



Enter & View Report

Care Home: The Grange Care Home

Service address: 18 Grange Drive
Heswall
Wirral , CH60 7RU

Telephone 0151 342 6161

Service Provider:

Date : 24/09/2019

Authorised representatives: Tricia Harrison

Jo McCourt

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Acknowledgements

Healthwatch Wirral would like to thank the management, residents, carers and staff at The Grange Care Home who spent time talking to us about the home.

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

The visit also takes into consideration the fact that some of the residents spoken to may have an illness and/or disability, including dementia, which may have an impact on the information that is provided.

What is Enter and View?

Part of the Healthwatch Wirral work 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 2012 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 use the service first hand.

If there are any issues/concerns which arise during this visit then this could result in a follow up visit by Healthwatch Wirral Authorised Representatives.

1.0 General profile of the service that was entered and viewed.

The Grange Care Home is a Nursing Home located in a quiet residential area of Heswall in Wirral. It is part of the Rico Healthcare Group

The home accommodates 32 people in one building and provides care including those requiring nursing care. At the time of our visit there were 16 people living in the home. There were 19 single bedrooms and 5 double bedrooms over two floors, with another 2 single rooms on a mezzanine floor. There were also 3 lounge/dining rooms. A passenger lift is provided for people to move between floors, but the 2 bedrooms on the mezzanine floor are only accessible by a stair lift.

Parking is available to the front of the building for staff and visitors.

2.0 Purpose of visit

Revisit - Check any improvements made since last visit in 2018.
Responding to a request from a services regulator or commissioner.



3.0 Type of E&V visit undertaken

Announced Visit

4.0 Methodology

The visit is not designed to be an inspection, audit or an investigation, rather it is an opportunity for Healthwatch Wirral to get a better understanding of the service by seeing it in action and talking to staff, service users and carers/relatives. If during a visit Healthwatch Wirral identifies any aspects of a service that it has serious concerns about, then these concerns are to be referred to the appropriate regulator or commissioners of the service for investigation or rectification. Any safeguarding issues identified will be referred to the Local Authority or Commissioner for investigation.

The rectification of less serious issues may be directly with the service provider on the day.

Healthwatch Wirral visits are a snapshot view of the service and findings are reported based at the time of the visit.

Enter and View visits are conducted in accordance with Merseyside Safeguarding Adults Combined Board's principles and procedures. Information will be shared accordingly in order to safeguard adults at risk on Wirral and promote quality of local services.



5.0 Discussions, findings and observations

Healthwatch Wirral Authorised Representatives were welcomed by the new Manager who had been in post from January 2019.

We were asked to sign in and use the hand gel for infection control purposes and were escorted to the staff room for a brief discussion about the home and any improvements made since our last visit. We were informed that the home provides residential, nursing and respite beds.

The Manager reported that they had been brought in to help improve the home and gave us an open, informative and comprehensive picture of their progression since being in post.

They had reviewed policies and procedures and were currently overseeing a full programme of refurbishment in the home.

The Manager seemed confident that any improvements could be sustained.

We were informed that the home intends to provide a dementia friendly environment and will be working on this plan over the next 18 months.

There are also plans to change the entrance to the home which will improve access and car parking and signage. Currently access to the home is via a small entry from an adjacent cul-de-sac.

Health and Safety.

Evacuation Procedure

We were informed that the home uses the Personal Emergency **Evacuation Plan (PEEP)** and that staff practice the evacuation procedure.

The Fire Service advises the home to ensure that the home is fully compliant and a fire drill is conducted every month.



A member of staff is employed to manage the maintenance of both the building and equipment.

Care Plans

The Manager reported that care plans have been re written and are person centered. The home involves residents and relatives by involving them in care reviews and in decisions made about the home.

Residents' End of Life wishes are also documented as are falls and any untoward incidents.

This home use a document called 'This is my Life' which contains full details of their personal history.

The residents are looked after by a local GP Practice who provide an enhanced service and weekly ward round.

Staffing

It was reported that 16 staff are employed at the home.

Staffing levels are worked out by using a dependency tool which is updated immediately following any changes.

All staff have induction, regular supervision and annual appraisals.

Staffing levels;

8am - 2pm	1 RGN plus 3 carers
2pm - 8pm	1 RGN plus 2 carers
At night	1 RGN plus 2 carers

The cook works from 8am to 5pm, kitchen assistant from 8am - 2pm and 3 domestics work from 8am to 2pm.

Staff shortages are managed in house, by bank staff or by using agency staff as a last resort

Training

Staff receive mandatory training and Healthwatch were provided with a comprehensive training matrix which evidenced this.

Training is delivered by Careshield, face to face or by practical training in house.

Medication

Medications are stored in locked trolleys or in the locked medication fridge. Medication is administered in line with NICE guidelines.

Complaints

The complaints procedure in the home is made available to residents and their families. We were told that all residents and their relatives understand the procedure.

The Manager has an open door policy for receiving and resolving complaints at a very early stage and it was reported that the complaints received are fewer now.

Resident meetings

The home holds quarterly meetings which are minuted.

Nutrition and Hydration

The home uses the MUST Tool and monitors residents weight when they come to live at the home and regularly after that.

Residents wishes, preferences and special dietary requirements are known by the chef. The chef has recently worked with residents to produce menus.

It was reported that staff assist residents to eat and drink and ensure that each residents' fluid intake is sufficient for their needs.

Residents are also accommodated if they wish to order food which may not be on the daily menu. This was evident on the day of our visit when a resident wanted to eat their breakfast late in the morning and wanted to have a different choice to what was offered at the breakfast service.

The home celebrates events and special occasions with special meals throughout the year.

Activities

The home employs a full time Activities Co-ordinator who arranges an extensive programme of activities which all residents are invited to participate in.

The home does not have their own transport but uses taxis to take residents out. They intend to use a minibus from their other home in the future.

Teletriage

This home participates in the Tele-triage System Scheme.

The scheme, created through a partnership between the NHS, University of Cumbria and Wirral Council provides the home with iPads. The iPads act as a single point of contact between care home staff and senior nurses at Teletriage.

Instead of dialing 111 when a resident falls ill, trained care staff at the home are able to contact a senior Teletriage nurse at any time of day or night. The iPad's camera together with information provided by staff (who are trained to take blood pressure, oxygen saturation levels and temperature) will enable the nurse to help diagnose and recommend treatment.

Safeguarding

We were informed that the home reports Safeguarding alerts to Central Advice and Duty Team at the Local Authority. All are documented and investigated.

Pressure Ulcers

Residents are assessed for pressure ulcers and are observed regularly. Any resident who may develop or acquire a pressure ulcer may be referred to the Tissue Viability Team or GP.

Falls

Falls are recorded and analysed. Residents are risk assessed and measures are put in place to reduce the risk. Residents are referred to the Falls team if they have 3 or more falls in a month.

Falls are recorded on an accident form and in the care plan and an accident audit is used to identify any trends.



DoLS and DNAR (Do not attempt resuscitation)

The home follows legal requirements and best practice guidelines.

They are reviewed monthly or earlier if required and best interest meetings are held.

Quality

Grange Care Home monitors the quality of the service it provides by conducting audits and risk assessments and by monitoring feedback and care planning.

Environment

The Reception/Foyer area was bright, fresh and decorated to a good standard in compliance with a dementia friendly environment. Notice boards displayed in this area showed information about the Care Home policies on various topics including Complaints Procedures and Statutory notices.

There was also a suggestion box where residents and relatives could post their feedback.

Ground floor Lounge (Closed to residents due to refurbishment)

The lounge viewed was spacious and was currently being decorated to a good standard. The new colour co-ordinated seating was being stored at one end.

Kitchen

The kitchen displayed a Food Hygiene rating of 5.

At the time of our visit lunch was being prepared and the kitchen staff were busy. The kitchen was well equipped, clean and tidy.

We were able to speak to the chef who informed us that he enjoyed his job.

The daily menu, which rotates over a four week period, offered a good choice for residents and the chef was very flexible and would prepare other choices if requested.

Lounge (First Floor)

This lounge was clean bright and comfortably furnished. Residents were watching TV in this area and enjoying refreshments.

Activities Room(this is usually a large bedroom which is currently being used for activities until the ground floor lounge is completed)

Four residents were enjoying activities with the Activities Co-ordinator who was very enthusiastic and had a good rapport with the ladies. They appeared to be enjoying themselves and were interacting with each other well.

The Activities Co-ordinator had provided these ladies with a very professional manicure and they were very proud to show us their painted nails.

One resident was due to go home later that day and was delighted to hear that the Activities Co-ordinator was going to give her a manicure before she went home.

Corridors

Corridors were adequately lit, wide, had handrails and were free from trip hazards. Chair lifts were available on a number of stairs. There were some examples of dementia friendly signage.

Bedrooms

The bedrooms viewed were clean and tidy and it was evident that residents could personalise their rooms. Call bells were within reach for residents.

Bathrooms

The bathrooms viewed were en suite, well equipped, tidy and clean. Call bells were within reach. However, in one room we noticed a leak from a pipe which was reported to the Manager.

Laundry Room

The laundry room in the basement was large and appeared to be tidy and organised.

We were informed that the incidence of loss of items is small.

A member of staff was ironing and reported that she enjoyed working at the home

External areas and gardens

The gardens and waste management storage had been improved since our last visit. Unfortunately there is limited space for residents and their visitors to enjoy the garden areas as they are on a severe slope.

Staff Observations:

We observed staff providing assistance to residents in a dignified and respectful way.

Another member of staff took the time to talk to a resident who was sitting alone in the hall.

The Manager spoke to many of the residents during our visit and related well to them.

Resident Observations

Residents appeared to be happy and looked well cared for. They were clean and tidy and were dressed appropriately.

Feedback (from Staff, Service Users, Relatives, Visitors, Carers)

Staff -

Several members of staff stated that they enjoyed working at the home and that the home had improved since the new manager had been in post.

Residents

One resident informed Healthwatch Authorised Representatives that they enjoyed their food. Another reported that they enjoy living at the home and that the staff are nice.

Visitors

We spoke to a lady who was visiting her father who had been a resident for 2 years. She visits on a regular basis and brings the family dog. The dog is welcomed and enjoyed by the residents.

She reported that " My father is happy here, so we are happy"

6.0 Conclusions

All areas were clean, fresh and there were no unpleasant odours.

The atmosphere was homely, welcoming, calm and peaceful.

The Manager and staff were friendly, enthusiastic and appeared to be caring, respectful and approachable.

Residents looked well fed, hydrated and happy.


Feedback received from residents and their relatives demonstrated that the service provided to them was good

It was reassuring that the home appears to have improved since our last visit and has an ongoing plan for further improvements in the future.

7.0 Recommendations

Explore opportunities within the local area for residents to access and take part in; this would support the work of the Activities Co-ordinator

Continue with the plans for improvements (including a dementia friendly environment) and ensure that they are sustainable.



Look carefully into how the exterior areas of the property could be improved in a way that would benefit residents and visitors

Elementary feedback from the provider post visit

The service manager was provided with a draft copy of this report to check over and respond to our findings and check for factual inaccuracies. To date, no response has been received

9.0 Healthwatch follow up action

Provide the home with Healthwatch leaflet on providing a Dementia Friendly Environment in a Care Home.

Revisit in 2020 to look at improvements

10.0 Distribution of report

Healthwatch Wirral will submit the report to the Provider, Commissioner, CQC, and Family & Wellbeing Performance Committee.

Healthwatch Wirral will publish the report on its website and submit to Healthwatch England in the public interest

11.0 Glossary

CADT- Central Advice and Duty Team

CSW - Care Support Worker

CQC - Care Quality Commission

DoLS - Deprivation of Liberty Safeguards

DNAR - Do not attempt resuscitation

RGN - Registered General Nurse

NVQ - National Vocational Qualification

MUST - Malnutrition Universal Screening Tool

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