# Enter and View Report

## **Cherry Lodge Rest Home**

April 2018



## Contents

Contents				
1		Introduction	3	
	1.1	Details of visit	3	
	1.2	Acknowledgements	3	
	1.3	Disclaimer	3	
2		What is Enter and View?	4	
	2.1	Purpose of Visit	4	
	2.2	Strategic drivers	4	
	2.3	Methodology	5	
3		Findings	5	
	3.1	Summary of findings	5	
	3.2	Results of visit	6	
	3.3	Recommendations	8	
	3.4	Service provider response	8	



## 1 Introduction

## 1.1 Details of visit

etails of visit:			
Service Address	75 Whyteleafe Road, Caterham, CR3 5EJ		
Service Provider	Mrs C M Callender		
Date and Time	Monday 19 <sup>th</sup> February 2018, 10:00-13:00		
Authorised Representatives	Mary Probert, Jane Owens, Jacquie Pond		
Contact	Healthwatch Surrey, Astolat, Coniers Way, Burpham, Surrey, GU4 7HL Tel: 0303 303 0023		

### 1.2 Acknowledgements

Healthwatch Surrey would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme.

### 1.3 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.



## 2 What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. 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 - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.

### 2.1 Purpose of Visit

- To find out to what extent mealtimes at the care homes visited are personcentred, ensuring dignity and respect
- To capture the views and experiences of residents and visitors in relation to mealtimes, accessing food and drink, and experiences of the home in general
- To observe residents and visitors engaging with staff and their surroundings
- To identify examples of good practice.

## 2.2 Strategic drivers

• This Enter and View visit was carried out as part of a wider project by Healthwatch Surrey into person-centred care in Surrey care homes - focusing on supporting choice, dignity and adequate access to food and drink at mealtimes and throughout the day.



• 'Amplifying the voice of care home residents' is a Healthwatch Surrey priority for 2017/18.

## 2.3 Methodology

Visits were announced in advance and home managers received notification by post. Prior to the visit the home manager was contacted by telephone by the visit lead to discuss the visit further, and to ascertain the layout of the home and an estimate of how many residents would be able to give consent to participate.

Staff provided guidance to the visit team about who was appropriate to approach to interview. The purpose of the visit, the role of Healthwatch Surrey, and the way in which information would be used was explained to those spoken to in order that they could provide informed consent.

Information was gathered by using semi-structured interview questions and observation in combination. Separate question schedules were developed for residents, staff and visitors based on guidelines from the Social Care Institute of Excellence and comments from contacts working in Adult Social Care. Questions were open ended, designed to be administered flexibly and in a conversational style. Information was recorded using written notes which were collected in by the visit lead at the end of the visit. The visit team used a checklist to record and comment on observations around the home and over lunchtime.

The visit concluded with a team debrief where comments, compliments and concerns were highlighted. The home manager was given opportunity to comment on the draft report prior to finalisation.

## 3 Findings

### 3.1 Summary of findings

- The dining area was clean, light and well laid out;
- Staff appeared to be attentive and were seen to assist residents with their meals;
- Residents and visitors told us that the staff are kind and caring;
- Residents told us that they have a choice of meals and can ask for alternatives;
- The menu was displayed on a chalk board which was difficult to read.



#### 3.2 Results of visit

The home had 19 residents at the time of the visit. The senior staff showed representatives to the communal and dining areas of the home. The Healthwatch Surrey visit notice was clearly displayed along with the CQC rating.

#### **Staff Comments**

The manager and owner of the home was available to speak with during the visit and explained that the chef was unwell and therefore the deputy manager would be preparing the lunchtime meal.

#### Person-centred care

Staff told us that each resident has a care plan and that this is regularly updated. Family members and residents are encouraged to communicate their likes and dislikes, including their food preferences, and a note is made of these. We were also told that the home encourages feedback and input into the menu.

Staff told us that they get to know the residents, and make sure that they give enough support to members of agency staff if they are at the home so that residents' needs are met. The manager gave examples of where residents had been supported to follow their own interests, for example two residents were assisted to attend a remembrance ceremony.

We were told that there is always a hot and a cold option for main meals on the menu, and residents are asked what they would like approximately two hours before the meal so that food can be prepared. We were also told that a number of alternatives are available, such as omelettes and sandwiches, and that the staff can cater to last minute requests if people change their minds about the main meal.

#### Encouraging food and drink

The staff we spoke to explained that drinking enough is important and told us that they offer drinks round regularly. One member of staff explained that some of the residents forget to drink or need some encouragement and said that staff will sit with residents and drink with them to encourage and prompt: "I'll sit and have a drink with them and prompt them".

We were told that there is always available in between meals for residents who would like a snack, however fruit is kept in the fridge, so residents ask staff if they would like some. Staff told us that relatives also bring in snack foods for residents to eat, and the home is happy to accommodate this.

One member of staff explained that some residents are on a special, softer diet and said that is can be difficult to make puree food look appetizing but that they try to make it look as nice as possible.



#### **Resident and Visitor Comments**

We were able to speak to nine residents and one visitor during the visit.

#### Kind and caring staff

Residents told us that they felt cared for and well looked after at the home, describing staff as kind and friendly and explaining "we have a laugh". A visitor told us "My relative is well cared for here - always clean, well dressed and happy".

Residents told us that the staff know what they like and don't like, and a visitor told us that their relative has a list of likes and dislikes in their room which gets updated regularly by staff.

#### Mealtimes

Residents told us that, on the whole, they are satisfied with mealtimes and the food and drink on offer.

One resident told us "I'm always being offered cups of tea" and a visitor commented that there are always drinks available. Residents gave examples of choices within the home, telling us that they can eat in their rooms if they prefer, and another said "They [staff] always tell you what the different choices are" for mealtimes.

We heard from residents that "the food is tasty" and the home has "very nice lunchtimes". However, a couple of residents said that they would like more choice; one resident said "It's sometimes a bit monotonous" and another told us "It's not really what I like, it's what I can have".

We were told that staff are available to assist with mealtimes, and one resident said that staff help with cutting up food into smaller pieces.

#### **Observation of Lunchtime**

We observed half an hour over lunchtime.

The dining room appeared to be clean, with tables well laid and enough space for residents to move around. Staff appeared to be on hand to assist residents and it was noted that the lunchtime atmosphere was 'calm'. Residents seemed to be happy and were engaging in conversation with staff.

There was a menu on a chalkboard showing the options available, however no additional formats were available, and volunteers observed that some residents might find this difficult to read.

Residents were offered water at the table and were served their choice of main meal (as selected two hours prior to the meal). The food seemed well presented, including the pureed option.



Staff were observed assisting residents to be seated in the dining room and offering to cut up food into smaller pieces while the chef plated up and served food to the residents.

#### Additional observations

Two televisions were on at a very loud volume during the visit in the lead up to lunchtime, one showing multiple episodes of The Jeremy Kyle show and another the Olympics. It was commented by volunteers that alternative programmes may be more appropriate for the residents and could encourage reminiscence, however this is speculative. One resident told us "I like some programmes but not when they're on all the time".

### 3.3 Recommendations

Surrey County Council (the commissioner) and the Care Quality Commission should consider these findings and take action accordingly.

The findings of this report will be considered alongside the findings from the additional 19 homes included in this programme of visits; a full report of themes and findings will be produced spring 2018.

### 3.4 Service provider response

There is now a paper large print menu available in the dining room for the convenience of the residents. Menus are revised each month with resident's input as to what they would like to see on the menus.

Cherry Lodge promotes choice for the residents. The lounge area offers two televisions to accommodate different choices of viewing. Each bedroom has the facility for a television. For those who do not wish to watch television there is a separate area offering magazines and music.

Cherie Callender, Home Manager

