



# Healthwatch Stockport Enter & View Report

Adult Social Care and Domiciliary care

# Place of care: Cherry Tree House, 167 Compstall Road, Romiley, Stockport. SK6 4JA

Thursday 20<sup>th</sup> February 2017.





## **Cherry Tree House,**

## 167 Compstall Road, Romiley, Stockport. SK6 4JA

2<sup>0th</sup>February 2017.

Report from: Healthwatch Stockport

Visiting Members: Gerry Wright, David Atkinson, Tony Johnson.

Report Date: July 2017

#### 1. Introduction

Cherry Tree House is a purpose built home and cares for 81 residents. The home was built in 2014 and is set on the main road between Marple and Romiley.

No. of [Resident/patient] Places: 81

Total no. of places: Cherry Tree House is registered to take 81 people

#### 2. Acknowledgments

Healthwatch Stockport would like to thank Pauline Parker - Moore, Manager and all staff and residents of Cherry Tree House for their assistance in the preparation of this report.

#### 3. Purpose of the visit

Healthwatch Stockport works with Stockport Metropolitan Borough Council (SMBC) to monitor the standard of care for Adult Social Care for Stockport residents. As part of this work programme, Healthwatch Stockport will visit care homes identified by the Care Quality Commission and SMBC whose care and working practices need to be improved. Cherry Tree House was last inspected (at the time of the visit) by the CQC on 23/11/16 and received a "Good" rating. The purpose Enter and View visit was to establish evidence that the service and care provided to residents was improving.





#### 4. Visit Plan and Schedule

Posters at Cherry Tree House had been displayed for two weeks prior to the visit so that residents, family and friends knew about the visit and could contact Healthwatch before, during or after the visit to give their views.

On the 20<sup>th</sup> February 2017 three Enter and View representatives (Gerry Wright, David Atkinson and Tony Johnson) from Healthwatch Stockport visited Cherry Tree House to speak to staff and residents about their views and experiences of Cherry Tree House.

Questions for residents related to the care that they received, the activities they did and enjoyed at Cherry Tree House and whether the care was suitable for their needs

Questions for staff related to the care they offered, the challenges they faced and keeping residents as independent as possible.

The Enter and View representatives also observed the arrangements for lunch time and had a Dignity in Care checklist during the visit.

#### **5 Findings**

#### 5.1. Initial Observations

Cherry Tree House is set back from the main road and has adequate parking for 30 cars. The building has 3 levels with pleasant outlooks and a garden on one side. There is a very welcoming reception having a smart hotel yet homely appeal to the home with receptionists and the necessary visitors' book to greet you. The Healthwatch Stockport Enter and View representatives were welcomed by Pauline Parker-Moore, the home manager. Pauline outlined that Cherry Tree House cared for the older person and also for residents requiring nursing and suffering from dementia. The 3 floors of the building were divided into 27 residents per floor and that the middle floor was specifically for residents with nursing and dementia needs.

#### 5.2. Observations during the visit

The Enter and View (E &V) representatives advised the Manager, Pauline, of the role of the Enter and View team and the theme of the questions whilst looking round the home. The E&V representatives asked if they could speak with residents, staff, and residents' families and friends. Pauline explained staffing levels of the home covering carers, nursing staff, catering staff, cleaners and laundry services, also the staff ratios during day and night shifts. She also highlighted the role of local GPs and the service they provide to the home.





The GPs - Dr Patel and Dr Chowdry, visit each week and also when required. They visit to examine the residents and provide necessary medical care.

As stated, there are 27 residents per floor, each is accessed by coded key with a reception hall on each floor with 2 lifts. Access to the residential area on each floor is also gained by coded key. Each floor has 27 single en-suite rooms which each resident can personalise themselves with small items of furniture, pictures etc. Each resident's door is numbered with their name and a memory box affixed to the side. On the middle floor, the doors are coloured to help residents with memory problems, the residents also have specialist beds to meet their needs, access, movement etc. Each floor has a TV lounge, library, general lounge, dining room and special purpose bathroom to meet disability needs. There is a very homely ambiance to each floor.

Dining - there is an extensive menu and all diets are adhered to. Meals are purchased frozen but cooked on site, residents are then served at their tables, and those who need help are assisted. Residents clothing is laundered, delivered to their rooms and put away for them. Residents must have name tags sewn in to their garments. There are many activities for the residents, in the form of one to one, communal, indoor and outdoor activities - which are all designed to provoke memories, provide stimulus, keep the body active, and give fun.

When speaking to residents they all gave the home glowing reports, all were happy with their decision to move into the home. The E & V representatives spoke to 8 residents in total.

When speaking to staff, many had been with the home for some time. Many stated the home had improved greatly since Pauline the manager had been appointed. They stated their work was taxing but rewarding and the residents in most cases were a pleasure to be with.

Whilst at the home, there were many visitors. We spoke to a few who were either family or friends. They found the home to be caring and homely. Many stated they were pleased to get their loved ones in to Cherry Tree House.

"Coming to Cherry Tree House has helped mum enormously. Where she was previously was making her worse, now she putting on weight and thriving." Family member of resident

Other family members who were visiting stated that if there were any problems they were listened to and addressed immediately. The team saw whole families arrive with children to visit residents and all were welcomed.

The E & V representatives concluded the tour by interviewing Pauline and her Deputy, Sue. They spoke of the training staff receive, this covered lifting and moving incapacitated residents to the six point end of life care. They have members of staff that attend train the trainer courses then can bring back training for the other staff at the home. Pauline pointed out how animated SMBC were with them in training course provision. Both Pauline and Sue were regular attendees of the





SMBC Care Home Forums. A real concern to the care home was the Ambulance service and hospital. When residents were taken to hospital, the home provide the care plans and medical information and any DNRs. When residents were returned, this information was always missing and would be returned later by taxi. This causes the home many problems, they have to bring in doctors to check and sign the relevant documents to put things back in to force. Ambulance staff will not take copies of paper work for residents - it's got to be official signed documents. Pauline pointed out that a closer working relationship between homes and hospitals would be beneficial to both parties.

Finally, Pauline was asked about accidents and near misses - both Pauline and Sue showed the representatives the records and documentation covering there occurrences. The representatives thanked them both on behalf of Healthwatch Stockport and concluded the visit.

#### 5.3. Conclusion

Progressive changes are being made to improve facilities and procedures at Cherry Tree House. New staff and management have brought a positive attitude to deliver change and standard of care given. People that live there and their family spoke about the improvements that have been made. All staff are now able to access further training to deliver quality care.

#### 6. Recommendations

- Monitor and assess the impact of the memory boxes so that their use can be shown to improve the recognition of residents. These results can then be published so that other care homes are encouraged to do the same
- Monitor the influence of the activities on the residents' wellbeing so that the impact can be highlighted and the good practice shared
- Residential care homes and Stockport Foundation Trust should draw up a Working Together protocol that would include procedures for sharing, providing and returning residents' paperwork including care plans and medical information





#### 7. Distribution

This report will be distributed to the following:

- [] Local Authority Quality Team
- [] Health and Wellbeing Board
- [] Health & Wellbeing Scrutiny Committee
- [] Adults and Housing Scrutiny Committee
- [] LA contracting department
- [] Safeguarding Board
- [] Clinical Commissioning Group commissioning Body
- [] Care Quality Commission
- [] Healthwatch England
- [] Voluntary Organisations [state which ones]
- [] Other [state which ones]
- [] Healthwatch Stockport website www.healthwatchstockport.co.uk





#### Appendix i - About Healthwatch Stockport

Healthwatch is an independent consumer champion created to gather and represent the views of the public. Healthwatch will play a role at both national and local level and will make sure that the views of the public and people who use services are taken into account.

Healthwatch Stockport is a membership organisation run by volunteers with an interest in health & social care.

They are supported by a team of staff to offer help to members carrying out activity on behalf of the organisation. Healthwatch Stockport is part of a network of other local Healthwatch organisations including Healthwatch England, a national body.

Healthwatch Stockport has been given powers in legislation to help them carry out their role. These include being able to:

- Enter & View places where publicly funded health and social care takes place;
- Promote and support local people to be involved in monitoring, commissioning and provision of local care services;
- Obtain local people's views about their needs for and experience of local care services;
- Tell agencies involved in the commissioning, provision and scrutiny of care services about these views;
- Produce reports and make recommendations about how local health and care services could or should be improved;
- Have a seat on the local authority statutory Health & Wellbeing Board where they are an important contributor to the local work on reducing health inequalities;
- Help Healthwatch England carry out its role as national champion by telling it about the views and experiences of local people;

[Ends]