

Enter and View Report



Mount Pleasant, Northwich

7th February 2025

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Report Details

Address	Mount Pleasant Finger Post Lane Norley NR Northwich WA6 8LE
Service Provider	Andrew Care Ltd
Date of Visit	7 th February 2025
Type of Visit	Unannounced
Representatives	Jodie Hamilton Amanda Sproson
Date of previous visits by Healthwatch Cheshire West	2017

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

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- 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.

Mount Pleasant

Mount Pleasant appears to be a converted house, which is set in a rural location. It is laid out over two floors, with the communal areas on the ground floor and most bedrooms on the first floor.

Healthwatch would like to note that on the day of the visit we received nine completed residents' surveys, and one completed friends' and relatives' survey. The comments made within these will be referred to throughout the report.

As part of the Enter & View process, Healthwatch asked the Manager various questions to get a feel of the Home. These responses and those of friends' and relatives' are included in this report

Findings

Arriving at the care home

Environment



There are signs on either side of the entrance to the car park which were slightly set back and angled; if you are not familiar with the location of the Home, the signage was not easy to see.

The car park is small and was almost full when we arrived. By the time two staff members from Healthwatch parked, the car park was then full. The car park was litter free and well maintained. The reception was easy to identify and the grounds and building of

the care home were well maintained. Arriving at reception there is a 'ring' doorbell, and Healthwatch received a friendly welcome from the staff member that greeted us.



The reception was quite a small area.

Healthwatch were asked for their identification and asked to sign in. The visitors' book had privacy paper over visitor details to keep all information confidential. Healthwatch noted that there was lots of information displayed; for example, a Healthwatch poster, carehome.co.uk review poster, information regarding comments, complaints and compliments and additionally, information for relatives on how to make an

appointment to get an update on their loved ones.



There was an attractive display of photographs of residents participating in activities, days out and celebrations. These photographs can also be seen on the Home's Facebook page. The Manager shared that one of the resident's family members lives in America, so it is a great way for them to see what has been happening via Facebook. Healthwatch noted posters advertising upcoming events, such as a singer, Creative Mojo craft sessions, a Mount

Pleasant feedback survey, and a celebration meal menu for Valentines' Day.

The Home was a pleasant temperature with no odours and had a warm, inviting feel with a calm atmosphere. Walking into the Home felt like you were visiting a family member's home. The housekeeping throughout was to a high standard, everywhere was clean and tidy. There had recently been some painting going on upstairs on the first floor and the maintenance team were carrying out jobs around the Home.

The décor was not modern, but homely to the residents. The furniture, which was in good condition, was in line with the décor and Healthwatch did not see any issues with it. It was evident that the Home was run well and the staff all work as a team. Residents appeared very relaxed and happy, if they required assistance their needs were met straight away. The visit was very positive. This Home did not just feel like a Home, it felt like a family home.

Treatment and care

Quality of care

The Home is registered with The Knoll GP surgery in Frodsham, from where there is a ward round every Wednesday by an Advanced Nurse Practitioner. Any respite residents are temporarily registered with this practice. The Manager said, "We use Hollands pharmacy in Frodsham and the Home receives a brilliant service, nothing is too much trouble."

A Chiropodist and an Optician also visit regularly. The Manager told Healthwatch that "Residents are able to stay with their own GP as long as it is accessible and workable." The Home would always try to keep the resident at the Home instead of hospitalisation, with the assistance of other community services.

The Manager told Healthwatch "The Home does not have a link with a local dentist. A resident's family would arrange a dental appointment and would be accompanied by either staff or a family member." The Manager added that the District Nursing Team attends with a referral, the SALT (Speech and Language Team) also attends, although the Home has found that the SALT referrals take a lengthy period of time.

All residents looked well cared for. The Home had a mixture of residents using the communal lounges and some preferring to sit in their rooms, all residents we saw during the time of our visit were dressed in day clothes.

Healthwatch asked: During our visit what should we be seeing in the home? The Manager said that staff would be wearing PPE, assisting residents, talking in a nice polite way. The hairdresser was attending and a singer too at 3pm.

There is no hairdressing salon in the Home; the hairdresser uses one of the bathrooms. The relationship between the hairdresser and the residents was lovely; as we were being shown around you could hear the residents chatting away to the hairdresser.

Privacy, dignity and respect

Healthwatch asked how privacy, dignity and respect are promoted throughout the Home and the Manager told Healthwatch "Person centred care throughout the home. Staff training for all aspects of privacy, dignity and respect along with regular supervisions. Staff will knock on residents' doors and ask to enter and always gain consent and always address a resident with their preferred choice of name or title. The Home has dignity days, where residents are spoken to, a banner is made and residents make flowers with their words on, which reflects what dignity means to them."

The Home has alternative systems, accessible information, hearing loops and large print information available if required. The Manager told Healthwatch "The Home currently prints a large print activity schedule for a resident."

Survey responses stated that seven residents felt respected, however two stated that they only felt respected sometimes.

Eight responses stated that residents felt they were treated with dignity, however one resident stated they did not.

Seven responses stated that they felt they had privacy, however, two stated only sometimes.

"Sometimes I do not feel safe at night, as people are going past my room."

I do not feel like I have privacy at night as people come into my room."

(Resident)

The Home had taken the time to explain to the resident that this was a routine check carried out at night, to check that residents were all OK.

Understanding residents care plans

The Manager told Healthwatch "All care plans are person centred, staff are encouraged to get to know residents and read the care plans. The care plans are stored on the 'care doc system' so are updated on an ongoing basis, along with monthly reviews."

The Manager added that care plans are initially drawn up with relatives, to gain as much knowledge about the resident's likes and dislikes. A poster on display promoted input from relatives; relatives visit often. Residents are also encouraged to have input with their care plans.

Relationships

Interaction with staff

The staff were all very welcoming and accommodating during the visit, staff interacted with Healthwatch. Healthwatch witnessed positive interaction from staff with family. It was evident that the relationship between staff and residents' families was very good. Staff also put the needs of residents first; when speaking to Healthwatch on two occasions a resident needed assistance and the staff member without hesitation assisted the resident. One resident had somehow got her clothes wet, the staff member wasn't sure how as the resident had just come into the communal area. It is possible a spilt drink or she had been in the bathroom and been trying to wash something in the sink, it wasn't wet as in had a toileting accident. The member of staff assisted the resident without delay, with empathy and kindness.

The staff do not wear name badges, the Manager explained that this was a company wide choice, and that the Home is in the process of developing a photo board of staff which will be displayed in reception.

"Really good, as the staff have been here for a long time. Feels like a family." (Manager)

"Staff are brilliant." (Resident)

"Staff are all very caring and wonderful." (Resident)

Residents were very comfortable around the staff the whole time
Healthwatch was at the care home. We saw nothing but positive
engagement between staff and residents. One resident expressed how
lovely the staff are; she told Healthwatch:

"The staff are so lovely, they are very friendly, they are like family. When I moved here, I told my daughter you don't visit every day, you go about your life and visit when you can, the staff here are now my family, this is my new home."

The Manager told Healthwatch "Agency staff are used; the Home uses the same agency and generally the same agency staff will attend to maintain continuity of care.

Agency staff will have an initial induction, the Home will receive a profile of the person first, the Home will have an expectation that the agency staff are competent and trained before attending."

The Manager added that recruitment of staff was challenging because of the rural location and poor public transport links. Healthwatch noted that the Manager was expecting a candidate for interview, however the candidate failed to arrive.

Of the nine completed surveys, eight responses stated that they felt cared for, however, one stated only sometimes.

Eight added that they felt safe, however, one stated that they did not.

Connection with friends and family

The Home keeps residents in touch with friends and family in any way possible. The Home shares information on their Facebook page with people's consent for sharing. Facetime calls are also used. There is also plenty of information on the noticeboard in reception.

The Home has an open-door policy for visiting and will welcome visitors in the evening. It is preferred that visitors kindly avoid mealtimes, unless a meal is to be shared with a resident.

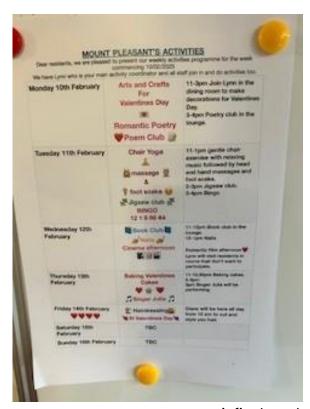
Healthwatch enquired how an infectious outbreak would impact visiting: "The Home would follow infection control guidance. PPE would be worn at all times. Visitors would be assessed for risk and further measures would be decided by how many residents were affected." (Manager)

Wider Local Community

The Manager explained that the Home has links with the local primary school, who made decorations for the Home for Chinese New Year, and the local Beavers group and church. The location of the Home is very rural, so the home struggles with wider community connections. They held a summer fete which was well attended and plan on holding one again this summer. The Manager kindly invited Healthwatch to attend the next summer fete.

Everyday Life at the Care Home

Activities



There is an activity planner on the wall in the dining room and residents are told what activity is on by staff daily. Today's activity was the residents getting their hair done. The Home has one activity coordinator who works for 20 hours carried out over four days. The Home staff carry out activities with residents at other times.

One resident was very happy, five residents reported that they were happy with the activities, two were

satisfied and one was dissatisfied.



There was evidence on display in photographs and creative artwork of activities carried out with the Creative Mojo team.

The Manager added that some other activities the residents enjoy are Arts & Crafts, reminiscing, poetry club, chair yoga, jigsaw club, book club, cinema afternoon. For residents that do not wish to leave their rooms the activities will be things such as, reminiscing, hair washing, hand massage, nail painting.

The Manager told Healthwatch "All events are celebrated, Valentines, Burns Night, Chinese new year (Chinese games and



lanterns), Wimbledon, Grand National with high tea and strawberries and cream and Pimm's."

Residents used the activity display board to keep themselves up to date with what was taking place.

The Home has access to a company minibus which is used in better weather for outings to local pubs and garden centres. The Manager said that one resident wanted to go to Blackpool, so the Home had a beach day, so everyone was involved.

A resident told us

"We often bake as an activity and I enjoy baking". (Resident)

"Yesterday we did some crafts and that was enjoyable". (Resident)

"When the weather is better, we will sit out in the garden" (Resident)

"Gives everyone a chance to mix together." (Resident)

Person Centred Experience

Healthwatch noted that there was information displayed in reception on how to raise a concern, complaint or compliment. The Manager told Healthwatch "Any concerns would be made to the Manager directly, there is an open-door policy. The Policy is displayed stating how any concerns or complaints will be dealt with."

The Home holds regular residents' meetings, which the Manager said were very well attended. Friends and family meetings are generally held on a one-to-one basis.

One of the questions asked on the residents' survey, was, "What is the best thing about living at the Home?

"Nice place to be, pleasant and caring." (Resident)

"Being looked after." (Resident)

"You know you are safe." (Resident)

"It is a lovely atmosphere, staff are lovely, and it is relaxed, food is good, no complaints." (Resident)

Communal Areas

The Home had two communal lounges that were both occupied with residents watching tv and chatting amongst themselves. There was appropriate seating for residents to access easily. There is a main dining room that had the tables set ready for lunch time. There was a menu displayed on a white board in the



dining room along with an activities plan for the week.



The corridors were as you would expect to see in a house; they were not very wide, but wide enough for someone to be able to use a

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wheelchair and for residents to walk with a mobility aid. Healthwatch noted that there were not any handrails on the wall.

Each corridor had a communal toilet, bathroom and shower. One of the corridors did have a toilet out of order, but there was another toilet opposite that residents could still access in that area.





There was a stairlift alongside the stairs to enable residents to access both first and ground floors.

Residents' bedrooms

There are 23 bedrooms at the Home with one room being ensuite. All bedrooms have a basin and access to a communal toilet and bathroom down the corridor. The ground floor rooms have patio doors that let in lots of natural light and give views of the garden surrounding the Home. All rooms were of a similar size; bedrooms upstairs varied in shape but they were of a similar size with windows letting in lots of natural light. In some rooms Healthwatch noticed that there were extra heaters. The residents'

bedrooms were all tidy and had a décor of their choice. The bedrooms all looked welcoming and personalised with their own belongings.

Healthwatch would like to note that the absence of a bedroom photo is due to all rooms being occupied.

Outdoor areas





The Home has a lovely, big, well-maintained garden for residents to enjoy. There is a patio with parasols to shade the residents and during the summer months there is garden furniture that goes outside. There were also some benches outside for residents to use. The parasols have Bluetooth speakers so the residents can enjoy listening to music in the gardens. There are views to the garden from the lounge areas and residents' bedrooms.

Food and drink

Healthwatch did not see any food being served at the Home, but we did see the Chef in the kitchen preparing lunch and were told by a resident that the food is wonderful and that they really enjoy the meals. A staff member goes round each





morning asking residents about their meals for the day.

When asked about quality of food five residents were very happy, one was happy, two were satisfied and one was dissatisfied.

When asked about the taste of the food four residents were very happy one was happy, and four were satisfied.

When asked about choice of food three residents were very happy, two were satisfied and three were dissatisfied prompting the following comments

"Choice of food, would like more." (Resident)

"Not enough choice, too much mince and sausage." (Resident)

"Too many stews, not enough vegetables, too much sweetcorn." (Resident)

When asked about quantity of food seven were very happy, one was satisfied and one was dissatisfied.

The Home also provides the residents with 'Takeaway Nights'. On the last of these occasions, the residents had fish and chips, and a staff member said It went down well with the residents and that they really enjoyed it.

At the time Healthwatch visited there was a drinks trolley going round to residents offering tea, coffee and a selection of biscuits.

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When asked about availability of snacks five were very happy, two were happy and two were satisfied.

When asked about availability of drinks six were very happy, two were happy and one was satisfied.

Biggest challenges...

The Manager told Healthwatch "Staff - the balance between the work that needs to be done and enjoyment of engaging with the residents.

Recruiting staff is difficult in the rural location, due to transport and the demographic of the local residents."

Biggest success to date...

The Manager told Healthwatch "Seeing an improvement in the Home, residents are very happy and the Home has been kept homely for them."

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

Mount Pleasant uses MUST and RITA.

Recommendations

- To offer more mealtime choices; discuss at next residents' meeting
- Improve signage from the approaching road to the Home
- To utilise the minibus available
- Encourage use of the beautiful outdoor space.

What's working well?

- Staff retention
- Staff interactions with residents
- Cleanliness of the home
- Celebration of events
- Relationships with visitors

Service Provider Response

To offer more mealtime choices discuss at next staff meeting.

Service provider's response

We have regular residents' meetings and in the last meeting (24/2/25) residents were asked what foods they would like to see less or more of on the menus and they also expressed that they were given enough choice with their meals. One resident asked for less Mince, and another asked for steak and chips so this will then be taken into account when the new Spring/ Summer menus are being completed.

Action

To continue to keep asking at resident meetings about their mealtime choices and individual preferences and then implement onto the menus.

Recommendation 2

Improve signage from the approaching road to the Home.

Service provider's response

When we put lighting in the carpark last November 2024, we enquired about lighting above the signs, but the electrician hadn't been able to run cable and is looking at solar lights as a alternative. When Andrew Care took over Mount Pleasant in June 2023, they immediately put new big signs up as the previous company only had a very small black plaque to alert the public to the home.

Action

Chase electrician for solar lights.

Recommendation 3

To utilise the minibus that is available.

Service provider's response

The minibus is used between all 4 homes and monthly trips take place except from Sept 24 - March 25 we have only been able to have one trip due to the driver having knee surgery.

Action

The minibus trips are now back to once monthly and in between when we can allow extra. The next trip is 27/3/25.

Recommendation 4

Encourage residents to use the beautiful outdoor space.

Service provider's response

The seating has been undercover for winter. The patio furniture has been back outside since the beginning of March. However, when the patio seating is out we encourage residents to be outside, they will have their activities and book club etc outside and meals if they so wish. Even though the patio furniture has been covered we have 2 benches outside the front door so that residents can still sit outside and enjoy fresh air. Staff and activity co Ordinator also assist residents for a walk at any time and are asked regularly.

Action

To keep encouraging residents to sit outside to enjoy the grounds and also get fresh air.