

St Patrick's Care Home



Table of Contents

What is Enter & View?	3
Why did we carry out this visit?	4
Enter & View Visit Report	5
Initial Impressions	6
Observations	7
Additional support / care	11
Advocacy support	12
Facilities for and involvement with family / friends	12
Friends and family comments:	13
Summary	17
Recommendations	18
Service Provider Response	19

Acknowledgements:

Healthwatch Halton would like to thank the management, staff and residents of St Patrick's Care Home for their welcome, time and consideration during our visit.

We'd also like to thank those residents' families who took the time to complete our online questionnaire.

What is Enter & View?

People who use health and social care services, their carers' and the public generally, have expectations about the experience they want to have of those services and want the opportunity to express their view as to whether their expectations were met.

To enable us to carry out our activities effectively there will be times when it is helpful for authorised representatives to observe the delivery of services and for them to collect the views of people whilst they are directly using those services.

Healthwatch Halton has statutory powers to carry out what we describe as 'Enter and View' visits. These are visits to health and social care settings which help us in our role as the independent local champion for health and social care.

These visits are carried out by small teams of trained members of our staff and volunteers to observe a service at work.

Due to the pandemic, we have been unable to carry out visits to local care homes, and therefore we have been concerned that the voice of care home residents has not been heard, and residents and families may be unaware of the existence of Healthwatch as their independent champion.

We carry out our 'Enter & View' visits not as inspectors but as visitors to that service. We view the service provided and observe the care and support offered and we look to obtain the views of the people using those services.

Prior to our visit we sent out a short pre-visit questionnaire to the manager of the home. Responses to the questionnaire have been used in producing our report. A link was also supplied to a questionnaire for staff and one for family / friends of residents to give their views.

Why did we carry out this visit?

Enter and View visits can take place for a variety of reasons, for example to find out more about a particular service, or in response to public feedback.

The Enter and View visit to St Patrick's was to learn more about the service, and to find out where the service appeared to be doing especially well, in addition to finding out if any improvements could be made. The visit was not in response to any prior feedback or concerns identified relating to the quality of this service.

Our Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch safeguarding policies, and the Local Authority will be notified on the same day as the Enter and View visit.

There were no safeguarding concerns identified during this Enter and View visit.

Enter & View Visit Report

Care Home: St. Patricks Care Home, Crow Wood Lane, Widnes. WA8 3PN.

Service provided and run by: Halton Borough Council

Care Home Manager - Nicola Lloyd

Healthwatch Halton Authorised Representatives: Jude Burrows, Julie Birchall, Kathy McMullin.

Date of visit: 12 December 2022, arriving at 10.30am.

St. Patrick's Care Home offers personal and nursing care to 40 residents across two areas, the Ashley and Maguire units. At the time of our visit 39 residents were living in the home.

St. Patrick's Care Home is situated in a residential area of Widnes. It is easily accessible by car. A local bus route also stops around a five-minute walk away from the home; but may involve two buses from most areas of Halton. The Home has a car park situated directly outside. On the day of our visit the car park had several free spaces available. Due to a cold spell the car park was very icy and slippy. The main path to the home had been cleared and gritted.

The front of the home was clean and tidy with a large snowman Christmas decoration on display.

During the visit we toured the home, as well as speaking to residents and staff. We provided the



home manager with details of a link to an online questionnaire for staff and one for family / friends of residents to complete if they were unable to speak to us on the day.

The survey link was also promoted by the home and Healthwatch Halton through social media channels.

Initial Impressions

The entrance to the home is via a double door that leads to a porch area with signing in books for visitors, maintenance, and staff. Seats, hand gel and face masks were available. However, the wall mounted hand gel dispenser was empty. Access to the home is via a locked door. Staff allow visitors in using a key code. A four-star food hygiene rating was displayed on the door of the main entrance.

We were greeted by the Manager, on arrival and welcomed into the home. We were not asked to sign in. We enquired if we should wear masks and it was requested that we did while visiting the home.

The entrance hall to the home was warm and clean. Christmas decorations were displayed for the festive period. A white board easel displayed upcoming activities at the home as well as activities that had taken place earlier that month. The activities included a pantomime visit and a Christmas sing along. There was no reference to regular weekly activities.

A slight odour was noticed in the main entrance to building.

A Care Quality Commission (CQC) inspection summary from 2018 was displayed and the Manager explained that an inspection had recently been undertaken and they are waiting on a new rating and report to be published. A



Healthwatch Halton poster was up, alongside many other information notices, included ones explaining about protected mealtimes and church visits. The notice boards throughout the home, both for resident/ visitor and staff information were very cluttered and hard to read. Some of the information was also out of date.

There was cat food and water bowls, for the resident cat that has lived at the home for 10 years, having belonged to a former resident. Vending machines with cold drinks and snacks were available.

Observations

The corridors are spacious with handrails in a contrasting colour. Some areas had hoists and boxes stored at the edges. Bedroom doors are colourful, they are made to look like the front door of a house. A few bedrooms had photos of the residents on the door and others had frames where a photograph could be added.

We noted some furniture around the home that looked in need of repair or replacement, there were worn chairs and furniture that was damaged or had missing parts throughout the home.

Bedrooms have en-suite toilet facilities and can be decorated to the resident's choice. Some residents were sleeping or relaxing in their beds when we visited. The bedroom doors were open so that residents could be seen. Emergency alarms were in place on some of the bedroom doors and on external doors. Care staff explained when set that these trigger if doors are opened and can only be switched off with a key for added safety.

There are lounges, dining and sitting areas throughout the home. Music from various radio stations was playing in different areas. Both dining rooms have dementia friendly picture symbols on the door. A menu blackboard was on the wall, but not completed. No menus were seen on display in the dining rooms. Both dining areas were small with very limited seating. The Manager explained that due to the number of people in the home who have advanced dementia, many are unable to sit at the dining tables due to poor posture and therefore sit in their own specialist chairs for comfort and safety. There are also those residents who do not wish to sit at a dining room table and prefer to eat on their own. Some residents also walk with purpose, which is common in people with dementia, and will not sit for a meal. The manager told us this is a more person-centred approach and has been accommodated deliberately for this reason.

Toilet and bathroom facilities are dispersed throughout the building, with clear dementia friendly picture symbol signs. However, some of these bathrooms were blocked with hoists and other equipment.

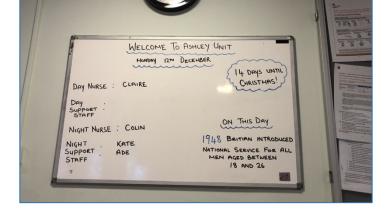
Care staff wore uniforms and masks across the home. Some of the staff did have their masks beneath these noses, reducing their effectiveness. Hand gel dispensers mounted on walls throughout the home were empty and no alternative hand gel, in bottles or on staff uniforms, were seen, apart from at the main entrance. The Manager informed us hand gels are kept in the store room where aprons and gloves are stored and a supply is also kept behind the nurse station which all staff have access to.

All the residents at St. Patricks have dementia and need nursing and personal care. The staffing levels for day shifts are; two nurses and eight support workers. From 8pm the night shift levels are, two nurses and four support workers.

On Ashley unit we saw a welcome board displayed with useful information such as the date and the nurse on duty.

The Maguire unit had no such information displayed. The lounge in the Maguire area is adjoining and accessible by both areas of the home.

We saw residents in the lounges and dining areas. There was a



variety of seating being used including couches and specially adapted chairs.

During our visit we saw residents eating breakfast, which included porridge and toast. Most residents ate their breakfast on their lap or used a portable side table.

Crash mats were in place in some bedrooms next to the bed. At the time of our visit, side tables were on these mats for breakfast. Breakfast equipment was still out during our visit meaning the crash mat was partially covered for some time. The manager explained that residents are not left unsupervised if they are at risk and this is documented in their individual care plan.

One resident, who was having breakfast in an armchair in front of the TV, had dropped her porridge bowl on to the floor and asked for help. We informed a support worker who came and supported them to eat their porridge. A new spoon was used, but the same porridge was given. It appeared to our team that this resident should have been supported to feed when they were given the food, as it would be very hard for them to balance the bowl on their knee whilst eating. While we appreciate independence is encouraged, more supervision was needed in this case, as the bowl had been on the floor for some time before the resident asked us for help. Residents in both the lounge and dining room had food down their fronts and on their clothing from feeding themselves. There was still breakfast food, spilt drinks and milk on the floor and tables at 11.30am. We also noted several pieces of toast on the floor in one of the hallways that had been dropped in a corner.

Seating in the Ashley lounge area facing the television could be hard to get in and out of. Cushions had been removed from the seats on one of the sofas and used as a back rest, exposing the inner section of the sofa. We spoke with one resident who was trying to fix the bottom of their chair that had moved forward, at the request of

another resident. We asked a care member to support her, and they came over to assist. The manager informed us that as these are specialist chairs they should only be adjusted by staff who have been trained to use them.

Some residents had a drink of tea or a cold drink. The residents who had drinks were using adapted cups. We noted interactions with residents where the staff treated the residents with respect, one touching the resident to reassure her when we approached her and another staff member supporting a lady to freshen up in her room.

As we walked around the home, we noticed many of the staff were doing paperwork in the lounge and dining areas. This involved them sitting at tables with large files of paper records. This appeared to take their attention away from the residents. The Manager explained she has requested that these be completed in these areas following mealtimes, so they have an overview of the residents, and it is a requirement that notes are completed in a timely manner.

Some of the staff at St. Patricks are agency staff. The manager told us it takes a long time to recruit new staff and they currently have one qualified nurse who is a permanent member of staff. We were told the agency staff were usually the same staff who provided repeat cover, meaning they were familiar to the residents and involved in team meetings. Currently the home is waiting for the next job adverts to go out, through Halton Borough Council recruitment, but we were told this is a slow process.

The manager informed us that not all staff had a work email address, which can make it difficult to distribute documents; including the Healthwatch staff survey, which we provided a link to. Information is shared with staff at staff meetings and over the phone.

Many of the residents we met during our visit appeared sleepy or very tired, with a number appearing to be non-verbal, meaning our interactions were limited. Residents were all appropriately dressed. Some residents were watching TV in one of the lounges and others watching a film in the Maguire lounge, which was nicely decorated for Christmas. Other residents were sat quietly in the dining areas, and some walked up and down the halls. There were no activities taking place at the time of our visit. A visit from a local school had been cancelled due to the bad weather.

One resident showed a member of our team her dementia comfort muff and enjoyed describing the colours and ribbons on it. Another resident said, "all you girls work hard", when asked about the care staff. She proudly explained about decorating the lovely Christmas tree.

A further resident commented on her care and stated that all the staff were lovely and great and she loved being at St Patrick's.

One corridor had a 'Crow Wood Lane' street sign, which could be useful for residents with dementia, but no other corridors were decorated in this way. This corridor also had brick wallpaper which added to the street like environment. Another corridor had some old photos of local rugby and football teams. Most areas of the home were warm; however, this corridor was quite chilly, one resident was walking through the corridor without a jumper and was feeling the cold. This was reported to care staff and he was helped to find his warmer top.

There were cinema chairs in one area of a corridor, with a number of items stored on top of them. The Manager informed us that the staff in the home fundraised for this area and therefore a drop-down screen is used as opposed to a proper cinema screen attached to the wall. This is stored away when not in use for safety reasons.

A piano was in one of the lounges but didn't have a piano stool. This lounge did not have anyone using it at the time of our visit. There was a bar area that had a garden parasol stored behind it. No seating was available in this area, but we were informed wheelchairs or appropriate seating are taken through when this bar is used.

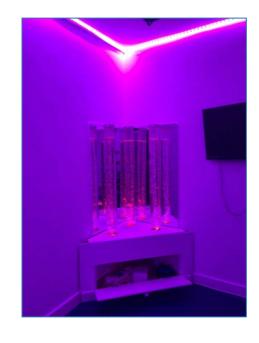


We also viewed the activity room, which appeared to be used as a storeroom, it was cluttered, containing hoists, glass bottles of alcohol and several potential trip hazards, such as boxes and wires. This room was labelled with a dementia friendly sign and unlocked. A member of staff told us she had never seen this room used and that activities took place in different areas of the home. We reported this unlocked and hazardous activity room immediately and the Manager informed us it would be locked.

The home has a sensory room available, with light up bubble tubes and other sensory equipment. At the time of our visit this room felt cold. A bottle of cleaning spray had been left out and a sensory light had fallen off the wall. This room was also labelled with a dementia friendly sign and unlocked. This was also reported to the Manager before we completed our visit.

Cupboards along the corridors were unlocked and some of the cupboard doors were ajar. Inside the storage units was cluttered and some contained nutrition drinks and scissors.

The home has plenty of outdoor garden spaces with grassed areas, paths and benches for residents to



enjoy. We did not go into these areas or see residents use them, due to the freezing weather at the time of our visit.

We were told that residents sometimes go out into town and that there had been recent trips arranged to the aquarium and zoo. Some residents also attend a Dementia Café once a week, held at a local church.

Additional support / care

GP cover is provided to St. Patricks care home by Peelhouse Medical Plaza. We were told by the manager that they have recently been asked to order prescriptions five days in advance to ensure the residents get their medicines on time.

Ward rounds take place each week with an Advanced Nurse Practitioner and a member of the LLAMS (Later Life and Memory Service) team present.

The home reports that there have been some problems with hospital discharge when their residents have needed to attend the local hospitals, with residents using both Whiston and Warrington hospitals on different occasions. The home uses the 'Red Bag' scheme for residents admitted to hospital. A red bag is used to transfer standardised paperwork, medication and personal belongings and stays with the resident throughout their hospital episode and should be returned home with the resident.

The manager explained that their residents regularly return with papers missing and no update on what medication or treatment has been given during their stay at hospital. Often the red bag is returned empty or not at all. The home then must spend

time chasing up the missing papers and finding out what doses of medication the residents have or haven't received in order to carry on with their care. Very often DNAR (Do Not Attempt Resuscitation) forms are not sent back to the home with the discharged residents.

Long waits for ambulances have also been experienced by the home. A recent wait of over seven hours was experienced by a resident with diabetes who had become very poorly.

Chiropodists and Opticians visit the home. A hairdresser also visits the home once a week with an allocated room available for any haircuts or treatments.

Halton Libraries visit the home and bring memory boxes in for residents to reminisce with and entertainers are booked in throughout the year. Clergy visit to give services and communion to the residents.

Advocacy support

All residents have had a standard DOLS authorisation applied for, 18 have been authorised, 22 are waiting for authorisation. Local advocates visit the home when needed, visiting named residents every eight weeks if settled or more often if there is a need.

Facilities for and involvement with family / friends

The homes family and friends' meetings have been suspended since the COVID pandemic and are yet to restart. The Manager uses newsletters to communicate with families. Feedback forms were available in reception and a suggestion box for relatives was available near the main entrance. We did not see the feedback or actions from families' suggestions displayed anywhere in the home.

Visitors are now welcome to come to the home whenever they choose, without calling ahead, as COVID restrictions have now been lifted. One family member was visiting the home during our visit. We gave him our family and friend questionnaire to share his views.

The Manager explained that families can take part in care planning for their relatives, helping with updating the home with information such as, likes and dislikes.

As part of our visit, we asked the manager to send a link to our two online questionnaires to residents' family members and care home staff.

We received 14 responses to the friends and families questionnaire.

In the comments below not all replies are included where they cover the same points. We've highlighted a cross-section of responses.

The results of the questionnaire showed that people felt in general that the care the home gave to their family members was very good.

Thirteen people rated the care and support as 'Very Good' with one person rating the care as 'OK'.

Friends and family comments:

The responses received to our online questionnaire were mainly positive. Staff were praised for the care they provided.

What do you think of the service your relative/friend is at does well?

General

'This home cares for my mother in a dignified manner, and the care they give her is really good. I feel happy and safe to leave my mother in this care home. The home has been updated and now looks better inside and out. Communication for the team is really good, and the staff are always very helpful.'

Staff

- 'Staff are wonderful with my husband, and he obviously feels safe and happy with them. I am always made to feel welcome and know that I can always ask for updates and receive emotional support if needed.'
- 'Excellent friendly staff. Really look after my father well and participate in activities with him to keep him active.'
- 'They keep me appraised of any changes there may be. I am currently working with them on G's care. In any way I can help. I don't have any worries about G. My answer is all they can in the way of looking after G.'
- 'The staff are amazing, they really look after my mum well. Linzi really tries to give the plenty to do.'
- 'The staff work very hard. The people who are in there seem to be very happy, clean and well looked after.'

- 'The care & wellbeing of my relative is their main focus, and for 9 months she has benefited from their care and certainly improved since her long stay in hospital. I have witnessed numerous acts of gentle care and kindness not just to my relative, but others and I am confident she is safe and well looked after. Which in turn brings us some comfort in this difficult situation. Her room is always clean as is the rest of the areas. The staff are very respectful of our, sometimes, emotional questions and they have never made any of us feel we are a nuisance. Reception, office and management are the same.'
- 'All the staff are very caring and are very good at attention to detail. The home is lovely and clean. Mum is well looked after.'
- 'They provide good care for residents.'
- 'Provides the 24hr care necessary to keep residents safe and as well as they can be.'
- 'Personal care needs are met well, also getting mum engaging in activities is so good for the family to see. Before mum moved into St Patrick's she stayed in bed and wouldn't let family or care workers give her support without getting aggressive, so to see her now on visits dressed and sitting in a chair is so good.'
- 'Clean and tidy workplace, residents clearly well looked after and cared for, lots of community activities and regular pictures sent to relatives, good communication at all times regarding all issues.'

Communication

• 'I'm always kept informed of any changes and how mum is. Staff always appear happy.'

What could be improved?

Staffing

- 'They need more staff. They're overworked. Brilliant team in all!'
- 'The way that nursing homes are at this moment in time. They do need more nursing staff. Like so many other homes. But they do the best they can.'
- 'More staff to help when times are busy.'
- 'Wear badges so staff can be identified. They are all so wonderful, but I still don't know some of their names.'

Communication

- 'They keep telling me they will inform straight away when Covid was over. To my knowledge 3 times I've not been able to visit my Mum. And no one has ever bothered to phone me to say, 'Yes, we're open, you can visit'. It's very frustrating. And Mum was kept all alone in her room since August when she broke her hip falling from a recliner chair, which should never have happened, and kept in bed until November, four months in her bed. Deteriorating and quite lifeless. Staring into space or asleep. No communication. Dementia going worse until I was asked to chaperone Mum to hospital for an x-ray on her hip. The specialist said to put her back in the rooms with other residents, asap. So, I insisted she was to be put back in her chair. The manager told me in reception Covid was over and I could visit any time. Twelve hours later I had a phone call from St. Patricks, 'We're closed got Covid'. It has been closed an awful lot.'
- 'The team have worked well under very distressing times (e.g Covid) and they have given superb service to patients and families. However, that said I now feel that meetings between HBC should begin again as this is where you can really get the feel of how the home is doing throughout the year. (I know this probably stopped due to Covid).'

Visiting restrictions

- Relatives and friends are not allowed in communal areas, I understand the reasons for this but think that this rule should be more flexible.
- 'Need more visiting times and not in the bedroom. I would like visiting in a lounge or the dining room.'

Belongings

• 'Laundry getting mixed up even though they have names on them. Personal items going missing, I am buying clothes, socks and family are taking items in which are not seen again.'

Bedrooms

- 'Clean the bedrooms more often.'
- 'At this time, they are doing better, the rooms are now cleaner.'
- 'Since my relative has been there décor and most furniture has been replaced/improved but bedrooms are very small, not a quick fix I know, especially for residents who will sadly be long term. They are very uncomfortable when more than one visitor.'
- 'Bigger and more homely bedrooms.'

Personal care

- 'Very little could be improved upon as I am pleased with my brothers care since has been a resident. One small thing could be a regular haircut, but I understand that he may not always cooperative with staff when they are trying to do what is best for him.'
- 'Give more drinks to frail patients who cannot communicate.'

General comments

- 'When assessing residents for CHC the NHS should give more weight to the views of nursing homes.'
- 'If I have any problems, I only have to have a word with the home manager.'
- 'I am happy with the care and support provided by the team at St Patrick's Care Home.'
- 'There is a warm and friendly atmosphere. Standard of food is really good. The
 activities and entertainment is excellent which, at the moment my relative can
 fully engage with.'
- 'Praise must also be made of the laundry / cleaning staff members as they again work to a high standard and care. Management is always approachable.'
- 'Thank you to all the staff and their good work. I'm sure this will continue in the coming years.'
- 'I am very pleased with P's care, when he was at home supported by carers he was constantly unwell and spent a lot of time in and out of hospital. that issue appears to have been resolved as he is getting the care he needs.'
- 'Some parts of her care are so good but other things such as her belongings going astray are not so good.'
- 'A very good nursing home who go the extra mile to care for residents.'

Staff questionnaire comments:

One member of staff completed our online questionnaire. They told us they had worked at the home for just over a year and had never felt more valued felt valued as a staff member, 'Management and staff at the home are very supportive and professional, they always provide the best support for residents too.'

They told us they would be very happy for a friend or family member to be cared for at the home.

Summary

St. Patricks Care Home offers residential nursing care to 40 people in a residential area of Widnes that is easily accessible by car and public transport. The home is spread across two areas, the Maguire and Ashley units. Both areas offer the same level of care and have an adjoining lounge area.

Aspects of the home are warm and welcoming, with this being reflected in most of the family and friend's feedback. The limited comments we received from residents we spoke with during our visit also highlighted this.

Staff treated residents with dignity and respect. We viewed some warm interactions with residents from staff. Residents families and friends were very positive in their comments, praising the staff at the home and the care they provided for their loved ones.

The Welcome Board on Ashley unit provided useful information, including the date and the names of the nurses and support staff on duty. The Maguire unit did not have the same level of information at the entrance and the corridors were not as well heated.

The two main lounge areas were warm, offered a range of seating and had TV's. The dining areas are limited and specialist chairs or mobile tables are often used at meal times.

Issues with storage were apparent in the home with equipment stored in corridors and some blocking entrances to bathrooms. The home has an activity room, sensory area, piano and cinema style seating available. The enrichment areas and equipment need a refresh as many seem unused and in need of clearing out, updating or being stored more safely.

The home is working with Halton Borough Council to recruit more permanent staff as currently 39% of the staff at the home are agency staff. The home has managed to secure regular agency staff which helps with the continuity of care offered to residents.

The CQC have recently visited St Patrick's, having completed their previous report back in 2018. The current CQC inspection report is due for publication in late December 2022.

Recommendations

- ID Badges: As suggested by one family, it would be helpful to families and residents if staff had dementia friendly ID badges similar to the NHS 'Hello my name is...' badges.
- 2. Staff to supervise / assist residents at mealtimes, as food is given, and provide adequate clothing protection against spills. Consider improvements to the dining area.
- **3.** Ensure corridors and bathroom entrances are kept clear of equipment.
- 4. Plan staff admin and meeting times to ensure residents have their full care and attention.
- 5. Look to relax the restrictions on visits being held in communal areas and ensure this is communicated to all visitors.
- Ensure enrichment areas, such as the Activity room, are fit for purpose, or locked if activities are to take place elsewhere, to ensure resident safety.
- 7. Ensure cupboards and storage rooms are secured to protect residents' safety.
- 8. Remove hand gel dispensers from walls if they are not to be used. Empty dispensers can lead to a high frequency touch point being created, without hands being sanitised. Ensure alternative hand gel is available to visitors.
- 9. Provide information of the same standard on both the Maguire and Ashley unit by adding a 'Welcome to the Maguire unit' notice board.
- 10. Keep all information boards clear, clutter free and up to date.
- 11. Restart the family meetings with Halton Borough Council.
- 12. Invite Healthwatch Halton to attend any future residents and family meetings.

Service Provider Response

The following response to the report recommendations was received from Nicola Lloyd, manager at St Patrick's Care Home.

- 1. ID badges will be provided for all staff
- 2. Staff do assist residents at mealtimes as required. There is adequate protection for clothes against spills. Staff have been reminded however to ensure these are used appropriately.
- 3. Staff have been reminded to store hoists and equipment in appropriate areas, so entrances are kept clear.
- 4. Staff admin needs completing as soon as possible after the event such as mealtimes, personal care, application of topical creams. This is done in the resident areas so there is oversight of the residents.
- 5. There are currently no restrictions on visits in the communal areas, however in the event of an outbreak, such as Covid 19, Norovirus, Flu, movement of visitors around the home would be restricted as per Infection Control guidelines to prevent the spread. Staff liaise with the infection control team during any reportable outbreaks and potentially the home may have to close for a short period of time depending on the outbreak.
- The activity room has been cleared and is fit for purpose. In addition, there is a notice on the door specifying the room is kept locked when not in use.
- Property services are arranging keypad locks on two of the storage rooms to protect resident safety.
- 8. Use of information white boards has been discussed with staff, so they are updated daily.
- **9.** All information boards are now up to date.
- 10. Relatives meetings are due to recommence, a date will be provided in the next couple of weeks.
- 11. Healthwatch Halton will be invited to the next meeting held. Information on this will follow.

healthwatch Halton

Suite 5, Foundry House Widnes Business Park

Waterside Lane

Widnes

WA8 8GT

Tel: 0300 777 6543

E: feedback@healthwatchhalton.co.uk