healthwatch Cumbria

Croft Avenue Care Home
21 June 2017



Contents

Introduction	3
About Healthwatch Cumbria	.3
Details of visit	.3
What is Enter and View?	4
Purpose of the visit	. 4
Methodology	5
Findings:	6

Introduction

About Healthwatch Cumbria

Healthwatch Cumbria (HWC) is an independent community based organisation for the people of Cumbria. It was set up to champion the views of patients and people who use health and social care services in Cumbria. The goal of HWC is to make services better and imrpove health and wellbeing. HWC achieves this by talking and listening to people in all parts of Cumbria and telling providers of these services local people's views and challenging organisations that need to do better and highlighting examples of good practice.

HWC is part of Healthwatch England who act as the national consumer champion for all local Healthwatches.

Details of visit

Service Provider	Bupa
Service Address	Croft Avenue Care Home, Wordsworth Street, Penrith CA11 7RJ
Date and Time of visit	Wednesday 21st June 2017 11.00am
Authorised Representatives	Jane Irving, Hilary Barker, Elaine Ralph
Healthwatch Cumbria contact details	Healthwatch Cumbria, The Best Life Building, 4-8 Oxford Street, Workington, Cumbria, CA14 2AH Tel: 01900 607208

Acknowledgements:

HWC would like to thank the Manager Jacqueline, the staff, the residents and members of their family who talked to us at the home.

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.

What is Enter and View?

Healthwatch Cumbria has a statutory right (Health and Social Care Act 2012) to carry our Enter & View visits to health and social care services to gather the views and experiences of customers, patients, families and staff for the purpose of service improvement. Service providers have a duty to respond to our reports and recommendations.

Healthwatch Cumbria will share its findings with Healthwatch England, the Care quality Commission, services and the public.

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. This is so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Purpose of the visit

To engage with residents in care homes in Cumbria to collect and record their experiences of accessing health and social care services, primarily the out of hours GP service Cumbria Health on Call (CHoC).

To identify and champion examples of best practice with regard to resident experience including: surroundings, activities and meals.

Methodology

Croft Avenue staff were made aware of the Enter and View process and that HWC may visit. The home was not given a confirmed day or time for when this visit would be. The conversation with the home detailed the statutory role of HWC to carry out Enter and View visits and what the purpose of the visit was about.

There were three residential care homes in East Cumbria that were selected based upon the homes recent engagement with the CHoC service identified through the HWC CHoC survey. The HWC CHoC survey highlighted issues affecting those in care homes when trying to access some health and care services.

On arrival at the home the three Enter and View approved representatives carrying out the visit introduced themselves to the staff member present with identification and detailed the reason for the visit at the care home. HWC staff then introduced themselves to the home manager again identifying why they were there and if HWC could visit at that time. The HWC team then spoke to the home manager in their office. The manager was informed that the findings from the visit would be shared with them.

HWC engaged with staff and residents, including family and friends of the residents, and the home manager about:

- Access to health services
- Satisfaction with activities on offer
- Comments about the home

HWC spoke with:

- 1 member of staff
- 7 residents
- 2 family members

Comments were recorded and observations noted.

Findings:

Croft Avenue is situated in a quiet residential area of Penrith and is a period building that has ample car parking at the main entrance to the site. The home's gardens were looking overgrown and in need of maintenance. The manager informed us that they had appointed a new gardener and that the grounds would be tidied up soon.

The home is owned by Bupa who are a private healthcare provider although approximately half of the number of residents' care was paid for by the Local Authority at the time of the visit.

On arrival the main door was not locked (the manager later told us it is policy to keep door unlocked during the day). In the main hallway there was a poster highlighting the latest CQC rating.

We saw a signing in book in the reception area for visitors to the home and a customer feedback box.

The manager and staff were welcoming and supportive of the visit. The manager was helpful in providing information, showing us around the home and supporting us in speaking with the residents.

One relative told us sometimes there did not seem to be enough staff.

We were shown the two dining rooms, the three lounges, (there was a television lounge, a quiet lounge and an activities lounge). There was a selection of books, cd's and dvd's available along with magazines and newspapers throughout lounge areas.

The chairs in the lounges were placed around the walls of the room at an angle to support residents who wished to talk with one another. The manager said that residents could have personal belongings in their rooms and this included their own tv. Visitors were welcomed at anytime (with mealtimes being protected). The home was decorated with pictures (some were old pictures of Penrith), artificial flowers and ornaments. Some of the decoration and paintwork looked a little tired and in need of maintenance. We noted that re-decorating was just being initiated in parts of the building and the manager informed us that there was further refurbishment planned for certain areas of the building which were looking tired and shabby.

There were various noticeboards around the home; one specifically had a poster regarding an upcoming residents and relatives meeting at the home. There was also an activities programme on a noticeboard in the entrance hallway.

One resident told us about the bedrooms saying that all I "rooms are comfortable and clean",

Access to Health Services:

We asked the manager about access to health services for the residents, who told us If residents became ill then the senior carer on shift would call the GP and use the CHoC service if out of hours. The staff use a direct number to CHoC and not the 111 number as they prefer to have a quicker and more direct service for the residents.

North West Ambulance Service Patient transport usually takes residents to their hospital appointments due to many residents needing a hoist. Family or staff will escort the resident.

Dentists - If residents are mobile then they would go to their own dentist (with support from family/staff). However, the NHS dentist practice is inaccessible for most residents as it is up a steep hill. If staff have to call for a Dementia Care Dentist to come to the home this is a private service which the family have to pay for first. The manager said that the NHS dentists do not come to the home.

Chiropodist - There is an NHS and private Chiropodist who can be called upon to visit the home - they usually visit every 6-8 weeks for those residents who need regular care.

Optician - there is an in-house optician who is Dementia trained and who helps to train the staff with dementia care. Residents have 12 month check ups.

Mental Health - a Mental Health Practitioner visits the home once a month.

Two of the residents told us that access to healthcare from the home was "fine".

Activities

The homes activities co-ordinator organises regular musical activities, quizzes, day trips. We were shown a room which was being used for some of the craft activities and had some of the residents' paintings on the walls. We were informed that this room was also going to be set up with a bar for residents to use.

We were told that the home has a resident cat but none of the team saw it during our visit.

The activity co-ordinator told us they attend the residents/family meetings every couple of months or so to ensure they get feedback on the activities and to ask them what they would like to do.

Volunteer social care students (6th Form) from the local college (Newton Rigg) attend to help with games and activities.

The manager informed us that residents can go to church services if they wish.

A hairdresser visits the home regularly.

One resident felt independent in the home and said "I can go out if I want to".

Residents told us that the "Staff are great "Nothing to improve" and One said that they had recently had a day trip to Blackpool.

Meals

Meals are cooked in house by the resident chef and there is a meal plan/menu in the dining area. Residents are asked in what they want for each meal but they can change their mind. Residents can eat in their own room if they don't want to use the dining room.

We were told that residents could have their own alcohol if they wished.

One resident told us that the "Food is very good; I can ask for different food if I want and I get plenty".

Provider Feedback

• HWC received no comments on the report from the provider having being given the opportunity to do so within the statutory response period of 20 working days.