

Enter and View Report

Leycester House

Mobberley, Knutsford

August 2023



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Report Details

	Leycester House
	Edenfield Road
Address	Mobberley
	Knutsford
	WA16 7HE
	Minster Care
Service Provider	
	17 th August 2023
Date of Visit	
	Announced visit with 'Prior Notice'
Type of Visit	
	Mark Groves, Amanda Sproson, Jodie Hamilton
Representatives	
Date of previous visits	15 th July 2019
by Healthwatch	
Cheshire East	

This report relates to findings gathered during a visit to the premises on the specific date as set out above. The report is not suggested to be a fully representative portrayal of the experiences of all the residents, friends and family members, or staff, but does provide an account of what was observed by Healthwatch Cheshire Authorised Representatives (ARs) at the time of the visits.

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 staff and volunteers, who are trained as Authorised Representatives to carry out visits to health and care premises.

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 are circulated to the service provider, commissioner, the CQC and relevant partner organisations. They are also made publicly available on the Healthwatch Cheshire websites:

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



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

Purpose of the Visit

- To engage with residents, friends and relatives of the named services and understand their experiences
- To capture these experiences and any ideas they may have for change
- To observe residents, friends and relatives interacting with the staff and their surroundings
- To make recommendations based on Healthwatch Authorised Representatives' observations and feedback from residents, friends and relatives

Methodology

This Enter & View visit was carried out with 'Prior Notice'.

A visit with 'Prior Notice' is when the setting is aware that we will be conducting an Enter & View visit. On this occasion an exact time and date were not given.

Prior to the Enter and View visit the service was asked to display both the letter announcing our visit and a Healthwatch Cheshire poster in a public area. The service was also asked to share surveys amongst residents, friends and relatives. Members of the Healthwatch team visited the service prior to the Enter and View visit to deliver paper copies of the surveys.

To enable us to check that there are no health outbreaks at the premises that would prevent the visit taking place for infection control reasons, this Care Home was made aware that we would be coming on the morning of the visit.

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.

About Leycester House Care Home

Leycester House is a 40-bed care home over two floors which provides residential, dementia, respite, and palliative care. There is a wide choice of communal areas for residents to sit with visitors, to socialize, watch TV and relax away from their bedrooms. There are activities daily, freshly cooked meals, and a spacious outdoor communal courtyard/garden. The Home Manager is a new manager and has worked at the home for 19 years.

During this Enter and View visit we focussed on residents' experiences of Leycester House Care Home captured at the time of our visit. We also included comments from friends and relatives of residents. We received feedback from 13 residents and nine friends and relatives.

Findings

Understanding residents' care plans

The Manager told us that all residents have a care plan, which is updated monthly, or as and when needed during the month, and that residents can have involvement with their care plans as everything is person-centred. The Manager also said that families can also have involvement with the resident's care plans.

Quality of care

During our visit, residents were dressed in day clothes and appeared clean, tidy, and comfortable. We noticed ladies had their hair presented nicely and some ladies had their nails painted.

While we were at the home, we heard a number of call bells ringing and they appeared to be answered promptly by staff.

The staff spoke to residents kindly and were very helpful. When staff were assisting residents to get out of their chairs in the social areas, they assisted the residents where needed, but also encouraged independence.

One resident said that the best thing about the care home is that the care is done very well and the staff want everything done right for you and the staff feel like family.

Two people told us there is nothing they would change about the care home.

When friends, relatives and visitors were asked what was the best thing about the care home they said:

"The care and attention she receives."

"The wonderful health care the resident receives here."

"The level of care."

Most of the friends, relatives, and visitors agreed and said there was nothing they would change about the home.

The Manager told Healthwatch that if a resident becomes unwell and needs additional care, depending on what is in the resident's care plan and what their wishes are, they will decide whether they can stay at home or go to hospital. The Manager told us other services such as Occupational Therapy, District Nurses, Social Workers, and a Mental Health Team visit the home.

The Manager told us the home does not have a dentist, and all of the local dentists have now become private. If a resident needs a dentist they will take them to the local private dentist, but the residents are not registered there.

The Manager told us the home has an optician who visits according to their own records, and when eye tests are due. The home advises them of new residents.



The Manager told us that the hairdresser comes in weekly on a Wednesday and the chiropodist visits the home every six weeks; she will also come ad-hoc when residents need to be seen. All residents, friends, relatives, and visitors we received feedback from said they have access to both the hairdresser and chiropodist when needed.

There is a salon in the care home that is used by the hairdresser and also other services, like the chiropodist.

Residents and relatives all seem to have said yes to having access to doctors, chiropodist, hairdressers, and opticians; however, some do not know how to access a dentist.

Privacy, dignity and respect

The Manager ensured that staff are trained in dignity and respect; they receive training on their induction followed by e-learning and mentoring, and discussions in supervision.

Whilst we walked around the home staff seemed to interact well with the residents, listening and helping them when needed. One resident commented, *"The staff are like family"*.

The staff used warm tones and kind words of encouragement. The staff engaged with residents while they were walking past. One resident was watching the television programme, 'This Morning', and was commenting on the fashion and a member of staff while walking past stopped to engage with the resident about the different fashions.

All 13 residents who completed the survey said that they felt cared for and all 13 residents who answered the question said they felt they had privacy, their dignity is maintained, and felt respected and safe.

One resident said the best thing about life at the care home:

"The main thing is the staff; they are all really caring and friendly."

All of the friends, relatives, and visitors that fed back said they believed the person they are visiting is safe, respected, and has their privacy. There were three comments made by friends and family.

"I cannot fault this place."

"All seems good and friendly."

"Not always diligent with washing after urinary incontinence. Just changed clothes and still smell urine."

There was no personal information on display at the time of our visit.

Relationships

Interaction with staff

The Manager told us the staff have a good, friendly relationship with the residents; they find time to sit and chat.

During our visit, we saw staff chatting with residents in a friendly, relaxed, and professional manner. This was evident with staff throughout the visit who were seen laughing with residents and chatting informally as well as helping them with daily activities.

One resident said the best thing about life at the care home is the friendly staff. Other comments were:

"When I came here, I was so cold from my bungalow it would never get warm, but as soon as I walked through the doors to come and have a look around, I knew this was home it was so warm. The staff are like family we have grown up together. I love it here and I am very happy."

"The staff can't do enough for you they just want everything to be right for you."

"They work really hard, they're always keeping the place clean."

"The staff always have time to talk to you."

When asked what the best thing about the care home is relatives and visitors said:

"The staff are amazing so welcoming and friendly. Mum adores them all, which in turn makes me so happy"

"Care and attention - welcoming atmosphere."

"The permanent staff."

"Staff are very pleasant."

The Manager told us that their relationship with friends and families is good and that complaints and concerns are dealt with quickly.

Staff appeared happy at work; all smiled and said hello when passing during our visit. One staff member said, *"Most of the residents are local so we have grown up knowing each other."*

The Manager told us that she was aware several members of staff were not wearing name badges that day and that they should be worn.

Connection with friends and family

The Manager told us that landlines are available in bedrooms, residents have mobile phones, and ipads are available for Facetime. Emails are used, and the home has a Facebook page where families can see what activities are taking place. Residents said that staff are happy to help assist them in making contact with family, helping them use their mobile phones or landline.

The Manager told us If there was an infection outbreak, residents can still have contact with their families via Facetime, video or telephone calls, and

window visits. Signage is used at the front of the building to advise visitors in such cases.

The home regularly issues a survey for feedback. There are no family and friend meetings, however, they do hold residents' meetings, and friends and family are always welcome to join these.

Information is displayed in the foyer on how to raise concerns and the Manager always has an open door to talk.

The Healthwatch poster is on display.

There are currently no set visiting times at the home and visits can take place anywhere in the home, across all two floors. Staff encourage visits outside of meal times when they can. If families want to eat with a resident, then this can be arranged.

Wider Local Community

The Manager told us they have community links with Mobberley Primary School, and the children attend to sing and engage in crafts. Entertainers come in for sing songs.

Everyday Life at the Care Home

Activities

The Manager told us that the Activities Coordinator works 28 hours a week. She was on leave when we visited and the Administrator told us that staff would be doing some activities with the residents when they can.

Most residents and relatives are very happy with the activities provided.

There is an Activities notice board in reception that advertises daily what is available for residents to take part in during the day. There is a lot of communal space in the home for activities to take place and we noticed board games, crafts, bingo cards, exercising, and quiz boards. The Activities Coordinator will also carry out one to one activities with residents this sometimes consists of just sitting and chatting, painting the ladies' nails, and reading to them.



There are several TV lounges for residents who do not wish to partake in activities to sit in and do as they wish.

There were pictures on the wall of a party the residents had attended which had been organised by the Activity Coordinator. They celebrated the King's Coronation and are getting ready for the women's football.

Residents when asked about activities said:

"I like to join in everything going on so I don't miss out."

"The whole place is geared to make you feel happy and cared for."

"Activities are on a daily basis, but it's all down to us, we can change them if we like. It's our choice."

The Manager told us that staff are able to take the residents out; although they do not have their own transport, they have an arrangement with the local company that transports them to hospital visits. They are organising trips to the pub and local fetes, they will also walk the residents to the local shops, and there are fields with horses at the back of the home, and they will walk with the residents to see the horses. Residents were recently able to go outside and watch the Mobberley Rose Day parade go past the care home.

The Activities Coordinator also provides a shopping trolley for the residents once or twice a week with a variety of toiletries and sweets. They will also purchase things on behalf of the residents if it's not on the trolley.

Leycester House Facebook account shows that there are different activities held at the home along with special occasion celebrations.

Person Centred Experience

When asked how the home ensures residents' experiences are personcentred the Manager told us they have a new system in place that records each resident's care plan, activities, food intake, liquid intake, any activities they have taken part in and their medications. If the patient was to be hospitalised, this can all be printed off, as opposed to writing it up.

The home does not have a resident of the day but they do have a winner of the week. This person wins a trophy to keep for the week, and their picture is taken and included on their Facebook page.

The residents raise complaints, concerns, or feedback by approaching staff, residents' meetings, talking directly to the Manager, or via their family members. All residents who gave feedback said yes to knowing how to raise a complaint, concern and give feedback. Residents added:

"I know I can go and speak to a member of staff"

"I'd speak to the manager"

"I would go and speak to [Name]"

All of the relatives and friends except one said they knew how to raise a complaint, or concern and give feedback.

There are resident meetings held, but we were not told how often.

Both staff and residents told us there is access/provision for religious and spiritual needs. They have members of local churches coming to visit.

The Manager told us pets were allowed to visit; however, live-in pets would be by prior arrangement. The resident would have to acknowledge that they are responsible for the care and upkeep of the animal.

Environment

The home is located in Mobberley. The building is in good condition and the surroundings are neatly presented. There is a car park with an overflow at the side of the care home providing plenty of parking spaces.

The home is very clean and tidy. Its entrance is bright and spacious with seating available if required. Visitors are greeted by a member of staff; we were greeted by the Administrator who was friendly and accommodating during our visit. All visitors are asked to sign in on arrival and out on departure. The door from reception into the care home is electronic and controlled by a member of staff. The home has 40 single bedrooms. Each bedroom has a wash basin.



There are separate toilets and separate shower rooms. Each floor has a communal bathroom.

When asked what they would change about the care home eight residents said " there is nothing I would change". Other residents added:

"The Diet"

"The laundry, I've lost a few items" "My rooms are very hot in summer." "I like my room, but I wouldn't mind a bigger one."

"Communication could be improved by staff."



Communal Areas

The care home is light and airy with good ventilation and natural light throughout. The home is very clean and tidy.

The décor was a little tired and needs updating.





The corridors are wide and spacious with plenty of room for those with mobility aids to navigate through. All corridors have a handrail along the side for residents to use if needed. We also noticed builtin chair benches halfway down some of the long corridors. There are displays and pictures in the hallways.

There is a dining room/communal room on both

floors which is spacious, airy, and used for each mealtime. There were various TV areas in the home for residents to watch TV outside of their rooms. There are also many different toilets to access on each floor all within a very short walking distance of bedrooms and communal areas.

During our visit, there were no unpleasant smells as we walked through the care home.

Ten residents told us they were 'very happy' with the cleanliness, three residents were 'happy' with the cleanliness of the home. One resident added "it's cleaned every day they worked hard from yesterday afternoon getting the place tidy. They work hard here."

All friends, relatives, and visitors said the person they were visiting was 'happy' or 'very happy' with the tidiness and cleanliness of the home.

Whilst we walked around the home, we felt it was warm but not overly so. The atmosphere was very calm and welcoming. Four residents fed back that they were 'very happy' with the temperature of the home, one was 'happy', five were 'satisfied' and three were 'dissatisfied'.

Of the family and friends three were 'very happy', two were 'happy', three were 'satisfied'', and one was 'dissatisfied' with the temperature of the home.

The residents told us the following about noise levels within the home; five were 'very happy', one was 'happy', three were 'satisfied', and three were 'dissatisfied'. Family and friends mostly appeared to be 'happy'' or 'satisfied' with the noise level.

While we visited the home it didn't seem noisy; it was very calm and quiet.

Residents' bedrooms

Residents' bedrooms came in different sizes and were spacious, none with ensuite facilities. There are shared bathrooms, shower rooms and toilets. All rooms have windows with plenty of natural light. Some have views of the garden. There are views of the garden from the communal rooms and half of the residents' rooms.



The Manager told us that residents are able to make their rooms feel like their own. People have brought in their own furniture. During our visit, we didn't enter any of the residents' rooms but were able to look in via open doors. We noted that the residents' rooms we saw were decorated with personal possessions, including pictures, photos, and ornaments.

We did enter some vacant rooms that were not currently in use; they were light and spacious. As previously mentioned, the décor was tired and these rooms were consistent with the home décor and needed a little updating, but were clean and tidy. The rooms had their own washbasins, but no ensuite.



When asked about their bedrooms, nine residents told us that they were able to make their room feel like their own. Adding:

"I have brought my own furniture; I've brought a unit and a chair."

"The handyman and staff have helped make my room my own."

One relative told us that her mum has moved rooms four times and that staff have always been very accommodating with her request to move so has never been made to feel a nuisance.

The Manager told us that if couples wish to sleep in the same room this could be discussed if space permitted but couples would have to pay for two rooms.

Outdoor areas

The garden is a courtyard-style garden and is well-maintained and contains plenty of seating outside for residents, including chairs and benches. At the time of our visit, the courtyard was busy with residents sitting outside smoking. A member of staff said they had quite a few smokers at the home so it is often busy outside.









There were garden tools left outside in the garden. There didn't seem to be a designated area for smoking, however there was a large ash tray bin by the entrance to the building. Residents appeared happy outside.



Food and drink

The Manager told us that Brakes deliver the food to the care home and the chef prepares and cooks the meals fresh on the day.



Menus are displayed in the dining rooms and changed each day. Pictorial menus were not on display. Residents are asked each morning by a member of staff what they would like for lunch and dinner.



The Manager told us residents can opt for something different if they choose to when the meals arrive. All

residents who fed back said they were asked in the morning by a member of staff what they would like to eat for the rest of the day. Friends, relatives, and visitors gave the same feedback.

Residents are encouraged to eat in the dining rooms, however if they wish to eat in their rooms or in the TV lounge this is allowed.

When asked if they were allowed to eat meals where they liked one resident said "You can eat where you wish."

Another resident said "I like to eat my meals by the TV."

A relative commented "When mum gets overwhelmed eating in the dining room there is no fuss, they just bring it to her room."





The dining rooms are spacious, clean, and well-presented at meal times. On the morning of our visit, the tables were being set up ready for lunchtime.

At meal times the staff were all wearing PPE which consisted of a hair net, apron, and gloves.

A member of staff told us that a trolley serving drinks and snacks goes around to the residents at 10 am and 2 pm. Most residents, relatives, and friends were very happy, happy, or satisfied with the quality of the food and its taste, except for one resident and relative who were dissatisfied.

Care Home Best Practice Initiatives

MUST (Malnutrition Universal Screening Tool) which is a five-step screening tool to identify adults who are malnourished, at risk of malnutrition(undernutrition), or obesity. It also includes management guidelines that can be used to develop a care plan. The Manager told us that the home does use this tool.

Restore2 (Recognise Early Soft-signs, Take Observations, Respond, Escalate) which is a physical deterioration and escalation tool for care settings. It is designed to support homes and health professionals to recognise when a resident may be deteriorating or at risk of physical deterioration and act appropriately according to the resident's care plan to protect and manage the resident. The Manager told us she was not aware of this.

RITA (Reminiscence/Rehabilitation & Interactive Therapy Activities) which is an all-in-one touch screen solution that offers digital reminiscence therapy. It encompasses the use of user-friendly interactive screens and tablets to blend entertainment with therapy and to assist patients (particularly with memory impairments) in recalling and sharing events from their past through listening to music, watching news reports of significant historical events, listening to war-time speeches, playing games and karaoke and watching films.



The Manager told us that she wasn't aware of this, however, the Activities Coordinator uses YouTube to access lots of things that this would encompass.

Recommendations

- The home's décor needs updating
- Given the purpose of care at Leycester House, using tools such as Rita and Restore2 would be recommended and helpful in the care of the residents.

What's working well?

- The residents who shared their views and experiences felt safe, cared for, and respected at the home. Friends, relatives, and visitors also commented on the good quality of care their loved one receives
- The residents, friends, and family who shared their views feel the home is kept clean
- The residents are happy with the choice of activities that take place in the home and also like how they are involved in choosing the activities.
- The atmosphere of the home is very positive; you can see how happy the staff and residents are. This is reflected when outside services enter the home. Healthwatch were made to feel very welcome.

Service Provider Response

The home will be under-going renovations in the near future to add extra rooms and en-suites, and update the decoration.

We will look into both RESTORE 2 and RITA to improve our service.

Overall, we are pleased with the report, residents and families are happy and satisfied with the care they receive and the activities provided.