

# healthwatch

Cheshire West



**Enter and View Report**

**Kitwood House, Northwich**

**22 April 2024**

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## Report Details

<b>Address</b>	Kitwood House 162 Middlewich Road Rudheath Northwich Cheshire CW9 7DW
<b>Service Provider</b>	L&M Healthcare
<b>Date of Visit</b>	22 <sup>nd</sup> April 2024
<b>Type of Visit</b>	Prior notice
<b>Representatives</b>	Jodie Hamilton Tricia Cooper
<b>Date of previous visits by Healthwatch Cheshire West</b>	Not applicable

This report relates to findings gathered during a visit to the premises on specific dates 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:

- [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.

Prior to the visit a Healthwatch Representative delivered to the Manager ten Residents and ten Relatives surveys and a poster to be put up in the care home with a QR code for access via a smart phone to the surveys. The Manager confirmed receipt of our email which included information about Healthwatch and the Enter and view process together with a Survey poster.

Healthwatch received back three Relative's surveys and 0 Residents surveys. No surveys were completed via the QR code as the care home did not put up the Healthwatch survey poster; it was still in the envelope with the remaining uncompleted surveys returned to Healthwatch. The poster sent via email had also not been printed off.

## Kitwood House

Kitwood House is a bespoke building, purpose built for the care of people living with Dementia. The 68 bedded care home specializes in Complex Dementia Care and has four units over two floors. Kitwood House is in Northwich, just a short 6-minute drive from the town centre where there is easy access to local transport links. In addition, the M6 is close by.

# Findings

## Arriving at the care home

### Environment

Kitwood House was easy to find. Healthwatch Representatives did not notice any signpost before arriving to the road that leads to Kitwood House, but the building is very identifiable with signage on the building from a distance. The building is in impeccable condition, very well maintained. Arriving at Kitwood House there is only a small car park that was very busy; cars were parked along the side of the access road due to there not being enough car parking spaces.

The entrance to the building was very clear and had an electronic sliding door that led you into a very large spacious, secure reception entrance and we were greeted by a friendly receptionist. Healthwatch Authorised Representatives explained who they were and asked to see the Manager. Both Healthwatch Representatives were asked by the receptionist to sign into the building (the care home uses an electronic signing in system that also takes your photograph along with name, car registration, what part of the home you are visiting and who you are visiting). Due to the Manager being otherwise engaged in a meeting, Healthwatch Representatives were offered a drink and waited in the reception area.

The reception area is very spacious and very well presented; the décor is to a very high standard. Around the reception area was various information: there is a big television screen that showcases different information about the home showing the current day's menu, activities for the day, photographs of the staff who are in that day and their positions and past events. There were also Memory photograph books on a table, activities timetable, employee of the month voting box, residents' feedback from a survey in March 2024, and a copy of the complaints procedure. There is seating for visitors in reception with a coffee machine that visitors can help themselves to.



Once the Manager was available a Healthwatch representative spoke with them whilst another Healthwatch representative was shown around the home by one of the unit managers.

There are four units in Kitwood House; two dementia nursing units and two dementia plus units (for more unpredictable behaviour). One is a male only unit, and one is mixed dementia plus.

The four units of the care home are all individually named as followed, and each unit is secured with a fob system which allows access in and out of the unit.

- Queen Mary (ground floor)
- Queen Elizabeth (first floor)
- Northen Bell (first floor)
- Flying Scotsman (first floor). This is a male only unit.



## Treatment and care

The Manager has been at Kitwood since it opened in August 2021. They started as Clinical Lead and then moved to the Deputy's position. They have been the Manager since March 2024. They told Healthwatch that whilst visiting the home they would see a supportive team.

*"We have a fantastic activities team who do something every day. Staff do one to ones with residents (we have seven one to one individuals). The care given really stands out."*

## Quality of care

All relatives shared with Healthwatch in the survey that they feel their family member is cared for at the care home. Relatives were asked in the survey what was the best thing about life in Kitwood House for the person they are visiting, and relatives shared with us:

*"They are looked after."*

*"Activities"*

*"Given my relative's current state, having his personal needs met and cared for is the most important."*

During the time Healthwatch visited Kitwood House there were lots of residents using the communal areas within the different units in the care home. All residents looked well looked after, dressed in clean day clothes. Healthwatch noted there were more staff than you would usually see with residents generally within a care setting and the Manager told Healthwatch that there were currently seven one to ones at Kitwood House (one to one care is always keeping the resident in sight day and night which will require one member of staff at a time carrying out one to one care of a designated resident).

A relative shared with Healthwatch in the survey *"More staff are required ideally, could offer more one to one sessions to allow residents to engage more on their good days."*

Healthwatch asked the unit manager how the call bell system worked as they had not yet heard one go off, and they were told that the system works in a way that the call bell alarm for one unit will call across two units on the first floor to alert staff, and the ground floor has a separate call bell system. In an emergency for any unit, the call bell will alert all four units. During this conversation Healthwatch did hear a call bell go off and it was attended to promptly.

Residents at Kitwood House receive care for their health and wellbeing via a variety of visiting services. Healthwatch asked the Manager which GP surgery the care home uses and how often the GP attends the home and they told us:

*“We use Watling Street Medical Centre in Northwich, who do a weekly ward round. They will see a maximum of 15 residents a week, and if we have an emergency they will come in outside of this round. I will add on any residents to the round if they need to be seen by the doctor, or if they need a face-to-face review. Residents can request to stay with their own GP, however normally the practice will say they are now out of area so residents will end up using Watling Street.”*

The Manager told us if a resident became unwell and needed additional care that they would try to keep them at the home if they could be treated there. If there is an infection, they give antibiotics orally, unless the GP advises they go to hospital. They do aim to nurse residents here in an environment they are familiar with but will do what is in the best interest of the residents.

The chiropodist visits every six to eight weeks but will come in in addition to this if a resident has an issue with their feet. A hairdresser comes in weekly on Tuesdays. The Manager told Healthwatch that they have recently changed opticians to Eyecare Oncall and their first visit is planned for May. Healthwatch asked if the care home have a link with a pharmacy, and the manager told us:

*“The care home use HBS who deliver medication on a 28-day basis. For acute prescriptions we use Rudheath Pharmacy.”*

Other health care services which come into the home include the Tissue Viability Team, podiatry, and Admiral Nurse.

## Privacy, dignity and respect

Healthwatch asked the Manager how they ensured privacy, dignity and respect were promoted.

*“We provide online training for staff and face to face induction training. When we interview candidates, we are looking to see if they mention privacy, dignity and respect in the interview. We ensure residents can have private discussions in their own bedrooms, and we respect their choices day to day. Doors and curtains are closed, and residents are covered with a towel when personal care is provided, and the chiropodist will treat residents in their bedrooms rather than a communal area. We try to ensure we meet residents’ wishes for end of life, for example, if someone doesn’t want to be on their own or would like to listen to music.”*

Two relatives shared in the surveys that their relative were respected, and one relative said they did not know if they were respected. All three relatives said their relative is safe, their dignity is maintained and they have privacy.

During our visit we observed staff interacting with residents in a kind and caring way. It was clear to see the caring nature of the staff; sometimes there was no conversation, but they had the company of a carer who was communicating through touch. Some residents were sitting quietly, a member of staff had gently patted the shoulder or arm of the resident just to let them know they were present, and the residents appeared to be comfortable with this interaction. There was also at the time of the visit an activity running where staff were helping residents participate. Whilst Healthwatch were being shown around the home there was no personal information on display, on some residents’ doors there was a photograph along with the resident’s name. We did not observe any alternative systems, accessible information, hearing loops or large print information. The unit manager did tell us that there was a lady who was deaf who did not like to leave her room and interact with people but is slowly making steps to come out and join the other residents. This resident has also been teaching the

staff little bits of sign language which has been encouraging the resident to interact with others.

The Manager told Healthwatch:

*“Eyecare Oncall has provided large magnetic boards which we can use for the daily menus. Our maintenance team will be putting these boards on the walls. There are large signs around the home to show where the nurses stations, garden and bar are.”*

## **Understanding residents’ care plans**

Healthwatch asked the Manager if the residents have care plans and how often they were updated:

*“The care plans are on PCS (person centred software) and are updated monthly. For residents that are more able, if they can have involvement in their care plan they will, however we only have one resident currently deemed to have capacity and they have involvement in their care plan.”*

When asked if family could have involvement with a resident’s care plan the Manager told us:

*“Families are involved too, on admission. They are given an ‘All About Me’ document which has a likes and dislikes page, and hobbies and interests can be noted down. We personalise the care plans as we go along, and we have care reviews with families every six months. The information is recorded on the PCS.*

*We are currently trialling a Relatives Gateway where families have access to their loved ones’ care plans. Messages for care staff can be added, and during the day care staff can update the plans with what activities have taken place. For example, we uploaded a photo of one resident who’d had their hair cut. Relatives can see what’s been going on.”*

## Relationships

### Interaction with staff

During the visit at the care home Healthwatch witnessed staff interacting with residents. We saw various interactions from conversation, assisting with an activity taking place, staff helping a resident with a drink and staff sitting with residents. Staff were all friendly and either said hello to Healthwatch representatives or smiled whilst busy with residents.

The Manager told Healthwatch *"There is a great relationship between staff and residents. We used to have quite a high turnover of staff, then we introduced 'Induction Week' which includes dementia training, first aid, fire response, moving and handling, and PRICE training (how to deal with aggressive behaviours and teaching de-escalation techniques). We now have a good team of care staff."*

*Using the PCS, staff can access every resident's care plan, and can read their likes and dislikes which can help improve the relationship with residents. Staff are allocated to their own units, so they get to know and understand the residents and provide a continuity of care. We see staff laughing and joking with the residents."*

Healthwatch asked the Manager what is the relationship between staff and residents' friends and family like?

*"The relationship is good, and staff communicate with families. You only have to look at our Facebook page to see the relationship we have with relatives. One of our residents has Down syndrome and they need a set routine. They became very distressed when they first arrived at the home, so we sat down with the family and had a good discussion about their relative's likes and dislikes. We have now built up a relationship with the resident; staff will sing with them and the family trust us to look after their loved one."*

The Manager said staff should be wearing yellow and blue Dementia Friendly name badges, and that their name badge was currently on order.

Healthwatch are unable to confirm if all staff were wearing name badges.

## Connection with friends and family

During our visit we did not see any friends and family visiting. All three relatives who completed the survey shared that they feel welcomed by staff at Kitwood House.

Visiting can take place at any time at the home, and there is fob access to the units and two family members are given fobs to use. Visiting can take place anywhere in the home, and they have drinks facilities in the entrance area and in the summer house, which can also be used whilst visiting.

Healthwatch asked the Manager how they kept friends and relatives in touch.

*"This is done mainly through visiting. Phones and tablets can distress residents if they don't understand them or have hearing difficulty, so we don't tend to use them."*

*"During outbreaks, the home follows the local infection control guidelines. During the last outbreak, there was no restriction on visiting, and one person per family was allowed to visit."*

Two out of three relatives said they knew how to raise a complaint, concern or give feedback, and the Manager told Healthwatch:

*"Friends and relatives can raise complaints to me directly, over the phone or on email. Before I became the manager, I was a nurse on the floor in Kitwood House, so relatives know me and will approach me. They can also speak to nurses on the units or the Deputy Manager. We have a complaints procedure that we follow."*

There has been one relatives' meeting so far this year at Kitwood House and a further two have been arranged.

## Wider Local Community

A local primary school comes in with Jo Jingles each month. A local vicar holds a monthly service, and the church choir also visits. They are looking at going to a local dementia café in Northwich and planning on setting a date for this. Some residents are taken to the local pub for a drink and lunch, and they can walk along the canal whilst there.

## Everyday Life at the Care home

### Activities

Activity planners were well promoted around the home, and Healthwatch saw an interactive screen in the reception area that promotes activities that day, week and past activities. There was also an activity planner in reception and in each unit.



There was evidence of past activities in the Memory books in reception. Each unit has a memory book with lots of photographs of past activities. There is also a Jolly Trolley which is absolutely fantastic! The trolley is stored in reception where it plays a slide of activity photos from the week before so friends and family can see what the residents have been up to.



The Jolly Trolley is also used to celebrate special events, in activities and in residents' bedrooms for 1-2-1 activity time. It has its own memory book full of fantastic photographs of ways it has been used. The activities staff really go above and beyond with the effort that goes into creating themes for the Jolly Trolley. We saw it had been decorated for the King's Coronation, Willy Wonka, Spanish day, Easter, Sweet shop, Bingo and much more.



The Manager shared *"Kitwood House has three amazing activities staff, one full-time Head of Activities and two Coordinators. They work 98 hours in total each week."*

The activities team discuss with residents on the day which activity is happening. There is a range of activities that take place; residents enjoy



craft, bingo, jigsaws, and baking. The care home books a lot of visiting entertainment which includes Creative Mojo (craft), various singers each month, animal visits and Jo Jingles (pre-school children), primary school children and members of the local church also visit.

The majority of relatives who completed the survey are very happy or satisfied with the choice of activities on offer at Kitwood House.

For those residents who do not wish to participate in group activities there are one 1-2-1 activities, they will enjoy individual time with staff where the staff member will read them a book or newspaper, ladies might like to enjoy some hand care where they will have their nails painted and a hand massage. The home has recently purchased some new sensory items which will be used mainly in the salon. When the salon is not in use the activities team turn the salon in to a Namaste sensory area; they have sensory lights, smell and touch items. The Activities Lead showed Healthwatch a wide selection of sensory items and it was explained how residents find the sensory activities very calming and staff will bring down one or two residents at a time to enjoy this.

Arriving at Kitwood House Healthwatch saw in reception on the interactive screen that Creative Mojo would be visiting the home that day to carry out a craft activity with the residents, and we were lucky enough to observe the residents taking part in this activity. The residents created a piece of artwork where they had all done a little piece to create a collage. There was evidence of other pieces of art the residents had previously created with Creative Mojo on display. Watching the residents take part in this activity we were able to see it's something that they enjoy.



Healthwatch asked the Manager, do residents have involvement in what activities take place?

*“Those who are more able will ask for a particular activity, eg Elvis singer. One resident goes swimming and shopping with their carer, and they also enjoy drawing.”*

Healthwatch asked the Manager if the care home celebrated special events:

*“The home has parties with balloons, buffet and a cake, for birthdays etc. A singer might come in on the day, and family will join in. They had a Harry Potter recently when all the Activities Coordinators dressed up in character. There has also been a Willy Wonka Day where there was lots of chocolate, including chocolate fountains.”*



The Activities Lead shared that the residents have the opportunity to go on days out, but they tend to go out when the weather is better. They like to go to the local garden centre and have some cake, across to the local pub where there is also a canal. Residents will go out 1-2-1 with a member of staff.

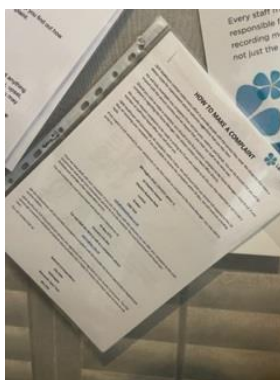
## Person Centred Experience

Healthwatch asked the Manager how the care home ensured residents' experiences are person centred and their response was:

*“If a resident has an interest, we try to encourage it. We have a profoundly deaf resident who lip reads, and we use little written notes. She loves bingo because the Jolly Trolley shows the numbers in huge print.”*

Kitwood has resident of the day, and they are chosen by the date and room number. For example, the day of our visit was 22<sup>nd</sup> so those two residents in rooms 22 on both floors are residents of the day.

They do not currently have resident meetings but do hold relatives' meetings. Healthwatch asked the Manager how residents could give feedback, raise a concern or make a complaint and we were told residents could raise complaints or concerns to staff members or through their family. In reception there was information on how to make a complaint.



## Communal Areas

Kitwood House is decorated in light, calming colours and is very spacious with very large corridors with handrails, seating and open plan dining lounge areas. The décor is of an interactive nature. The layout of the building allows residents to have plenty of



space around the building, so they do not feel restricted and allows plenty of space for mobility aids to be used safely and easily.

The open plan layout of the communal lounges and dining rooms allow residents to be observed safely without feeling they are being watched. Within the open plan lounge and dining areas there are various areas - television lounge area, bar area and dining area.



Residents can choose to sit where they wish; some areas are quieter than others. All areas are easily accessible with plenty of space. There is also a small kitchenette where drinks and snacks are stored for residents to access whenever they wish. A member of staff will assist the residents with this.



The themed interactive areas within each unit represent daily life – such as shops, market and cafe, and a ticket office to use the interactive train which is a railway carriage (a virtual train carriage which provides an interactive experience for residents). These areas are also used as part of the daily activities. For example, the unit manager told us that there was a gentleman whose favourite place was Germany. The staff would put a train ride through Germany on the virtual screen and the gentleman would enjoy the interactive travel through the country. The same can be done if someone wished to travel through Spain and so on.

The furniture in the home is clean and of very good quality and consistent throughout the home in all units. The house keeping throughout the home was consistently to a high standard, all areas were clean and tidy.

Healthwatch observed many residents sat in the communal areas, where they appeared comfortable and happy to be there. There were some areas of the home that could benefit from greater ventilation and fresh air.

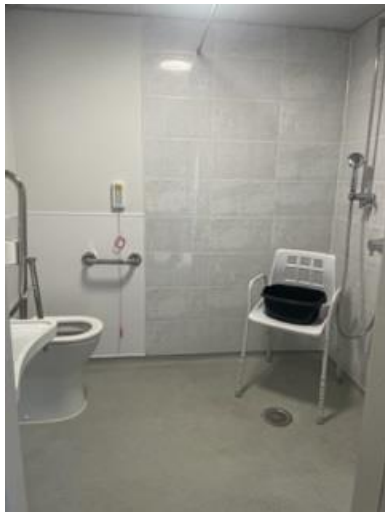
There was a communal bathroom with a shower, bath and toilet on each unit. The residents mainly use the ensuites in their bedrooms but will use the communal bathroom when they have a bath. The bathroom we saw was very clean and tidy, it had lighting that can be dimmed, and colour changed to encourage a calm environment when having a bath. These bathrooms were sign posted using Dementia friendly signage.



## Residents' bedrooms

There are 68 bedrooms, all ensuite over four units at Kitwood House. All bedroom doors have individual colours, and each bedroom has a nameplate on the door. The ensuite facilities include a wet room shower, sink and toilet. The bedrooms are all a very good size with adequate furniture and a television fixed on the wall. There is natural light from the window in all bedrooms and there are views of the gardens from some of them. We were told residents can bring in personal belongings such as pictures to put on the walls. Healthwatch asked the Manager if couples could sleep in the same bedroom.

*"We have had a couple in for respite, and we put two beds in one room and made the other room into a lounge for them."*



Relatives shared in the survey that their loved ones were able to make the rooms feel like their own by adding furniture or putting pictures up for example.

## Outdoor areas

There is a secure garden that is well maintained and is easily accessible from the lounge and dining area with several double patio doors which open into an enclosed dementia friendly garden with a safe pathway. The garden has accessible planters which, in seasonal months, the residents use to do some planting. There is also a balcony on the upstairs floor with a seating area that allows residents to go out for fresh air. The Activities Coordinator

explained that in the warmer months residents liked to go outside and sit in the garden.



One relative shared in the survey that access to the rear garden is something they would like to change about the care home.

## Food and drink

The dining area is within the open plan communal setting of the dining room and lounge. There were several tables to accommodate the residents. The Manager told Healthwatch *“Some residents prefer to eat in the communal dining room and some prefer to eat in the bedrooms (we’ll leave doors open to check they are okay).”*

The care home uses pre-prepared meals daily from *Apetito* who deliver meals twice a week. They also have a chef and a cook for those who do not want the pre-prepared meals, and they make breakfast, cakes etc. There was a daily menu on display in reception but Healthwatch did not see any menu displayed within the four units. The unit manager told us that it was because residents would take them down and walk off with them. Residents will sometimes choose what they would like for lunch the evening before or in the morning of that day. However, the staff find this is not always the best way so they like to plate up two different options and show the residents what is for lunch/dinner that day, so the residents can see which they would like. *Kitwood House* caters for relatives if they wish to join their loved ones at mealtimes.

The Manager explained *“There is a four-week menu. Some residents are asked for their choice of meal in the morning, but they can forget this, so we offer another option during meal times.”* Kitwood House have residents with modified diets and vegetarian diets which they accommodate.



When asked if there were drinks and snacks available for residents throughout the day, the Manager said *“The home has fridges on each unit stocked with yogurts and fruit. Other snacks like cake and crisps are on offer. We don't have a drinks trolley, but the kettle is on constantly through the day. We have juice dispensers so residents can help themselves.”*

Healthwatch observed residents being given a drink. We did not see any snacks or meals being given during the time we were there but did hear conversations where residents said they had had their breakfast.

In the reception we saw relatives had given feedback regarding the food options at Kitwood House and that they *“would like to see more homecooked, hot, tasty food with more variety of choice”*. The home acted on this and Apetito provided a tasting session of their new spring menu and Kitwood is going to continue to ensure they regularly review the menus and provide seasonal options.



Relatives shared in the survey that one was happy, one was satisfied with the quality of food, and one relative answered they did not know.

Two relatives answered that they were happy with the taste of the food and one relative answered they did not know.

Two relatives answered that they were satisfied with the availability of snacks and one relative answered they did not know.



One relative answered they were very happy, and one relative answered they were satisfied with the availability of drinks and one relative answered they did not know.

## Care home Best Practice Initiatives

During Enter and View visits, Healthwatch observe 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.

Kitwood House uses MUST, and they are currently providing nurses with training for Restore2. They do not use RITA, however the care home has a giant iPad and Toga Table which have similar interactive activities.

The Manager told Healthwatch their biggest challenge has been staffing. They explained they are never short staffed because they have a good

relationship with two agencies, but recruiting for permanent positions can be difficult, particularly for night nurses. They think this could be because of their location which has a lack of bus stops and no train station. *“We like our staff to have had some experience with dementia.”*

The Manager told Healthwatch that their biggest success to date is *“Making Kitwood House a great place to work, where residents and staff are happy. We have a strong team of staff and are always building on this. Also, my move from Clinical Lead and Home Manager. I am passionate and proud about the home.”*

## Recommendations

- More ventilation and fresh air to be let in around the home
- Update the Manager’s details on Carehome.co.uk website
- Ensure any external paperwork/mail the management team receive is checked, read and actioned.

## What’s working well?

- There were lots of residents out of their bedrooms and in the communal areas
- There was an activity taking place and well attended by the residents
- Residents looked well cared for and looked after
- The activities team offers many different activities and puts a lot of effort into what activities are taking place
- Jolly Trolley is a fantastic addition to the home
- House keeping was to a high standard

- Healthwatch observed a caring approach from the healthcare assistants with the residents.

## Service Provider Response

Healthwatch asked the Manager for feedback on our findings in the report and their response was:

“We have now changed the manager's name on Carehome.co.uk to myself.

We are looking into ventilating the air on the units, we do have doors on all units including the first-floor units, there are blinds and curtains to shut out the sun if needed. We have residents who will shut the doors and windows at times, and this is monitored by staff.

Correspondence to the management team has been discussed with all admin and front of house staff to ensure any mail is given to me or left on my desk”.