



9th January 2023

Visit to  
Elwick Grange  
Residential  
Care Home



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# Healthwatch Hartlepool

## Elwick Grange Care Home

### Enter and View Report

#### Visit to Elwick Grange Care Home 9<sup>th</sup> January 2023

#### 1. Introduction

In March 2020 Healthwatch England instructed all local Healthwatch organisations to follow government guidance and stop all face to face engagement with the public, including Enter and View visits. This prompted local Healthwatch organisations to develop other ways in which the delivery of health and care services could be observed and monitored. This was partially achieved by the development of virtual visits which enabled limited, but valuable insight into the delivery of services in health and care settings.

With the gradual lifting of Covid restrictions it has become possible to reintroduce face to face Enter and View visits and Elwick Grange is our fourth “live” visit to a care home since their reintroduction in April.

However, Covid 19 is still with us, and the visit to Elwick Grange was conducted in a proportionate and responsible manner. This was achieved by means of a two person visit to the Home and additional virtual discussions with the Home Manager and staff from Hartlepool Borough Council’s Commissioning Team. The visit followed parameters and safeguards mutually agreed by all parties which were formalised in a Risk Assessment which can be found in Appendix (ii).

#### Details of visit

Details of visit:	
<b>Service address:</b>	Elwick Grange Residential Care Home, Elwick Road, Hartlepool, TS26 9LX
<b>Service Provider:</b>	Care UK
<b>Date and Time:</b>	9 <sup>th</sup> January 10.00am, 2023
<b>Authorised Representatives:</b>	Margaret Wrenn and Bernie Hays
<b>Contact details:</b>	Healthwatch Hartlepool, 1st Floor, Greenbank, Waldon Street, Hartlepool, TS24 7QS

## **2. Background – Elwick Grange Care Home**

Elwick Grange is a modern purpose built residential care home quite close to the centre of Hartlepool that supports up to 60 older people. The home is on two floors and all rooms are on-suite.

The Home's registration covers residential care, dementia and end of life palliative care.

A detailed breakdown of staffing levels and required staff training/qualification levels can be found in the completed Manager Questionnaire contained in Appendix (iii)

## **3. Aim of the Visit**

The visit to Elwick Grange was conducted by Healthwatch Hartlepool. As mentioned in the introduction, due to ongoing Covid concerns the visit was a learning experience for all parties. It was delivered within parameters agreed with the Home and the Commissioning team of Hartlepool Borough Council by means of a limited visit by two Healthwatch members and virtual discussions with the home manager.

Our overall aims were –

- To gather feedback from residents and family members of their impressions of care provision at Elwick Grange and how it has evolved since the Covid pandemic.
- To gain insight into the day to day provision of care within the home and the service provided.

## **4. Methodology**

This was the fourth physical enter and view visit conducted by Healthwatch Hartlepool since the outbreak of the pandemic and as such required considerable preparation and planning. The visit process commenced with an on-line discussion with the Home Manager at which the conduct and parameters of the visit were discussed and agreed.

This was followed up by a two-person visit to Elwick Grange which took place on 9<sup>th</sup> January. The visiting team comprising of two Enter and View trained volunteers Margaret Wrenn and Bernie Hays. The team initially familiarised itself with latest Healthwatch England guidance on conducting visits and most recent government guidance relating to Covid precautions when visiting residential care homes.

In addition to the visit, a questionnaire was also made available for family members to complete during a three week period around the date of the visit. A copy of the questionnaire and a summary of responses can be found in Appendix(i)

## **5. The Visit – Arrival at Elwick Grange**

The home changed to new owners, Care UK in 2011.

On arrival, the car park was partly cordoned off, problems with the park surface. Discussed with the Manager Wendy Winspear, who has had two quotes for the work, and is awaiting the outcome, as per advice by Care UK Homes.

On entry, we completed the visitor's book, and put on masks. Management where in the process of contacting residents and families regarding the removal of masks as per government guidance., once all the information was collated then the risks assessments will be completed for the individual residents who wished to remain wearing face masks and the staff to continue wear face masks for their personal care intervention.

The home was bright, clean and airy, and there were no odours. The staff members we observed were smartly dressed and appeared quite happy in their work.

We were warmly welcomed by the Manager Wendy Winspear, and invited into her office, before we started the visit. Wendy has worked at the Home for approximately seventeen years. She was registered as Home Manager in October 2019 but was on a secondment post for 6 months before that.

We asked some questions about the home, and Wendy had already completed the Manager's questionnaire which she had been given before the visit, which we took with us to return to Healthwatch to be included as part of the report.

We also asked if there was anywhere in the home that we should not visit, any poorly residents or any other reason, but Wendy reassured us that we could go anywhere.

Senior carer and Team Leader Sarah showed us around the building, which was on two floors. She was very knowledgeable about the residents and spoke to many of them on our journey. She has been in post for about eighteen months.

During this visit, we were able to speak to six residents and four relatives.

One of the residents on the second floor, pointed out her room and showed us a portrait of herself at a younger age, she was very proud of it.

## **6. Independence**

There are regular activities going on in the home. At this visit the Activities co-ordinator was working with some of the residents in the lounge.

5 of the 6 residents to whom we spoke joined in with the activities. 1 resident prefers to stay in her room. Relatives agreed.

All agreed that they had a choice in their daily routine, particularly when going to bed and getting up.

Yes, all agreed that they were supported to move about, and those who were in wheelchairs or used walking frames were assisted as required.

All have personal items in their rooms which they brought from home when they came to live in Elwick Grange. Photos, ornaments and if they wished to bring their own bed, then they could do that too.

Since the rules governing Covid have relaxed, their friends and relatives can visit at any time, and some family members visit daily.

All agreed that they could vote in elections if they wished, but some don't bother.

Their finances are handled mainly by their relatives. One relative had been informed that their fees are being increased by 9% in April this year.

## **7. Dignity and Privacy**

All residents said that staff members knock before entering their rooms, and the relatives agreed.

Assistance to dress and bathe was always provided discreetly. 2 of the residents needed full assistance, the other 4 were helped as and when required.

The residents were able to bathe or shower whenever they wished. Hygiene sheets are in place for all residents for their preferences if they prefer a bath or shower and if they would like set days and times.

All agreed that staff members called them by their preferred names.

They could all practice their religion if they wished.

Those residents who required hoists to transfer from bed to chair, chair to bath, and chair to toilet had their own slings, which were kept in their rooms to prevent cross-infection. Other residents who required wheelchairs or Zimmer frames, were also supported as required.

## **8. Food and Nutrition**

There was a weekly menu., which was on display, but they were also asked by staff members. Food temperature, quality and quantity were usually quite good, the residents were happy, and if there wasn't anything on the menu that they liked, then the kitchen staff would offer other choices. One relative said her mother had put on weight since arriving at the home.

The daughter of 1 resident who had pureed food, queried the amount of food her relative was being given, she didn't think there was enough, but this was soon sorted, and the kitchen staff tried to make the food look more attractive by pureeing the vegetables separately on the plate.

The residents can eat in the dining room, which is encouraged, or their own rooms. If a resident is at risk whilst being on their own, then a staff member will be nearby. The relatives are made aware if their relative wishes to eat alone in their rooms.

There are Hydration stations on both floors and the residents are encouraged to drink as much and as frequently as possible, to assist with their oral health. There is also tea and coffee offered, along with snacks which are available at the stations, sandwiches, biscuits and fruit, all neatly plated and covered with cling-film to keep them fresh.

Assistance with feeding and drinking is given if needed or asked. Those to whom we spoke did not require assistance but were aware that it is available when it became necessary.

Special dietary needs are catered for, in this instance, pureed food and liquidised food

## **9. Involvement and Respect**

Staff are always polite, and they are lovely, comments from both residents and their relatives.

During Covid, families were frustrated because they were unable to visit as normal. They had in some instances to look through the windows to be able to see their family member. Unfortunately, this was a Nationwide problem. The homes dealt with it as best they could. One relative became an Essential caregiver so that she was able to visit her mum to help the staff to care for her.

There are regular relatives' and resident's meetings, where problems which may have arisen can be discussed and solutions found.

All of those to whom we spoke said that things were explained to them in a way that they could easily understand.

Staff took the time to talk and listen to the residents, when possible. They are always quite busy one resident said but they do their best.

They all understood that they could make a complaint or offer a compliment, and they felt that their relatives would do this in case it became necessary.

All the residents and their relatives said they were happy with the care they received in the home, and the staff helped them with day-to-day tasks.

## **10. Safety and Security**

Residents and their relatives know what the fire alarm sounds like and are aware of tests. Some family members were unsure of where the fire points outside of the building. This was discussed with Wendy at the end of the visit.

The residents who needed them felt safe in the hoists, all had their own slings in their rooms to prevent cross infection. Hoists, wheelchairs, frames and any other equipment was checked regularly.

Residents felt that the staff were there to help and support them if they required it.

Personal possessions were safe, and for most of the residents, their family members dealt with their finances.

The only hazard identified during the visit, was the paving stones in the car park, which had already been discussed with Wendy, and was being dealt with.

Asked if the residents felt safe living in the home, they all said yes, perfectly.

## **11. Health and Wellbeing**

The residents to whom we spoke said that the staff ask them how they are feeling, and if they're happy with their daily care, and they all said that they do, that the staff are lovely and caring. The relatives agreed with this.

If the residents' needs changed whilst in the home, were they involved in making decisions about their care? Family members were involved in changes to their daily care. One lady said "She would hope so" but that it was n/a yet.

Activities are encouraged, and in the main, the residents enjoy them. (Discussed earlier)



Oral hygiene is encouraged, by staff members offering and encouraging the residents to drink fluids throughout the day, as well as their usual tea and coffee intake.

We asked about access to GP's, opticians, and dentists when needed. Wendy deals with this using the ladder system of priority. GP's tend to do video calls, but the Community matrons and nurse practitioners will visit as and when necessary.

Asked if they ring for attention, do the staff answer them quickly, and they said, usually, but sometimes they are busy with other residents.

## **12. General Comments and Observations**

On our arrival at the Home, whilst speaking to Wendy, it appeared that there was no hot water available, which meant that there wasn't any for the residents to wash in, so unfortunately the hairdresser was unable to work that day. She usually worked on Tuesdays too. The machines in the home, the dishwasher and washing machines were all cold fill so that wasn't a problem, however Wendy had contacted a plumber who attended. He needed a part which had to come from Plymouth, not available until the next day at the earliest. Wendy ordered four large urns to keep the home supplied with hot water, until the problem was resolved.

The rooms were all a good size and all had en-suite facilities.

On our journey to speak to the residents, we noticed that the home was light airy clean and nicely decorated throughout. (The decorator was working in one room whilst we were there) One problem arose whilst visiting room 23, which smelled of urine, as did the corridor directly outside of the room. There was no odour anywhere else.

The rooms were all numbered and had memory boxes outside. One family had made a mock-up of their lounge at home, which apparently was exact in every small detail, and was to remind the resident of her home.

The residents all looked well-cared for, clean, smart and well-nourished. A few of them were with the Activities Co-ordinator in the lounge, enjoying themselves. There was a games-room, with a pool table, dart board, games, puzzles and plenty of space for the residents to move around, and to facilitate the easy movement of wheelchairs and frames.

One resident was in bed, and a colleague noticed that there was a sensor and crash mat next to the bed, which was lowered, to prevent injury if the inhabitant

happened to fall or roll out. The beds were all profiling beds, (hospital beds) unless the resident wanted their own bed brought into the home, this had happened a few times over the years.

It was also noticed that the large items of furniture in the rooms were all fastened to the walls to prevent them being pulled over.

There was a computer terminal on each unit for staff members to record the care and treatment of each resident. These were updated at least twice daily, usually after breakfast and after lunch. Seniors update throughout the day, regarding other professionals' visits, and any medical concerns. The Seniors, Team Leaders, Deputy manager, and Wendy are all trained to administer medication. The medication is delivered from the pharmacy, in the original boxes and labelled with the residents' names.

The dining rooms were also spacious, with plenty of room for wheelchair access. Tables set with blue crockery and glassware to make it easier for those with dementia to be able to pick them out next to the tablecloths. The blue bowls were deeper to make it easier for the residents to handle and manage with them.

All the staff members we saw on our journey were friendly, and the interaction between them and the residents appeared to be very good. The staff members in the kitchen and laundry were cheerfully going about their work, and all said that they were quite happy working at the home. Some of them had been there for quite a number of years.

### **13. Summary of visit.**

We returned to the office at the completion of our visit, speaking to residents and relatives. We told Wendy that we were very impressed with the feedback we had received and with the home in general too, as well as our own observations. The home was busy with a pleasant atmosphere and plenty of activity.

The forms that we had left with the home for relatives who were not available that day, to complete, regarding their opinions of the home would be very helpful and would give a wider perspective of the Home to those who would be interested in further information.

Wendy explained that their project for this year, is to upgrade the garden, and to get rid of an old shed and replace it with something more aesthetically pleasing, whilst the upgrade was ongoing. There are residents who enjoy

working in the garden too, so this would be very welcome, as well as those who just prefer to sit and look at the garden once the work is completed.

The kitchen is also due to be refurbished sometime this year.

Wendy told us that she was very well supported by the owners, and they were in regular contact with the home to ensure that things were running smoothly and any work that required action was dealt with.

Information on training of staff members both mandatory and optional is very important in this home and Wendy has given a complete list of the training completed and ongoing which can be found in the Appendices of this report.

#### **14. Recommendations**

Many thanks to Wendy and staff for their help, co-operation and openness, at this visit. They made it quite enjoyable from our point of view. We were impressed with the Home.

## **15. Appendices**

### **Appendix (i)**

#### **Elwick Grange Relative/ Family Member Questionnaire Summary**

##### **Care**

**1) How long has your relative been in the home?**

16 months

Since October 2022

**2) Are staff polite and friendly?**

I have always found the care team really helpful, caring and respectful.

Yes, staff care wonderfully, happy in their job and care. Willing to do anything they can to make my parents stay as homely as possible.

However, one person can come across as abrupt on occasions.

**3) Are interactions between residents and staff positive and friendly?**

I can only praise the staff for the work they do.

From what I see, yes.

**4) Are the staff available when you or your relative needs them?**

They always provide help and assistance when needed.

Yes, however dad says sometimes he asks for something and it can take some time before getting an answer.

**5) Have you been involved in their care plan?**

Yes, my sister and myself.

When they first went in we completed a lengthy questionnaire about their likes, dislikes etc. However, we have not seen this in a typed up completed care plan.

**6) How does the home communicate with you?**

By phone usually

If urgent they will ring, if not then the staff will speak to me when I visit.

**7) Does your relative speak positively about the home and the carers?**

She does mostly, however she misses her own home and her frustrations are directed elsewhere.

Generally yes, however dad can sometimes pick negatives.

**8) When you visit, does your relative appear to be clean, suitably dressed and tidy?**

My mother enjoys her regular bathing days and staff help her keep her hair tidy.

Yes always. However there have been times when mam appears to have the same skirt on for a number of days.

**9) Have you ever been invited to attend meetings regarding your relative's care?**

We have had meetings to discuss my mother's care.

Not as yet. I don't think there has been anything other than the initial meeting with the social worker for the assessment and decision to stay in the home.

**Activities**

**10) What activities does your loved one enjoy?**

Bingo, church services, outdoor activities when possible, coffee shops  
Dad hasn't really involved himself in any activities as what has been offered is not his thing. Mam has joined in and appears to enjoy it at the time but afterwards is very non-committal about her enjoyment of the activity.

**11) What activities does your loved one engage in?**

Sing a longs and bingo.

Singing, music, knitting

**12) Are they encouraged by staff to join in with activities?**

Very much so, she is regularly encouraged to participate.

I believe they are.

**Environment**

**13) Are you happy with the cleanliness of the home?**

Yes, regularly observe cleaning staff working.

Yes, they have recently renewed the main corridor carpet.

**14) Do you feel your relatives room reflects them? Are they able to make it their own?**

We are encouraged to make it "home from home"

We are in the process of making it there own as they have only recently moved into the home.

**15) Are you happy with the cleanliness of their room?**

I am happy.

Yes, I have regularly seen cleaners going into clean rooms.

Visiting

**16) Are you now able to visit your relative in person?**

Yes, it has always been possible.

Yes, we are also able to bring the family pet dog when visiting.

**17) How is the home facilitating this?**

We have been regularly updated on covid protocols; we have worked within those parameters.

We are allowed to visit at any time of the day, but avoid meal times.

**18) What precautions do you have to take?**

Hand washing on entry. Wearing face masks, wearing ppe during Covid. Whilst walking around the home we wear a mask, but remove it when in the room.

**19) Do you know who to speak to if you have a complaint?**

Yes, I would speak to Tori or Wendy if I have any concerns.

Yes, Wendy or another senior member of staff who is on duty at the time.

**20) Is there anything else you would like to tell us?**

We are very pleased with the level of care my mother receives. She is cared for, loved by and well thought of by all of the team.

Wendy, Tori and the team went above and beyond expectations for us on Christmas day. They set a table up in a separate room and served my parents and seven other family members Christmas lunch. The attention to detail was amazing, even going to the length of vegetarian pigs in blankets for our vegetarian family member. The hospitality and kindness shown to my parents that day made what could have been a difficult day far easier for us to celebrate together. They even allowed the family dog in too!

## Appendix (ii)

# 1 HEALTHWATCH HARTLEPOOL

## 2 COVID RISK ASSESSMENT- ENTER & VIEW VISIT

Location of Visit

Assessment Prepared by Stephen Thomas

Date of Assessment 12/12/2022

Date of Visit 09/01/2023

Date Checked and Agreed by Home Manager

Comments - DRAFT Risk Assessment for proposed Enter and View visit to Elwick Grange on Monday 9<sup>th</sup> January at 10am by Healthwatch Hartlepool

### 3

<p>What are the hazards/risks associated with the visit?</p> <p>What could happen?</p> <p>Please list</p>	<p>Who is particularly at risk?</p>	<p>What precautions or existing control measures are presently taken?</p>	<p>Risk of accident/dangerous occurrence of non-compliance</p> <p>High/Medium/Low</p>	<p>Actions</p>
<p>Risk of infection (Covid, Flu or other) from members of the visiting team</p>	<ul style="list-style-type: none"> <li>• Residents</li> <li>• Staff</li> <li>• Family members and other visitors</li> </ul>	<p><b>Pre-visit Precautions</b></p> <ul style="list-style-type: none"> <li>• The visiting team will be limited to two Healthwatch Hartlepool E&amp;V representatives.</li> <li>• The visitors will be fully up to date with Covid vaccinations. This will be evidenced prior to the visit through</li> </ul>	<p>High</p>	<ul style="list-style-type: none"> <li>• Pre-visit virtual meetings with Home Manager (or designated representative) and HBC Commissioning Team to agree visit protocols and parameters.</li> </ul>

	<ul style="list-style-type: none"> <li>E&amp;V visitor</li> </ul>	<p>presentation of their Covid Vaccine Passport, to the Healthwatch Hartlepool Development Officer. A copy of which can be made available to the Home Manager and HBC Commissioning team on request.</p> <ul style="list-style-type: none"> <li>If available, the visitors will have had the annual seasonal flu vaccine.</li> <li>Visitors will take a Lateral flow test on the day of the visit and provide proof of a negative outcome to the Home Manager before the start of the visit.</li> <li>The Home Manager will provide HWH with any relevant H&amp;S policies which the visitor is required to be aware of and observe during the visit.</li> <li>The visitors will attend a pre-visit virtual meeting with the HWH Development Officer, Home Manager (or designated representative) and HBC Commissioning Team representative to agree final visit H&amp;S arrangements and protocols.</li> </ul>		<ul style="list-style-type: none"> <li>HWH Development Officer to ensure that visitor presents all relevant vaccination documentation prior to the visit and that it is made available to other parties on request.</li> <li>Visitor to ensure they have undertaken a Lateral flow test prior to the visit and that evidence is provided of a negative outcome.</li> <li>Visitor to attend any virtual preparatory meetings with HWH Development officer, Home Manager (or designated representative and HBC Commissioning Team) as required.</li> <li>Home Manager (or designated representative) to provide HWH with copies of all relevant Covid and general H&amp;S policies prior to the visit</li> </ul>
<p><b>Risk of infection (Covid, Flu or other) from members of the visiting team</b></p>	<ul style="list-style-type: none"> <li>Residents</li> <li>Staff</li> <li>Family members</li> </ul>	<ul style="list-style-type: none"> <li><b>Visit Precautions</b></li> <li>On arrival at the Home, the visitors will present all relevant documentation referred to above and their HWH Identity Card.</li> <li>The Home Manager (or designated representative) will provide a full</li> </ul>	<p>High</p>	<ul style="list-style-type: none"> <li>Identification of best practice to ensure risk minimisation at pre-visit virtual meetings.</li> </ul>



	<p>and other visitors</p> <ul style="list-style-type: none"> <li>• E&amp;V visitor</li> </ul>	<p>briefing around H&amp;S requirements which the visitor will be expected to follow during the visit.</p> <ul style="list-style-type: none"> <li>• The visit will be limited to communal areas (conducted by the Home Manager or their designated representative) and 1:1 discussion with residents or family members in the Homes designated covid safe area.</li> <li>• The visitors will wear PPE in line with the policy of the Home and any underpinning legislative requirements during the visit, including mask, gloves and apron as well as observing social distancing requirements as necessary.</li> <li>• If the Home reports an outbreak (Covid, Flu, sickness/diarrhoea etc) the visit will be postponed.</li> </ul>		<ul style="list-style-type: none"> <li>• Agreement of strict set parameters within which the visit will be conducted.</li> <li>• Development of pre-visit questionnaire for residents' family members and visitors to minimise the need for face to face contact.</li> <li>• Cancellation of visit if the home reports an outbreak (Covid, Flu, sickness/diarrhoea etc)</li> </ul>
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<p><b>General Visit Safety measures</b></p>	<ul style="list-style-type: none"> <li>• Residents</li> <li>• Staff</li> <li>• Family members and other visitors</li> <li>• E&amp;V visitor</li> </ul>	<p><b>General Requirements</b></p> <ul style="list-style-type: none"> <li>• The visitors will dress in a manner which minimises infection risks (e.g., short sleeved shirt, no jewellery except wedding ring)</li> <li>• Visitors will display their Healthwatch Hartlepool ID badge at all times. Failure to do so will bar them from taking part in the visit.</li> <li>• Visitors will observe all general H&amp;S policies and practices of the Home and any instruction they receive from home staff during the visit.</li> <li>• The visitors will have completed the full HWH E&amp;V training programme, have a recent and verified DBS check and will be an experienced representative.</li> <li>• The visitors will notify the HWH Office that they are safely home at the end of the visit.</li> </ul>	<p>High</p>	<ul style="list-style-type: none"> <li>• HWH Development officer to ensure the visitor is aware of and compliant with all policies, procedures and requirements relating to the conduct of the visit</li> <li>• Visitors to contact HWH to confirm safe arrival home on conclusion of the visit.</li> <li>• Healthwatch Hartlepool Development Officer to ensure that the Home Manager is fully aware of the legislative parameters which govern the conduct and delivery of Enter and View visits</li> </ul>
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**Questions for Home Manager – Elwick Grange**

**A. About The Home**

- **Owners?**  
Care UK
- **Number of residents/beds?**  
57 residents  
60 beds
- **Registration, what services are you registered to provide?**  
Residential, dementia, EOL palliative care
- **Dementia friendly? (Examples of support for residents with dementia)?**  
Dementia coach in house who does face to face training and E-Learning training.
- **Specific Care needs of residents (e.g., living with dementia)?**  
Coloured toilet seats, signs, pictures, sensory arca, memory boxes, show plates.

**B. Staffing**

- **Number/types of staff?**  
Home Manager + Deputy Manager + Business Administrator  
Carers 41      Activities 2  
Seniors 10      Kitchen 6  
Auxiliary 8      Maintenance 1  

	Day	Carers	Night	Seniors
Coral	2	2		1 Day
- **Staffing levels day/night?**  
Sapphire      2      2      1 Day  
10 staff during day      Emerald      3      2      1 Day  
7 staff on night                          1 night
- **Staff Qualifications (including managers)?**

HM Level 5

Carers encouraged to complete Level 2 as a minimum.

- **Staff Turnover?**  
30%
- Staff training mandatory/optional? (for example, dementia awareness, manual handling, safeguarding) ? Please provide details.  
1Lean training 97% all training.  
\*Tracker attached

### **C. Activities**

- **Activities Co-ordinator?**  
1x Lifestyle lead 1x Lifestyle Co-ordinator
- **Daily activities, variety and routine?**  
Weekly planner – including residents' choice. Planner includes have access to care UK minibus for outings.
- **Special occasions, e.g Birthday's, and Christmas?**  
Birthdays – parties on units. Celebrate on special occasions in the home on all units.
- **Do you find out about your residents' areas of interest and try to accommodate them?**  
All about me – meaningful lifestyle care need -  
Pal Assessments – meetings with residents – initial assessments – family – resident

### **D. Safety and Security**

- **Safeguarding procedures?**  
Safeguarding log and quarterly analysis completed. Safeguarding number available at all times.
- **Access to the building and leaving the building?**  
Key code entry. Changes as a minimum every 6 month or earlier if required.
- **Trips and falls, prevention and review?**  
Falls analysis completed monthly to identify any trends. Falls forms sent to falls team after every fall, sensor equipment in place.

- **Personal possessions and money, safety and security, laundry?**  
Money is held in online account – no cash if possible. Locked cupboards available in all rooms.
- **Emergency/evacuation procedures - fire drills, staff/resident awareness?**  
Red box in reception – Business continuity plan

## **E. Wellbeing**

- **Resident appointments with GP's and Community Nurses?**  
Majority residents are in McKenzie house – sent referrals daily for district nurses and community matrons.
- **Trips & falls?**  
All falls are looked into-residents observations taken and documented sent to falls team.
- **Medication management?**  
Currently using E-Mar for Medication  
Do daily checks – Low stock count, Medication not administered and why.
- **Oral hygiene?**  
Training done in house 2022 and by Hartlepool Council.
- **Feeding, hydration, diet and support offered to residents?**  
Hydration stations on all units-snacks available in kitchenette.  
Fortified drinks available. Weight tracker completed monthly and weekly weights started if required. Food and fluid charts in place.
- **Washing and bathing, frequency and timings?**  
Individual Hygiene sheets to monitor, residents' choice indicated – bath – shower – male – female in care need.

## **F. Other issues**

- **Residents and decision making?**  
Residents have the choice to choose what they want to do – where to eat, activities, clothing.
- **Contact with family members?**  
Telephone Calls – Zoom – email (meetings cancelled due to Covid)

- **Building temperature?**  
Checks done on all rooms throughout the month. Regular maintenance checks.
- **Complaints/compliments?**  
Available in reception and online – complaints analysis done quarterly to see if any trends.
- **Hospital discharge?**  
Cut off time 6pm due to staff changeover at 7pm. No weekend admissions.

**Any other comments?**

# Elwick Grange

## Activities

<b>Date -09-01-23</b>	<b>Morning 10am</b>	<b>Afternoon 2pm</b>
<b>Monday</b>	<b>Musical Movement</b> (Emerald Lounge)	<b>Movie</b> <b>Twos Company</b> (Emerald Lounge)
<b>Tuesday</b>	<b>Bowling</b> (Sapphire Lounge)	<b>Reminiscing</b> (Sapphire Lounge)
<b>Wednesday</b>	<b>Walk to Park</b> (Weather Permitting)	<b>Bingo</b> (Emerald dining room)
<b>Thursday</b>	<b>Knitting Club</b> (Emerald Lounge)	<b>Holy Communion</b> (Emerald Lounge)
<b>Friday</b>	<b>Residents Choice</b>	<b>Residents Choice</b>
<b>Saturday</b>	<b>Sensory Activities</b> (Coral Lounge)	<b>Pamper Party</b> (Sapphire Lounge)
<b>Sunday</b>	<b>Church Service @ Salvation Army</b> <b>Songs of Praise Club 1.15pm</b>	<b>1950's</b> <b>Singalong</b> (Emerald Lounge)

All Activities are subject to change

Name	% Compliant	Basic Life Support F2F (Frankl)	Care Planning F2F (Frankl)	Care UK Dysphagia and the Care UK Information Sec	Dementia Awareness eLearning
TOTAL	97%	98%	100%	99%	94%
Diabetes eLearning	95%	100%	98%	99%	100%
Emergency First Aid at Work	95%	100%	98%	99%	100%
Emergency First Aid at Work	95%	100%	98%	99%	100%
Fire Awareness eLearning (Fire Safety F2F (Frankl))	96%	98%	97%	99%	99%
First Aid eLearning	96%	98%	97%	99%	99%
Food Hygiene/Handling eLearning	96%	98%	97%	99%	99%
Handwashing and Glove Use eLearning	96%	98%	97%	99%	99%
Health & safety eLearning/Induction Sign off	99%	91%	98%	98%	97%
Infection Prevention eLearning	99%	91%	98%	98%	97%
MCA & DOLS (England) eLearning	99%	91%	98%	98%	97%
Managing safety in a medication safe handling & an moving & Positioning	100%	98%	99%	99%	98%
Moving & Positioning People eLearning	100%	98%	99%	99%	98%
Pressure Ulcer Prevention eLearning	100%	98%	99%	99%	98%
Safeguarding & Protect Topical medication eLearning	96%	100%			

ELINCK GRADUCE, 9-1-23



## **16) Acknowledgements**

Healthwatch Hartlepool would like to thank Home Manager Wendy Winspear and her staff team, residents and family members of residents at Elwick Grange who helped to make our visit informative and enjoyable.

We also want to thank staff from Hartlepool Borough Council's Commissioning Team for their help and support in organising and facilitating our visit.

## **17) Service Provider Response**

Two factual clarifications were received from the provider and both were included in the final report.