

# Enter and View Report

# Ferrol Lodge Care Home



Address:

49 Northenden Road

Sale

M33 2DL

Telephone:

0161 962 4056

Owner:

Ferrol Lodge Care Home Ltd

Registered Manger:

Ms Stacey Armstrong

Date of visit: 25<sup>th</sup> October 2019

**Published:** 



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## What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives 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 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 so we can learn about and share examples of what they do well from the perspective of people who experience the service firsthand. The aim of the Healthwatch Enter and View visits is to give relatives and carers a perception of what daily life it is like for residents living at a care home and whether the home is somewhere they would place their family member.

Healthwatch 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 safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit. In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the Care Quality Commission (CQC) where they are protected by legislation if they raise a concern.



# **Acknowledgements**

Healthwatch Trafford would like to thank the owners, Registered Manager, staff and residents of Ferrol Lodge Care Home and the relatives of the residents for their contribution to the Enter and View programme.

#### **Disclaimer**

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



# **Executive Summary** Findings

- Ferrol Lodge Care Home Ltd are the owners of Ferrol Lodge. The home provides accommodation and personal care for up to 23 elderly residents. At the time of the visit there were 21 residents living at the home.
- The home provides residential and personal care. We were informed by the Registered Manager that 75% of residents at Ferrol Lodge are living with varying degrees of memory cognitive impairment.
- At the time of the visit the Registered Manager had been working at the home for over twenty years and had been in her post as the Registered Manager since 2016.
- Ferrol Lodge is a large, detached, Victorian house that has been adapted to provide accommodation for people over two floors.
- The home has a large enclosed front garden and a substantial side garden with table and chairs protected by gazebo for resident and visitors use.
- We left 21 relative questionnaires with the home for mailing out to the residents' relatives; eight completed questionnaires were returned to us. These informed us that relatives felt their loved ones at Ferrol Lodge were treated with kindness and compassion.
- On gaining entrance to the home was warm, inviting and odour free. Information for residents and visitors are displayed on the wall with further information contained in files by the door.
- During the visit we noted that staff interacted with residents in a very positive and respectful way.
- Staff members we spoke to told us that they were very happy working at the home, the Registered Manager was extremely approachable, and they felt fully supported by the Management.
- Average costs are £650 per week.
- A CQC inspection of Ferrol Lodge Care Home took place in November 2017. Following the inspection, the home was given a 'Good' rating. To access the CQC inspection report please go to: <a href="https://www.cqc.org.uk/sites/default/files/new\_reports/INS2-3581590572.pdf">https://www.cqc.org.uk/sites/default/files/new\_reports/INS2-3581590572.pdf</a>



## Recommendations, comments and suggestions

# We would like to thank the Ferrol Lodge Manager for her response to the points highlighted below:

1. **Recommendation**: To review the locations of sanitizing gel for visitors entering the home. *Please see comments on page 8*.

Manager's response:

"With regards to the location of sanitising gel, this observation was not discussed during the visit to enable me to action a remedy to this, however upon reading the report steps have been taken to ensure that the sanitiser is visible to visitors but we would not consider it safe to have one positioned in the dining room".

 Recommendation: Continue with plans to provide a shower room to give residents the choice of bathing or showering. Please see comments on page 10. Manager's response:

"We have plans in place to replace a bath with a shower instead to ensure that this choice can be offered and this is planned within the year ahead.

3 **Suggestion:** To review personalising people's bedroom doors to support people with orientation around the home. *Please see comments on page 10*.

Manager's response:

"As discussed on the day personalising bedroom doors will be done on a needs assessed and preferred choice basis, as has always been the case. If a resident needs this orientation or just requests to have their door personalised then it will be done".

4 **Comment:** Continue the ongoing refurbishment of residents bedrooms. Please see relative comments on pages 10 & 16.

Manager's response:

"in relation to the modernisation of bedrooms, this is taking place already with further improvements to be made over the coming months. We are working hard with this and trying to keep families as up to date as possible via our newsletter, emails and also ensuring the sharing of the evaluation of our own internal quality assurance processes which contained information about the redecoration works".



#### **Good practice initiatives for consideration**

http://www.bbc.co.uk/rd/blog/2017-02-bbc-rem-arc-dementia-memories-archive

A programme to encourage reminiscence in people with dementia.

https://www.carehome.co.uk/news/article.cfm/id/1574414/paper-armband-careworkers-malnutrition.

A paper armband which can be routinely used to identify changes in nutrition or hydration.

https://www.nice.org.uk/guidance/ng48

A link to the National Institute for Health and Care Excellence (NICE) for 'Oral health for adults in care homes'.



## **Purpose of the Visit**

The visit to Ferrol Lodge Care Home is part of an ongoing planned series of visits to care homes to discover what residents and their families think about the health and social services that are provided and share examples of good working practice by:

- Observing and identifying best practice in the provision of care homes for vulnerable older people requiring social care or nursing care
- Observing residents and relatives engaging with the staff and their surroundings
- Capturing the experience of residents and relatives





#### Strategic drivers

We are using either some or all of the following criteria for the timing of our visits.

- Ageing population in Trafford requiring care homes
- Good practice
- Length of time since the last CQC visit so that we are not placing an unfair burden on care home management and staff by having two visits in close proximity
- Where any issues of concern are raised with Healthwatch either by a resident or their carer. Residents' family and/or carers will be asked to complete a questionnaire anonymously.
- If there are specific questions of quality of care raised by Trafford Council, Healthwatch Trafford [as an independent body] will consider whether a visit is warranted.
- When invited by care homes to publicise good practice or points of learning
- CQC and partners 'dignity and respect strategy:
   http://www.cqc.org.uk/content/regulation-10-dignity-and-respect
- Changes in management of the home

These visits are a snapshot in time, but our reports are circulated widely and can be used by care homes to acquaint the public with the services offered.



## **Methodology**

This was an announced Enter and View visit.

We contacted the home explaining our reasons for the visit. We supplied posters to alert our visit to staff, residents and family members.

We sent a questionnaire to the Registered Manager prior to the visit (please see Appendix A for Manager's responses).

We sent a questionnaire to residents' families and carers for them to respond anonymously (please see Appendix B). As these visits are not inspections, we framed our questions in such a way that they reflect how residents and their carers feel about the quality of service on offer (we received seven responses from relatives).

We also observed governance arrangements to see how the home is run and assessed whether we feel it meets standards the public should expect.

We looked at local intelligence, including CQC reports. The CQC inspected the home in November 2017 and gave a 'Good' rating. *Please see page 3 of this report*.

We were guided by staff on the residents whom we could approach to answer our questions. We talked with 10 residents, two visitors and seven members of staff.

#### **Healthwatch Trafford Authorised Representatives**

- Jean Rose
- Marilyn Murray (Lead Representative)
- Steve O Connor
- Peter Johnson



# The visit Introduction

Healthwatch Trafford visited Ferrol Lodge Care Home on Friday 26<sup>th</sup> October 2019.

#### What is the difference between care home and nursing home?

Both types of home provide accommodation, supervision from staff 24 hours a day, meals and help with personal care needs, but nursing homes also have registered nurses on duty at all times. This means that they can provide care for people with more complex needs and those who need regular nursing interventions.

Ferrol Lodge is a residential care home registered to provide personal care and support for up to 23 elderly residents. The home's providers are Ferrol Lodge Care Home Ltd and is a family run business.

Ferrol Lodge Care Home is a large, detached Victorian house that is situated on a main road very close to Sale's Town Centre. The house has been adapted to function as a care home. The home has access to a large, wrap-around, fully enclosed rear garden area. At the front entrance to the home there is pleasant well-maintained garden with seating area protected by a gazebo. The owners are on site every day and oversee the maintenance of the building's interior and exterior structure.

Visitors have access to a small car park and there is off-road parking close by. The residents' accommodation is over two floors with 19 single bedrooms and two shared bedrooms; there are no onsuite facilities. On the ground floor the



communal space is provided in a lounge, dining room and two spacious conservatories. The upper floor of the house can be accessed by stairways or a passenger lift. The home's location enables easy access to Sale, where there are very good amenities and transport connections to all surrounding areas, including Altrincham and Manchester City Centre.

#### **General observations**

Access to the home is through a large Victorian door into a small tiled porchway, the doorbell notifies staff of visitors and staff allow entry. Antibacterial hand-gel is available in the porch before entering, however, this is not highly visible. No dispensers were found in the hallway or the dining area.

On entering the home there is a large bright lobby area leading off to a communal lounge, stairway, lift and first ground floor bedrooms. Information notices are displayed in the lobby area and other information for residents and visitors is contained in files by the front door. A visitors signing-in book is strategically place in the lobby and a large picture board showing all the staff members and their job roles within the home is exhibited on the lobby wall.

We were greeted by the Manager who kindly agreed to give the Healthwatch Trafford team a short tour of the home. We were encouraged to walk around the home and talk to residents and staff. We found all staff members friendly and welcoming. All staff were open and helpful in their responses to questions we asked.

The entrance hall and common areas of the home were comfortably warm and decorated and furnished to a high standard. The home is decorated in cool muted colours providing a calming, relaxed atmosphere. All areas that we observed free from hazards and smelt fresh and odour free.

The home has two conservatories, one leads off the main lounge and the other, houses a smaller lounge linked to the dining area. The two lounges are not connected, both look out onto a well-manicured garden. We were told that residents are encouraged to go out in the garden in good weather. The smaller of the two lounges was a designated as a quiet area. The television was on, however, the residents sitting in the room were not watching the television, we did witness staff regularly engaging with the residents on a one-to-one basis.

We learnt that a number of residents were from the Sale area and displayed on one wall in the main lounge were old pictures of Sale, a reminder of the area's history.

During the visit we observed residents in the larger lounge area interacted and communicated extremely well with each other, one resident exclaimed:

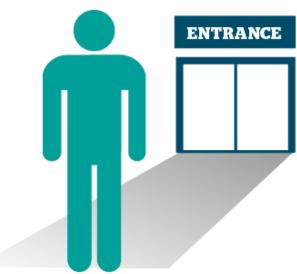
"if I could give the home a mark, I would give it 100 out of 100."

We asked the Manager about the smaller lounge appearing to be quieter than the other, the Manager stated:

"this was not a deliberate policy but residents' choice, they choose where they wish to sit."

We observed that a number of residents are able to move around the home by themselves, some using Zimmer frames and some using the passenger lift without any staff intervention. During the visit we noted that a carpet cleaning machine had been left in the lift by the cleaner, when this was pointed out by a Healthwatch Trafford representative the machine was removed immediately and stored in the cleaners storage room.

The dining area is very well presented and welcoming, we noted menus in a folder in the dining room, this contained written description and pictures of the food. Residents could and do ask for different food to that on the menu and the food is provided for them. Menus are on a four-week rotation.



During the time we spent at the home we observed plenty of seating in the communal areas for residents and visitors. Residents are encouraged to use the lounge areas rather than remain in their room, however they can return to their room at any time if they want privacy.

On moving around the home, we noted all corridors were uncluttered and hazard free, fire extinguishers were observed and up to date. We observed signage positioned on walls directing residents to toilets and bathrooms in the home. The home has a bathroom on each floor, one contains a modern specialist assisted bath. We were informed that at the request of patients one of the bathrooms will be converted into a shower room.

All bathrooms and toilets were spotless. When we asked about bathing, the Manager explained that there was a need for some scheduling of bathing but a resident could ask for a bath at any time.

#### **Bedrooms**

We were given the permission and opportunity to observe several bedrooms, some bedrooms appeared small, all rooms were personalised with residents' belongings, pictures and photos; and residents can choose the wallpaper for their rooms.

We receive comments from relatives informing us that they felt their loved one's bedroom needed modernising urgently. When we mentioned this to the Manager, we were informed that there is an ongoing programme to upgrade residents bedrooms that included new fitted furniture being installed. During the visit we observed that several new wardrobe doors had been delivered to the home as part of the ongoing bedroom refurbishment.

Each bedroom has mobile phone and television points. One resident whose mobility was limited had in her room a television, iPad and mobile phone; she happily informed us that she had just finished speaking to one of her relatives via her mobile. We noted that some bedrooms had push button Nurse Call systems and some had pull chords.

As a large number of residents experience dementia, we asked the Manager why there was no information on resident's bedroom doors to aid residents to identify their own rooms. The Manager stated that discussions have taken place in the past as to personalising bedroom doors. The decision taken was, unless it was assessed as required, it was the home's practice to keep the environment as 'home like' as possible.

#### **Activities**



We observed the home activities notice board in the lounge areas. When speaking to a number of residents they spoke positively about the visit for Afternoon tea at the Britannia Hotel and told us that they were looking forward to the planned visit to the Sea Life aguarium at the Trafford Centre.

Residents informed us of the toddler and baby group visit the home every Monday and they find it very enjoyable. The Manager added that a resident living at Ferrol Lodge plays the electric organ at the home, providing the musical accompaniment to the songs sung by the children and adults during the visit. The Manager told us that plans are in place for the Ferrol Lodge to link with Sale Brownies to enable the Brownies to visit the residents in the home. The home receives regular visits from St Joseph's Roman Catholic Church, The Methodist Church and the Church of England minster.

One relative was concerned that residents that do not have dementia are finding it difficult communication with those residents that do and stated:

"...there needs to be a few more trips out for afternoon tea and tea dance..."

#### Manager's response:

"As discussed during the visit, we spend a lot of time talking with residents about the activities they would like to do including outings and strive to ensure we offer meaningful person-centred activities to everyone".

Following requests from residents and relatives, wi-fi has been installed in the main lounge to help facilitate communication with relatives and the internet general and we noticed that one resident was using an iPad.

We noted that the home had organised outings for residents to various local parks, pubs and



supermarkets. The staff and Manager told us that a number of activities take place at Ferrol Lodge, such as Zumba, bingo and crosswords. The home has external entertainers visiting, including visits from falconry centres exhibiting birds of prey, and from other small animal therapy organisations.

We were informed by staff that residents can choose if they want to participate in activities. One resident we spoke to informed us that she was very pleased with the care she received at Ferrol Lodge, and remarked that maybe a few more activities would be nice.

The Manager stressed that residents are asked what they would like in respect of activities and the home will respond to their wishes. She emphasised that activities at the home are very much person centred.

#### Care

During the visit it was noted that staff knocked on residents' doors and asked to come in before entering the room. We observed staff interacting with residents in a very positive and respectful way. We witnessed a resident being helped with their mobility by a staff member in a very supportive and patient manner with lots of reassurance and friendly banter.

We observed residents and staff members chatted and joked with each other and the relationships between them appeared friendly and relaxed. When we spoke to several residents in the communal lounge, all were full of praise for the home, staff and the activities.



When we spoke to relatives visiting on the day one of them informed us:

"I am very impressed with the care and support that my loved one receives and the home keep me informed about any issues".

#### Others informed us:

"Ferrol Lodge is by far the best home I have seen for staff and Management. Clean, happy and excellent standards all round".

"... My family and I can't praise the staff enough for their devotion to all the residents, excellent, practical and emotional care and support. We recommend Ferrol Lodge to all our friends".

When speaking to care staff we learnt that several staff members had worked at the home for a number of years. All staff we met on the day told us they were happy working at Ferrol Lodge and with the support they receive from the Manager and owners.

#### **Fundamentals**

The kitchen is clean, spacious with large, modern, stainless steel appliances. During the visit we spoke to the two members of staff working in the kitchen. The cook informed us that residents will be offered an alternative option to what is on the menu that day if requested. The dining room was well laid out, with tablecloths and folded cloth napkins for each person. We were informed by the Manager that staff sit with residents at mealtimes and this enables them to gauge residents' enjoyment of the food, this is also reflected in how much is eaten.

The residents we spoke to on the day, were complimentary about the meals and food provided. One comment received from a relative expressed the following:

..."the food is excellent and plentiful. The residents are always being given treats - cake, chocolates, ice lollies when the weather was hot..."

We witnessed that there were plenty of drinks available for residents.

We asked the Manager if residents can choose what they wish to wear and were told: absolutely, if any person is unable to obtain clothes out of the wardrobes themselves then staff will offer them choices of outfits to choose from. All residents we observed during the visit appeared well-dressed and well-groomed.

We were told that a local hairdresser regularly attends the home.

We received no negative comments regarding laundering of residents' clothes.

#### **Profile of residents**

At the time of the visit residents living at Ferrol Lodge were elderly, between the ages of 84 years and 99 years and many were living with various degrees of dementia. When we asked what the percentage of residents at Ferrol Lodge are with living with dementia, we were told 75%.

## **Management of the Home**

The following comments should be read in conjunction with **Appendix A**.

Ferrol Lodge Residential Care Home is a family run home.

The Manager has worked at the home for many years and appears extremely knowledgeable and caring about all her residents and staff living and

The Manager informed us that most referrals for people who are looking to take up residency at Ferrol Lodge is through communication in an informal way, that is 'word and mouth', consequentially, Ferrol Lodge does not have a website.

On the day of the visit were informed that the staff ratio during the day is one to seven and that the home was fully staffed.

#### **Access to Services**

working at the home.

We asked how often the home has used the 999-emergency in the last six months, and we were told once in the last six months.

On accessing GP Practices, currently the home is linked to three GP Practice [named] and GPs will attend as and when necessary. Many residents are local to the area and have been able to retain their own GP. The Manager stated that she feels that a trust has developed between the home and the GP practices, and that the home has a good relationship with all three practices.

When we asked about accessing a dentist, the majority of residents have a private dentist whom they are taken to see. The home uses the Community dentist based at Conway Road Health Centre, who are good at responding to enquires and will come to the home to see residents, however, it is a long wait to see a community dentist at the home.

When we asked what measures are taken if a resident has a fall, we were told that all falls are recorded and audited each week. Should there be a concern that an injury has occurred then the appropriate first-aid measures would be used, and the home would use the contact the correct medical profession as is deemed necessary. *Please see Manager's full response on page 22 of this report*.



We asked about infection control, the Manager told us that infection control is demonstrated by visitor restriction during an outbreak, stressing that the key importance is to follow isolation procedure and practice good hand hygiene.

#### **Nutrition**

On the day we observed a good selection and variety of food on offer. Residents we spoke to informed us that the food is excellent.

We received one a comment from one relative, which stated:

"I would like to see fresh fruit to be on the menu on a daily basis. Bananas are easily handled and served as a snack as an option to biscuits with a cup of tea..."

One relative visiting on the day, stated:

"...I feel that the meals are of good quality and quantity for my loved one".



The Manager told us that drinks are available at any time and that if there was any concerns about a residents food intake they would follow Trafford's nutritional guidelines and seek further support from the GP and dietician. *Please see Manager's full response on page 18 of this report*.

#### Feedback for the Management

When we asked how residents and their families provide feedback or raise any concerns, we were informed that the home has an open-door policy and a complaints policy and procedure. The complaints policy and procedure is provided in an easy read format and is available in every room. The Manager stressed that they encourage people to come and speak to them and emphasised the importance of spending time talking to residents to ensure that they are happy with everything. if they have any concerns. We were told that regular staff meetings are held to discuss any concerns or issues raised. We were informed that residents' meetings take place every month and relatives are invited, residents and staff find the meetings useful. Daily informal meetings also take place.





#### **Staff Training**

The Manager informed us that in-house training with the same trainer provider has been used for a number of years successfully. The Manager informed us that she is very active in attending meeting such as skills for Care Registered Manager forums and Trafford Provider forums, through these she is able to keep up to date and cascade the learning down to staff. Each month a staff training session take place that covers a different skill set.

The Manager informed us that each morning the home operates a designated social time for staff to spend time with residents that is not a about tasks and is purely social, and it is called 'Together at 10'.

The Manager informed us that the home doesn't use agency staff and that the home has a good staff retainment record.

#### Advanced directives

When asked about advance directives, we were informed that the home doesn't use this terminology with residents but discusses with residents when they come to live at the home the 4Ps, which are: Place, People Possessions and Plans. All the information gathered from these discussions are written down in the residents individual care plans.

the Management stated that within each individual care plan there is a condensed section holding information that will relate to a resident's end of life wishes, that have been discussed with the resident and their family and recorded.

#### Deprivation of Liberty Safeguards [DOLs]<sup>1</sup>

When we asked about accessing DoLS, we were informed that the home currently has two outstanding DoLs. The Manager is aware that DoLs is in the process of changing to Liberty Protection Safeguard to Liberty Protection Safeguard (LPS).

<sup>&</sup>lt;sup>1</sup> The **Deprivation of Liberty Safeguards (DoLS)** are an amendment to the Mental Capacity Act 2005. They apply in England and Wales only. The Mental Capacity Act allows restraint and restrictions to be used but only if they are in a person's best interests.

Deprivation of Liberty Safeguards. The **DoLS** are part of the Mental Capacity Act and aim to make sure that people in care homes and hospitals are looked after in a way that does not inappropriately restrict their freedom.

# The response received from the relative questionnaire

(see relative questionnaire in Appendix B)

We left 21 relative questionnaires with the Manager of Ferrol Lodge Residential Care Home to send out to relatives of residents living at the home. We had eight completed questionnaires returned to us all informing us that relatives felt that their family members are treated with kindness and compassion.

To see the results of the resident questionnaire we received, please go to:

https://healthwatchtrafford.co.uk/wp-content/uploads/2019/11/Ferrol-Lodge-results.pdf

Below are a sample of the comments we received from relatives and carers. Please note that, whilst we received eight completed questionnaires from relatives and carers, not all chose to complete the comment box section.

"...the care home has a good homely environment. The staff are welcoming and helpful, they interact with residents and visitors. It is nice to know that they do not use agency staff and that they have their own regular staff looking after the residents at all times.."

"the care of my loved one is excellent, staff always care, my only concern is the state of her bedroom, it needs modernising urgently. My loved one pays for her full care and feels her room needs urgent attention. CARE EXCELLENT".



# Pre-visit questionnaire for the Manager of Ferrol Lodge Residential Care Home.

Q1. How do you facilitate your residents and their families in raising any concerns they may have? Do you do this on a routine basis and, if so, how often?

We have an open-door policy, complaints procedure and more importantly we spend time talking to residents and their families to ensure that they are happy with everything, Complaints procedure is provided in an easy read format and is available in every room, we have daily informal meetings with residents and also monthly residents and family meetings.

Q2. Do volunteers come into the in the home? If so what type of activities do they	do?
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We do have a volunteer who runs a mum and baby group each week in the home

Q3. Do other organisations come into the home? If so who are they and what do they offer?

Local schools come into the home to enjoy activities with residents Church ministers also come in to provide religious services

Q4. Do residents have fresh fruit and vegetables on a daily basis `?

Yes, soup is served before each meal and this is homemade with many different vegetables each day plus the vegetables that accompany the main meal.

Fruit is also served in varying forms as per the menu



Q5. Are drinks available and within easy reach? Are drinking levels monitored and recorded in care plans where there are concerns?

Everything that each resident eats and drinks is recorded daily, if we had any concerns we would also complete a detailed food and fluid chart as per guidelines

Q6. Do you seek advice from nutritionists where there are concerns (residents losing weight or experiencing any level of pain)?

Should we have any concerns about a residents food intake then we would follow Trafford's nutritional guidelines and then seek further support from the GP and dietician

Q7. How do you gauge that residents enjoy their food and drink?

Staff sit with residents at mealtimes and are able to gauge their enjoyment, this is also reflected in how much is eaten, we also involve residents in menu planning and discuss meals at each meeting, the cook also often seeks verbal feedback from residents

Q8. Does a single GP practice cover the medical needs of the home or do residents retain their own family doctor?

No, where possible residents are able to maintain the own GP, should this not be possible we would inform them of the practices that visit the home and see if they have a preference as to who they become registered with. We currently have Boundary House, Conway Road and Washway Road surgeries who visit.



Q9. Which healthcare professionals visit the home at your request e.g., chiropody/podiatry, physiotherapy, district nurse, dentist or social worker?

All of the above although can only access the community dentist which may not be residents preferred choice of dentist as other dentists will not carry out domiciliary visits.

We also have access to GP, Mental Health Team, Dietician, Consultants, OT's, hairdresser visits weekly

Q10. If professionals do not come into the home, how do you access their services?

We would arrange appointments which either a staff member of family would take the person to

Q11. Are residents likes and dislikes recorded in care plans?

Yes, all likes and dislikes are detailed

Q12. Are residents encouraged to talk about their past lives and how do you encourage this? Examples might include local history books, old photographs or films.

Reminiscence is part of our activities and also we provide a Life Story book for completion when residents first come into the home, we often reminisce during our daily together meetings



Q13. Do residents have choice over what they wear each day?

Absolutely, if any person is unable to obtain clothes out of the wardrobes themselves then staff will offer them choices out outfits to choose from

Q14. How do you cope with making reasonable adjustments in relation to residents with dementia, learning disability or other special needs such as autism or challenging behaviour?

Should we feel that a resident requires adjustments due to their dementia or challenging behaviours then we would seek the support of the dementia crisis team and work together with them on how best to make adjustments and what is in the persons best interest

Q15. How do you address the needs of people from minority ethnic groups or of different cultures and faiths?

We would address this with the individual and/or their families in terms of what they would like to happen to meet their needs, this would then be documented in the care pan and we would contact the appropriate minister to arrange visits in terms of religious needs. Any other identified needs would be addressed and met accordingly to the best of our ability.

Q16. Do you have visiting faith leaders in the home?

At present we have the catholic church attend each Sunday, Church of England minister visits on the first Wednesday of every month and the Methodist church attend also

# Q17. Do you encourage family and friends to think about having advance directives?

We have discussions with residents and their families about the persons preferred priorities to meet their care needs at the end of their life, these are documented in the care plans.

Q18. Do you invite the community to bring in pets?

Some residents families do bring in pets to visit, it is made clear though that only pets who are up to date with vaccinations, clean and well behaved are allowed in.

Q19. Do you have regular meetings with residents' families?

We have an open-door policy for families, they can speak to any member of staff at any time and we also invite them to a monthly meeting on the first Tuesday of every month

Q20. Do you take residents out into the community?

Yes, we do, most recently we have been 10 pin bowling, to an afternoon tea and quiz, took a lady to the local church for a school harvest festival, went to the Town Hall, local shops and parks, local pubs also.

Q21. If a resident falls, what measures do you follow? Do you call a GP, the ambulance service or utilise other measures? Do you record falls in every care plan, however minor or major?

All falls are recorded and audited each week. Should we be concerned that an injury has occurred then appropriate first aid measures would be used, we would contact the correct medical profession as is deemed necessary. We would also follow correct reporting procedures in terms of safeguarding and provider reporting. If a resident falls and does not require immediate hospital admission then a 48-hour monitoring period is adhered to and recorded

Q22. What preventative action do you utilise to prevent falls? Have you access to a falls advisor?

We use assistive technology to help prevent falls, this includes bed and chair sensors and clip and cord monitors.

We would refer to falls clinic if appropriate and necessary.

Q23. What feedback have you had from residents in the last three months which have resulted in change?

Mainly feedback about meals on the menus has been the most frequent change, we have changed several meals as a result of residents requests. We have also changed activity provision to ensure they are as person centred as possible.

Q24. How do you keep abreast of good practice? Examples might include e-learning packages, formal training, mentoring, staff appraisal?

Staff training and supervision, manager is very active in attending meetings such as Skills for Care Registered Manager forums, Trafford Provider forums and through these I am able to keep up to date and cascade this down to staff.



Q25. How do you prevent residents' feelings of loneliness or isolation?

At Ferrol Lodge we treat our residents like they are our own family, we have social time as much as we have care tasks to carry out and this ensures our residents feel cared for and part of a community, we are all invested deeply in ensuring that residents feel safe and that staff are their friends

Q26. What are the practical everyday things that would help you to provide the best possible care for your residents? Please describe?

Good support from families would help ensure the best of care, also ensuring good communication with other vital services such as GP's etc.

Good community links would also help us to provide excellent care, this is something I am very keen to develop as much as possible.

Feel free to continue any answers onto a separate piece of paper if necessary, but please add the question number to the answer.

For more information, please contact us. Email: <a href="mailto:info@healthwatchtrafford.co.uk">info@healthwatchtrafford.co.uk</a> telephone: 0330 999 0303

# **Appendix-B**Relatives' questionnaire

1. Do staff talk to you regularly about your loved one's:						
General Health?	[] Yes	[ ] No	[] Don't know			
Bathing and personal care?	[] Yes	[ ] No	[] Don't know			
Hobbies/interests?	[ ] Yes	[ ] No	[] Don't know			
Medication?	[] Yes	[ ] No	[] Don't know			
2. Do you think that your loved one-						
Is happy with the care received?	[ ] Yes	[ ] No	[] Don't know			
Has plenty to occupy them?	[] Yes	[ ] No	[] Don't know			
Enjoys their meals?	[] Yes	[ ] No	[] Don't know			
Enjoys the company of other residents?	[ ] Yes	[ ] No	[] Don't know			
Is lonely?	[ ] Yes	[ ] No	[] Don't know			
3. Do you know whether:						
Staff know about the work or family interests of your loved one?	[ ] Yes	[ ] No	[] Don't know			
Take them out into the community (shops/libraries, local events etc.)	[] Yes	[ ] No	[] Don't know			
Are they treated with kindness and compassion?	[] Yes	[ ] No	[] Don't know			



4. Ar	e you:				
Consulted care plans	on changes needs?	led to	[] Yes	[ ] No	[] Don't know
home's de	ept informed abo evelopments/plar rs/residents mee	ns etc.	[ ] Yes	[ ] No	[] Don't know
	dd in any othe in the box bel		ents or obs	ervations	you would like
Would y	ou recommend	l this hon	ne to anyone	else?	
[ ] Yes	[] No [] A	Maybe			
Overall,	on a scale of 1 to	10, how	would you r	ate this ho	me?
(with 1 be	eing very poor and	d 10 being	excellent)		out of 10



### **Distribution**

This report will be sent to the following organisations:

The Care Quality Commission (CQC)

Trafford Council:

- Trafford Health Overview and Scrutiny Committee
- All Age Commissioning Team

Trafford Clinical Commissioning Group (CCG)

Healthwatch England

Chief Nurse, NHS Trafford CCG and Corporate Director of Nursing Trafford Council

The provider visited

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First floor mezzanine Upper unit 65 & 66 Stretford Mall M32 9BD

