

Healthwatch Waltham Forest Enter & View Report

# Ross Wyld Care Home

Care Home Series 2014-2015

**Thursday 19<sup>th</sup> February  
2015**

Sheila Macdonald  
Nafisa Saboowala  
Patricia Braga  
February 2015

### Visit details

Service address	Ross Wyld Care Home, 481 Forest Road, Walthamstow, London E17 4PZ
Service Provider	Tamaris (South East) Ltd
Service description	<i>Ross Wyld provides care for people living with dementia, older people with general nursing care needs and younger adults with a physical disability.</i>
Number of residents	50
Reason for visit	<i>Part of programme. This is one of a series of visits to older people living in care homes in Waltham Forest. This programme is to introduce our Enter &amp; View representatives and develop their role. We wanted to talk with older people about their experience of living in care homes. We looked at 4 areas - meals, activities, staff responses and complaints</i>
Status of visit	Announced
Date of visit	Thursday 19 <sup>th</sup> February 2015
Authorised Reps	Sheila Macdonald, Nafisa Saboowala, Patricia Braga
Declarations of interest	None

### Acknowledgements

Healthwatch Waltham Forest would like to thank the service provider, service users and staff for their co- operation and hospitality in hosting this visit. We welcome all contributions to this Enter and View programme.

### Enter & View

Enter & View is a statutory power conferred upon Healthwatch by the Health and Social Care Act 2012. It gives Authorized Representatives of Healthwatch Waltham Forest the right to enter and observe publically-funded health and social care services in the borough. Enter & View visits are visits and not inspections. Enter & View visits are used to get a lay perspective on the service concerned and are an opportunity for service users to talk about their experiences with the service. This takes place in the communal areas of the home, as our visits preclude talking to people on their own in their private rooms. A report of each visit is produced which includes any recommendations for change or improvement arising from the visit. This is shared with the service prior to publication. All Healthwatch Waltham Forest Authorized Representatives undergo training and background checks before joining the Enter & View programme.

**Disclaimer:** This report relates only to the service viewed on the date of the visit, and is representative of the views of the service users, visitors and staff who contributed to the report on that date.

### Summary of the visit

We visited from 11.45am until 2.00pm on a weekday. We found the manager, her deputy and other staff to be pleasant, friendly and open to this visit and thank them, service users and relatives for their co-operation with our observation.

3 enter & view representatives visited and we looked at 4 areas:

- *catering, activities, staff responsiveness and complaints*

### Description of facility and overview of findings

This home caters for up to 50 people with a variety of residential and nursing care needs. It is divided into two units: the ground and first floor for up to 30 people with nursing needs, including palliative care; the second floor provides residential care for those with dementia. This unit is accredited under the 'Pearl Dementia Care' programme; more detailed observations of the unit are below. There are dining and lounge facilities on the ground and second floors, and a very pleasant conservatory with plants. The home appears well-maintained and rooms are gradually being re-decorated according to residents' tastes.

### Observations

#### Catering

We briefly observed lunchtime on the 2<sup>nd</sup> floor unit where the dining room is pleasant and bright with two tables set for 8 residents. There was a menu on each table and attractive place settings with coloured napkins. The atmosphere was calm as people were served an appetising lunch of meat and vegetables, although there was also a vegetarian option available. It was not possible for us to sit during the meal due to insufficient space in the room and one resident was unsettled by the representative being present. Some residents eat lunch in their rooms.

There are two residents in this unit who do not have dementia, and we observed one gentleman who made his own way to the dining room where he eats his meals unaided; others needed guidance. Two residents were being supported to eat in the lounge, one being fed with pureed food and another being served cornflakes as this was his request. A carer came to see how he was getting on, and offered him a second helping which he accepted.

We also observed lunchtime on the ground floor. Most residents were seated at the tables, but a handful of people ate in the lounge area where their meals were placed on individual tables in front of them. Most residents were able to eat unassisted and one of the carers was observed supporting one of the residents to eat their meal and encouraging others on the same table to eat theirs. One gentleman sitting in the lounge area appeared to be asleep, so his meal was taken away by the Home manager to be given to him later.

We spoke to a carer who said that residents were asked the previous day to make their menu choices and they could ask for something different if they wished. The chef confirmed that there is a 4-week menu plan but people can request other dishes. Residents seemed to be enjoying their meal and some commented that it was lovely.

Dietary preferences are attended to by the chef, who told us that she accommodates a range of needs and preferences including purchasing halal meat if required. One Bangladeshi resident had not touched her meal so was offered a samosa and chapatti.

There was a choice of two juices (apple and orange) and water which were offered by the staff and jugs of these were also left on a side table.

Residents can choose to eat their meals at a later time, in which case their meals will be put away and labelled with their name.

### **Activities**

The home has one activity organiser who was away sick so the morning activity on the day of our visit did not take place but we were advised that some activities can still continue in the co-ordinator's absence. There is an activities calendar on each floor, with pictures as well as words to denote the activities; today would have been armchair activity and a quiz. He also provides 1:1 support. There is a volunteer activities supporter.

The range of activities shown on the calendar for the week included armchair exercises, skittles, film club, baking, quiz and bingo. Residents and staff advised there are also occasionally performances by external singers, musicians or other performers. We saw posters in the lift about a children's ballet scheduled for 30 May 2015.

One of the residents advised that Wi-Fi has been installed in the Home and this was confirmed by the Home manager, who explained that there was still work to be done to ensure that safety and security of residents were not compromised before this facility could be made available.

The organiser is responsible for the signage and décor on the 2<sup>nd</sup> floor. Here we observed a series of illustrated walls in the corridors: a music wall with discs, LP covers, musical notes and so on; a football wall with team colours and photos; a London wall with maps and photos. These were bright and stimulating. There is a large, well-equipped activities room with games, books and evidence of recent painting. There appears to be no library service although some residents do take a newspaper. A hairdressing room, currently being renovated, is available once a week. There is a bright, warm lounge with no television, where there are more books and a radio; this has a peaceful atmosphere.

Also on the second floor is a 'sensory room' which appears to work well for those who tend to wander. It has soft lighting, comfy chairs. 'Twiddle muff comforters' are available: these are designed for those with dementia, providing stimulation and also comfort and warmth. A manager explained that one or two residents frequently come and fall asleep in this room.

There are clear signs on the second floor to support and guide residents ('this way to the toilet' with an arrow). Lifts and stair access are securely locked.

On this unit, each person's door has a short life story on it, together with their name and photo. This appeared to us to be a good way to enable those less familiar with a resident to gain some insight into their interests and skills, and a life which may not now be evident.

We were impressed with the care and detail of these visual and other sensory provisions in the unit.

#### *Visitors/ outside activities*

It is acknowledged by the Ross Wyld manager that many of the residents are socially isolated, a situation which she has been trying to address through various means. Quite a high proportion do not have family or other visitors, although there are no restrictions on visitor hours and overnight accommodation has been provided for those travelling long distances. There has been little response from relatives to their invitations to Open Days and Relatives' Days. The Home is working with Age UK to try and attract volunteers. A successful contact has been made with the local Asian Centre for a Bengali speaking volunteer to visit an elderly female resident who speaks a particular dialect.

The Home is using connections with a local junior school and outsiders for a Singalong. The Home has also organised external visits to Vestry House Museum, William Morris Gallery, Lloyds Park and also to Westfield. Residents are always accompanied by carers or their family members on external visits.

We saw posters advertising 'Tina's clothes' on 23 March 2015 - a clothes supplier visits the home with a selection of clothes and residents can purchase garments if they wish.

#### **Staff responsiveness**

There are no agency staff at the Home. Polish staff have been recruited to interact with a Polish resident. All staff responded to us positively and were open to our questions.

We observed staff on the second floor treating residents gently and with patience, particularly as they found their way out of the dining room. The community matron was visiting at the time of our visit; she comes weekly and also when

requested. She spoke highly of the Home and the care they provide, particularly addressing one resident with dementia whom she has known for many years.

The manager has introduced a 'Resident of the Day' initiative, whereby each day is special for one person. The chef asks what they would like to eat, they have a rosette and everyone makes a fuss of them. We did not observe this as the person was in their room throughout the visit.

There is a 'Dignity Board' visible on each floor; this sets out the principles on which the Home operates to care sensitively for each person.

We saw some beautiful flowers which were in the hallway on the ground floor near the entrance to the Home. The manager explained that fresh flowers arrive weekly from one of the relatives - one bunch for one of the residents and one for the Home in appreciation of the care the Home is giving to their family member.

We spoke to one relative whose father pays for a place on the second floor unit, although he does not have dementia, nursing or care needs. He had been living independently but was lonely at home, and had also tried another care home. Intellectual stimulation is difficult to achieve for this gentleman, who has frequent visits from his daughter and a befriender fortnightly. As other residents require a great deal of personal time and care, his daughter explains that his needs are not always met as speedily or appropriately as she would wish. Practical matters can take more time than she considers reasonable; she speaks with the managers about this and is also in touch with the head office. This relative would like to see the Home be more proactive with suggestions or ideas to resolve her father's concerns, although she is not critical of the overall care they provide. It is acknowledged by the Home that this is not an ideal placement, and they note that it is very difficult to source suitable residential care for the elderly without nursing or dementia needs.

### **Complaints**

The relative noted above was clear about how to both speak and write to staff and providers about the care her father receives. We were not able to hold conversations with residents about their experiences of expressing their views or concerns, as they were, at the time of the visit, having lunch or sleeping.

We noted a poster in the lift with details about the complaints procedure.

### **Conclusion and Recommendations**

This was our first visit to Ross Wyld and we experienced a positive and constructive response to our visit and discussions.

The specialist care provided on the unit for those with dementia was considered to be particularly strong. We understand that the Home is part of the Waltham Forest

Dementia Action Alliance, and there is practice here which others may find helpful.

This Home has clearly experienced some difficulty in the past in engaging or retaining family, friends and other visitors, and we have noted a range of ways in which this is being tackled.

The range of activities is appropriate for those in this Home, and we were pleased to hear that a volunteer is supporting the organiser.

It is recognised by the Home that it has been difficult to develop a homely, or personal atmosphere, and we were pleased to hear that action is being taken to redecorate residents' rooms according to their wishes.

### **Recommendations:**

1. It would be useful to see Ross Wyld share with other providers some of their skills and resources developed through the Pearl Training Programme and other networks. Equally they can explore through this relationship the possibility of widening the Home's activities programme to include more musical activities.
2. We would encourage Ross Wyld to continue to seek out befrienders and other volunteers to engage with residents without regular visitors.
3. We suggest that the mobile library service is asked to visit, as this may be beneficial for those who can enjoy a range of reading and visitors.
4. As Ross Wyld is a member of the Waltham Forest Dementia Action Alliance, we recommend they contact fellow Alliance members so they can explore how they can work together to help improve the lives of their residents, particularly those with dementia.
5. As carers seem to be aware which residents need support to eat their meals, we suggest that, if possible, the meals are kept warm and only presented to that individual when a carer is available to assist them.

### Service provider response

Recommendations	
1)share our PEARL Experience	<ul style="list-style-type: none"> <li>- Relationships have been build with the Social Care Department in Waltham Forest. We have done the Alzheimer’s Awareness week with the college and they came and provided some pampering sessions</li> <li>- We held an open Day for Professionals residents and carers to come and see our PEARL team</li> </ul>
2)Volunteers and Befrienders	<ul style="list-style-type: none"> <li>- We recruited 2 additional volunteers</li> <li>- In the process of recruiting a befriender with Age UK</li> </ul>
3)Mobile Library	<ul style="list-style-type: none"> <li>- We have our own library in the home as only 1residetrn interested</li> <li>- This resident we offer transport to the local library</li> </ul>
4)WF Dementia Alliance links	<ul style="list-style-type: none"> <li>- We currently undertaking a research project which they initiated</li> </ul>
5)Meal time	<ul style="list-style-type: none"> <li>- Staff been inducted to do so when feasible, a ban marie is in the lounge area to keep plates and food warm</li> </ul>

Gabriele Jerome  
Home Manager

If you have any comments on this report or wish to share your views and experiences of this or any other care home in the borough please contact us.

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