

# Newlands Care Home

Enter and view (Nov 2022)





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# Introduction

Healthwatch Salford is your health and social care champion. Whether you've had a good or bad experience, we can use your feedback to improve services for everyone and we have the power to make NHS leaders and other care providers listen to what you have to say. We're completely independent and impartial and anything you say is confidential. We also offer information and advice to help you to get the support you need. Our service is free, simple to use and can make a real difference to people in Salford and beyond.

Healthwatch Salford have statutory powers that enable local people to influence Health and Social Care services under the Health and Social Care Act 2012. One of these statutory powers is to undertake Enter and View visits of publicly funded adult Health or Social Care premises.

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 are undertaken when Healthwatch Salford wants to address an issue of specific interest or concern. These visits give our trained Authorised Enter and View Representatives the opportunity to find out about the quality of services, obtain the views of the people using those services and make recommendations where there are areas for improvement.

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 Salford also produces reports about services visited and makes recommendations for action where there are areas for improvement.

Information gathered and reported on is referenced against information from health and social care providers, commissioners as well as national and local research sources.

Healthwatch Salford 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 Healthwatch Salford safeguarding policies.

Further information about Enter and View is available at:

<https://healthwatchsalford.co.uk>

The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013 is also available to view at [http://www.legislation.gov.uk/uksi/2013/351/pdfs/uksi\\_20130351\\_en.pdf](http://www.legislation.gov.uk/uksi/2013/351/pdfs/uksi_20130351_en.pdf).

## Acknowledgments

Healthwatch Salford would like to thank the Newlands Care Home staff team, residents and visitors for their contribution to the Enter and View visit.

## Disclaimer

Please note that this report relates to findings on the specific date set above. Our report is not a representative portrayal of the experiences of all residents and staff, only an account of what was observed and contributed at the time.

## Visit details

Service provider	Newlands Care Home
Service address	18 Tetlow Lane, Salford M7 4BU
Date and time of visit	Thursday 16 <sup>th</sup> November 10.00am – 2.00pm
Authorised Representatives	Mark Lupton (Lead), Scarlett Ash & Ifeoma Nosakhoro
Healthwatch Salford	The Old Town Hall, 5 Irwell Place, Eccles, M30 0FN Email: <a href="mailto:Info@healthwatchsalford.co.uk">Info@healthwatchsalford.co.uk</a> Telephone: 0330 355 0300 Website: <a href="http://www.healthwatchsalford.co.uk">www.healthwatchsalford.co.uk</a>

## About the home

Group/Owner	MNS Care plc/Angel Care
Person in charge	Lyndsey Paterson (Manager)
Type of Service	Care Home with nursing – Privately Owned Registered for a maximum of 30 Service Users
Registered Care Categories	<ul style="list-style-type: none"> <li>• Dementia</li> <li>• Old Age</li> </ul> <i>(Registered with regulator 'Care Quality Commission (CQC)' to provide these categories of care)</i>
Specialist Care Categories	<ul style="list-style-type: none"> <li>• Specialist Care Categories</li> <li>• Alzheimer's Parkinson's Disease</li> </ul>
Other Care Provided	<ul style="list-style-type: none"> <li>• Palliative Care</li> <li>• Respite Care</li> </ul>
Local Authority	Salford City Council
Admission Information	Ages 55+
Room Information	<ul style="list-style-type: none"> <li>• Single Rooms 30</li> <li>• Shared Rooms 0</li> <li>• Rooms with ensuite WC 30</li> </ul>
Facilities and services	Close to Local shops, gardens for residents, lift, near public transport, own furniture if required, stairlift & wheelchair access

Information taken from carehome.co.uk November 2022

Latest Care Quality Commission (CQC) report on Newlands Care Home:

Requires improvement: <https://www.cqc.org.uk/location/1-127521513>

# Purpose and strategic drivers

## Purpose

To engage with residents of care homes and understand how dignity is being respected in a care home environment.

- Identify examples of good working practice.
- Observe residents and relatives engaging with the staff and their surroundings and to experience the care home using the 3 primary senses of sight, sound and smell.
- Capture the experience of residents and relatives and any ideas they may have for change.
- We asked questions around 8 'care home quality indicators,' produced by Independent Age in partnership with Healthwatch Camden. (2016)

Surveys and questions are based on '8 care home quality indicators'.

A good care home should:

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

## Strategic drivers

Following the Healthwatch Salford Annual Priorities Survey in January 2022 we received feedback that the public wanted us to look at adult social care. This was developed at the Business planning session into a project looking at the public's experience of using care homes which was scheduled for October to December 2022.

# Methodology

This was an announced Enter and View visit. On first arriving for the visit, we approached a member of management before we spoke to anyone in the care home and took their advice on whether any residents should not be approached due to their inability to give informed consent, or due to safety or medical reasons.

During the time of our visit, there were 28 residents living at the home. Authorised representatives conducted interviews with 6 members of staff at the care home, plus the Manager. Topics such as quality of care, safety, dignity, respecting and acknowledging the resident's and families' wishes and staff training were explored. Authorised representatives also approached 5 residents and 1 visiting family member to ask them about their experiences of the home and, where appropriate, other topics such as accessing health care services.

A proportion of the visit was also observational, involving the authorised representatives walking around the public/communal areas and observing the surroundings to gain an understanding of how the home works and how the residents engaged with staff members and the facilities. There was an observation checklist prepared for this purpose.

Responses from Newlands Care Home are highlighted in blue throughout the report

# Summary of key findings

Newlands Care Home is a registered Jewish care home in the Broughton area of Salford. It has a homely feel with a pleasant atmosphere and the residents appear happy. The staff team are very welcoming and get on well with the residents and visitors.

Activities inside the home appear to be varied and enjoyed by residents, though external activities such as day trips, are yet to resume since COVID, something the residents miss.

There is a good choice of main meals each day with the kitchen open to requests at other times.

Healthcare is provided to the satisfaction of the residents, with issues reported around access to dentistry, and the residents choice of gender for staff administering personal care.

The staff team have access to plentiful training and are supported by the manager to further their personal development.

Residents and staff generally feel they can have a say in how the home is run but a few comments indicated that they did not have confidence in actions being undertaken as a result.

There are a few cosmetic improvements that the home is due to make, namely in the dining room (which was under refurbishment at the time of our visit) and improvements to the front entrance and rear garden.

# Results of visit

3 Enter and View authorised representatives visited Newlands Care Home, and were able to talk to the manager, 6 members of staff and 6 residents/relatives.

## What the residents and relatives had to say

### Activities

Newlands Care Home is predominately a nursing home and as such, few residents have the capability of fully taking part in activities. We learnt that residents enjoy the quizzes, music, keep fit exercises, playing card and board games, karaoke, crafting and watching TV. One resident told us how they can have an Alexa (digital music device) in their room to play any music they want, and they felt that this was good.

Some residents talked of activities they used to do before they came to them home, but owing to limited mobility they can no longer pursue these.

Other residents mentioned how they missed going outside on trips, some of whom felt that they didn't get the opportunity since COVID, with others telling us they have been out into the local area accompanied by staff for a coffee or food.

We asked residents if they had the opportunity to suggest new activities and received a mixed response. Some residents felt they didn't get such opportunities, with one resident saying however, that they felt very involved and included.

### Food and mealtimes

Generally, residents told us that they enjoyed the food and mealtimes, with a few of them conflicted in their comments: one resident told us the food was nice and hot, another told us it needed to be hotter; one resident told us the portions were too big and another felt that the portions had decreased in size a couple of weeks back. Overall they thought the food was well cooked, and that staff try to please them with their requests.

The majority of residents we spoke to said the choice of meals was good, with the added ability to eat outside of mealtimes. A couple of residents however, felt the menu was limited and would welcome more choice.

## Healthcare

We heard how the residents had been visited by opticians, audiologists and a routine GP. One resident told us how they saw a dentist some time ago to have dentures fitted but the dentist has not returned. The nurse has cut nails for those that don't require a visiting chiropodist.

## Religion, cultural and lifestyle needs

Newlands Care Home is registered as a Jewish home that accepts residents who have other faiths and beliefs. Jewish residents felt that the home supported and acknowledged events in the Jewish calendar, whilst another resident felt worried as they had not been to visit their local place of worship in while.

### **Response from Newlands Care Home:**

"As an action from this, we will discuss religion at the next residents meeting. We will look at arranging to take residents to their local place of worship and respond to such requests should they arise."

## Staff and management

There was initial confusion with who residents identified as the manager with some leaning to the Senior Carer as opposed to the Home Manager. Nevertheless, they all felt both were approachable and very helpful, always acting in a caring way.

Similarly, all residents felt that the staff at Newlands Care Home were very nice, friendly and above all caring.

One resident told us that there was an occasion when they didn't feel they could choose the gender of the staff member giving them personal care, as they perceived the home to be understaffed at the time.

**Response from Newlands Care Home:**

“Each resident has documentation in their individual care file, to state what gender preference they wish for, to support with care needs (specifically hygiene needs). We will revisit this and ensure that all residents are happy with the requested gender for hygiene related need.”

One thing that was picked up on our visit was that residents were mindful of the pressures staff were under. Throughout our conversations, residents told us how despite the home appearing to be short staffed, all staff did their best, but there had been times when staff were too busy to stop and chat.

**Response from Newlands Care Home:**

“The staff are usually busy providing the required care for the residents, however as the manager of the home, I am aware that our residents do have time to chat with the staff that are on duty. Throughout observation during the day, the carers are often sat with the residents chatting and there is a happy atmosphere”.

## The home

All residents felt at home in Newlands Care Home with some saying that they preferred a quieter environment at times. A couple of residents talked of missing previous residences but acknowledged that this still felt like home for them.

We asked the residents if they knew how to make a complaint or raise an issue about something they didn't like in the home. They all told us that they felt confident with talking to the manager or staff, with a couple of them saying that whatever problem it was, it would always get solved.

All of the residents felt that the home provided a safe environment and the measures to keep them safe from COVID was adequate.

## What the staff had to say

### Activities

The activities coordinator went into detail about what activities were available at the home which corresponded to what the residents and relatives had told us. They described how the majority of residents had limited ability to take part in everything, but they would always find a way to include the residents as part of a group. We were told how they are looking to get tactile objects for the new dining room/café area and constantly looking for ways to make activities a bit more different for people.

Other staff told us how they encourage residents to take part by sitting with them, chatting and getting to know what they liked. For the residents who do not wish to come to the communal areas, staff are able to help them choose music to be played in their bedrooms.

All staff felt that those who had capacity would often speak up at residents meetings to suggest new activities, though most activities tended to be inside as opposed to outside.

The manager told us how the home embraced activities and tried to make each day different for the residents for example, they have a 'resident of the day' each month, whereby a resident would be made to feel extra special, be taken out for coffee etc. Whilst on our visit, we saw staff preparing for 'eat a red apple day', with posters that would be displayed throughout the home encouraging residents to eat a red apple, making healthy eating more fun.

The manager further went on to explain that all of the residents are included in a residents meeting, held on the last Thursday of each month with minutes provided. During that meeting they would be asked if they would like to suggest any other activities than the activities that are currently offered.

Whatever the residents are asking for, the home has facilitated and the activities on offer are based around each residents suggestion and individual ability. The home is also in the process of displaying a 'You said – we did' board.

Activities staff host a group chat session at least once weekly, where all the residents are able to chat about whatever they wish (day to day topics, family

affairs and current affairs). This has been a beneficial activity so that the residents can air their views and feel oriented to time and place.

## Food and mealtimes

Staff told us how they ensure that residents are able to eat and drink throughout the day including in between meal times. The senior carer explained how their new digital system 'Care Control' works by giving staff real time information at their fingertips to each of the resident. The system is set up, so that staff can easily record when and what quantities residents are eating and drinking, with alerts built in to remind staff if any resident doesn't appear to have hydrated within a defined time period.

The manager mentioned that at the residents meetings there is a focus on improving the residents experience as a whole, including around food. The residents menus are based on individual suggestions with residents completing a 'likes and dislikes' form on admission, detailing their food and drink preferences. In the meetings the head cook is involved and introduces new meals based on the feedback that we receive from talking with the residents. The home will continue to look at the menus so that they are catering for the changes in residents likes and dislikes.

The manager is trained to IDDSI (International Dysphasia Diet Standardisation Initiative), which is the common terminology for describing food textures and drink thicknesses, improving safety for individuals with swallowing difficulties. An assessment is carried out on each resident with the resulting information shared with kitchen and care staff.

The kitchen staff told us that the residents have lots of choices for food and can make these choices by browsing pictorial menus. If there is nothing on offer that the resident feels they can choose, then the kitchen is able to accommodate individual requests. The kitchen is open 24/7 with a tea trolley that goes around during the day. Weekends are often the busiest period within the kitchen.

The home is licensed with the Beth-Din for the inclusion of Kosher meals, and as such no pork products are allowed inside the premises. If non-Jewish residents wish to have pork products to eat, then staff are able to accommodate these requests by taking the resident out to a local café or eatery, or eating outside.

All staff explained how they try to make mealtimes sociable, with knowing which residents like to sit together and respecting the choices of those who wish to stay in their own room.

## **Healthcare**

Staff told us that a GP conducts a regular review of residents each week, with the nurse flagging up concerns about health in between periods and also making SALT (Speech and Language Therapy) referrals when needed.

A podiatrist attends the home for each required resident every 6 weeks and residents have access to annual eye and hearing checks.

Some residents are able to go for regular check ups if they have their own dentist but staff told us that they had experienced contradicting advice from the Patient Transport Service (administered by North West Ambulance Service), when trying to book appointments for residents to visit Salford Royal or Pendleton Gateway, with some residents qualifying for patient transport and others not.

## **Religion, cultural and lifestyle needs**

As previously mentioned, the home is a registered Jewish care home with the rabbi visiting the Jewish residents on a daily basis. Staff also told us that they actively support the followings of other faiths and beliefs, facilitating a visiting priest on occasion.

The manager also explained how the home has in the past hosted a 'cultural diversity day', whereby staff dressed and brought in food of their own culture for the residents to experience. This was seen as a positive day enhancing the wellbeing of residents, staff and relatives.

Kitchen staff reported to us that they can cater for any food preference (vegetarian, vegan, gluten free etc), but at that moment in time, they did not have any residents with these preferences.

## **Care for the resident**

Staff explained how they get to know about a resident when they first arrive, by reading up on care plans and notes. In addition, staff rely on gentle conversation with the resident, getting to know their likes and dislikes as well as asking life history details from family and friends. It was commented that sometimes hospital reports are not always accurate with an example provided

that they can claim a resident to be mobile, but when they arrive at the home, it's found they are not.

The manager sets up the care plans when the resident arrives, with the aid of a 'This is Me' documents, they are able to collate as much of the residents life history as possible.

The senior carer told us that regular shift handover meetings are held daily, with any changes to a residents health or preference communicated to the incoming team, which was corroborated by other staff.

We asked staff if they felt they had enough time to care for the residents and they generally felt they did, but at times it could be so busy with tending to residents personal care needs. One staff member commented that they 'made time beyond hours if needed'.

Another staff member commented how the job seemed more demanding than 5 years ago, with the constant effort of keeping care plans up to speed, and changing priorities.

The manager explained how the home has good staffing levels with safe staffing determined by using a 'dependency tool'. This ensures a fair mix of male and female staff on each shift, ensuring resident's choices of gender for hygiene related care are respected. There are 2 Nurses on duty every day: 1 who works a twelve hour shift and the other who works from 8am to 2pm. There are also 5 carers in the morning and 4 carers in the afternoon. The activities staff member works until 3pm each day, however this is going to be reviewed in the New Year so that activities can be held in the afternoons as well.

## **How the home is run**

The manager told us that residents meetings are held monthly, with an annual residents survey circulated each year. There is a suggestion box for relatives to post their ideas in as well.

The majority of staff we spoke to felt that they could have a say in how the home is run, with some commenting about how they felt supported and listened to by the manager who was seen to be approachable and friendly. A couple of staff however, felt that whilst they could have a say, their suggestions were not always recognised, feeling that the barrier to some solutions lay with the owners of the home.

### **Response from Newlands Care Home:**

“As the manager of the home, I have a great relationship with the owners and management team. Sadly not all suggestions may be achievable or realistic. I am however satisfied that I am listened to and I have a great support network including the owner and my manager. For instance, a duty nurse once raised that it was becoming increasingly difficult to maintain the care plans with the home being busier than usual. I took this to the owner and manager, who agreed that we could have another nurse on duty so that the workload could be shared. Following feedback and through observation we can see that this is working well.”

Staff told us that they are regularly encouraged to improve on their skills and qualifications, by enrolling on online e-courses as well as the mandatory face to face courses (first aid, manual handling and fire safety) which were held within the home.

The manager explained how each staff member was assigned to an online manager training programme, with subject topics having a bundle of training modules for the staff member to complete. Staff are encouraged to suggest other training that would compliment and enhance their skills such as NVQ Health and Social Care levels 2&3, and other bespoke training such as skincare and Tracheostomy Training.

## **Environment and observations**

Newlands Care Home is a 30 bed home accommodating single rooms with ensuite toilets. The home is accessed by a small reception area, gaining entry of the locked door by altering staff via the doorbell. There is a small garden with benches to the front of the property and a small garden to the rear, which is due to undergo refurbishment. Those residents who have capacity and the ability can exit the main door to access the front garden. Due to this, there is a notice on the door alerting visitors to press the bell and wait at reception, even if the door is opened by a resident. We were informed by the manager that this main entrance is due to be replaced in the near future. CCTV is in operation inside the home as well as outside.

The home is across 2 floors, with access to the 2nd floor by a lift for residents. Access to stairwells are kept secured behind a locked door, opened from an electronic key code pad.

There is one lounge with an adjoining 'quiet room' that can be screened off for times when residents want a different place to rest. At the time of our visit, the dining room was undergoing extensive refurbishment to create a café style theme and give it a full refresh. As a result of this, staff were utilising the main lounge as a place for residents to eat their meals, which at times seemed to be quite busy.

Signage was provided throughout the home, however we did not observe any indicators on toilet/bathroom doors to tell of when they were in use or not.

Notice boards were well utilised, with lots of information for residents, staff and visitors including activities. There was a lot of information which tended to make the walls look quite 'busy' and difficult to pick out relevant bits of information.

Safeguarding information was clearly displayed on the wall as was information about the staff team.

The enter and view team were able to sample some of the food at lunchtime comprising of smoked haddock, vegetables, mashed potatoes and sausage, followed by cake and custard. The food was found to be tasty, of good consistency and warm.

Other notable observations made by our enter and view team included how the staff interacted with residents, treating them with dignity and care, making eye contact and chatting to them by their first names. The home felt homely and non-clinical, and all staff commented that the thing they enjoyed most about the home was working with the residents and staff.

# Recommendations and responses

Throughout our visit, we have gathered information to report on the positive conversations from residents, relative and staff, as well as some of those areas that are perhaps not working so well. From this we have made the following five recommendations:

## Recommendations & responses

<b>1</b>	<b>Personal care</b> – to ensure all residents are content with the gender of staff administering personal care
	Response from Newlands Care Home: “The rotas are completed to ensure there is a good mix of male and female staff on duty each day. We will revisit this and ensure that all residents are happy with the requested gender for hygiene related need”
<b>2</b>	<b>Activities</b> – to plan a programme of activities, visits and excursions outside the home, when weather permits
	Response from Newlands Care Home: “We have discussed this in residents meetings and plan excursions when the weather conditions improve. We have made good use of the gardens in the summer, holding birthday parties and BBQs which the residents and families really enjoyed”
<b>3</b>	<b>Notices &amp; displays</b> – to re-evaluate how notices and information are displayed inside the home so that walls and noticeboards seem ‘less busy’
	Response from Newlands Care Home: “We have ordered extra notice boards. For compliance reasons we do need to have information for residents to refer to, for

	<p>example, how to make a complaint, safeguarding information, activities etc . As stated in the report, the dining room is undergoing refurbishment. When this is completed, some of the notice board information will be moved into the dining room to minimise information overload”</p>
4	<p><b>Staff</b> – to improve staff confidence with raising concerns or ideas by becoming more transparent with the evaluation of these</p>
	<p>Response from Newlands Care Home:  “During our staff meetings, to which minutes are made available, concerns or ideas are discussed as a team. There is always a conclusion and decision about what ideas or suggestions are discussed and this is shared amongst staff members. We will revisit this recommendation at the next staff meeting, to ensure that all staff know that they can approach the manager at any time with an idea or suggestion, and that this can also be discussed in the staff supervisions that are held.”</p>
5	<p><b>Planned improvements</b> – to follow through on the plans to improve the front entrance, dining room and rear garden</p>
	<p>Response from Newlands Care Home:  “Quotes are currently being obtained for a new porch and front door. The home has had lots of renovation work in the last couple of years with the main initial focus on improving the resident’s bedrooms, then moving onto the main lounge and the current dining room refurbishment. Following these works, the communal bathrooms will be decorated, having recently had the flooring replaced. There is always improvements to be made and the home works to an environmental home improvements tracker.”</p>



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