for themselves how the service is being provided in terms of quality of life and quality of care principles
- To capture the views and experiences of residents, family members/friends and staff
- To consider the practical experience of family/friends when visiting the service in terms of access, parking and other visitor facilities
- To identify areas of resident satisfaction, good practice within the service and any areas felt to be in need of improvement
- To enable Healthwatch Cheshire Representatives to observe how the service delivers on the statements it advertises on its website

## 5. Introduction/Orientation to Service

The Care Home is on a main estate within Weaverham. It is central to transport links and some shops. The building on the day of the visit was having refurbishment taking place in the form of two new bedrooms being developed and the relocating of the staff room.

On arrival the ARs accessed via a locked controlled front door and were led to the manager's office. The welcome was friendly; the manager had the Healthwatch Cheshire letter of intent to visit hanging on the main notice board and was happy to show us around. She apologised for the

work being carried out but showed the representatives the two new rooms being developed that open on to the garden. The manager then sat with the representatives who asked if they could view the home, the manager was more than happy to do so.

## 6. Methodology

Representatives were equipped with various tools to aid the gathering of information. The following techniques were used by the Representatives:

- Direct observation of interactions between staff and residents
- Participant observation within therapeutic/social activities where appropriate
- Assessing the suitability of the environment in which the service operates in supporting the needs of the residents
- Observing the delivery and quality of care provided
- Talking to residents, visitors and staff (where appropriate and available) about their thoughts and feelings regarding the service provided
- Observing the quality and adequacy of access, parking and other facilities for visitors.

## 7. Summary of Key Findings

- Friendly and professional staff.
- Refurbishment taking place having no apparent effect on delivery of services to residents.
- Clean despite disruption.
- Residents happy to engage.

## 8. Detailed Findings

### 8.1 Location, external appearance, ease of access, signage, parking

The address is in Weaverham just off the main road leading to Northwich. There is a large sign indicating the presence of the home and some garden to the front. There is a bus route within walking distance. At the address there is a small car park to the side of the address, but also street parking available.

### 8.2 Initial impressions (from a visitor's perspective on entering the home)

The premises are secured by 2 doors ensuring safety, you are required to ring a bell for entry and, even though tradesmen were on site the unit was secure. In fact, whilst it was hard not to notice the work it was also plain to see that the staff, residents and family visiting were not affected/disrupted at all.

The manager also praised the workmen of C2 Construction who always treated the residents with respect by acknowledging them and saying good morning and this really pleased the residents. The company also ensured that dust and building debris was at a minimum, conscious of the requirement for the home to be clean at all times.

**8.3 Facilities for and involvement with family/friends**

The home values feedback, on the Care Home UK site there are a number of very positive reviews contained. The Manager explained they have a complaints process and indeed welcome any feedback as to how they can improve the delivery. They have a suggestion box available for residents and family as well as staff. Relatives can attend the bi-monthly residents' meetings iF they wish to and are encouraged to do so. Visiting times are flexible and relatives and friends can visit at any time. Relatives are supported to stay if a resident is sick, and although there is not a dedicated relatives' room, they would be offered a comfy chair or a spare room if available and they needed to stay overnight.

**8.4 Internal physical environment**

**8.4.1 Décor, Lighting, heating, furnishing & floor coverings**

It was a cold day and all residents were inside the premises. The heating was on and was pleasant. Some of the furnishings are showing their age but speaking with residents they stated that the seating was comfortable and pleasant for them. The carpets in some areas are showing their age but the building is neat and tidy and clean. The lighting is enhanced by artificial light but all rooms have natural light coming through a mix of new and old UPVC windows. A number of the windows to the front of the premises are showing their age. The décor is traditional beige, but the residents can have a different colour scheme to theIR own bedrooms.

**8.4.2 Freshness, cleanliness/hygiene & cross infection measures**

The home felt fresh and there were no lingering odours. Although some of the décor seemed a little tired the home was notably clean and well looked after.

**8.4.3 Suitability of design to meet needs of residents**

Residents' rooms are split across two floors with a lift and a staircase connecting the two. There are communal living spaces on each floor. On the ground floor the living and dining rooms are arranged separately and on the first floor they are combined.

Residents are able to decorate their rooms in whichever way they please (Curtains, décor, own bedding etc). Rooms are all different shapes and sizes and

the majority are not en-suite, but each has its own sink. There are shared, fully accessible bathrooms with hoists on each floor.

Residents rooms are lockable if the resident requires it.
Currently the downstairs rooms have memory boxes outside of them (this will be carried through to the upstairs rooms), and each door is designed to look like your front door at home with a door knob and number.
Instead of a medication trolley each resident has a locked medicines cabinet within their room.

**8.5 Staff support skills & interaction**

**8.5.1 Staff appearance/presentation**

Smart, uniformed staff all appeared happy to be working there and some have been there for a number of years. Interaction was observed between staff and residents on first name terms adding to a sense of a 'home from home' feeling.

**8.5.2 Affording dignity and respect/Approach to care giving**

Staff spoke to the residents by their first names and in a manner that was polite and respectful. No 'over talking' but asking and listening to ensure they got it right. One of the residents said the "Staff are fantastic, they really care".

**8.5.3 Effective communications – alternative systems and accessible information**

There are hearing loops and other aids to assist the residents in the home and the Manager stated that if a new resident was to arrive and had certain level of needs then these would be met.

The management and staff communicate to the residents in a number of ways especially when it comes to advertising the activities/food and other information with a number of notice boards throughout both floors.

**8.6 Physical Welfare**

**8.6.1 Appearance, dress & hygiene**

All residents appeared clean and dressed. The Activities Coordinator was assisting to trim nails and a hairdresser attends weekly.

**8.6.2 Nutrition/ mealtimes and hydration**

There are two dining areas, one upstairs off the main corridor and the same downstairs. The rooms are clean and tidy and the food rating is 5. Speaking with the residents they all said they enjoyed the food, indeed some residents who had different food requirements were able to go out with the Activity Coordinator to get particular foods that the chef was happy to cook. All food tastes, diets and cultural demands are met.

Any food allergies are documented in individual care plans. Although no residents are currently on a modified diet this will be supported if necessary.

On the 4pm-9pm shift there are members of staff who are responsible primarily for the supper trolley. The supper trolley is brought round and offers the residents hot drinks (hot chocolate/Horlicks etc) as well as crumpets and cakes. Residents are able to eat in their own rooms if preferred.

Occasionally a menu satisfaction survey is carried out with the residents who can also have a say in the menu planning at the Residents' meeting which is held every two months.

**8.6.3 Support with general & specialist health needs/Maximising mobility & sensory capacities**

25 out of the 30 current residents are registered at Weaverham Surgery. The home has a named GP who visits the home weekly on a Tuesday. Residents are reassured by the familiarity and regularity. It is also helpful for the staff to see a GP face to face which can hasten changes in medications and speed up referrals if required. The Care Team Leader is always available to do medications, though a senior carer can also carry this out in her absence. Uniquely each room has its own locked medical cabinet complete with individual medicines record. The Home Manager feels this is more efficient than using a trolley and avoids any confusion.

- Sensor mats are installed for anybody at high risk of falls.

- A podiatrist visits the home every six weeks.
- A local Optician called 'In House Opticians' is used for residents.
- Residents tend to use the dentist they were already registered with before entering the home.

**8.3 Social, emotional and cultural welfare**

**8.7. 1 Personalisation & personal possessions**

Residents are able to have personal possessions within their room, and were observed to have televisions, radios, potted plants and pictures and choices of duvet covers. The manager informed the ARs that residents can have their rooms decorated in a number of styles. The Home Manager manages the Residents' money for them and this is kept in a safe in the manager's office. Money is logged in and out as required.

**8.7.2 Choice, control & identity**

Choice is evidenced by the personal possessions and colour schemes within bedrooms, as well as being able to receive correct dietary intake.

Although the Home operates a policy of checking on residents every two hours at night, residents are able to opt out of this if they feel that it is unsettling for them.

**8.7.3 Feeling safe and able to raise concerns/complaints**

- There are call bells in all communal areas and also in each resident's bedroom. Carers also carry pagers so there are not permanent loud alarms going off when they are activated, but does mean that carers can immediately respond to residents' needs.
- Speaking with residents one said, "If I have an issue I know by speaking with the staff it will be sorted", this highlighted the relationship that exists within the home. Management said they welcome feedback both positive or negative. There is also a complaints process on line on the company website.

**8.7.4 Structured and unstructured activities/stimulation**

An Activities Co-Ordinator works 20-25 hours a week, and produces a weekly timetable. This includes activities such as bingo, chair exercise and arts and crafts. She also schedules in weekly 1:1 time – which is particularly used for residents who do not join in the group activities (there are 5 men in the home who do not actively participate). On the day of the visit she was present assisting in personal care with some residents, including trimming nails. Additionally, although not a dementia specialist care home the coordinator would adapt activities if required.

Local students from a nearby school come in and volunteer to assist with the chair-based exercises classes. The Grange School also invite residents to their shows/plays and send a mini bus to pick them up. The local community centre has also invited the residents along to a Christmas meal.

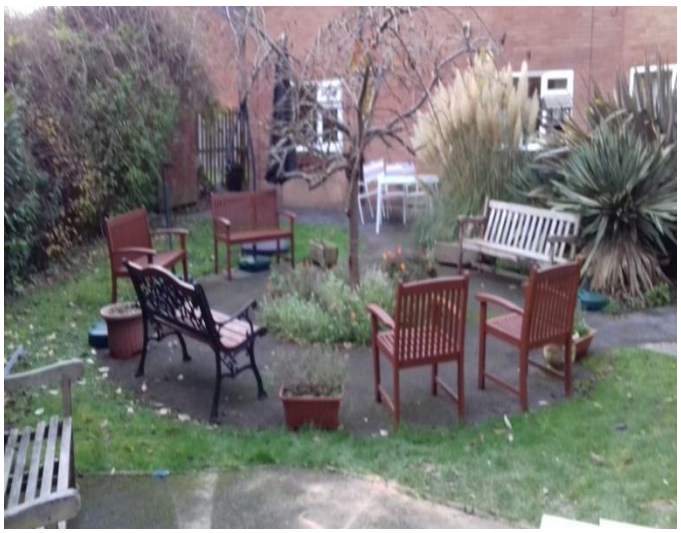
There is a garden available with seating and in the summer this is used a lot, however on the day of the visit it was cold and therefore not utilised.

**8.7.5 Cultural, religious/spiritual needs**

The Care Home is lucky to be situated between two churches and so feels well supported. The Catholic Church offers to come in and carry out communion, and for those who would like to attend a service a member of staff would accompany them. Additionally, staff will accompany residents if they would like to go on an outing on a 1:1 or 1:2 basis.

**8.7.6 Gardens - maintenance & design/suitability for use/enjoyment**

There was a notice on the main board stating that the garden area was being tidied up but also with a request that the residents be involved with activities such as planting new plants and taking part in the preparation of the garden.



Residents spoken to by the ARs said they enjoyed the garden area and there was plenty of seating for them. It was a peaceful area.

**9 Observations**

**9.1 Elements of observed/reported good practice**

- Good links with the local community, including links to schools, community centres and churches.
- Individual locked medical cabinets in each room with medical records. Home Manager feels this has been effective in avoiding any issues with medicine distribution.
- Positive feedback from residents who feel well cared for and listened to.

| 9.2 Other observations / findings of note applicable |
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| • There was work underway on the day of our visit. Two new ground floor rooms are being created It will be useful to view these rooms on completion.<br>• Memory boxes are due to be rolled out to all residents' rooms. |
| **10 Comparisons** |
| **10.1 Comparisons of observations against providers website** |
| The website reflects the findings of the visit. |
| **10.2 Comparisons with previous Healthwatch visit (s) where applicable** |
| The last visit was carried out in 2015. The positive aspects of the home were reflected in this visit. Some work on the breadth of the activities offered was identified in 2015. |
| **11 Recommendations** |
| • To ensure that the good work of the activity coordinator is inclusive of any male residents at the home and alternative activities are explored. The ARs mentioned the Care Home Activity Coordinator's Facebook page which is available for an exchange of ideas.<br>• To explore Relatives only meetings rather than inviting relatives to attend a resident's meeting. |

| Feedback from Provider of Service |
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| *No feedback was received.* |