



Woodcrofts Residential Home

Widnes

23rd January 2018

Enter & View report



ACKNOWLEDGEMENTS

Healthwatch Halton would like to thank the management, staff and residents at Woodcrofts for their time and consideration during our visit.

WHAT IS ENTER & VIEW

People who use health and social care services, their carers and the public generally, have expectations about the experience they want to have of those services and want the opportunity to express their view as to whether their expectations were met.

To enable the Healthwatch Halton to carry out its activities effectively there will be times when it is helpful for authorised representatives to observe the delivery of services and for them to collect the views of people whilst they are directly using those services.

Healthwatch Halton may, in certain circumstances, enter health and social care premises to observe and assess the nature and quality of services and obtain the views of the people using those services. In carrying out visits, Healthwatch Halton may be able to validate the evidence that has already been collected from local service users, patients, their carers and families, which can subsequently inform recommendations that will go back to the relevant organisations. Properly conducted and co-ordinated visits, carried out as part of a constructive relationship between Healthwatch Halton and organisations commissioning and/or providing health and social care services, may enable ongoing service improvement. Healthwatch Halton's role is to consider the standard and provision of local care services and how they may be improved and to promote identified good practice to commissioners and other providers.

VISIT DETAILS

Centre Details	
Name of care centre:	Woodcrofts Residential Home
Address:	164 Warrington Road, Widnes. WA8 0AT.
Telephone number:	
Email address:	Woodcrofts.alyons@hotmail.co.uk
Name of registered provider(s):	Woodcrofts Residential Homes Limited
Name of registered manager (if applicable)	Andrew Lyons
Type of registration:	Residential Home
Number of places registered:	20

The Enter and View visit was conducted on Tuesday 23rd January 2018 from 10.15am to 11.15am

The Healthwatch Halton Enter and View Team were:

Jude Burrows, Jane Catt and Anne Coughlan

Disclaimer

Our report relates to this specific visit to the service, at a particular point in time, and is not representative of all service users, only those who contributed.

This report is written by volunteer Enter and View authorised representatives who carried out the visit on behalf of Healthwatch Halton.

SUMMARY

Woodcrofts residential home offers supported living for 16 residents with mental health conditions. It can accommodate up to 19 residents at any time.

The home has a long standing staff team and many of the residents have been living here for many years. Some residents also come for shorter stays. The home blends into the local area as it is a row of terrace houses with very little signage.

The staff were friendly and welcoming on our visit.

We felt that the home is dated in terms of décor and has little colour or pictures throughout. It is clean and free of clutter.

The majority of residents are able to go out and about in the local community and so very little health care and other services, such as hairdressers, are needed to come into the home.

Residents are supported to access these services within the community by the staff. The home is near to local shops and opposite a church which offers support groups and activities which many residents access.

OBSERVATIONS

Woodcrofts Residential Home (Woodcrofts) is a residential care home providing accommodation and support for people with mental health needs. It is owned by Woodcrofts Residential Homes Limited. Woodcrofts is a family run home. The current Manager is long standing in his role, having taken over from his parents who ran it previously.



The Home is situated in a residential area of Widnes close to local amenities. Woodcrofts is a two storey building which includes a dining room, three lounge areas and 19 bedrooms, none of which have en-suite facilities.

Parking is available on the main road outside the premises.

Location, external appearance ease of access and parking

Woodcrofts Residential home is located on a main residential street in Widnes, less than a mile from the town centre. It is near to bus routes, shops and an Anglican church. The home does not have its own allocated parking but there is on street parking directly outside the home and there were several street parking spaces available on the day of our visit.

The home itself looks like a row of terrace houses and does not have a typical care home appearance. There is no signage for Woodcroft, just the name and number faintly displayed on the glass above the front door. The front porch is locked but has a door bell to call staff. There is a sign on the door asking all visitors to report to staff and sign in. On arrival we were welcomed to the home by a member of the support team who then introduced us to the Senior, Alison.

Initial Impressions (from a visitor's perspective on entering the home)

The entrance hall to Woodcrofts residential home is a small area with doors leading to communal living rooms and the kitchen. It was very much like entering a private home. There was a small notice board and a pay phone on the wall but no pictures or photographs. No Healthwatch posters or leaflets were displayed. The décor is traditional and our team felt it would benefit from some updating. There is a steep staircase to right of the entrance hall with one handrail and a hall leading to the kitchen area.

Internal Physical Environment

Woodcroft is a two storey building. There are sixteen residents currently living at the residential home. Alison explained that there were some free rooms available and that one room is currently used for storage. All rooms have their own sink but bathrooms are shared.

The decoration throughout the home is cream and brown, with a somewhat dated appearance.

There are three communal areas where residents can watch television or socialise. These areas have several pot plants but a lack of art or photographs on the wall. One living room had a low level book case which contained a large selection of books. There was a musty smell throughout the communal rooms and corridors, which may have benefitted from better ventilation.

There are five shower rooms and two bathrooms available. The team were shown one of the shower rooms, which was in need of updating. A member of the support staff explained that work was due to commence on it in the near future. We were then shown another shower and bathroom which had already been refurbished to a good standard. The wash areas were well lit and clean.

On the ground floor there are five bedrooms and a further fourteen on the upper floor. The support staff informed us that residents with mobility needs are given a groundfloor bedroom so they can avoid using the stairs. The home does not have lift.

Residents can decorate rooms to their own taste and can get support with this from the home's handyperson. The Enter and View volunteers looked at four of the bedrooms which were all large, with lino flooring and a sink. They noticed a smell of urine in one of the rooms and also in one of the bathrooms.

There is no set schedule for maintenance. Private contractors are called in as and when work needs doing. At the time of our visit the rear of the roof was being renovated.

Parts of the corridors were dimly lit and this was most apparent in an area that had 2 steps in it. There were also two steep steps directly behind the door into the Manager's office, which could be a trip hazard to staff or residents needing to speak to the staff. The door was however locked, so a staff member would need to be present when people entered, and the Senior gave a warning about the steps to visitors.

There is an outdoor area at the home that consists of a good sized courtyard and a smoking shelter.

Staff support skills and interaction

On the day of our visit two support staff, the Senior and the Manager were on shift. Staff reported that there were always at least two members of staff working during the day. At night there is one waking member of staff and one sleeping support on duty. We were informed that new staff are trained in the homes policies and procedures. This includes safeguarding and fire safety training. It is lots of reading so is done over several sessions on different days. Staff are currently working through a 17 module e-learning programme. The home has not had to recruit new staff for a number of years as their retention levels are very good. One resident told us, *"We get our cooking, cleaning and washing done for us. We keep our own rooms tidy ourselves"*

Two members of our team had a tour of the home with two members of staff. They did not observe much interaction between the staff and the residents at the time of our visit but the exchange they did witness was and very kind and respectful.

We were told that staff tried hard to support residents well-being while still allowing them to live a life of their own choice.

We asked if staff encourage activity participation for residents. They explained they had attempted games but there was little interest in this so they were stopped. There are board games available in the communal area cupboard if needed.

The home does not employ an Activity Coordinator or offer any set classes or groups to join in with. Alison explained that residents are independent and can go out and about in the local community. The residents can choose how to spend their days and most people go to local shops, pubs and groups. The home is ideally located opposite St. Ambrose Church

which offers community activities such as a drop in café, nearly new sales and bowls games. Many residents access their groups. One current resident has their own support worker who comes to take them out twice a week, to their chosen location. The home does not have their own mini bus, entertainers or schools coming in. Alison told us this was due to the independent nature of the residents who can access services and activities out of the home. For this same reason members of the clergy, dentists and hairdressers do not come to the home. The support staff said that residents come and go freely but do tell them when they are going out. There was no signing in or out to keep track of who was in the building at any time. Staff members also explained that some residents chose not to go out in the community.

The home does not comply with the Herbert protocol¹. Alison explained that none of their residents have dementia.

Resident's physical welfare

Medicine is administered by the Senior, as well as by members of the support team. Medication is kept locked in a file in the Managers office, labelled with residents details. The home has recently changed their pharmacy to Cookes Chemist and has experienced some problems with monthly blister packs breaking. These concerns have been raised with the pharmacy and extra care is being taken with doses.

The home has not experienced any problems with hospital discharge. Their most recent experience was with the Liverpool Royal and all discharge papers and medication were sent back with no problems at all. A nurse regularly visits the home to continue care for this resident.

The home also reported no problems with Whiston or Warrington hospitals discharge process and explained the red bag approach has worked well when used.

If a resident needs to go into hospital a staff member will accompany them if possible, with the remaining staff to resident ratio, otherwise all information will be sent with the resident to support their hospital stay. Family are informed and can accompany residents if appropriate.

Residents all have their own GP and visit them at the practice when needed. The Manager or Senior attend these appointments with residents.

Opticians (Mersey Eye Care) come into the home for visits and set up in the dining room. They call residents for eye checks or appointments when needed. The home uses Beaconsfield Chiropodists for all residents. Dentists do not visit the home. Residents access

¹ The Herbert Protocol is a national scheme being introduced locally by Cheshire Constabulary and other agencies which encourages carers and family members to compile useful key information which could be used in the event of a vulnerable person going missing.

their own dentist as and when needed. The staff will make appointments for residents and there has not been any issues with this.

The Senior does the cooking for the home and follows a set menu. She explained she can cater for special dietary needs and also cook different things on request. The team found the dining room to be clean but the décor dated. There is a serving hatch and a table with water jugs on it so residents can help themselves to a drink. Hot drinks were given at meal times and staff explained residents bring their own soft drinks in to the home. There were no menus on the tables or displayed on the walls, meaning residents do not know what they will be eating until they arrive for their meals. The support staff explained residents can only eat in the dining room and not in their own rooms.

The majority of residents are independent when it comes to personal care but two members of the home do need assistance. The support staff help with showering or bathing for those who do need this.

Facilities for and involvement with family / friends

The Manager explained that the majority of residents have been living at Woodcrofts for many years, with one resident having lived there for 28 years. With the Management and staff also being long standing he explained there is a family feel to the way the home is run and described it as *“a safety net that allows people to live as independent lives as possible”*.

Only some of the residents have contact with their families, for a number of reasons. Some residents visit their family and friends and others come to visit the home. Staff informed us that residents can have visitors at any time they choose but try to avoid meal times.

Family meetings are not held at Woodcroft but families who are a part of the residents lives are welcome and can discuss care plans or any issues with the Support Staff and Manager. Resident meetings are held every couple of months but issues or suggestions can be raised at any time.

The homes complaints policy is detailed in the resident’s handbook. It explains how to escalate a complaint to the Manager, council or CQC if needed.

An overnight family room for extremely ill residents has never been needed due the nature of the home. Space could be made available to accommodate families if this situation ever did occur. However residents needing more physical or higher levels of medical care would usually be rehomed to a care home. If residents are found to be able to live independent they can be rehoused to live elsewhere on their own.

RECOMMENDATIONS

- 1.** Consider ways to record who is in and out of the home at any time for fire safety.
- 2.** Ensure that hot drinks are available to residents at any time.
- 3.** We feel the addition of another handrail to the stairs would aid ease of movement around the home for all residents.
- 4.** Look at supplying menus in the dining room for resident's information, including an easy read format.
- 5.** Consult with residents on activities they may like to see offered. Consider providing staff with training in activity involvement, or inviting outside agencies to bring sessions in to the home, particularly for residents who do not go out and about.
- 6.** Gardening activities, such as raised beds, could be offered in the outside space as this can improve wellbeing and social interaction.
- 7.** Consider updating the decoration and improving the lighting on corridors and more ventilation throughout the home.
- 8.** Display a Healthwatch Halton poster feedback leaflets and encourage staff and residents to feedback views on any local health services to Healthwatch Halton - <https://www.healthwatchhalton.co.uk/your-feedback/>

Healthwatch Halton has statutory powers and responsibilities under the Health and Social Care Act 2012, the Local Healthwatch Regulation 2012 and the Local Healthwatch Organisations Directions 2013 section 5.

Providers and commissioners of health and social care services are required to respond to our requests within 20 working days by:

- Acknowledgement of receipt of the report or recommendation in writing;
- Providing (in writing) an explanation of any action they intend to take in response, or if no action is to be taken, to provide an explanation of why they do not intend to take any action.

Healthwatch Halton are required to report if any providers/commissioners have not provided a response within the required timeframe; this information will be included in our Annual Report.

SERVICE PROVIDER RESPONSE

No response was received from the provider

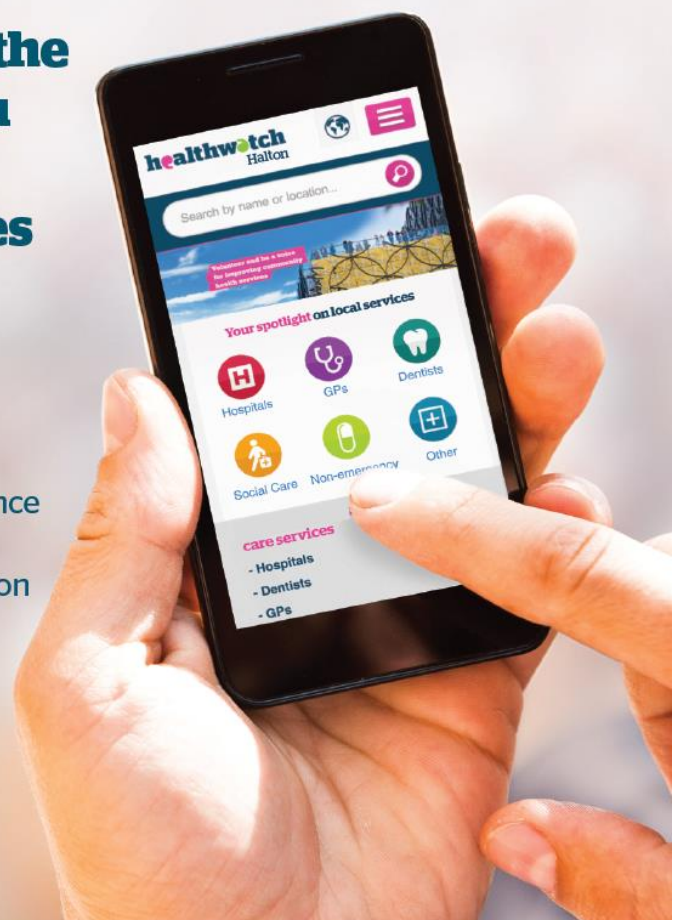
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We want to hear about the treatment and care you receive from our local health and care services

Hospitals, GP's, Dentists
Opticians, Social Care
Non-emergency services

Whether you've had a positive experience or there is room for improvement, have your say on the Healthwatch Halton website today.

You can even leave feedback anonymously



Leave feedback now:
www.healthwatchhalton.co.uk

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