



Crelake House Residential Care Home
Results of our Enter and View visit 23 June 2015

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Details of visit

Service address: Crelake House

4 Whitchurch Rd., Tavistock, Devon, PL19 9BB

Service Provider: Crelake Care Limited

Accountable persons

Miss Jennifer Louise Collins *Registered Manager*

Andrew Maclean *Responsible individual*

Date of visit: 23rd June 2015

Authorised Representatives: Katherine Crompton and Caroline Lee

Contact details: Telephone 01392 248919 ext*115

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Acknowledgements

Healthwatch Devon would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme.

Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

To view the Care Quality Commission report for this home please [click here](#)

What is Enter and View?

Part of the Healthwatch Devon programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to

service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch Devon safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they will inform their lead who will inform the service manager, ending the visit. In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the [CQC](#) where they are protected by legislation if they raise a concern.

Purpose of the visit

- To explore with people who use services, what good care means to them
- Identify examples of good working practice.
- To contribute to a short consumer guide for people seeking help with residential care in Devon.
- Capture the experience of residents and relatives and any ideas they may have for change.

Strategic drivers

- Aging population
- Care homes are a Local Healthwatch priority

Methodology

This was an announced Enter and View visit to support our “Good Care Means to Me” project.

We approached the owners, Mr and Mrs Maclean, and the Manager, Jennifer Collins, before we spoke to anyone in the care home. We took their advice on whether any residents should not be approached due to their inability to give informed consent, or due to a safety or medical need.

As authorised representatives, we conducted short interviews with 9 residents, the owners and 2 members of staff.

The owners discussed topics such as refurbishment of the kitchens to meet regulatory standards and general improvements over the last 3 years. The manager also expressed her desire to have a “non-routine” approach to care which gave the resident freedom to choose, and made care individual to them and their needs.

Authorised representatives also approached the residents at the care home to informally ask them about their experiences of the home and, where appropriate, other topics such as accessing health care services from the care home may also have been explored, to help with Healthwatch Devon wider engagement work.

A proportion of the visit was also observational, involving the authorised representatives walking around the public/communal areas and observing the surroundings to gain an understanding of how the home actually works and how the residents and service receivers engaged with staff members and the facilities. There was a checklist prepared which was used for each resident interview.

Summary of findings

On the day that we made our visit, the evidence shows that the home was operating to a high standard of care.

- Residents were happy to talk to us.
- We observed staff interacting with residents in a positive caring manner
- Residents told us that they were generally happy with the care they received in the home
- we were told that there was a range of social and recreational activities available to the residents, and that they had a choice as to what they did.

Results of Visit

Environment

The home is set just off a main road, a short distance from the town centre. There is a pleasant approach with several parking spaces, a welcoming path to the main entrance, and is quiet.

We observed that the home was light and airy and was very clean and free from any unpleasant odour. The overall impression was that it was well-maintained with clean paintwork and soft furnishings and carpets. One resident described it as being “like a hotel”. Another said the home “is set out to make you feel comfortable.” There were several areas where residents could sit, including the main lounge, a bright conservatory, and a library. Residents told us that they could stay in their rooms if they wished. The owners told us they went to considerable lengths to involve the residents in the choice of furnishing, decoration etc. and in making the rooms individual to each person by encouraging them to bring some of their own furniture and personal possessions.

The dining room had several tables set for the evening meal, and residents could have their meals served in their room if they wished.

Most residents felt the home was well laid out and convenient, and we were told the environment was made very much to be a “home from home”. There were

plenty of books in the library and pictures on the walls. The corridors were free of obstruction.

Getting out and about

Several of the residents we spoke to did not feel it was important to get out and about, but welcomed the support they received within the home to remain as mobile as possible, sitting in different areas etc. The manager mentioned that they try and arrange activities in different areas of the home to give residents a change of scene. One resident was not able to go out, but tried to move around in the home when she could. She stated that the staff were very willing to assist her with a wheelchair when necessary. Staff also assist with visits to hospital where necessary.

One resident who was very active had been into town that morning which is a short distance from the home. Outings can be arranged if residents wish it. A couple of residents with learning disabilities go out every day to activities in town, to drop in centres, and have support workers who take them out. Several residents mentioned using taxis to visit friends etc. and the home had organised an outing to Badgers Holt. A member of the staff would like to be able to offer more days out.

The management of the home strive to balance the needs of the “home-bound” residents and those of the more active.

Elements of the home which contribute to wellbeing

The residents liked being able to have their own personal possessions around them in their rooms. Several said their main activity was reading or watching television, but others knitted or did embroidery.

One resident mentioned they had found it difficult to be in the home at first, mainly because they had moved very quickly from hospital to the home. They had not had a chance to visit beforehand; this was not the fault of the home, but external circumstances which they understood. Other residents knew the home before moving in because they had relatives or friends who had lived there, and they thought the home would be a good one for them.

Everyone felt the staff were kind and thoughtful, offering help when it was needed, and always treating them with dignity and respect for their privacy. Staff were observed knocking on room doors before entering at the resident’s invitation. One person said

“It’s nice and homely, a nice atmosphere. Staff take an interest, pass the time of day and have a laugh and joke.”

This feeling of homeliness was mentioned by several people as being important, staff and residents alike. There was no set routine to which the residents had to conform. They enjoyed being able to do “what I like, when I like”. This applied to mealtimes as well as bedtimes etc.

One person mentioned the importance of “companionship” with other residents, acknowledging the difficulty this posed in the frail elderly population within the home, but said that staff dealt with this sensitively.

“Companionships, I get to know people then, they die and you really feel it, they [the staff] are like family (but they are very discreet)”.

Activities

People were encouraged to join in organised activities, but not if they didn't want to. Many residents read or watched television in their rooms, but others were knitting in the lounge during our visit.

A hairdresser visits the home regularly and chiropody is also available.

The home has a “Wishing Tree” where residents attach a leaf if they have a wish, and then a star when it is achieved. One lady wanted to hear the dawn chorus so the staff woke her at 5.30am to hear the birds sing.

No-one expressed a desire for more activities, but the manager and staff mentioned they would like to bring groups or activities in from the local community, in line with interests the residents may have, eg photography, or older motorcycles for some of the men. There are opportunities to help with gardening, feeding the birds, dancing. Spiritual needs can be met through the provision of communion.

The home has a newsletter for the residents and their families and residents are encouraged to write articles and memories etc. for inclusion

Residents

The interviews were carried out by one Healthwatch representative to one resident, and one person had a family member with them. Some were spoken to in their rooms after invitation, others in the lounge or library. The residents told us they felt well looked after and safe, and that staff were kind and attentive. When asked what they liked best about living at Crelake House, people said “it was like a hotel” and that they didn't have to worry about anything. If they had a problem they could discuss it with staff.

Food

The food was reported to be good, and a choice was always available, with residents able to request something else if nothing on the menu was to their taste.

The owner, Mrs Maclean, said,

“Food is important because it's one of the last things they can enjoy. I buy all fresh fruit and veg. We have 2 cooks who cook fresh food. We have tried to make meals an event, taking time over meals.”

Birthdays and Christmas are causes for celebration with special meals and presents. Relatives and friends are able to join residents and refreshments are offered to visitors.

Staff

Staff welcomed us to the home, knew we were coming and introduced us to residents. The manager also expressed a desire to meet with other home managers to share good practice. The Healthwatch Devon Partnerships Officer has passed her name to another manager in Devon and also shared details of the Devon County Council [Provider Engagement Network](#) and we hope that our “Good Care Means to Me” project will help share ideas that work amongst the care home community.

Visitors and Relatives

A resident’s next of kin was present and they were very happy with the home, which they had chosen when another relative had been well cared for there.

Visitors were welcome in the home at any time. One of the members of staff we spoke to would like to see more people taken out by their relatives.

Recommendations

This report recognises the good practice and care that was observed during the visit, and the value placed on the homely surroundings, and the friendly, understanding attitude of the staff and owners.

- Healthwatch Devon recommends that the management pursue their aspirations to bring more community group and outside activities into the home. To reflect the interests of people, any planning should include interested residents. Healthwatch Devon would be pleased to provide signposting to relevant community groups and activities.

Service Provider response

The owners of Crelake House, Mr and Mrs McClean and Jennifer Collins who is the registered manager, have read this report and are happy with the content





For copies of this report please visit the Healthwatch Devon website or contact:
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