

Healthwatch Cheshire West Enter and View Report	
Enter and View Visit to	Winsford Grange Station Road Winsford, CW7 3NG
Date	23 rd November 2016
Authorised Representatives	Christine Banfi, Sue Masterman and Pamela Hunter.
Staff Present	Amanda Broad - Manager
Background	<p>Winsford Grange is owned by Community Integrated Care (CIC), a 'not-for-profit' organisation which runs a number of different types of care homes country-wide, and is based in Widnes.</p> <p>It has 60 beds and is divided into four sections: Austin and Dickens which cater for the elderly frail, and Chaucer and Bronte which are E.M.I. There are also two discharged to assessment beds paid for by Continuing Health Care.</p> <p>The home manager, Amanda Broad, told us that Winsford Grange was closed to admissions earlier this year due to a safeguarding issue regarding a fall. Since then they have been working with the relevant agencies to improve matters, and are now able to admit again. However, the management have decided to restrict their admissions to two a week to enable a safe and smooth transition. Because the home also provides some palliative care beds this can mean it takes longer to get back to full strength.</p> <p>Amanda told us that she has been acting manager since the previous manager was promoted to a position outside the home. She has been at the home for 11 years as a nurse and has acted as the interim manager before and that she is currently waiting for her registration to come through.</p>
Overall Impression	<p>Winsford Grange appeared bright and welcoming. It is a purpose built care home. The corridors are wide and airy, with large windows that mostly overlook the gardens. These look well cared for and are a credit to those who volunteer to maintain them. Staff appeared friendly and welcoming and were more than happy to answer Representatives' questions.</p>
Any ideas or suggestions for improving service?	<p>We suggested to Amanda that she looked towards planning more regular meetings with herself and her staff. This would ensure a cohesive strategy going forward.</p> <p>We also discussed the resident of the day system (that many homes now use) to ensure a thorough examination of every aspect of a resident's needs.</p> <p>Representatives feel that a computerised planning system would benefit such a large home.</p> <p>The development of additional dementia specific activities.</p>

Environment

Winsford Grange appeared clean and freshly decorated. The entrance area displayed useful information about the home and its activities. At the time of our visit, shortly before the fund-raising Christmas Faire, there were cheerful and tasteful Christmas decorations throughout most of the premises. We saw a 'friends and family' survey, a menu questionnaire and relevant health and safety information.

The wide corridors allow for easy access and overlook the gardens which were established by a retired staff member a few years ago and are maintained by volunteers. They are well used by residents in the summer months - Amanda told us that they had transformed one part of the garden into a beach area this summer creating a relaxation area for residents and relatives to relax there and demonstrating a creative use of the space.

In each unit there is a lounge area with informal seating. There is also a smaller lounge for quiet use. The rooms looked clean and well decorated. Most have ensuite toilets. There are photographs of the residents enjoying activities, including playing with some quite exotic animals, displayed on the walls in the E.M.I. unit and on a digital screen in the reception area.

Food/Dining - The large communal dining room is adjacent to the kitchen and is spacious and well appointed. All residents can choose to eat in the dining room, although many residents choose to eat in their rooms or are being nursed in bed. There is also a small dining area in each E.M.I. unit. The company uses *Apetito* meals which are prepared off site and then heated in special ovens. Those residents we spoke to were happy with the meals. It is still a relatively new service, but Amanda said she has had good feedback. A member of the kitchen staff told us they were, "**Getting there.**" The meals are calorie counted ensuring good nutrition. Breakfast is still prepared on the premises and soup and sandwiches can also be prepared if required. Amanda told us of an incident when a resident said she would like a particular item of food but this would be difficult because she had to have pureed food. Staff have tried to accommodate her, by trying different ways to puree this particular food - an indication that the home is very person-centred.

Health and Wellbeing

Staffing - Each unit has between nine and eleven residents at the moment and as a result Representatives feel that the staffing ratios are good. The home uses a three shift system, with three support workers and one nurse on the early shift in each unit. There are two support workers and one nurse on the late shift, with two nurses and six support workers on overnight. This is the same at the weekends. However, Amanda told us they have been affected by the national shortage of nurses. At the moment they are about 100 hours a week short across all four units. They have had to use a lot of agency staff, but because these work regularly for them they are familiar with the residents.

Amanda told us that the company is hoping to attract more nurses by offering them incentives such as paying the NMC pin numbers, (they already pay DBS checks) and offering Nursing Times Online Learning. Staff we spoke to seemed very happy to be working at Winsford Grange. One agency nurse said that she would work for less money there because she liked it so much. She said it was a very happy place.

Staff were observed to be interacting positively with residents on the EMI unit. They were respectful of the individual's dignity while keeping the atmosphere light with a good use of humour and joviality, which seemed to be appreciated amongst the residents and their visiting relatives. A nurse on the unit said he had been there for 14 years. He also told us that the safeguarding incident and subsequent closure to admissions had been very depressing for staff and that they looked forward to being full again because, "**The dynamic isn't right, without the full quota of residents.**"

We spoke to members of staff who had worked for many years at Winsford Grange and others

who were recent additions. They were happy with the training they had received, particularly safeguarding. New staff felt happy that they could ask for help and felt supported. Amanda told us that all nurses were up to date with their medical training and they were now completing their competency assessments.

We saw how a threatening incident, with one resident in EMI pulling at the arm of another, was quickly and gently defused by distracting the resident with a friendly word while moving her chair to the side. Another resident went barefoot. Amanda told us, ***“When she first came here she would strip off all her clothes and hide them or push them out of the window. We’re happy with bare feet.”***

Amanda told us that although the nurses meet with the care staff on the units to share information, and there are hand-over meetings, there are not many formal meetings with the whole staff. She thought the last one was in June or July. She was intending to have group meetings when various topics can be discussed as a way of improving practice. We suggested the home might benefit from having more regular formal meetings to create a unified approach and to show strong leadership.

Representatives were informed that following the CQC review and the safeguarding issues earlier in the year, the staff have been involved in the Aqua project about falls and this has led to a better understanding of risks. We were told that mandatory training is almost up to date, and should be complete by early January. CIC uses Utopia training services who visit the home to complete training. Amanda uses a matrix system to check who has training due. The CQC review also noted that capacity assessments were not in place for all residents. The home is working towards this. Although urgent assessments are in place, we were told that they are awaiting CWAC to complete paperwork.

A recent development is the use of ‘tele-swallowing’, a video-link system enabling a Speech and Language Therapist at the hospital to remotely analyse a person’s swallow. This has necessitated Wi-Fi to be installed throughout the home.

Amanda referred to us, the pressure she feels from hospital wards that need to discharge a patient into her care without allowing her sufficient time for assessment of their needs. She insists that she must assess them first to establish whether the home can meet the needs of the person. She told us that she won’t accept admissions after 5pm because they have only two support workers at that time and many of their residents need help with eating. Also there is no GP available at that time.

Amanda told us that care plans are updated monthly. There was evidence that recent information was included in the care plans we looked at. However, it might be difficult to locate necessary information quickly. A computerised system would make the care plans more accessible. In the area local to the home, there is a shortage of GP admissions and we were told they have to use a number of surgeries on a rota basis which means that a new resident may have to wait to be registered with a GP.

The home is equipped with a variety of hoists and specialist equipment which we were told is maintained and serviced regularly. We saw a well-equipped, extremely clean bathroom and a schedule which indicated that residents had regular baths if they wished. The home also has eight profiling beds with integrated bedrails and the other beds have pressure relief mattresses. This means the beds can be moved to the appropriate rooms as required.

Medicines are supplied in blister packs by Boots who audit each of the units on a rota system.

Activities and Community Links

The Activities Co-ordinator (AC) has been at Winsford Grange a number of years and now works 37.5 hours. She has recently been made a ‘Game Changer’ by CIC which has meant she has been

away on training days. A care worker from each unit has been involved with activities while she has been unavailable.

There are boards showing a number of available activities and photographs showing residents taking part in a Halloween event. Although the AC wasn't available on the day of our visit, her designated and well stocked activities room showed evidence of preparation for the Christmas Fair. There were no apparent activities taking place on the afternoon of our visit but we were shown an array of Christmas decorations made by the residents. We were also told that the AC engages residents in their rooms; in one-to-one activities appropriate to their needs.

A Representative asked a member of staff about dementia specific activities such as memory boxes or reminiscence games. She was not aware of any but said the activities person wasn't on duty that day. We were informed that residents/relatives meetings are arranged about every three months but there hasn't been much response in the past.

Recently the AC sent letters about the next meeting and the response was much better. They were able to reassure relatives about the introduction of Apetito meals.

The home has a visiting hairdresser and a manicurist who also undertakes hand massage sessions. Amanda is trying to recruit volunteers to visit the home. Church representatives do visit and faith services are held.

The home has its own designated bus and residents, staff and relatives have visited garden centres and other venues including a trip to Blackpool.

Feedback

The senior care sector of CIC has introduced the Sunshine project which allows all their homes that care for the elderly to link together to share best practice and establish a standardised quality of care. This was viewed positively by Amanda who said she felt supported by the managers this system has created. She has regular meetings with her line manager and hopes to be involved in relevant decision-making.

Representatives were told that complaints are taken seriously. They are fed back to CIC via computer and a decision made as to how the complaint will be dealt with so that any lessons can be learnt. A recent complaint was resolved in house.

One representative asked a resident sitting with a relative if he liked it here and he nodded in affirmation. His relative said he is, "**Very happy here,**" and explained it is much better than the last home where they felt they needed to visit every day. The same relative showed photos of the resident taking part in an activity involving visiting animals. Another relative said the home was, "**Wonderful,**" and said the food was "**Very nice.**" However, she felt, "**There could be more activities... the activity coordinator is very good but she's so busy!**"

One lady who was being cared for in bed told a Representative via her iPad, that she was, "**Very happy at the home.**" She said, "**The staff are great.**" Although she could no longer speak and was fed through a peg, she was happy and looking forward to seeing her family at Christmas. The staff told the Representative that she was very sweet and staff enjoyed caring for her.

Feedback from Provider of Service

At time of publication no feedback received.