



Enter and View Report

Care Homes - Etheldred House

Service Address: Clay Street, Histon, Cambridge, CB24 9EY.
Service Provider: Excelcare Holdings
Date and Time: Thursday 10th September at 10:30am
Authorised representatives: Ann Redshaw, Jane Garside, Maria Garner, Rosemary Lawrance and Kate Hales



Acknowledgement

Healthwatch Cambridgeshire would like to thank the residents and staff at Etheldred House who spent time talking to us about their experiences of living at the home or having family staying at the home.

Thank you also to the Manager of the home for helping us to arrange the visit and providing relevant information that we asked for.

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. This report relates to findings observed on Thursday 10th September 2015 at 10:30am.

The visit also takes into consideration the fact that some of the residents spoken to will have a long term illness or disability, including dementia, which will have an impact on the information that is provided.

We recognise that providers are often able to respond to us about any issues raised and we will include all responses in the final report.



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Introduction and methodology

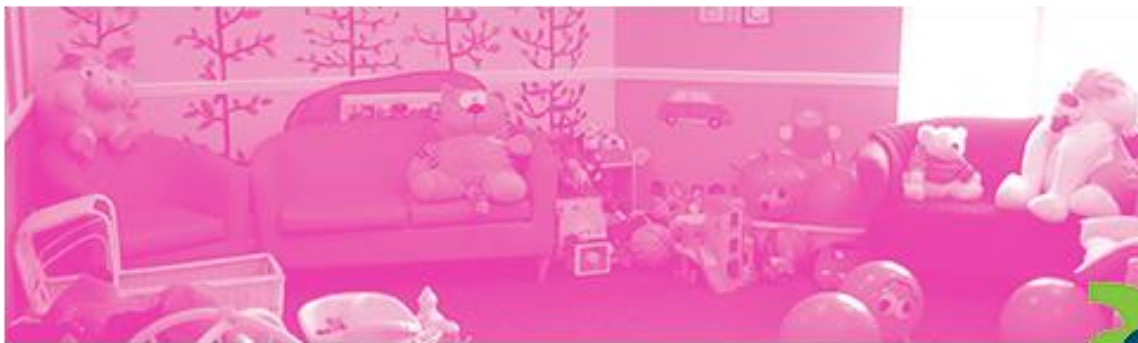
What is Enter and View?

Part of Healthwatch Cambridgeshire's work programme is to carry out Enter and View visits to health and social care services, to see and hear how people experience care. The visits are carried out by our authorised representatives. We can make recommendations or suggest ideas where we see 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. 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.



Our Care Home project

Healthwatch Cambridgeshire made the decision to undertake a programme of enter and view visits to local care homes in spring-summer 2015.

Our visits are intended to:

- Find out what daily life is like in a care home in Cambridgeshire.
- Gather the opinions and experiences of residents, relatives/friends and staff.
- Raise awareness of the role of Healthwatch.
- Build relationships to enable those voices not often heard, to have a say about the health and care services that they receive.

Enter and view visits will also highlight (if applicable) what the team think are 'good ideas'. This will be collated and shared with all the care homes we have visited at a later date.

The care homes to be visited are selected based upon a number of factors which include geographical spread across the county. Where possible we will make sure the visit does not conflict with other visits such as planned Care Quality Commission Inspections or visits by the local authority.

Following each visit a report will be produced and this will form part of a summary report highlighting good ideas and issues around access to health and care services.

Purpose of the visit

The purpose of the visit is to find out what daily life is like for residents at the care home. We observe day to day life in the care home and talk to residents, relatives, staff and other visitors, to collect their experiences and opinions.

- We look at how residents are supported to make choices about their daily life, for example making mealtime choices or what to wear.
- We watch how staff interact with residents and other people in the care home.
- We find out what activities are available for residents at the home and in the community.
- We ask people what they think about the range and quality of their food.
- We find out how easy it is for residents to access local health and care services, for example GP, Dentist, Optician and Chiropody.



- We collate examples of good ideas and report on any issues or concerns that are raised.
- We talk to people about their experiences of living in the home, and any ideas they have for change.
- We tell people about Healthwatch Cambridgeshire and what we do.

Announced visit

This was an announced Enter and View visit. It was undertaken by a team of five authorised Enter and View representatives, including one Healthwatch staff member and four volunteers. It lasted approximately two hours. We wrote to the home explaining the purpose of the visit and inviting them to take part in our Care Home Project.

Confirmation included advising the names of those who would be taking part in the visit. Posters with details of the visit and Healthwatch contact information together with leaflets for display prior to the visit were sent to the home the week before.

The visit was informal and involved a combination of observations and talking to residents, visiting relatives and staff; all findings were logged. We were given a tour of the home and invited to walk around without an escort.

A large proportion of the visit was observational, involving the authorised representatives walking around the public areas and observing the surroundings to gain an understanding of how the home works and to get a feel for the general environment.

Notebooks and questionnaires were used to record the information gathered.

The Enter and View team spoke with the Manager, who provided detailed information about the home and answered any queries raised.

Information was also given out about Healthwatch Cambridgeshire to residents, and the home was given copies of the latest Newsletter, Information and Signposting bookmark, leaflets and posters to display in the reception area. To keep in touch with Healthwatch the Manager signed up to receive both our newsletters.



Etheldred House

Etheldred House is a purpose built two storey care home that provides residential, nursing and dementia care. The home is registered to provide care for older people and people with dementia, specialising in complex needs.

The home has one of the few Butterfly Service 'Quality of life national awards' for providing dementia care and the certificate is displayed in the reception area. At the time of our visit the inspection for this award was taking place.

There is car parking along the front side of the home and a large turning area at the main entrance for emergency vehicles.

The home is privately run and has 82 single rooms. These can accommodate double beds on request and all have en-suites (wet rooms). Some of these are funded by Adult Social Care, Cambridgeshire County Council. On the day of our visit there were 82 men and women living at the home.

The main entrance was unlocked and leads into a large open reception area, which was staffed at the time of our visit. This was light and bright with a staff office to the side, residents' shop and lounge area with sofas, chairs and low tables. Access from this area to the home was through electronic locked doors. Local information, complaints policy and home details was on display. All visitors are asked to sign in before going into the main parts of the home.



Residents' Shop



Summary of findings

- The home was welcoming and friendly. It appeared clean and well maintained.
- At the time of our visit, we observed the home operating to a high standard of care with regard to daily life and the care of residents.
- The residents told us they were able to make decisions about what they liked to eat, what they wanted to wear and what daily activities they liked to take part in.
- Residents appeared comfortable, clean and content.
- Staff were observed to be positive, respectful, kind and friendly with residents.
- We saw evidence that told us that the residents have access to a variety of social activities.



The Findings

Accommodation and environment

The main part of the home is arranged into four areas; Pear and Strawberry on the ground floor providing dementia care, and Apple and Cherry on the first floor providing residential, end of life care and nursing care.

The Manager told us that they had recently had a Fire Safety Inspection and a lot of the ornaments, pictures and pieces of furniture had been removed.

We were told that residents are encouraged to bring personal items to help settle them into their new home. The rooms are a good size and are light, airy and feature their name, photograph and a memory box. Some of the rooms can accommodate double beds. Door bells are featured around the home and can be used when moving from one area to another.

The four areas are self contained units on each floor and have a lounge, dining room, kitchenette and bathing facilities. The coffee shop, hairdresser, café and a large colourful children's playroom are located on the ground floor, whilst the prayer/church room and cinema are on the first floor.



Children's Play room



Noticeboards are featured in all the areas, details of menus and activities were displayed.

We found the home clean and tidy, though we noticed a strong odour near the stairwell as we approached Strawberry. The Manager explained that a resident had just had an accident and that they are being encouraged that the radiators in the hallway were not toilets.

We noted quiet rooms with seating, one of which had lots of books, magazines, newspapers and videos. One of these had a television and video recorder.

The hallways were colourful and featured many different scenes, including tactile, pictures, words and plants.



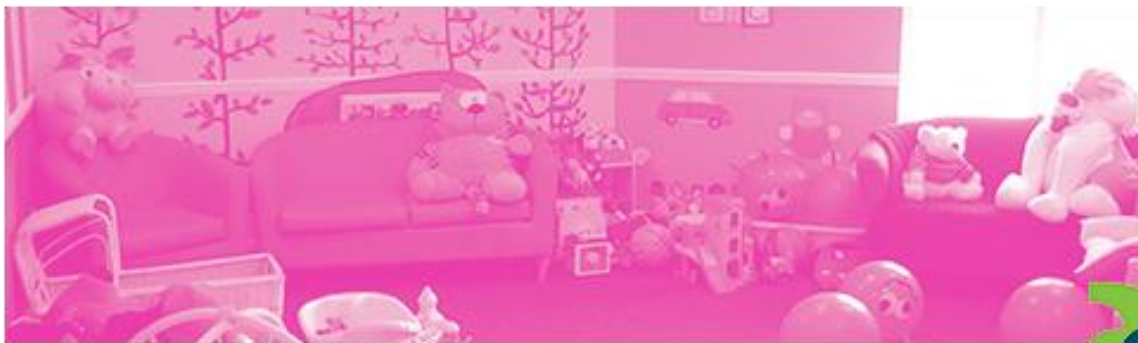
Garden on a wall

Activities

The home has two full time Activity Staff who with input from the residents run a varied programme including outings twice a month to local garden centres, towns and village facilities such as supermarket, public houses, library and church on Sundays.

The Manager told us *“These outings are decided by the people living at Etheldred House”*.

The activities programme enables the residents to socialise and chat with each other and these activities include singing and music. Crafts such as painting, mosiac art and card making take place.



Some of the mosaic art that the residents created was displayed on the walls in the hallways.



Mosaic Art

We saw staff singing and dancing, laughing and having fun with residents. Knitting and reading were also taking place during our visit.

There is a chicken coop in one of the enclosed rear gardens. The Manager told us

“The chickens were originally bought for a resident, who had been a farmer and they used to get up very early in the morning to collect the eggs and bring the milk in”.

“Before we had the chicken coop milk churns and extra eggs were placed in the garden area for the resident to collect and take to the kitchen and then go back to their room”.

“A resident who was formerly a Policeman was given ‘security checks’ to carry out around the home and report back to the Manager”.

Family members bring their pets to visit and whilst we were there, two dogs had just arrived to visit with the residents. The Manager also has a dog who is in residence most days.

There is a hairdresser service which the the residents can use.

There is a cinema room which shows two films per day and the residents say what kind of films they want to watch. We were told that popcorn and refreshments are provided.



Cinema Room

The home has built strong links with the local college and the students visit the home regularly to sit, read and paint with the residents. Children from the local primary school come to visit at Christmas time to sing carols for the residents.

The home facilitates work experience for the colleges in Cambridgeshire including the Princes Trust and this enables students to experience working in a health and social care setting.

Resident meetings take place once a month and relative meetings are every three months. The meetings are flexible and fit around the preferences of the individual resident and relative. We were told by the Manager that *“the residents have good relationships and care about each other and will speak up for each other at the meetings”*.

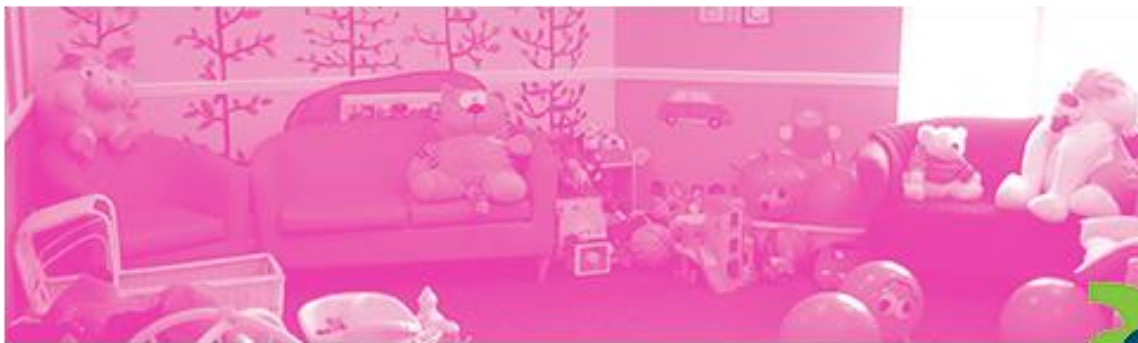
Residents told us

“We go to the local library”

“Can have a smoke and sit in the garden”

“Like to sing”

“Like to be in the garden”



Catering

The menu is on a four weekly cycle. We were told the Chef chats with the residents at their meetings to find out what they would like to eat.

There are set meal times. These are taken in the dining room areas where residents are encouraged to come together and socialise. The Manager told us residents can request to eat somewhere other than the dining room and they do accommodate this when they can.

Snacks such as biscuits, fruit and refreshments are available at all times and the tables are refreshed frequently throughout the day.

We saw cups and saucers being used for morning tea by some residents and were told that this was their preference.

Residents told us

“I am fussy about food, but if I find it good, it can’t be bad”

“Chef made a lovely cake in the shape of a house”

“Food good, if not I would just let them know”

“Lots of choice, can eat what I want”

“Food a bit predictable”

“Can eat when I want, meals are flexible”

Care and help

The Manager told us that assessments are carried out for potential new residents prior to admission to the home, to make sure a person’s needs can be met.

It was highlighted that the home specialises in supporting and caring for people with complex needs. The home ensures their Staff are given the opportunities and encouragement to undertake specialised training to provide these levels of support



and care to the residents and their families. For example, helping a family through a bereavement.

The Manager told us *“small things make the difference”*.

The residents’ clothes are labelled. Dirty clothing is picked up everyday and returned the same day. To avoid mix-ups, each unit in the home has its own labelled clothes rail and trolley with individual boxes for each resident in the laundry room.

Residents told us

“I am happy here, get on with everyone”

“Can get up when I want”

“I like it here”

Staff attitudes

We watched staff interacting with residents, singing, dancing, reading, knitting and chatting. Staff were polite, respectful, caring and friendly and were taking the time to be with the resident.

We saw residents greeting staff, smiling and chatting, pleased to see them.

The Manager told us that the home’s ethos is *“person centred care - what is important to that person. We take people who come here to die and we make this as comfortable as possible”*.

“We encourage the residents to live not just exist”.

Residents told us

“Nice team and the manager is very approachable”

“Next best thing to being at home”



“Staff are friendly”

“Girls make a fuss of me”

“Staff are good, very caring”

“They are very flexible and help me”

“Very impressed, they are really good and help me all the time”

Staff told us

“It is their home”

“The Manager is always around, has an open door and will try and fix anything and help where she can”

Carers and Relatives

We were able to chat with a relative during our visit. The Manager told us that visitors are welcomed and encouraged by the home. Meetings are held with relatives and families every three months to discuss care needs.

Relative told us

“We visit as much as possible, it’s a home from home”

“Staff are very flexible and supportive”

Access to health and care services

The Manager told us that the home’s access to medical care was *“brilliant”*. The local GP Surgery ‘Firs House’ has a doctor who visits every day. Monthly meetings are held with healthcare professionals to discuss any issues or concerns.

Access to dental and opticians services are available locally, we were told these were arranged when required.



Residents told us

“The medical care is really good, the staff arranged my physio and are helping me with the programme”

Good Ideas

- Memory boxes that hold memorabilia and reminders for the residents of who they are. These also help staff know more about a resident.
- Large clocks placed in all areas to help residents know the time of day.
- Holding monthly meetings with healthcare professionals to discuss issues that arise.
- Helping residents to live and not exist, for example, creating security checks for a retired police officer and installing a chicken coop. Finding out everything about dementia residents’ history to help them cope with life in the home.
- Garden on a wall. Making it accessible for residents to garden inside the home and care for the plants they want to grow.



Ideas to take forward

1. We ask all of the care homes we visit to help us promote residents' opportunities to feedback on their local health and care services by displaying Healthwatch Cambridgeshire literature in their home.
2. We were impressed with the level of care and how smoothly person centred care was delivered. We think the sharing of expertise in person centred care with other care homes would be of benefit to all, as the Manager told us "*letting the residents live and not just exist*" is a good ethos to follow.

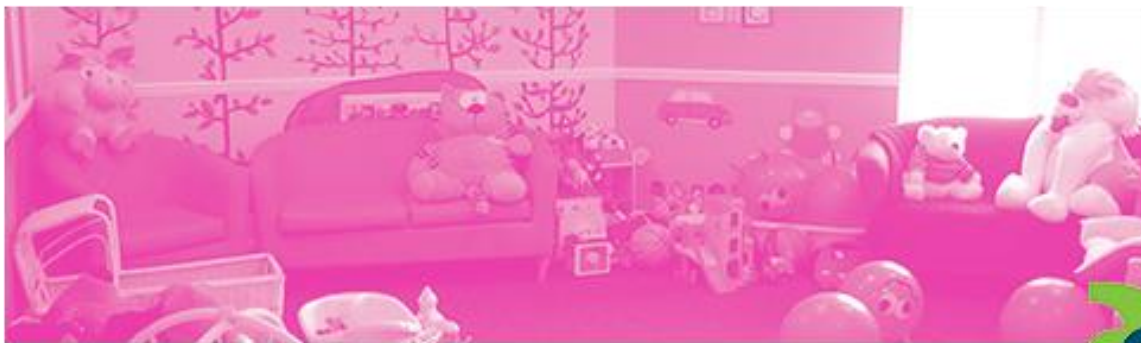


Response to the report from Etheldred House

The staff and Management of Etheldred House would like to take this opportunity to thank Healthwatch Cambridgeshire for the positive visit and report. From our point of view the visit went well but on discussing the day with staff and people living here we found that some of the visitors from Healthwatch could have benefitted from a better understanding of dementia. This may have helped the way they communicated with people and the level of dignity and respect could have been improved in some instances.

We were pleased that you were impressed with the level of care and how smoothly person centred care was delivered. We already share the expertise in person centred care with other care homes and people regularly when we attend and speak at seminars and training days or hold our own training sessions in the House. We are asked to speak with Dementia Care Matters experts and have people sent to our House from them to share our expertise with.





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