

ENTER AND VIEW

Wheaton Aston Care Home

Part of the Healthwatch Staffordshire remit is to carry out Enter and View Visits. Healthwatch Staffordshire Authorised Representatives will carry out these visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows 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 Staffordshire Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Staffordshire safeguarding policy, the service manager will be informed and the visit will end. The Local Authority Safeguarding Team will also be informed.

Provider Details

Name: Wheaton Aston Care Home

Address: Ivetsey Bank, Wheaton Aston, Staffordshire, ST19 9QT

Service Type: Residential Nursing Home

Date of Visit: 18th July 2017

Authorised Representatives

Name: Chris Ralston Role: Author

Name: Val Emery Role: Observer

Name: Pauline Blackmore Role: Observer

Purpose of Visit

The latest CQC report had highlighted a number of issues and we wanted to see if these had been addressed. The things to be checked on were as follows:-

- Have trips out been arranged on a regular basis
- Have the staff levels at night been improved and maintained
- · Are call bells being responded to in a reasonable amount of time

The methodology to be used is to;

- Talk to residents about all aspects of their care and whether this is delivered in a way that promotes their dignity and independence including the ability to make choices about their daily lives.
- Talk to residents about staffing levels and whether they feel safe with the level of the care provided
- Talk to relatives, if they are available to ask if they are happy with the care provided to their relatives and whether they are aware and feel able to report any concerns/ complaints
- Speak to staff about training, turnover, support staffing levels
- Observe interaction at all levels between residents, staff manager, and visitors

Physical Environment

External

The home is a purpose built one story building that is well maintained with a large rear garden, which is also well maintained, although there were not many flowering plants in the borders. There were lots of pots and individual planters outside the residents rooms. There is an outside seating area for residents to enjoy in good weather. There is adequate car parking.

Internal

Internally there is a large reception hall which is very bright and welcoming. All the furniture and soft furnishings were in good condition and everywhere was clean and clutter free. Residents rooms are a good size and very well decorated and maintained. All the rooms have individual bathrooms and shower rooms, although they are not ensuite. There are well appointed lounges and dining rooms which are tastefully laid out. Residents are encouraged to bring in some of their own furniture and personal belongings.

Resident Numbers

There are 30 residents at present of which 22 are nursing care and 9 residential. There are two double rooms. Rooms can be used for respite care if vacant.

Staff Numbers

There are 6 carers during the day and 2 carers at night.

There is 1 full time nurse and there is 1 nurse at night.

The manager is also a trained nurse.

There is 1 extra evening staff 6 - 11 p.m. to assist the three others. We have since been advised by the manager that this was implemented to support the night team and that it has been received very positively by both the residents and staff.

There are 2 laundry staff.

There is 1 full time maintenance person.

There is 1 Administrator.

There are 2 Activity Coordinators

There is 1 Chef Manager, 1 chef and 2 catering assistants.

Agency Usage

Agency usage is minimal. We were advised that no agency staff have been used in the last 12 months as they have recruited 30 % above recommended levels to allow cover for leave and sickness.

Resident Experiences and Observations

Most residents we spoke to were very positive about their experiences, though some said it had markedly improved recently with a new activity programme. Some said that they had previously been bored, but are now a lot more involved in activities.

They enjoyed the OOMAH sessions before lunch and they said it improved their appetite.

There was only one negative comment where a resident said drinks were put on the table and he could not reach them. There was a cold coffee on his table and he did ask us to pass him a drink of water which again wasn't within reach. The manager has since advised us that the resident in question has dementia, is mobile and forgets to drink and where he puts drinks. The resident is able to eat and drink independently. His food and fluid intake is monitored on charts and the charts are checked 3 times daily to ensure adequate hydration.

The food looked appetizing and we were told that it was very enjoyable.

Some residents said that they would like to go out more. The new activity Coordinator, who is very enthusiastic, said that this was being addressed

The residents were all well dressed. A hairdresser attended weekly and we were told that carers do nails and other personal care if asked.

We were advised that new call bells have been fitted for all residents.

Family and Carer Experiences and Observations

Family members spoken to were very supportive of the care their relatives received and felt that if there was a problem they would happily raise it with the manager. However, one relative said she thought staff levels sometimes were low at night, especially if there was a problem and that sometimes staff seemed very overworked. The manager has since advised us that this was addressed with the increased staffing on the 6 - 11 p.m. rota and that this has worked well for the staff and for the benefit of the residents.

The relatives we spoke with were complimentary on how the activity programme had improved and how the residents enjoyed OOMPH activities. We were able to see the OOMPH exercises taking place and the residents appeared to be enjoying it and some other members of staff joined in too.

We were advised that the home was always spotlessly clean and the resident personal care was very good.

Activities

We were shown the activity programme that has been introduced and there are activities scheduled every day of the week, with a wide variety of event. These range from the OOMPH exercises, which seemed to be enjoyed by the residents through to Sing Along, quiz's, craft sessions and flower arranging, Bingo, Carpet Bowls, through to a weekly Church service and Mellow Music in the Dining Room with Pre Lunch Drinks.

The residents are now consulted on activities and outings which are now being arranged. Birthdays and special events are celebrated.

The residents also frequently go out with their families.

Catering Services

A brand new kitchen has just been completed and was very impressive. It is run by one Chef-Manager, with another chef and two catering assistants. All the food was cooked on site with food choices daily and a rotating four week menu. The dining room was well set out and the food beautifully presented. Drinks were on hand from juice machines all day.

The menus we were shown were very varied and appealing. We were advised that currently there are no residents with special dietary needs, but that menus could be adapted if necessary. We were advised that nutrition and hydrations are monitored on a daily basis.

Staff Experiences and Observations

We spoke to staff in all areas and all said they were well supported by management. They all said they had a very intensive training scheme, which all took part in. Training was encouraged and staff were allowed to partake in, both in house or with outside agencies. At present, two staff are being trained in the CHAPS programme, which includes wound care and medication at NVQ Level 3 and this will enable them to work alongside nursing staff.

They all felt they could happily raise issues whenever they occurred and they would be listened to. The staff felt that there was adequate cover per shift. Most of the staff have been with the home for many years and are very happy in their work.

Summary, Comments and Further Observations

The home appeared well run, although it would have been nice if the manager had been there that day, as the administrator not able to answer a lot of our questions. We were referred to other staff who were able to be of more assistance.

The Activity Coordinator and the nurse in charge went out of their way to help and both were very enthusiastic about their roles. The Activity Coordinator was particularly impressive.

There was a very calm and peaceful atmosphere in the home.

Recommendations and Follow-Up Action

We recommend that some flowering plants and shrubs be added to the garden, as most rooms looked out on the gardens, which are currently mainly lawn, and the outlook could be brighter.

It would be nice to re-visit when the manager was present as we are sure it would probably be a different experience from what people have said, praising the manager.

Provider Feedback

The manager has given us the following feedback:-

"We are very proud of the standards which we maintain at Wheaton Aston and all visitors are welcome. I believe that the Healthwatch representatives maintained high levels of professionalism and were very kind and compassionate towards our team and residents. I would however have enjoyed meeting them and showing them around our beautiful home. I could have illustrated all of the wonderful things that we do and discussed how we are continually improving the service and shown them the results."

"I would have liked to have been in the home, but due to training commitment, this was not possible."

In response to our question, as a provider of a service did the Enter and View visit help you to identify areas for improvement and if so, in what way?

"Absolutely and I have reviewed and changed a few points. We now have a forum which allows resident the voice to plan how they want the gardens to look and the plants they wish to see. We have brought some of our garden inside to residents who can't get out, such as grass cuttings to smell and flowers to touch."

"I look forward to another visit and Healthwatch will always be welcome in the home."

DISCLAIMER

Please note that this report only relates to findings we observe on the specific date of our visit. Our report is not a representative portrayal of the experiences of all residents and staff, only an account of what was observed and contributed at the time.