

healthwatch

Cumbria

Eskdale House Residential Care Home

17th May 2017

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voice
counts

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Introduction

About Healthwatch Cumbria

Healthwatch Cumbria (HWC) is an independent community based organisation for the people of Cumbria. It was set up to champion the views of patients and people who use health and social care services in Cumbria. The goal of HWC is to make services better and improve health and wellbeing. HWC achieves this by talking and listening to people in all parts of Cumbria and telling providers of these services local people's views and challenging organisations that need to do better and highlighting examples of good practice.

HWC is part of Healthwatch England who act as the national consumer champion for all local Healthwatch.

Details of visit

Service Provider	Eskdale House Residential Care Home
Service Address	Eskdale House Swan Street, Longtown, Carlisle, Cumbria, CA6 5UZ
Date and Time of visit	17/05/17 11.30am - 1pm
Authorised Representatives	Sue Hannah Jane Irving Hilary Barker
Healthwatch Cumbria contact details	Healthwatch Cumbria, The Best Life Building, 4-8 Oxford Street, Workington, Cumbria, CA14 2AH Tel: 01900 607208

Acknowledgements

HWC would like to thank the homes manager and her staff for welcoming HWC to the home and supporting the team to speak with as many residents and staff as was possible.

Disclaimer

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

What is Enter and View?

Healthwatch Cumbria has a statutory right (Health and Social Care Act 2012) to carry out Enter & View visits to health and social care services to gather the views and experiences of customers, patients, families and staff for the purpose of service improvement. Service providers have a duty to respond to our reports and recommendations.

Healthwatch Cumbria will share its findings with Healthwatch England, the Care Quality Commission, services and the public.

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 can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation. This is so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Purpose of the visit

To engage with residents in care homes in Cumbria to collect and record their experiences of accessing health and social care services, primarily the out of hours GP service Cumbria Health on Call (CHoC).

To identify and champion examples of best practice with regard to resident experience including: surroundings, activities and meals.

Methodology

Eskdale House was made aware of the Enter and View process through promotion of the visits via a telephone conversation to the home followed up with an email and attached poster providing details of the visit for the home to display from Healthwatch Cumbria. The conversation outlined the statutory role and specific purpose of the visits.

Two homes were selected for visiting in north Cumbria based on the geographic location of the homes and their recent participation in the HWC CHoC survey that highlighted issues affecting those in care homes with accessing some services.

Three HWC Enter and View authorised representatives introduced themselves to the member of staff present on arrival with identification and detailed the purpose of the visit at the selected care home. HWC staff then introduced themselves to the home manager and again detailed the visit purpose and enquired whether there were any residents who should not be approached. The home manager was also informed that the findings from the visit would be shared with her.

HWC staff engaged with residents, staff including the Home Manager and a district nurse, and initiated a discussion around the following topics:

- Access to health services
- Satisfaction with activities on offer
- Comments about the home

There were:

- 8 residents spoken to
- 3 members of staff spoken to
- The District Nurse was also spoken to

Responses were recorded and observations noted.

Findings

Upon arrival at the home the main entrance door was locked and operated by a buzzer system for anyone visiting the home.

In the main entrance there was a signing in book for visitors along with a hand gel dispenser. This was empty at the time we visited, however on pointing this out to a member of staff it was immediately replenished.

By the signing in book there was another book 'Down memory lane' which was a collection of residents stories.

The Healthwatch Cumbria poster was clearly visible at the main entrance informing residents, staff, family members and visitors to the home of the programme of visits to care homes being undertaken by HWC and details of how they could share their views or experiences with HWC.

All the staff were welcoming and friendly and offered their support to facilitate conversations with individual residents, show us around the home and talk to us about the experiences of some residents who were less able to have conversations with us.

We were shown the homes two lounge/dining rooms as well as a separate residents' lounge for those wishing to spend time in a more quiet setting. This room over looked the home's garden. There was a mock sweet shop in the room with old fashioned weighing scales and a cash box that could be used by residents to stimulate activity and reminisce. There was also a doll and a dolls pram. In the room there were a couple of hand knitted 'Twiddle Muffs' for residents who may feel agitated. These are knitted hand muffs with objects such as buttons, ribbons and zips sewn on that can be played with rather than possibly scratching or pulling at oneself or clothing.

There was a small kitchenette area with tea and coffee facilities in the quiet lounge. This area had a number of cables trailing from the electrical sockets that could be a potential hazard.

The room was brightly decorated and had a good selection of DVD's and books available along with a TV screen fixed to the wall. The chairs were arranged around the walls of the room but facing one another which could support residents who wished to have conversations with one another.

In both the lounge dining rooms there were good stocks of DVD's, CD's and books along with daily newspapers available. There were TV's on the wall in both rooms. There were kitchenette areas where the staff made residents drinks and served their lunch from. Resident's chairs were arranged against the walls facing one another or in a circle which was conducive to residents having conversations. We observed that there were old photographs and paintings of Longtown in the hallway of the home.

Meals

We were shown a copy of the menus which are on a 4 week rotation system and posters on the notice board in the dining room with pictures and written explanations of the light bites food options were also pointed out. We were also told that the home will be introducing picture menus for residents in July to help residents choose their meals. Currently a member of staff asks the residents each day what their meal choice is.

When we spoke to residents about their thoughts of the food all commented on the quality and how good it was.

We were told by a staff member that residents are allowed to have alcohol in the evening under the supervision of the staff, cans of beer are available in the fridge in the dining rooms but the vodka is locked away in the main office.

Activities

Two residents we spoke to, although they had dementia, did try with the support of the staff to speak to us. One lady told us that, "I like having my hair done, the hairdresser is coming today." The member of staff confirmed that this was the case. The other lady told us, "I like having soup and sandwiches for lunch." One of the carers told us that they have tried providing a main meal at lunch time with soup and sandwiches at tea time but the residents prefer to have soup and sandwiches at lunch time.

Access to Health Services

We asked the two members of staff about access to health professionals for residents, in particular the out of hours GP service CHoC. The staff told us that they have no problems in arranging for health professionals to come to the home but most times family members prefer to take their loved one to their appointments.

One member of staff told us, "With appointments during the day and where family members don't take a resident to their appointment at the Cumberland Infirmary a member of staff will attend with them. Getting picked up by the patient transport service is fine but sometimes if the residents appointment is quicker than expected they have to wait a long time at the hospital in the main atrium area for the transport service which can be distressing for the resident and can mean that a member of staff ends up running over their shift patterns which means they end up working longer hours." However, they did say that this was not a regular occurrence.

We were informed by staff that the CHoC service is very good, as are other services such as the District Nurses, the chiroprapist, optician and dentist.

Staff told us that most of the residents are local and are able to remain patients at their own optician or doctors in the town, but for the dentist they have to go into Carlisle. Again they are very supportive to accommodate residents.

We spoke with the visiting District Nurse who told us that they are very impressed by the attitude and efforts of the staff at the home - nothing is too much trouble.

The District Nurse also told us that the home accommodates for end of life residents who wish to see their pets. She told us of one occasion where the home had brought a resident's farm animal (sheep) into the home and another where a horse had been brought in for residents to say their goodbyes.

We noted the phrase, pointed out by the District Nurse, "Our residents do not live in our workplace. We work in their home." This was evident throughout the visit. Student nurses on placement had also remarked that the home felt like a home.

One resident had asked for a Christmas CD to be played, we observed a member of staff go and put the disc on for them.

The manager told us that she holds 6 weekly reviews with residents and family members and makes a point of asking, "what are we doing right or well and what are we not?" The manager was to address any issues rather than residents or family feeling unhappy and

dissatisfied. The manger commented that family and friends are very supportive and are actively involved in the lives of residents.

We were told by staff and 2 residents that they (the more able or supported residents) can go out of the home whenever they want to and often go shopping, or out on trips to places they like.

Staff and those residents we spoke to said that they have lots of activities at the home such as, quizzes, coffee mornings, bingo, sing along's and that family members or visitors join in. The home also hosts special activities at Christmas and Easter. The team saw the activities schedule in the main entrance. It was noted that on the activities board there were no details of activities; there was a copy of the latest newsletter; , dates of the residents meetings and a copy of the minutes from the last residents meeting.

One member of staff informed us that they were very happy working at the home.

It was emphasised by the residents spoken to how caring and attentive the staff were. We observed that staff and residents seemed to have an excellent relationship.

Recommendations

HWC would recommend the home ensure the hand gel dispensers are regularly checked to ensure they are full at all times for infection control purposes. HWC would recommend that any trip hazards are removed such as the cables in the quiet lounge and recommends ensuring the activity board contains relevant information on activities.

Areas of good practice

HWC commends the home for its person centred approach. HWC commends the home for involving residents and families when seeking feedback and its pro-activeness towards making the home the best it can be.

Response from service Provider

The Manager responded saying "we are looking at alternative place to charge the hoist batteries after kitchenettes are refurbished".