

Healthwatch Cheshire West Enter and View Report	
Enter and View Visit to	Hinderton Mount Residential Home, Chester High Road, Neston, Cheshire CH64 7TA
Date	9 th May, 2016
Authorised Representatives	Keith Millar, Elizabeth Bott and Geraldine Waite
Staff Present	Lorraine Weaver (Registered Manager)
Background	<p>Owned by Weatherstones House Care Limited (since 1998) and converted for care home use in 1985 Hinderton Mount is a Residential Care Home for the elderly, age ranging from 60+ requiring personal care. At present there are 24 residents, six with dementia - for which DOLs applications have been submitted, (five currently pending response). There are 26 beds in total; 15 on ground floor and the remainder on first floor.</p> <p>The provision of nursing care, if needed, can be arranged with 'Hospital at Home' service and local GP/District Nurse attendance. Currently, one third of the residents are funded by Cheshire West and Chester Authority and the remainder funded privately.</p> <p>Parking is available for visitors and easy access and egress to and from building.</p> <p>Local transport links include a nearby bus stop, Neston train station and taxi services all within short distance and easily accessible (five to ten minutes away).</p>
Overall Impression	<p>Representatives feel that this is an excellent and exceptionally run service. The commitment of staff, management and owner; their involvement in team-working - ensuring person centred care and support is readily available to all of the residents and staff needs; is exemplary.</p> <p>This highlights how the very high standards of quality care, knowledge, organisational skills and priorities in care can be successfully met.</p>
Any ideas or suggestions for improving service?	<p>Suggestion - Conservatory: a fan may be beneficial and/or monitor time a resident spends in the conservatory e.g. it can become very hot, in particular as resident refused to remove woollen cardigan when asked by care staff. However, several windows were open and drinks available.</p> <p>NOTE - <i>Post visit conversations with manager suggests that fans are available.</i></p>

Environment

On entering home, Healthwatch Authorised Representatives were warmly welcomed by Manager and staff. The reception hall had certificates and information clearly displayed on the walls for easy access and viewing. This included warranty insurance, Registration of Manager (of 7 years) Lorraine Weaver, Comments & Complaints Procedure, Mission Statement Code of Values, CQC Inspection Report (published 5 May 2016) and Healthwatch Initial Correspondence letter of notice regarding Authorised Representatives' intended visit (unannounced).

Other information relating to events included: forthcoming relatives meeting - cheese and wine event (June) with appropriate times for residents/staff attendance and other activities for residents, clearly marked with date and time (N.B. 'health & wellbeing' 'Activities').

For Visitors: Warning Notice and list of 'Allergens' also clearly displayed, informing visitor that biscuits and cakes may contain: nuts, gluten, oatmeal, wheat, milk, soya, eggs, sesame seeds. There was also a more comprehensive list and a footnote requesting visitors to contact a member of staff for allergen data file if more information required.

A variety of pictures adorned the walls and enhanced the bright and homely atmosphere.

Manager invited us into one of the two lounge areas which was adjacent to her office. We were offered a welcome drink, coffee or tea. She had a very cheerful, attentive demeanour and went out of her way to be helpful, answer any questions, retrieve information - records, notes and files in a timely manner. She appeared very knowledgeable, organised and enthusiastic about talking to us about the residents' needs.

This was further supported by all the relevant paperwork which was easily accessible, correctly labelled and filed. It was also observed by Healthwatch Representatives that there was sensory equipment in place in this small lounge area for the purpose of having a 'calming' effect on any resident who may feel agitated at any time.

There is one hoist and one stand aid on the premises. Manager reported that there are two residents who are immobile and others who need some assistance from one member of staff.

Healthwatch Representatives all witnessed good interaction between Manager, staff and residents and with us. We were invited to talk to the Deputy Manager, district nurse, care staff, the activities co-ordinator, kitchen staff, housekeeper, residents and their family members (the latter by agreement).

Social areas for residents included two lounges, the smaller of the two ideal for 'quiet space' and sensory equipment and the larger more than adequate for the number of residents, with the addition of a conservatory at the rear. It was noted by Authorised Representatives that the latter can get very hot, as was the case on the day of our visit. It was well ventilated with open windows and care staff encouraged a resident to remove her cardigan but she did not want to.

Main Lounge: adequate size. Most residents seated here. Notice board displaying activities, including dancing, games, daily menu. Seating appeared comfortable and appropriate for residents. A relaxed atmosphere.

Outdoor environs: pleasant, mature grounds, several seating areas for residents. View of garden for residents sitting in conservatory. When asked whether any residents were interested in gardening/given the opportunity to do this, Manager responded that two of the residents in particular were interested/involved in garden activities and enjoyed it.

Also reviewed by Representatives - Accidents and incidents logged and a monthly audit

completed. Fire Inspection reports up-to-date. Hot water temperature tested weekly. WE were informed of regular maintenance of bathing equipment/shower heads (prevention of Legionella).

Food Dining Room and Menus -

Representatives were told that for meals fresh produce is sourced locally and dry food products supplied by Birchalls (Liverpool). Weekly menus are prepared for residents with individual 'special diets.' Although the main chef was absent on day of our visit Representatives were encouraged to view the kitchen itself and spoke to the two Kitchen Assistants/cooks present. They told us that in training terms they had been encouraged to progress through NVQs and both commented that they felt Hinderton was, **"A good place to work."** In viewing the kitchen Representatives noted that in the kitchen all windows were fly screened and foodstuff storage seemed appropriate.

The dining room was of generous size with tables attractively set with clean linen, cutlery, condiments, menu and flowers. Representatives feeling was that this was very impressive and highlighted once again the thought that had gone into making it a pleasurable experience for each resident.

Menu choices included full English Breakfast daily - which Manager reports is very popular! There was a good choice and variety of food on offer for an optimum dining experience.

Bedrooms: Ground floor and first floor rooms were of decent size, looked and smelt very clean and were tidy, with personal photographs and effects of resident adding to the 'homely feel'. Every room is en-suite.

We spoke to a gentleman who commented, **"I am very happy at Hinderton Mount and have no complaints about the care I receive."**

There were no 'malodours' at all throughout the care home.

Equipment - Equipment throughout the home seemed appropriate and appeared well maintained - one hoist, one standing aid (two residents are unable to mobilise independently). Other residents who do not require equipment are assisted by one carer or walking aids (as appropriate to their needs).

Health and Wellbeing

The Health and Wellbeing of the residents appeared the main priority of the Manager, owners and staff. The Manager said she is always mindful of the fact that Hinderton Mount, **"Is 'the resident's home'."** All the staff we spoke to shared this view and demonstrated person centred care on our visit. There was a happy atmosphere in all areas and some quality time for residents on an individual or shared basis was given considerable thought. **"Residents' views, wants and needs are a priority to us and they are encouraged to take part not only in preferred activities but also involved in decision making regarding food menus etc."**

Representatives noted that Residents did not frequently watch television (although this was available). They tended to have more 'quality' activity time and interaction.

Staffing - There appears to be adequate staff employed at the home. The manager reported that there are also four volunteers (DBS checked), who provide administrative support to herself and deputy manager.

Manager - (6.30 a.m. - 7 p.m.), Deputy Manager, 11 care assistants (10 of which have NVQ 3 in care and another half way through this qualification) - three staff for each 12 hour shift, two senior care staff (one who has NVQ 3 and the other NVQ 5).

Also employed are an Activities Co-ordinator (shift 8 a.m. - 4 p.m. daily), one domestic/cleaner, one housekeeper (8 a.m. - 4 p.m.). A chef is usually employed from 8 am - 2 pm supported by two kitchen assistants (8 a.m. - 6.30 p.m.)

Staff all commented on the opportunities for training on the NVQ programme.

A maintenance person is employed two days per week.

A maintenance register was checked by an Authorised Representative and was found to be up-to-date.

We were told that the home does not use 'bank' staff and also that there have been no agency staff employed at the home for eight years.

On the day of our visit, nine staff were on duty.

Residents appeared comfortable, content, well cared for, clean and well groomed. There was staff interaction, including with the activities co-ordinator (employed on a daily basis 8 a.m.-3 p.m.), who was providing stimulation for the residents. She was more than happy to showcase the activities to Healthwatch representative and explain different approaches e.g. for an individual resident who may not choose to be part of a group at a given time but still want the opportunity to enjoy an activity. This was provided in the form of one-to-one quiz, with memory prompts or a game which can be played by one person. Manager also explained how 'memory' boxes are encouraged and training is provided and offered to staff for their own personal and professional development. We were informed that staff are invited to attend dementia awareness sessions; to assist residents whose health & wellbeing will ultimately benefit from this.

Care Plans: Resident's history, their likes/dislikes and individual needs, form part of their care plan. Each resident has a 'key worker'. There are monthly staff reviews with resident, key worker, manager and relative. However, if necessary and dependant on any changes to care plan, these meeting are as and when required/more frequent. Manager begins her shift at 6.30 a.m. in order than she is involved in handover from night shift.

Authorised Representatives were kindly invited by manager to speak to nurse (from Little Neston Surgery), who was in attendance on day of our visit. She provides treatment to residents as often as is required and although she is not staff at the home, she has been a regular at the home since 2002.

We were informed that medication reviews are performed twice per month.

There are three doctors surgeries local to Hinderton Mount.

There are regular meetings for staff, residents and relatives. Minutes of these meetings are up-to-date and contained many positive comments.

Of particular Note: the Manager is very supportive of her staff, involved within the team on a daily basis for the health & wellbeing of the residents. She is also well supported by the owner, regarding not only resources needed at the home but by his regular visits/interactions with staff and residents. This is admirable and adds to the successful outcomes of quality of care provided.

Regular activities contribute to the mental health & wellbeing of residents and encourage communication.

Activities and Community Links

On day of visit care staff were sitting with residents in conservatory, playing dominoes. The Activities Co-ordinator was also chatting to a female resident one-to-one and asking her some quiz questions. Residents taking part seemed to interact well. There was also a piano in the conservatory. One resident who was spoken to by Heathwatch Representative responded that she felt the menu was, "*A bit plain,*" and "*not much activity.*" Activities co-ordinator showed me a cupboard which was full of group or individual games.

Music events entitled 'Music for Health', 'Make Music', 'Have Fun' are displayed. This offers the opportunity for residents to be interactive and join 'Revolutionary Workshop' - a dementia

strategy involving house of memories activity.

A daily activity plan was displayed in hall and lounge, which also included exercise to music (Wednesday) bingo, board games and quizzes throughout the week.

A hairdresser visits and nail manicurist sessions available weekly.

Representatives noted that a 'Cheese & Wine' event/relatives meeting is to be held in June.

Pet Therapy in the form of a 'placid dog' (as described by Manager), visits every week and is very popular with the residents.

Additional services - Hair and beauty services are available on a weekly basis provided by a visiting hairdresser.

Chiropodist - This service is available every eight weeks or as when required by resident.

Feedback

Staff commented on 'pleasant working environment/support of Management. Residents reported being, "*Involved in menus and activity planning,*" and praised all staff's care and understanding'. A gentleman said, "*I have no complaints, I am very happy here.*"

Authorised Representatives spoke to a resident's relatives by invitation. A gentleman explained that his mother-in-law had lived independently for a long time in her own home until her mid - 90s but had become increasingly anxious over a period of time and also had several falls in her home. However, she was now settled and both he and his wife feel very fortunate that their family member was able to now live at Hinderton Mount, which had been her home for the past 15 months.

Another relative commented, "*I am very appreciative of the exceptional care and affection shown to my mum.*"

Additional Comments

Healthwatch Authorised Representatives would like to thank the Manager Lorraine Weaver and her staff. Any questions were answered without hesitation in a professional and friendly manner and Lorraine encouraged discussion, was very open and attentive and all records very well organised in her office and at hand for us to view. We were invited throughout our visit to speak to other members of the team, including the Deputy Manager, District nurse and all other staff - who were equally responsive and committed to their roles for the health, wellbeing and happiness of the residents without exception. Further discussion with some of the residents and their family members, highlighted a great deal of satisfaction with the service provision, management and staff. This was also evidenced in the records, by the many positive comments made by residents (and staff) who felt supported, listened to, cared for and happily living or working at Hinderton Mount.

Feedback from Provider of Service

Hinderton welcomed the feedback from Healthwatch which was very reassuring because we take great pride in providing the best care possible for our Residents and their Families after all it now their home.

The positive feedback from Healthwatch in conjunction with CQC reports spurs us all on to maintain our high standards.

The Management and staff were delighted with the feedback from the three representatives came on the unannounced visit on May 9th 2016. We found that the representatives were very respectful and knowledgeable.

We look forward to any future visits with confidence and the support given by Healthwatch.

