

healthwatch Cumbria

Holmewood Residential Home,
Cockermouth

31st January 2014



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voice
counts



Enter & View Report

Healthwatch is the independent consumer champion for health and social care customers and patients in the England.

Healthwatch Cumbria has the statutory right (Health & 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.

Service:	Holmewood Residential Home, Cockermouth
Service Manager:	Ms M Gilmore
Date of Visit:	31 st January 2014
Unannounced/announced:	Unannounced visit
Visit Team:	Valerie May, Sue Stevenson, Stan Lightfoot
Date of last CQC Inspection:	25 th October 2013

For more information on Healthwatch Cumbria please visit:

www.healthwatchcumbria.co.uk

Healthwatch Cumbria, Best Life Building, 8 Oxford Street, Workington CA14 2AH

01900 607208

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Introduction

Healthwatch Cumbria has a planned programme of Enter & View visits for 2014/2015, covering a variety of health and social care services operating in the county.

Healthwatch Cumbria is constantly receiving intelligence about a wide variety of health and social care services and the intelligence is used to help to decide where to carry out Enter & View visits. This information includes both concerns and compliments about services. All care home services provided in Cumbria have received a letter from Healthwatch Cumbria through Cumbria County Council explaining the purpose of Healthwatch Cumbria Enter and View visits and advising that a programme was being developed. These letters were sent out prior to the first Enter and View visit taking place.

The current sample of care homes was confirmed at the end of November 2013.

Following this, Healthwatch Cumbria embarked on a further information gathering process in preparation for these visits speaking with stakeholders including CQC, Cumbria County Council and Cumbria Safeguarding Board.

The Enter & View visits took place between December 2013 and February 2014 and were carried out by an Enter and View Lead (EV L) and a number of Enter and View authorised representatives (EV ARs).

During our visit we talked and listened to the views and experiences of residents, families, friends and staff, and made observations against the following criteria:

- Environment – Fabric & Facilities
- Service Provision and Management
- Nutrition (meals & diet)
- Exercise, Activities & Mobility
- Personal Support & Choice

Methodology

During all Enter & View visits we use a variety of methods to gain an understanding of the service including:

- Oral questioning (using open questioning techniques)
- Informal discussions (using non-leading prompts)
- Observations

We talked to managers, staff, residents and visitors and request information including a menu, staff rota and activities plan. The E&V L ask if there are any sensitivities around particular customer needs on the day of the visit which we need to be aware of i.e. risks, infections, and serious illness. On this occasion we were informed that three of the residents were receiving hospice at home.

The Enter & View authorised representatives (EV ARs) observe residents and staff going about their daily tasks. We make observations about the general environment, condition and presentation of the home, support and care received by residents and interactions between staff and residents.

Residents, visitors and staff views and comments are formally recorded anonymously to protect identities. Letters explaining Healthwatch Cumbria and the purpose of the E & V visit are left for families. The letters also include Healthwatch contact details should families wish to raise any concerns or forward compliments about the service.

This report relates to a specific visit carried out during a point in time and therefore is not representative of all service users but acts as a 'snap shot' of daily life within the service.

Holmewood Residential Home, Cockermouth

Holmewood is a privately owned residential home for 26 elderly resident in Cockermouth. It is one of the 3 homes owned and operated in the North West by Mr Chris Root as Lakeland Care Services Ltd.

For more information please visit: [Holmewood Care Home](#)

General Manager - Jim Findlay

Registered Care Manager - Dianna Gill

Deputy - Melanie Gilmour

Most of the residents come from the local area, and have some physical frailty, but not dementia.

On the 31 January 2014, the Healthwatch Enter & View team arrived at the home unannounced, introduced themselves and explained the purpose of the visit to a member of staff. The team was taken to the ground floor front lounge and the E&V lead provided an overview of the role and functions of Healthwatch explaining the purpose and methodology of an Enter and View visit to the senior manager present and the owner.

Environment – Fabric & Facilities

Holmewood Residential Home is situated on the main road approaching Cockermouth from the south. It is an old large house once used as council offices. It is an imposing building and is set in large mature grounds. To the front/side of the premises is a car park and residents can sit out in the grounds (mainly hidden from the road) where there are tables and chairs for use.

Inside the entrance is a hallway with a table, hand gel and sign in book. To the right is a modern lounge/meeting room with games, music and magazines available and a water cooler. To the left is the dining room which is a pleasant room with lots of day light. The room was clean and all the tables and chairs were in good condition. The kitchen is situated off the dining room and is also well maintained. Clean floors, walls and work tops were observed.

Continuing through the building there is a large staircase and two easy chairs and furniture in the hall way which give it a homely feel. A passage way leads to toilets, the laundry and a staff room. In the hall on the ground floor there is very small staff office (a one chair location) with an open doorway. This contains general information, rota's etc., and from here staff can observe people moving about the home and are able to hear if someone calls from the lounge. The main lounge is through on the right and has easy chairs, a TV and views to the garden.

From the lounge there is access to the extension of the home which has 26 bedrooms (25 en-suite). There are also wet rooms and bathrooms in this area which also accommodates the manager's offices and another small lounge, which is used at the moment by a resident who smokes. The bedrooms upstairs appear to be smaller than the ones downstairs.

Bedrooms in the old part of the house are all of different shapes and are generally much larger and airier with high ceilings and large windows, these being more expensive to rent.

We were advised that in many rooms there was a raised edge to step over to get into the shower which may make access more difficult for some residents.

We noted that all corridors were in a very clean and bright condition, and that many rooms had been freshly decorated.

Environment - Fabric & Facilities Observations

Positive Observations

We were advised that all prospective residents and their families were given a full tour of the building when enquiring about the facilities offered.

The home is generally well decorated with some rooms having been recently 'made over'. Residents can choose decor for themselves if they wish.

Improvement Observations/Considerations

We observed a small lounge room which is currently used for smoking.

Consider that it may be helpful to ensure that the home has a clear smoking policy in place which takes into account the wishes of all of the residents, and emphasises that smoking inside is an exception and not the rule.

In some rooms baths are being replaced with showers, but noted a raised edge that may hinder less able residents to get into the shower.

Consider options for flat entry to showers to reduce risk of falls and ease access.

There were some groupings of chairs in the main lounge and interactions taking place between some residents but some other parts were slightly isolated from one another.

Consider reviewing seating arrangements, providing tables between chairs. The front lounge room could also be utilized more.

There was evidence that the front lounge had a range of games and activity options but there were not being used during the E&V visit.

Consider actively encouraging residents to use the games and activities, have specific supported sessions for this or to take activities to other parts of the house for residents to enjoy.

Comments from staff, residents, and families

'The views are very important to me and I love wild life'.

'I like my own company but do see others at meal times, I came up to Maryport in war time to work at a government factory, I like gardening but feel that I cannot do it now, I did look at other homes but found this one more homely'.

'I enjoy my view from my window and my own space, I have my own phone and I love my room decoration'.

Service Provision and Management

We spoke to residents and visiting relatives in the main public areas of the home spending time in the hallway and ground floor reception rooms, as well as the dining room.

We noted that most residents were very comfortable and familiar with the owner and called him by his first name. The Deputy Manager was very helpful during the time of our visit even though she was needed to take a resident to an appointment in hospital.

Staff

We were told that there were the following staff employed at the home;

- 25 Staff, all of whom have NVQ Level 2, manual handling and safeguarding
- 2 Staff are on duty at night and 2 are on call
- Kitchen/laundry/domestic staff

Staff Organisation

Staff work in shifts with work on the floor stopping half an hour before the end of the shift to give time to complete paperwork.

Shifts: 7.30am – 2.30pm– (3pm finish.) / 2.30pm – 10pm / 10pm – 8am

We heard that most staff love their jobs but, in common with many care homes, they can be unhappy with the comparatively low pay.

We noted that the staff member administering medication was wearing a tabard with 'Do Not Disturb; written across it.

There are always two members of staff on night shift and they have a system in place to call out the supervisor when needed.

Staff Training

The seniors have level 3 NVQ which puts them in a higher pay bracket, whereas the other mainly full time staff are paid above the minimum wage.

Holmewood reported a low turnover in staffing and cited their onsite training as one reason for this with visiting trainers helping to ensure high standards. 'Red Crier' is used for training both on site and externally.

Services

We were advised that if residents develop dementia they will be moved on, but that the same company has another home in Silloth especially for this purpose. We were also advised that there are no problems keeping those who are physically frail. Although respite care is available, there is not a specific room for this.

A minibus and a company car are available to support residents should they need to attend hospital and indeed such a visit was taking place during the visit. There is a policy to ensure that staff always accompany residents when they go to hospital.

The manager said that he and his staff go out of their way to promote mobility and were keen to ensure that residents were able to go out at any time. If transport was needed it would be provided.

Complaints come straight to staff and are noted in handover system. Specific concerns and any health and safety issues are recorded in residents' files and staff book.

In addition the home carries out annual friends and family feedback which is used to shape improvements.

Service Provision and Management Observations

Positive Observations
The staff member distributing medication was wearing a tabard with the message 'Do Not Disturb' on the back, allowing concentration on important task in hand.
The annual friends and family feedback system.

Improvement Observations/Considerations
We were told there was a comment's, feedback and compliments log but it appeared that complaints were dealt with in person.
Consider a combined recording system for comments, feedback and compliments from residents, family members and staff. This could inform further training and development for all of the staff.

Comments from staff and residents
<i>'Once we have completed our workload we aim to engage with residents'</i>

'Very happy, been at the home for several years, wouldn't change anything'

A new resident, 'they are very flexible about my needs and pace, I have been in hospital. I got rid of my Care Package after 3 days'

Three residents told us they had all had a good look around other homes before picking this one, they consider its money well spent.

Nutrition (meals and diet)

The cooks were dressed in white overalls, an apron and had their hair covered. The head cook informed us about the menus and said all special dietary requirements can be catered for and any resident can request snacks at any time and it would be no problem.

On the day we visited a new resident, who had just arrived the evening before, was having a late breakfast. The cooks in the kitchen had been happy to accommodate her late arrival and it was clear that if her eating pattern that day was out of sync with the rest of the home, then she would still be provided with all the same meal choices.

Nutrition – meals and diet observations

Positive Observations
There is a flexible approach to meal times and meal choices.
The dining room is a light and pleasant space.
Some residents use meals times as social occasion.

Improvement Observation/considerations
None.

Comments from staff, residents, and families
<i>'the cooks would make it for us, no problem'.</i>
<i>'I call this home my Savoy (hotel) and the food is spot on'.</i>
<i>'lunch was very nice and I like my nice quiet room'.</i>
<i>'Food is fine but not like at home'.</i>
<i>'The food is good and no one bothers us'.</i>

Exercise, Activities and Mobility

The Manager and staff organise activities for residents. Their entertainment programme is enjoyed by many residents and includes music for health, visiting entertainers, singing, and we were advised that two ladies go to play dominoes. A hairdresser comes in every Wednesday.

The home also provides religious services with in-house Communion taking place on the first Tuesday of every month. The denomination is rotated or, if preferred, communion can be performed privately in an individual's room.

Visitors are actively encouraged to come to the home and we were told of an annual Christmas party which is enjoyed by a very large number of residents and their friends and families.

When weather permits the company car can also be used for outings for small numbers of residents.

Gold Mark Clothing of Maryport is a company which supplies clothing suitable for the elderly and infirm, it visits the home from time to time with various clothing for residents to purchase. The home asks that all clothing is marked to ensure that residents always have their own clothes.

Podiatry services attend when needed

Exercise, Activities and Mobility Observations

Positive Observations
Annual Christmas party provides a good opportunity for residents, friends and family to socialise, and engage positively with the home.
Religious observance, for those who wish to do so.
Making clothes shopping easy.

Improvement Observations/Considerations
It was evident that activities are provided and the manager is actively involved in this.
Consider displaying a timetable/information board of activities to inform both residents and their visitors of what to expect. This could also be in easy read and pictorial guide.

Comments from staff, residents, and families
<i>'A hairdresser comes in every Wednesday, her charges are good'.</i>
<i>'Goldmark clothing come in with stylish clothes and we love this'.</i>
<i>'Entertainment is once a month, We went to Morecambe and St Bees on our days out in the summer, if we want to go to bingo in Cockermouth they will take us in the car. We have TV's provided in our rooms and a phone, the library comes into our home and I get talking books'.</i>

Personal Support and Choice

A strong theme of this home was the level of personal care provided. It was said to the team that 'Residents should treat the home as their own'. Residents are also encouraged to remain as independent as possible.

It was acknowledged that End of Life conversations can be daunting but the home has a policy to ask about preferences when residents arrive at the home. If required, palliative care is then delivered in-house. Residents are brought back from hospitals and the home works with Hospice at Home with the resident never being left unattended. We were told that the deceased resident can stay at the home for some time after death and have their funeral from the home. We heard that the home has hosted many funerals and that staff, fellow residents and families are pleased to be able to attend these otherwise sad occasions in the very familiar surroundings of the home.

Personal Support and Choice observations

Positive Observations
Good and sensitive End of Life Care, providing options to residents, family and friends.
Death and dying is dealt with positively.
Open and positive interactions between staff and residents.

Improvement Observations/Considerations
None.

Comments from residents, and families
<i>'The girls are angels, nothing is too much of a problem'.</i>
<i>'I like to be on my own, I only join the others at meal times, I have been here for 3 years, I am easy going but need my own space'.</i>
<i>'My mother had to be transferred to another home in Silloth because she had developed dementia. I have called to see the staff to thank them for the care my mother got from them, I live in Huston Texas and the staff kept me informed of my mother's condition by phone or email, I was very impressed. I would recommend this home to anyone, tonight I am taking Diane and Melanie out for dinner to say thanks'.</i>
<i>'Staff are very caring, she's (mother) getting difficult, been here a couple of years now. It's clean and warm here and you can visit anytime. We came to the Christmas party. They get her up and make her walk but let her stop in bed when she wants to. She has a bell to call staff they have been quick to</i>

respond. We are always told, in the office or called (by phone) if anything is amiss. Definitely recommend it to others, if it's still open in 30 years I'll come here'.

'I looked at other homes before picking this one, this one is more like home, all the staff do a great job. My children said I could come home now, but I am happy here – it's my home, I feel safe, I enjoy the entertainment and come to bed in a good mood. Christmas was a great event in our home with wine and beer and good food, all our families were invited. When one of our residents passes on (die) we give them a good send-off'.

Summary

Our overall impression was of a very well-run home with the residents and families reporting positively about their lives and experiences there. Where there were negative comments these related more to one off incidents. The staff and management at the home show good dedication to the home and its residents which is to be applauded.

Considerations in this report are designed to prompt some discussion about possible improvement activity which would be of benefit to staff, residents and families.

Healthwatch Cumbria would like to thank the staff, residents and visitors from Holmewood Residential Home who took part in this Enter & View visit.

What do you need to do now?

In line with the statutory regulations for this work, you now have 5 working days to respond to us if you feel that any aspects of this report are inaccurate. We have provided a response form to help you to do this. If we have not heard from you by 27 May, we will assume that you have accepted the report as an accurate record. If you have requested a change we will get back in touch to discuss this.

Once any changes have been agreed we will send a final version to you on 2 June. You then have 20 days to make a formal response to any of the issues raised in the report. **The deadline for responses is 27 June.**

Finally, we will be publishing all of the reports, together with the responses from each Care Home, and an overarching report summarising all the key findings on our website: www.healthwatchcumbria.co.uk

A copy of this report will be sent to CQC, Cumbria County Council, and any other organisation that requests it.

If you wish to discuss this report with a member of Healthwatch Cumbria please contact us on 01900 607208