

## Enter and View Report

### Fern Lodge



#### Care Home Contact Details:

5 Eversley Park,  
Chester  
CH2 2AJ

Date of Visit: 1<sup>st</sup> Aug 2018

Time of Visit: 2:00pm

Healthwatch Cheshire Authorised Representatives:  
Elizabeth Bott, Andrew Firman, Andrew Pleass,

Fern Lodge Staff Present: Debbie Davey - Registered  
Manager, Mark Field - Mental Care Nurse & Duty Manager, Mel  
- Support Worker, John - Cook

## What is Enter and View?

Healthwatch Cheshire (HWC) is part of a network of over 150 local Healthwatch across England established under the Health and Social Care Act 2012. HWC represents the consumer voice of those using local health and social services and trades as both Healthwatch Cheshire East and Healthwatch Cheshire West.

The statutory requirements of all local Healthwatch include an 'Enter and View' responsibility to visit any publicly funded adult health and social care services. Enter and View visits may be conducted if providers invite this, if HWC receive information of concern about a service and/or equally when consistently positive feedback about services is presented. In this way we can learn about and share examples of the limitations and strengths of services visited from the perspective of people who experience the services first hand.

Visits conducted are followed by the publication of formal reports where findings of good practice and recommendations to improve the service are made.

**Contact Details:** Healthwatch Cheshire, Denton Drive, Northwich, Cheshire, CW9 7LU Tel: 0300 323 0006

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### 1. Description & Nature of Service

**Group:** [Priory Adult Care](#)

**Person in charge:** Deborah Davey (Manager)

**Local Authority / Social Services:** Cheshire West and Chester Council ([click for contact details](#))

**Type of Service:** Care Home only (Residential Care) - Privately Owned , Registered for a maximum of 17 Service Users

**Registered Care Categories\*:** Mental Health Condition

**Admission Information:** Ages 18+.

**Single Rooms:** 17

**Facilities & Services:** Physiotherapy • Independent Living Training • Own GP if required • Own Furniture if required • Pets by arrangement • Close to Local shops • Near Public Transport • Minibus or other transport • Wheelchair access • Gardens for residents • Television point in own room

**Latest Care Quality Commission\* Report on Fern Lodge:** [click here](#)  
(Information taken from [carehome.co.uk](http://carehome.co.uk))

Following the latest visit by CQC ([March 2016](#)) Fern Lodge was judged as Good in all areas.

**From the home's website:** Fern Lodge has no specific site but does feature as a page on the Priory site which states:

***"...the service at Fern Lodge supports adults to promote and maintain independent living skills, social integration and meaningful engagement."***

Representatives on this visit are keen to observe for themselves how this statement is enacted in the real environment of the home.

## **2. Acknowledgements**

Healthwatch Cheshire would like to thank the service provider, care home manager, residents, visitors and staff for their contributions to this Enter and View visit.

## **3. Disclaimer**

This report relates to findings gathered on a specific date of visiting the service as set out above. Consequently, the report is not suggested to be a fully representative portrayal of the experiences of all the residents and/or staff and/or family members/friends but does provide an account of what was observed and presented to Healthwatch Cheshire Authorised Representatives at the time of the visit.

## **4. Purpose of the visit**

- To enable Healthwatch Cheshire Authorised Representatives to see for themselves how the service is being provided in terms of quality of life and quality of care principles
- To capture the views and experiences of residents, family members/friends and staff
- To consider the practical experience of family/friends when visiting the service in terms of access, parking and other visitor facilities
- To identify areas of resident satisfaction, good practice within the service and any areas felt to be in need of improvement
- To enable Healthwatch Cheshire ARs to observe how the service delivers on the statements it advertises on its website

## **5. Introduction/Orientation to Service**

On arrival Representatives were met by Mark Field - a mental health nurse, who asked us to sign the visitor's book whilst he fetched the Registered Manager, Deborah Davey. Mark and Debbie were welcoming and open. They led us through to the office, provided us with a drink and they were happy to answer any questions we had.

## **6. Methodology**

Representatives were equipped with various tools to aid the gathering of information. The following techniques were used by the Authorised Representatives:

- Direct observation of interactions between staff and residents
- Participant observation within therapeutic/social activities where appropriate

- Assessing the suitability of the environment in which the service operates in supporting the needs of the residents
- Observing the delivery and quality of care provided
- Talking to residents, visitors and staff (where appropriate and available) about their thoughts and feelings regarding the service provided
- Observing the quality and adequacy of access, parking and other facilities for visitors.

## 7. Summary of Key Findings

- A small care home for people with complex mental health issues and difficulties with independent living, with age range currently 21-70+
- Experienced, dedicated, caring and compassionate staff working with challenging mental health care conditions but always treating the resident as an individual
- Staff very empathetic and understanding of individual residents' personalities
- Representatives were welcomed warmly and all questions were answered openly and freely
- Representatives engaged with four members of staff and five residents
- The wide range of activities tailored to the individual aims to maintain stimulation and motivation with a view to integration as appropriate back into a community setting
- The home has undergone a few changes of management in recent years. The current provider, Priory Adult Care, provides a local and national structure for management, administration and quality control, together with a network of support and training for staff.

## 8. Detailed Findings

### 8.1 Location, external appearance, ease of access, signage, parking

The home is located in quiet, residential side street near the centre of Chester. Fern Lodge is a secluded, semi-detached, red-brick Victorian property. A small driveway was occupied by staff cars, but there is some on street parking nearby. There is a Small garden area at the front of property furnished with wrought iron garden table and chairs. A name plaque/sign is fixed on the outside wall of the property

### 8.2 Initial impressions (from a visitor's perspective on entering the home)

On arrival Representatives noted that the home had a Secure front door with an access bell. This was, however unlocked. We entered into a small entrance hallway, with visitors' book ,CQC registration certificates and latest CQC report displayed. The entrance hall led into a narrow hallway (typical of buildings of this age but well

decorated having laminate flooring and some pictures mounted to the wall.

A well lit staircase lead to the upper floor

### **8.3 Facilities for and involvement with family/friends**

The home operates an open, flexible visiting policy.

There is no specific 'visitor's room at the home. As a result, due to the lack of space, apart from residents' own rooms, the only private room available is the Manager's office or any vacant bedroom.

We were informed by staff that due to nature of some of the resident's illnesses (that include schizophrenia and paranoia) some residents ('service users') only have limited visitors (family, friends)

### **8.4 Internal physical environment**

**8.4.1 Décor, lighting, heating, furnishing & floor coverings** - The home has narrow corridors but is well decorated throughout. Flooring - carpets and laminate, pictures on walls and furnishing is generally in good condition. Representatives understand that a further decoration programme is underway.

**8.4.2 Freshness, cleanliness/hygiene & cross infection measures:** All areas appeared clean including dining room and bathrooms seen. There were no unpleasant odours.

**8.4.3 Suitability of design to meet needs of residents:** The age of the building inevitably restricts layout. An extension has already been built to rear of the premises and plans are underway to convert a downstairs bedroom into a lounge and activity area. One lounge is in the process of conversion and contains a small kitchen area and sink for residents'/visitors' use. Two further lounges downstairs, provide ample space for relaxation - a main lounge and smaller TV lounge at rear leading to rear garden and seating/smoking area. The dining room is sited adjacent to main kitchen.

### **8.5 Staff support skills & interaction**

**8.5.1 Staff appearance/presentation:** Staff do not wear uniforms or name badges but are well-presented.

24-hour nursing care is offered by the home and this results in twelve hour nursing shifts (8.00am-8.00pm, 8.00pm to 8.00am). We were told that one nurse each shift shared between is three members of staff on a rota. A minimum of two additional care staff each day support as well as a Cook, maintenance man and an administrator.

We were told that recruitment for two extra care staff is in process.

**Training** - We were informed that in-house e-learning training is available for staff.

### **8.5.2 Affording dignity and respect/Approach to care giving:**

Residents exhibit a variety of challenging mental health conditions (schizophrenia, paranoia, learning difficulties and other challenging behaviours), with most having been released from hospital but sectioned under Mental Health Act.

Fern Lodge approach is to offer one to one therapy with a view to enabling resident to move back into general community (ideally 12 to 18 month turn round).

We were told that a small number of residents will inevitably remain at Fern Lodge for life.

Staff/resident interactions observed demonstrated patience, understanding of personalities and compassion. We observed considerable care taken by two staff members assisting a resident with mobility issues to sit in lounge. In speaking to staff it was clear that many were long- serving, experienced staff in mental health care.

### **8.5.3 Effective communications - alternative systems and accessible information:** Resident's rooms are numbered with bathroom toilet facilities labelled with written signs.

On display on the downstairs notice board a mood pictogram is displayed - this allows residents to point out to staff how they are feeling on a particular day, with pictorial displays underneath giving simple tips on what personal steps they can take to relieve stress and negative feelings.

**Monthly residents meetings** - minutes of July meeting seen on notice board. We noted that a Residents meeting resulted in decision to convert downstairs bedroom to lounge

A weekly activity plan displayed on the main board along with other notices including an acknowledgement of complaint letter, advice on sun cream application information as well as Priory Group notices and legal requirements notices (fire safety, Insurance etc.).

## **8.6 Physical welfare**

**8.6.1 Appearance, dress & hygiene:** Five residents seen and interacted with were all clean, well dressed and obviously well looked after.

**8.6.2 Nutrition/mealtimes and hydration:** Fern Lodge has a food hygiene rating of  following a 2016 inspection - a new inspection is imminent.

The home has a clean, bright, well-decorated dining room with three tables that provide twelve settings. The room has a non-slip laminated floor.

A small kitchen has recently had fitted a new powerful extractor hood over the cooking range (something that should improve the hygiene rating). We were told that all meals cooked on site with two

main meal choices per day and based on a three weekly menu cycle. We were told that special dietary requirements can be accommodated.

Representatives noted fixed meal times - Breakfast 'until 9.00am', Lunch 12-12.30pm, Evening 5.00pm

We were told that residents are encouraged to eat together in dining room, however, one insists on meals in own room. Others have takeaways when out.

The cook has been in place for eleven years and works Monday to Friday. We were told that weekend staff take care of weekend meals.

**8.6.3 Support with general & specialist health needs/Maximising mobility & sensory capacities:** One to one therapy is used at the home. Each resident has a nominated nurse and key support worker. There are Minimum three monthly reviews of each resident's care plan. The manager's aim is to get more input from resident and resident's family into their personal care plan. Previously it was felt that they were driven too much by staff.

Residents register with their own GP and dentist. A chiropodist and optician both visit regularly. Residents will have personal mental health consultants as necessary

Mobility assistance equipment was viewed in common areas including bathrooms

## 8.7 Social, emotional and cultural welfare

**8.7.1 Personalisation & personal possessions:** Residents are allowed/encouraged to bring in personal possessions. We only saw one unoccupied room, which was small, but clean and bright with external window and would have been able to accommodate small personal effects only.

**8.7.2 Choice, control & identity:** Of the fifteen current residents two have active DOLs\* in place. Other residents are free to leave the premises - the front door is generally left unlocked on latch. At time of our visit a number of residents were on a visit to Chester Zoo. One returned early, unaccompanied; by taxi. We were informed by staff that as the aim is to equip residents once again for independent living, residents are encouraged to take steps towards this themselves: making snacks, drinks, doing their own laundry, managing their own money and budgets. Other residents had taken part that afternoon in a current affairs discussion with one of the nurses.

*\*(The Deprivation of Liberty Safeguards (DoLS) are part of the Mental Capacity Act 2005. The safeguards aim to make sure that people in care homes and hospitals are looked after in a way that does not inappropriately restrict their freedom.)*

**8.7.3 Feeling safe and able to raise concerns/complaints:** A resident of four years commented: *“The staff are lovely. They will do anything for you. I can’t fault it. I feel safe here.”*

As previously noted, an acknowledgement of complaint letter was displayed on notice board

Monthly staff, residents and governance meetings take place to discuss any issues that arise. Residents’ meetings regularly discuss issues such as fire safety, smoking, meal choices, external trips and activities.

**8.7.4 Structured and unstructured activities/stimulation:**

Representatives understand that the organisation of activities is shared by staff. The current programme for the week was displayed. A number of residents were visiting Chester Zoo on the day of our visit.

The lounge areas contained TVs, clocks, books, DVDs, and crafts made by residents

A large enclosed garden at the rear contained a pond with fish, seating, plants and planted containers, smoking shelter and seating. We were informed that residents travel out to Chester and beyond - one was about to visit his girlfriend in Wrexham taking himself by public transport; another goes to Chester City football matches. Some residents take part in supported holidays away from the home and other activities we heard about included a garden party for the royal wedding, a World Cup sweepstake and themed food, bakery classes.

**8.7.5 Cultural, religious/spiritual needs:** This was not discussed.

**8.7.6 Gardens - maintenance & design/suitability use/enjoyment:**

A small, enclosed, level garden at front of property with seating and table is available for use with a larger, level, well laid out and planted garden at rear.

**9. Additional Areas of observation**

**9.1 Comparisons of observations against providers website**

- No discrepancies noted

**9.2 Comparisons with previous Healthwatch Visit(s) where applicable**

- No longer a dedicated activities coordinator
- Decoration appears in better condition

**9.3 Comparisons with the most recent CQC report**

- No discrepancies noted

#### 9.4 Other observations/findings of note

- Mark Field, the nurse on duty on the day of visit was recently, July 2018, awarded the title of Community Mental Health Nurse of the Year at a RCNI awards ceremony in London.

#### 10. Elements of Observed/Reported Good Practice

- Mood pictograms used to encourage residents to communicate their feelings
- Manager 'buddied' with another care home manager when she first joined Priory Health Care group
- Manager 'inundated with support' from Priory Health Care
- Group manager meetings appear to be held regularly
- Approach to staff training seemed good with - red, amber, green system used to help manage this.
- Regular documented meetings with staff and residents appear to take place.
- Wide range of activities taking place and appear tailored to the individual's need.

#### 11. Recommendations

- Aim to improve food hygiene rating to 5 on next assessment
- Consider greater use of volunteers e.g. from local university.

Feedback from Provider of Service
<i>At time of publication - No feedback received.</i>