

Croftwood Care Home

Enter & View report

13 February 2023



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What is Enter & View?

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

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

Healthwatch Halton has statutory powers to carry out what we describe as 'Enter and View' visits. These are visits to health and social care settings which help us in our role as the independent local champion for health and social care.

These visits are carried out by small teams of trained members of our staff and volunteers to observe a service at work.

Due to the pandemic, we have been unable to carry out visits to local care homes, and therefore we have been concerned that the voice of care home residents has not been heard, and residents and families may be unaware of the existence of Healthwatch as their independent champion.

We carry out our 'Enter & View' visits not as inspectors but as visitors to that service. We view the service provided and observe the care and support offered and we look to obtain the views of the people using those services.

Prior to our visit we sent out a short pre-visit questionnaire to the manager of the home. Responses to the questionnaire have been used in producing our report. A link was also supplied to a questionnaire for staff and one for family / friends of residents to give their views.

Why did we carry out this visit?

Enter and View visits can take place for a variety of reasons, for example to find out more about a particular service, or in response to public feedback.

The Enter and View visit to Croftwood Care Home was to learn more about the service, and to find out where the service appeared to be doing especially well, in addition to finding out if any improvements could be made. The visit was not in response to any prior feedback or concerns identified relating to the quality of this service.

Our 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, and the Local Authority will be notified on the same day as the Enter and View visit.

There were no safeguarding concerns identified during this Enter and View visit.

Enter & View Visit Report

Care Home: Croftwood Care Home, Whitchurch Way, Runcorn WA7 5YP

Service provided and run by: Croftwood Care UK Limited

Healthwatch Halton Enter & View Team:

Jude Burrows, Julie Birchall, Kathy McMullin and Barbara Patrick

Date of visit: 13 February 2023.

Croftwood Care Home is registered to provide accommodation and personal care for up to 47 older people, younger adults and people living with dementia. Accommodation is provided over two floors, with lounges and dining rooms on each floor.

Croftwood is located in a residential area of Runcorn, within walking distance of local bus routes.

The home is slightly hidden from the main road, with no visible road signs directing you to the home in or around the local vicinity. When we arrived at Croftwood, there were car parking spaces available with sufficient parking outside with several disabled parking bays.

The garden at the rear of the property was very spacious and well kitted out with several different seating areas for residents use with accessible access.

The main entrance to the building was visible, and access was via an unlocked door which led into a locked porch area. (This door did not need to be locked as all other internal doors were locked for, residents' safety)



Within the porch there was a signing in book, hand gel, face masks and complaints forms. There was also a recorded message playing in the home reminding people to wear face masks and information about COVID-19.

Initial Impressions

On entry the doorbell was answered by a member of staff who asked us to sign in, use a mask and hand gel provided. The manager then came to join us and checked everyone's ID. Staff were very friendly, welcoming, helpful, and polite. In the main reception area, there are two soft armchairs (one with a rise cushion added) and a reception desk with a white board which showed resident medical information and staff on duty. Confidentiality was followed as only resident's initials were used.

A CQC report dated 2019 was on display along with Six Steps Certificates that were framed and dated 2015.

Other notice boards in both the entrance porch and reception showed a variety of information on safeguarding, Healthwatch Halton, staff achievement certificates, pet friendly, letters from families showing plaudits for staff, forms for reviews and entertainments and activities posters. There were also lots of resident's photos and list of birthdays.

A make a wish box was also available on the reception desk for wishes or suggestions.

The entrance/reception seemed quite functional but the décor was not very welcoming, it felt dated and the information and notice boards were all very cluttered with notices on top of each other and a safeguarding poster for safeguarding children.

Overall, on entering the building, there was a nice atmosphere and a comfortable feeling throughout.

Internal Physical Environment

The home was clean, warm, and well maintained. The communal combined lounges both upstairs and downstairs had matching furniture with plenty of seating. Televisions were turned on in these areas.

There were medicine cabinets mounted on the wall which were locked when not in use. Fire doors were closed, and fire extinguishers were visible. There was also an emergency 'airbag lift', clearly visible on the first floor to lift a fallen resident from floor.

Dining tables were also available in the communal combined room. Breakfast had been cleared and tables were set for lunch with place mats, cutlery, and flowers. There were several picture boards showing the days menu. The options were for breakfast, lunch, mid afternoon snack, dinner, and supper. Music was being played in the dining areas.



TV and Radio were available in the open plan lounge and dining area, however both were playing at the same time and clashing, some residents said they found this very noisy and confusing.



Residents' artwork, which included paintings and potteries, were displayed at the bottom and top of the staircase.

Books (including large print), magazines, and puzzles and blankets were readily available throughout the lounges.

Corridors to the bedrooms seemed very plain. There was no colour, artwork or interactive wall art displayed on the walls.

Handrails along the corridor walls were in a contrasting colour.

All corridors were named, and the resident's room doors displayed their names, door number and the corridor name. Most rooms did not have a picture of the resident on the door or wall. All the corridors and doors appeared to be the same which could make it difficult for some residents to know which corridor and room was theirs.

Each resident had an individually named laundry basket.

Bathrooms and toilets had picture signs on the doors, but these were not as clear as the dementia friendly signs that are used in hospitals etc. The bathroom and toilet we viewed were clean.



Staff were cleaning rooms during our visit, so there were some trolleys left in the corridors and wet floor down the corridor. There was a warning sign set out at each end of the corridors.

We were invited in to look at one resident's room. It was clean and had family photos on the walls. This was not an ensuite room and it had a commode in it.

We were informed that only seven of the bedrooms at the home are en-suite. A top-up fee is charged for these rooms.

One resident mentioned that their room was very comfy because they had done it up themselves.

There was also a separate quiet area set up as a beach looking over the garden. This had been decorated with beach scenes and a Punch and Judy stall. It was a bright and airy room which had a lovely aspect over the garden.

We noted an enclosed balcony on the first floor of the building, this looked like a bright sunny place to sit, but there were several cigarette butts on the floor, and it just needed a bit of a tidy to make it more welcoming.

Staff Support Skills and Interaction

Care staff wore uniforms and face masks. Staff interacted with residents in a caring manner both in the communal areas and when entering residents rooms.

One resident needed to be hoisted to sit for lunch, this was completed by two staff with care and dignity.

The staff interactions we witnessed were kind and caring. Staff were quick to respond to resident's needs, such as requests to use the toilet. Residents interacted well with staff, and everyone seemed friendly and chatty.

Staff were very helpful taking residents to use the toilet and used correct techniques to assist when needed.

One resident told us that the *'nurses were very good'* and she was *'very comfortable'* at the home.

Residents social, emotional, and cultural welfare.

The residents we met appeared happy and comfortable and were keen to engage in conversation with us.

Wish boxes with resident request forms were available on both floors of the home.

Activity boards were displayed on both floors with monthly timetables.

February's activity timetable included flower arranging, pamper sessions, posters of a Valentine's Day supper with a visiting singer. The communal areas were decorated with hearts in preparation for the valentine's event. Residents birthdays for February were also listed.

A part time Activity Coordinator is employed at the home, working 4 days a week, and a second activity coordinator is being recruited for an additional 15 hours per week.

A hairdresser visits the home every Monday, and several residents were using this while we visited. The staff were very complimentary about the residents hair when they returned.

There were several residents' art and craft projects on display including paintings, jewellery, and bulbs. Two residents stated they enjoyed the activities with one of the activity coordinators and they were very keen to let us know about the art and craft projects they had done with her.

They told us, *'there is a talented lot here.'*

There was also a large fish tank with pet fish in near to the entrance and a large outdoor area with chairs, plants, and bunting.

We were told that local churches, Our Ladies and Saint Augustine's, usually visit the home for holy communion and end of life. There used to be Thursday services but these haven't taken place much since COVID. Residents can go out for christenings, weddings and funerals and the home staff support with this.

Residents Physical Welfare

The residents appeared clean and well dressed all in appropriate clothing and footwear.

We saw a number of residents sitting in lines or groups, most were content. Some residents were unable to express their views.

There was a hat stand full of sun hats for residents whilst in the garden.

Call/emergency buttons were placed around both lounge areas within easy reach of the chairs.

Lifts were available onsite.

Hand gel dispensers were mounted on walls around the home, with gel available.

We asked the manager how the home helped to prevent falls. She explained that the home used falls mats with sensors, and they had chair sensors. Risk Assessments were carried out as part of Care Plans. Two hourly checks were carried out for mats under beds. Details of falls would be recorded, and residents would be referred to the GP or hospital if needed.

All staff at the home have undertaken dementia training. The home also makes a number of reasonable adjustments to support residents with special needs, i.e. residents with learning difficulties use picture cards to aid communication.

To support residents to maintain good oral health they have an oral health assessment in the first three days of arrival at Croftwood. All staff have had oral care training. If needed, residents are referred to the dentist, or GP.

Staff carry out food and fluid monitoring and record this in resident's care plans. If residents are not good with fluids staff encourage and monitor balances. Drinks jugs are available in rooms. We were told that families use their own preferences, i.e., one lady regularly has Lucozade. The home has various juices available like lemonade, orange etc. and the tea trolley serves tea, coffee, chocolate and juice and water.

Facilities for and involvement with family/friends

We observed residents with visitors in the communal lounges and staff were welcoming and provided them all with a drink. They all engaged well together.

The beach area away from the main lounge was being used for a resident meeting with social workers.

Friends and family surveys are in place and available in reception.

'Review us' leaflets with how to feedback to the home were available in both the entrance porch and reception. These included a QR code linking to an online survey.

Two families' messages were displayed on the wall of the downstairs lounge. These were very positive and thankful to the staff at the home for the care given to their family member at Croftwood. 'Thank you' cards were also dated and pinned to the notice board.

Several residents mentioned that their families visit regularly, take them out and one mentioned her daughter did their nails.

The manager has an 'open door' policy for residents and families to speak with her. The home has residents' meetings and family meetings. The home also carries out surveys with families and residents.

Additional issues

We asked the home manager if there were any issues with residents being admitted to or discharged from local hospitals. We were informed that discharge summaries were not always supplied, and the home has to chase up for medication paperwork. The home sends MAR charts and care plans with residents being admitted to hospital in an envelope, and make the ambulance sign for them, but told us they never come back. The home has stopped using the Red Bag scheme due to these issues. We were told that some residents have returned to the home with no teeth, while one patient had a cannula still in their arm. We heard that residents were often sent back to the home with no clothes, or they send them to other homes and no paperwork was received for DNR.

We will raise these issues with the local hospitals trusts.

Residents' Comments

Several residents we spoke with said they were happy at the home and everything was *'spot on'*. One resident said it was *'A good place to live'* with another saying, *'There's a good crowd here'*

One resident was sitting reading a large print book, near to the bookshelves in the lounge, she told us, *'I love to read.'*

One resident who had just finished eating her breakfast porridge as lunch time approached, said, *'I'm happy to be able to have a lie in in the morning when I want.'*

Residents told us they liked the outings and were happy when they went out.

A comment was made on the lounge stating, *'it can get a bit too noisy, but it quietens down when we all start eating.'*

Another resident complimented the activities at the home stating, *'events are usually very good especially the summer fairs in the garden, it's a real party atmosphere, with stalls and lots of people.'*

We asked one resident how she was doing, she replied, *'I just sit there all day and it's sometimes ok.'*

All the residents were moved to the dining area for lunch, but one resident mentioned she had a problem with her urine bag and stated, *'I would rather eat lunch in my room, but they won't let me.'*

Residents were complimentary about the staff, with one resident saying, *'Staff are lovely'*, while another told us, *'The girls are nice.'*

Resident's comments on the food were a bit more mixed. One resident told us, *'The food's not bad,'* and another said, *'What I eat I enjoy.'*

One resident complimented the food, saying, *'the food is always good.'*

Another resident told us, *'The menu on the wall is not always right'*, with a further resident adding, *'There's not enough choice or variety.'* One resident said they could have an alternative, telling us, *'You can order chips if you want some'*, while another said, *'I would like some Chinese food'*.

One resident said the home *'could do with decorating.'*

Friends and family comments

No additional responses were received to our online questionnaire.

Staff questionnaire comments

No additional responses were received to our online questionnaire.

Summary

We would like to thank all residents and staff at Croftwood Care Home for allowing us into their home and workplace, and for taking time to talk to us.

Everyone was so warm and welcoming, and we could clearly see the care, respect, patience, and kindness the staff have for the residents and the camaraderie between them.

Recommendations

- 1.** Ensure information on Healthwatch Advocacy Services is available. We noted during our visit that there was no information on display for Healthwatch Advocacy Services, these could be displayed in reception or entrance porch.
- 2.** Notice boards were very cluttered. These need to be kept up to date with relevant information.
- 3.** Bedroom corridors looked very plain. They could be revamped with more artwork, pictures, and interactive wall art. Each corridor could be better defined so each one had its own unique theme.
- 4.** Improve signage. We noted that picture signage on doors, bathrooms and toilets could be clearer.
- 5.** Decoration. The building itself looks 'tired' and would benefit from a schedule of interior redecoration.
- 6.** Ensure personal files are not left unattended. During our visit we noted a resident's personal file was left unattended on top of the reception desk. The front cover had their photo, name and some medical details. The desk so was on full view for anyone to see and several documents were unattended behind the reception desk. The file was eventually removed.

Service Provider Response

The following response was received from Cheryl Frankland, manager of Croftwood Care Home.

'Thanks for the report, I'm glad everyone felt welcome during their visit to Croftwood.

The display board has since been updated and decluttered and the balcony was cleaned that day.

The home is ongoing on a decoration plan, the entrance flooring has been approved and we are waiting on the contractor with date for the whole entrance flooring to be revamped.'



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