

Enter and View Report - Care Home

Hope Green Residential Home

London Road

Adlington

Cheshire

SK10 4NJ

Tel: 01625 242264

Date of visit: 17/02/2015

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:

The visit today at Hope Green - Adlington highlighted that the residents are very contented and enjoy the high standards of care and variety of activities available. They particularly like the 'homely feel' and the commitment of the staff. The staff interacted warmly and a good rapport was shared between them.

CARE HOME MANAGEMENT INFORMATION

The following information has been provided by the care home management

GENERAL INFORMATION

Name of Home:	Hope Green Residential Home	
Address and Postcode	London Road Adlington SK10 4Nj	
Name of person completing this form:	Sue	
Position in the Care home:	Administrator	
Date the form was completed:	17/02/2015	
Telephone contact:	01625 242264	
Email contact:	hopegreen@mmcg.co.uk	
Home Registration	<input checked="" type="checkbox"/>	Residential
	<input type="checkbox"/>	Nursing
	<input type="checkbox"/>	Dementia
How many permanent residents in the home today?		38
How many short stay/respice stay residents in the home today?		1
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?	Talking to them, offering encouragement ,walking with them when needed Assessments are carried out beforehand to ensure they feel safe and happy to walk, be it short or long distances.
Please give any examples of how you encourage residents to remain independent with daily living skills ie: personal hygiene, eating, drinking and dressing.	By asking them how we can help and offer assistance where needed ie with hygiene and dressing and also with feeding. We also help with daily activities. Taking time out to talk to each resident helps to assess their needs.

How do you promote mobility for residents such as moving and walking?	We talk to them and ask how they are feeling and if the resident is up to walking that day. Taking time to walk and to encourage them to walk daily.	
ACTIVITIES		
Do you have a budget to cover residents 'activities, interest groups?	✓	
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?	Poynton library visit every 2 weeks Local church for holy communion 1 st Sunday of every month Age Active gentle chair exercises	
How are residents approached / encouraged to take part in activity/interest groups?	Regular meetings are held with residents to decide what trips out they would like. Activity organiser speaks individually with residents. Activities are planned and displayed and a copy handed out to residents	
What activity interest groups do the residents like to take part in?	Crosswords/cards/Bingo Musical entertainment Age Active Sessions Baking Flower arranging	
Please specify the type of activity and the duration of each activity.	<ul style="list-style-type: none"> Each activity runs for varying times Crosswords daily sparkle-am Afternoon could be entertainment, bingo, flower atrranging	
How often do you run these activities?	✓	Daily
	✓	Weekly
		Monthly
		Yearly
Do you have a residents group?	✓	
How often is the residents group engaged in the		Daily
		Weekly

management of the home?	<input checked="" type="checkbox"/>	Monthly
		Yearly
Do you have a relatives group?	<input checked="" type="checkbox"/>	not at present
How often is the relatives group engaged in the management of the home?		Daily
		Weekly
		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?	Every 3 months we have relatives/residents meetings where they can put their views/requests forward	
If yes, who would we contact to arrange this?		
Please give any examples of how you facilitate social interaction between residents and their local community.	We have good links with local community and invite them to our open days/fairs We assisted 2 of our residents to attend church on Sunday mornings	
Please use this space to tell us about any facilities/activities not covered in the above questionnaire.	We attend outside places-church fetes etc. Schools-harvest festivals and Christmas plays. We provide transport for our residents who wish to attend. Organised shopping trips out 1-1 trips out for those who do not want to go out in groups. 1-2 Coffee/garden centre trips out	
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?	Care staff/Seniors/Manager Involve GP, nurses and family	

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
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If no, would you like more information

Yes

Authorised Representative Observations

Background

Hope Green was selected for a visit from our list of Cheshire East Care Homes for completion in Spring 2015

Observations

Welcome:

We were made very welcome by a staff member at the main entrance who then introduced us to Sandra Wardle. Our I.D's. were checked. We were then invited for a coffee with Sandra.

Security of building:

There is a security entrance to access the building.

Staff:

Approximately 7/8 staff were observed. These consisted of Care workers, Kitchen staff, Cleaners and an Activity person. They all wore uniforms and name badges.

The staff appeared busy but had time to stop and attend to residents. None of the residents seemed anxious.

The staff responded well when residents spoke to them or required their attention. The staff observed had very good rapport with both residents and each other.

Residents:

All the 6 residents we saw seemed very satisfied with the home and staff. Positive comments were made by residents without being prompted. There were no signs of residents being in distress or not being responded to.

Most of the residents were in the lounge area. Some were asleep in the chairs and others were seen chatting to each other. One resident was seen knitting a baby blanket.

Some of the residents we chatted to preferred to sit in the entrance foyer area. They liked to watch and talk to visitors who were coming and going in and out of the building.

Sandra informed us that the residents can get up when they want to, that it was 'their home' and they will continue to make it that way.

The residents liked the homely feel and the knowledge that help was at hand for them for most of the time. Most residents did not go out on their own, but could go out with a care assistant. Some went out with relatives.

The residents are encouraged to take part in activities and to get themselves around the home.

One resident said that she had a fall in her room at 1:00am and

that it had taken 20 minutes to get attention after raising the alarm. Sandra explained that regular visits are made to each room throughout the night to check on residents.

Relatives/Friends:

We spoke to 1 relative who was a daughter visiting her mother. She explained to us that she wanted her mother to move from Brighton to be nearer to her and her family. She and her mother had looked at other care homes in the area and had chosen Hope Green and its facilities.

She said that her mother was encouraged to live as independently as possible and be involved in events and social activities:

- She takes her mother out.
- Her mother is encouraged to be mobile but is restricted because she suffers from a lot of pain in her legs.
- Her mother is encouraged in social activities and sometimes goes out in the garden (weather permitting). She has also been out to visit a garden centre and a tea shop.
- They are both aware of the notices displayed in the home about activities and events.

She informed us that she had been involved in the Relatives Committee and that points raised were followed up.

She raised the concern about her mother having to wait 20 minutes before getting attention after falling in her room. Also she was concerned about having only one pull cord in one part of the accommodation. She added that she would like to see more staff on duty.

Meals and Drinks:

Residents seemed happy with the choices and arrangements for their meals and drinks. The menu is displayed in the entrance hall and each resident is asked what would they like. The staff will always cater for residents who change their mind and they are welcome to have their meals in their rooms should they choose to. At the time of visit a drinks trolley was seen returning to the kitchen and plates of biscuits were visible in the lounge.

In addition to the Dining room, we were informed that they use an additional room for residents who required more assistance.

Communication and Social activity:

A list of activities and events were displayed on the notice board in the main corridor. Residents each have an individual

activity plan which is updated daily and recorded in a log book. We had the opportunity to see this. They have two activity assistants.

The residents are encouraged to take part in activities which run twice a day (morning and afternoon). On the day of the visit the morning activity was Flipping Pancakes using a plastic lid (day being Pancake Tuesday). Some residents were seen reading newspapers.

We observed residents taking part in the afternoon Bingo session.

Other activities provided were exercises, quiz games, music and sing-a-longs.

A hairdresser comes in once a week and external entertainers, singers and musicians etc. form part of the entertainment on a rotation basis. A physiotherapist (Ageactive) calls in once a month for resident exercises.

The residents have outings to garden centres and tea shops. The home also provides assisted shopping trips.

3 of 6 residents we chatted to took part in the activities.

Environment, furnishings and building:

The home was very clean, tidy and looked well maintained and there were no unpleasant odours. The toilets were very clean and clutter free.

The lounge, dining area, staircase and both upstairs and downstairs corridors were free from any hazards. There are some steps on the upper level which have been fitted with a Stannah Lift for ease of access for the residents.

The residents commented on the cleanliness of all areas.

There were plenty of high backed chairs of various heights situated in the lounge area. Most of the residents preferred to sit in the same chair each day.

Residents are allowed to bring in their own furniture into their rooms.

The visit today at Hope Green - Adlington highlighted that the residents are very contented and enjoy the high standards of care and variety of activities available. They particularly like the 'homely feel' and the commitment of the staff. The staff interacted warmly and a good rapport was shared between them.

Conclusions	