

# **The Croft Care Home**

## **Whalley**

**Enter and View Report**

**Tuesday 12<sup>th</sup> February 2019**

**10.30am to 12.30pm & 2.00pm to 4.30pm**



### **DISCLAIMER**

This report relates only 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:**

The Croft Care Home  
84 King Street  
Whalley  
Lancashire  
BB7 9SN

**Staff met during our visit:**

Teresa Walsh (Manager)  
Sharon Saunders (Deputy Manager)  
Nikkita Everett (Senior Carer)

**Date and time of our visit:**

Tuesday 12<sup>th</sup> February  
10:30am to 12:30pm & 2:00pm to 4:30pm

**Healthwatch Lancashire Authorised Representatives:**

Jeanette Newman (Lead) -Engagement Officer  
Liz Butterworth - Engagement Officer  
Lynn Yates - Engagement Officer

**Introduction**

This was an announced Enter and View visit undertaken by authorised representatives from Healthwatch Lancashire 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.

This visit was arranged as part of Healthwatch Lancashire's Enter and View schedule. 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.

The team compile a report reflecting these observations and feedback, making comment where appropriate. The 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 Lancashire website at [www.healthwatchlancashire.co.uk](http://www.healthwatchlancashire.co.uk)

## Acknowledgements

Healthwatch Lancashire would like to thank Teresa Walsh, together with staff, residents and visitors, for making us feel welcome and taking part in the visit.

## General Information

The Croft Care Home is privately owned by Farrington Care Homes Ltd with places for twenty six residents. There were two vacancies at the time of our visit. The person in charge is Teresa Walsh.

Information obtained from carehome.co.uk states that the home provides care for people from the age of eighteen who are affected by physical disability, dementia, old age and sensory impairment.

## Methodology

The Enter and View representatives made an announced visit on Tuesday 12<sup>th</sup> February 2019. The management team informed us they had not received the correspondence announcing our visit.

We spoke to nine residents, five staff and four relatives, 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.

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

As some residents were receiving visits, choosing to stay in their rooms or being nursed, we spoke with nine of the twenty four residents.

Our role at Healthwatch Lancashire 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** = We would choose this home for a loved one.

**Amber** = We may choose this home if some improvements were made

**Red** = We would not choose this home for a loved one unless significant improvements were made.

## Summary:

The Croft Care Home is situated in the award winning town of Whalley and benefits from being in close proximity of the town centre's facilities and services.

The building is newly decorated, clean, bright, warm and homely. It is set in landscaped gardens with some pleasant seating areas for residents and visitors to enjoy. A proposed dementia friendly garden would be a positive addition to the care home.

Some visitors and residents indicated that seating was at a premium and finding a suitable quiet area could be a challenge at times. The home has a small lift and a stair lift to access the first floor which has gradients to navigate. The adaptations made have helped minimise constraints to people with mobility issues. However, some constraints still exist. All respondents voiced appreciation of the ongoing improvements being made to the facility. One respondent stated *"The home is not a diminishing site but one that is improving all the time"*.

There is a diary of planned activities for the home. However, no activity schedule was on display. Some respondents suggested more activities would be beneficial particularly for those who do not have visitors to chat to or to take them out. An Activities Co-ordinator is to be appointed.

Residents gave mixed views about the food with most giving a favourable response to the variety and quantity on offer. There was no daily or weekly menu on display.

Healthwatch Lancashire representatives observed positive friendly interactions between staff and management making the home a friendly warm environment. The majority of respondents told us they consider staff to be caring, friendly and approachable.

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

**Green Amber**

## Enter and View observations

### Pre-visit and location

There is a website displaying contact details and the services offered by Farrington Care Homes Ltd. The facility is described as contemporary, purpose built and easy to navigate. The website states *“We have taken into account ease of movement and navigation, good visibility and accessibility, promoting maximum independence.”* The facility is situated close to main bus routes; a train station is 10 minutes walk away. Similarly, shops, post office, pubs, café’s, pharmacy, doctors and health centre are all conveniently situated within walking distance from the home.

There is parking within the grounds close to the home. There is no designated disabled access parking area. However, the parking spaces are close to the ramp leading into the building. The home is clearly signposted and easy to find from the main road. The statement for the home is *“We believe that each resident is a whole person, a unique individual with particular physical, social and spiritual strengths.”*

## Green

### The external environment

The gardens were generally well maintained and beautifully landscaped. Maintenance work was being carried out at the time of our visit. There were three distinct seating areas in the front garden, including a patio area with benches and tables creating a pleasant environment for residents and visitors to enjoy. There were hanging baskets, ornaments and a bird table. As the home is adjoining a busy main road, representatives could see that the intended construction of an enclosed dementia friendly garden would be beneficial. One family member commented about her father *“He is an outdoor man and they are going to make an enclosed area which is dementia friendly.”*

It was observed that several pieces of broken wood, bits of debris, a cracked window and the appearance of the window frames at the side of the building spoiled an otherwise beautiful exterior.

The main entrance was easily identifiable benefiting from a non-slip disabled access ramp and signage. Access to the home is secure with a coded lock. As our visit was not expected a member of the management team came out to check if we needed assistance.

## Green

## **The internal environment/reception-first impressions**

Despite the management team, Teresa and Sharon, being busy interviewing potential staff they made Healthwatch Lancashire representatives feel welcome and accommodated our needs throughout the visit.

The home was bright, clean, newly refurbished and welcoming with a friendly homely atmosphere. A sweet trolley in the hallway added to the pleasant environment as did ornaments, plants and fruit in the lounge. Residents appeared to be happy and looked after. There was a slight malodour in the hallway upon arrival which was not there a short while later when we re-entered the hallway. The new non slip wooden effect flooring and wide wooden staircase added to the feeling of space and cleanliness.

A visitor's book and hand gel were available. Sharon asked a senior carer Nikkita to show us around and give help where she could. Representatives observed there was limited information on the notice board. It did however include a notice for Independent Advocacy Services, a Service User Guide and A Fire Evacuation notice. No activities schedule was on display.

There was no Healthwatch poster on display announcing our visit, however, we managed to speak to five friends and family members during our visits as Teresa encouraged visitors in the afternoon to share their views with Healthwatch Lancashire.

A family tree was a work in progress on the wall in the hallway. It had photographs of some of the staff and a photograph and information on a resident's dog who lives at the home. Staff could be identified by different colour uniforms but had no name badges. Representatives suggested the names of staff be put on the family tree with the photographs.

An orientation board displayed further down the hallway communicated the staff on duty, the day and date but had no indication of the weather. It did not display the menu or any activities that were taking place that day. Nikkita explained she had not got put a pictorial weather icon on the board that morning.

## **Green Amber**

### **The observation of corridors public toilets and bathrooms**

The long hallway leads off to the other communal areas such as the lounge, dining room, hairdressing salon, toilets and bathrooms downstairs which all benefit from dementia friendly picture signage to aid orientation. The décor and furnishings are bright and unfussy giving a pleasant homely appearance. Bedrooms are identified by the number and residents first name on their door. No dementia friendly memory boxes were in place at the time of our visit. There is an intention to fix snap on clipboard frames to the bedroom doors which representatives felt could house some personalised items to aid orientation and reminiscence.

For the most part the corridors were uncluttered, having only items that could not be stored elsewhere such as lifting hoists. Some parts of the corridors had gradients to navigate, and representatives felt that access to the first floor could be challenging for people with mobility issues. It was observed that handrails were not continuous throughout the hallways with visitors and residents stating the handrails would be beneficial. Adaptions to the corridor upstairs have shown the home has reduced the need to navigate steps by creating ramps and adding handrails to aid residents to access their room or the sensory room. The lift servicing the first floor is unusually small with some residents telling us they could not use a wheelchair or easily use a walking frame in the lift. Other family members told us only one person could fit in the lift so they could not accompany residents to the first floor. There is a wide staircase which has a stairlift in place with a wooden safety gate at the top leading onto a narrow landing. Residents wishing to go up the stairs would therefore need the assistance of staff. Representatives did not observe any residents or visitors going upstairs during our visit. When one family member was asked why they do not use the quiet sensory lounge upstairs it was indicated that the family felt the environment was not conducive to mobility and toileting concerns. This meant they remained on the ground floor during visits despite wanting a quiet place to meet.

There did not appear to be sufficient storage areas for walking frames, wheelchairs and other equipment when they were not being utilised. It was observed on our visit that the lifting hoist downstairs was placed directly outside a residents open bedroom door and it appeared to restrict the residents view into the hallway.

There are communal toilets on the hallway next to the dining room along with a communal shower room. One of the toilets and the communal shower on the ground floor was specifically equipped for disabled access. As well as other public toilets which are not wheelchair accessible there is an unusually small W.C. which we were informed is seldom used because of its size and the lack of hand basin. Sanitising gel was provided in this toilet. A toilet is reserved for staff use. Upstairs there are three public toilets one with a specially adapted bath located down the corridor from the sensory lounge. All the toilets presented clean with an adequate supply of soap and towels. Some had contrasting toilet seats and handrails.

## **Amber Green**

### **The lounges, dining and other public areas**

The home has a main lounge with a snug adjacent to it extending the seating arrangements. There is a small sensory lounge upstairs and a pleasant dining room next to the lounge downstairs. All these areas were clean, pleasant and comfortable. Chandeliers, ornate fireplaces, coving and furniture, along with low window sills with views to the gardens and the comfortable seating all contributed to a warm welcoming environment. The addition of a residents small dog and the

caged birds in the lounge increased the homely atmosphere. Representatives observed the seating arrangements in the main lounge had allowed residents to form small social groups whilst others opted to sit and rest. However, some residents indicated they would prefer to sit in the main area of the lounge rather than in the snug but there were not enough seats to be able to do this. One resident who representatives observed felt isolated from the other residents commented *“There are just these two rooms (lounge and snug) and if someone moves out of the main room someone goes in their place. I have to sit in here (the snug).”*

Representatives considered that the cluttered look of walking frames in front of the ornate fireplace and the visitor chairs in the snug diminished the homely experience. The team wondered if they could be located elsewhere when not being used, for example the fold up visitor chairs could be stored in the office area of the porch and offered to visitors when they came into the building.

We observed the dining room was also used for family and residents to socialise as there was inadequate space for privacy in the lounge. Some friends and family members commented that they struggled for private space. One respondent stated *“I do wish there was a quiet area downstairs as the upstairs lounge is too hard to use when help is needed with the toilet.”* Whilst another commented *“We use the dining room but it would be nice to have somewhere quiet for just us.”*

The dining room was as pretty and homely as the lounge with quality furniture, fireplace and décor. There were only fifteen places at the dining tables. Nikkita advised us that some residents take their meals in their bedroom and are seen to first. Other residents wish to stay in the lounge using an adjustable chair table. On occasions when more residents want to eat in the dining room, the home can then do two sittings. The dining tables were nicely set for a pleasant dining experience. There was no menu on display stating the meal choices for the day. Team members observed a member of staff asking each resident what they wanted from the choices for that day.

## **Amber Green**

### **Observations of resident and staff interactions**

There appeared to be enough staff on duty at the time of the visit. The names of the staff on duty were displayed on the orientation board in the hallway. The staff told us they felt they had enough people on the rota to deliver person centred care. Some respondents told us that residents without family would benefit from more staff being available to chat and do ‘one to one’ activities such as taking the residents out. The staff were observed to address residents using their first name and treated them with kindness and respect. Residents told us that staff were caring and attentive to the needs of residents. It was clear from observation that the staff on duty knew the residents and their individual interests and preferences. Teresa told us she personally sees every resident daily. Staff said they felt



supported by management in giving person centred care. During our visit staff responded quickly and proactively to residents requiring assistance.

A visiting nurse was observed to change a leg dressing in the snug of the lounge rather than taking the patient to the medical room or her bedroom. Representatives felt this did not preserve the dignity of residents.

The notice board did not have any scheduled activities or events on display at the time of our visit. Teresa showed us the activities diary used to plan daily activities which included hairdressing for the morning and the physiotherapist visit in the afternoon to do group exercises. The diary also evidenced other activities that had been planned such as pampering days, skittles, dominoes, cards, different genres of singing, and exercise sessions. We were informed that an Activities Co-ordinator will be starting soon. Teresa explained that not all residents wanted to join in activities some would like to rest or do their own activity and as a home they respected the individual needs of each resident. Representatives observed one resident colouring whilst others had gathered together to chat, welcoming the Healthwatch staff as their focus of attention. One resident commented “*please come again. I have enjoyed the chat.*” Residents and family suggested a greater use of volunteers to chat with residents, especially for those whose family could not visit frequently. Teresa informed us a nearby nursery and people from local churches visit the home. Some residents told us they were no longer doing the same variety or frequency of activities that they once did. Visitors told us they feel welcome to join in the activities at the home if they wish to do so. One visitor stated she uses the hairdresser services when she visits. Respondents informed us each resident has a “My Picture” in their bedroom to aid in their care and reminiscence.

**Green Amber**

## Feedback from residents

### Environment

*"I have only been here a few weeks."*

*"We have a good laugh. It is cleaned everywhere every day."*

*"I like it here."*

*"It's nice here. It's nice, comfortable, and clean. They do your washing and ironing too. I've no complaints. I don't do so bad in here."*

*"It's good here."*

*"I miss going out. I don't like things being moved (like the birdcage) it upsets me. I only have a small bedroom. There is not much room for stuff. Sometimes the cleaners move things and I can't find them or it goes missing."*

*"There are just these two rooms (lounge and snug) and if someone moves out of the main room someone goes in their place. I have to sit in here (the snug)."*

### Activities

*"They have the TV on."*

*"They have singing. My daughter has brought me a radio and my wife comes to visit. I look forward to that."*

*"There are all sorts of bits of things. I have a walk around and talk to friends. My relations are not far away."*

*"Plenty to do if you want to do it."*

*"There is a hairdresser every week. We have a singer. I go in the garden when the weather is okay. We do armchair exercises."*

*"We have a singer sometimes and do exercises."*

*"A singer comes."*

*"I used to do word searches and puzzles but don't now."*

*"Some of the singers are awful."*

*"More entertainment is needed." (A respondent asked we specifically log that comment)*

*"I don't do anything, I can't remember."*

*"There are no trips out here."*

*"We don't go out."*

*"Please come again. I have enjoyed the chat." (Resident asked us to record their comment.)*

## **Care**

*"I like the staff they look after me."*

*"I like the people."*

*"Very good. In a morning I need help."*

*"They are very kind and helpful. If you ask you get the help."*

*"They do look after you."*

*"The carers are okay."*

*"The carers are alright. Some are better than others. At night they come when you buzz (ring bell)."*

*"They are okay."*

*"You can get hold of someone at night - just press the buzzer."*

*"They get you up early in the morning at 6 a.m. as they have so many to get up and get ready for breakfast. You don't get to lie in. You need to go to bed early too. I used to stay up late but you can't here."*

*"Not all the staff are perfect."*

*"I don't always get my own way - which I don't like."*

## **Food**

*"Nice little sandwiches not plonked together. You have a choice. I like chicken which I am having today."*

*"I have very little taste but it looks nice stuff."*

*"The food is decent."*

*"The food is alright. You get a choice and you can get a snack as well. You get enough to eat. Some days the food is better than other days. You get a choice."*

*"The food is nice, it's alright you get enough."*

*"The food is nice but you can't please everyone. I like the steak pudding."*

*"Being diabetic but you get lots of sweet stuff. They say it's not made with proper sugar but....."*

*"The food is hard to chew sometimes."*

*"Not good."*

*"The food is rubbish."*

## Relatives and friends' views

### How do you feel generally about the service?

*"Very good. Everybody is pleasant and I feel mum is being looked after well."*

*"Mum is happy and she is compos mentis."*

*"Staff change a bit too much. People like the same carers to see to their personal care. They don't like it when they keep changing and they don't know who they are being seen by."*

*"Excellent. They are very caring."*

*"Good. We had a negative experience and moved our relative so you do notice things more and appreciate it."*

*"It's lovely and clean and warm; and nothing is too much trouble for them. The standards are high and the staff are so caring for my family member and for me."*

*"They could do with a rail along the upstairs floor like they have on the ground floor. It would be useful for those residents who don't walk easily."*

*"The lift is a squeeze to get in a resident with a walking frame."*

### Do you think that you are kept informed about your relative e.g. Health and future care plans?

*"Very well informed. Any problems they deal with it well. If she needed an ambulance she would get it. Quite happy we are informed."*

*"Yes I think so we are informed."*

*"Yes I think because it is a small home they know him well."*

*"They are good at getting specialists in. We had to change doctors which was a shame because the other GP Practice knew him well."*

*"Three pairs of glasses have gone missing. The optician said she will do an eye test so he can get a new pair free."*

*"Yes I am and I can always ring and ask if I want to know anything."*

*"When my family member was ill I was able to stay the night in a chair."*

### Do you know how to make a complaint if you need to?

*"Never needed to."*

*"If I have issues I see Sharon or Teresa and they deal with it adequately and timely."*

*"I feel I could come and knock on the (office) door anytime."*

*“Yes because of the last place where we complained.”*

*“Yes.”*

*“Yes I know the procedure.”*

### **Are you aware of the social activities at the service and do you feel welcomed to join in?**

*“Yes Christmas singers came in and we play games.”*

*“I take mum out as we live locally. She gets a lot but not everyone has family near.”*

*“They do seem to pair people up so mum has friends of her own in here which is nice.”*

*“Yes we don’t join in it’s a long way to come. They always tell us in advance such as the fireworks and they make a real fuss of the residents on their birthdays.”*

*“He is an outdoor man and they are going to make an enclosed area which is dementia friendly.”*

*“They bring children in from the nurseery which the residents love.”*

*“It would be nice to see some volunteers coming in to chat with the residents. Bring in some local news as well.”*

*“Volunteers to come in and chat with the residents would be a good idea especially for those whose family can’t get in often.”*

*“There are notices all around. The staff interact and play games. They are very good. My family member is encouraged to come and join in which I like as they are not very sociable.”*

*“I can even have my hair done when I come to visit - like today.”*

*“My family member and I used to go to have a massage at the local college. They loved it and the cost was low. Perhaps massages, manicures and hand massages could be done by volunteers or by those learning it as a job?”*

### **Would you recommend this service to others?**

*“Yes. They are improving the home all the time. The environment is improving rather than deteriorating. They have decorated, done the outside gardens and improved the parking areas.”*

*“Yes it is homely.”*

*“Yes they are so caring.”*

*“I do wish there was a quiet area downstairs as they need help with the toilet so the upstairs lounge too hard to use.”*

*“We use the dining room but it would be nice to have somewhere quite for just us.”*

*“Definitely. I did that just yesterday with someone I met while I was out. I would highly recommend it to anybody.”*

## **Staff views**

### **Do you have enough staff when on duty?**

*“Yes we have got a really good routine.”*

*“There are four staff on a.m. and three in the afternoon. If anyone calls in sick agency staff who have been here before are sent in to cover.”*

*“There is in the morning. I think there should be an extra member of staff in the afternoon we are just as busy.”*

*“Yes I feel alright.”*

*“Yes we have back up agency and everyone seems happy.”*

*“When we interview we look at the hours they are available and work them into the rota.”*

### **Do you feel supported to carry out person centred care?**

*“Yes we could sit with them more though if we had another member of staff on.”*

*“We do handmassaging and footspar, talking to them, reading and sitting with them.”*

*“We go into the grounds, take them the shops and chemist.”*

*“Yes if we have any issues we can talk to Teresa or Sharon the management team who will speak to the nurses or doctors.”*

*“We offer alternative menu’s. Some sit in quiet area’s so we work around them and what they want to do.”*

*“Yes if you ask management for help they will give it.”*

*“I feel we are able to see to the needs of our residents all the time.”*

*“I get to spend time with the residents in the morning. We work with them for lunch time taking food to rooms, in the lounge or to the dining table. It’s in our nature to look after them (residents) well.”*

*“Yes I do the medication round every morning and get to see every resident. A lot of our clients have COPD so we pick up very quickly if there is something wrong with their throat. Even the medical professions have commented how quick we are to pick up early signs.”*

*“It makes me proud all our service users are cared for.”*

*“I am on call all the time to help and support.”*

*“I feel that I know all of the residents.”*

*“Family support allows residents to do more than if they don’t have family support.”*

*“It’s great in summer they get to sit out and we do BBQ’s.”*

### **Do you feel you have enough training to carry out your duties well?**

*“Yes there is regular training every year over a three day period. Justin comes here to deliver it. I have done dementia moving and handling, safeguarding.”*

*“I feel there could be more dementia training.”*

*“I have done training but I haven’t done my NVQ’s yet.”*

*“Yes full training every January and throughout the year if we need it we just have to ask.”*

*“I have done NVQ level three. The management will put us through anything we want.”*

*“Dementia is mandatory. I do think we could benefit from hearing more from practitioners on dementia and other topics. A Parkinson nurse came in said she would be willing to do a talk. That would be good.”*

*“Yes I have done NVQ’s two and three. Team leader training, medication, first aid and safe handling and moving. I have done dementia training and worked in a dementia unit before coming here.”*

## **Are you happy working here?**

*“Yes there is good team work, the management are approachable and I can ask for more training.”*

*“Yes I enjoy the atmosphere. I am fully supported.”*

*“Yes it’s a small home and in the afternoon I can talk to the residents.”*

*“I have been here five years and it has gone fast.”*

*“I like my job. I’m really happy here, comfortable. It’s like home being with the residents.”*

*“I have been here a long time and I am proud of the team.”*

## **Would you be happy to recommend this care home to a close relative?**

*“Yes everyone’s good they know what they are doing and they like their job. The residents are happy. I do think we could do with more activities.”*

*“Yes we offer really good person centred care. The management will help with issues. It’s just a really good home.”*

*“Yes I always recommend it. Staff look after them (residents) like they are their own people. There is a family atmosphere. People are made to feel welcome, we give them a nice cup of tea, and we entertain them.”*

*“Yes we might not have a purpose built building but we give good care.”*

## **Response from provider**

Received by email 19th March 2019

Homes comment - we have informed all our visiting nurses that we have a privacy shield to maintain the dignity of any of our service users, who have expressed their choice to remain seated within the lounge area. We felt this was this best method to not only respect personal choice, but also maintain dignity and privacy at the same time.

Kindest regards

Sharon Saunders - Deputy Home Manager



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