



# **Enter and View Whittle Hall**

**Semi Announced Visit**

15<sup>th</sup> January 2025



## What is Enter and View?

Part of Healthwatch Warrington's remit is to carry out Enter and View visits. Healthwatch Warrington Authorised Representatives will carry out these visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows Authorised Representatives to observe service delivery and talk to service users, their families, and carers on 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 that we can learn about and share examples of what they do well from the perspective of people who experience the service first hand. Healthwatch Warrington's Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Warrington's Safeguarding Policy, the Service Manager will be informed, and the visit will end. The local authority Safeguarding Team will also be informed.

## Details of the Visit

Details of Visit	
Service Address	Whittle Hall Littledale Road Great Sankey WA5 3DX
Date and Time	15 <sup>th</sup> January 2025 10:30 AM – 12:00 PM
Authorised Representatives undertaking the visit	Lisa Fidler Norman Holding Dot Holding

## Acknowledgments

Healthwatch Warrington would like to thank the Registered Manager, staff and all the residents for their co-operation during our visit.

## Disclaimer

Please note that this report is related to findings and observations made during our visit on 15<sup>th</sup> January 2025. The report does not claim to represent the views of all service users, only those who contributed during the visit.

## Who we share the report with

This report and its findings will be shared with the Manager of Whittle Hall Care Home, Care Quality Commission (CQC), Healthwatch England and other partners. The report will also be published on the Healthwatch Warrington website.

## Healthwatch Warrington's details

Address:

The Gateway

85-101 Sankey Street

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WA1 1SR

Website: [www.healthwatchwarrington.co.uk](http://www.healthwatchwarrington.co.uk)

Telephone: 01925 246 893

## Healthwatch principles

Healthwatch Warrington's Enter and View programme is linked to the eight principles of Healthwatch, and questions are asked around each one.

- 1. A healthy environment:** Right to live in an environment that promotes positive health and wellbeing.
- 2. Essential Services:** Right to a set of preventative, treatment and care services provided to a high standard to prevent patients reaching crisis.
- 3. Access:** Right to access services on an equal basis with others without

fear of discrimination or harassment when I need them in a way that works for me and my family.

**4. A safe, dignified and quality service:** Right to high quality, safe, confidential services that treat me with dignity, compassion, and respect.

**5. Information and education:** Right to clear and accurate information that I can use to make decisions about health and care treatment. I want the right to education about how to take care of myself and about what I am entitled to in the health and social care system.

**6. Choice:** Right to choose from a range of high-quality services, products and providers within health and social care.

**7. Being listened to:** Right to have my concerns and views listened to and acted upon. I want the right to be supported in taking action if I am not satisfied with the service I have received.

**8. Being involved:** To be treated as an equal partner in determining my own health and wellbeing. I want the right to be involved in decisions that affect my life and those affecting services in my local community.

## Purpose of the visit

The visit was announced and was part of the ongoing work programme of Healthwatch Warrington.

## Details of the service

Whittle Hall is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement, dependent on their registration with us. Whittle Hall Care Home is a care home with nursing care.

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## Provider Service and Staff

Care home has 74 beds (time of visit 71 were occupied)

Georgina Webb is the current registered manager; Georgina has been in post for 4 months but has worked for 3 years previously as deputy manager of another home.

The home has a multitude of staff including:

- Home manager
- Deputy manager
- Clinical Lead
- Registered Nurses (both general and mental health trained)
- CHAP – Care Home Assistant Practitioner
- Senior Care Assistant
- Care Assistant
- Night Manager
- Laundry Assistant
- Housekeeping
- Kitchen staff
- Maintenance Supervisor
- Well-being Lead (being recruited)
- Assistant Psychologist
- Front of house staff

## Results of the Visit:

### First impressions

Whittle hall had very clear, bright signage that was easy to see from the road. The building and surrounding gardens were very clean and well maintained. There was limited visitor car parking, no car parking spaces were available on arrival.

Upon entering the reception area, we were greeted immediately by the manager who asked us to sign in using a touch pad. The reception area was a large,



clean, tidy and modern looking space that had seating for visitors as well as toilet facilities. Shortly after signing in the Home Manager and Assistant Manager led us into the secured home.

Each unit was clean, the décor was modern and in good condition. The home had no noticeable odours and had a warm welcoming feel.

## **Well Lead**

The home manager Georgina and the assistant manager gave the ARs (Authorised Representatives) a tour of the home. Staff were friendly and welcoming. Staff were in appropriate clothing according to their roles and were readily identifiable however not all staff were wearing name badges. No staff photos and names were displayed. There is a 2-week initial programme of training for new employees and staff are dementia trained. Oral Health training is provided as part of an annual programme of e learning.

ARs were informed that agency staff are regularly used in the home, agency staff are primarily utilised to cover 1:1 hours in the home. Staff that ARs spoke to stated that they are well supported and receive training as required. They also stated that there is little staff turnover as staff felt listened to and valued.

Quarterly surveys are distributed to residents and relatives for feedback. Georgina has an open-door policy and recently held a drop in evening for relatives to attend which was well received.

## **Access to Services**

The residents at Whittle Hall are registered with Springfield Medical Centre.

Whittle Hall stated that they cannot source a dentist who will provide regular domiciliary visits for residents unable to leave the nursing home, some private dentists will attend the home if the resident has been a long-term patient registered within the community. If a resident is in need of dental care a referral is made to Bridgewater Community Healthcare.

Opticians attend Whittle Hall on an annual basis and a podiatrist makes regular visits.

Residents have access to onsite hairdressing facilities, there is a fully fitted salon on premises. Residents can utilise this any day of the week if using their own hairdresser. The home has an in-house mobile hairdresser attend each on a weekly basis.

The home has a programme of activities, the programme of activities could be improved and offer more variety however there is currently no Well-being Lead

in post, this is in the recruitment process. ARs also noted that the paper activity schedules would be much improved if they were larger and pictorial. The home manager informed ARs that their assistant psychologist is currently assisting with activities as well as doing 121 work with residents.

## Safe

The building was secure with good signage at the entrance to the car park. On entry there is a touchpad signing in and out system. All resident areas of the home have keypads to enter and exit.

Fire alarms, fire alarm boards with evacuation procedures were visible around the home. All bedrooms have emergency cords, some are monitored via movement a detection system alerting staff when residents get up, this is part of the falls management process.

It was noted by ARs that there was wall plugged fans placed on the floor potentially causing trip hazards.

There was fully functional lift access to each floor in addition to stair access. Handrails were observed throughout the home.

Bathrooms were adequate and well equipped; they have alarms and safe lifting equipment is in place. The toilet seats in the shower rooms were the same colour as the pedestal, for patients or visitors that are living with dementia they may not be able to distinguish the toilet seat if it is the same colour as the pedestal. Therefore, having a contrasting-coloured toilet seat may avoid potential issues.

Nurse's stations were locked and secure. Medicine rounds were observed by ARs in 2 areas of which only one nurse was wearing a do not disturb medicine round apron, medicines were being recorded manually. The medicine trolleys appeared to be a little untidy.

Kitchens are provided in each unit with hydration available. These areas also form the dining areas. There was no food or utensils left on worktops or in sinks. The lounge and dining areas had a variety of chair styles and sizes available to accommodate all residents. Units have very wide communal corridors where residents can interact, 121 activities were observed taking place. Therapy rooms are locked when not in use.

ARs observed that some residents room doors were open whilst they were in bed, most residents have an elevated level of dementia and need to be observed by staff, no inappropriate dignity issues were observed.

## Caring

Staff were observed speaking and interacting with residents and using their preferred name. There appeared to be a good relationship between residents and staff. Each resident had their own care plan which is discussed with them and relatives on a regular basis. Care plans are held electronically.

Noise levels observed were appropriate. There were several resident lounges in the home with seating and TV facilities. The home have a sensory room, we observed a 121 session with a resident and the psychologists.

Some residents were observed using the wide corridor communal areas rather than the lounges, the communal areas have been furnished with ample chairs of different sizes providing variety and choice.

Most residents have their picture on their bedroom door, but some residents can choose to display a different picture if they wish.

Each area had an activities board with monthly planned activities.

We did not observe a 'you said, we did' board however the manager informed ARs that there is one that was being changed at the time of our visit. This helps the home illustrate that they are listening to residents and family members and implementing positive changes.

## Responsive

The home has a weekly programme of activities which residents participate in. A few examples of activities on offer include:

- Games
- Therapy dog visits
- Exercise classes
- Musical entertainers are sometimes brought in to entertain.
- Art and craft activities
- Domestic areas where residents can hang washing out for example as some residents enjoy these tasks.

There is also a 'Jolly Trolley' which is used for occasions such as Halloween or birthdays, it had lots of sweet treats, games, books and puzzles. The home is currently in the process of recruiting for a replacement Well-being Lead.

Throughout the corridor areas and lounge areas there are interactive boards which allows the residents to keep familiar with things they remember.



There are facilities for Hair Dressing, a Podiatrist and optometrist attend regularly. The home has regular relative/resident meetings to allow for feedback.

There are a few outdoor areas with both hard standing and artificial grass to be used by residents. The home is in the process of providing a shop area to stimulate residents and bring back memories of their day-to-day life.

## **Food**

Whittle Hall has a food hygiene rating of 5.

The residents spoken to were very happy with the food quality, selection and the menus for the week provided a good variety of choices. The home has residents from various nationalities and their food requirements are catered for. The main dining areas throughout the home were clean, bright and formed part of the lounge areas. Tables were clear and tablecloths clean, utensils are stored safely. Hydration is available and there is a tea point for visitors to use.

Special occasions are well catered for, and relatives were always welcome. Families are encouraged to assist with mealtimes if they wish.

## **Effective**

The home was clean, bright and nicely decorated throughout. Each unit was rug and carpet free which reduces trip hazards.

The outdoor areas contain both hard and soft areas with easy access. The residents are able to personalise their room if they wish.

The bathrooms observed were large and had room for a wheelchair, they were clean, had hoists fitted and an alarm. One toilet in the Sunshine unit had a small amount of Mold across the top of the sink.

There is a weekly programme of activities, this is displayed throughout the home but would be better if it was in a larger format and in pictorial form as well as written. The clocks throughout the resident areas were not dementia friendly, they were rectangular with a small digital screen. It is recommended that clocks are round faced with day, date and time and are at least 18 inches in size.

The signage throughout the building is good with yellow background and black lettering. Lighting levels throughout the building were good.

## **Conclusion**

Whittle Hall has dedicated staff that feel well supported, there was a friendly, caring feeling around the facility. Due to the high levels of Dementia through the

units and no family members being present ARs were unable to gain feedback at the time of visit.

The availability of psychologists is providing ongoing help and support to the residents with high levels of Dementia, the 121-work observed was enriching and the sensory room is a great resource for the home.

# Recommendations

Recommendations made from findings	
1	Please display the Healthwatch Warrington poster in the reception area, which will offer an independent choice for the patients to feedback.
2	We recommend that toilet seats are installed in different colours to the pedestal (considering Dementia patients).
3	We recommend having a staff photo board.
4	We recommend that there is an increased variety of activities and that activity schedules are larger and pictorial.
5	We recommend reviewing items that may pose a trip hazard such as the fans.
6	We recommend installing dementia friendly clocks.
7	Consider all nurses on medicine rounds displaying or wearing a do not disturb sign to allow complete focus.

**The Provider did not comment on the report.**



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to quality

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