

Healthwatch Cheshire West Enter and View Report	
Enter and View Visit to	Avandale Lodge, 420 Manchester Rd, Lostock Gralam, Northwich, Cheshire, CW9 7QA
Date	1 st June 2015
Authorised Representatives	Lynda Kenny, Richard Berry, Caroline Jones
Staff Present	Home Manager, Karen Clark and various team members
Background	<p>Owned and managed by HC-One Ltd Avandale Lodge is a converted 48 bedded care home offering accommodation to provide personal and nursing care for older people who have dementia. The home works closely with Bowmere Hospital's Cherry Ward. Most residents are physically very able. Age range of resident varies but the oldest resident is 93 years of age.</p> <p>The property has 48 Single rooms, all with en-suite WC and all rooms were occupied on the day of our visit.</p>
Overall Impression	<p>This was one of a welcoming, calm, efficient, caring environment. Representatives felt that Avandale Lodge was clean and decorated to a reasonable standard in neutral colours. No odours were evident.</p> <p>Respect and dignity of residents was very obvious.</p> <p>Representatives observed evidence of various craft activities e.g. art work, games, newspapers and books.</p>
Any ideas or suggestions for improving service?	<ul style="list-style-type: none"> • Refurbishment of garden furniture and tidy up generally. • Review/evaluate Lounge Monitor role - suggest 6/9 months. • Review/evaluate Nursing Assistant scheme - suggest 6/9 months. • A more timely turnaround of the DoLS by the Local Authority. <ul style="list-style-type: none"> - e.g. Submitted 48 in June 2014, only one received on the day of our visit.

Environment

Avandale Lodge has gardens of a moderate size - in need of a Spring tidy up. Representatives also felt that the garden furniture required refreshing.
The garden area at the back was fully secured.

Inside the Establishment, Representatives thought that the home presented pleasant, caring, comfortable surroundings.

Residents appeared contented.

Whilst resident's rooms were personalised, the corridors appeared a little bland. Residents commended memory boxes; their 'front doors' were decorated in pastel colours and personalised with name and key worker - some also had photographs.

Bathroom doors were yellow (with pictorial representation) and toilet seats were red - as recommended by dementia guidelines.

Rooms were pleasantly furnished with personal possessions and photographs and some had movement sensors and mats.

The reception area was well equipped - all necessary statutory notices were displayed. The hand sanitizer was available; but empty.

Each floor had a lounge and dining room (well laid out) and various themed small "sitting areas."

Both ground and first floors also had bathrooms/shower rooms which were clean and well equipped. Dignity and respect for residents was evidenced.

A large, modern central laundry was both clean and efficient and in operation seven days a week.

Representatives noted a board display - an "Employee Kindness award" - one for demonstrating support for all e-learning and one for end of life care.

Health and Wellbeing

Staffing: Staff appear welcoming and friendly. Good team working was evidenced.

Representatives understand that daily handovers are organised between day and night shifts. Staff have access to the current Manager, Deputy Manager and Manager of Acorn Hollow (adjacent) out of hours if necessary.

Drug rounds are undertaken three times daily and medications are reviewed six monthly by the GP.

Staffing ratios are:

Daytime: - Two Nurses, one Senior Care Assistant and a minimum of seven Assistants. (One resident had 1-1 care 14 hours per day).

Night time - Two Nurses, four Care Assistants.

Representatives were informed that currently six Nursing Assistants are undergoing competency based training. This role will support and release current nursing activities. This activity was piloted at Acres Nook, Staffordshire and is being rolled out by HC-One. The aim is to reduce the need for bank/agency staff and improve consistency for residents. Staff undergoing this training must have a minimum of two years experience as a carer, have achieved Level three NVQ and be compliant with in-house medication training. Carers often work in pairs.

The Manager is a senior qualified nurse.

On the day of our visit we observed that one person waited a considerable time (20 minutes)

for a member of staff to assist him to his feet to enable him to visit the toilet. Authorised Representatives sought out staff to assist the resident. Staff were not able to respond to people's calls as quickly as they would have liked.

A 'resident of the day' system is in place.

A new role of 'Lounge Monitor' has been introduced - five hours per day, seven days a week. This is to improve interaction, activities and stimulation. This person also helps with feeding patients requiring support.

We talked to the Lounge Monitor on duty - who said, "***This is my fifth week and I'm really enjoying working with the residents. Eventually I would like to train to be a Senior Care Assistant.***"

The Manager confirmed she had shared the job description for this post with relatives to capture their views.

The Manager confirmed the mood and atmosphere has much improved and residents seem more engaged and stimulated. Authorised Representatives evidenced the Lounge Monitor carrying out her duties; residents were eager to interact with her.

A separate file is kept of all relative interactions with staff (evidenced).

There were three staff engaged in housekeeping - including one laundry operative.

Staff undergo a rigorous mandatory induction programme which culminates in the Care Certificate introduced in April this year. In July all staff are to undergo an enhanced safeguarding/restraint/de-escalation course. Currently this is lead by the Manager from an experiential - *learning through reflection on doing perspective* - but she feels additional training would be helpful for both staff and residents.

Staff are encouraged to undertake additional NVQ training.

All staff we spoke to praised the Manager for her support and commitment. There appears very little turnover of staff.

Care: We evidenced care plans of residents - these were up to date, well populated and personalised. They are updated at least once a monthly on a planned system. Do Not Resuscitate (DNR) is clearly displayed as the first form in the care plan, colour coded lilac. Regular monthly Health and Safety/staff meetings were evidenced.

All residents are weighed monthly, more frequently if required, via the personal care plans. Hydration charts are taken round separately. Dieticians visit from Leighton Hospital.

The complaints procedure is clearly visible in reception and a full record of the complaint and action taken is available in the complaints file. (Evidenced).

The DOLS lead is the current Manager.

Food and Refreshments: Avandale Lodge has a five star hygiene rating - granted 26th September 2013. Two Chefs are employed and cater for both Avandale and Acorn Hollow residents and staff. Menus are rotated seasonally and on a four weekly basis directed centrally from HC-One with local flexibility as required. Dietary requirements are catered for and are in the individual care plan. Residents are able to request individual items of food not necessarily on the menu for that day.

Recipes are trialled and menus amended as necessary. Residents can receive textured food

where appropriate and currently 50% of residents require this. Residents can eat in the dining rooms or their own room. Menus were displayed on dining tables, however, Representatives felt the menus displayed on the corridors were a little difficult to read. Staff eat with the residents and the Manager informed us that she ate with Residents every Thursday.

Activities and Community Links

The activities room, upstairs was bright and airy - we evidenced "beauty day" and hand massaging taking place. There were lots of examples of art work. The Activities Co-ordinator had a supply of dolls, clothing, nappies, etc. to engage lady residents suffering from dementia - she also held regular 'doll days'. One resident said, **"They have some good games nights!"** We understand these take place in the activities room. Due to the various mental health conditions experienced by the residents, activities were often 'little and often.' Staff keep a log of people participating or declining the activities programme. They have a mini-bus for outings and also short walks. Residents have personal allowances for sundry expenses. There is a residents' lunch club for residents who are not feeling agitated on that day. There is a comfort fund for activities but residents do pay for external activities. Two activity co-ordinators actively ask residents and/or relatives what types of interests and activities are most appropriate.

There was also a sensory room - this was locked and not in use at the time of our visit.

Additional services included: chiropody, hairdressing (being used actively on our visit), visiting GP twice weekly (and residents are able to stay with their own GP if possible) and Beauty days - held in the activities room. Representatives understand that regular quarterly meetings are held with residents and relatives which gives confidence of good communication and consultation. The Manager holds an "open house" on a weekly basis for relatives.

Feedback

We talked to members of staff including those employed in care, nursing, laundry and housekeeping - all reported that they were well treated, happy in their work, and well trained and supported. They felt they had every opportunity to undertake additional training if they so wished.

One resident said, **"The food is wonderful, I've actually put on some weight. The staff are great, very caring."**

A relative said, **"It is a good home but they need more staff here at feeding times."**

One Care Assistant said, **"I love working here, there is something different every day."**

A Nurse said, **"I think it is a privilege to look after people who have worked so hard all their life."**

Another Nurse commented, **"I really enjoy my work and the residents are lovely."**

A Housekeeper said, **"I like my work, I followed the Manager when she was appointed."**

A Senior Care Assistant said, **"I enjoy working for HC-One and they have lots of equipment now."**

Additional Comments

None

Feedback from Provider of Service

<i>No feedback received at time of publication.</i>
