

| Healthwatch Cheshire West Enter and View Report | |
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| Enter and View Visit to | Oak Grange Mollington Chester CH1 6NP |
| Date | 23 February 2015 |
| Authorised Representatives | Richard Berry, Andrew Firman, Betty Shepherd, Caroline Jones |
| Staff Present | Lisa Millington, Margaret Gorton and Sian Chaloner |
| Background | Owned by Barchester Healthcare Homes Limited, Oak Grange provides accommodation for adults who require nursing or personal care for with conditions including dementia, physical disability, treatment of disease, disorder or other injury. Respite and day care are also offered. Opened in Summer 2012, it is a purpose built care home for up to 70 people. Built with two floors the home offers single room accommodation with en suite facilities with two separate units on each floor. Situated in a semi-rural setting on the outskirts of Chester, the home is sited within attractive gardens and surrounded by green fields. At the time of our visit occupancy was 64 residents. The home has its own website with information displayed clearly and including photographs of the staff team and recent activities. |
| Overall Impression | Representatives felt that the home provided a welcoming, calm, efficient, caring environment that was spotlessly clean. Residents appear content with staff appearing committed and caring in their day-to-day work. Authorised Representatives were impressed with the Manager's philosophy when she said, " <i>We are guests in their home.</i> " - referring to the service users. Activities seem to be regular, varied and well organized and well featured on the homes own website. |
| Any ideas or suggestions for improving service? | <ul style="list-style-type: none"> • Develop further measures to reduce staff turnover - will help the home to better capitalise on the training investment in the staff. • A faster turnaround of Deprivation of Liberty Safeguards (DoLS) by the Local Authority as this is a genuine situation facing the home. • Revisit the terms of reference of the nurse practitioner whose role did not seem clear to the visitor. |

Environment

The general environment appears unworried, calm, well organised and clean.

Information boards provided in reception and on both floors were well populated. Sanitised hand points available at all access points.

Each of four units has a lounge and dining room these appeared well laid out with water faucet.

The home aims to create lounges similar to those in a normal household.

Gardens were well maintained with pot plants and a memory garden.

The first floor corridor was dementia friendly with memory boxes outside each room.

Generally the areas were odour free.

Elderly Mentally Impaired (EMI) areas were designed to be dementia friendly and colour coded.

We were informed that a new, easier to use call bell system has been installed and has overcome the problems identified in the last Care Quality Commission report.

Health and Wellbeing

Residents appear content with staff appearing committed and caring in their day-to-day work.

Staffing - Staff were welcoming and friendly. The Manager commented on having an open door policy. Good team working was evidenced by all representatives. We evidenced staff meeting daily at 10.00 am for a briefing and information sharing session. This provides a good mechanism for cascading information to each of the four units.

Registered nurses lead each of the nursing units. The residential units are lead by a senior carer. The total number of staff is 74, comprising a mix of full time and part time etc. Staffing reduces for the twelve hour night shift from eight pm, to one nurse and six health care assistants.

Representatives' understanding is that the home has a history of significant staff turnover but we were informed by staff that this is beginning to settle down under the role of the new manager.

Representatives feel that the high staff turnover may be attributed to (a) the home having a remote geographical location and (b) salary competition with staff moving to organisations paying above the minimum wage. Representatives understand agency staff are still used by the home.

We were informed that the home provides a well structured five day induction for newly appointed staff and an opportunity to undertake additional training.

The Manager's medium term vision is for the home to 'grow' its own nurses from Health Care Assistants(HCAs).

Care - Representatives observed staff giving drinks to bed bound residents with consideration and dignity. Representatives were unable to have interaction with visitors/relatives due to none being on site at the time of our visit. We spoke to eight service users and the general consensus was they were contented and happy with the care that they were receiving.

Representatives were informed that individual care plans are updated on a monthly basis and each service user has a record within their room maintained by nurses and carers throughout the day. We further understand that families are invited in for six monthly care plan reviews and that local care home managers are currently liaising with the local GP and Clinical Commissioning Group to improve the operation of service provided from the local GP practice. The DoLS lead is the current Manager. We were told, **"36 applications were submitted four months ago and are currently awaiting Local Authority certification."**

Food -Residents commented that the varied menu was enjoyable.

We spoke to the Assistant Chef who praised the quality of equipment and locally sourced produce. The kitchen was spotlessly clean.

Authorised Representatives shared lunch in the service user's dining room - which was well attended. We witnessed good ambience - the food was of exceptional quality.

One lady required help with food - this was delivered with care and compassion.

Staff encourage individuals on a one-to-one basis where necessary. We witnessed one service user being encouraged to eat lunch - successfully!

Housekeeping - The laundry was well equipped and efficient.

We spoke to two people on the housekeeping team who enjoyed working at Oak Grange.

Additional Services - Residents benefit from a dedicated GP service, domiciliary dental care, eye care, visiting hearing aid and podiatry services. The home has a hair and beauty salon, coffee bistro, cinema and minibus.

Activities and Community Links

Activities seem to be regular, varied and well organized.

Representatives feel that good use is made of the home's website to advertise future activities including planned Church services and Communion; where relatives may wish to be involved.

Representatives understand that regular monthly meetings are held with residents and quarterly with resident's relatives. This gives confidence of good communication and consultation.

Activities staff numbers have been increased to four - with two staff employed in the morning and two in the afternoon.

Each resident is given a weekly activities calendar evidenced by representatives. We understand that activities are also provided three evenings per week. There appears to be a wide programme of things organized including group sessions and trips out in the mini-bus to the garden centre and pub etc.

Representatives were told that families also make big efforts to take service users out.

One of the activities viewed by representatives was a two hour session of 'Wake and Shake' incorporating morning coffee. This was well attended and provided social interaction.

The home hopes to involve activities staff more when pre-admission home assessments are undertaken. This will enable some similarity with their home environment.

Feedback

Authorised representatives would like to extend grateful thanks to all staff for their help and support throughout the visit.

Additional Comments

None

Feedback from Provider of Service

I spoke with residents following the visit and they were happy with the feedback I had given the Healthwatch Representatives

I would just like to comment at Oak Grange and within the Barchester organization, we like to refer to our Units for residents living with Dementia as 'Memory Lane' units as opposed to EMI units.

Liza Millington