

Ashlynn Grange

Enter and View visit report





Visit information

Service visited:	Ashlynn Grange
Address:	Bretton Gate, Bretton, Peterborough. PE3 9UZ
Service provided:	Nursing and Residential care service
Service provider:	Athena Care Homes (Bretton) Ltd
Date and time of visit:	25 September 2019, 10.30am - 2:30pm
Authorised Representatives:	Emma Amez, Janine Newby-Robson and Jo Smith

This report relates to the visit on 25 September 2019 at 10.30am-2.30pm. It is an account of what we observed and what people told us during the visit. It is not a representative portrayal of the experiences of all residents and staff.

The visit also takes into consideration the fact that most of the residents spoken to may have a long-term illness or disability, including advanced dementia, which will have an impact on the information that is provided.





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Key Findings

A team of three Authorised Representatives visited Ashlynn Grange on 25 September 2019. They found that overall the care home appears to be well-managed with friendly, experienced staff.

- The Haywood community, which provides dementia care and nursing care, had a well thought out dementia-friendly environment. (See King's Fund toolkit findings on page 10.)
- There were varied activities within the lounge areas throughout the time of our visit. There have been three full-time activity coordinators in post for approximately two months. We saw them interacting in a positive way with residents.
- At mealtimes residents are shown the actual two dishes available rather than a menu. The Manager said, that this can help stimulate poor appetites. A menu for visitors' reference is located on each wall of the dining area.
- There is a residents' informal coffee morning twice a week which is attended by the Manager. This gives residents an opportunity to feedback about their care.
- The care home Manager said that it is difficult to get dental care for the residents. There are no mobile dentists available. The physical limitations of some residents make travelling to dental surgeries a challenge.
- Some residents said that although they had not seen a doctor, they felt confident they could ask to see one. Relatives did not seem to be aware of a system to access a doctor for their loved ones in the home.
- Staff have a good training package and incentives which encourage low staff turnover and improved retention. Residents are asked to be part of interview panels for new staff.

Visitors said:

“I am generally happy with the care”

“The staff are wonderful”





About the visit

Why we visited

We visited Ashlyn Grange as part of a programme of visits to find out about people's experience of life in care homes in Cambridgeshire and Peterborough.

We wanted to find how residents are cared for and supported to make choices about their daily life, for example mealtime choices and access to activities. We also wanted to find out how easy it is to access local health services, for example GPs, audiologists, dentists, opticians and chiropodists.

Using our power to Enter and View

We undertook an announced visit to the home using our statutory power to Enter and View. This is our legal right to visit places that provide publicly-funded health or social care services.

The visits give us an opportunity to:

- Collect the opinions and experiences of people using these services, including their carers or relatives.
- See the nature and quality of services.
- Talk to staff who are providing care.

We publish a report after each visit where we can make recommendations or suggest ideas when we see areas for improvement.

This visit was carried out by two members of staff and one volunteer who are all trained to do this work. They are called Authorised Representatives.

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





What we did

Part of the visit was viewing the public areas to gain an understanding of Ashlynn Grange working and to get a feel for the general environment.

We were given a tour of the home and then invited to walk around without an escort. This included visiting the community areas of:

- Yeoman - Conventional care and end of life care.
- Haywood - Dementia care and nursing care.

We chatted to residents and visitors about their care, using a survey to guide and log our findings. We asked:

- How easy is it for residents to access local health services?
- How well are residents supported to make choices about daily life?
- What do residents think about their food?
- Are residents treated with dignity and respect?
- What activities are available for residents at the home and in the community?

We also used the King's Fund "Is your care home dementia-friendly" assessment tool. This had been developed for use in care settings. It can help develop better supportive design for the surrounding environment for people with dementia. We did not use the scoring system but used the questions as a tool and guide to check how dementia friendly the environment is in this home.





Ashlynn Grange

Ashlynn Grange care home is a part of the Athena Care Homes (UK) Ltd group, situated in Bretton Gate Peterborough, close to Peterborough City Hospital. The home has 156 beds and offers nursing, dementia nursing, residential, residential dementia and palliative care. They also provide intermediate and respite care.

The home is all ground floor for ease of access for residents and all rooms have ensuite facilities.

This purpose-built home is bright, clean and in good decorative state. Although very large, an institutional feel is avoided by the separate units, each with its own lounge. Within Haywood there is an adjoining small quiet dining room. At the front entrance is a newly built café which is available for drinks and snacks for residents and visitors.

The home was rated as overall 'Good' on its last Care Quality Commission (CQC) inspection on 17 May 2018. <https://www.cqc.org.uk/location/1-3087612976>

Activities

The home has three enthusiastic full-time activity coordinators, easily identifiable in their pink polo shirts. There were many and varied activities running throughout the day within the lounge areas.



Picture shows: the three activity coordinators





A poster with what is happening daily is pinned on the notice boards in each unit. The home also has a Facebook page which is regularly updated with activities for the residents; families are encouraged to like the page and comment on posts.

During our visit we observed residents using an interactive games table. There was also a visit from a local primary school to give a show of dancing. There was also entertainment from an Elvis impersonator in the afternoon.

One visitor said, they felt fewer residents visited the lounge than when they first started visiting. This may improve now that there are three activity coordinators who can encourage participation.

One visitor said that they thought their partner may be missing out from activities because they are a “quiet and shy” person who tends to stay in their room.

One male resident said he would like more male company.

One resident told us, “I like opera music”.



Picture shows: greenhouse in garden





The garden is an asset to the home. It stretches around the building and includes a small greenhouse with flowers and salad vegetables, which residents help to look after. The home is planning to develop a dementia-friendly garden.

One resident said they enjoyed watching the birds using the feeders outside their window. We heard from some residents who said they would like to get out into the garden area more often.

We liked to see that notice boards had holiday postcards from people who had signed up to the post card of kindness scheme. This gave residents a more family feel.

<http://www.randomactofkindness.org>

The Manager is looking into spiritual care and provision for residents who would like support.

Mealtimes

Tables were set up in a restaurant style within the large lounge area. There was plenty of space to enable assistance from carers if needed.

We did not see a menu; however, we were informed that the two meal options are shown on plates at the time of the meal. This has been found to encourage those with little appetite to enjoy their meal.

During our visit, lunch was delivered to the dining area of the Yeoman lounge. We noted that the chef checked and recorded the temperatures of the dishes. There was plenty of interaction with the residents and staff, making lunchtime a homely and family event.

One resident said they were not happy with the previous day's main meal. The chef said that staff are always happy to cook something different.

Another resident's relative said to us that their relation "is a fussy eater but the staff offer to make what they request".

Although we could see bowls of fruit placed around the lounge areas for residents to snack at any time, one resident said that they "would like to eat more fruit".

Visitors said that they were not aware of choices and that "meals are just given out". Visitors told us that they were always offered drinks, which was appreciated.

Meals are also offered to family when staying with loved ones during end of life visits.

The new high street style café found at the entrance to the home is a lovely bright area that will benefit visitors and residents.





Access to health services.

Dental

When we spoke to the Manager, she said that they do not have a mobile dentist that visits the home. Getting residents to a dental surgery is also difficult due to mobility issues. The home would be willing to find a small room to make a dental room.

She has also reported to the CQC, that she cannot find any dentists prepared to make domiciliary visits.

We asked visitors whether they thought their relative had seen a dentist. Two said they were not aware that their loved one had been visited by a dentist, optician or audiologist.

One relative had a concern that staff may not be aware how to fit dentures correctly or be able to identify whether they are fitted correctly. This visitor said they attend to their relative's dentures.

Older people are now more likely to retain their teeth than previous generations, and these need daily care and regular check-ups.

Healthwatch Cambridgeshire and Peterborough are aware of the difficulties in obtaining a dentist. This makes it more important to include oral health in residents' care plans and for staff to encourage daily mouth cleanliness.

The CQC has written a report highlighting the issue in care homes:

<https://www.cqc.org.uk/publications/major-report/smiling-matters-oral-health-care-care-homes>

Good oral hygiene helps keep people free from pain - especially important for those who have communication difficulties. For those with chronic conditions, good oral care can help make sure they can take the medicines they need to prolong health.

Good oral health can also reduce the risk of malnutrition, and it can reduce the risk of acquiring aspiration pneumonia, particularly in residential settings.

According to National Institute of Health and Care Excellence (NICE) research, more than half of older adults who live in care homes have tooth decay, compared to 40% of over 75s who do not live in care homes:

https://www.nice.org.uk/Media/Default/Oral_health_quick_guide/Oral_health_a_quick_guide_for_care_home_managers.pdf





Doctors

The Manager told us that residents are seen by doctors from different surgeries, although each resident's individual choice of doctor is respected. The home is trying to use doctors from the local catchment area. A GP from Boroughbury Medical Centre visits weekly and will talk to both residents and visitors.

The Manager said that there has been an issue with getting doctors to attend residents in respite care. The Manager recently spoke to Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) who commission GP care. The home was informed doctors' surgeries cannot refuse to attend to residents who are staying in respite care.

Opticians

We were told that both private and NHS optician services visit the residents often, and that eye tests and glasses are organised when residents require them.

Audiologists

Residents are referred to their doctor for assessment. Care workers may refer because of a noted change, which may be due to something like ear wax.

Chiropodist

A chiropodist visits on a six-weekly programme. Care workers may recommend the chiropodist as part of personal care, especially for dementia residents who may not notice ingrown toenails, etc.

Are your family treated with dignity and respect?

We spoke to visitors during our visit and one said, "I am generally happy with the care", another said, "The staff are wonderful".

We also heard that, "Some staff were sometimes a bit short and abrupt; however, the majority are kind and caring."

The Manager told us they have an "open door policy" for residents or visitors who want to talk about any issues.

Is there anything you would like to change in this home?

All the visitors we spoke to said they thought the home was clean and comfortable. They said they could talk to someone about any issues they were unhappy with.





A couple of relatives did raise concerns that call bells had not been answered as quickly as they would like.

King's Fund Toolkit

We used the “Is your care home dementia-friendly?” toolkit from the King's Fund to assess care in the home.

The findings below relate to the Haywood community. This community has been designed with dementia residents care in mind.

We found that the care environment in the Haywood community promotes meaningful interaction and purposeful activity between care home staff and the residents.

The public spaces were welcoming, with a choice of seating, arranged in clusters which help with encouraging conversation. Through the two communities, we saw several quiet seating areas away from the main lounges.

The Yeoman community was also observed; however, as it is not designed especially for dementia residents, we suggest it could be upgraded over time to accommodate residents with early dementia.

1. The environment promotes wellbeing.

There are appropriate lighting levels around the community areas, corridors and toilets. There were views from windows in bedrooms and lounges to the outdoor space with external plants and shrubs.

2. The environment encourages eating and drinking.

The staff asked residents and their visitors if they would like drinks regularly throughout our visit.

In the Yeoman community, we observed a smaller dining room/kitchen area where residents and visitors could make their own food and drink if they wished. There were bowls of fruit around this area.

The dining room in the Yeoman area had tables set out in clusters, restaurant style, which encouraged socialising. There was plenty of space around the tables to enable staff to assist if necessary.

The main entrance to the building has a newly installed café area which provides a selection of drinks, fruit and cake to visitors and residents. This is a lovely area for residents and relatives to meet and socialise.





3. The environment promotes mobility.

Being able to walk independently is important to most residents.

The communities had space to walk around and had small seating areas to rest in corridors.

In the Haywood community, the handrails were of a contrasting colour and the lighting did not cast shadows or pools of light which can confuse people with dementia.

The corridors and lounge rooms had some pictures on the walls.

The Haywood entrance area had a large memory board showing pictures and packages from different eras to help open conversation.

4. The environment encourages continence and personal hygiene.

Not being able to find the toilet can provoke anxiety. In the Haywood community the use of the same signs, contrasting door colours and toilet seats, together with clearly marked taps are helpful to residents.

Although there is sensor lighting in the toilet areas, it appeared to allow enough time for the completion of toileting.

5. The environment promotes orientation.

Visual clues for residents with dementia were provided by using signs with pictures and text at a height where they could easily be seen.

Throughout Haywood are memory boxes next to individual bedroom doors. Together with their name and large room number, this would provide reassurance to the resident.

There were large clocks around the public rooms which would help residents understand the time of day.

6. The environment promotes calm, safety and security.

We did not observe any clutter or distractions that could cause confusion to dementia residents.

The call bells seemed adjusted at the correct level, enabling them to be heard but at the same time not intrusive to other residents or relatives.

Residents could walk around the community independently and safely. Entrance doors were secure, and everyone was asked to sign in and out of each community.





On our visit all hazardous liquids and solids such as cleaning materials were locked away in a COSHH cupboard. The home utilises a CCTV system around public areas and outside to ensure the safety of the residents, staff and visitors.

Find out more about this toolkit from The King's Fund:

https://www.kingsfund.org.uk/sites/default/files/field/field_pdf/is-your-care-home-dementia-friendly-ehe-tool-kingsfund-mar13.pdf

Summary and recommendations

Ashlynn Grange has an airy homely feel with opportunities for an interesting range of activities for the residents. We observed activity coordinators encouraging residents to take part in different activities. They are developing ideas to ensure interests and activities are pursued to help the health and fitness of the residents.

Mealtimes can be taken in the main or smaller quieter lounges to give variety to the residents. The lounges are set out nicely with a café/homely feeling. Most of the residents like the choice of meals.

The home is working hard to ensure residents obtain the health services they need. The Manager has been communicating with the CCG to highlight the difficulties in obtaining dental care for residents. She has also recently heard from the CCG regarding the accessibility to a GP for respite patients. Previously this had been an issue, but it has been clarified respite residents are entitled to see a local GP while at the home.

We observed good care during our visit. We saw a genuine friendliness and encouragement to socialise; for example, one carer danced with a dementia patient during the entertainment, which made her cry as she realised how much this meant to the resident.

The home is planning a continued improvement in its dementia environment through redecoration and making a dementia-friendly garden. One unused unit is planned to re-open once it has been refurbished.

1. We recommend that the activity coordinators encourage activities for residents who do not wish to leave their room or are not able to go to the lounge area.
2. We recommend offering more trips outside the home for people who are more active.
3. We recommend that residents are given more opportunities to spend time in the gardens.





4. We suggest that different styles of music tastes are catered for, for example classical and opera.
5. Although bowls of fruit are around the lounge area, residents are too polite to help themselves. We suggest that more fruit would be eaten as a healthy snack if staff offered it to the residents, for example when afternoon tea is offered.
6. We suggest using contrasting colours in handrails and bathroom fittings when upgrading the décor in the Yeoman community. This make the space more dementia-friendly for residents who may be in the early stages of dementia.
7. The shortage of dentists in the area makes daily oral care important. We recommend staff are reminded how important this is for basic daily care, especially due to the difficulties of accessing dentists in the area. Staff awareness and education around dentures would also be useful.

NICE have produced tools and resources to help you put this guideline into practice. We recommend that staff read:

1. NICE quick guide for care home managers - Improving oral health for adults in care homes.
<https://www.nice.org.uk/about/nice-communities/social-care/quick-guides/improving-oral-health-for-adults-in-care-homes>
2. NICE - Oral assessment tool.
https://www.nice.org.uk/Media/Default/Oral%20health%20toolkit/Oral_health_assessment_tool.pdf

Thank you

Healthwatch Peterborough would like to thank the residents and staff at Ashlynn Grange who spent time talking to us about their experiences of living at the home or having family staying at the home.

Thank you also to the Manager of the home for helping us to arrange the visit and providing relevant information that we asked for.





Contact us

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Share your views

Services need to know what life in care homes is like for people to help improve them in the future. Do you have an experience of life in a care home that you would like to share?

- You can use the contact details above to get in touch.
- You can also text us on 0752 0635 176
- Feedback via our website at:
<https://www.healthwatchpeterborough.co.uk/feedback-on-care/>

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