

Healthwatch Cheshire West Enter and View Report - NHS	
Enter and View Visit to	Newton Hall Residential Home Kingsley Road, Frodsham, Cheshire, WA6 6YD
Date	6th May 2015
Authorised Representatives	Alan Murphy, Margaret McDermott, Lynda Kenny and Sue Masterman
Staff Present	Kevin Edwards - Manager
Background	<p>Newton Hall is owned by Springcare Ltd, who runs 14 other homes in the North West area including Sandiway Lodge, also in Cheshire West and Chester and located a few miles away. Prior to 2003 the facility was a Nursing Home and then became a mixed Residential and Elderly Mentally Infirm (EMI) home; split by floor. Since January this year it has been designated completely EMI-occupied (except for four residents who elected to stay when the change was made).</p> <p>It is an old, rambling building, which poses its own problems. At the time of our unannounced visit, there were 32 service users in residence. Kevin, the manager has been in post since July 2014, having previously managed Sandiway Lodge.</p>
Overall Impression	<p>Initial impression from the large vestibule was that the interior of the home is rather careworn but the residents we saw were chatty, mobile and smiling demonstrating good interaction with Staff.</p> <p>Like many big old buildings, this Home is something of a rabbit warren. Compact rooms are situated off long, bland corridors. Access from the ground floor to first floor by lift is dependent on a member of staff being present. However, the lounges, dining areas and public spaces are well lit and cheerful, the garden is tidy and appropriately maintained, and the presence of an elderly but vocal parrot, a bright aquarium and an escapee peacock; which has chosen to take up residence in the grounds; lends to the atmosphere. There were no bad odours.</p> <p>This is a cheerful, welcoming Home that is sometimes fighting its physical constrictions. There appears to be intent and willingness to improve.</p>
Any ideas or suggestions for improving service?	<p><b>Activities</b> - wider range of activities and better advertisement of them. Also, cover for when the Activities Coordinator is away and better use of the mini bus. Weekly rather than monthly programs in resident's rooms.</p> <p><b>Decor</b> - the whole house is in need of updated decor, especially the carpets in the lounges. One of the bathrooms needs a total refit. There is also a feel of untidiness which needs to be addressed - for example the plethora of small notices on the walls of the reception area.</p> <p><b>Office</b> - The Manager deserves a better, more accessible office space where he can also conduct interviews and talk to relatives in private.</p> <p><b>Welcome desk</b> - This needs to be made into a more professional reception area, with relevant notices clearly displayed including an area suitable for private conversations as the manager's office is not easily accessible.</p> <p><b>Security door buzzer</b> - needs replacing as annoyingly noisy.</p> <p>The Manager should be given every support, especially by Springcare, for his ideas for improvement, including alternative access to the garden.</p>

## Environment

Only 14 of the rooms are ensuite, though all have washing facilities. There were commodes present in the non-ensuite rooms we saw. There are two shared rooms - neither of which was in use at the time of our visit. Rooms are small, though many had personal touches. Our afternoon visit found most residents in the communal areas and the rooms cleaned and being thoroughly aired.

Doors to rooms were not painted in a contrasting colour, do have nameplates but no further personal identification, with a colour coded sticker to indicate needs in case of fire or evacuation. Corridors are decorated with black-and-white collages of historical events relevant to residents, though one Representative thought these were cluttered and that, 'less might be more.'

In the lounges all chairs and sofas were clean and well upholstered. When we remarked that they were arranged in a circle in the main lounge, Kevin told us that he and the staff had tried to arrange them in groups each morning, but that the residents promptly put them back. ***"We want to see everyone,"*** one lady told us, and another bantered with Kevin: ***"You just leave our chairs alone!"***

The televisions present were not being used as "baby-sitters".

The rather worn carpets and wallpaper on the ground floor are certainly in keeping with the Home's Victorian heritage but hardly suitable for all EMI residents. Kevin told us that dementia specialists had already designed replacements and that these were in the pipeline - though those residents with a lesser degree of impairment wanted to keep it as it is.

## Health and Wellbeing

**Staffing and Training** - There are two 12 hour shifts (8 - 8). Staffing: one Senior (NVQ 3), four care staff (NVQ 2/3) - One senior and two carers on nights; two housekeepers, and one each of cook, kitchen assistant, laundrywoman, maintenance man and an activity co-ordinator (who is working towards an NVQ covering activity co-ordination and leadership). All have received Dementia Training delivered by the parent company and most are first aid trained.

In addition, the Home has the use of a Springcare minibus once a week, a hairdresser and chiropodist visit regularly (and charge for their services) while Springcare are introducing a free six-weekly holistic therapy service for those who want to take it up. Care plans include provision for dignity and privacy. Mandatory training (in Manual Handling, for example) is carried out under Springcare's induction process but they also take advantage of other training provided by the Council covering issues such as Safeguarding or Deprivation of Liberty requirements.

**Care** - Kevin is prepared to be flexible to meet Residents' needs and quoted an example of palliative care for a Resident who expressed a wish to be with his partner on site during his last days. This involved temporarily converting a double occupancy room to meet complex needs. A recent service user survey had shown general satisfaction with the care provided but noted that residents would like to be a little less rushed while receiving it. Representatives were told that the manager had responded by increasing staffing levels, taking on an extra carer for the daytime shift.

As most Residents are classified EMI, access to the lift is password-controlled. We were told that 'hospital escorts' are provided day and night for hospital visits, although where possible staff would contact the resident's family for assistance. Residents are weighed regularly and those on weekly 'weigh ins' have extra calories as directed by a dietician. The Manager praised the service provided by the local pharmacy in Kingsley and also that of the local Helsby Health Centre, both of which respond quickly to emergencies.

The Home has an arrangement with a local GP for weekly visits but Residents can retain their own if preferred. However, they have a contract with one single District Nurse Group which has two named nurses to give some continuity of care to the residents and generate familiarity and trust.

Staff are required to carry out daily hygiene and pressure area checks and record the results. They are encouraged to do this discreetly whilst carrying out their other duties.

The Manager assesses each potential resident in their own home prior to accepting them. He consults reports from social services, the GP and any care agencies involved. Recent experience has persuaded him to ask more searching questions of the family and professionals involved. ***“They don’t always tell you the whole truth.”*** He spoke convincingly of, ***“A personal sense of care,”*** for each Resident.

**Food / Menus** - Food is bulk bought centrally by Springcare but cooked on site. Three chefs manage a four-week rolling menu with seasonal variations. Snacks are available through the day and a drinks trolley makes two visits each day.

In the main dining room residents are seated four to a table with menus, floral decorations and linen napkins. With windows and doors to the garden on three sides, this is a light and welcoming area.

### Activities and Community Links

The activities co-ordinator, is full time and manages a varied programme of outside visits to shopping or garden centres, local museums or other attractions (Delamere Forest is on their doorstep) as well as quizzes, board games, craft activities and baking, we were told. She also works with residents one-to-one. However, there appears to be no coordinated cover for her absences on holiday or otherwise. The programme for May was prominently displayed in the communal vestibule. The programme was taped up in each bedroom, though on closer examination this proved still to be the April program. The print was quite small. There was a notice in the hall inviting families or visitors to contact the activities coordinator to discuss possible activities and a suggestion box was on open display. Relatives we spoke to were not overly impressed by the activities available.

Representatives understand that a ‘Mobility Assistant’ spent a day every week at Newton Hall. In the morning he works with residents who have had a recent fall, or on request. In the afternoon he runs group exercise sessions which are well attended. Kevin said, ***“A relative rang and said he hadn’t seen his mum enjoy herself and laugh so much in the last ten years. These exercise classes clearly provide much fun and laughter.”***

The Manager has held one Residents’ meeting since his appointment but plans to make them quarterly. He stressed that the Coordinator spends a lot of time communicating one-to-one with residents to get their ideas and views.

The Springcare shared minibus is available to Newton Hall one day a week for excursions, but when we visited it was parked outside because the driver was on holiday, meaning it was not available to other Springcare facilities either. It looked rather rusty.

Churches are involved in visiting residents and taking them to services if they wish. However, the location of the hall is a little remote for there to be much direct neighbourhood involvement.

### Feedback

As mentioned previously relatives that we spoke to on the day would like to see improvement in activities.

Representatives had previously received positive comments from staff who had worked with the manager at another establishment indicating that he was well liked by his former staff team. Kevin himself told us that he had moved because, [he] ***“Needed a fresh challenge.”***

### Additional Comments

Laundry appeared well organised, though relatives of one lady resident we spoke to said they were not sure she was wearing her own clothes. Representatives noted clothing - hung up to dry and air over stair-rails on part of the top floor not accessible to residents.

Kevin told us that he hoped to convert a dilapidated bathroom in the same area back to being a hairdressing salon. There is also a balcony rail in this area which will have to be raised considerably if this area is to be used by residents. Kevin’s office is located up a very narrow twisting staircase in a

loft area. ***“They keep me in the roof out of the way.”*** Representatives thought this might make him hard for staff or relatives to access.  
Representatives feel that provision of a proper notice board or whiteboard would improve communication and look more professional.  
Our thanks to Manager Kevin Edwards who gave unstintingly of his time and was free and frank in answering our questions.

#### **Feedback from Provider of Service**

*(Minor details corrected on final report as detailed on feedback form.)*

*We always us any feedback to help the home move forward  
I am now in the process of recruiting another Activities coordinator to enhance what we already have in place.*

*I feel that your visit went well. - Kevin Edwards - Manager*