



## **Ferndale Mews**

Widnes

16<sup>th</sup> January 2018

**Enter & View report**



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## ACKNOWLEDGEMENTS

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Healthwatch Halton would like to thank the management, staff and residents for their time and consideration during our visit.

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## WHAT IS ENTER & VIEW

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People who use health and social care services, their carers and the public generally, have expectations about the experience they want to have of those services and want the opportunity to express their view as to whether their expectations were met.

To enable the Healthwatch Halton to carry out its activities effectively there will be times when it is helpful for authorised representatives to observe the delivery of services and for them to collect the views of people whilst they are directly using those services.

Healthwatch Halton may, in certain circumstances, enter health and social care premises to observe and assess the nature and quality of services and obtain the views of the people using those services. In carrying out visits, Healthwatch Halton may be able to validate the evidence that has already been collected from local service users, patients, their carers and families, which can subsequently inform recommendations that will go back to the relevant organisations. Properly conducted and co-ordinated visits, carried out as part of a constructive relationship between Healthwatch Halton and organisations commissioning and/or providing health and social care services, may enable ongoing service improvement. Healthwatch Halton's role is to consider the standard and provision of local care services and how they may be improved and to promote identified good practice to commissioners and other providers.

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## VISIT DETAILS

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Centre Details	
Name of care centre:	Ferndale Mews
Address:	St Michaels Road Widnes Cheshire WA8 8TF
Telephone number:	(0151) 495 1367
Email address:	FerndaleMews.manager@hc-one.co.uk
Name of registered provider(s):	HC-One
Name of registered manager (if applicable)	John Holland
Type of registration:	Nursing Home
Number of places registered:	34

The Enter and View visit was conducted on 16<sup>th</sup> January 2018 from 10.35am to 11.30am

The Healthwatch Halton Enter and View Team were:

Matthew Roberts, Sue Parkinson & Mike Hodgkinson

### Disclaimer

Our report relates to this specific visit to the service, at a particular point in time, and is not representative of all service users, only those who contributed.

This report is written by volunteer Enter and View authorised representatives who carried out the visit on behalf of Healthwatch Halton.

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## SUMMARY

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Ferndale Mews is a purpose-built care home in Widnes. It provides support and care for older people with dementia or enduring mental health conditions.

The staff were friendly, warm and welcoming with the residents and our team members, although it seemed during our visit that the staff were constantly busy and appeared at overstretched at times to meet all the needs of the residents.

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## OBSERVATIONS

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### **Location, external appearance ease of access and parking**

Ferndale Mews is a purpose-built care home in Widnes run by HC-One and primarily caters for older people with dementia or enduring mental health conditions.

The home is situated off St Michael's Road and was easy to find. It was clearly signposted once we'd turned in from St Michael's Road. The car park isn't large, but we were able to park in the one of the two remaining free spaces.

### **Initial Impressions (from a visitor's perspective on entering the home)**

Entry to the Home is accessed using a doorbell which was answered promptly by the Manager, John Holland. The entrance porch to the building is welcoming with plants and a signing in book. There were some leaflets on display (though none about Healthwatch) and the CQC March 2017 report was clearly visible. Beyond the porch, via secure doors, was the main reception area, which featured comfortable armchairs and was described by the Healthwatch Team as *"very pleasant, very spacious, with a coffee shop feel"*. There were notices on the wall, including an activity calendar with pictures and a TV screen. Music was playing softly in the background.

The home considers itself to have *"an outstanding reputation for supporting residents with dementia or mental health issues"*. Ferndale Mews is registered for 34 residents and currently has 32 residents in place. There is a Residential Unit on the ground floor and a Nursing Unit on the first floor, with 17 en-suite bedrooms on both floors. All residents are assessed before they are assigned to a unit. There is also a secure garden to the rear of the building.

## Internal Physical Environment

Members of our team were given the opportunity to tour the Home. The home has two floors (Residential Unit and Nursing Unit) with a residents lounge on each floor. The home has a lift for residents. The lounges on both floors were well decorated and clean. Each of the residents' room was en-suite. The manager, John Holland, stated that residents were free to decorate their rooms to their own tastes and that the home's maintenance man would support residents to do this if their family were unable to help. Ferndale Mews operates a schedule of maintenance to keep the building feeling fresh. Each private room has the name plate of the resident by the door. This is important as a resident who had arrived that day could not find her room as the nameplate had not been made up. Personal information can be added in a box on the ground floor rooms only. Residents with more severe problems live on the upper floor and have damaged the boxes which had been provided. The shared areas, toilets and bathrooms which we observed were all clean and tidy.

## Staff support skills and interaction

John Holland explained that each resident's needs are assessed using a dependency assessment tool (which is operated by Carers in the home). Staffing levels are worked out based on the results. Usually, the staffing levels are as follows: During the daytime the Residential Unit has 3 members of staff (a Senior and 2 Care Assistants) whilst the Nursing Unit has 5 members of staff (a Nurse and 4 Care Assistants). During the night the Residential Unit has 2 members of staff (2 Carers) and the Nursing Unit has 3 members of staff (a Nurse, a Carer and a Twilight who works from 8pm till midnight).

During the tour of the home, members of the staff team at Ferndale Mews spoke to our team members. Two Carers stated that whilst the Deputy and Manager are really supportive and prepared to help out when they can, the Carers haven't got the capacity to meet the needs of the residents in their care.

Staff also commented that on many occasions they are so busy that they miss their breaks, or work for hours until there is cover to take a break. Members of the HW Halton team witnessed residents at 11.00am who were still in their night clothes and had not had their breakfast (as the staff had not the time to meet all their needs). The manager has since informed us that *'this lady gets up at 11am each morning this is her personal choice and this is called person centred care giving resident the autonomy to make choices in their own lives, this is also identified in her care plan as this is her preference and agreed in a care review with the resident and her family.'*

One member of our team commented: *"I met a new resident who was confused about where her room was, and was clearly unfamiliar with both the setting and the routine her new environment. To see her wandering around the building was distressing to witness."*



Throughout the visit, the team observed that interactions between staff and residents were calm, friendly and dignified. We also witnessed a relative of a former resident delivering chocolates to the staff team to thank them for the fantastic care they had provided for his late mother.

The training needs of staff at Ferndale Mews are logged on computer software called Touch E-Learning. This software allows the manager to have an overview of the training requirements of every member of staff. It provides them a personalised plan for every employee and sends reminders to the manager when training needs revisiting. Examples of the topics covered in the training include: Emergency Procedures, Fire Drills, Food Safety in Care, Health & Safety, Infection Control, Manual Handling, Safeguarding, Safer People Handling, Understanding Equality & Diversity and Deprivation of Liberty Safeguarding & Mental Capacity Training. Staff members can log on at home to complete training, but they are not paid if they complete training at home. If they use the Training Suite on site to complete training, they will be paid. John looks to external trainers if they are required. Catherine Sephton will be visiting Ferndale Mews to deliver training on IMCA (Independent Mental Capacity Advocacy).

### **Residents' social and emotional and cultural welfare**

Ferndale Mews employ an Activities Coordinator for 5 days a week. Activities on offer at Ferndale Mews include: Dementia Café with Widnes Vikings, a Pub Night (with real alcoholic drinks) on Friday nights, Quiz Nights, Reminiscence Groups in the Conservatory and one-on-one reminiscence activities with individuals (showing them photos on a tablet which are relevant to their lives). The various activities are displayed on a pictorial calendar which is easy for residents and guests to understand. John explained that the home has invested in some TV display units which will show the activities calendar and photos of previous activities. Singers (like Rob Steel or Freddy Lloyd) regularly visit the home (usually twice a week) and there is a local Bishop who also brings a choir to Ferndale Mews. The home tries to involve local schools and the children of St Michael's Catholic Primary School visit to sing Carols at Christmas and sing hymns at Easter. The homes share a bus with Ferndale Court. It is mainly used for shopping trips and outings to places like Southport. If residents want to leave the home to access local shops or services, staff will accompany residents on trips to the local corner shop. They occasionally make the trip in order to buy a newspaper. The outdoor garden looks well set out, and is used in fine weather some residents do get involved with gardening tasks.

Residents can access a hairdresser via a lovely, on site Salon. A hairdresser works from inside the salon every Monday and residents pay for haircuts. Carers (Care Assistants) can access the salon whenever they like and take residents in to do their hair or nails. This can be a fun and therapeutic activity for residents.

The Home has not adopted the Herbert Protocol<sup>1</sup> if a resident leaves the home unsupervised since Ferndale Mews has its own Missing Persons Protocol, which it would follow in the event that this happened. Manager John Holland stressed that a resident could not leave the home unsupervised though.

Church services are held on a regular basis in the home to try and meet the spiritual needs of residents. Clergy will also visit the home when requested to deliver the Last Rites.

### **Resident's physical welfare**

Medication is administered by a trained Nurse on the Nursing Unit and by a trained Senior Care Assistant on the Residential Unit. John explained to me that his staff don't wear the red tabard (which can often be seen at other care homes) as it distresses residents and can create a "magpie effect", meaning that the Nurse or Senior is surrounded by residents. This is the exact opposite what the tabard should do and it also puts the Nurse or Senior at risk.

The home receives medication from Boots Pharmacy. GPs visit the home every Monday (for a ward round). They send scripts to Boots, who then deliver the medication. There has been the occasional hiccup with the pharmacy from time to time, but generally it has been ok.

Manager, John Holland has been very clear to the local hospitals about admissions to Ferndale Mews. In the past they have tried to place men or women without a diagnosis of dementia in the dementia unit. John said he will not allow this to happen. Occasionally, information has been lost during the hospital admission and discharge process, but the launch of the Red Bag initiative has led to less information going missing. This includes DNAR forms (which have been lost in the past). Thankfully the home has had no problems getting them reissued by GPs.

Carers don't always accompany residents when they go to hospital. If the resident has a planned hospital appointment, the home gives the family the option of attending with them. If the resident goes into hospital when it's an emergency, the home inform the family but accompany the resident.

If the residents have joined the home from outside of the area, they have to register with the GP practice which the home assigns to them. Residents on the Nursing Unit are assigned to Upton Rocks, while those on the Residential Unit are assigned to Oaks Place. Some families are resistant to changing GPs, but they have quickly changed their minds after seeing how well the weekly visits work.

Ferndale Mews preferred opticians are Vision Care and their chiropody services are provided by NHS Chiropodists. Vision Care visit the home on a regular basis and see residents in their own rooms. The NHS Chiropodist sees every resident once every 16 weeks.

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<sup>1</sup> The Herbert Protocol is a national scheme being introduced locally by Cheshire Constabulary and other agencies which encourages carers and family members to compile useful key information which could be used in the event of a vulnerable person going missing.



Families are made aware that they can book in a private chiropodist to see residents if additional support is required.

Dental Services are provided by Dr Yip (a local dentist) who comes regularly to the home and sees residents in their own rooms. There have been no problems accessing dental care for residents. Residents teeth are assessed before they join the home as part of the initial 7 Day Care Plan and the staff at Ferndale Mews are trained to use the Abbey Pain Scale Assessment Tool. This enables them to identify if residents are in pain by studying (amongst other things) their facial expressions, posture and behaviour.

Meals can be provided for residents with special Dietary Needs health related conditions (such as Diabetes) and residents can chose alternative meals if they don't like what is on the menu. The kitchen staff are always happy to provide meals on an individual basis.

The residents' physical welfare is also improved by chair based exercises and participation in tea dances.

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

Family meetings are held on a monthly basis, however, they are not well attended. Perhaps this is because Manager, John Holland operates an 'open door policy' where families can visit him whenever they want. This means that families can provide feedback as and when required in a private conversation, rather than waiting for the monthly meeting.

A copy of the complaints process is displayed in the reception. Due to the home's open door policy, which leads to dialogue and conversation between the home and resident's families, we were told that it's very rare that formal complaints are made. Resident's care plans are reviewed on a monthly basis. The home initiates a Care Review with the families every 3 to 6 months.

We chatted with one of the relatives visiting the home who informed us that her mum had been in Ferndale Mews for a few years, and she was very happy with the care that her mum received. She did say she can see they are pushed to the limit, but that their caring manner and always wanting to help makes up for it.

Ferndale Mews doesn't have an overnight room for a family if a resident is extremely ill, but families are welcome to stay with residents in their rooms if they wish to do so and the staff will try to make them comfortable. There is a quiet room conservatory on the ground floor and it is often used by residents to meet visitors outside their personal private room, or in the other seating areas creating privacy.

At the end of the visit we thanked the manager, staff and residents for answering our questions and showing us around the Home.

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## RECOMMENDATIONS

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1. During our visit, a resident who had arrived that day could not find her room as the nameplate had not been made up. We would recommend that room signage for new residents is in place in time for their arrival at the home. This would aid new residents in settling in to the home.
2. During our visit, staff commented that they sometimes miss out on their breaks as they are so busy. We also witnessed some residents who were still waiting to be dressed and have breakfast at 11am due to the staff being busy. We would recommend that the home reviews staffing levels to ensure there are enough staff on duty to meet the needs of residents, particularly in the mornings.

Healthwatch Halton has statutory powers and responsibilities under the Health and Social Care Act 2012, the Local Healthwatch Regulation 2012 and the Local Healthwatch Organisations Directions 2013 section 5.

Providers and commissioners of health and social care services are required to respond to our requests within 20 working days by:

- Acknowledgement of receipt of the report or recommendation in writing;
- Providing (in writing) an explanation of any action they intend to take in response, or if no action is to be taken, to provide an explanation of why they do not intend to take any action.

Healthwatch Halton are required to report if any providers/commissioners have not provided a response within the required timeframe; this information will be included in our Annual Report.

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