

Healthwatch Cheshire West Enter and View Report

Enter and View Visit to	Stonehouse Care Home, 55/57 Cheyney Road, Chester, CH1 4BR
Date	25 August 2016 arriving at 10:00am
Authorised Representatives	Deanna Mithen, Pam Hunter and Alan Murphy
Staff Present	Jonathan Sands, Care Manager (Home Manager, Lisa Wilford was on leave)
Background	This is Healthwatch Cheshire West's first visit to this care home. The home was just registered in June, but this was due to changes in ownership; recent inspection by the CQC (March 2016, published May 2016) rated the service as good. Stonehouse is a residential care home run by Stonehouse Care Ltd. It is registered for old age and physical disability. The home has 35 bedrooms and when possible can offer respite care as well as permanent places. On the day of our visit 33 beds were occupied, a small number of these residents have dementia. The home is dual registered and has privately funded as well as local authority funded residents. About half of service users receive financial support from the local authority. The building, which has been converted from existing housing and multiple extensions, sits in a residential area just outside Chester City Centre opposite Chester University. This was an unannounced visit by Representatives.
Overall Impression	<p>The facilities and equipment are clean, organised and well maintained. As the home was converted from existing houses, with added extensions, all the rooms differ in size and lay out and are connected by rambling, narrow corridors which do not benefit from a lot of natural light; as a result, parts feel a little closed in at times but this is offset by the good state of repair and staff.</p> <p>Overall there is a very positive feel to the home and all the staff we met were friendly, open and caring. Jonathan was very accommodating and helpful. We observed positive interactions between staff and service users.</p> <p>The staff seemed to care and the care manager welcomed our feedback and said he would look into some of the points we raised during our visit.</p> <p>All the residents/service users we spoke with were happy, liked living there and spoke highly of the staff. However, Representatives did feel the atmosphere seemed a little flat during our visit; there weren't any activities taking place or much socialising going on and there didn't seem to be much interaction between residents themselves with most watching television or sleeping in chairs or eating.</p>
Any ideas or suggestions for improving service?	<p>We felt that there could be more activities in the home, also a wider variety of activities on offer and maybe more outings. The home could maybe consider nominating a member of staff to be activity coordinator to have additional training or to shadow other activity coordinators in neighbouring care homes or hiring a coordinator.</p> <p>Perhaps develop greater involvement in the local community and explore volunteering potential from the university as a way to increase activity/engagement for service users. A further suggestion would be to introduce a schedule of meetings across the year for staff, for service users and for relatives to give everyone an opportunity to share ideas, make suggestions and support each other in the development of the home.</p> <p>Maybe adding some greenery or other decoration in the courtyard.</p>

Environment

Facilities - The home sits in a residential area a mile outside Chester city centre, opposite Chester University and within walking distance of the Garden Lane shops and there is also a bus stop in close proximity.

The building sits back from the road and has a small car park out front bordered by trees and shrubbery. We did not notice if there was lighting in this area.

There is an entrance/reception area where we were asked to sign in and also noticed a resident's register, comment cards and box as well as information booklets which contain instructions on making complaints and a copy of the QQC report on display.

The interior was well maintained; it has a mixture of wood flooring and carpet (there were some bubbles and small stains on the carpet but nothing out of the expectation for its type and volume of usage). The décor appeared slightly dated (no one could recall when it was last decorated) but was in good repair and maintained symmetry and a theme throughout and contained matching furniture. As mentioned above, the buildings and additions are connected by long narrow interior corridors creating a slightly confusing layout with little natural light making it feel a little cramped and confining in some places, though the facility was well lit throughout.

There is a small dining room in the front of the facility with a large window that offered the most natural light visible in the home. Sited here were small tables with flowers on each and chairs on wheels that are easy to move. It also has a self-service fridge that was stocked with juices, fruit and snacks as well as a shelf with books and DVDs. There were still some residents having breakfast while we were there, though most were sitting on their own, not a lot of talking. There was music playing on a sound system, though it had a bit of a modern tempo and we question whether this was residents or staff choice and the ring volume on the phone in this area was very high and it could be heard ringing throughout the dining area several times during our visit.

There are four nicely appointed lounges with chairs, televisions and each had a window and gas fireplace. The facility has a courtyard (which is closed on all sides), though it is a little bland. We only saw one table and a few chairs here. There were no flowers, greenery or other decoration; however, it does have a nice retractable canopy to offer shade from the sun (the home's brochure mentions a larger paved sun terrace though we did not see this and no one mentioned it).

The 35 rooms are all private and have en-suite toilet facilities (there are no showers in the rooms) over two floors with a manager's office on the third. Each room is equipped with an arm chair, wardrobe, bed (we were advised some rooms have profiling beds), flat screen television with 'Freeview' and window (though the view from the vacant room we visited was of an industrial vent). Residents are permitted and encouraged to bring their own additional furniture and decorations and we were advised residents can choose from any available rooms.

There are two communal bathrooms and a shower room. The communal bathroom we were shown had an adjustable height bath with a seated hoist/chair and a spa bath function. This facility appeared quite new. The communal shower room had a cubicle shower with shower chair. The home does not have a level access shower/wet room facility, which would facilitate greater independence for service users. The bathrooms were clean and tidy.

The facility also has a lift, a call system, manual hoists on each floor, wheel chairs, laundry facility and a salon treatment room.

All equipment we saw was well maintained.

Environment/Atmosphere - All staff were engaged in assisting service users during our visit, but there was not a lot going on, it was rather sombre and quiet. We only saw about half of the residents while we were there - mostly in the dining room. The lounges only had a few residents, most of whom were sleeping in the chairs or watching the television. Representatives felt that there was not a lot of socialising between residents and only one person had a visitor while we were there.

As mentioned above the music and ringing phone in the dining room were a little loud and disquieting.

Health and Wellbeing

Staffing - The service employs about 20 staff members in all.

The manager is assisted by two care managers (either of whom are on duty during the day) as well as two senior carers and three team leaders who work at night and four care staff on duty during the day. There are no trained nurses on staff.

All staff are recruited at NVQ2 and above and have a three month probationary period before beginning a series of practical and e-learning modules on such topics as Health and Safety, Fire, Lifting, Moving and Handling, etc. Representatives were told that all staff are encouraged to and supported in furthering their qualifications (e.g. the care managers are working toward NVQ 5).

We were informed that the service does not use agency staff and Care Manager Jonathan advises us he thinks for the residents, consistency is best; familiar faces, people that know them.

We were advised that they do not have staff meetings, but there are hand over meetings between shifts and very low staff turnover.

All staff we encountered greeted us and were friendly. They were all engaged in assisting residents during our visit and all seemed caring and busy and we observed them dealing patiently and respectfully with service users. One was helping a service user to find her glasses.

While we were in the office, the Care Manager took a call about a resident and seemed very up to speed without having to look at any files. He seemed to be very engaged and cares about the quality of the service and care he provides and feels it should be about the residents' and 'what they want.' He was very helpful in showing us around and knew all the residents names, though he has only been in place six months (he replaced someone who retired after many years).

All the residents we spoke with praised the staff.

Care - We were informed that prior to taking up residence, assessments are done in home for each service user covering: mobility, moving and handling, equipment, aids, interests etc. as well as obtaining history, with permission, from their GP.

All residents have care plans that are assessed and revised monthly and there is also an annual review of care plans with families and residents input. We were shown the master sheet demonstrating this. Each service user has an identified Key Worker and the Care Manager keeps daily records on each service user. We were informed that there are no residents and family meetings held and that service users keep their own GPs and there are daily visits by the district nurse to change dressings. Medications are dispensed by the home's staff.

Residents GPs visits on a regular basis.

Chiropodist visits every two weeks and vision check visits are also arranged.

Health and Safety - All doors leading to stairs have code locks. There is a new fire system with plenty of visible smoke detectors; there is a fire evacuation plan which Jonathan described to us.

The radiators were covered. They have wheel chairs stored safely, grab rails fitted where necessary and raised toilet seats throughout. Corridors were clear and clutter free and the facility was well lit throughout.

There is an operational call system.

Complaints - We were assured that there is an open door policy regarding complaints and concerns and assured anything raised is listened to and are passed on to the registered manager for the necessary action. The complaints procedure is displayed on the residents/activities board and also contained in the information booklet.

Cleanliness - Stonehouse was clean, tidy and well organised throughout though there were crumbs on some of the tables in the dining room as well as debris on the floor, however, there were still residents in the dining room at the time of our visit so this is to be expected. A communal toilet was noted to have toilet rolls and an aerosol canister on top of the cistern which poses an infection risk. However, when we mentioned this to Jonathan he advised he would look into and address

There were no unpleasant odours.

Cleaning was taking place while we there and Representatives noted that there were plenty of glove and hand sanitizer stations. The carpets did have some stains and bubbles, but were in good order considering the type and volume of usage.

Food - The kitchen was food hygiene inspected in February this year with a rating of five. We were advised by Jonathan, the service has a three week rotational menu containing three categories of food: normal, soft and liquids with options for the residents to choose from and we were advised they will cater to residents and take requests and also offer high calorie shakes. We noted though that the menu on display during our visit did not have any options for lunch - only chicken pie was available and when pointed out to Jonathan he said he would take that away. Residents can eat at any time in the dining room or their rooms. We were told that breakfast starts about 07.00, lunch around 12.15 and tea around 16.15 also that coffee and tea are served between meals. There is also a self-service fridge in the dining area filled with drinks, scones, fruit, chocolate etc. from which residents may help themselves at any time. Jugs of water and drinks are also taken to lounges and rooms. All the residents we spoke with advised us the food was good.

Activities and Community Links

Visitors - We were advised that visitors are welcome to come at any time, including meal times. There was only one resident with a visitor while we were there. We were told that sometimes relatives will visit and take residents out and we were advised they are welcome to come along on outings. Residents can go out unaccompanied, though we were advised only a few do - there is a board to show residents who are out and about; one was out at the time of our visit. The facility is within walking distance of shops and takeaways on Garden Lane.

Activities - The home does not employ an activities coordinator; we were advised it is shared by staff on a rota basis. We were advised that there are activities daily, taking place usually in the afternoon and a member of staff goes around the evening before to poll residents (we saw a sample and yay and nay appeared to be about half and half). There is an activity board in the hallway down from the dining room and there is an activities cupboard with games and craft materials next to one of the lounges that can be accessed by anyone including guests.

Arranged activities appear to be fixed e.g. board games one day, bowling another day. We were advised that they try to base activities on the hobbies and interests of the residents and Jonathon reported that there are activities for people with dementia e.g. reminiscence groups, memory boxes etc. and that staff are currently discussing starting up some baking activities. The home does not have its own transportation and rely on taxis, though the care manager advised us that they arrange outings and recently went to the zoo and they do have visiting entertainers and that a singer came recently. Representatives were told that staff do encourage residents to participate in activities and look out for persistent refusers to try to ascertain why, see if they need help, etc. and will involve family. There were no activities taking place when we were there and most residents were watching telly or asleep in the chairs. The home does not have currently any volunteers visiting. Representatives were told that hairdressers attend two days each week. We spoke with one long time resident who advised us there was not enough going on and they are bored, she advised she has been there six years and has not been on an outing. A visitor also told us that he felt the same, there is not enough going on when he was there; mostly people were watching telly or asleep in the chairs.

Feedback

Service users seemed very happy with the standard of care they received and all those we spoke with made favourable comments about the staff.

They advised us:

- They were, ***“Very tolerant, supportive and helpful.”***
- ***“The staff are first class!”***
- ***“Very patient, tolerant and supportive.”***
- ***“I’d give them twelve out of ten and the food is excellent.”***
- ***“Can do what they want.”***

- *“I like living here.”*
- However, a service user said, *“We are bored,”* and a visitor made a similar comment.

All users we spoke with complimented the food.

Additional Comments

Authorised Representatives would like to thank all staff who were welcoming and co-operative.

Feedback from Provider of Service

At time of publication no feedback received.