

## Enter & View Residential Care Report

# Woodleigh Manor Residential Care Home

Woodfield lane, Hessle, East Yorkshire HU13 0EW

Date of visit: 13<sup>th</sup> November 2017

Date of publication: 10/1/18

HWERY Representatives: Denise Lester & Pam Wakelam

**Disclaimer:** This report relates only to the service viewed on the date of the visit and is representative of the views of the service users who contributed to the report on that date.

## Main Purpose of Visit

This visit was part of a Healthwatch East Riding programme to carry out a required number of Enter & View visits per year to collect the views of people whilst they are directly using services. This will then contribute to its remit of helping ensure that the views and feedback from patients and carers are an integral part of local commissioning across health and social care.

It is important to note that Enter & View is not an inspection; it is a genuine opportunity to build positive relationships with local Health & Social Care providers, provide opportunity to demonstrate that providers support service user engagement and give service users the opportunity to give their views in order to improve service delivery.

## Summary of Key Findings

Woodleigh Manor is a privately owned, family run residential care home situated in a quiet residential area within its own grounds. It is a high dependency care home providing accommodation and assistance with personal care for older people, including those with dementia related conditions. Most residents are long term, many having transferred from other homes where their needs have been difficult to meet. 34 beds are available with 32 of them currently occupied. Most people have a single bedroom and some bedrooms have en-suite facilities.

The home is well-staffed. There is a very low turnover rate amongst staff. Several including the manager have been in post for over 18 years. The manager is impressive in her knowledge, enthusiasm and compassion. Her philosophy is to allow the residents to “live within their own reality”; comments made on the day support this philosophy.

## Recommendations/Observations

- Improve external signage which is unclear as the home is not easy to find.
- As part of the proposed renovations for the garden, ensure that the garden is made secure for residents as per the plans that are in place.



# Full Report

## Background

Local Healthwatch has a number of specific statutory activities that it is required to deliver, defined in five Healthwatch Quality Statements, specifically

- Strategic Context & Relationships
- Community Voice & Influence
- Making a Difference Locally
- Informing People
- Relationship with Healthwatch England

Within the context of Enter & View:

Under its remit of 'Community Voice & Influence', Healthwatch has a responsibility to support local people to share their experience and opinions of local services.

Under its remit of 'Making a Difference Locally', Healthwatch has a responsibility to capture the experience of local people in our research and reports, use the opinions and experiences of the public to produce recommendations for change and ensure our recommendations for change are heard and responded to by relevant decision makers.

Under its remit of 'Informing People', Healthwatch has a responsibility to ensure that we provide the public with accurate, reliable, relevant and useful information about local services, when they need it, in a format that meets their needs.

## Main Findings

### How safe is the setting for service users?

The atmosphere is that of a comfortably warm home, although there is a slight smell of urine in some areas. The home are working with a specialist cleaning company who supply products and training for staff as well as advice and products required for infection control.

Although there is a rolling and responsive maintenance programme the building suffers somewhat from being old. The decor could be brighter and more modern. There is a pleasant garden area which is not at present secure. Plans are in place, however to renovate the garden area and make it safe and secure for residents' use.

There are good levels of food hygiene, the home having a food hygiene rating of 5.

Some areas of the building are not accessible to residents. These areas as well as the outside door are secured with coded locks and all of the bedrooms are fitted with a call system.

Medicines are stored, documented and distributed as per legislation. We saw that all medicines are kept in a safe and secure environment and were told that staff have received appropriate training.

### How effective do service users consider the service to be?

Residents have access to all of the services they need. A district nurse visits twice each day, and other healthcare professionals - optician, dentist and podiatrist make regular visits, and also according to need. Residents are registered with the local GP practice from which the home receives weekly visits. The local falls team is well used. Moving and handling equipment including a bariatric hoist is in place. Fixtures and fittings promote independence. We saw that dado rails are being painted in red as residents are able to follow these so as not to get lost.

Residents are weighed every 4 weeks and more often if necessary. A varied menu is offered. Ingredients are sourced from local suppliers, meat from a butcher in Hessle and fish from Grimsby. Lunch is the main meal of the day and a hot and cold buffet is offered at teatime. The home has recently achieved the silver Nutrition Mission award which included working with a community dietician to introduce strategies to promote a higher calorie intake where required. Meals can be eaten wherever a resident wishes. We saw evidence that residents are supported to eat if necessary and relatives are encouraged to help with this.

It was evident that staff communicate effectively with residents encouraging them to make their own choices as appropriate.

### **How caring do service users find the service?**

Relatives are involved in writing residents' care plans; these are reviewed every 4 weeks. Named key workers were tried but found to be of no benefit. As an alternative a team of 5 or 6 carers are responsible for each resident.

End of life plans are recognised as an important part of care. They are commenced on arrival if appropriate otherwise introduced as required.

It is recognised that the new 'Respect Protocol' now includes 'Do Not Resuscitate (DNR)' issues. The manager has been proactive and obtained a training manual for this.

There are both full time and part time activities coordinators in post and residents are offered a wide range of activities and social events including trips out. A hairdressing service is also available. We saw evidence of the many activities offered. As we arrived a game of Boccia was in progress. The Boccia team are very proud of their success in a local care home league. A local vicar and a catholic priest also make regular visits.

Mostly residents have their own rooms although some choose to share. They are encouraged to personalise their rooms with their own possessions.

None of the residents hold their own money. The home pays for any services and invoices relatives appropriately.

On the day of our visit we observed positive interactions between residents, staff and relatives. We were told by relatives that the staff are caring and compassionate. One lady described Woodleigh Manor as "the very best place in the whole world". Another lady who had brought her husband to Woodleigh Manor from Goole because it was so highly recommended said that it is "unbelievable, marvellous". Both of these ladies visited every day and commented on how they felt like part of the Woodleigh family.

### **How responsive to their needs do service users find the service?**

The staff demonstrate considerable flexibility in meeting the fluctuating needs of the residents. One relative we spoke with said that one of the strengths of the home is that "people are treated according to need, there is no such thing as they, individual needs are very important".

The home employs a support worker whose main role is to speak and liaise with families regarding any concerns they may have. Relatives meetings are held in small groups and the findings combined.

A robust complaints procedure is in place and notices displayed to describe the procedure.

Respite care can be offered when a room is available but it is not possible to book in advance.

Regular quality assurance audits are carried out. Newington pharmacy audit medicines, Health and Safety is audited as part of the insurance and the care home company arrange other quality assurance audits.

### How well-led do service users consider the service to be?

We had a tour of the premises and discussions with the manager, two visiting relatives and a specialist support worker from the Community Mental Health Team. We were also given questionnaires which had been completed by relatives and staff.

Relatives, staff and the specialist support worker we spoke with told us that the home is managed by a caring, enthusiastic and skilled manager, who encouraged staff and led by example. One relative told us that the manager is “exceptional”. Staff in their questionnaires all said how much they enjoyed working at Woodleigh Manor, that they supported each other and were like a family.

There are 17 full time care staff and 4 part time care staff. The manager is also supported by an assistant manager, 2 full time maintenance staff, 2 domestics, a cook and kitchen assistant and full time and part time activities coordinators. Staff have access to all the required training plus regular updates. The manager is very aware of new developments and requirements.

#### **Response from Setting:**

*The home has offered no response to the report (3rd January 2018).*

Signed on behalf of HWERY	<i>Matthew Fawcett</i>	Date: 10/1/18
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## Woodleigh Manor Residential Care Home Re-visit Report

Date of first visit: 13<sup>th</sup> November 2017  
Date of re-visit: 30<sup>th</sup> January 2019

Date of publication: 20<sup>th</sup> February 2019

HWERY Representative: Chris Mills

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### Main Purpose of Visit

Healthwatch East Riding conducted an Enter & View visit at Woodleigh Manor within the last twelve months. From the visit Healthwatch would make a series of recommendations to help drive improvement based on service user feedback.

COMPLETE	PROGRESS HAS BEEN MADE	NOT STARTED
Recommendation		Progress
Improve external signage which is unclear as the home is not easy to find		N/A
As part of the proposed renovations for the garden, ensure that the garden is made secure for residents as per the plans that are in place		

### Summary of Key Findings & Progress towards Recommendations

The home enquired about putting a sign in place to improve external visibility, however highways denied permission to have anything on the main road and the neighbouring building also denied approval to have anything on the outside of their premises, making it impossible to make the home easier to find with external signage. The planned work to the garden has been completed and a green iron fence is in place around the perimeter of the garden ensuring it is secure.

### Impact and Additional Observations

As well as the works to the garden being complete, the home have also ordered a wheelchair ramp that will give additional access to the garden from the dining room via a set of French doors. Fundraising by staff has also taken place to purchase an outdoor shed for the use of residents who smoke and will have shelter once purchased. The home are employing someone from Cottingham work link to come and landscape the garden and make it more interactive for residents ready for the warmer weather.

The home also has plans to renovate the home in a lot of areas. Meetings took place with residents and relatives to help make decisions on the changes to the home. The plan will take 6 months to complete with work already started in some areas. The plan includes; new washing machines, a new cooker, new flooring throughout, communal areas improved, ongoing work to decorate all bedrooms and new display boxes on the walls outside bedrooms for resident to display personal items and aid in identifying their rooms.

One of the younger residents has volunteered to be the homes 'meet and greet' representative. She welcomes visitors into the home, asks them to sign in and makes them a drink if wanted. This shows that the home promote independence and are happy to give ownership of this task to the resident.

Signed: *M. Harvey*

Date: 20/02/19