



# Healthwatch Liverpool Enter and View Report Castle Grange Care Home March 2015

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## Section 1: Introduction to Healthwatch Liverpool Enter and Views Powers to Enter and View Services

Healthwatch Liverpool was established under The Health and Social Care Act 2012 and came into being in April 2013. Healthwatch Liverpool is an independent champion for the rights of people who use health and social care services in Liverpool.

Healthwatch Liverpool has the statutory power to Enter and View any local health and social care services that receive public monies. Healthwatch normally undertakes such Enter and View visits to observe the quality of services in action and to encourage and enable more people to talk to us about improving health and social care services.

## Section 2: General profile of the service that was Entered and Viewed

Name and address of the Service that was Entered and Viewed:

Castle Grange  
9 Haymans Green  
West Derby  
Liverpool  
L12 7JG

On the provider's website the following information is provided: (sourced from <http://www.carehome.co.uk/carehome.cfm/searchazref/20003512CASA>)

Castle Grange is located in the West Derby area of Liverpool where it has forty bedrooms dedicated to the long-term needs of elderly residents, while also running a respite service. The home has its own secure gardens and good wheelchair access, with an interior that is spacious and ideal for achieving a relaxing atmosphere and effective care results. Some en-suite rooms are available and one dual occupancy, with carers available 24-7 though respecting the privacy of residents as a core part of the service.

**Group:** Unity Homes Ltd

**Person in charge:** Constance Munava (Manager).

**Local Authority / Social Services:** Liverpool City Council ([click for contact details](#))

**Type of Service:** Care Home with nursing - Privately Owned , 40 residents

**Registered Care Categories\*:** Old Age • Physical Disability

**Admission Information:** Ages 60+.

**Single Rooms:** 40

**Rooms with ensuite WC:** 7

**Facilities & Services:** Respite Care • Own GP if required • Own Furniture if required • Close to Local shops • Near Public Transport • Lift • Wheelchair access • Gardens for residents • Phone Point in own room/Mobile • Television point in own room

**Latest CQC\* Report on Castle Grange:** [click here](#)

*\*Care Quality Commission (CQC) is responsible for the registration and inspection of social care services in England.*

### Section 3: Basic Details about the Enter and View visit

The Date of the Enter and View Visit: 17/02/2015

The Time of the Enter and View Visit: 10:00am to 12:00noon

Names of the members of the Healthwatch Enter and View Team that undertook the visit:

Amanda Brown  
Laura Yallop  
Inez Bootsgezel  
Luisa Tolu (observer)

The type of Enter and View Visit undertaken:

This was an announced visit. It was judged that announcing the visit on this occasion would enable Healthwatch to liaise with the service provider to publicise the visit to the friends and families of residents, thus providing them the opportunity of informally advocating on behalf of those residents who for one reason or another may not be in a position to speak for themselves e.g. some residents who have dementia can find it difficult to articulate their views.

### Section 4: The reason for the Enter and View Visit

This Enter and View visit was not conducted in response to any concerns that Healthwatch had received from the public. The visit was part of the Healthwatch Liverpool activities of:

- Identifying if and how local health and social care services could be improved
- identifying recommendations to improve the standards of health and social care services

On this occasion Healthwatch was keen to observe the service in operation and was particularly interested in using the visit to hear the views of residents and their friends and family regarding their experience of the services provided.

Healthwatch also used this Enter and View process to ask how effectively the care home informs and engages with its service users and their friends and family. Healthwatch was particularly interested to observe how the service monitors its performance regarding such engagement.

#### **Feedback received prior to the Enter and View visit**

Some feedback from relatives was received before the visit, as leaflets and posters announcing the visit had been brought to the care home by Healthwatch beforehand. Feedback received stated that standards of care provided were seen as variable, and that there appeared to have been a lot of agency staff employed. The standard of food was also considered to be variable. Feedback also mentioned that there had been a lack of communication with relatives and very few residents/ relatives' meetings, and that when they did take place no minutes were received afterwards.

## Section 5: The Methodology of the Healthwatch Liverpool Enter and View Visit

The visit is not designed to be a full inspection, audit or an investigation of the service, rather it is an opportunity for Healthwatch Liverpool to get a better understanding of the service by seeing it in action and talking to staff and service users. Healthwatch Liverpool seeks to identify and disseminate good practice wherever possible. However, if during a visit Healthwatch Liverpool identifies any aspects of a service that it has serious concerns about, then these concerns are to be referred to the appropriate regulator or commissioners of the service for investigation or rectification. Any safeguarding issues identified will be referred to the Local Authority for investigation. The rectification of less serious issues may be directly with the service provider.

The Healthwatch Liverpool Enter and View Team rated aspects of the services that they observed (please see below). The Healthwatch Liverpool Enter and View Team are given the option to comment or make a recommendation immediately below the ratings. If the Enter and View Team chooses not to comment this should not be taken as a negative or a positive indication regarding relevant aspects of the service.

## Section 6: How Healthwatch rated what we observed

Exterior	Very Good	Good	Average	Poor	Unacceptable
Parking			✓		
Physical Access			✓		
Upkeep of grounds					
Upkeep of building's exterior		✓			
Hygiene, cleanliness		✓			

### Comments/Recommendations:

- There were no allocated disabled parking spaces for people who are less mobile.
- The main entrance has steps leading up to it, which is surprising in a relatively modern building. Although there was a wheelchair ramp leading to a side door, the ramp appeared quite narrow.
- The garden at the back of the home had several window frames with glass panes leaning upright against the back wall. The Deputy Manager said that residents were not accessing the garden at the time of the visit, as it was winter, so that it did not pose a potential hazard.
- Residents have to have a staff member with them if they want to go outside in the garden areas, there didn't appear to be any seating areas outside for anyone who wishes to sit out in the warmer weather.
- There is a smoking area which is used by residents and staff outside to the side of the home.

Reception	Very Good	Good	Average	Poor	Unacceptable
Information provided			✓		
Décor		✓			
Freedom from obstructions and hazards		✓			
Hygiene, cleanliness			✓		

Comments/Recommendations:

- The reception area was small. Although it looked clean there was a smell of urine.
- The bottom of the doorframe was slightly raised, and the doormat was a little bit broken and should be replaced.
- Some information was displayed on the wall, including the announcement of the Healthwatch visit, a sign for a staff meeting, and information about the complaints procedure.

Corridors, Lifts and Stairways	Very Good	Good	Average	Poor	Unacceptable
Physical Access			✓		
Décor		✓			
Freedom from obstructions and hazards		✓			
Hygiene, cleanliness			✓		
Lighting		✓			

Comments/Recommendations:

- The hallways and corridors looked clean and the décor had been kept up. There were some small seating areas with a coffee table and chairs. However, the 1<sup>st</sup> floor landing smelled strongly of urine.
- The corridors appeared quite narrow, especially for a relatively modern purpose-built building. It would be impossible for 2 residents in a wheelchair to pass each other in the corridor.
- Signage in the corridors for the lift, bathrooms, and on the ground floor to communal and dining areas could be improved.

Dining Area	Very Good	Good	Average	Poor	Unacceptable
Physical Access		✓			
Décor		✓			
Freedom from obstructions and hazards			✓		
Hygiene, cleanliness			✓		
Dining Area General Rating			✓		

Comments/Recommendations:

- There was level access to the dining area. However, Healthwatch representatives observed an open laundry bin with dirty table cloths in the dining room by a table.
- Healthwatch representatives noticed that plastic coloured beakers were used by the residents in the dining room.
- Although the décor was adequate, there was food residue underneath and near several tables that were not being used at that time.

<b>Communal / Sitting Area</b>	<b>Very Good</b>	<b>Good</b>	<b>Average</b>	<b>Poor</b>	<b>Unacceptable</b>
Physical Access		✓			
Décor		✓			
Freedom from obstructions and hazards			✓		
Hygiene, cleanliness		✓			
<b>Communal / Sitting Area General Rating</b>		✓			

**Comments/Recommendations:**

- The communal areas, although all linked, did give residents a level of choice in whether to sit near a television, listen to music, or do an activity. However, the largest sitting room did feel a bit crowded.
- The doorway of the largest lounge looks out on a toilet in the corridor. The deputy manager said that work is under way to move the lounge's doorway.
- Large equipment was stored in what Healthwatch representatives were told was the activities room, reducing the space and giving the appearance of a storage room. Healthwatch representatives were told a storage room was being built for manual handling equipment.

<b>Bathroom / Washing/ Toilet Facilities</b>	<b>Very Good</b>	<b>Good</b>	<b>Average</b>	<b>Poor</b>	<b>Unacceptable</b>
Physical Access					
Décor					
Freedom from obstructions and hazards					
Hygiene, cleanliness					

**Comments/Recommendations:**

- It is difficult to give a rating for these facilities, as Healthwatch representatives only saw 3 bathrooms, two with shower and one with a bath. Although the care home's website states there are seven ensuite rooms, Healthwatch representatives were told by the deputy manager that there are two ensuite rooms.
- The toilet, shower and/or bath facilities seen by Healthwatch had low level toilets and toilet seats, which could be harder to use for residents with impaired mobility. There was a toilet chair with elevated seat above one of the toilets. There did not appear to be many grabbing bars. Two bathrooms were clean and tidy, but in the one bathroom with bath the floor wasn't clean, with what appeared to be talcum powder strewn on the floor.
- Healthwatch representatives wondered if there were enough toilet and bathroom facilities available to residents, considering there appeared to be one toilet for 8 rooms on one floor, especially compared to other care homes visited by Healthwatch where all bedrooms had ensuite toilets.

<b>Kitchen facilities</b>	<b>Very Good</b>	<b>Good</b>	<b>Average</b>	<b>Poor</b>	<b>Unacceptable</b>
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**Comments/Recommendations:**

- Healthwatch representatives did not enter the kitchen, so can't comment on kitchen facilities. However, they spoke with the chef, who said the menus get changed every two weeks, and that 2 choices of meal are provided for lunch each day. Food can be provided in different 'textures', e.g. mashed, pureed etc. depending on need, and diets are catered for. Sandwiches are available

throughout the day, and snacks are available at tea time. The chef seemed to know individual residents' food preferences.

- There was a board just outside the kitchen to display the lunch menu; at 11am there was no information on there about the menu for that day. However, Healthwatch representatives thought it was positive that residents choose what they want to eat on the day, not the day before.

## **Section 7: Information obtained by Healthwatch representatives during the visit**

Healthwatch representatives were met by Rosaleen Henry-Nweye, Deputy Manager. In response to questions asked by the Healthwatch representatives she said the following:

- The home provides residential and nursing care, not Elderly Mentally Impaired (EMI) care, although Healthwatch representatives noted that the provider's website states that EMI care is provided.
- There is room for 41 residents; one husband and wife couple share one of the ensuite rooms. At the time of the visit there were 35 residents, 14 residential and 21 with nursing needs. Two new residents were expected to arrive on the day of the visit.
- There are 2 ensuite rooms (Healthwatch representatives noted that the website says seven ensuite rooms), all other rooms use shared facilities. Every bedroom has its own sink.
- Each resident has a named nurse who monitors their care plan and a key worker. Staffing levels vary depending on the number of residents, but there are 2 trained nurses and 6 or 7 care staff during the day, and 1 trained nurse and 3 carers during the night at the time of the visit. Agency staff are occasionally used when regular staff are off sick; the home will ask for staff who have worked at the home before where possible.
- Healthwatch representatives asked about if and how feedback was gathered from relatives. The Deputy Manager stated there were regular relatives' meetings where concerns could be raised and that the home has an 'Open door' policy, so relatives can talk to staff at any time. Healthwatch representatives were told that relatives' meetings are held according to need, and that the last one had been held in December 2014. Any information, notes or minutes sent to relatives went to the person listed as the main next of kin. Healthwatch representatives asked if there were minutes from relatives' meetings and if they could see any, but were told they couldn't as this could compromise residents' privacy. The Deputy Manager also said a questionnaire had been sent to relatives in the last 6 months, and that feedback was given at a meeting.
- Healthwatch representatives spoke with the activities worker, who plans and arranges activities in liaison with residents and staff both in and outside the home. She was enthusiastic and showed Healthwatch representatives her file with a good record of activities, including craft activities, watching films, chair-

based exercises and taking people shopping. Activities seemed personalised and were provided 6 days per week. Some of the residents attend church on a weekly basis, or receive pastoral care visits if they can't go out, and local church members helped with activities at the home, e.g. a summer fair. The activities worker said that there were plenty of activities for female residents, and that they were working on having more activities aimed at male residents.

- The home has restricted meal times so that residents are not distracted by visitors when eating. Some people choose to eat in their room. Staff will support residents at meal times if necessary.
- The home gets regular visits by an optician. Physiotherapists and occupational therapists also attend.

### **Section 8: Feedback from the people Healthwatch spoke to about the care home**

Healthwatch representatives spoke with three residents and one relative during the visit; their feedback was positive.

One resident said:

“I have been here quite a while - I like it. When I need staff they come to see me, and I like staff the most”.

A visitor said:

“My relative has been here a few months. It was on the list of homes, and near a relative. This building is purpose made, there are worse. I was surprised how big the room was, and my relative has got their own television in the room”.

We spoke to another resident just before she was being taken out to a supermarket who said “I think it's good, I love going to the supermarket” We observed the resident getting ready and the activities worker asking her which coat she wanted to wear today.

Another resident said “We made cards yesterday, I've been here one year and it's very nice, just like home. Staff are very good, could not say a word against them. I can go to bed when I want within reason and I can choose what I do. The meals are nice.”

### **Section 9: Summary and Recommendations**

Whilst there were positive observations from this visit, for example about the activities organised with residents at and outside of the home, Healthwatch representatives also noted some issues that could be improved. As a result, Healthwatch Liverpool makes the following recommendations:

1. Some information provided on the care home's website (e.g. about the number of ensuite rooms and EMI provision) differed from information given by staff on the day; Healthwatch recommends that the website is reviewed and where necessary updated with the correct information.



2. Healthwatch representatives judged that the number of toilet and bathing facilities observed were less than optimal considering the number of residents at the home; Healthwatch recommends that the home reviews the number of facilities available and provides more, especially as Healthwatch has visited other care homes where ensuite toilet facilities were provided as standard.
3. Healthwatch recommends that the works to move the communal room's entrance door away from the view of the toilet door in the corridor, as well as the works to create a store room for moving and handling equipment are carried out as soon as possible, and that an estimate of when the works are due to be completed is provided to Healthwatch.
4. There was a strong smell of urine in parts of the home; Healthwatch recommends the home identifies the source and takes appropriate measures to deal with this immediately.
5. Staff told Healthwatch representatives that regular relatives' meetings were held, and that minutes are sent out as well as feedback provided at subsequent meetings. However, this was contradicted by relatives' feedback received by Healthwatch prior to the visit. Healthwatch recommends that Castle Grange ensures that regular residents/ relatives meetings are held, and that relatives are regularly updated about meetings and sent minutes via email wherever email addresses have been provided by relatives.
6. Coloured plastic drinking cups were used that appeared to be more appropriate for children. In order to offer more dignity and respect to the residents Healthwatch recommends that drinking cups more suitable in appearance for adults- even if plastic - are used.
7. Healthwatch visitors observed during the visit that areas of the dining room and a bathroom floor were not clean, and recommends that regular monitoring is implemented so as to enable immediate remedial action.
8. The glazed window frames leaning upright against the back wall should be disposed of immediately.

## **Section 10: Safeguarding**

Were there any safeguarding concerns identified during the enter and view visit:

**No**

Healthwatch Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies, and the Local Authority will be notified on the same day as the Enter and View visit.

**Section 11: Contact Details**

*Healthwatch Liverpool Scrutiny*

*151 Dale St*

*Liverpool*

*L2 2AH*

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*Fax: 0151 237 3998*

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