

# healthwatch

## Cheshire West



**Enter and View Report**

**Daneside Mews, Northwich**

**16<sup>th</sup> October 2023**

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## Report Details

<b>Address</b>	Daneside Mews Chesterway Northwich Cheshire CW9 5JA
<b>Service Provider</b>	HC-One
<b>Date of Visit</b>	16 <sup>th</sup> October 2023
<b>Type of Visit</b>	Enter & View with prior notice
<b>Representatives</b>	Jodie Hamilton Tricia Cooper
<b>Date of previous visits by Healthwatch Cheshire West</b>	September 2019

This report relates to findings gathered during a visit to the premises on specific dates as set out above. The report is not suggested to be a fully representative portrayal of the experiences of all the residents, friends and family members or staff, but does provide an account of what was observed by Healthwatch Cheshire Authorised Representatives (ARs) at the time of the visits.

## What is Enter and View?

Healthwatch Cheshire is the local independent consumer champion for health and care services, forming part of the national network of local Healthwatch across England.

Under the Local Government and Public Involvement in Health Act 2007, local Healthwatch have the power to carry out Enter and View visits as part of their scrutiny function. This legislation places a duty on health and social care providers to allow Authorised Representatives of Healthwatch to carry out an Enter and View visit on premises where health and social care is publicly funded and delivered. This includes:

- Health or care services which are contracted by local authorities or the NHS, such as adult social care homes and day-care centres.
- NHS Trusts
- NHS Foundation Trusts
- Local authorities
- Primary medical services, such as GPs
- Primary dental services, such as dentists
- Primary Ophthalmic services, such as opticians
- Pharmaceutical services, such as community pharmacists.

The list of service providers who have a duty to allow entry is set out in section 225 of the Local Government and Public Involvement in Health Act 2007 and supplemented by Regulation 14 of the 2013 Local Authorities regulations.

At Healthwatch Cheshire, the Enter and View programme is conducted by a small team of staff and volunteers, who are trained as Authorised Representatives to carry out visits to health and care premises.

Following an Enter and View visit, a formal report is published where findings of good practice and recommendations to improve the service are made. These reports are circulated to the service provider, commissioner, the CQC and relevant partner organisations. They are also made publicly available on the Healthwatch Cheshire websites:

- [www.healthwatchcheshireeast.org.uk/what-we-do/enter-and-view](http://www.healthwatchcheshireeast.org.uk/what-we-do/enter-and-view)
- [www.healthwatchcwac.org.uk/what-we-do/enter-and-view](http://www.healthwatchcwac.org.uk/what-we-do/enter-and-view).

## Purpose of the Visit

- To engage with residents, friends and relatives of the named services and understand their experiences
- To capture these experiences and any ideas they may have for change
- To observe residents, friends and relatives interacting with the staff and their surroundings
- To make recommendations based on Healthwatch Authorised Representatives' observations and feedback from residents, friends and relatives.

## Methodology

### **This Enter & View visit was carried out with 'Prior Notice'.**

A visit with 'Prior Notice' is when the setting is aware that we will be conducting an Enter & View visit. On this occasion an exact time and date were not given.

Prior to the Enter and View visit the service was asked to display both the letter announcing our visit and a Healthwatch Cheshire poster in a public area. The service was also asked to share surveys amongst residents, friends and relatives. Members of the Healthwatch team visited the service prior to the Enter and View visit to deliver paper copies of the surveys.

To enable us to check that there are no health outbreaks at the premises that would prevent the visit taking place for infection control reasons, this Care Home was made aware that we would be coming on the morning of the visit.

## Preparation

In preparation for an Enter and View visit the Authorised Representatives who will be carrying out the visit conduct research that involves reviewing:

- The latest CQC report from a routine inspection of the service

- Any previous Healthwatch Cheshire Enter and View reports
- The care home's information held on the Carehome.co.uk website
- Entries on social media platforms
- Comments held on Healthwatch Cheshire's feedback centre
- Information received by Healthwatch Cheshire as a result of undertaking surveys.

On the day of the visit the Authorised Representatives hold a briefing to discuss findings from their individual preparation, and decide as a team how they will carry out the visit, and any specific areas of focus based on this prior knowledge.

### **Daneside Mews Care Home**

Daneside Mews is a 34 bedroomed care home. Daneside Mews offers a mixed level of residential and dementia care across two floors. It is located in Northwich on the banks of the River Dane. It offers long term and short-term stays. It is sign posted and easy to find.

The Manager has worked at the care home for five years. She started as a Care Assistant, then became a Senior Care Assistant, then the Deputy and became Manager in June 2023.

# Findings

## Arriving at the care home

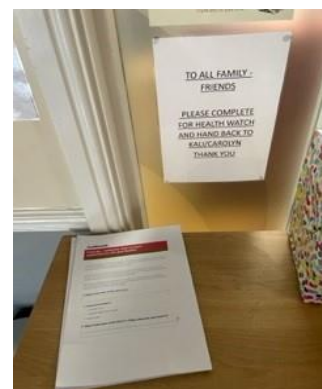
Upon arrival we didn't have to call the bell as staff were present carrying out duties in reception. Staff were friendly and we introduced ourselves and were asked to sign the visitor's book. A member of staff informed the Manager of our arrival. The outside of reception was decorated very creatively ready for Halloween. The reception was a small area but spacious.



There is a visitor's toilet in reception that is well signposted. A variety of information was available in reception including recruitment, HC-One care home information, Age UK days out and Carehome.co.uk review cards and a feedback touch screen. We were able to see a Healthwatch poster in clear view on the wall along with a notice for family and friends to fill out Healthwatch surveys. To enter the care home via reception a coded key pad is used.



When we asked the Manager what we should expect to see on entering the care home she told us that each day is different because of the dementia nature of the home. She said everyone seems settled and happy; "We are one big family."



## Treatment and care

### Quality of care

Daneside Mews is home to 34 residents and it was clear to see staff cared for the residents very well during our visit. We were able to see relationships that had formed between residents and staff. We witnessed clear communication between staff and residents during their care.

The Manager told us the care home uses Danebridge Medical Centre, and GPs visit once a week, more if needed. Residents can remain with their own GP but “often residents are out of area with their GP when they move to Daneside Mews. For ease, we encourage them to use Danebridge.”

If a resident was to become unwell and needed additional care they would stay at the home unless they required urgent medical treatment. If the situation was end-of-life, the resident would stay at Daneside.

There is a hair salon in the care home and this was in use during our visit. The hairdresser comes in every Monday, and there is a barber that visits for the gentlemen every four to six weeks. There is a chiropodist that also visits the home on a Monday.

When we asked the Manager if the care home has links with a dentist we were told:

“We talk to the families about which dentists are in the area, but most families like to have control of this.”

Vision Call opticians come yearly (they also do hearing tests).

The care home use Boots pharmacy, Winsford, or Danebridge in an emergency.

The Manager told us that other health services visit the home including District nurses, SALT (Speech & Language Therapy) team, the dietician if they are concerned about weight loss, and they also work with mental health services.



All residents looked well cared for. Residents we saw were dressed in clean and tidy clothing and it was clear they had received personal care if needed.

All five residents who completed the survey said they felt cared for, safe, their dignity was maintained and they had privacy.

One resident told a member of staff they were cold. The member of staff immediately got her a cardigan and said if she was still cold, she would get her a blanket if necessary. It was obviously a priority to see to the resident straight away.

We did not hear any call bells being activated during our visit but we did see call bells around the building.

When asked in the surveys what the best thing about the home was, the following comments were made:

"Singing, dancing and children from schools come to see me. It's a happy place and staff are very nice to me."

"Coffee mornings, friendly staff, activities and entertainment."

"Meals, entertainment and activities."

"I just love the place."

### **Privacy, dignity and respect**

When we asked the Manager how they ensure privacy, dignity and respect are promoted, she told us they keep things private and have a data protection team. They ensure doors and curtains are shut when required. Lunch times are protected so residents can eat in comfort. They said they respect residents' wishes, for example if they do not want to shower at a particular time, but personal hygiene is always maintained.

We did not observe any alternative systems/accessible information/hearing loops/large print information but the Manager stated:

"We try to use large writing and picture cards with some residents. One resident who is hard of hearing has a white board. We try things and adapt methods to what's more comfortable for the individual."

Healthwatch witnessed a number of interactions between staff and residents. When we were first shown around there were two gentlemen in the corridor who chatted to Healthwatch. Staff interaction was warm and welcoming, and not hurried. They encouraged the residents to take part in the conversations. Staff used a person-centred approach. We witnessed the Activities Coordinator in a communal lounge chatting away with the residents while painting nails. At lunch time staff encouraged independence but also supported residents to the dining room. We also witnessed staff giving residents a choice of food on 'show plates'.

We did not see any personal information around the home.

## **Understanding residents care plans**

The Manager told us that every resident has a care plan which is updated monthly by senior care staff. Residents have involvement in their plans; there is a person of the day form which has 'outcomes and feedback' for residents and relatives to feedback to them. When asked if relatives have involvement in their loved one's plan, the Manager told us it varies depending on how the resident communicates. "We call relatives when the GP has been in and update the plan if necessary. Each family is updated monthly if not before."

## **Relationships**

### **Interaction with staff**

The Manager told us that all staff should be wearing badges, however we did not see all staff with badges on during our visit.

Staff looked happy and were very friendly and approachable. They were happy to answer any questions and to talk to Healthwatch.

At the time of our visit, we did not see any friends or family visiting. The Manager told us that staff have a good relationship with friends and relatives. "We always take complaints on board".

Four out of five residents said they had a good relationship with the staff and one resident said they sometimes have a good relationship with the staff.

We saw lots of interaction between staff and residents during our visit. Staff always took the time to say hello and speak to residents, and residents happily approached staff to talk.

## Connection with friends and family

Friends and family can visit the care home whenever they wish. However, the home does have protected meal times in place.

Residents have told us that family and friends visit them and they also call them on the telephone.

During our visit we did not see any friends or family visiting.

## Wider Local Community

The care home has recently held a collection for the local food bank. The residents visit other local HC-One care homes for coffee mornings and have recently attended a local women's football match. The local church also attends Daneside Mews.

## Everyday Life at the Care Home

### Activities

The care home has two Activity Coordinators. One working five days, and one working Tuesday to Thursday. There were two activities information boards, one on each floor and residents are also told by staff which activities are taking place.

The Activities Coordinator told us that "activities are subject to change as it is all down to what the residents want to do that day."



During our visit a pamper day was planned and we saw the Activities Coordinator painting a resident's nails.

There was a photograph display of trips out the residents have participated in. Recently there were trips to Chester Zoo and the Blue

Planet Aquarium. A member of staff also told us that residents will sometimes be taken to the local supermarket and to Waitrose for a cup of tea. The residents enjoy going to Waitrose. Residents also visit other homes for Christmas fairs and coffee mornings.

Activities and entertainment appear to be enjoyed by residents. Three residents told us they were very happy, one was happy and one satisfied with the choice of activities.

One lady told us "I like the exercise classes in the home."

Another lady told us "Chester Zoo was lovely, I really enjoyed it."

## Person Centred Experience

The Manager told us that the staff treat residents as individuals. They have different hobbies and interests and Daneside makes the care person centred. "We took a gentleman, who was a football enthusiast, to see a football match." There is evidence of this on the care homes social media account. There is also a lovely football wall memorial for gentlemen that enjoy football.



The care home has a resident of the day.

There are relatives' and residents' events and meetings, monthly or sometimes more often.

The care home has a church service in the outside pod once a month. The home tries to accommodate all the residents' spiritual needs.

Pets are allowed to visit, although they have not had a resident's pet live in the home yet.

In reception there is a touch screen system for visitors to provide feedback or complaints.



There is information on how to raise a safeguarding complaint, with a QR code, on the wall.

Out of five residents, three didn't know how to give feedback or make a complaint and two residents were aware.

## Environment

Daneside is located in Northwich town centre along the banks of the River Dane. It is easy to find and in close proximity to public transport. The building is over two floors and is set back from the main road. The building looks in good condition and grounds well kept. There is a small car park at the home. Daneside Mews is within the same grounds as Daneside Court. The care home has a welcoming atmosphere, and is clean and tidy. There were some areas where the décor needs updating and there are plans to do this in the future, especially in the bathrooms. The staff want to create a more relaxing space in the bathrooms.

## Communal Areas

Daneside is clean and tidy but with tired décor in some areas. The home has plenty of natural light and is well lit in areas where the natural light may not cover i.e. corridors. Some windows open a little, letting some fresh air in. Overall, the home was well ventilated.

Corridors all have a handrail and are wide. They are wheelchair accessible and accessible for anyone who needs to use a mobility aid.

The furniture matches the décor and is in good condition. There is a variety of seating throughout the building and the furniture gives a homely feel. Daneside had a lovely atmosphere, it smelt fresh, was warm and was not noisy. There was music in the background and televisions on in communal areas.

There is a communal bath/shower room on each floor and a communal toilet on each floor.



There were six communal areas in total inside the home: a sitting room and dining room on each floor; a garden room downstairs and coffee/activities room upstairs.

There was an art memorial and plenty of photograph displays of activities on the walls.



## Residents' bedrooms

There are 34 bedrooms all of a good size with plenty of natural light. They are all ensuite, with a toilet and sink.



Residents are allowed to bring personal items, pictures, chairs, curtains etc into their rooms, as long as they are fire retardant.

Four residents told us they were able to make their room their own, and one said "I have my pictures in my room."

All rooms have a number with a door knocker, along with their names and symbol to identify if they have a DNR in place. Some rooms have a view of



the garden or the front of the building which is overlooking the garden and grounds of their sister care/nursing home.

## Outdoor areas

There is a spacious secure wheelchair accessible garden for residents to enjoy. The garden is well maintained and there is plenty of seating around for residents to relax. There is a lovely pod in the garden that was built during Covid, which can be used for visiting and activities. There were also garden games including Connect 4 and a football goal in the garden for residents to use during outside activities.



## Food and drink

Drinks and snacks are available at any time from the snack station in both lounges, and included soft drinks, crisps, chocolate and biscuits. Residents can have hot drinks at any time. There is a tea trolley at 11am, 3pm and supper time.



There are two dining areas, one on each floor, and residents can choose where they would like to eat. If they wish to eat in their room, this is also allowed.

Meal times are protected at Daneside. If a family wish to stay for a meal with a resident, this would be pre-arranged.



There is a menu with a choice of meals displayed outside each dining room. They were not pictorial but residents are shown plates of food at the beginning of meal times. Show plates have been the best option for staff to find out what residents would like to eat. All the meals are prepared over at Daneside Court and brought over in a hot trolley to be served.



Healthwatch observed residents being served their lunchtime meal. Staff spoke to residents and used show plates to see what meal they wanted. Drinks were served along with meals, and residents were assisted where needed. The food looked fresh and residents appeared happy.

Comments made by residents about food:

"I'm very happy with the food."

"Only offered two different meals at meal times."

Three residents said they were very happy and two said they were happy with the quality of food.

Two residents said they were very happy, two said they were happy and one was satisfied with the taste of the food.

Three residents said that their dietary requirements were catered for, one resident said that their dietary requirement was not catered for and one resident said they did not know.

When we asked the Manager if they catered for special dietary requirements, they told us "Yes, we have someone with diabetes, and we do 'minced and moist'."



## Care Home Best Practice Initiatives

During Enter and View visits, Healthwatch observe which NHS care initiatives have been adopted at the care home. The four we focus on are:

MUST (Malnutrition Universal Screening Tool) which is a five-step screening tool to identify adults who are malnourished, at risk of malnutrition(undernutrition), or obesity. It also includes management guidelines which can be used to develop a care plan.

Daneside uses MUST, which is included in the care plans.

Restore2 (Recognise Early Soft-signs, Take Observations, Respond, Escalate) which is a physical deterioration and escalation tool for care settings. It is designed to support homes and health professionals to recognise when a resident may be deteriorating or at risk of physical deterioration and act appropriately according to the resident's care plan to protect and manage the resident.

Daneside uses Restore2 Mini.

RITA (Reminiscence/Rehabilitation & Interactive Therapy Activities) which is an all-in-one touch screen solution which offers digital reminiscence therapy. It encompasses the use of user-friendly interactive screens and tablets to blend entertainment with therapy and to assist patients (particularly with memory impairments) in recalling and sharing events from their past through listening to music, watching news reports of significant historical events, listening to war-time speeches, playing games and karaoke and watching films.

Daneside does not have a RITA device.

Have you engaged with the End-of-Life Partnership? The End-of-Life Partnership are running care home support initiatives including additional training for staff, dementia support and activity coordinator forums.

ELOP comes in to Daneside to give training to staff three or four times a year.

When we asked the Manager what their biggest challenges are, they told us "We've got a good team currently but keeping them is a challenge. We have a big turnover of staff and it's been hard to get night time staff. We've got some staff sponsorship now, where they have been to university and need sponsorship to stay in the country."

When we asked the Manager what has been their biggest success to date, they said "The team. CQC rated the home as 'needing improvement' a couple of years ago. They came back in June/July 2023 and now we are rated as 'Good'."

## Recommendations

- Although chocolate, crisps and fruit cordial were at snack stations and they were well stocked, a healthier snack and water option would be recommended.
- Residents need to be made more aware of how to give feedback or make a complaint.
- Update tired décor when possible.

## What's working well?

- All residents appeared to be well cared for, clean and tidy.
- Communal areas were well used.
- Residents given a choice a meal times with show plates.
- Activities choice is good and days out are enjoyed.

- Daneside has a good person-centred approach.
- The home is clean and tidy.

## Service Provider Response

We now have water and fruit on the snack stand.

We are looking at ways to improve on décor. We have now finished the under the sea bathroom and looking at other ways to improve other areas.

We are looking at ways to helping towards the complaints process with residents but due to living with dementia this at times can be hard for the resident to remember or understand. We do though when a resident isn't happy with a service, we ask if they would like to speak to the particular head of the area eg, kitchen, if they aren't happy with the food, we offer to speak to the chef so they can give feedback.

Kali Whitbread, Care Home Manager