# healthwatch Cumbria

Ostley House
Care Home

21<sup>st</sup> June 2017



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## 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 improve 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 Healthwatch.

#### **Details of visit**

Service Provider	Barrow and Districts Society For the Blind
Service Address	355 Abbey Road,
	Barrow -in-Furness,
	LA13 9JY
Date and Time of visit	21/06/17 11am-1pm
	·
Authorised Representatives	Oliver Pearson
	Robin Powell
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#### **Acknowledgements**

HWC would like to thank the home manager Helen Silver and her team for showing us around the home and introducing us to some of the residents.

#### 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

Healthwatch Cumbria (HWC) telephoned the home to speak with the manager Helen, to inform her of our engagement programme of Enter & View visits to Care Homes in the south Cumbria area. A time and date for the visit was agreed and an email of confirmation sent to the home. Two HWC representatives met with Helen, the home manager, who introduced us to key members of her staff team, told us about the home - specifically some of the practices designed to aid those who were visually impaired - and then she gave us a walking tour of the home.

After the tour we were introduced to some of the residents and the following report is based on our observations, learning and conversation with 19 residents and 4 staff members.

Six homes were selected for visiting in South Cumbria based on the geographic location of the homes and their recent participation in the HWC CHoC survey that highlighted issues affecting those in care homes with accessing some services.

Two Enter and View approved representatives introduced themselves to the member of staff present on arrival with identification and detailed the purpose of the visit at the selected care home. HWC staff then introduced themselves to the home manager and again detailed the visit purpose and enquired whether there were any residents who should not be approached. The home manager was also informed that the findings from the visit would be shared with her.

HWC staff engaged with residents, staff including the Home Manager and a district nurse initiated discussion around the following topics:

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

#### There were:

- 19 residents spoken to
- 4 members of staff spoken to

Responses were recorded and observations noted.

## **Findings**

After signing in we were taken through the main reception area and into the living areas of the home. We noted that not only was there a display of staff photographs and names but also a more informal layout of about 20 photographs of happy residents, in colour on A4 sheets displayed prominently on the glass partitions in the dining area.

The home residents all have some degree of visual impairment and as such all signage and information are displayed in a way as to best help them in reading it. The large orange menu board had clear black handwritten wording stating the day, date and menu choices, the television screens attached to the walls that had pictures of that days on duty staff, had their names and roles written in a clear font with contrasting backgrounds to aid residents in reading the information. The monthly chiropodist visits were also printed in large bold font on a contrasting background.

In the main lounge area we saw residents watching a film about local history in the Barrow area on the large 60" "Smart" TV. Staff mentioned that the residents enjoy the features of the smart tv, for example using the internet to watch local clips on you tube or for googling information about the film, or the stars they were watching. The large screen size and use of subtitles was of particular benefit to the residents.

We were shown a Merlin desktop video magnifier that residents have easy access to and it was explained to us how they can read personal letters on this by adjusting the font, background and the colours to best suit their requirements. This willingness to embrace the use of technology to enhance the quality of life for the residents was evident through the managers and staff enthusiasm in wanting the best for their residents. Indeed we were told how the manager has visited every other - specifically blind - care home in the country to observe and share good practice. We heard from the manager how staff together with residents experimented with different aromas to help those with advanced visual impairment or dementia to be able to locate which room they are by the association of smell alone, for example the lounge area smells of a coal fire, the bedroom of washed linen etc. An example explained to us of this is the residents towels have been selected with a person centred criteria, namely that the individual was given a selection of towel colours and texture and they chose the one they could see, feel the best.

We were told that Ostley House has visits from schools with the pupils playing games and board games with residents and volunteers regularly come to read newspapers to them.

On asking a group of residents what the best thing about the home was we got the following responses:

- "Very caring staff."
- "The place is exceptionally clean; you get clean bedding every week! And they keep our clothes clean and ironed."
- "The rooms are a good size."
- "Couldn't be anywhere better"
- "Really happy with everything, the staff, the food, the place."
- "The staff are always welcoming to family and friends."

One resident allowed us to look round their private room. We saw it was indeed a "good size" and it had plenty of space for personal affects, photos and memorabilia. The en-

suite toilet/wet room was also large and had folding doors that opened outwards. We were informed that this safety feature ensued that if a resident was to slip and fall in the wet room the doors would still open even if they had fell against the back of the door. We were informed all rooms were of a similar layout and size.

When we asked a table of four residents what life in the home was like we got the following responses;

"Champion! The best."

"I'm very content here and have been, for the two years I've been here."

"I don't want to be anywhere else, I love it here, they'll have to take me out of here in a box."

#### **Access to Health Services**

We were told by Helen, that a staff member always accompanies a resident if they need to go in an ambulance, and that the family members are contacted. All residents have Care Plans in place for such occasions and the content/wishes are followed, the staff member accompanying the resident in the ambulance would also accompany them onto A&E or on the ward.

With regard to accessing health services one resident said;

"If you need anything like doctors or dentists, they arrange it for you, no fuss."

#### **Activities**

On speaking to residents we were told how they enjoy, bingo, quizzes and visiting entertainers. We saw photographs of some of these events and the residents seemed to be enjoying themselves - especially one lady who got to touch Elvis's face! The home has an activities coordinator and although she has a schedule she is keen to ask what individuals feel like doing on a day to day basis to ensure all are catered for. One resident was hoping the weather would improve so she could go out into the garden later that day; They told us "I love being in the garden and feeding the birds, I go out as often as I can."

We were shown a newsletter that is printed monthly by the activities coordinator and left in communal areas for residents to read. Its contents included a photo of all residents who had a birthday that month (including their age and birthdate), historic photos of local landmarks /places, pictures of local flowers and poetry. The whole newsletter had clearly been created with love and attention to detail and was produced in as accessible format as possible.

We saw that there were visits from St Paul's church each month, the dates of these were clearly stated on notice by the entrance to the dining area. We heard how residents, who want, are taken on walkabouts - be they to the local shops or just around the block, all are encouraged to get out and about where possible. We saw a file full of photos of events that had taken place at the home, dressing up days (themed such as, Alice in Wonderland or Charlie and the Chocolate Factory), family tea days where residents families were invited round for tea and sandwiches; all showed that life in the home was rarely dull.

#### Meals

We were invited to meet the catering staff and look around the kitchens, and we saw the weekly menu schedules and a whiteboard with resident's individual dietary requirements and preferences clearly stated. We confirmed with staff that those who are blind are given the menu choices by a member of staff reading out the options. (\* Brail was not an option as none of the residents read brail). Staff showed us some of the crockery and mugs they used to make it easier for the visually impaired. These included light blue crockery to contrast with food portions and a range of bespoke mugs to enable their usage by those with varying degrees of dementia.

Staff told us about some of the theme days they have had and how they will adapt the menu on these days. We saw photos of an Italian day where the menu was pasta and pizza and staff dressed as gangsters, we also heard of the Chinese menu and the Canadian menu prepared by a top Canadian chef who was visiting the area.

We were present as the residents enjoyed their dinner and afterwards I asked two residents what they thought about the food:

"You never go hungry in here."

"It's good portions and different everyday."

# Recommendations and Areas of good practice

All residents we saw and spoke to seemed very happy at the home. This reflects the care they receive and the positive atmosphere that prevails there. The manger and staff clearly take a pride in their work and this drives them in seeking new approaches and initiatives to further improve the quality of life for the residents. They seem very responsive to new ideas and by learning and sharing these ideas with other similar services, this can only be of benefit to their residents.

# **Providers Response**

HWC received verbal feedback stating that the home manager was happy with the report.