

Fairleigh House Care Home

Enter and View Report

Contact Details	34 Wellington Rd, Whalley Range, Manchester M16 8EX
Visit Date and Time	05/04/2023 10am-12pm
Healthwatch Manchester Representatives	Thomas Carr (HWM Staff) Lyndsey Norman (HWM Staff)



Disclaimer

This report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

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Recommendations

To improve the atmosphere on arrival at the care home, a welcome sign should be installed which would help a visitor feel more welcomed.

The ramp on the front of the building and stairs at the back of the property should be signposted with wet floor or 'slippery' signs as to avoid the risk of accidents in bad weather.

Residents' rooms, staff areas and bathrooms were not signposted at all so it was confusing for HWM staff to navigate the building. Signs should be placed on these doors as soon as possible.

Although we were informed that a new food menu had been created, there was no visual evidence of any food menus in the kitchen or in the home. These should be placed in a communal area for residents, visitors and staff to be able to view when needed.

Feedback forms should be available in the care home, ideally at the front entrance, for residents, family members and other visitors to the home to use.

There should be photographs of the staff members at the entrance, for example on the clock in cards, so visitors know who the staff members are and what their job role is.

About us

Healthwatch Manchester is the independent consumer champion for health and care. It was created to listen to and gather the public's and patients' experiences of using local health and social care services. This includes services like GPs, pharmacists, hospitals, dentists, care homes and community based care.

Emerging from the Health and Social Care Act 2012, a Healthwatch was set up in every local authority area to help put residents and the public at the heart of service delivery and improvement across the NHS and care services.

As part of this role Healthwatch Manchester has statutory powers to undertake Enter and View visits to publicly funded health or social care premises. These visits give our trained authorised Enter and View representatives the opportunity to observe the quality of services and to obtain the views of the people using those services.

What is Enter and View?

Local Healthwatch representatives carry out Enter and View visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act 2012 allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers in premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but equally, they can occur when services have a good reputation so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to identify safeguarding issues specifically. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies.

In addition, if any member of staff at the healthcare service being visited wishes to raise a safeguarding issue about their employer, they will be directed to the Care Quality Commission (CQC) where they are protected by legislation if they raise a concern.

General information about the service

Name of the Care Home: Fairleigh House

Type of Care: Residential

Number of Residents: 6

Description of Facility: The care home offers learning disabled and autism care. There are 7 beds in the care home and it is located approximately 2 miles from Manchester City centre.

Specialism: Care services for people with learning disabilities

CQC Rating: (Published [here](#) 8 March 2023)

See Care Quality Commission (CQC) website to see their latest report on this service.

** Care Quality Commission is the independent regulator of health and adult social care in England.*

Purpose of the visit

The purpose of the visit was to:

- Observe the environment and routine of the venue with a particular focus on how well it supports the dignity of residents.
- Speak to residents, family members and carers about their experience in the home, focusing specifically on the care and any treatments provided.
- Give staff an opportunity to share their opinions and feedback about the service.

Executive summary of findings

Summary List of Indicators

Indicators for a good care home formed the basis of the observations and questions (based on the revised indicators from the [Independent Age Report](#)). A good care home should:

- Have a strong, visible management.
- Have staff with time and skills to do their jobs.
- Have good knowledge of each individual resident and how their needs may be changing.
- Offer a varied programme of activities.
- Offer quality, choice and flexibility around food and mealtimes.
- Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists.
- Accommodate residents' personal, cultural and lifestyle needs.
- Be an open environment where feedback is actively sought and used.

Methodology

Prior to the Enter and View taking place

We informed the care home of our intention to conduct an Enter and View visit a number of weeks beforehand, in order to ensure that they were comfortable with our attendance due to the ongoing COVID-19 pandemic.

All Enter and View representatives have been briefed and have agreed to abide by the Healthwatch Manchester Code of Conduct and Infection Control policy.

An intention to visit (though not the date and time), the purpose and structure of the visit were clearly shared with the provider in writing.

A key contact was identified from the service provider and a schedule for the day was put together with their input, taking into consideration meal times, visiting times for carers and families etc.

The provider was contacted to see if there were individuals who should not be approached or were unable to give informed consent and a comprehensive risk assessment was completed.

The visit was carried out over the course of one hour. The visit date and times are shown on the front cover of this report.

During the visit

A team of Healthwatch Manchester representatives spent time talking to the staff using an agreed set of questions. No residents were interviewed during our visit.

Interviews and observational methods were used to give an overview of this service from a layman's perspective. This data was recorded using standard observation sheets and questionnaires developed by Healthwatch Manchester.

Authorised representatives spoke to two members of the staff team and conducted short interviews about their experiences using guided questionnaires.

Following the Enter and View Visit

Immediately following the visit initial findings were fed back to the provider and other relevant parties in accordance with the Healthwatch Manchester escalation policy.

This report was produced within **10 working days** of the visit. An initial draft was circulated to the service provider to enable a response. The service provider was obliged to acknowledge and respond within **20 working days of receipt of the draft report**. The response from the provider is included at the end of this report.

Enter and View Observations

The external environment

- Building was well maintained
- Ample street parking available at the time we arrived
- Construction workers were present at the time and parked their van in-between the entrance gates which would block access to wheelchair users from entering the property
- There was a ramp up to the building for wheelchair access
- The ramp was slippery when walking up it due to the rain
- The garden outside was large with ample room for activities
- The stairs at the back of the house were slippery in the rain

The internal environment

- No welcome signs upon entrance
- Care home was warm and comfortable
- Lighting was good at the entrance
- There was a sign-in sheet at the entrance for visitors
- There was a check in and check out book on arrival
- Hand sanitisation stations throughout the home
- Kitchen was clean and well kept
- There were two good sized lounge areas on the bottom floor
- Lighting was dim in one of the lounge areas despite people being in there
- The front door was locked using a pin code for the resident's safety
- There was plenty of space to sit down and relax for visitors and residents alike

Staff

- Friendly and welcoming on arrival
- Offered beverages to HWM staff upon entrance
- Willing to be interviewed with our questions
- Evidence of staff helping residents around the house and with difficult tasks such as tying shoes
- No staff were observed wearing a name badge
- There was a clock in machine at the front door with staff names on each clock in card however no supporting pictures.

Signage

- There was no welcome sign at the entrance
- No signs to bedrooms or residents' names on their doors
- No signs on bathroom doors
- In the kitchen there were small posters detailing what the resident's personalities were like which was helpful for visitors to note
- No food menus visible
- Hand washing signage in the kitchen was evident
- Leaflets at the front door for NHS and CQC support
- No feedback forms available

Responding to people's needs

- There was a bathroom on each floor with washroom facilities included
- Residents were dressed appropriately
- Residents had access to communal spaces

Social Activities

- Horse riding
- Canal boat trips
- Walks/hikes

Dignity and Care

- Residents were mostly given 1-1 support from staff, one resident required 2-1 support which was given to them

Overall Atmosphere

The care home was friendly and welcoming. The staff were smiling on arrival and when we left. Each resident seemed to be enjoying themselves doing their own activities or when with a carer. Some areas could have had brighter lighting and were rather dim however it important to note that this care home looks after people with autism and so bright lighting can be distressing for some. The home had a relaxed atmosphere and the residents were given good levels of freedom whilst their safety was still managed well.

Findings from speaking with residents, friends or family members, and carers

Have Strong, visible management

N/A No residents were interviewed

Have staff with time and skills to do their job

N/A No residents were interviewed

Be an open environment where feedback is actively sought and used

N/A No residents were interviewed

Accommodate residents personal, cultural and lifestyle needs

N/A No residents were interviewed

Offer quality, choice and flexibility around food and mealtimes

N/A No residents were interviewed

Ensure residents can regularly see health professionals such as GP's, dentists, opticians or chiropodists

N/A No residents were interviewed

Findings from speaking to staff

Have strong, visible management

- Staff members said they receive tremendous support from their managers
- Staff receive regular supervision from their manager
- It was said that the managers are easy to approach
- Communicating with the area manager is not an issue for the manager of the care home. She described this as 'just a phone call away'.

Have staff with time and skills to do their job

- Staff feel as though they have plenty of time to support the residents
- The staff reported that they have regular training and refresher sessions on their previous training when required
- Clear evidence of staff progression with the manager being promoted relatively recently to our visit
- The managers and staff felt as though there was a smooth handover between day and night staff

Have good knowledge of each individual resident and how their needs may be changing

- Staff have a good rapport with residents and they use this to identify deteriorating health conditions
- Most residents have been in the home for 10-20 years and so there is a lot of information collated on their needs
- When accepting new residents, a full transitional handover occurs which can take up to 4 months to complete
- Each resident has an essential lifestyle plan written every month
- Staff are trained in de-escalation
- The home provides air mattresses and pressure relieving cushions for the residents
- The home has taken care to reduce trip hazards such as not having any rugs in the premises
- One wheelchair using resident has regular medical checks

Be an open environment where feedback is actively sought and used

- Staff told us they feel as though they are kept in the loop about developments in the care home
- The residents' families assist the residents in thinking of plans and activities for the house which go into a suggestion box
- All staff attend a regular team meeting where they can have a say regarding changes to the care home
- At a team meeting, the staff suggested changing a storage room into a training room and this change was made by the managers

Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists

- Yes, residents are scheduled to see dental or optometry specialists every three months

- The manager told us they do not experience much difficulty in accessing healthcare services as many of the residents have been patients at their practice for over 15 years
- The GP calls the home every week
- The manager told us that psychiatric support is difficult to access sometimes

Offered a varied programme of activities

- Canal barge trips every Wednesday
- Hiking in the past
- Horse riding
- Beach visits
- Farm visits

Offer quality, choice and flexibility around food and mealtimes

- The staff say they pick up on none verbal clues given by residents about whether they are thirsty or hungry
- The manager told us that breakfast and lunch meal times are up to the residents however all the residents have a cooked meal together in the evening
- The staff conduct a preference assessment on the residents to determine their dietary likes and dislikes
- A 4-week set menu has recently been established in the care home

Accommodate residents' personal, cultural and lifestyle needs

- The manager informed us that nobody in the home is religious however one resident was supported in going to church before the pandemic. They have not been back since.

Response from service provider

Thank you for your recent visit to Fairleigh House and your findings detailed in the report. It was pleasing to read I would like to feedback on certain observations / findings to give an understanding on these:

No Welcome sign.

Due to wanting the house to feel like a home, signage is limited to what is required. We hope that our support staff provide a friendly welcome to the service.

Slippery ramp and stairs at back of house.

Non-slip strips had been attached to the ramp by maintenance, but these have since fallen off due to poor weather. This has been raised as a priority job for the maintenance team, and signs will also be added. Grit is also available for use on the ramp during particularly slippery weather.

Signposted rooms and door signs.

Due to wanting the house to feel like a home to the people we support, we do not have signs on the doors. Visitors are informed where the bathrooms are should they require them.

Food menus

These have recently been introduced, gaining feedback from people we support. Sometimes menus are not set, as people we support will choose what they want from a recipe book, or according to their preferences.

Visitor feedback forms.

Visitors can submit feedback on the City Care Partnership website, and this can be anonymous. Since the visit a suggestion box has been fixed to the wall in the entrance hall for written feedback.

Staff member photographs at the entrance

These are not clock in cards, but for fire evacuation. However, in light of the visit we are going to add staff photo's in the visitor's book with their names and job roles.

Construction van blocking wheelchair access.

At the time of the visit there was a lot of building work going on at Fairleigh House to improve the environment. Parking can be limited, especially when builders are bringing large or heavy items into the property. Contract workers will be advised to keep the entranceway clear for wheelchair users when this is required.

Dim lighting in the lounge,

People supported at Fairleigh House have different sensory needs. Therefore, bright lights can be uncomfortable.

No Name badges.

Name badges are not worn at City Care Partnership due to our values of promoting parity between staff members and people supported. For the same reason that we discourage the use of lanyards or uniform, which identifies the people we support as having support staff within the community. Each staff member has an individual ID card should they be required to present identification.

Acknowledgements

Healthwatch Manchester would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme.

Healthwatch Manchester would also like to thank our Citizens Reading Panel for their work on this report.



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