

healthwatch Cumbria

Wyndham Manor, Cleator Moor

17th January 2014





Enter & View Report

Healthwatch is the independent consumer champion for health and social care customers and patients in the England.

Healthwatch Cumbria has the statutory right (Health & Social Care Act 2012) to carry out Enter & View visits to health and social care services to gather the views and experiences of customers, patients, families and staff for the purpose of service improvement. Service providers have a duty to respond to our reports and recommendations.

Healthwatch Cumbria will share its findings with Healthwatch England, the Care Quality Commission, Services and the public.

Service:	Wyndham Manor
Service Manager:	Ms A Hughes
Date of Visit:	17 th January 2014
Unannounced/announced:	Unannounced visit
Visit Team:	Valerie May, Janet Thompson, Gill Jones
Date of last CQC Inspection:	10 October 2013

For more information on Healthwatch Cumbria please visit:

www.healthwatchcumbria.co.uk

Healthwatch Cumbria, Best Life Building, 8 Oxford Street, Workington CA14 2AH

01900 607208

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Introduction

Healthwatch Cumbria has a planned programme of Enter & View visits for 2014/2015, covering a variety of health and social care services operating in the county.

Healthwatch Cumbria is constantly receiving intelligence about a wide variety of health and social care services and the intelligence is used to help to decide where to carry out Enter & View visits. This information includes both concerns and compliments about services. All care home services provided in Cumbria have received a letter from Healthwatch Cumbria through Cumbria County Council explaining the purpose of Healthwatch Cumbria Enter and View visits and advising that a programme was being developed. These letters were sent out prior to the first Enter and View visit taking place.

The current sample of care homes was confirmed at the end of November 2013.

Following this, Healthwatch Cumbria embarked on a further information gathering process in preparation for these visits speaking with stakeholders including CQC, Cumbria County Council and Cumbria Safeguarding Board.

The Enter & View visits took place between December 2013 and February 2014 and were carried out by an Enter and View Lead (EV L) and a number of Enter and View authorised representatives (EV ARs).

During our visit we talked and listened to the views and experiences of residents, families, friends and staff, and made observations against the following criteria:

- Environment – Fabric, Facilities & Safety
- Service Provision and Management
- Nutrition (meals & diet)
- Exercise, Activities & Mobility
- Personal Support & Choice

Methodology

During all Enter & View visits we use a variety of methods to gain an understanding of the service including:

- **Oral questioning (using open questioning techniques)**
- **Informal discussions (using non-leading prompts)**
- **Observations**

We talk to managers, staff, residents and visitors and request information including a menu, staff rota, activities plan, complaints file and staff training log. The E V L asks if there are any residents with DOLS or if there are any sensitivities around particular customer needs on the day of the visit which we need to be aware of i.e. risks, infections, and serious illness.

The E V ARs observe residents and staff going about their daily tasks. We make observations about the general environment, condition and presentation of the home, support received by residents and interactions between staff and residents.

Residents, visitors and staff views and comments are formally recorded anonymously to protect identities. Letters explaining Healthwatch Cumbria and the purpose of the E and V visit are left for families. The letters also include Healthwatch contact details should families wish to raise any concerns or forward compliments about the service.

This report relates to a specific visit carried out during a point in time and therefore is not representative of all service users but acts as a 'snap shot' of daily life within the service.

Wyndham Manor Residential home

Wyndham Manor Residential Home is a privately run care home for 68 elderly residents in Cleator Moor. There are currently 16 male and 42 female residents.

It is one of the homes owned and operated by Manor Care Homes Group and has an EMI unit on the top floor.

Manager: Ms Anne Hughes (RGN)

On 17th January 2014 the Healthwatch Enter and View team arrived at the home unannounced, introduced themselves and explained the purpose of the visit to a senior member of staff. The team was asked to sign in by the administrator.

A senior staff member (deputy manager) joined the Enter & View team in the formal lounge on the ground floor which is usually used for meetings and family visits.

Environment – Fabric & Facilities

Wyndham Manor is a purpose built care home, it is privately owned and is one of several similar homes in the North East. It is a home for elderly residents, which incorporates an EMI unit. Most of the residents come from the local area.

The home sits off the main road at the back of the main street in Cleator Moor. It is purpose built to a high specification. The car park is to the front of the premises with gardens to the rear and side.

Inside the entrance door, which has a key pad and finger print lock, is the reception area with reception desk. A member of staff was working on the reception desk during our visit. The manager's office is opposite the reception area where there is a seating area with table and chairs and a toilet. Access to the main area of the home is via doors in the reception area. There is a lounge and laundry rooms to the left, and the corridor which leads around the building is situated to the right. Every floor has a staff room and there is a high standard of decoration throughout.

There are bedrooms on the ground floor, a staff office, lounge area, dining room and kitchen. There is a similar layout on the first floor with a cinema room furnished with easy chairs and another room that is used for religious services. Corridors have a light and airy feel and we noted the hand rail and simple décor. There are lots of decorative stickers on the walls, however, staff said pictures do tend to get knocked all the time. There are information boards along the ground floor corridor advertising activities and news.

The bed rooms are of a good size and residents can bring their own furniture if they wish. There is good access to the garden which has fruit trees and seating areas and offers gardening activities for those who were interested.

The team spoke to a new resident and his family. They talked about the lovely atmosphere, the light airy feel and the pleasant smell. One resident had his own phone and all residents could bring own TV and radio into the home.

The EMI Unit

The EMI unit is on the 2nd floor, and is slightly smaller than the floors below but follows the same design format. There are easy read and picture guides for meals on the wall outside the dining room. Chairs are grouped together and also placed individually in the lounge offering a greater degree of seating choice.

There is a wall fixture that had a range of handbags hanging from it. This was so that residents who wished to choose a new bag to carry their belongings in could do so and we were told that many of the female residents liked this.

Environment Observations

Positive Observations
The presence of a finger print entry system for visitors and staff demonstrates a good use of modern technology.
Several residents and visitors remarked on the pleasant smell of the home.
A homely atmosphere has been achieved in part by allowing residents to bring their own furniture and furnishings.
Good use of easy read and picture guides.

Improvement Observations/Considerations
Many residents commented on the easy access to outside grounds and the pleasant seating areas.
Consider how to ensure that this environment is as available to residents in the EMI unit (2 nd floor) as it is to others (within reason)

Comments from residents and family
<i>'Quiet but nice'.</i>
<i>'Nice rooms – I feel out of it sometimes, feel good about mornings'.</i>
<i>'Our family like the bigger rooms'.</i>
<i>'I will get to know people here'.</i>
On being allowed to bring her own furniture, one resident commented <i>'it made it feel a little more like home'.</i>

Service Provision and Management

The EV L focused on the management of the home and spoke with the deputy manager and staff to gain an insight into operations. She was told that the owner of the home visits monthly to check on operations and care.

The EV L also viewed the EMI Unit.

EV AR 1 spoke to residents in the main public areas of the home spending time in the hallway and ground floor reception rooms, as well as the dining room.

EV AR 2 spent time on the first floor.

The home has a 68 bed capacity but was not full at the time of the visit. We were told that the home welcomes respite/short stay residents and has three community beds for 'step up' use, which are allocated by a local matron. Referrals to the home are usually made by social workers and word of mouth, most residents are self-funding.

Staff

- 4 staff each shift, 5 on EMI unit. 3x shifts 1st, back , waking nights
- 5 x cleaners
- 13 kitchen staff – carers do supper trolley
- Handyman

Staff Organisation

Team meetings start at 2pm when residents are often napping. Individual appraisals are in place with supervision every 3-6 months, unless a problem requires immediate attention. There is also a mentor system for extra support.

Staff members reported that pay was not as high as in council run facilities, however they felt that the pleasure of working here outweighed this.

One resident commented on the good leadership in the home - he noted that if the leader is good then the team/staff will follow. He also liked the fact that the staff were local with local knowledge, they know the area – 'more like family'.

Residents and family complaints were routinely recorded and we were told that the manager deals with each complaint and the outcome, with families always being informed of resulting action. If the complaint relates to a

member of staff it is dealt with using mentoring support during supervision. This approach has proved to be effective in practice.

There was an incident book, for building related issues and anything that happens outside of the home. We were told that the home had suffered vandalism, and that staff have attempted to speak to the culprits. The vandalism seems to have reduced recently.

Staff rooms, incorporating both break time and administration facilities were available on all three floors.

Staff Training

Staff have had level 3 medications training and medication is dispensed from medication room and also from a dispensing trolley. Other training offered to staff includes NVQ level 2 through JHP Training. The home is currently using Redcrier for in house training and a training schedule is displayed on office wall.

All domestic staff attend mandatory training.

Services

The home is a secure residential facility. Main unit residents were free to go out when they wish (via finger print scanner) at the time of this visit a member of staff was present in the reception area and so could monitor incoming and outgoing residents.

Respite care is also offered by the home.

The EMI unit is a fully secure unit, with secure key pad entrance.

There are currently no residents with a DOLs. Residents with mental health problems can be referred to Cumbria Partnership NHS Foundation Trust team, with which the home has a good working relationship.

Residents and family meetings are offered though only a few attend. The only request through this system to date has been to improve/alter the front door entrance system.

Staff were very welcoming, all seemed happy, laughing, joking, and happy to talk to us.

When residents were asked about the staff there was no hesitation in their praise.

Service Provision and Management Observations

Positive Observations

A staff member told us they enjoyed Wyndham Manor, *'great atmosphere and staff support'*.

Staff told us that the rest of their colleagues were really nice and very supportive of one another.

Regular appraisals, supervision, and mentoring is in place and has proven to be an effective approach to building and maintaining good practice.

Improvement Observations/Considerations

Resident/family meetings is a good tool to aid relationships and feedback, but they do not seem to be well attended or raising many issues needing attention.

Consider how to engage more residents/families in the meetings or other mechanisms to raise feedback.

Staff seem happy and supported in their work and commented upon the importance of building good relationships and knowledge with and about residents.

Consider increased continuity of staffing on each floor to maximise the value of good staff/resident relationships.

Comments from staff, residents and families

'Pay isn't as good as other places but there is enough good here'.

'It's difficult when I am not working on my usual floor – because you know the residents there better'.

'It's great, very good. I do general help, I am guided and supported throughout, re; shifts, I am asked if I want more hours , what's not so good is that I get moved about'.

'The place has a good a reputation'.

'I really like working here, I feel like I'm doing something good, I'm fine with how they work. I can't think of anything I want to change'.

A resident said *'The doors are open – you can call them (staff) when they're going by, they're very good'*.

'Staff speak nicely – and you can have a joke'.

A resident said *'They do things for you'*.

'They help you'.

'Don't think I would change anything'.

'I love it here 150%, I like everything - been here 7 weeks, going home soon,

<i>If I had my way I would stay here, very caring people, top stuff'.</i>
<i>'Good medical access, I feel things are good, Can't think of anything that needs changed'.</i>
<i>'Couldn't get carers to come to my home, didn't want to come here but its good, and feels homely'.</i>
<i>'I would like to go home although it is nice, don't know how long I've been here'.</i>
<i>One resident said there was good banter with the staff, you could have a laugh with them but also pointed out that 'they weren't cheeky, if you show them respect, they will respect you'.</i>

Nutrition (Meals and Diet)

Meals, tea and coffee breaks are provided at set times but residents can ask for more whenever they wish.

One resident told us they thought it was a good job they had places like this to go, *'otherwise I would have been sitting at home on my own waiting for carer's to come'*. The resident told us that the food was lovely and there was plenty of it and that he had put weight on. If there was anything he fancied the staff would try to get it for him. The staff would also go to the shop for him if he needed anything. He described the home as *'a very nice hotel'*.

In the EMI Unit meals were described pictorially on the notice boards in the dining area.

Nutrition (Meals and Diet) Observations

Positive Observations
There is a flexible approach to the provision of food and drinks which is clearly appreciated by residents.
Many residents told us that they enjoyed the meals.
Good use of pictorial guides in the EMI Unit.

Improvement Observations/Considerations
None.

Comments from residents and families
<i>'There are set times for tea/coffee breaks but we can ask for one at any time. If we fancy anything in particular to eat we can ask and the staff will try to get it for us - families can also bring in food and drink for residents and alcohol is allowed'</i> .
<i>'Standard of food is very good – just ask when you want something'</i> .
<i>'Food is good in general – wouldn't mind sirloin steak sometimes'</i> .
<i>'Very good meals'</i> .
<i>'Nice meals'</i> .
<i>'I go to the dining room – they come for me and take me down'</i> .

Exercise Mobility and Activities

There was good evidence of a range of activities taking place with many being advertised with posters and pictures, the time table of activities was also on the wall in the dining room.

In the EMI Unit some activities were run in the evening with the purpose of occupying residents who might otherwise wander.

A local school had visited to lead a carol concert.

One resident thought he was the youngest in the home but was not keen on joining in with the activities, especially the bingo. However he mentioned the budgie on the second floor and that there was talk of getting one for the ground floor which he thought would be a good idea.

Exercise Mobility and Activities Observations

Positive Observations

Local school came to lead a carol concert, showing good links to the local community.

The budgie on the second floor was mentioned more than once and is obviously popular with residents.

Improvement Observations/Considerations

Many residents are enjoying the activities on offer.

Consider how to ensure that those not currently taking part are content and do not need some further gentle encouragement.

A good range of activities were on offer during week days.

Consider having some activities on the weekend.

Comments from staff, residents and families

From a staff member - 'activities should be every day not only Monday to Friday'.

'I don't go down to activities – I could if I wanted'.

'If you want activities you can go but I'm not bothered'.

'I go to have my hair done sometimes'.

'I haven't been to bingo yet but I will if I stop here long enough'.

'I'm allowed to go to activities any time I like'.

'I've really enjoyed the company'.

Personal Support and Choice

We were told that there is a high level of personal choice with residents being able to get up and go to bed when they wish.

All residents look after their own money if they have capacity to do so. If not, there is a safe with a log book to record money being signed in and out. Receipts were always kept and the staff member spoken to was very aware of financial safeguarding issues.

People's spiritual needs are catered for. In particular, we heard about a resident for whom a taxi is arranged every Sunday so he can meet his family at church and we also heard that the odd job man takes him to his disability club every week.

One resident told us that hospital staff and social services had involved his family with his care plan and his choice of home.

Personal Support and Choice Observations

Positive Observations
There is a very positive approach to treating residents as individuals and to encouraging residents, when they can to make their own decisions, to do so.
One family brings in Marks and Spencer's meals (the resident doesn't eat meat) as she likes the fish and vegetarian meals. The staff freeze them for her but the kitchen also offers her alternatives on the menu.
The dedication of the staff to the residents, exemplified by the odd job man.

Improvement Observations/Considerations
None.

Comments from staff, residents and families
<i>'We care for people as individuals, support for family too, compassion and dignity are the important things'.</i>
<i>'They have set times for things but are very flexible. Residents can get up when they like and go to bed when they like'.</i>
<i>'You can get up when you like, and everyone is very helpful'.</i>
<i>'I eat in my room – I could go in the wheel chair but I don't like to'.</i>
<i>'Can choose to go to dining room or eat in my room'.</i>
<i>'Feels it's excellent, people treat me with respect'.</i>

<i>'I get up at a particular time usually, meal times are at a specific time, but I can ask between – excellent, all very friendly'.</i>
<i>'I can sleep in if I want, I can stay up late too'.</i>
<i>'The bedroom doors are open – you can call them (staff) when they're going by, they're very good'.</i>
<i>'There's a buzzer on the bed to call'.</i>
<i>'There's a budgie in my room – it belongs to the house but it stays here'.</i>
<i>'Visitors can come when they want to. I can't think about what I would want to change'.</i>
<i>'I have lots of my own furniture and pictures'.</i>
<i>'I've got everything I need'.</i>
<i>'I can have visitors any time I like'.</i>
<i>'I feel great here, got my own photos and things'.</i>
<i>From a staff member 'the person-centred approach is very good'.</i>

Summary

Our overall impression was of a very well-run home with the residents and families reporting positively about their lives and experiences there. Where there were negative comments these related more to one off incidents. The staff and management at the home show good dedication to the home and its residents which is to be applauded.

Considerations in this report are designed to prompt some discussion about possible improvement activity which would be of benefit to staff, residents and families.

Healthwatch Cumbria would like to thank the staff, residents and visitors from Wyndham Manor Residential Home who took part in this Enter & View visit.

What do you need to do now?

In line with the statutory regulations for this work, you now have 5 working days to respond to us if you feel that any aspects of this report are inaccurate. We have provided a response form to help you to do this. If we have not heard from you by 2 June, we will assume that you have accepted the report as an accurate record. If you have requested a change we will get back in touch to discuss this.

Once any changes have been agreed we will send a final version to you on 9 June. You then have 20 days to make a formal response to any of the issues raised in the report. **The deadline for responses is 30th June.**

Finally, we will be publishing all of the reports, together with the responses from each Care Home, and an overarching report summarising all the key findings on our website: www.healthwatchcumbria.co.uk

A copy of this report will be sent to CQC, Cumbria County Council, and any other organisation that requests it.

If you wish to discuss this report with a member of Healthwatch Cumbria please contact us on 01900 607208