

healthwatch

Cheshire West

Enter and View Report

Hillcrest Care Home, Frodsham

15 July 2024



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Report Details

Address	Manley Road Frodsham Cheshire WA6 6ES
Service Provider	Aurem Care
Date of Visit	15 July 2024
Type of Visit	Enter and View with prior notice
Representatives	Tricia Cooper Jodie Hamilton Corinne Shaw
Date of previous visits by Healthwatch Cheshire West	5 February 2019

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
- 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.

Hillcrest Care Home

Hillcrest is a 31 bedroom dementia (predominantly) and residential care home located on the outskirts of Frodsham and has been purchased by Aurem Care within the last 12 months. The current Manager has been working at the home for ten years.

The report contains responses from Healthwatch surveys completed by residents and family and friends. Of the six residents who completed a survey prior to our visit, all were helped by a member of staff, and five relatives completed friends and relatives' surveys. On the day of our visit, two residents completed a survey with Healthwatch representatives. Where relevant, we have included comments provided in these surveys.

Findings

Arriving at the care home

Environment

Hillcrest is an old Victorian style house tucked away in a small residential area, one mile from Frodsham. It has two signs on either side of the driveway; however, these were slightly hidden by overgrown hedges so you could drive past easily. Parking is limited but on the day of the visit all the Healthwatch representatives were able to park. The building looks as though it requires some attention, but with the recent change of ownership, some improvements in the home would be expected.



There are a few steps leading to an open porch and front door, which was secure on our arrival. We were asked to sign in their visitors' book and we noted there was an option to provide reviews of the care home through carehome.co.uk review cards.



The entrance was pleasantly decorated with an England flag and RAF uniform.



Treatment and care

Quality of care

We asked the Manager various questions regarding care provision at Hillcrest.

The home receives weekly visits on a Wednesday from a GP at Knoll Surgery where an Advanced Nurse Practitioner will come and see the residents.

When asked if residents could stay with their own GP, the Manager shared that all residents were registered with The Knoll surgery and most of the residents are from the local area. If someone wishes to stay with their own GP this is something that the home could enquire about, although the Manager told us Helsby Surgery preferred that all residents were registered with The Knoll.

Depending on the type of care that the resident would need, if they became unwell the home would try and keep the resident at Hillcrest. *“We have had involvement with the Hospital at Home team, to accommodate keeping a resident here recently, but 999 advised us that the resident needed to go to hospital.”*



There is a salon in the home and a hairdresser visits weekly, normally on a Tuesday.

Hillcrest has links with other services, including a new chiropodist who will visit every eight to nine weeks.

The care home is linked with Helsby dentist, and the Manager explained that residents can only attend on certain days of the week when the downstairs dentist's room is available.

Hillcrest has recently moved to Iris Opticians who visit the care home when needed, and it also has a link with Holland Pharmacy.

The District Nurse, Physiotherapist and Tissue Viability Nurse are other health services that visit the care home.

The residents looked well-kept and were dressed appropriately for the season.

Whilst we were being shown around the home, we noticed call bells sounding and being answered promptly.

One relative shared *“Residents sometimes finds alarms and other residents shouting disturbing.”*

All residents who responded to our survey said they were either happy or very happy with noise levels, cleanliness and tidiness.

Understanding residents care plans

The Manager explained that all residents at Hillcrest have care plans and they are updated monthly. *“We are just in the middle of moving over to digital care plans; it’s a work in progress”.* (This is a change resulting from having Aurem Care as new owners.) Residents who have capacity can have involvement with their care plans at the assessment stage of moving into the home and during any reviews. Relatives can also have involvement in their loved one’s care plan when appropriate.

Privacy, dignity and respect

The Manager told Healthwatch that they ensure privacy, dignity and respect are promoted within the care home by staff knocking on residents’ doors; ensuring doors are closed when personal care is being carried out; and care reviews and healthcare appointments being done in a private space.

We observed staff being friendly and patient with the residents, assisting them with walking, either independently or with a walking frame. They made sure the residents were comfortable and their needs were met.

All residents who completed a survey said they had privacy and their dignity was maintained.

When asked about alternative systems, accessible information, hearing loops and large print, the Manager said there was not a need currently, but in the past story boards, large print, subtitles and audio speakers have been used for residents who required support.

The notice boards Healthwatch saw were a little cluttered with all sorts of information where nothing could stand out to draw the attention of residents or visitors.

When residents were asked what they thought the best thing about life at Hillcrest was, they shared the following:

"Food, the company and own bedroom"

"Being made to feel at home"

"Meeting and mixing with people"

"Being left to myself to do word search"

"Feel safer with having help when needed"

"All the help and support"

Relatives shared that the best thing was:

"Constant interaction, safety, atmosphere"

"The care and love the team give"

"The 24 hour care and the food"

"Any other care - hair, chiropody, dressings - are dealt with efficiently."

"I take mum to the dentist in Frodsham."

"Ensuring the right clothes get to the individual."

"Mum very happy and well looked after."

"Always has the correct care she requires. More social than being at home alone."

Relationships

Interaction with staff

Regarding the relationship between staff and residents, the Manager said it is *"Good, we have good banter! We know the residents very well, one of our strengths is getting to know the residents so well."*

When asked if they had a good relationship with the staff, all residents who completed our survey said they did. Two added:

"They are friendly and kind."

"Share jokes with them"

During our tour of the building, Healthwatch observed staff chatting to residents whilst they were eating their lunch.

"The whole team takes time with mum. They spend time talking to her and taking care of ALL her needs."

When asked what the relationship between staff and residents' friends and family was like, *"Good, we have regular family that visit the residents, they have become part of our family. There are a lot of people living and visiting here from our local area."*

At the time of our visit staff were not wearing name badges. However, with the recent change of ownership at the home, badges are going to be introduced. The Manager was looking at design choices and was going to share these with staff so they can decide the best option.

We met a number of staff at Hillcrest who were friendly and chatted to us freely; they all seemed happy and approachable. We observed staff

interact with the residents, by being courteous, patient and helpful. Staff were supporting a couple of residents with their meals during lunch.

Connection with friends and family

We asked the Manager how they kept friends and relatives in touch with residents, and they explained they had an open-door policy and they had a “*good rapport*” with family members. The care home updates their Facebook page with information and will also send emails to family members. If a resident has an appointment with a health professional, staff will call their family to keep them updated about their loved ones.

One relative shared that “Family and friends ring the care home, so we are able to speak on the telephone.”

For those wishing to visit their loved ones at Hillcrest, there are no set visiting times, however they ask visitors to avoid mealtimes because the home protects these.

We did not see any friends or family visiting during our Enter and View.

If there is a health outbreak in the home, the Manager shared that friends and family will be notified by telephone, via email, on Facebook and a notice will be placed on the door. They can then decide if they still wish to visit. Appropriate PPE will be worn and certain areas will be available for visits to take place (there is still a pod at the home from Covid for visits to be accommodated).

If friends and relatives wish to raise concerns or provide feedback, “*We have an open door – most relatives come and speak to me and they’re welcome to put things in writing or an email.*”

Every three months friends and relative meetings are held at the home.

Wider Local Community

Hillcrest has some involvement with the wider community, and the Manager shared “*Our Activities Coordinator takes some residents to the dementia Memory Café in Frodsham each week. We have Popcats Music*

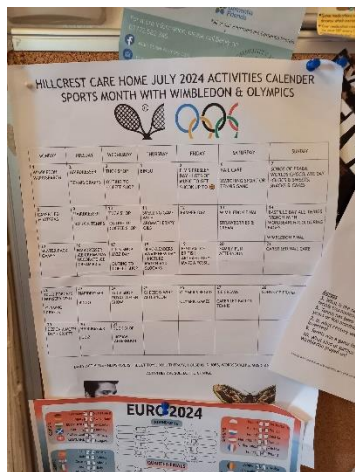
Time come to visit and some residents go out to church.”. They explained it can be difficult to get the local church to come and visit the home.

Everyday Life at the Care Home

Activities

There are two members of activities staff at Hillcrest who work 25 hours a week between them, Monday to Friday, covering activity tasks.

“Bowling, skittles, crafts, books, colouring and games are some of the activities that take place here. Creative Mojo comes in every couple of months.” We were told residents have involvement in the type of activities that take place. Healthwatch noted a Wimbledon and Olympics themed timetable on a noticeboard in the entrance hall during our visit, however, it was difficult to notice among the other information.



“When ZooLabs come and visit, we will take the animals to the residents in their rooms. Those who tend to stay in their rooms don’t really have an interest in joining activities, but staff will go and sit and chat on a one to one with residents in their bedrooms.”

One family member shared their loved one was kept up to date with weekly activities *“Verbally, notices. Encouraged to attend them.”*

The majority of residents who responded (six out of eight) said they were either happy or very happy with the activities on offer, and the majority (six out of eight) said they were kept informed about activities taking place each week.

At the time of our visit, we did not see any activities taking place.

The Manager informed us Hillcrest celebrates events such as Wimbledon, football, Easter and Christmas. For Mother's Day and Father's Day they invite relatives in to share afternoon tea with the residents.

"As well as visiting the Memory Café, if a resident wants to go shopping this can be arranged, as long as they are mobile".

Hillcrest does not have its own transport but uses a local taxi firm.

Person Centred Experience

We asked the Manager how they ensured residents' experiences were person centred. They told us a person-centred approach is adopted right from their initial assessment. *"The resident is asked what their preferred choices and dislikes are. We like to get to know our residents by asking them and their relatives to complete a "getting to know you book". There are long standing residents at Hillcrest so staff have got to know them well."*

Regarding whether they have a resident of the day, the Manager shared *"Not currently, but when the changeover to digital care plans is complete, we will introduce resident of the day."*

If residents wish to raise concerns or provide feedback, we were told they can *"speak to the staff, senior staff or they can come and speak to myself"*. Relatives' comments about feedback included:

"Senior management are always easily contactable in person while visiting, by phone or email."

"Directly to the manager"

"Mention anything to staff"

"Face to face with staff; over the telephone"

One relative highlighted they did not know how to feedback comments, concerns or complaints.

Apart from the Carehome.co.uk review cards in the hall, we did not notice any other information on how to provide feedback or make a complaint.

Residents' meetings are held every three months.

We enquired about provision of religious and spiritual needs in the home, and were told *"Some residents go out to church."*

A relative of a loved one shared *"We take her to her church on a Sunday. Would like a little more Christian activity."*

The Manager shared that pets have been allowed to live in the home in the past but there were no longer any living there.

Communal Areas

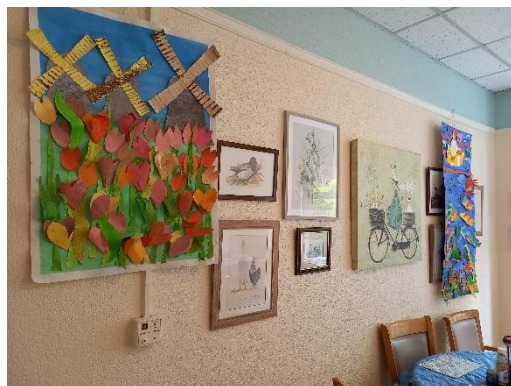
Hillcrest is tastefully furnished and equipped for the needs of the residents. The front part of the home is well lit with natural light coming through the large bay windows. However, the back of the building feels rather dark, with it being situated close to an elevated lawn and hedges from the next-door garden. Artificial lighting is used in these areas.

There are four communal areas in the home - a lounge, a snug, an open plan lounge/dining room and a small conservatory. A section of the ground floor is dedicated to those residents with more advanced dementia. The lounge/dining room in this area has a colourful wall to wall mural of a market scene, similar to Frodsham market, including a helter skelter in the background which, we were informed, was recognised and appreciated by residents. There is also a lovely "Family Tree" collage of all the residents displayed on another wall.





The corridor leading to this area of the building has been attractively decorated in a nautical theme.



The dining room at the front of the home displayed a mix of pictures and a couple of collages of painted leaves on one wall, made during a Creative Mojo session.

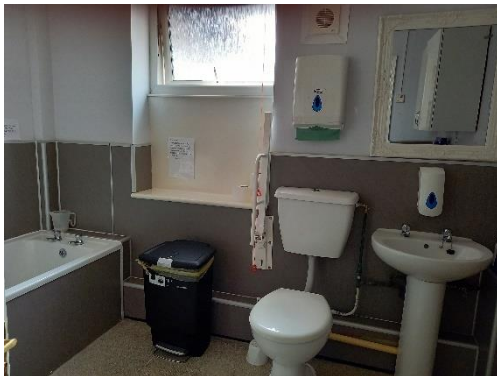
The “snug” off the front lounge was decorated with wallpaper covered in books, so it resembled a library.

Whilst we were shown around the home, we noted that some corridors and landings were narrow and we observed a resident with a mobility aid struggling to negotiate walking into the dining room. These narrow corridors could hinder quick access to a resident in difficulty. Some corridors/landings are quite dark and would benefit from improved lighting.

A lift is located on one side of the building and a stairlift is fitted to one staircase on the other side, allowing access to the first floor.

The furniture we saw in the home suits the style and age of the building.





There are communal bathrooms and toilets on both floors in addition to the ensembles in some of the bedrooms.



The temperature within the home felt comfortable, and the communal areas were well ventilated, with windows being open. We noticed the lovely aroma of lunch cooking.

Residents' bedrooms

Of the 31 bedrooms in Hillcrest, 19 are ensuite and some have a view of the garden. The rooms vary in size but three are large enough to be double bedrooms. There is one bedroom suitable for a couple on the first floor at the front of the home.

"We currently don't have any couples but have had them in the past. If they wish to sleep in the same room this can be arranged."

Each room has a photograph of the resident and their name on the door. The frame contains some information, only relevant to the staff or cleaners in the form of reminders or colour coded stickers.

The Manager told Healthwatch that residents can make their rooms their own by bringing in personal items, such as photos, ornaments and furniture. Two residents included in their comments:

"I have some home pictures, photos and decorations."

"I have my own pictures, ornaments and photos."

One relative shared *"The room is beautifully finished and has plenty of storage."*

Another highlighted their loved one was not able to make their room their own and added *"Too late for this."*

Most bedrooms we saw were light and airy, but a few on the ground floor at the back of the home felt rather dark.

Outdoor areas

There is a welcoming, well maintained paved garden with plenty of seating and a parasol for shade, a couple of raised beds with flowers and herbs, and hanging baskets full of flowers, which one resident helped plant up. Staff explained they have ice creams and quizzes outside with the residents, if the weather permits.



Food and drink

Hillcrest has its own catering staff and home cooked meals are prepared on site. We were told they source the produce locally mainly.



“Residents choose their meals daily. Sometimes they can change their mind, so we ask on the day what they would like to eat, just to get an idea of numbers. There are always two options at mealtimes. We offer hot options for their main meals at lunch time and the evening meal will include options such as soup and a sandwich, or omelette.”

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When asked when and how they choose their meals, residents’ responses included:

“We don’t get asked every day.”

“Not asked very often but enjoy whatever I’m given.”

“Not always - but kitchen know what I can/can’t chew.”

“Not really asked but happy with what I’m given.”

Currently Hillcrest does not have any residents with special dietary requirements. However, it has catered for vegetarians and gluten free diets in the past, so can accommodate any future needs.

A relative commented about food *“Hillcrest will provide if there is anything requested.”*

The Manager explained to us there were snacks and drinks around the home for residents. *“Given the nature of some of the residents’ dementia you will often see them picking up a snack and walking around with them. Residents can have a snack and drink whenever they wish.”* A member of staff said juice is available throughout the day.

“Residents can choose where to eat their meals. Some will eat in the dining room and some will eat in their rooms. We have one resident who will only eat where they are sat and that’s fine.”

There was a three weekly menu rota, and we noted menus written on white boards in the two dining rooms. However, the size of the writing was not easy to read from a distance. There were fruit bowls and baskets of crisps and biscuits, trays of juices, sherry and beer (we were informed they were mostly non-alcoholic).

Some comments from relatives included:

“In extreme heat residents are offered fluids in a variety of ways (flavoured juice/ice lollies) in order to increase fluid intake. Such a good idea.”

“Mum always has juice in her room for her to help herself to and is encouraged to drink.”

“Four meals a day at set times. Choice of menu. If I take her out, eg to church, they always save her a meal.”

“There is usually a choice of two main meals and they're asked what they want. Also, a board in the dining room telling them the choices.”

“Personal preferences noted and offered.”

If relatives wish to join their loved ones at mealtimes, the Manager said they were welcome and would need to prebook this.

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:

MUST (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.
Restore2 (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.
RITA (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.

Hillcrest uses MUST and Restore2. It does not use RITA, however it has a touch screen giant iPad with similar activities.

We asked the Manager if they have engaged with the End-of-Life Partnership (EOLP). They explained they had wanted to book the latest Namaste training but it was fully booked at the time. The care home has done various training with the EOLP in the past.

The Manager explained their biggest challenge has been *“Moving over to digital as it’s all new to me, and Covid”*.

They also shared their biggest success to date was long standing staff who were approachable, amenable and flexible. *“It’s about understanding staff’s situations and supporting my staff. I’m a big believer in supporting staff with their mental health and menopause.”*

Recommendations

- Consider using a silent call/alarm system to minimise disturbance to residents.
- Introduce pictorial menus to help residents with meal choices.
- Consider introducing armchair based exercise activities.
- Declutter the noticeboards so that important notices stand out, and consider having the activities timetable in a standalone frame.
- Improve the lighting in some darker areas of the building.
- Cut back the bushes around the signage at the entrance to the driveway (both Healthwatch representatives drove past initially).

What’s working well?

- Caring and friendly staff.
- Well led management with understanding of staff’s work life balance.
- Supportive team of carers. Staff work well within their team, supporting each other’s roles.

Service Provider Response

Recommendation 1

Consider using a silent call/alarm system to minimise disturbance to residents.

Service providers response

This is something that has never been requested before or brought up as an issue in any feedback given (resident or relative) over the years.

Whilst we appreciate that the alarm system could cause some minor disturbance to our residents, we feel the overall safety of our all residents & staff is important and the ability for staff to be alerted via the current sound system is acceptable.

Action

At this time we feel no action is required.

Recommendation 2

Introduce pictorial menus to help residents with meal choices.

Service providers response

This is something that Kitchen staff has already started to address and roll out, so is in progress.

Action

Liaise with Chef to confirm a completion date and review how the information will be presented.

Recommendation 3

Consider introducing more stimulating activities appropriate for those with dementia.

Service providers response

We strive to offer meaningful, ability appropriate activities to our residents. Currently offering a wide range of tactile, creative, physical & memory activities (also see past Facebook memories).

Action

We have recently become a member of the NAPA organisation and look to source additional resources and explore further areas.

Recommendation 4

Declutter the noticeboards to so important notices stand out, and consider having the activities timetable in a stand alone frame.

Service providers response

There are a number of notice boards located in the entrance hall where the inspectors were looking, the board referred to had pictorial evidence of residents' creative work and blank pages of wordsearches/colouring/games etc - easily accessible for residents daily.

Other boards are for important events - above the signing in table, where a Suggestions Book is also in place, and a further notice board for information (meetings/advocacy) for the residents' families.

Action

Will check the notice boards and remove any old information.

Look for a large frame to accommodate the Activities Calendar and/or relocate if possible.

Recommendation 5

Improve the lighting in some darker areas of the building.

Service providers response

We are lucky to have such lovely large bay windows at the front of our property but as noted is darker in some areas in the back of the property.

Action

As we start with our refurbishment programme decoration & lighting will be addressed as we move through the building, a new Maintenance Person will be commencing shortly.

Recommendation 6

Cut back the bushes around the signage at the entrance to the driveway (both Healthwatch representatives drove passed initially).

Service providers response

The signage is placed quite high at the entrance to the property and is white to stand out.

Action

The Maintenance Person will be commencing soon, this will be handed over to them to address and rectify as soon as possible.