

# healthwatch

## Cheshire East



**Enter and View Report**

**Wilmslow Manor Care Centre, Handforth**

**19 March 2024**

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## Report Details

<b>Address</b>	51 Handforth Road Handforth Wilmslow SK9 2LX
<b>Service Provider</b>	New Care Homes
<b>Date of Visit</b>	19 March 2024
<b>Type of Visit</b>	Enter and View with prior notice
<b>Authorised Representatives</b>	Tricia Cooper Jodie Hamilton Liz Lawson
<b>Date of previous visits by Healthwatch Cheshire East</b>	No previous visits

This report relates to findings gathered during a visit to the premises on 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 pharmacies.

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:

- [www.healthwatchcheshireeast.org.uk/what-we-do/enter-and-view](http://www.healthwatchcheshireeast.org.uk/what-we-do/enter-and-view)
- [www.healthwatchcwac.org.uk/what-we-do/enter-and-view](http://www.healthwatchcwac.org.uk/what-we-do/enter-and-view).

## 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.

## Wilmslow Manor Care Centre

Wilmslow Manor opened in 2022 and is a purpose built 63-bedroom (all ensuite) care home located in Handforth. There are three units over three floors, for residential (ground floor), dementia (first floor) and nursing (second floor). At the time of Healthwatch's visit, 54 rooms were occupied, including ten Discharge to Assess beds.

Prior to our visit, a number of Healthwatch surveys were provided to the home. Seven residents' surveys and three friends and relatives' surveys were completed, and comments from these are included throughout this report.

# Findings



## Arriving at the care home

### Environment

The care home is situated on Handforth Road in Handforth, near Wilmslow, with clear large signage at the entrance. The building is in very good condition having been built only recently. It appeared smart, clean and tidy, and seemed very well maintained. There is a car park at the front, but parking spaces for visitors were limited. This was also highlighted in a survey completed by a family of a resident.

At the entrance of the home, we were able to walk through the automatic doors which, we were informed, are locked from 5pm each evening. We noted the interior doors, which led further into the home, had secure key pads.



The receptionist asked all Healthwatch staff to sign in on a tablet, which sat next to Carehome.co.uk review cards and a poster with a QR code. A Healthwatch feedback poster with QR code was also in view on the reception desk. We noted a

suggestion box also sat on a table near the front door. All providing plenty of options on how to provide feedback or a review.



There was a comfortable seating “Welcome” area with a coffee machine where visitors can help themselves to a hot drink and look through the residents’ Memories book.

The care home’s Manager, who has been at Wilmslow Manor since it opened in 2022, offered to show us around the home themselves after answering Healthwatch’s questions. They told us we should be seeing *“Happy people and happy staff; I love my staff. It’s a really busy home, it’s always full. Today our training room is being used for new starter inductions within the company (it’s a three day induction).”*

## Treatment and care

### Quality of care

After spending time with the Manager, they took pride in showing us around Wilmslow Manor. Residents looked well cared for, wearing suitable clothing for the environment, and the temperature felt comfortably warm but not too hot.

The call bells are on a ‘silent system’ and do not ring out loud on the corridors, but staff carry devices linked to the alarms to alert them to any problems.

The Manager explained to us that every Friday a GP from Handforth Surgery visits the home. Residents who move to Wilmslow Manor, and are out of



area, are not able to remain with their own GP. If a new resident moves to Wilmslow Manor, and their own GP is happy to keep them, the manager said they are happy to work with another surgery. For example, their discharge to assess residents are cared for by Alderley Edge Medical Practice.

If a resident becomes unwell, they try to keep them at the home. Wilmslow Manor uses a tool called Feebris – this works in any location or environment with or without internet connectivity, using a mobile app. The portable sensors allow the user to conduct a full checkup by connecting to a mobile app, to provide advanced AI-driven, clinical guidance and support. The Feebris kit includes:

1. Pulse Oximeter
2. Digital Stethoscope
3. Blood Pressure Cuff
4. Digital Thermometer
5. Android Device.

The home works closely with the urgent community response team and virtual wards.

There are ten Discharge to Assess beds at Wilmslow Manor, three of which are currently occupied.

The home has a salon for residents' use and Healthwatch was told the hairdresser visits every Monday. The salon was of a high standard and looked clean and inviting. It included a nail bar which staff use to paint the residents' nails as one of the activities on offer.



There is also a chiropodist who visits the home every 12 weeks, or as and when required, and the home uses an outside clinic for both dentistry and optical services.

One resident shared that they use their previous/original dentist and optician.

Regarding a pharmacy, the Manager said they were linked with Boots.

The other health services that visit Wilmslow Manor include the Salt Team, Tissue Viability, podiatry, district nurse, mental health and palliative care.

A resident highlighted physiotherapy was needed and received.

When asked if they felt cared for, the majority (six out of seven) of residents said they did.

### **Privacy, dignity and respect**

The Manager explained that right from the interview process privacy, dignity and respect are promoted. Staff will knock on doors, ask residents if they are happy for their personal care to be carried out, and offer them choices. During residents' pre-assessments, choices around care will be given.

One family member explained *"The illness is complicated and I feel the staff do their best to preserve my aunt's dignity & privacy."*

The majority of residents (six out of seven) who responded said they feel respected, and the majority said they feel their dignity and privacy are maintained.

Healthwatch observed the staff were kind and caring towards the residents when they met them in the corridors or in the lounge areas.

Regarding alternative systems and accessible information in the home, there are hearing loops in all the lounges; big prints and large interactive tablets are available.

Wilmslow Manor has dignity trolleys on all floors, and these are used every time a resident requires personal care. Any items for washing or disposal are discreetly placed in a compartment on the trolley, to maintain residents' dignity. After use the trolleys are kept locked away for residents' safety, and staff have access to them as needed.

## Understanding residents care plans

The Manager informed Healthwatch that all residents had care plans, and these were reviewed monthly. They were updated during Resident of the Day, who is chosen by the number of the month via the room numbers.

Where possible residents have involvement with their own care plans. *“All residents are able to express choices even if not verbal.”*

Relatives also have involvement in their loved ones' care plans, from the very start in the pre-assessment.

## Relationships

### Interaction with staff

Staff seemed very approachable, and Healthwatch was introduced to a number of staff during the visit, and they smiled and were very friendly and willing to answer questions. They seemed happy to be working in the home, told us they felt valued and looked after. Some commented about what a good employer the company was.

When asked what the relationship was like between staff and residents, the Manager's response was *“The relationship is very good, staff go above and beyond. The residents are our second family. Staff are always going out of their way to help residents, for example with shopping, along the guidelines in our company policy.”*

Healthwatch was told the relationship with residents' friends and family was good, and that the home liked to work in partnership with friends and family, and made sure everyone felt involved in their loved ones' care.

Regarding staff wearing name badges, we were told all staff should be wearing them, and Healthwatch noted they were. We also noted staff uniforms were colour coordinated according to their role.

The Manager shared that some staff celebrated Ramadan and the home supported those staff and accommodated working around this.

We were informed the care home did not use agency staff but utilises the Dependency Assessed Staffing Tool (DAST). The manager told us Wilmslow Manor consistently staffs above the tool's recommendation.

A number of comments regarding staff were received from the friends and family and residents:

*"Every member of staff is 100% professional, committed and caring. They all know mum by name. The staff have gone beyond the call of duty to find out what mum likes/doesn't like."*

*"I think they are short staffed in the way that the staff don't have a lot of time to talk to the residents. And for people stuck in their rooms it can be lonely."*

*"Command of language (English) is a problem with some members of staff."*

*"More staff needed."*

### **Connection with friends and family**

We were told that residents could keep in touch with their friends and relatives via phone calls, zoom calls, personal mobiles, and the home provides updates on Facebook. Permanent residents could have a personal telephone line in their rooms.

All the residents who responded to the Healthwatch survey said they had friends and relatives visit them. The majority (six out of seven) said they called their friends and relatives on their mobile phones.

Regarding visiting, there were no set times for family and friends to visit. It could take place any time of the day except lunchtimes, which the home asked people to avoid. However, if a friend or relative would like to book a meal with their loved ones this could be arranged, and a nominal fee would be charged.

If there were an infection outbreak, the Manager explained *“We report any infections and outbreaks to IPC (Infection Prevention Control) and follow any advice given. The home would inform any visitors before coming to see residents.”*

Healthwatch asked how friends and relatives can raise complaints, concerns or feedback, and was informed of the suggestion box, Carehomes.co.uk feedback forms and QR code on the reception desk. Feedback can also be made through using the digital reception (the touch screen tablet) in reception or in person to any member of the staff team and manager directly.

One family member shared *“There is a place to leave comments, concerns, complaints etc and the Manager has a very “open door” policy for people to see her in her office. She also holds meetings for residents and their families to attend.”*

Wilmslow Manor has regular joint residents and relative meetings every three months, and posters were seen displaying the dates and times of these for the year ahead. The Manager shared that for some residents the meetings worked better with the support of relatives.

## **Wider Local Community**

Wilmslow Academy’s children visit and participate in activities and topics, such as science experiments and space, with residents. The home also has volunteers from Vincent de Paul charity who visit monthly for social coffee mornings. Pat the therapy dog also comes in monthly to see the residents.

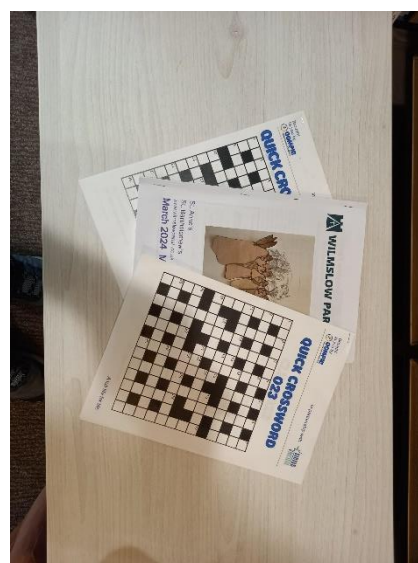
## Everyday Life at the Care Home

### Activities

We asked the Manager to share information on activities that take place in Wilmslow Manor. They have one full time wellbeing (activities) Coordinator and two Assistants who work a total of 100 hours each week, covering all seven days. Activities are inclusive and mainly occur in the Lindow communal lounge which is open to residents from all units to join in. We were told they were encouraged to take part.

There was a weekly planner on noticeboards in each unit, and staff would also let residents know what is taking place each day. Activities included arts and craft, knit and natter, exercise classes “Move it Mondays” and garden walks. There was a baking and “Cooking Thyme” club, and “The Patch” gardening club (they have grown tomatoes, marrows and cucumber from seed).

The home is in partnership with Oomph! (a wellbeing and activities platform for social care settings), and chair-based exercises are done using this.



External entertainers also visit the home, and recently the residents had French lessons which the Manager said was a great success.

Wilmslow Manor has use of a minibus and takes residents out to the local garden centre, retail shops and museums.

Residents are involved in what activities take place, and this will be discussed in the residents' meetings and options given.



The Manager told Healthwatch that there are one-to-one activities available for residents who do not leave their rooms. They enjoy conversation, pampering sessions (having their hair brushed and nails painted), reading and using the interactive tablet.

The home celebrates special events such as birthdays, and residents will receive a birthday cake and birthday banner.

*"My mum is not an extrovert, but the staff have gently encouraged her to join in, with great success. There is a notice board and staff come in to remind her of activities."*

*"Staff tell me what is going on."*

## Person Centred Experience

As mentioned earlier in the report, there are various options on how to provide feedback or make a complaint.

Healthwatch was told the home encouraged residents to raise complaints with the team leader, and that they could also give feedback and raise concerns in the residents' meetings.

When asked how they ensure residents' experiences are person centred, the Manager responded *"We give residents choice."*

Regarding provision for religious and spiritual needs, Wilmslow Manor has links with the local church which visits and delivers a service as well as communion.

A couple of relatives shared:

*“As a Catholic her faith is important to her. A priest comes in occasionally but I’m sure she would prefer more.”*

*“The local priest comes in for communion which is much appreciated.”*

When asked if the home allows pets to visit and or live in the home, we heard they were, and often dogs and cats were brought in on leads by family and friends. Pets would be able to live in the home if the resident could look after them; the staff would not be expected to take on that role.

## Communal Areas

Each floor has a lounge and dining room, and these are homely and decorated to a high standard. We were informed that these communal areas have air conditioning which is beneficial during a hot summer.

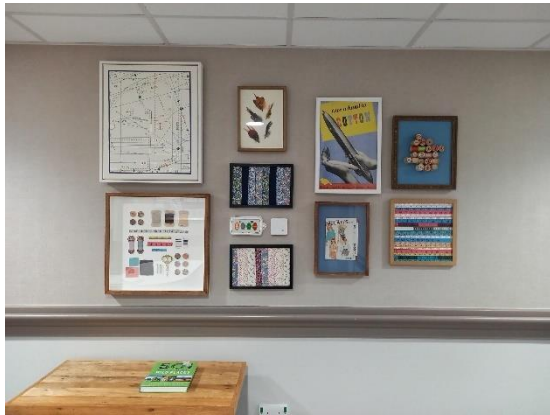
All furniture is of a good condition and quality, as would be expected in a new care home.



We noticed the air felt fresh, there were no odours and some windows were open. The temperature seemed appropriate for residents.



Corridors are wide enough for wheelchair access and have handrails. There are photographs, pictures and a map of the local area on the walls.



There is a spa bathroom on each floor, and these provide a relaxing space for residents who wish to use them.

Communal toilets are also located on each floor.



Whilst walking around, we observed the home felt calm and quiet.

## Residents' bedrooms

We did not enter any occupied bedrooms but were shown a “show” bedroom, which was well proportioned, had plenty of furniture and decorated to a high standard. The Manager shared that residents are welcome and encouraged to make the bedrooms their own, adding pictures, photographs and furniture from home. Some residents have brought their own chairs, which is allowed as long as they are fire retardant. Every bedroom has a window and a view of either the garden or some greenery and trees, and the ground floor rooms all have access to the garden. The ensuite bathrooms are all wheelchair accessible.



The Manager explained there was an acoustic monitoring system (a listening device) fitted in every room, which is activated at night when residents go to bed (residents, or family, must provide permission for use of the system). Staff can hear if a resident gets up or falls out of bed, or is making any sounds which concern them like excessive coughing. They find this system helps facilitate good sleep because, rather than disturb residents, staff will use the monitoring system instead.

Couples are able to share a room if they wish.

All bedrooms are numbered and have a name plate; and in the dementia unit each resident has a memory box on the wall outside their room (these are filled with items that are familiar to them for times they may feel confused as to which room is theirs).



## Outdoor areas

There is a good sized well maintained accessible garden with patios, lawn and raised planters, which residents can help look after. Plenty of seating is positioned in various areas giving a choice of where to sit. A path goes all around the building which residents can use. There are tables and chairs for residents to sit and chat, and eat their meals outside when the weather is fine.

The Manager shared that residents are encouraged to go outside and use the garden area.



The dementia floor has a secure accessible balcony providing a safe place for the residents to sit outside.



## Food and drink

Wilmslow Manor offers homemade fresh meals cooked on site. There is a chef forum and the chef speaks to residents every quarter to find out what meals are working well and what residents would like to see on the menu.

Residents choose their meals the day before, and if a resident were to change their mind on the day there is always plenty of food available for them to have another option. In the dementia unit the residents will choose at meal times, using show plates to help them make the choice. The home is in the process of making pictorial menus.

The menus for the week are nicely presented in folders on the dining tables, where breakfast, lunch and dinner choices are provided. There are two hot options and a light bite menu.

They cater for different dietary needs. Currently, this includes catering for vegetarian, gluten-free, lactose free and a pescatarian.



We were told drinks and snacks were available, including fruit and homemade cake, throughout the day. Each unit has a kitchenette where there is a fridge with yogurts and jelly. A trolley offering drinks and snacks to the residents goes around mid-morning and mid-afternoon.

We saw some fruit bowls in the dining room we visited. The Manager explained they had changed the seating plan in the dining rooms so residents are able to sit in larger groups. This has had a positive impact on food intake and hydration. The gentlemen tend to sit by themselves.

Residents can choose where they would like to eat their meals, however the staff do try to encourage residents to eat in the dining room to socialise. Feedback from some residents include:

*"Staff come and ask me what I'm having."*

*"Staff come round and show the menu."*

*"Daily - menu gets brought round to choose."*

*"Food is too salty. I would like some nice chicken."*

One family member commented that *"The home knows about dietary needs but still put unwanted items on the plate."*

Another said *"I join my wife often for meals. She is shown the choice, generally choice of 2 main courses, so that she can see the food before deciding. My wife has difficulty cutting food and the staff are very helpful to her."*

## Care Home Best Practice Initiatives

During Enter and View visits, Healthwatch asks which NHS care initiatives have been adopted at the care home. The three we focus on are:

<b>MUST</b> (Malnutrition Universal Screening Tool)	A tool used to identify adults who are malnourished, at risk of malnutrition(undernutrition), or obesity. It also includes management guidelines which can be used to develop a care plan.
<b>Restore2</b> (Recognise Early Soft-signs, Take Observations, Respond, Escalate)	A tool designed to help staff recognise when a resident may be deteriorating or at risk of physical deterioration and act appropriately according to their care plan to protect and manage the resident.
<b>RITA</b> (Reminiscence /Rehabilitation & Interactive Therapy Activities)	A digital reminiscence therapy with user-friendly interactive screens and tablets to blend entertainment with therapy. It assists 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.

Wilmslow Manor uses both MUST and Restore2.

RITA is not used but the home has a Magic Table and giant tablet which has similar interactive programmes.

During our visit we were told the home had recently engaged with the End-of-Life Partnership regarding starting the six steps training in the future.

When asked about the biggest challenge and success they have had to date, the Manager explained *"The building of the team. The team is great and there is a really good vibe here. Starting from scratch has been a big learning curve, and I've had great support from our team and things have run smoothly. On the whole, I think we have got things right."*

## Recommendations

- Consider holding friends and relatives' meetings more frequently, ie, every couple of months.
- Consider employing another carer to give staff more time to spend with residents.

## What's working well?

- Having a calm environment for residents.
- A supportive team of staff who are valued as essential to the efficient running of the home.
- Having an open-door policy and taking on board comments and feedback from residents, friends and family.

## Service Provider Response

Overall, we are happy with the feedback from your visit.