



## **Enter and View Report:** **Whittle Hall**

Date of visit: Monday 30<sup>th</sup> April 2018

Report published: Friday 13<sup>th</sup> July 2018

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# Background

## What is Healthwatch Warrington?

Healthwatch Warrington helps the residents and communities of Warrington to get the best out of local health and social care services. We gather the views of local people and make sure that they are heard and listened to by the organisations that provide, fund and monitor services. We are a Charitable Incorporated Organisation, with a Registered Charity Number of 1172704.

## What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View (E&V) visits. Local Healthwatch representatives, who are trained volunteers, carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act (2012) allows local Healthwatch representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, care homes, GP practices, dental surgeries, opticians and pharmacies. E&V visits can happen if people identify a problem. Equally, they can occur when services have a good reputation; enabling lessons to be learned and good practice shared. Healthwatch E&V visits are not intended to specifically identify safeguarding issues. If safeguarding issues are raised during a visit, Healthwatch Warrington safeguarding policies identify the correct procedures to be followed.

## Disclaimer

Please note that this report relates to the findings observed on the specific date of the visit. This report is not a representative portrayal of the experiences of all service users / residents and staff, only an account of what was observed and contributed at the time. Wherever possible, the report below is in the words of the E&V team members present at the time of the visit. The report has been collated by the Healthwatch Warrington team and some of the text has been formatted to allow for easy reading. The essential facts of the visiting team's reports have not been altered.

## Acknowledgements

Healthwatch Warrington would like to thank everyone at Whittle Hall, in particular Deborah Payne (Home Manager), for welcoming our team and taking the time to answer their questions.

## Purpose of the visit

As part of Healthwatch Warrington's Enter and View programme, visits are made to local residential homes in accordance with information received from the local public, service users, carers and monitoring authorities. As with other Enter and View visits, the visiting team's aim was to gain impression of the quality of care being delivered, as well as the 'feel' of the facility, from the perspective of local people (not a formal, clinically-focused inspection). As a relatively new home in the local area, Healthwatch Warrington also thought it would be particularly worthwhile to build a strong working relationship with the service in order to help strengthen the voice of residents, carers and relatives through our activities at this crucial formative stage. The visiting team also took into consideration the provider's stated values when making their observations at Whittle Hall; reflecting on these in relation to their overall impressions of 'lived-experiences' in the home.

# Details of the Visit

## Details of the Service

Whittle Hall is owned and operated by L&M Healthcare (this company also manages another Warrington-based care home, named Gainsborough House). Whittle Hall is a purpose-built facility (over two floors), located in a quiet suburban area of Great Sankey. Whittle Hall can accommodate up to 74 residents and offers Residential, General Nursing Care, Palliative Care, Dementia Care, Dementia Plus and Dementia Palliative Care, according to the needs of individual residents. At the time of the visit, there were 44 residents living at the home. As Whittle Hall was registered in August 2017 (relatively recently), Care Quality Commission (CQC) has not yet visited the premises to conduct an inspection.

## Location, Date and Time

The visit took place at Whittle Hall, Littledale Road, Great Sankey, Warrington, Cheshire, WA5 3DX, on Monday 20<sup>th</sup> April 2018, from 6:30pm - 8:30pm.

## Healthwatch Warrington Representatives

Adrienne Roberts - Healthwatch Warrington, Volunteer Co-ordinator and Enter and View Authorised representative

Janet Myler - Healthwatch Warrington, Enter and View Authorised Representative

Jonathon Woodruff - Healthwatch Warrington, Community and Intelligence Officer, and Enter and View Authorised Representative

Pat Wall - Healthwatch Warrington, Enter and View Authorised Representative

## Service Staff / Named Contact

Deborah Payne (Home Manager)

### Spotlight on Values - A Beautiful, Happy and Cheerful Environment

According to L&M Healthcare's website: (<http://lmhealthcare.co.uk/our-homes/whittle-hall/about/>) Whittle Hall has been designed to create the feel of a warm and caring home (while still aiming to function as an 'exceptionally well-run' facility that provides both general nursing and specialist dementia care).

As such, Whittle Hall aspires to create a beautiful, happy and cheerful environment, with first-class facilities and highly-trained staff that are devoted to enriching the lives of residents and their carers/families, through love and support, stimulation and communication. Also, at the heart of each floor in the home is a 'Hub' (a large and comfortable area which residents are encouraged to visit regularly for conversation with fellow residents, staff and visitors).

In light of the above, Healthwatch Warrington's visiting team would expect to observe 'five star' facilities, with staff who were fully supported (with evidence of specific training being in place) and passionate about delivering high quality care in a lively, dementia friendly environment.

# Results of the Visit

## First Impressions, Entrance and Reception Area

When approaching Whittle Hall from the road, external signage is clear. The home is set in its own grounds and has its own private car park (free of charge for visitors and staff), which is well-maintained, with plenty of parking spaces and ease of access. The car park is surrounded by a fence, for added privacy, and greenery (with a large wooden hut that is used as a homing space for wild owls - which adds to the pleasant atmosphere). For those using public transport, a bus stop is also located relatively nearby.

The building's front entrance was bright, spacious, welcoming and fitted with automatic doors. The home's reception area had a hotel, or private hospital feel; as it was well-decorated and furnished to a high standard, with seating areas available, as well as tea and coffee making facilities. A hand sanitizer was also attached to the wall next to the door providing access to the inner areas of the home. At the time of the visit, this space was noticeably quiet, and no residents or visitors were using this area. There was also an information board for visitors mounted on the wall, showing a weekly activities timetable, various information booklets, 'my life story' resources, and the 'You Said, We Did' notes from a recent relative's meeting (detailing requests for improvements and what action had been taken to meet these requests). However, the visiting team did not see a 'Who is Who' board (showing the details of staff that residents and visitors may expect to see on duty), which would have been useful.

Upon entry, the visiting team were greeted by a passing member of staff and politely asked to provide identification and sign the visitors' register, before being introduced to Deborah Payne (Home Manager). Deborah confirmed that the home's reception area was staffed between the hours of 9:00am and 5:30pm, Monday to Friday. However, there are plans to extend this cover from 10:00am to 4:00pm on Saturday and Sunday. Outside of these hours, authorised visitors can gain access to reception via a key code.

## Activities and Leisure

The visiting team were able to view the Orchard Unit, Sunshine Unit and Ocean Unit, (Dementia Plus). Each floor has a 'hub' which is used for dining and socialising. At the time of the visit there were no residents in either of these social areas and it appeared that all the residents of Sunshine Unit and Orchard Unit were in their bedrooms.

Whittle Hall employs a full-time Activity Co-ordinator, who is supported by a Wellbeing Co-ordinator who works across the four care homes in the group. At the time of the visit, no activities were taking place (as this was in the evening). However, the visiting team did notice a weekly activities plan posted on noticeboards.

Activities take place both in the home and in the local community. For example, there had been a recent trip to Warrington Museum. Also, on the weekend prior to the Enter and View visit, an 'Open Day' had taken place, which Deborah described as a great success. Guests were entertained by a singer, dancers, stalls and a horse. All residents, potential residents, their families, as well as anyone from the local community were encouraged to take part. In addition, there is an onsite salon and a hairdresser visits weekly. Beauty technicians are also invited to provide services to residents, if required. Whittle Hall also maintains a beautiful outdoor area that residents can access, which includes a mock postal office and plastic models of sheep.

Additionally, were indications of ideas being implemented to provide stimulation for residents living with dementia. For example, in the library room, a table was laid out with various different colour cloths and pieces of fabric (fidget) cloths, as well as an interactive board displayed in the Dementia Plus Unit. The visiting team also saw lounge areas, which were fitted with fine ornaments, soft chairs and televisions. It was felt that lighting levels in these spaces could be improved and perhaps residents could be assisted to make more use of these rooms.

## Food and Refreshments

Meals at Whittle Hall are produced by 'Apetito' and prepared in the home's kitchens. Textured and soft meals are available to meet individual dietary requirements. The visiting team did not observe any meal service, due to the visit taking place during the evening. However, freshly prepared sandwiches were seen being taken to the 'Hubs' for supper. Staff stated that food is readily available for residents. Breakfast is provided from 9:00am and Lunch (the main meal of the day) is served around 12:30pm. Residents can also request additional snacks and meals, and staff have access to kitchen supplies (they record what is used for the purpose of managing stocking levels).

In terms of meeting individual residents' needs, Deborah stated that the home has access to a Speech and Language Therapist and a Dietician to assist with the dietary requirement assessments. A visiting relative informed the visiting team that snacks were available at all times. This relative also said that they were also able to make hot and cold drinks for both themselves and the resident, at any time of the day and night. Drinks and snacks were also seen in the three resident's bedrooms that the visiting team were invited into. One of the residents stated that: "food is lovely here" and described having cereal and toast for breakfast, as well as a choice of meals in the afternoon and evening.

The visiting team were also advised about a resident that receives Total Parenteral Nourishment (TPN), which is delivered by intravenous fluid. According to the resident's relative, this is usually administered in hospital; however, it is successfully administered at Whittle Hall and there have been no problems so far. Staff also mentioned that the home catered for the special dietary requirements of one resident who was a Muslim and also allotted time for them to conduct prayers in privacy.

The visiting team also observed some residents who resided in the Dementia unit still sitting in the dining area (the staff present appeared to be clearing tables). These tables were set beautifully, with wine glasses and crystal effect lighting.



However, the visiting team felt that a fine dining approach may not be appropriate to meet the needs of all residents (particularly those living with dementia), despite it being appealing to the eye, and a specially adapted (optional) dining set up should be considered, moving forward.

### **Clinical Observations: Cleanliness, Infection Control and Medicines Management**

In terms of staff capacity, Deborah advised that she personally delivers Infection Control and End of Life Care training to all staff, during their induction. As such, an excellent standard of cleanliness was maintained in most areas of Whittle Hall, (aside from some carpeting in residents' bedrooms, which were due to be replaced). Hand sanitiser gel dispensers were seen at various points around the home; allowing easy access for staff (but the visiting team did not see one outside the sluice area - which would be beneficial). The visiting team also noted that a dessert dish containing food was left on top of a radiator in one of the corridors.

Whittle Hall has a separate area for preparing medication (fitted with a security alarm), which contained fridges, CPR and medical equipment, as well recording charts. This space was clean and modern, with a clear cupboard labelling system in place. Nurses are required to wear an apron - clearly emphasising that they are completing a medication round and should not be disturbed (this is to help prevent medicines management errors). A trained nurse is present on each unit, at all times, to support residents' medical needs.

### **Smoking**

Whittle Hall has two designated outdoors smoking areas; one for outside for residents and another for staff members (located at the rear of the building).

## Administration, Staffing and Staff Training

Prior to touring the building, the visiting team were invited by Deborah into Whittle Hall's training room on the second floor, to discuss administration issues. Deborah explained that she had recently come into post (a few months before the visit) and was aware that improvements needed to be made (as she previously trained as a Registered Mental Health Nurse and also has existing managerial experience). As such, Deborah had quickly begun working closely with NHS Warrington Clinical Commissioning Group on drawing up a robust improvement plan. In terms of other external support, Deborah said that Whittle Hall has strong communicative relationships with Hollins Park (to support residents' mental health needs), local GP Services, the Enhanced Care Home Support Team, Hospital Doctors and Community Psychiatric Nurses (palliative care is also provided).

In addition, Deborah has initiated meetings for relatives to attend, utilising a "You asked - We did" format. Deborah confirmed that these are held every two months, and that as a result of the first meeting, she had arranged to bring the next meeting forward to six weeks. Deborah also operates an open 'door policy' and on the visiting team's tour, it was apparent that all staff were familiar with her.

The building is separated into 4 units; General Nursing (21 beds) Dementia / EMI (16 beds), Dementia Plus (11 beds) and Residential (26 beds). At the time of the visit, there 44 residents living across these four units. Deborah advised that a 1:4 ratio is maintained with respect to staffing levels.

One nurse and three care staff are on duty in the Dementia Plus Unit at all times; one Nurse, one Senior Carer and three Carers for the 26 bed Dementia Unit during the day; and one Nurse, one Senior Carer and one Carer throughout the night. Staff commented that full handover briefings are given to them, prior to beginning their shift.

Deborah also explained that the home was in the process of conducting a full recruitment drive, as there were still some outstanding vacancies (for example, three extra Nurses were required). Deborah has already increase staffing levels and introduced a financial incentive for staff who work over their contracted hours in support of residents (as opposed to bringing in a high number of agency staff). However, due to staff shortages, the home was still using a staffing agency to meet some needs (but pre-booked a block of dates and requested the same staff to be sent in order to sustain continuity of care for residents).

When asked about provision for staff training and development, Deborah advised that L&M Healthcare are very supportive in this respect and there plans to boost this resource; seeing this as a valuable way of improving morale and securing staff retention. In support of this sentiment, the visiting team spoke with an agency worker, who planned to stay on at Whittle Hall and further their NVQ qualifications.

New staff receive a full induction (which includes an e-learning programme, in-house and external Warrington Borough Council training sessions and shadowing existing staff). New starters have access to an iPad and are advised to complete all eLearning topics within the first week (prior to delivering care). All staff undergo an initial three month probationary period, after which they will be expected to have met the criteria for the Care Certificate. Some care staff also undertake Care Home Approved Practice Training, and upon successful completion of this course, they receive an uplift in salary. Staff are also able to access to their own room, which houses showers and lockers, etc.

However, some staff did not seem to be aware of the Dementia Friends initiative and had not attended Dementia Information Sessions (despite some staff wearing hand-knitted 'Forget-me-not' flower badges - made by a reception staff member), which suggests that some staff need may to be specifically briefed on the availability of this resource (especially as this home provides specialist dementia care).

The visiting team also spoke with staff about administration issues. They spoke highly of the support they received from Deborah. In particular, they praised Deborah's open door policy (which is planned to be extended to accommodate relatives) and drive for implementing change. Staff also commented that staff meetings are held on each unit, which is useful for sharing concerns and best practice. Staff confirmed that, from their perspective, residents are treated as individuals and well-cared for.

In relation to care planning, the home uses an electronic system named 'Nourish'; allowing an individual, person-centred plan to be devised for each resident - ensuring that individual needs and choices are met. A relative interviewed by the visiting team stated that both herself, and her mother, have been involved in care planning from day one of her admission. Her mother had moved into the home three weeks after it opened, and staff were said to have always been welcoming. However, in her opinion, communication at the home had generally been poor; yet, this has improved since Deborah came into post. This lady was pleased that she could attend relative meetings in order to address any concerns and hear any relevant information.

In terms of admissions, Deborah informed the visiting team that all residents are assessed before they are admitted to the home. Enquiries can be made via the home's website, or by telephone, and anyone is welcome to receive a 'show around' session.

## Safety

At the time of the visit, Whittle Hall was being monitored regularly by Warrington Borough Council, due to a Quality Improvement Plan being place. The home operates an open visiting policy, with all guests being requested to sign in and out of the building. Visitors are allowed to access the relevant residents' bedroom, as well as the dining room and all lounge areas. Lifts are in place which facilitate easier access to all floors. Doors are opened via key-codes - providing additional security. At the time of the visit, residents in the Dementia Plus Unit were seen walking along the corridor and being supported for their safety.

The visiting team also observed many large ornaments throughout the home. Although these looked very beautiful, it was felt that these were not appropriate furnishings for a service supporting people living with Dementia (many of these objects were heavy and were coated in reflective surfaces, which could pose hazards to such residents). Furthermore, the chairs seen in communal areas were all upholstered to a fine standard and designed in line with infection control procedures in mind; however, much of this furniture displayed patterned fabrics (which again, is unsuitable for residents living with dementia).

Each resident's bedroom is fitted with a buzzer, which they can use to call for assistance (as well as a bed sensor) - which is especially important, as residents are at heightened risk of falling (one resident mentioned that they had fallen in their room). Staff informed the visiting team that they aim to answer buzzer calls within five minutes (but this can take up to ten minutes on some occasions). For instance, a buzzer was heard during the visit in the upper floor area, which appeared to exceed the five minute target time for being answered. As an additional observation, the team did not see any ceiling tracks being in place to support staff with lifting and handling.

Furthermore, one of the visiting team were concerned for one resident who appeared to have limited communication abilities, as they were trying to bring attention to staff and they did not respond until the visiting team drew attention to this matter.

### **Privacy, Dignity and Treating People as Individuals**

All bedrooms in Whittle Hall offer en-suite facilities and those seen by the visiting team were decorated with resident's personal property (such as family photographs), which made them feel homelier. Memory boxes were also fitted on the walls outside of resident's rooms (containing a photo of the resident, along with items that may help to trigger positive memories for those residents living with dementia).

One resident agreed to talk with the visiting team in their bedroom. This resident said that they were comfortable at Whittle hall and spent most of their time in room watching television. This resident was unable to walk unassisted and uses a wheelchair for mobility. The resident said that staff assist them to visit the bathroom, because there is not enough room for himself and two carers to use the en-suite shower facility (and this resident enjoys having a bath).

Whittle Hall's laundry room was seen to be clean, tidy and well-organised (with up-to-date machines in place). All clothing is either stitch labelled, or marked with a button tagging system (which is both affordable and effective) - to reduce the chance of residents' items being lost.

The feedback received during the visit from relatives, residents and staff, was generally positive. For instance, one relative described Whittle Hall as 'outstanding facility'; stating that they are always kept informed of their mother's condition and that there has been an improvement in her health since moving into the home. Deborah also commented that involving relatives is one of her top priorities, particularly around raising awareness of the importance of securing power of attorney powers (particularly for relatives of residents living with dementia), to ensure that best interest decisions can be made appropriately.

Deborah informed the review team that Ocean Unit had recently become a male only unit, because previously there had only been one lady resident living on the unit and it was thought to be in her best interest to move her to another area in the home, where she would have the company of other ladies.

Deborah discussed plans for refurbishment in the near future and making adaptations to better suit the needs of all residents. Overall, the team felt that the home's management had good plans in this respect and would encourage this positive approach to continue.

## Encouraging Positive and Respectful Attitudes

Interactions between staff and residents were seen to be warm and pleasant. Members of staff were observed knocking on residents' doors before entering and addressed residents by their name.

## Other Comments

Overall, the visiting team felt that Whittle Hall is able to offer residents high quality surroundings, and is a well-kept facility; which lives up to the provider's values in this respect. However, although the home's interior was beautiful, it did not appear to be appropriate for meeting the well-being needs of all residents - in particular, people living with Dementia. Furthermore, the home's environment felt too formal at times and this seemed to be reflected by the fact that very few residents were enjoying the social 'hub' facilities (especially on the second floor), which detracts from a homely atmosphere. In this sense, there are still many changes that need to be made in order for Whittle Hall to live up to the provider's stated values; which is reflected in the recommendations made below.

On the other hand, the visiting team gained the impression that staff, and in particular Deborah, appear to work well as a team and are focused on making necessary improvements and open to suggestions, which was encouraging.

## Recommendations

1. **Dementia Focus:** The visiting team would suggest arranging a visit from the Alzheimer's Society to offer advice and support on the best ways to meet resident's needs, especially during upcoming refurbishment plans (for example, how to better furnish units and dining facilities to better suit those living with dementia). Also, the home could also benefit from creating a Dementia Friends' Community for the staff group.
2. **Installing a 'Who is Who' Board in Reception:** The visiting would recommend installing a 'Who is Who' board in reception, detailing which staff are on duty, which is useful for visitors (so that they know who to approach about particular issues, etc.).

## Distribution List

This report has been distributed to the following:

- Warrington Borough Council
- NHS Warrington Clinical Commissioning Group (CCG)
- Care Quality Commission (CQC)
- Healthwatch England

## Appendices

### Appendix A

#### Response from provider

The service has not provided a response to this report, within the given timescale.



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