

Hillcroft Nursing Home Slyne

Enter and View Report
Tuesday 29th October 2019
10:30am - 12:30pm



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:

Hillcroft Nursing Home
Throstle Grove
Slyne with Hest
Lancaster
LA2 6AX

01524 825328

Staff met during our visit:

Danielle Thompson (Acting Manager)
Gillian Reynolds (Director)

Date and time of our visit:

Tuesday 29th October 2019
10:30am-12:30pm

Healthwatch Lancashire Authorised Representatives:

Jeanette Newman (Engagement Officer Lead)
Michele Chapman (Engagement Officer)
Nick Colledge (Engagement Officer)
Lynn Yates (volunteer)

**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

Acknowledgements

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

General Information

Hillcroft Nursing Home is privately owned by Hillcroft Nursing Homes Ltd with forty eight places for residents. There was one vacancy at the time of our visit. The person in charge is Danielle Thompson.

Information obtained from carehome.co.uk states that the home provides care for people from the ages of sixty who are affected by old age or dementia.

Methodology

The Enter and View representatives made an announced visit on Tuesday 29th October 2019.

We spoke to eleven 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 eleven of the forty seven 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:

Hillcroft Nursing Home Slyne is one of six care homes in the Morecambe and Lancaster area run by Hillcroft Nursing Homes Ltd.

The home is set in a rural location on a main bus route just outside of Lancaster. It is not far off the new Morecambe Gateway giving easy access by car. There are ample parking facilities at Hillcroft which are on occasion used by people attending training days so visitors may need to park on the road outside. The town of Slyne and Hest has places to visit and eat.

Respondents informed us that activities for residents at the home had improved with much more happening now than previously. *“The stimulation for residents has got better over the last twelve months”*. *“The care staff themselves seem to have become more aware of the need for activities”*. We evidenced an array of activities being promoted around the home despite there being no activity schedule in place and no activity co-ordinators at the home. Gill, a director, informed us that staff are asked what daily activities are being conducted as part of the residents care plans for the day. Staff informed us they spend more time with residents now. We have shared Val’s story, as a former relative and now a volunteer at the home. She produces Life Books which help relatives and staff to get to know more about the residents’ life.

Healthwatch Lancashire representatives felt there were further opportunities to promote the benefits of exercise within the home. The team considered the beautiful grounds surrounding the building are inaccessible to people with mobility constraints as there are no level footpaths through the garden. Secure fencing around the ground would further give freedom of movement to people compromised with dementia to walk in the grounds without relying on others to take them out. A secured garden area by the Coniston unit was considered tired and lacking stimulation. It was felt this area would benefit from sensory garden features such as coloured rubber crumb pathways and waist high sensory features to encourage residents in their independence and ability to access stimulation, exercise and fresh air.

Representatives have considered an adaption to the toilet environment should be considered to give residents unrestricted access to the communal toilets rather than locking them.

The dining experience was generally considered to be good by most respondents. With one telling us he got corned beef too often and another telling us he didn’t get his favourite meal of curry. The home has kitchenettes in each of the units so staff can provide residents with meals and snacks when they do not want the food on the menu or they want to eat at different times.

Residents reported they are cared for by friendly staff who make them feel safe. Staff said they would recommend Hillcroft to their relatives or friends needing care. Respondents referred to their connection with the home as feeling as if they are part of the family.

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

Hillcroft Nursing Home Slyne is part of the Hillcroft group. It is one of six homes operating in the Lancaster and Morecambe area. There is an informative website and a facebook page for the group. A downloadable brochure is available from the website.

The facility is based in a rural location of Lancaster served by a convenient bus route. This enables staff to get to work. Sunday service staff can apply for help towards taxi costs from the home. There are two disabled access parking places available for visitors as well as ample parking places in front of the home. However parking spaces were full during the Healthwatch Lancashire team visit due to the adjacent Hillcroft training academy holding a training day. Parking was available on the road just outside the boundaries of the home which representatives used. Hillcroft is clearly signposted from the road with the Hillcroft branded logo.

Within the area of Slyne with Hest there is a Londis convenience store with a post office facility, and a pharmacy. There are two public houses 'The Lodge' and 'The Cross Keys' both offer drinks and food. Manor Tea Rooms is also within easy reach of Hillcroft. A post box is in situ on the road outside.

Green

The external environment

The building and gardens at Hillcroft are well maintained. Representatives felt the landscaping around the car park gave a welcoming cared for appearance. The open garden surrounding the building is hedged with privets affording pleasant views from residents' bedrooms as well as a measure of privacy from the roadside. It was observed however that in the absence of a solid pathway the garden area would not be easily accessible to residents and visitors with mobility constraints. It was further considered that the open aspect of the garden would mean residents compromised with dementia would need to rely on staff or visitor time to accompany them outside. A secured garden area by the Coniston unit of Hillcroft with seating and a pergola enables residents to get outside without the need to be accompanied. This area was mainly flagged and tired looking. It was felt by the team this area would make a pleasant sensory garden and that a rubber crumb surface would add colour and safety for residents; The area could then be utilised to encourage residents to get more fresh air and exercise.

A visitors' car park helped identify the entrance to the building. However representatives did not easily find which entrance they should use because the reception door to the nursing home is not signposted and is located next to the door to Hillcroft's training academy (which is signposted.)

Representative found the building to be secure, and the door was answered in a timely manner by a member of staff who was on reception.

Green

The internal environment/reception -first impressions

The reception of the nursing home was staffed on our arrival and we were made to feel welcome upon entering the building. The Healthwatch representatives observed another visitor entering the building who was also greeted in a friendly manner. The acting manager Danielle and operations manager Gill greeted us in a friendly confident manner. We found them to be welcoming and enthusiastic about the offer at Hillcroft's Slyne site.

A visitors' book is available to sign in and out and hand gel was available for our use.

There are up to date notices and information in the reception area which the Healthwatch Lancashire representatives felt to be transparent and relevant. The information included standard notices for safeguarding, the latest CQC report, a Hillcroft user guide, an album of activities that have taken place, graphical depictions of analysis of data such as accidents and incidents, and staff performance indicators such as attendance and turnover. There was no activity schedule on display. However there was a schedule for a singer coming to visit the home on a regular basis and other posters advertising a number of activities taking place during the Halloween season, such as pumpkin carving, spooky baking and Carolyn's Art Class. A weekly meal menu was not on display. The Hillcroft Mission Statement "Our aim is to provide a safe home from home, where all our residents are cared for as individuals and with dignity" and their Values Statement "Caring, Respectful and Committed" are prominently framed and displayed on the wall. The team felt this reflected their sense of importance to the home. Danielle, the acting manager, is identified in a notice as the person in charge. Representatives felt a photograph of Danielle would be useful to enable visitors to identify her in her role as the acting manager. Sara and Gill have been identified by photographs in their roles as the registered manager and nominated individual. Other staff at Hillcroft are identified on displays in each of the three units of the home that they work; by photograph, name and role as well as wearing different coloured uniforms. Representatives felt the displays placed in the units to be user friendly for visitors and residents.

Representatives considered the environment to be clean, homely, friendly and inviting. A sweet trolley dressed in the Halloween theme was prominent in the reception where visitors, staff and residents could make purchases. It looked attractive and gave an opportunity to raise funds towards the homes activities. The rest of the reception area carried on the Halloween theme. The Poppy appeal was also on display. As well as tub chairs and coffee tables in the foyer there is a supply of reading materials available from a bookcase in the foyer area.

Green

The observation of corridors public toilets and bathrooms

There is signage on the corridors identifying the three units of the building as Windermere, Ullswater and Coniston which aids navigation for residents and visitors. However representatives observed little in the way of helpful picture signage throughout the building. It mainly consisted of steel plate signage with wording or numbers for communal areas such as showers, toilets and bedrooms. Bedroom doors are painted in various primary colours with the name of the resident, a steel number plate and in some instances there is a person centred summary sheet on the door to aid carers entering the room. This has the residents preferred name, likes and dislikes. The team observed there was no personal or reminiscence items helping residents identify their room. The décor of the corridors floors and walls appeared tired and dated in places. Wooden varnished handrails are in place throughout the corridors which contrast with the walls and aid mobility for residents. There was no discernible malodour in any of the communal areas. An old style telephone and poster of a red telephone box made good use of the nook in a corridor. However the wheelchair and walking frame being stored in front of the display distracted the eye.

Generally the corridors were uncluttered making a safe passage for residents to pass through. There were some hoists, wheelchairs and walking frames left in the wider areas of corridors but these looked neat and orderly.

There are sufficient communal toilets on each of the units located in the corridors by the lounges. There were no contrasting toilet fittings or handrails in the toilets which are considered to be dementia friendly adaptations. All the bathroom and toilet areas we observed were clean with an adequate supply of soap and towels. Representatives observed the toilets to have coded locks restricting residents' access to them without the assistance of carers. A member of staff explained this was to prevent residents going in to the toilets alone and putting pads down the toilet causing a blockage. Representatives saw shelving above one of the toilets being used to store pads; we felt this made them accessible for residents to place them in the toilet pan so the storage of these pads would be better housed in a cabinet behind closed doors. It was felt the hygiene bin would benefit from a pictorial explanation that it is to be used for soiled pads. Representatives felt the toilet environment should be adapted to meet the needs of the residents and this should include access to toilets as the norm.

Amber

The lounges, dining and other public areas

Each of the three units has a self contained lounge diner area for residents, with a kitchenette for staff use. These areas are considered clean, pleasant and homely. During the Enter and View visit we observed each of the units had been decorated for the Halloween event. Gill informed us the staff and residents compete each year for the best Halloween themed unit. There are a variety of chairs in each unit to suit residents needs including vinyl covered armchairs and recliners. The furniture is arranged in each of the units to encourage social interaction whilst also allowing residents to sit in their own 'corner'. One of the 'corners' was themed as a sixties style parlour with vintage furniture and best china on display in a cabinet. Some residents were observed to move around the lounge diner area in order to join others or to watch TV. An orangery or a separate room is provided in each of the units to provide a quieter space for residents. The orangeries were also themed for Halloween but had the addition of fresh and silk flowers which we felt to be pleasant and homely. During our visit we observed residents listening to music in the orangery whilst residents in the lounge were watching TV and residents in the dining area were listening to music from another TV placed at the opposite end of the room. The mix of sounds from the different area in the open plan room did not appear to disturb other residents. There is also a quiet room by Coniston which can be used by visitors.

There did not appear to be ample dining tables within the units for all the residents. However a relative commented positively about the dining arrangements they had observed. *"You (residents) can have meals with the other residents or in your own room."*

The dining room tables were covered in pleasant tablecloths and covers but not prepared with crockery during our observation. In the Windermere unit some of the tables were set back against the wall and too close to each other to be used without being moved. The team felt the tables looked cluttered and distracted from a homely feel. Danielle informed us the residents have a choice where to sit and many residents would prefer to use individual chair tables to eat their meals from. Other residents may be sat apart in order to avoid incidents.

Each unit has its own daily menu on display with a choice of options listed for the tea time meal. Danielle said the kitchenette comes in useful on each unit as not all residents want to eat the meals on the menu or at set mealtimes. Staff will prepare something for the residents when it is required. Hillcroft has a rolling four weekly menu which was not on display. Residents spoken to were generally positive about the meals. However one resident thought they get the same meal too often (Corn Beef Hash) and another told us they don't get their favourite meal (curry).

Menu on display
Lunch
Soup: Leek & Potato
Main: Corned Beef Hash
Soft option: Corned Beef Hash
Sweet: Rice Pudding
Tea
Main 1: Fried Egg
Main 2: Sausage Bun
Soft Option: Thick Soup
Sweet: Fruit Cheesecake
Supper
Fairy Cakes

Green

Observations of resident and staff interactions

The team observed there appeared to be enough staff on duty. A number of call bells went off for residents needing assistance. The team observed these were answered quickly. Staff were observed talking to and interacting with residents frequently in a respectful manner using their names when addressing them. Similarly, staff were observed holding a residents hand or sitting next to them to reassure them with their presence. Residents appeared calm and happy, even in the Coniston unit which is designed to support residents who present with challenging behaviour. Two relatives spoken to by representatives praised the staff at Hillcroft for the way they had dealt with their relatives challenging or aggressive behaviour. One held the opinion that another care homes staff did not have the skills the staff at Hillcroft have (dealing with their relatives challenging behaviour). Danielle advised us that when residents have nothing to do they get frustrated so they try to keep residents engaged in activities to prevent challenging behaviour.

During the visit the team observed activities are taking place at Hillcroft. In reception there is an album containing a record of activities and trips out for residents. All three units of the home and the reception area have been prepared with decorations and activities with a Halloween theme. Staff informed us they are taking part in a competition between the units as to who creates the best display. Halloween themed activities were planned for Halloween such as pumpkin carving, baking and art classes. These have been promoted in the foyer area for relatives and friends so they can join in if they want to and respondents told us there are more activities taking place now than have been in the past. There is no weekly or monthly activity schedule in place; however there is a recreational therapies diary. As well as art classes there is dog therapy and trips out. Gill informed us that Hillcroft are considering the employment of two activity co-ordinators to increase activities, adding every unit delivers activities as part of their daily person centred care plans. During our visit we observed a member of staff working with a small

group of residents doing a colouring activity. Music had been selected on the TV to play in the background. Some other residents were relaxing in the orangery listening to a fifties style CD player. Artwork on the wall, pencil coloured pictures, a memory tree and fifties collage were evidence of residents being stimulated through activities. One family member commented they had been concerned about the lack of activities but felt it was much better now as there were singers coming in and trips out as well as arts and music. Representatives did not observe evidence of residents taking part in exercise programmes. We were also informed only a few residents help with tasks, one who folds some laundry items and another uses a cleaning cloth. It was felt by representatives there is a need to promote physical activities within the home and access to the outside gardens should be encouraged.

During the Enter and View visit we met a volunteer for Hillcroft who has taken on the role of producing person centred 'Life Books' which we were told staff could use to learn more about residents in order to know them better and talk to them about their past and their interests. Val, the volunteers' experiences are recorded below however, there did not appear to be a focus on person centred items such as personalised doors or memory boxes.

Representatives felt more could be done to the hairdressing salon to give a better experience as it was basic without reminiscence or meaningful décor.

Green

Additional information

During the Enter and View visit the management was asked about the availability of Wi-Fi for residents. We were informed the Wi fi network is only available through staff. However, representatives felt that (looking to the future) it would be beneficial if residents were offered the option of Wi fi.

Feedback from residents (This includes one resident being assisted by a relative to give feedback)

Environment

"It's alright so far."

"People are better. It's settled down now and I know one or two people."

"I mix with nice people. I have to mix. I have a room with a bathroom and a portable telly."

"My room is nice I have a TV and a chest of drawers."

"I have a TV in my room."

“I like it here; I have a nice view of the orchard.”

“People are very friendly here.”

“I like it here - everyone is very nice.”

“There is a quiet pleasant room for visitors. It does not have a TV on so you can talk there. There are two Hostesses who bring round drinks and snacks. My husband has a small bedroom but that is good because he has a lot of falls and there are things to hang on to in a smaller space. The staff are good at cleaning. Also there are no smells.”

Activities

“I go along with what’s going on.”

“I like going out on trips.”

“We break into groups for things then we break up into further groups, say of six. There are films. We have been making things for Halloween.” There was some music on and this resident said “I like to sing along to this.”

“I like soaps on TV.”

“I watch TV.”

“I use YouTube and the iPad to listen to the Tennessee Waltz.”

“The stimulation for residents has got better over the last twelve months. There is Geoff the Music Man and two ladies called the Bluebirds, who dress in uniform and sing. I noticed that one resident who was always asleep, woke up and sang along with the chorus. She knew the words and really enjoyed the music. The care staff themselves seem to have become more aware of the need for activities. Three years ago I was quite worried that there was little going on. Staff had the idea of putting the sweet trolley in the foyer. It is more welcoming for all. They make cakes for birthdays and provide a present and do different things at Easter and other times throughout the year. There is a mini bus which takes them to the shopping centre. I feel better about it now.”

Care

“They help me in a morning.”

“They are nice.”

“I feel really comfortable. I have made friends.”

“I like the staff they are friends with me.”

“Oh yes they are kind to me.”

“I feel safe.”

“Oh yes I feel safe.”

“My husband has a good wash every day and a shower once a week. There are two care shifts and they have good teamwork. There are generally enough staff. It has been better in the last six months. I do watch what goes on.”

Food

“I am not sure what we are having today.”(The representative went to find out and then told this resident what it was).

“It’s not bad at all. I like most things.”

“My favourite is roast dinner.”

“Its corned beef hash everyday.”

“I like curry but I don’t get it.”

“I like sausage and egg.”

“I like corned beef hash.”

“Oh yes I like everything.”

“We get good food.”

“I like stew.”

“It is quite good and the staff provide plenty of drinks. I have noticed that he hasn’t had any water infections since he came here. At lunchtime there is a choice of soup, main course and sweet or sandwiches. You can have meals with the other residents or in your own room.”

Relatives and friends’ views

How do you feel generally about the service?

“On the whole I am very happy with it.”

“My husband is very ill but he can make his feelings known such as if he doesn’t want a wash or shave. He did have an aggressive time and they handled it well. If he is hurting he tends to be more physical. The last care home was not equipped to deal with that, whereas they are here. I have to have a lot of trust in his care. I come every second or third day, say three times a week and at different times so I know he is alright. He has to have soft food and thickened drinks and I can help him eat at the odd meal time. I like to do it and it helps the staff.”

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

“Yes they are good at keeping me informed. There is a tremendous family feeling. They treat me as part of it and I feel supported. My wishes are listened to.”

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

“Yes I do.”

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

“There are musical things to join in with but most of the other things my husband couldn’t do as he is so poorly.”

Would you recommend this service to others?

“Yes certainly. I do all the time.”

Val shares her experience as a former relative and now as a volunteer



Val volunteers at Hillcroft Nursing Home on the Windermere Ward. She became a volunteer as a result of being a regular visitor to the care home, when her sister was a resident. Val said that her sister had been a resident for around four years until her passing. Her sister had vascular dementia and Alzheimer's.

“My niece and I visited about eleven care homes in the area to find one that was suitable for my sister. We decided on Hillcroft after it was suggested by social services, who secured a place for my sister. On our first visit we felt it was welcoming and appeared to be well-informed. Once she got here it ‘just felt right’. There was vibrancy about the place. She was happy here ... although I’m not sure that the staff were happy with her always (laughing). She was very naughty climbing on the windowsill, re-arranging the furniture and cleaning (or attempting to clean). She would have done the washing-up, if they’d let her. She had been very house proud before she was ill.”

“In her first year at the care home my sister was happy to get involved and walked miles around the unit, but as her health deteriorated with her condition she was less interested and preferred to read magazines which we brought along for her. By the second year she would recognise us although she didn’t always know what the connection was. We were always greeted with a smile of recognition.”

“The staff work extremely long hours. I don’t know how they do it. I have nothing but credit for them, they were wonderful - always caring - however busy they might be. They took all Joyce’s naughtiness in their stride

Any improvements?

“One of the things we wanted was more activities - there was a lack of activities for residents. Clients were just sat in chairs - maybe watching TV. Carers didn’t have the time. I’m now delighted to say that this has been addressed - the residents now have all kinds of activities, from cake-making to colouring and games. The Windermere unit make a great play of everyone being part of ‘the family tree’ (displayed on the wall). There have been massive changes since 2016, all credit to the care home. With every celebration event all the units are decorated - they do an excellent job”.

Val's Role as a volunteer:

"After my sister's experience at the care home, I wanted to give something back, as they work so hard. In particular, I was keen to work in this unit (Windermere) as this is where my sister was. I usually do one or two days every week"

"My role includes talking to clients, helping with feeding, making cups of tea etc. Sometimes you have to lead the conversation with the clients - I'm convinced that they recognise me. You do become part of the family. I don't provide additional care support and if there is anything I am concerned about then I check with the senior carers."

"My niece and I used to bring new clothing gifts for my sister, and when she passed away we were keen that this should be re-cycled within the home. I now see different residents wearing them. This is both sad and nice at the same time. Many residents don't have many things and don't have many visitors - that's very sad too. Some people don't visit their loved ones - although in some cases some of the residents don't have any close family members who can visit".

"One of my key functions as a volunteer has been to talk to relatives and to create life books for their family members. I have really enjoyed making the books with the families. The life books help to create a picture of the person and how they were prior to getting dementia." Val felt that creating the books was very therapeutic for the families. "The life books are a fairly recent development - so far I have been involved in six or seven books and we currently have another four books on the go". The life books have also been very beneficial for the staff, "At a meeting, one staff member said 'I just wish I knew more about this person' - at that point staff weren't aware of the life books, now they are! I'm pleased to say that the life books are now included in the care plan".

In terms of being a support to relatives visiting their loved ones, Val said, *"I can't do anything about the dementia that their loved ones are experiencing but I can help make the journey easier (for the relatives) as I've already been there and know some of what they are going through and how difficult it can be. I can see when family and relatives have particular needs. Sadly I think I am the only volunteer to date but assisting in whatever way I can is important to me and I can hopefully help others."*

Staff views

Do you have enough staff when on duty?

“There has been an improvement recently.”

“We need a minimum of two people it depends.”

“Not always but when we are everything goes very well”

Do you feel supported to carry out person centred care?

“Yes I get the opportunity to engage with residents in groups and one to one. We go out to the pub sometimes.”

“Yes, we are greatly encouraged to do so.”

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

“Yes, I am encouraged to train.”

“I have been trained I have just finished my training.”

Are you happy working here?

“Yes, I have been her for 6 years.”

“Yes, I am usually happy.”

“I am happy here I have worked here for six years.”

“The management don’t seem to mind if they lose good staff.”

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

“Yes, my Nanna is in the Morecambe Hillcroft.”

“Oh yes, absolutely.”

“Yes, it’s probably amongst the best.”

Response from the provider 09/01/2020

Page no and section	Comment	Action	Timeline
4 & 5: Summary/External environment	The team considered the beautiful grounds surrounding the building are inaccessible to people with mobility constraints as there are no level footpaths through the garden.	We have discussed with our MD this morning 08/01/2020 a plan for a more even footpath through the garden.	February in time for Spring dependent on contractor's availability.
4&5: Summary /External environment	Secure fencing around the ground would further give freedom of movement to people compromised with dementia to walk in the grounds without relying on others to take them out. It was further considered that the open aspect of the garden would mean residents compromised with dementia would need to rely on staff or visitor time to accompany them outside.	Residents will always require accompaniment and supervision from staff/relatives when in the garden. We have had instances where residents have eaten foliage, soil or indeed any object small enough to fit in the mouth. The level of supervision outside does not vary from that required inside the home. It is risk assessed proportionate and documented.	N/A
5: External Environment	We did not observe benches in the open garden area to encourage residents and visitors to sit out.	This is factually incorrect as there are benches in the garden areas both back and front.	N/A
5: External Environment	A secured garden area by the Coniston unit of Hillcroft with seating and a pergola enables residents to get outside without the need to be	The residents still have supervision whilst outside, a member of staff will remain present to watch. The planted area needs attention for the spring summer and	February in time for Spring dependent on contractor's availability.

	accompanied. This area was mainly flagged and tired looking.	we have had discussion about raising the central bed and having sensory/stimulating items.	
4 & 7: Public Toilets and bathrooms.	Representatives observed the toilets to have coded locks restricting residents' access to them without the assistance of carers. A member of staff explained this was to prevent residents going in to the toilets alone and putting pads down the toilet causing a blockage. Representatives saw shelving above one of the toilets being used to store pads; we felt this made them accessible for residents to place them in the toilet pan so the storage of these pads would be better housed in a cabinet behind closed doors.	The explanation given regarding the reason why the doors are locked is not wholly correct. We restrict access to prevent flooding by leaving taps running in sinks, residents drinking out of toilet bowls and eating toilet paper products. All our residents need assistance whilst using the toilet /bathroom facilities.	N/A
6: Reception area	Sarah and Gill have been identified by photographs in their roles as the registered manager and nominated individual.	Sara (no H)	
7: Corridors. Public toilets and bathrooms.	However representatives observed little in the way of helpful picture signage throughout the	We have discussed this as a management team and we will improve signage and dementia friendly adaptations.	January and ongoing improvements.

	<p>building. There were no contrasting toilet fittings or handrails in the toilets which are considered to be dementia friendly adaptations</p>		
<p>8: Lounges dining and other public areas.</p>	<p>There did not appear to be ample dining tables within the units for all the residents. The dining room tables were covered in pleasant tablecloths and covers but not prepared with crockery during our observation</p>	<p>Tables and seating is sufficient given that all residents do not sit at the table and need room to wander if they wish, Residents can and do eat in their armchair or in their own rooms and we have staggered service dependent on needs. Cutlery cannot be left out as it would be removed and presents a safety risk.</p>	N/A
<p>8: Lounges dining and other public areas.</p>	<p>Hillcroft has a rolling four weekly menu which was not on display.</p>	<p>We do not have a default Hillcroft menu. The menus vary home to home and unit to unit dependent on choice. We will prepare a sample menu to be displayed in reception for visitors at Slyne.</p>	<p>January following the latest update soon to be completed.</p>
<p>8: Lounges dining and other public areas</p>	<p>However one resident thought they get the same meal too often (Corn Beef Hash) and another told us they don't get their favourite meal (curry).</p>	<p>Enclosed is a sample of the existing menu which displays the option for curry on Saturday. Corned beef hash appears once.</p>	

Healthwatch Acknowledgement 09/01/2020

5: External Environment	We did not observe benches in the open garden area to encourage residents and visitors to sit out.	This is factually incorrect as there are benches in the garden areas both back and front.	N/A
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This comment has been removed from the substantive report.

6: Reception area	Sarah and Gill have been identified by photographs in their roles as the registered manager and nominated individual.	Sara (no H)	
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This has been corrected on the substantive report

Food

Unfortunately, I am unable to change comments received from respondents, but I appreciate you sending a menu illustrating the frequency of “corned beef hash” and the availability of “curry.”

Thank you for the comments in the plan above and for clarifying the points we raised.

These will be published in full with the final report.

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