healthwatch Cheshire East

Enter and View Report

Primrose House, Crewe

2 December 2022



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Report Details

Address	72 Crewe Road Haslington CREWE CW1 5QZ.
Service Provider	HC-One
Date of Visit	2 December 2022
Type of Visit	Announced (See methodology on page 5)
Representatives	Alison Langley, Esraa Jaser, Philippa Gomersall and Sue Aucutt
Date and detail of previous visit by Healthwatch Cheshire East	13 December 2018

Acknowledgements

Healthwatch Cheshire East would like to thank the service provider, residents, visitors and staff for their contribution to the Enter & View Programme.

Disclaimer

This report contains information gathered by Healthwatch Cheshire Authorised Representatives (ARs) whilst undertaking an Enter and View visit on the date specified above. It provides an account of what was observed and presented on the day, including information gathered during conversations with residents and/or staff and/or family members/friends.

Where relevant additional information will be included from residents and/or staff and/or family members/friends collected through surveys and/or online feedback prior to or post the site visit.

What is Enter and View?

Healthwatch Cheshire is the local independent consumer champion for health and care services, forming part of the national network of local Healthwatch across England.

Under the Local Government and Public Involvement in Health Act 2007, local Healthwatch have the power to carry out Enter and View visits as part of their scrutiny function. This legislation places a duty on health and social care providers to allow Authorised Representatives of Healthwatch to carry out an Enter and View visit on premises where health and social care is publicly funded and delivered. This includes:

- Health or care services which are contracted by local authorities or the NHS, such as adult social care homes and day-care centres.
- NHS Trusts
- NHS Foundation Trusts
- Local authorities
- Primary medical services, such as GPs
- Primary dental services, such as dentists
- Primary Ophthalmic services, such as opticians
- Pharmaceutical services, such as community pharmacists.

The list of service providers who have a duty to allow entry is set out in section 225 of the Local Government and Public Involvement in Health Act 2007 and supplemented by Regulation 14 of the 2013 Local Authorities regulations.

At Healthwatch Cheshire, the Enter and View programme is conducted by a small team of trained staff and volunteers, who are prepared as "Authorised Representatives" to carry out visits to health and social care premises to find out how they are being run and, where there are areas for improvement, to make recommendations.

Following an Enter and View visit, a formal report is published where findings of good practice and recommendations to improve the service are made. These reports, which include feedback from the service provider, are circulated to the service provider, commissioner and the CQC and are made publicly available on the Healthwatch Cheshire websites:

- www.healthwatchcheshireeast.org.uk/what-we-do/enter-and-view
- <u>www.healthwatchcwac.org.uk/what-we-do/enter-and-view</u>.

Purpose of the Visit

- To engage with people and understand how dignity is being respected in the care home environment
- To observe the care provided at this home, looking at a number of key themes; Environment, Food & Drink, Safeguarding, Staffing and Personal Care
- To observe residents and relatives engaging with the staff and their surroundings
- Capture the experience of residents and relatives and any ideas they may have for change.

Methodology

This Enter & View visit was carried out with prior notice.

A visit with prior notice is when the setting is aware of a timeframe within which we will be conducting an Enter & View visit, but an exact date and time are not given.

Preparation

In preparation for an Enter and View visit the Authorised Representatives who will be carrying out the visit conduct research that involves reviewing:

- The latest CQC report from a routine inspection of the service
- Any previous Healthwatch Cheshire Enter and View reports
- The Care Home's information held on the Carehome.co.uk website
- Entries on social media platforms
- Comments held on Healthwatch Cheshire's feedback centre
- Information received by Healthwatch Cheshire as a result of undertaking surveys.

On the day of the visit the Authorised Representatives hold a briefing to discuss findings from their individual preparation, and decide as a team how they will carry out the visit, and any specific areas of focus based on this prior knowledge.

Description and nature of service taken from Carehome.co.uk

Type of Service:

Care Home with nursing – privately owned.

Registered Care Categories*:

Residential Dementia/Nursing Dementia/Old age.

Specialist Care Categories:

Incontinence/Hearing Impairment/Visual Impairment.

Other Care Provided:

Own GP if required/Palliative Care/Respite Care

Group/Owner: HC - One

Person in charge: Dawn Sadler

Local Authority/Social Services: Cheshire East Council

Admission Information: 65+

Room Information: 42 en-suite rooms

Languages Spoken by Staff (other than English): Polish

Facilities:

Close to local shops/ Gardens and patio for residents/Hairdressing/ Minibus or other transport/Near public transport/Own furniture if required/ Residents Internet access/Television point in own room/Wheelchair access.

Details of Visit

Environment

Primrose House is a modern, one-storey, purpose-built building located in the village of Haslington, Cheshire. It is situated in the heart of the community and on a main road, close to a bus route, local shops and amenities such as cafés, a pharmacy, a pub and a church. The home is well signposted and shares a car park with its sister home, Hollymere House. The car park has adequate spaces and is surrounded by well-kept gardens with shrubs and hanging baskets.

Upon arrival we were greeted by a member of the team and asked to sign in using their registration book. The reception area was small but pleasant and welcoming, and both the reception area and outer door were secure with coded locks. The Manager was on leave that day so we spoke to the Deputy Manager, Jasmine, who was very helpful and gave Healthwatch a comprehensive tour of the home.

Primrose House has 42 bedrooms which are single occupancy. Currently 40 of the rooms are occupied.

Communal areas

There are several communal areas including three lounges, and we observed a number of these being used by residents for relaxation and activities during our visit. The communal areas and lounges were clean, and mostly well maintained with a few paint scuff marks



noted along the corridors. The majority of areas had plenty of natural light and views of the surrounding garden.

All were furnished in a comfortable and homely fashion and situated directly off a central long corridor which allowed easy access for residents. There was plenty of comfortable seating and room to allow residents to move around free from obstacles. The corridors were wide to facilitate wheelchairs and walking frames, and had handrails along their length.

Healthwatch noted how much thought has been given to the decoration of communal areas which were bright and included themes such as a music area, craft and rainbow area, and a pet-themed lounge. The walls were decorated with local landmarks and historical pictures that evoked memories and discussion, as well as a lovely display of art and pictures made by residents themselves. The home also had a small but homely dining area and two assisted shower rooms and a further assisted bathroom with a bath. The assisted bathrooms appeared clean and well maintained and were decorated in tranquil colours for a relaxed bathing experience. All areas of the home were free from odours and felt comfortably warm. At the time of our visit the Christmas decorations were being put up and some residents were helping staff to do this.

Residents' Rooms

All residents' rooms had a coloured door with a letter box and knocker to represent the front door of a traditional house. The resident's name and picture were outside each room. All rooms were en-suite with a hand basin and toilet, well-proportioned and comfortably furnished with homely bedroom furniture.





Each room had a nurse call bell, TV point and WIFI, and benefited from natural light and views overlooking the gardens, trees and bird feeders. Residents were welcome to decorate their rooms with personal items if they wished. Chairs and floors were installed with sensors where this

was deemed necessary so that staff were alerted when residents were moving about the home.

Outdoor areas

There are pleasant, enclosed and landscaped gardens shared with Hollymere House, including a green house and raised beds for residents who like to garden. The gardens are accessible to all and are well maintained. New chairs and tables have been



purchased recently and residents are encouraged to use the garden. There is also a modern and comfortable outdoor garden room where residents can host their friends and relatives or have a private place to chat.

Other Facilities

Primrose House has its own hairdressing salon on site with a visiting hairdresser once a week.

Food and Drink

Food is prepared on-site at their sister home, Hollymere House. Residents have two options of food to choose from and written menus are displayed in addition to 'a show and tell' type choice where two plates of food are shown to residents to choose from. Staff said that sometimes residents will change their minds when the food arrives and choice is always accommodated.

Residents are encouraged to eat in the dining room but can choose to eat in their own room if preferred. At the time of the visit a sandwich lunch was being served and several residents were in the dining room talking and eating together, assisted by members of staff who were serving and sitting with residents as they ate. Whilst Primrose House tries to encourage protected meal times, family and friends are able to join residents for meals in the residents' rooms. Snacks and drinks are available throughout the day as well as dedicated tea trolley rounds.

Recreational Activities

Healthwatch spoke to the Activity Coordinator, Pauline, who works 5 days a week, from Monday to Friday. At the weekend, staff often host music afternoons or involve residents in activities that have been left by the Co-ordinator. Activities include bingo, arts, singing, walking in the gardens, reminiscence activities, musical entertainment from school choirs and a guitarist, dog petting, spa sessions with foot spas and hand massages, and flower arranging.

The home engages with local organisations, including a supermarket who provide flowers for flower arranging activities, a local musical artist and a local primary school. At the time of our visit, the Co-ordinator was putting out Christmas decorations with residents and was noted to go promptly to get a cardigan for a resident who had just woken up and was feeling cold.

The Co-ordinator works with residents in the social areas and also one to one in resident's rooms for those who cannot engage in the social areas. The home also has a minibus for taking residents on trips and recently visited Blackpool for the illuminations. There were no pets on site during our visit but the Deputy Manager talked about visiting therapy dogs and encouraging visits from family pets, and also said that requests to have live in pets would be considered.

Healthwatch noticed several notice boards around the house, listing the timetable for activities. In addition, there were notice boards highlighting the importance of kindness, and information for family and visitors in the reception area regarding fire safety, hand sanitising, and a 'have your say' board.

Residents

During our visit we had an opportunity to observe residents relaxing in the lounge areas, walking around the home and taking part in some of the activities. A calm, relaxed atmosphere prevailed and although we were only able to have brief chats with residents, all of the residents that we saw appeared well cared for, appropriately dressed and well groomed. It was noted that a mirror had been installed on a low wall for a resident who liked to look in mirrors to make this accessible for him, and that other residents had comfort dolls and soft toy companion pets for reassurance.

Every resident has a care plan; this is reviewed daily for the first two weeks then updated if anything changes. They are reviewed with the family, and families are phoned every month for updates. The home also carries out 'Resident of the Day' which involves staff reviewing the resident's care to help ensure that there is a holistic approach to every aspect of their care.

Resident's birthdays are celebrated with a card and birthday banner. The home did not currently hold resident's meetings but were hoping to put these in place in the near future.

Relatives and Friends

Healthwatch spoke to relatives during the visit. One relative commented that her Mum was very well cared for in the home, that she felt well informed and that she trusted the staff 100%. Another relative told Healthwatch that her Mum had been in the home for 13 years and that the care she had received from staff was excellent. She commented that despite long term mobility issues her Mum had never experienced a pressure sore and that the high level of care was a testament to the staff. The home has an open-door policy for relatives who are kept well informed of any changes in care via monthly phone calls, or sooner if required. Relatives are welcome to visit at any time, to have input in care plans, and to discuss any concerns with staff or the manager. Although relatives' meetings are not currently in place the home hopes to introduce these.

Whilst there are no rooms for relatives for an overnight stay, relatives are accommodated if a resident is ill with an armchair and blanket and are supported by staff.

Staff

There are sufficient staff with a mix of around 30 registered nurses, nursing assistants and hostesses. There is seldom the need for agency staff. Staff at Primrose House wear a uniform which is appropriate to their role, although during our visit many staff were dressed in Christmas outfits to create an informal, festive atmosphere. Additionally, each staff has a name badge and a quote about them. This, we were told, helps promote conversations with both residents and families.

We spoke to a number of staff, who were all welcoming and happy to stop and speak to us. They told us that they enjoyed working at Primrose House and felt supported and able to approach the Manager if they had any concerns. Most staff are permanent, but agency cover for nurses is sometimes needed. There are 11 staff on duty during the day and five at night. Staff are supported with work life balance by working flexible shifts to accommodate home life.

There is a regular mandatory online staff training programme in place which supports all staff members in continuous personal development. Face to face training is also being reintroduced following the COVID pandemic. The Deputy Manager was about to undertake a dementia pilot training programme and was hoping to share this with her colleagues. Staff receive an annual appraisal, 6 monthly supervision and are



encouraged to talk to the Manager at any time in between with any concerns. Staff have monthly meetings.

The Deputy Manager told us that the biggest challenge in the home can be staffing. She commented that dementia care is more challenging than general nursing but that she really enjoys working in the home and making a difference for residents living with dementia, and that her biggest success is making people with dementia smile.

Promotion of Privacy, Dignity and Respect

All interactions we observed were respectful and genuine warmth and care was seen between staff and residents. A calm, homely atmosphere prevailed, and staff were gentle and did not rush residents. During our visit it was particularly good to see how many staff sat with patients in the dining room during lunch, creating a sociable environment and good observation of the diet residents were taking. Residents were encouraged to have free choice on activities and their day to day living, and to change their minds at the last moment for example with food choices and participation in trips.

The Deputy Manager showed us a booklet for two residents whose first language was not English which had pictures and words in both languages to aid communication. Healthwatch asked what other tools helped staff and residents to communicate and it was apparent that a Hearing Loop is not installed at the home.

Religious observance is kept with regular services and discussions with residents and the family to ensure that individual needs are met and respected. The home manages end of life care using care plans and discussion with family and residents to respect individual wishes. Support is offered to staff and residents during a bereavement and staff and residents who want to attend a resident's funeral are supported to do so.

Safeguarding, Concerns and Complaints Procedure

The Manager and Deputy Manager in Primrose House are named safeguarding leads and also provide training to staff. Staff that we spoke to during the visit told us that they felt they could approach the managers with any concerns that they had and that these would be taken seriously. The Deputy Manager said a complaints process was in place and residents and their families were encouraged to speak to them if they had any concerns and that this would be taken seriously and discussed. The Deputy Manager mentioned that lost items such as slippers and clothes can be one of the most frequent concerns and that they have taken steps to implement a process to help with this where residents belongings are photographed and named and therefore easier to find and be returned.

Medication and Treatment

Haslington surgery is the practice registered for the home and a GP visits once a week or more often if required. During our visit a GP from the surgery came to see a resident and stopped to say hello and spontaneously commented on the high level of care given at the home. Residents can continue to see their own GP, but are encouraged to register with Haslington Surgery.

Additional care services visit, including chiropody every 6 weeks, opticians for sight and hearing tests, speech and language therapists, dieticians, physiotherapists and the district nursing team for residential residents. Boots pharmacy in Winsford dispenses medication for the home. There are dental visits to the home for check-ups. Residents needing dental treatment receive this via their own dentist or at a local dentist close to the home which is easily accessible, though a private practice so residents have to pay.

Care Home Best Practice Initiatives

The home consistently monitors resident's dietary needs and residents are weighed regularly to identify any concerns. Meals are tailored to meet individual needs under the guidance of the dietician using the MUST (Malnutrition Universal Screening Tool) to ensure that these are meet.

We were told that the home uses Restore2, which is a physical deterioration and escalation tool for care settings and Reminisce Together, a social enterprise helping families and communities living with dementia to communicate and build good relationships through memory stimulation and cherished memory recollection.

Recommendations

- Install a hearing loop to help residents who are hard of hearing to communicate.
- Implement residents' meetings to promote dignity and respect.
- Implement relatives' meetings to encourage peer support and communication.
- Consider re-painting corridor area.

What's working well?

All of the Authorised Representatives who visited agreed that Primrose House is a warm, safe and welcoming environment where residents appear happy and are valued and respected. We observed staff showing resident led care and compassion, with a strong emphasis on respect and personal choice for residents.

We also heard first hand from relatives about the kindness and compassion that both they and their residents receive. The environment was colourful, interesting and stimulating, and allows residents who are able, to move about the home safely, minimising confusion as all lounge and social areas are situated off one central ground floor corridor.



A wide range of inclusive activities are also in place which are designed with the residents in mind.

Service Provider Response

No feedback has been received from the service provider.