

Enter and View Report - Care Home

The Westbourne
Cricketers Way
Holmes Chapel
Cheshire
CW4 7EZ

Tel: 01477 551 371

Date of visit: 10/02/2015

This report describes our observations of the quality of what we found at the date and time of the visit, information given from the Home Manager, residents, relatives and observations made by our Authorised Representatives

Overall observations for this home:

Promoted independence for residents



Encouraged mobility both inside and outside the home



Provided stimulation and social activity



Summary:

Residents were very happy with the care at this home and standards of furnishings, cleanliness etc were very good. Staff were well spoken of and their attitude to residents is positive and helpful.

The manager is well aware of concerns about the lack of activities for residents and working with her staff to remedy this. She has made a good start by doing some of the things that relatives have asked for and seems determined to make the necessary improvements to ensure that the residents are happier and better occupied during the day. She is also keen to develop links with the local community.

CARE HOME MANAGEMENT INFORMATION

The following information has been provided by the care home management

GENERAL INFORMATION

Name of Home:	The Westbourne	
Address and Postcode	Cricketers Way Holmes Chapel Cheshire CW47EZ	
Name of person completing this form:	Joanne Farrell	
Position in the Care home:	Manager	
Date the form was completed:	30/01/15	
Telephone contact:	01477 551371	
Email contact:	Westbourne@mmcg.co.uk	
Home Registration	<input checked="" type="checkbox"/>	Residential
	<input checked="" type="checkbox"/>	Nursing
	<input checked="" type="checkbox"/>	Dementia
How many permanent residents in the home today?		35
How many short stay/respice stay residents in the home today?		0
Does each resident have a named or key worker?		<input checked="" type="checkbox"/>

INDEPENDENCE AND MOBILITY

How do you assess residents' ability and mobility to keep themselves as independent as possible?	On Pre admission Day to day and time to time Care plan Mobility/manual handling assessment
Please give any examples of how you encourage residents to remain independent with daily living skills ie: personal hygiene, eating, drinking and dressing.	On pre admission Care plans Handover reports Person centred care

How do you promote mobility for residents such as moving and walking?	Always encourage day to day time to time Knowing our residents capabilities	
ACTIVITIES		
Do you have a budget to cover residents 'activities, interest groups?	✓ from 2/2/15	
Do you have a member of staff to co-ordinate activities?	✓	
If Yes: Are They		Full Time
	✓	Part Time
		Sessional
What community links do you have with local organisations and who are they?	Church groups Relatives Advocacy services when needed	
How are residents approached / encouraged to take part in activity/interest groups?	Information obtained on pre admission Ongoing assessments Getting to know our residents as individuals	
What activity interest groups do the residents like to take part in?	Crafts Quizzes Singing Musical entertainers	
Please specify the type of activity and the duration of each activity.	Varies from day to day	
How often do you run these activities?	✓	Daily
	✓	Weekly
		Monthly
		Yearly
Do you have a residents group?	✓	
How often is the residents	Daily	

group engaged in the management of the home?		Weekly
	✓ bi monthly	Monthly
		Yearly
Do you have a relatives group?		✓
How often is the relatives group engaged in the management of the home?		Daily
		Weekly
	✓ bi monthly	Monthly
		Yearly
If you have a Relatives group how often and where do they meet and would a Healthwatch authorised representative be able to meet with the group to get their views?	Bi monthly in the home Very welcome to attend	
If yes, who would we contact to arrange this?	Jo Farrell Manager	
Please give any examples of how you facilitate social interaction between residents and their local community.	Local church service Local hairdresser visits Have room in the home to facilitate group/community meetings	
Please use this space to tell us about any facilities/activities not covered in the above questionnaire.		
Is there anything else you would like to tell us?		
If a resident has a concern about their health and social care needs -who would deal with the issue?	Nurse in charge, manager, local authority CQC	

Are you aware that Healthwatch Cheshire East has a Signposting Service to point people to the organisation that deal with issues and can capture their story to forward to partners who can make a difference and inform trends?	No
If no, would you like more information	Yes

Authorised Representative Observations

Background	The Westbourne was selected for a visit from our list of Cheshire East Care Homes for completion in Spring 2015
Observations	<p>Welcome: Staff were polite and welcoming. Manager checked our ID and seemed prepared for unscheduled visits. We spent some time in her office and she explained that the home has had several changes of manager since opening around 4 years ago and she had only been in post for 6 weeks. She was very positive and had lots of plans for change having started with regular meetings for staff, residents and relatives. The plan is for subsequent meetings to take place every 2 months. She had also just appointed an Activities co-ordinator after there being a long period in which there had been no one in this role. The home is purpose built on 3 floors with 35 out of 50 rooms occupied. Many of the residents have a diagnosis of Dementia, the more seriously ill ones living on the ground floor, the rest on the first, the laundry, kitchen and staff rooms being on the 3rd floor.</p> <p>Security of building: All doors secured, appropriate to the needs of the residents.</p> <p>Staff: All well presented in uniform and wearing name badges. We observed a Senior Nurse and Care Assistant, one other nurse and 5 carers in addition to meeting the Manager, her Deputy and Receptionist. We also noted 1 maintenance man and 2 kitchen staff. The care staff were all busy helping residents in an unhurried manner, but we saw no one taking the time to sit and chat with any of them. The interaction we did observe was respectful and appropriate to their needs as far as we could tell.</p> <p>Residents: We spoke with 3 residents in the lounge upstairs. The first resident we spoke to said she had chosen this home because it was easy for her family to visit and there were other</p>

relatives already living there.

She was fed up with the frequency with which new managers would come with their new ideas, but felt nothing ever changed. She had not been to the recent meeting, and felt that the manager should come and see her more often. She was unable to read but enjoyed the television, she had had to give up a lot of her interests and would like for there to be a programme of organised activities every day. She said there were visits from the church and she had enjoyed it when school children had come on special occasions in the past.

She was very happy with the care and the food and had no problems getting the help she needed. She could also request for visits from chiropodist, hairdresser etc if she wanted them.

The second resident said she was very happy with her life at the home, there were always staff around but not enough to do. She would like to play Scrabble but it had not been possible so far. She liked to help the staff with laying tables etc as there was not a lot to do during the day.

The third resident we spoke to was very limited in her understanding but was still able to tell us that there was nothing to do. We had observed her taking tissues in and out of a box then becoming distressed as she could not find a bin for them.

Relatives/Friends:

There were no relatives/friends that we could talk to today.

Meals and Drinks:

Residents told us that they could have drinks of their choice and snacks, on request during the day. We did not see anyone being helped to eat or drink. There were water coolers in both dining rooms, menus were on the tables in one, but not in the other, due to a resident "borrowing" it. The menu seemed to have with several choices but was not on display in any other part of the home.

The manager told us that she had plans to provide fruit as well as cake with tea in the afternoon.

Communication and Social activity:

The manager had told us that she had tried very hard to move the chairs from around the edges of the lounges but the residents had so far resisted any change. We did however see them talking to each other. There were a few games and some

	<p>magazines and papers under the coffee tables but these looked tatty and uncared for.</p> <p>The home has a library which seems well stocked with books. There is also a computer with Skype which relatives and residents are encouraged to use, this is advertised in the entrance area.</p> <p>There is a cinema room on the third floor but there are problems using this due to staffing issues.</p> <p>The entrance to the home has display boards with details of forthcoming activities, advertising was mainly for musical entertainment on Wednesdays. There were also copies of the minutes of the recent meeting held for relatives and residents, for them to take away.</p> <p>Environment, furnishings and building.</p> <p>Modern building with good quality, hotel style furnishings and excellent facilities. Manager aware that the style could be a bit more homely, and working on this. Some themed mood boxes and posters on the walls, one noticeboard with thank you cards displayed. Several styles of chairs seen, manager had recently purchased fold up chairs for visitors to use in lounges because chairs are too heavy to move easily, but there were none in the lounge we visited.</p> <p>This is something that relatives had suggested at their meeting.</p>
<p>Conclusions</p>	<p>Residents were very happy with the care at this home and standards of furnishings, cleanliness etc were very good. Staff were well spoken of and their attitude positive and helpful.</p> <p>The manager is well aware of concerns about the lack of activities for residents and working with her staff to remedy this. She has made a good start by doing some of the things that relatives have asked for and seems determined to make the necessary improvements to ensure that the residents are happier and better occupied during the day. She is also keen to develop links with the local community.</p>