

Enter and View Report - Rosedale Manor Care Home Sherborne Road Crewe CW1 4LB

Tel: 01270 259630 Date of visit: 4th March 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:

Rosedale Manor Care Home is clean, odourless and well furnished. It exudes a relaxed and friendly atmosphere, with staff appearing very welcoming. Currently the home has three units, Dementia, Mental Health and General, with the general unit occupying the whole of the upper floor, which unfortunately for some residents makes it seem as though there is a shortage of staff when actually it is merely because staff are not visible.

The Manager has achieved a good deal since he took up post, and talked about the 'Pearl accreditation' [promoting choice for individuals on the dementia unit/lowering sedation levels/less aggressiveness], identifying the appropriate skill mix/talents and abilities of staff for the benefit of all residents, and looking at future plans which will enable him to spend more time on the floor supporting staff and residents.



CARE HOME MANAGEMENT INFORMATION

The following information has been provided by the are home management

GENERAL INFORMATION				
Name of Home:		Rosedale Manor		
Address and Postcode		Sherborne Road Crewe Cheshire CW1 4LB		
Name of person completing this form:		Lee Riley-Owens		
Position in the Care home:		Home Manager		
Date the form was completed:		4/03/15		
Telephone contact:		01270 259630		
Email contact:		Rosedale.manager@fshc.co.uk		
	1	Resi	esidential-26	
Home Registration	√	Nursing-26		
	1	Dementia-26		
How many permanent residents in the home today?			58	
How many short stay/respite stay residents in the home today?			3	
Does each resident have a named or key worker?			yes	

INDEPENDENCE AND	MOBILITY
How do you assess residents' ability and mobility to keep themselves as independent as possible?	Through our moving & handling co-ordinators. Currently 3 in the home. Named nurse would also monitor with monthly care plans
Please give any examples of how you encourage residents to remain independent with daily living skills ie: personal hygiene, eating, drinking and dressing.	Staff encourage residents. Staff are trained to promote independence and to protect dignity. Each unit has a kitchen area that residents can access. Residents can freely make hot or cold drinks, this can also be supervised and supported.



How do you promote mobility for residents such as moving and walking?	The home engages with the community physio team. The OT team will leave exercises for staff to do with residents. We also have armchair aerobics regularly.			
ACTIVITIES				
Do you have a budget to c	over reside	ents 'ac	tivities, interest groups?	✓
Do you have a member of staff to co-ordinate activities?			✓	
	✓	✓ Full Time		
If Yes: Are They		Part Time		
		Sessional		
What community links do you have with local organisations and who are they?	Local schools come on special occasions to put oj musical performances. The church come in to deliver services. We have a good relation with the theatre.			
How are residents approached / encouraged to take part in activity/interest groups?	The activities team encourage residents. Keyworkers on admission and regular assessments to find out a resident's interest.			
What activity interest groups do the residents like to take part in?	Singing group Reminiscence group Cheese and wine tasting			
Please specify the type of activity and the duration of each activity.	Ongoing activities conducted daily. Various activities dependent on residents needs/want.			
How often do you run	√	Daily		
these activities?		Weekly	y	
	Monthly			
		Yearly		
Do you have a residents gr	oup?	1	✓	
How often is the residents			Daily	
group engaged in the			Weekly	



management of the home?	Monthly		
	Yearly		
Do you have a relatives gre	oup? ✓		
How often is the relatives	Daily		
group engaged in the management of the home?	Weekly		
	Monthly		
	Yearly		
If you have a Relatives	Resident and relative meetings held regularly		
group how often and where do they meet and would a Healthwatch	Yes, would be welcome		
authorised representative			
be able to meet with the group to get their views?			
If yes, who would we	Alison Kennedy - Activities co-ordinator		
contact to arrange this?			
Please give any examples of how you facilitate			
social interaction			
between residents and their local community.			
Please use this space to tell us about any	We have a minibus to organise trips out. We have a pat dog service that comes into the home		
facilities/activities not	we have a pat dog service that comes into the nome		
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	They can speak to keyworkers Unit manager		
social care needs -who	Deputy Manager		
would deal with the issue?	Home Manager at any time.		

No

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Authorised Pop	rocontativo Obcorvations
Authorised kep	resentative Observations
Background	Rosedale was selected for a visit, as part of our Spring round of Enter and View visits, across Cheshire East.
Observations	Welcome:
	It was a little confusing when entering the building and needing to sign in as there were three signing in books with nothing to indicate which was appropriate for visitors. We were introduced to the Manager [Lee Riley-Owens] who warmly welcomed us.
	Security of building: Building was secure appropriate to the needs of the residents.
	Staff:
	The manager informed us that staffing levels were as follows: Dementia unit - Nurse and 4/5 care staff; Mental Health Unit - Senior/Nurse/Care staff; General unit [upstairs]- two nurses and 4 care staff. There are also Unit Managers. We noted a number of staff on duty - nurses/care staff/staff undertaking domestic duties/kitchen staff/maintenance person - all of whom wore uniforms. We noticed two staff wearing red polo shirts which the Manager explained indicated they were undertaking activities. All staff seemed to be responding very well to the residents on all units, communicating in a relaxed and positive manner. The manager explained he had considered it important when taking up his post some twelve months ago to get to know the staff and identify their talents and skill mix in order to benefit both staff and residents by placing them appropriately on the various units. The staff do now tend to remain on their units unless they need to cover sickness/shortages.
	Residents: Met with 5/6 residents in various lounges all of whom indicated staff were very good, or'good girls'. The residents were aware of activities because they were put up each week on the notice board. Some of the residents said they joined in when they felt like it, others said they weren't bothered although staff did try to get them involved.



They did like people coming in [some highlighted the church, others schoolchildren coming in, especially at times like Christmas and Easter.

[Easter cards had been made on the Dementia unit and displayed on the walls].

A favourite of some of the residents was the music and movement activity, 'where you can just sit in your chair and do it'.

There was also Bingo, bowls, some quizzes etc.,

Two commented the food could be improved on - more choice; hot meals sometimes served only warm, and the soup tended to be pea soup - 'a little variety would be welcomed'.

One resident said she went to bed at a certain time to 'suit the staff'. Whilst other residents indicated they could go to bed when they wanted and get up when they wanted.

A couple of the residents/a relative on the upper floor commented they seemed to be short staffed.

Relatives/Friends:

The residents interviewed indicated they had visits from their family and friends. There is also someone who comes in with a dog which they like.

One relative interviewed said he came regularly to visit his aunt and always found the home clean and fresh, staff very good. One concern he had had was the main meal which according to his aunt wasn't always hot enough. At that time he did go 'downstairs' to raise this on her behalf.

Meals and Drinks:

Residents indicated the 'drinks trolley' came round with hot and cold drinks. The manager also informed us that there is a kitchen area on each unit that residents can use whenever they liked. This can be done independently, or with supervision and support. At the time of our visit we did not observe any drinks being made but a couple of the residents did have beakers in front of them. As indicated above, general comments were that the food was good apart from one comment about some hot meals weren't hot enough, and the soup tended to be pea soup.

Meals for the day are displayed on board in the dining area, but at the time of our visit this hadn't been done for today.

Communication and Social activity:

Currently the Activities Co-ordinator is on leave, and therefore the Manager expected staff on the units to undertake this task. This was evident on one unit where two members of staff were wearing the red 'activities polo shirts' and on another unit where staff were planning a 'celebration of 50 years of the film Sound of



Music - showing the film and having nibbles and drinks.

The manager stated it was important to maintain local links - giving schools, the church, and the theatre as an example. Relatives and friends were always welcomed to join in and take part.

The home has a mini bus to take residents out - whether this be a planned day out - or just to the shops etc.,

Whilst meeting with residents we observed books, magazines, DVD/videos available in the lounge areas.

Environment, furnishings and building:

Rosedale Manor presented as being very clean and tidy, with no odours.

The majority of the bedrooms were en-suite.

Furnishings were of good quality and chairs of varying heights. Framed pictures of local interest decorate the walls, a major theme being that of trains, which was particularly appropriate the home being in the Crewe area.

One lounge was identified as a Reminiscence Room and furnished appropriately. However Lee the Manager pointed out that that was not the only use of the lounge - it is used for many purposes, reminiscence, or a quiet room, particularly useful if any resident is feeling stressed/distressed etc

Conclusions/Summary

Lee Riley-Owens, the Manager, was very welcoming and it was evident through conversation his enthusiasm and commitment to the home and all residents.

He discussed accreditation for the 'Pearl project' - which involves giving choice back to dementia residents. An example quoted was that of allowing residents choice in getting up and dressed/ having their meals when they want them etc., This seems to be working well and as a result they are seeing very low sedation levels/little aggression .

He is in the early stages of submitting a business plan for the upper floor to create an EMI wing and a general wing rather than the huge expanse the general unit is currently which is making the visibility of staff difficult. This is the main reason he believes, that residents consider they are short staffed, when actually they are not. Another area of change shortly will be audits on I.Pad, with an I.Pad for relatives situated at the entrance so that they can instantly message anything they want to raise. Lee said it would also give him more time to spend on the floor which he considers is essential, believing that the Manager, as with all staff, need to be visible and accessible to residents and relatives/visitors. There was relaxed friendly atmosphere within Rosedale Manor, which is a clean, odourless and well furnished home with staff communicating well with all residents.

