



healthwatch

**Blackburn with Darwen
Hawkhurst Care Centre**

BB1 8AZ

Enter and View Report

Tuesday 01st February 2022



DISCLAIMER

This report relates to the service viewed at the time of the visit and is only representative of the views of the staff, visitors and residents who met members of the Enter and View team on that date.

Contact Details:

18 Shear Bank Rd
Blackburn
BB1 8AZ

Staff met during our visit:

Jenny Swimby (Interim manager)

Date and time of our visit:

Tuesday 01st February 2022 10.30 am

Healthwatch Blackburn with Darwen
Representatives

Michele Chapman (Lead)
Liz Butterworth (Volunteer)
Trish Whalley (Volunteer)



Introduction

This was an announced Enter and View visit undertaken by authorised representatives from Healthwatch Blackburn with Darwen who have the authority to enter health and social care premises, announced or unannounced, to observe and assess the nature and quality of services and obtain the view of those people using the services. The representatives observe and speak to residents in communal areas only. On this occasion a lunchtime observation was undertaken.

This visit was arranged as part of Healthwatch Blackburn with Darwen's Enter and View programme. The aim is to observe services, consider how services may be improved and disseminate good practice. The team of trained Enter and View authorised representatives record their observations along with feedback from residents, staff and, where possible, resident's families or friends.

A report is sent to the manager of the facility for validation of the facts. Any response from the manager is included with the final version of the report which is published on the Healthwatch Blackburn with Darwen website at www.healthwatchblackburnwithdarwen.co.uk

Acknowledgements

Healthwatch Blackburn with Darwen would like to thank Jenny Swimby, together with staff, residents and visitors, for making us feel welcome and taking part in the visit.

General Information

Hawkhurst Care Centre is privately owned by Prime Life Ltd with places for 22 residents. There was 1 vacancy at the time of our visit. The person in charge is Jenny Swimby.

Information obtained from carehome.co.uk states that the home provides care for people from the ages of 18 + who are affected by old age, dementia and mental health conditions.

Methodology

The Enter and View representatives made an announced visit on Tuesday 1st February 2022.

We spoke to 5 residents and 3 staff, where possible within the constraints of the home routine, people's willingness, and ability to engage and access to people in public areas. Discussion was structured around four themes (Environment, Care, Nutrition and Activities) designed to gather information concerning residents overall experience of living at the home. On this occasion representatives chose to focus on the lunchtime experience

The team also recorded their own observations of the environment and facilities.

Our role at Healthwatch Blackburn with Darwen is to gather the views of service users, especially those that are hard to reach and seldom heard, to give them the opportunity to express how they feel about a service regardless of their perceived ability to be able to do so. It is not our role to censor feedback from respondents.

We use templates to assess the environment of a facility and gather information from respondents, to ensure that reports are compiled in a fair and comparative manner.

Observations were rated on Red, Amber, Green scale as follows;

Green = Based on our observations and the responses gathered we would consider the experience of this home to be good.

Amber = Based on our observations and the responses gathered we consider the experience of this home to be need of some improvements.

Red = Based on our observations and the responses gathered we would consider the experience of this home to be in need of significant improvement.

Summary:

Hawkhurst presented as a homely and pleasant environment with positive relationships observed between carers and residents. Residents who spoke to us reported “loving” the staff and feeling achievement in their independence. “*I can look after myself*”. “*I make my own bed.*” and “*I can get dressed myself.*”

Likewise, residents were confident and happy to engage with representatives telling us that they “*enjoyed the chat.*”

Environmentally the home appeared warm, clean, and safe with good PPE protocols and sufficient training to support staff. The staff we spoke to reported positive relationships with management who were described as similarly supportive and flexible.

Representatives were made very welcome by the staff team, and the manager was open and friendly. The manager told us that she had considered the variety of activities, in particular the improved use of technology, a cinema facility, and an activity area.

She told us that a residents meeting had been arranged for the day after our visit and this would seem an ideal forum to discuss some of the points that residents had raised with us.

One resident had spoken of wanting to spend more time outdoors (in the garden) as he used to have an allotment. On the face of it this would seem achievable as did the request for Chinese and Cantonese food which may be ordered from a takeaway or perhaps themed mealtimes could be introduced. Representatives also felt that the mealtime experience could have been more enjoyable with some light background music. One resident expressed an interest in stately homes so maybe virtual visits could be organised.

Similarly, displaying a weekly menu and activities schedule may encourage residents to engage in and look forward to these.

Overall Hawkhurst was a pleasure to visit, and it was commendable that the staff team continued to explore ways to enhance the residents experience of the home.

Based on the criteria, the Enter and View Representatives gave the home an overall score of:

Green

Enter and View observations

Pre-visit and location

Prior to our visit we sent out a letter and a poster to the home advising them of the date we would attend. Due to Covid-19 the date had to be changed and the management were very cooperative and flexible in agreeing to this.

We also took the opportunity to view the home's website accessed through the Prime Life parent group page and found this to be clear and informative with the option to download a brochure or undertake a virtual tour. Healthwatch Blackburn with Darwen also appreciates the importance of pets in some residents' lives and how they can be a positive enhancement to wellbeing. Therefore, we were pleased to note (on the website) that Hawkhurst Care Centre is a pet friendly environment.

The home is situated close to the main Preston New Road in the leafy and mature Shear Bank Road. The area is typified by similar properties from the turn of the century (and prior) with grand proportions and large gardens.

The surroundings are quiet but the proximity to the main road means shops and transport are readily available on the main A677 Preston New Road. However, Shear Bank Road is relatively steep and may challenge some pedestrians.

We found the home easy to locate with signage on the curtilage facing Shear Bank Road. A tarmacked carpark was situated at the front of the building, and this was of a reasonable size, however we did not see a designated disabled car parking space.

Green

The external environment

The home is a large building which staff told us had originally been 2 houses. A double fronted conservatory style structure is an addition to the front which overlooks the car park. There is minimal mature planting here, but it is nonetheless a pleasant outlook.

There is a large rear garden which residents can sit out in warmer weather. However, some of the seating area was occupied by a dedicated and standalone visitors hub to mitigate Covid19 and keep residents safe.

A large wooden shed with seating could also be used for outdoor activity.

Representatives did not find the front door easy to locate, and in the absence of signage we initially went to the wrong side of the building. Once we approached the correct door, we could see it was serviced by ramp access and the entrance was secure.

Staff answered the door in a timely manner.

Green

The internal environment/reception -first impressions

Staff were welcoming and friendly, with the manager taking the time to show representatives around the home.

Covid-19 protocols were followed with representatives wearing PPE and obliged to provide a vaccine passport and current lateral flow test. We also observed staff wearing PPE and a fully stocked PPE station.

Although the reception area was limited it was light and bright with no discernible odour. We observed an informative notice board and other information such as today's menu. Representatives saw that a company whistleblowing "Alert Line" protocol was displayed alongside a "We appreciate your views" invitation, identifying the former manager as having an open-door policy.

It was good to see a photographic board identifying staff and information explaining the key worker system to visitors. Likewise, we were able to identify staff by uniform.

The latest CQC rating was displayed as required. We also saw the Healthwatch Blackburn with Darwen poster displayed as requested. Similarly, we were able to sign into a visitors' book placed here.

However, the notice boards may have needed updating to reflect the interim managers details.

Green

The observation of corridors public toilets and bathrooms

Corridors were clean and clutter free with flooring being a wipe clean and non-slip wood effect. Decor was light and neutral; interest being added to the corridors with paintings and ornaments.

The environment was easy to navigate and well lit, the dementia friendly signage observed throughout the home being pictorial, written and colour coded. We also saw a lift at the end of a corridor giving easy access to the upper floor.

Representatives noted that many bedroom doors had been personalised with the resident's framed photograph and a brief profile (including relevant key workers). Doors were numbered and had a door knocker to replicate a street scene and aid orientation. During our visit we observed that bedlinen was being changed.

Staff told us that Hawkhurst has 22 bedrooms with some of these being ensuite or having a wash basin, therefore we concluded that there were enough public bathrooms with either showers or adapted bathing to service the number of residents. Similarly, we observed raised toilet seats, grab rails and freestanding toilet frames but not all of these were colour coded.

All the bathrooms we observed were spacious, clean, and well stocked with soap, toilet roll and towels. The cleaner was in attendance during our visit, and she told us she worked 8.00am until 2.00pm each day.

Some of the bathrooms appeared in need of an update but were nonetheless serviceable.

Green

The lounges, dining and other public areas

Hawkhurst has three lounges adjacent to one another. The two larger ones have views to the front from the conservatory addition, whilst the third is smaller, quieter, and suitable for receiving visitors. All the lounges had TV on during our visit, but this was generally unobtrusive and different programmes were broadcast in each lounge giving residents a choice of viewing.

Most residents were sat in these lounges either looking out of the window or watching TV some residents were reading newspapers and magazines (delivered to the home)

Representatives noted that there was a variety of seating available with several sofas. Some of these were positioned looking outwards so residents were not obliged to watch TV. We saw a resident resting on the sofa and looking out of the window, replicating a domestic environment.

Likewise, coffee tables were positioned next to some armchairs and soft furnishings made the room appear homely and comfortable.

The lounges in common with the rest of the home were nicely decorated with gold and grey tones, there were traditional features such as fireplaces, complete with logs, high ceilings and cornicing.

One of the pair of curtains in the lounge area was very heavy and could be used to divide the first lounge area from the conservatory space. The manager told us that there were plans to make adaptations to this lounge so it could have dual usage as a cinema room. The first lounge area also had a dartboard, board games, and a few shelves of books. During our visit we observed one care worker playing board games with a male resident.

A wall in the first lounge area displayed an illustrated "dignity tree" where participants had contributed descriptions of what dignified care meant. Yet another wall displayed a whiteboard titled "Our Activities Wall" with the current date, Tuesday 1st February. The board indicated that cards, dominoes, and board games were available in the morning (which we observed) with the afternoon offering a pampering session, word search, and one to one conversations.

However, we did not see a weekly activity schedule displayed.

Representatives were pleased to note that residents were invited to a consultation meeting scheduled for the next day at 2.00 pm and billed as "Have Your Say"

The dining room led directly from the third lounge and was recorded as originally two rooms and very spacious. The area was clean, but basic with small round tables each seating four people. Representatives considered there was sufficient seating to accommodate the number of residents and enough space between tables for any adaptive aids that may be required. Tables were furnished with tablemats and each table had the day's menu in a Perspex holder. We saw that the menu was coloured, pictorial and written in a large font. There was a choice of two main meals, chicken stew or ham and tomato omelette, served with wedges, mash and vegetables. A milk tapioca pudding was offered as dessert.

Representatives took time to speak to the chef who told us that all the meals were home cooked and that many items such as biscuits, were also home baked. The chef told us that there was some flexibility around mealtimes when the kitchen team endeavoured to meet residents' preferences.

The dining area seemed to have been redecorated quite recently and the flooring was similarly serviceable. The walls were decorated with food themed artwork.

However, we did not see the weekly menu displayed.

Green

Observations of resident and staff interactions

Our initial impressions of Hawkhurst Care Centre were of a very calm and pleasant environment with positive and respectful interactions between staff and residents.

We heard staff laughing with residents, asking permission to deliver care, and knocking on residents' doors prior to entry.

Residents evidently felt very comfortable in their environment, relaxing, and chatting, whilst some preferred to nap. We observed solicitous inquiry from staff "are you ok?" Residents' names were used during conversation, and we overheard a carer thanking a resident for moving forward for her. Similarly, a carer told a resident "I have a cup of tea waiting for you."

Staff were observed to offer high levels of physical and emotional support when dealing with residents who were reluctant to eat, "Here is a nice warm stew."

Residents who remained in the lounge during mealtime were encouraged to eat. One carer was heard clapping when a reluctant resident had been coaxed into trying a milk pudding.

Very few call bells were heard during our visit, and these seemed to be answered quickly.

The Lunchtime Experience

On this occasion, representatives chose to focus on the experience of residents during the lunchtime. We evaluated the lunchtime as a social experience, the

quantity and quality of the food, the interaction between staff and residents, and the dignity afforded residents during this period.

The linked dining areas accommodated seven tables in total. A larger area had four tables seating seven in total (two tables of three and one table of three) and a smaller area with three tables seating seven (two tables of two and one table of three).

The kitchen servery was close by, with a door leading directly into the dining area. Representatives observed that tables were furnished with a menu, placemats, and plain cutlery (condiments were available). There was a small vase of artificial flowers on each table.

Representatives noted that residents were toileted prior to the lunchtime. We also saw that two residents had chosen to stay in the lounge and that some residents had remained in their bedrooms.

At 11:35am residents began to enter the dining area with staff supporting them. By 11:55am most residents were seated and were offered tea coffee or juice, the juice being served from the fridge. A range of drinking cups were in use including lidded and smaller cups, and it appeared that some residents had their own personal mugs.

There were three and sometimes four staff working on the food service to residents, we noted that they were wearing blue aprons and gloves and worked efficiently together.

Similarly, the interaction between the staff and residents was very positive as they were asked which meal they preferred and given encouragement in respect of choices. One carer was observed fetching a resident's spectacles.

The chosen meal was brought out shortly afterwards on coloured (yellow) crockery. We saw that two plated and lidded meals were also taken to the residents in their bedrooms. Representatives felt that the meals offered looked appetising and were of sufficient quantity.

However, at twelve noon a GP arrived to see two of the residents in the dining room and these were led to their rooms to be seen in private. One of these had already received their hot food when they were obliged to see the doctor. Their meal was left on the table waiting for them to return. Fortunately, the resident returned quite quickly otherwise the food would have been cold.

Several residents required support with their meal. two residents in the dining areas required assistance with eating and there was good interaction and encouragement whilst this happened.

One of the residents in the lounge had a plastic bib placed around them and was supported and motivated to eat by the carer.

Another resident in the lounge had their hot meal together with some juice placed on a small table next to them at 12:15pm. This remained untouched for twenty minutes until the resident pushed the table away.

A staff member attended and pushed the table back and tried to encourage the resident to eat their meal, but the food remained untouched. The staff member then took away the plated meal and returned a little later with a bowl of tapioca pudding

The resident managed a mouthful of the pudding, and the carer was heard offering lots of praise and encouragement however the rest of the pudding was unconsumed.

We were told later that this resident had a poor appetite and consequently was often offered food supplements.

Overall, the lunch time experience ran very smoothly, and residents appeared to enjoy the food. Nonetheless, representatives felt that the atmosphere could have been made more convivial with some background music or local radio news stories.

Green

Additional information

- The manager told us that a great deal of deliberation was given to the initial assessments of residents and whether Hawkhurst was able to offer the appropriate level of care and support (Hawkhurst focusing on Low Elderly Mental Dementia support)
- The manager told us there were plans to change one of the lounges into an activity area with table tennis equipment. She told us that changes had been discussed to reflect the occupancy of the home which had several male residents.
- Similarly, Netflix, Sports, and YouTube were available, and Alexa had been used to facilitate quizzes and Karaoke.
- The manager told us that there were plans to make the internet available in residents' bedrooms. A cinema room was also planned.
- We were told that residents were consulted about change in the form of residents' meetings.
- The manager and staff were aware of the "Falls Service" commissioned by the CCG, (Clinical Commissioning Group) but used an in house adapted sling for this purpose.

Feedback from residents

Feedback from residents who spoke to us indicated a satisfaction with their care and relationships with staff, and it appeared that residents were encouraged to maintain their independence.

Responses in respect of activities were more mixed as were responses about food.

Environment

"It's OK here. I like it. I like my room but it's just a bedroom."

"I love it here. It's very good. I have my own room with my things in. Sometimes it's a bit cool in the evenings. I wouldn't change anything here. Everyone is happy and I would recommend living here."

"It's a good place to be."

"The chairs are comfortable. I can look out of the window."

"It's alright."

"I'm not allowed outside enough to sit and for fresh air. The rooms are always being sprayed for covid. The programmes on TV are no good so I listen to music in my room."

"I don't really move from my chair as I don't know where I am going. I think I have relatives upstairs, but I can't get there".

"I would like to live in Blenheim Palace or Buckingham Palace."

Activities

"I just watch TV here in the lounge. I like it in this lounge as its quiet. I used to sit over there (in another part of the lounge) but I can't sit there now as its full."

"I like to watch TV and chat to people."

"I play a lot of games with the staff."

"There are things to do (but I can't be bothered)."

"There is TV and books".

"I used to have an allotment, so I miss doing things outside".

"I don't do much as I'm not able to and I can't be bothered. I get fed up."

"I would like to play cards and listen to radio 3".

Care

"I love them - most -of the time! I've no complaints about them."

"I love them. They are kind and help me. They are smashing. They look after me well. If I need someone in the night, I pull the cord by my bed, and they come quickly. I don't need them very often at night."

“I can look after myself. I make my own bed.”

“I can get dressed myself.”

“I can ask if I need any help”.

Food

“It’s OK - a bit up and down.”

“It’s smashing, I love it, it’s so good. You get plenty to eat and you can get seconds if you want them. I had cereal and toast for breakfast.”

“There are two choices”.

“It’s very good. I like everything here. It’s nice and hot.”

“It’s edible. It’s warm.”

“There is too much toast. Sometimes the food and drinks are cold.”

“I would like Cantonese and Chinese food. There isn’t any alcohol allowed.”

Staff views

The staff we spoke to indicated that recent changes had been welcomed and described the home as a *“happy place*. Staff reported feeling well trained and supported, enjoying person centred relationships with the residents.

Do you have enough staff when on duty to allow you to deliver person centred care?

“Yes, we do. It’s a lot happier here now. It was different a few months ago. Now it’s really good and everyone is happier. We have bank staff to cover, or the permanent staff are offered overtime.”

“Yes. We have four staff on in the day plus the cleaner and the chef. There are two staff at night, and we work 8 to 8.”

How does the organisation support you in your work?

“I am well supported and if I need to attend an appointment then there is no problem. We have online training, and we receive emails to remind us. There is plenty of training all the time.”

“Its online training and its constant. We had inhouse training around lifting and handling.”

How do you deliver care to diverse groups such as LGBTQ +?

“We have not had to address this here yet, but it wouldn’t be a problem for me.”

“I wouldn’t have any problem. Everyone is treated equally, and it makes no difference”.

Are you aware of residents’ individual preferences? Where do you find this information?

“In the care plans and we know our residents”.

“The information is in the care plan, and we ask the residents if we need to. We are like a big family, and we know what everyone likes and dislikes.”

Would you recommend this care home to a close friend or family?

“Yes.”

“Yes. It’s a happy place now.”

Response from provider

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