



## Enter & View Report

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| Name of service:            | Colliers Croft Care Home               |
| Date & time:                | 15 <sup>th</sup> February 2017         |
| Authorised Representatives: | Judi Lunt, Kath Inkpen                 |
| Support team members:       | Janet Roberts                          |
| Contact details:            | Healthwatch St Helens<br>0300 111 0007 |

### Acknowledgements

Healthwatch St Helens would like to thank the staff and residents at Colliers Croft Residential Care Home for their valuable time and hospitality during this visit.

## **About the service**

Colliers Croft is a purpose built 3-storey Care Home in the Haydock area of St. Helens. It has been open for 3 years 6 months.

The building consists of 3 floors, (lift available) which could cater for 60 residents. Floor 1 and 2 were locked units (key-coded) and floor 3 was for residential needs, some with early onset dementia

## **Purpose of the visit**

- To engage with residents and staff
- To observe care at the point of delivery
- To identify good working practice
- To identify areas for improvement

This was a planned visit that was arranged after the Manager rang to enquire whether there was a way of responding to a comment made on a Healthwatch website from a neighbouring Borough. This was passed it on to Healthwatch St.Helens. She felt the comment was unjustified and welcomed the opportunity to show the standard of care being provided by inviting us to do an Enter and View visit.

## **Methods used**

The visiting team used observation through the senses and talking with staff and clients to get a general feel for the environment and care being delivered.

Conversations were had with a couple of residents to find out how they liked living in the home.

Discussions with the manager and staff explored issues including training, care for residents.

## **Summary of findings**

At the time of our visit the overall feeling was one where hypothetically we would be happy for a loved one to go in the home. It was welcoming and friendly with a family feel to the atmosphere. Everyone looked genuinely happy to be there. The place was warm, clean and calm, and was run by what appears to be a very well organised management system.

## **Results of visit**

### **First impression**

We were warmly greeted by the receptionist who asked us to sign in the Visitors book. The Manager and Care Manager also welcomed us and introductions were made.

The reception area was bright, light and well decorated, with lots of information on the display boards. Some pictures of recent events were displayed and there was a picture book with all of last year's events available for perusal. Staff and residents (where possible), raise funds not only for the Home, but also for events like Red Nose day, Children in Need etc. All 3 floors are a good state of repair, well-decorated, with the same flooring throughout, are light and bright with fabric chairs. There were lots of seating areas throughout the corridors.

We were taken up to the top floor where staff members, Alison and Kerry were only too happy to answer any questions that we asked. It was obvious from their responses that they seemed to know a lot about each individual resident, which the visiting team found pleasing to hear.

The team did observe that the signage from the car park to the reception was not clear and could present problems on dark evenings.

### **Staff**

There are 9 care staff, comprising of 1 deputy manager, 3 seniors, 5 care assistants, 2 chefs, 2 cleaners and dedicated laundry staff and volunteer visitor. Each resident has a key-worker.

There are currently two vacancies, but there is no facility for nursing care.

Staff seemed happy in their work and we observed lots of interaction with residents.

Staff turnover is low and some staff have been promoted within the company. Most staff, including the Manager have been at Colliers Croft since it opened 3 years ago. Some have left but then returned.

Training is undertaken in-house through e-learning and via training companies such as Willowbrook and St. Helens Chamber. There is a dedicated staff room with lots of information readily available.

15 senior carers have completed the 9 competencies required to give out medication and distance learning level 2 qualification

### **Recreation & Leisure**

Each floor had its own communal lounge, which is comfortable for both residents and visitors, a kitchen area where drinks could be made and tables set for meals as well as available tables for crafts etc.

Every area was well decorated, brightly coloured with homely furnishings and fabric chairs.

In the alcoves in the corridors there are comfortable chairs and bookcases, which were well-stocked with books and magazines, as well as memorabilia and photos of yesteryear displayed on the walls. Staff told us that many of the residents liked to sit here and chat.

Each floor has a beautifully decorated quiet room, where residents can take family members when they visits, have private chats, or take the opportunity to spend some time alone.

The care home arranges themed events for the residents, such as Christmas, Valentine's Day and Easter, when areas are decorated to suit the occasion. We were shown a scrapbook that records these events, to enable relatives to see the events taking place.

A local ice cream vendor attends all their fundraising activities and during the summer often gives each resident an ice cream.

Numerous activities are available and we observed a Zumba session during our visit.

Families are encouraged to visit at any time and to take meals with the residents if they wish and book in advance.

There is a hairdressing salon on the premises and a hairdresser comes in 3 times a week. Books and magazines are available in the salon area.

Culture and religion is catered for with 2 priests and a vicar visiting regularly. There is an Activities Organiser and residents are encouraged to join in.

Residents are allowed to have alcohol, which is usually in the evening.

### **Food & refreshments**

There is a dedicated cafe on floor 2, though each floor has a well-stocked mini kitchen with tea/coffee making facilities. Two resident chefs make all meals. Dietary needs and cultural needs are catered for, for example, if a resident requests halal meat, then that would be catered for.

There wasn't any display of menus and particularly on floors 1 and 2 there were no pictures of meals/ drinks. The manager informed us this was a work in progress and is intended to be in place as soon as they can be arranged.

### **Privacy & dignity**

Systems are in place to identify residents' dentures and clothing is labelled with their names.

There are areas on each floor where residents can have private time with their families.

We were invited into one resident's bedroom and observed that it was fully self-contained with its own fridge, personal belongings were displayed and the room had thermostatic under-floor heating. Each room has the occupant's photograph on the door outside.

Residents appear well cared for and staff appeared to make sure that they take time to speak to residents individually.

Dignity is very much a priority to staff and was acknowledged on the noticeboards.

### **Hygiene & cleanliness**

There was a staff room where staff could change into work clothes and a laundry room. Infection control checks are done regularly.

The team did not observe any hand gel dispensers but signs on the walls suggest a commitment to encouraging good hand hygiene.

### **Safety & security**

The external front door is locked but the ground floor inner door was key coded as is the 1st floor and second floor door. A lift services all three floors. There was added security of alarms if residents should go through any fire doors.

The top floor caters for those needing care, where floors one and two cater for those with dementia.

Access to the garden for residents with dementia is via doors leading off the dementia unit into the enclosed garden, or via a coded keypad into the residential gardens.

### **Medical care**

There are good links with local GPs, including Eldercare, district nurses, physiotherapy, pharmacists, dentists and chiropody service including private chiropodist if required. All therapists come into the home, but if a resident has an outside appointment, it can be arranged that staff from the home can accompany them but there is a charge for this.

## **Additional Comments**

Families are encouraged to visit at any time and to take meals with the residents if wished and booked.

There appears to be a lot of paperwork to complete, but all entries can be cross referenced and can be traced back.

There are all the expected policies in place including Whistle Blowing and Complaints. Each policy has a regular audit. There are regular links with the Quality Monitoring Team at the Local Authority in terms of safeguarding and quality care.

The visiting team were impressed that the home's policy is to be very open with relatives about any issues or mistakes that had been made. A training plan would be put into operation to ensure there is no reoccurrence. This suggests that staff are willing and ready to learn from any incidents that occur.

Regular meetings are organised for families of residents and surveys taken and acted upon. Relatives were catered for if a family member was approaching end of life, therefore every assistance would be made available.

On speaking to a couple of residents, they told us that they were cared for and felt safe.

Overall, a very nice establishment with caring staff.

## **Recommendations**

- **Signage from the car park directing to the main entrance being improved.**

The visiting team had to ask for direction to the main entrance of the building.

- **Coloured paper (preferably cream) with black print is used for notice boards and the print is made bigger.**

The visiting team felt that some of the signs became a 'sea of white'.

### **Additional questions**

- There were quite a few signs around asking hand sanitiser be used, but the visiting team couldn't recall seeing any dispensers.
- Who carries out the regular audit of policies?

### **Response from Provider**

*We have taken on board your findings regarding the car park signage and are arranging to have new signs erected signposting visitors to our reception.*

*With regards to the alcohol gel around the home, this is in situ outside each unit and also in reception, however it is in pump bottles and not dispensing units.*

*The audits are carried out monthly by the Care Manager and Deputy Managers and overseen by the Registered Manager. Policies and procedures are reviewed at least annually or when a change arises.*

### **Disclaimer**

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

It is important to note that Healthwatch St Helens approaches Enter & View from the community perspective and its remit is very different from organisations such as the Care Quality Commission and local authority Quality Monitoring Team.