



# Enter and View Report

Auden House Residential Care Home

October 2024

# Report details

General information about the service	
Name and address of the Care Home:	Auden House, 473 Audenshaw Road, Audenshaw, Manchester, Greater Manchester, M34 5PS
Type of Care:	Auden House provides 24 hour personal care for residents aged over 65 years with Dementia, Physical Disability and Sensory Impairments
Number of Residents:	24
Description of Facility:	Auden House is a large, detached Edwardian property that has been adapted and extended over the years to provide accommodation for up to 24 older people with all areas accessible by wheelchair. The home is situated in a residential area of Audenshaw and is in private ownership.
Care Quality Commission Rating:	Outstanding. The report can be viewed: <a href="#">Auden House Residential Home - Care Quality Commission</a>
Details of visit	
Visit date and time	24/10/2024 - 10:30am
Healthwatch Tameside Enter and View Representatives	Ayesha Khatun Imogen Shortall Linda Kent Julie Cunliffe

## Acknowledgements

Healthwatch Tameside would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme.

### Disclaimer

This report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

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# Introduction

## About us

Healthwatch Tameside is the independent consumer champion for health and care. It was created to listen and gather the public and patient's experiences of using local health and social care services. This includes services like GPs, pharmacists, hospitals, dentists, care homes and community-based care.

Emerging from the Health and Social Care Act 2012, a Healthwatch was set up in every local authority area to help put residents and the public at the heart of service delivery and improvement across the NHS and care services.

As part of this role Healthwatch Tameside has statutory powers to undertake Enter and View visits to publicly funded health or social care premises. These visits give our trained Authorised Enter and View Representatives the opportunity to observe the quality of services and to obtain the views of the people using those services.

## What is Enter and View?

Local Healthwatch representatives carry out Enter and View visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation – so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Tameside Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with our safeguarding policies.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the Care Quality Commission (CQC) where they are protected by legislation if they raise a concern.

## Purpose of the visit

The purpose of the visit was to:

- Observe the environment and routine of the venue with a particular focus on how well it supports the dignity of residents and their independence.
- Speak to residents, family members and carers about their experience in the home, focusing specifically on the care and any treatments provided.
- Give staff an opportunity to share their opinions and feedback about the service.

The questionnaires and observations were based on eight care quality indicators developed by the national charity, Independent Age. These were:

- Have strong, visible management.
- Have staff with the time and skills to do their job.
- Have good knowledge of each individual resident and how their needs may be changing.
- Offer a varied programme of activities.
- Offer quality, choice and flexibility around food and mealtimes.
- Ensure residents can regularly see health professionals such as GPs, dentists, opticians, or chiropodists.
- Accommodate residents personal, cultural and lifestyle needs.
- Be an open environment where feedback is actively sought and used.

## Executive summary of findings

Representatives considered Auden House to be a good place for residents to live. It presented as warm, comfortable, and clean with caring and responsive staff.

Residents looked well and cared for and are happy at the home. Some described it being like “home from home”, which the care home strives for. The home is respectful of residents’ choices, residents told us they choose what they want to wear and where and when they eat meals. Most residents described their bedrooms as comfortable. All residents we spoke to reported enjoying the home cooked food.

Residents and relatives who spoke to us reported positive comments in respect of the staff telling us “Staff are friendly” and “are very helpful”. Staff appeared to know residents well and relatives told us “Staff are very responsive to mums needs”.

Staff appeared to enjoy interacting with the residents. They told us they enjoy their busy roles and the role was “rewarding”. They enjoyed “seeing residents happy” and “they like to get to know about their lives”. Staff felt they had adequate training and management support and appreciate the management’s open door policy.

The activities on offer to residents are varied every day and participating residents enjoyed them. Residents are regularly consulted with activity planning and support is given to take part when needed.

There were some good examples of the home seeking feedback with residents and relatives forums and satisfaction surveys in place. We observed satisfaction surveys showed feedback is acted upon and action plan developed. This helps to build a more positive culture and encourages more people to come forward in future.

The building and environment were in good order, with the exception of some repairs in need of immediate attention.

# Methodology

## Prior to the Enter and View taking place

We informed the care home of our intention to conduct an Enter and View visit a number of weeks beforehand. An intention to visit (though not the date and time), the purpose and structure of the visit were clearly shared with the provider in writing.

A key contact was identified from the service provider and a schedule for the day was put together with their input, taking into consideration mealtimes, visiting times for carers and families etc.

The provider was contacted to see if there were individuals who should not be approached or were unable to give informed consent and a comprehensive risk assessment was completed.

We asked the provider to display a poster with details of the enter and view visit and copies of Family, carers and friends questionnaires were left at the home to return via FREEPOST.

## During the visit

The visit was carried out over the course of two hours. The visit date and times are shown on the front cover of this report. During the visit Healthwatch Tameside representatives spent time talking to the staff and residents using an agreed set of questions.

14 Interviews and observational methods were used to give an overview of this service from a layman's perspective. This data was recorded using standard observation sheets and questionnaires developed by Healthwatch Tameside.

Authorised representatives spoke to 7 residents and 1 relative and conducted short interviews about their experiences of the service using guided questionnaires. 5 members of the staff and management were also interviewed.

## Following the Enter and View Visit

Immediately following the visit, initial findings were fed back to the provider and other relevant parties. This report was produced within 35 working days of the visit. An initial draft was circulated to the service provider to enable a response. The service provider was obliged to acknowledge and respond within 20 working days of receipt of the draft report. The response from the provider is included at the end of this report.

# Results of the visit

## Observations

### Location and external environment

The location was easily accessible, close to local amenities and had clear signage on the outside of the building. The building is wheelchair accessible.

The home had an external garden area which leads off the dining room and conservatory and is safe, accessible and well maintained. There was a smoking area. The gardens were landscaped with plants and flowers. There is a gazebo and parasol with multiple benches and chairs to enable socialising. There is also a greenhouse with vegetation.

### Internal environment

On arrival representatives were welcomed by the management team. Posters about our visit and surveys were seen displayed in the reception area.

The home was clean, pleasantly decorated and had good ventilation. There were no unobtrusive noises or smells and there was natural light coming through large windows. The decor throughout the home reflects a warm, homely environment. External doors were kept locked. Downstairs there were two TV lounges, dining room, a conservatory and a quiet sitting area.

In the lounge and dining room the chairs were arranged in groups, and there was a choice of rooms for residents if they wanted a quiet area or to meet with visitors. Residents had access to the internet, books and newspapers.

Our representatives witnessed residents being involved in activities, staff communicating tactfully, and noticed all residents were properly dressed and well kempt. We observed one of the residents had her nails done by a staff member.

The home has a 28-day menu for a balanced and varied diet. The residents have a choice of 2 meals for both lunch and tea, which are prepared fresh each day, see image below.

Representatives observed a quick overview of lunch time. Residents were observed enjoying their meals in a relaxed atmosphere. The residents did not seem to require support or aids to help them eat. A pictorial menu of the day was displayed on the wall outside the dining area.



Menu:

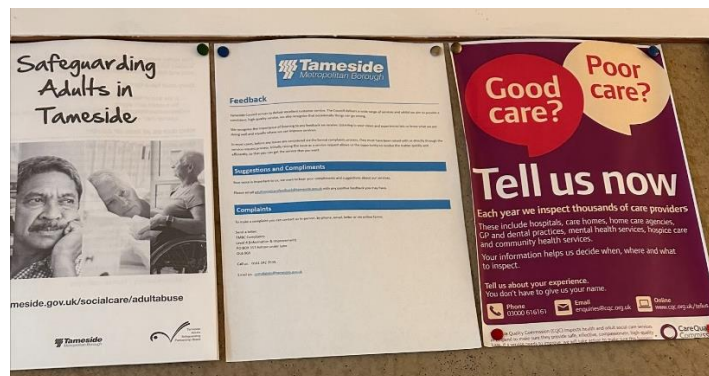


Corridors were well lit and maintained. One of the corridors leading to a fire exit appeared to be used to store a clothing rack and walking sticks. We also found that a handrail outside the lounge was loose and the stair gate at the top of the stairs needed repairing. These concerns were raised with the manager on the day.

Resident’s rooms were numbered and some had pictures on the doors. Rooms were warm, bright and personalised with frames, blankets and pictures of family. There was adequate storage in each bedroom and a personal mail tray. Some of the rooms had ensuites, radio’s, telephones and televisions with sky TV. Every room had a nurse call system.

Notice boards were on display which included staff profiles, newsletters, an activity timetable, hairdresser visit poster alongside staff, resident and relative satisfaction survey results. There was information on how to share feedback with the local authority and CQC, see images below. The care home’s complaints procedure was not displayed.

Notice boards:



The home observed a number of dementia friendly indicators in communal areas which included floor colour contrast with walls, large calendar/clock available, signs approx. 4ft from floor level, toilet signage seen in all areas used by residents.

## Findings from speaking with residents, family, friends and carers

We spoke with 7 residents and 1 relative on the day of the visit.

### **1: Have Strong, visible management**

We found that the majority of residents we spoke to, told us that they are aware who management is, and that the manager can be seen around the home frequently with one resident sharing *“very good and chat with residents”*. We found three residents were not sure, with one resident sharing *“not sure at the moment as staff change a lot”*. It was also highlighted that at weekends there is not as much management

### **2: Have staff with time and skills to do their job**

We found all residents feel that staff have enough time to stop and chat with them with comments such as *“yes they sit and chat with me”* and *“when not too busy staff laugh a lot and sing”*. We were told by a family member that staff are lovely and are always available if in need of any help.

### **3: Have a good knowledge of each individual resident and how their needs may be changing**

Residents felt that staff are really good at knowing the needs of the residents. If they had a problem the staff are very helpful. A relative told us that staff know the resident better than family now.

### **4: Offer a varied programme of activities**

We found that the majority of residents enjoyed the activities in the home which included games, singing and attending external activities such as the choir. It was highlighted by one resident that they didn't wish to participate in activities. We observed lots of engaging activities on our visit which included games, balloon tapping, singing and gentle stretch exercises.

### **5: Offer quality, choice and flexibility around food and mealtimes**

We found most residents enjoy their meals at the home informing us that staff provide choice to accommodate dietary requirements, culture and specific requests. Residents told us *“meals are very good here”* and *“I enjoy the food, they make me Italian food”*. We were told that staff allow flexibility around meal times. One resident told us that he doesn't want to eat at the set tea time and a sandwich is made for him at his chosen time. We saw two residents eating lunch in their own rooms, of their own choice.

### **6: Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists**

We found that residents can regularly see health professionals and when issues are raised with staff members organising appointments to the most appropriate professional. It was highlighted the GP comes every week. A resident told us *“I mentioned I needed to have my eyes checked and they took me to the opticians, I have been referred to a specialist”, “Doctor*

*comes to the home and I also go to the practice” and “I am going to the dentist for my usual check up and the carer will take me.”*

### **7: Accommodate residents’ personal, cultural and lifestyle needs**

Residents told us that staff are aware of what they need and like telling us *“hairdressers comes in every week so I have my hair cut every 6/7 weeks”* and *“knows about the football team I support”*. We were also told that the catholic father comes to the home. Residents described being at Auden House is like ‘home from home’ and their right of choice is respected and staff are *“not bossy”*.

### **8: Be an open environment where feedback is actively sought and used**

We found that the residents we spoke with felt they could provide feedback or raise a complaint about the home if they wished either directly with the staff or through the family members. A resident told us *“yes, I can be honest”, “very good. I wanted a radio and they have brought me one in, just trying to tune it in”* and *“yes, but I find everything ok. I really do”*. We asked residents what would you change about the home with the majority informing us that no changes are required. However, one resident told us they would like a big room and another stating they would like cooking lessons. The Manager informed us that residents and relatives meetings are held quarterly and satisfaction surveys are done annually. Suggestions on improving any aspect of their services are welcomed and actioned.

## Findings from speaking to staff

We spoke with the manager and 5 staff members on the day of the visit.

### **1: Have Strong, visible management**

The manager explained that Auden House has been through a change of management, and she is the interim manager until a new manager is appointed. All of the staff that we spoke to on the day thought the home has strong and visible management with comments such as *“Yes, active, visible, get things done the right way”* and *“Yes, the new management have been more supportive”*.

### **2: Have staff with time and skills to do their job**

All staff told us that they feel that they have adequate training and have the resources to carry out their role effectively. Staff members explained that they have access to a range of training which included mandatory training and additional training upon request. The manager informed us that staff learning and development needs are discussed at supervisions and appraisals and continuous development is encouraged.

### **3: Have a good knowledge of each individual resident and how their needs may be changing**

The manager informed us that all residents have a care plan and preferences sheet, and changes are updated as needed with input from resident and/ or family. Medical information is sought from the GP before a resident arrives. Staff told us that through spending time with residents they have a good knowledge of each resident and management are informed when things change. We were told that staff have access to daily reports.

### **4. Offer a varied programme of activities**

We found that staff felt there was a range of activities available to residents within the home provided by three activity coordinators, however we were told by a staff member that there could be more opportunities if increased capacity. Staff told us they empower residents to get involved and adapt the offering to suit their needs. It was mentioned by a staff member activities sometimes can be repetitive. The activity timetable shows a variety of activities and some activities are repeated such as Bingo and Quiz's. However, all staff highlighted that residents suggest activities and these are facilitated by the team.

### **5: Offer quality, choice and flexibility around food and mealtimes**

Staff told us residents have a choice of options of meals, snacks and drinks as well as specific requests. There are usually two options available for the evening meal. It was mentioned that mealtimes are flexible and residents can eat meals in their rooms if they wish.

### **6: Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists**

We found that staff had access to digital health to note any concerns which we were told this is working well. Staff told us that the GP comes every Tuesday, as well as the district nurse attending on a regular occasion. It was highlighted that staff take residents to external

appointments if family members are unavailable. It was mentioned by a staff member that dentist visits are infrequent, however management informed us that these appointments are as requested.

**7: Accommodate residents’ personal, cultural and lifestyle needs**

A preference sheet is completed when a resident first arrives at the home, to understand their likes, dislikes, hobbies and family history. Staff told us they get to know residents culture and lifestyle choices through regularly spending time and talking to residents. All staff told us they accommodate residents personal, cultural and lifestyle needs. They gave us examples of themed days being held to celebrate residents culture for e.g. Italian food taster days. They also told us sometimes residents don’t want to partake in certain celebrations, on these occasions staff provide alternative activities.

**8: Be an open environment where feedback is actively sought and used**

We found that staff feel they can have a say now that the home is under new management and the manager has an ‘open door’ policy. We were told that there are regular staff meetings and feedback can also be given at any time. Staff feel confident that management would act upon this feedback. A staff satisfaction survey is done annually.

## Recommendations

1. **Repairs required:** Repairs were required to a handrail and stair gate. This was flagged up with the provider on the day.
2. **Keep corridors / fire exits clear and clutter free:** Move the clothes rail and dispose of walking sticks in the corridor of the fire exit. This was flagged up with the provider on the day.
3. **Consider a suggestions and comments box:** An annual satisfaction survey with residents, relatives and staff is undertaken however the home may wish to consider having a 'suggestions and comments box' in the reception area. This will help provide more regular, anonymous feedback.
4. **Undertake a review of the home's webpage:** Prior to our visit we undertook a review of the website. The previous managers name was still showing in the contact page and the 'upcoming events' page was empty.
5. **Communication with family/ friends/ carers:** Care home to consider and explore options to keeping families updated with regular updates, for example more regular newsletters and encourage more family involvement in open days, events and outings.
6. **Have an accessible complaints policy:** Care home to publish their own complaints policy on the website and displayed in the home. We could not see the homes' complaints policy on the notice boards or published on the website.



## Response from service provider

Many thanks for your visit on 24/10 this year. It is always good to have an alternative pair of eyes on what we do here at Auden House.

In response to the recommendations, please read the following:

1. We gave a time limit on the few repairs stated of 2 weeks.

The stair gate was completely replaced, and the handrail re affixed within 7 days. It must be pointed out that all care homes have a heavy reliance on maintenance due to the nature of the numbers of residents using the services, and is therefore always ongoing. The stated repairs are open to re inspection if you so wish.

2. A metal binding system has been employed to enable the portable clothes rail to be compressed thus ensuring freedom of movement on the corridor.

3. A suggestions box will be sought and fitted to the rear entrance in the New Year.

4. The web page does need a review, and this again will be attended to in the New Year.

5. We do have a regular program of events, especially around Christmas time. This year after the Health Watch visit, a Christmas party was held on the 7th December, open residents families, and was well attended. We had one trip to a brass band concert, enjoyed by four of our residents, plus two separate Christmas meals out for residents and certain family members. We had two visits from local schools/nurseries to Auden House all singing carols in our lounges, that was greatly enjoyed by our residents. All these events were advertised on our notice board. Further events will be planned in the New Year.

6. Unfortunately, the complaints policy was missing on the notice board at the time of the visit. This has now been rectified.

# Contact Us




Healthwatch Tameside  
131 Katherine Street  
Ashton-Under-Lyne  
OL6 7AW

[www.healthwatchtameside.co.uk](http://www.healthwatchtameside.co.uk)

t: 0161 667 2526

e: [info@healthwatchtameside.co.uk](mailto:info@healthwatchtameside.co.uk)

 [@Healthwatchtame](https://twitter.com/Healthwatchtame)

 [Facebook.com/@healthwatchtame](https://www.facebook.com/healthwatchtame)