



**Details of visit**

**Service address:**

**Myford House, Woodlands Lane, Horsehay,  
Telford TF4 3QF**

**Service Provider:**

**Redwood Healthcare Ltd, Myford House  
Nursing & Residential Home.**

**Date and Time:**

**27<sup>th</sup> April, 2017. 9.00am - 11.00am**

**Contact details:**

**Healthwatch Telford and Wrekin, Meeting Point House,  
Southwater Square, TELFORD, TF3 4HS**

**Publication Date:**

## Acknowledgements

Healthwatch Telford and Wrekin would like to thank the service provider - Myford House Nursing & Residential Home, residents, relatives/visitors and carers, and staff, for their contribution to the Enter and View Programme.

## Disclaimer

Please note that 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.



## What is Enter and View?



Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out from those who use the services how they are being run, and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch 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 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 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 safeguarding policies. In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.

## Purpose of the Visit

- To engage with Residents as service users of Myford House to understand how their dignity is being respected in the nursing and residential care home environment, and how those affected by dementia are supported to have the best life that they can.
- To capture their experiences, and those of relatives/visitors, and any ideas they may have for change.
- Observe Residents and relatives/visitors engaging with the staff and their surroundings.
- Identify examples of good working practice.



## Strategic drivers

- The visit is part of a Healthwatch Telford and Wrekin programme of work on 'Dignity and Respect' in health and care settings, and on Dementia.
- The visit is also in response to evaluations of feedback received by Healthwatch Telford and Wrekin from community engagements, and service provider / local council / CQC liaisons and requests.
- Care homes / hospital wards / GP Surgeries are a strategic focus of regional / national programmes of the CQC, PHE / NHS, local Councils, and Healthwatch organisations.

## Methodology

**This was an announced Enter and View visit.**

Four authorised representatives were assigned to the visit. They met with the home management and senior nurse on duty before speaking to anyone in the home and took advice as to whether any Residents should not be approached owing to their inability to give informed consent or owing to safety or medical reasons.

Our representatives spoke to four residents and one relative present with the residents at the time of the visit. We explained the purpose of the visit and asked them about their views and experiences of the home, care and nursing services.

Representatives talked to 5 members of staff, management staff, and other professionals present to hear about their contributions in the following areas to the service provided: quality of care, safety, being treated with dignity and respect, and acknowledging their wishes. During the visit representatives would also observe the delivery of the services; observations were gathered whilst walking around the premises (public/communal areas) to gain an understanding of how the home actually worked and how the Residents engaged with staff members and the facilities. A guidance-list of topics on dignity and respect and dementia was used to support the observational activities.

## Summary of findings

- At the time of our visit to Myford House we observed that the care given supported the dignity and respect of residents.
- The home has a warm and homely atmosphere.
- The report highlighted the good practice observed during the visit.
- The home is in the process of refurbishment. The two refurbished rooms we observed were finished to a high standard.



## Results of Visit

Myford House comprises of a purpose-built wing adjacent to an older building, located on the edge of the new Lightmoor Village with views over open countryside. There are 51 rooms in total but owing to the need for refurbishment the number of residents is at present 24. The home provides nursing and personal care and



accommodation, and many of the residents are living with dementia. The Home is divided into 2 units, with a 12 bedded EMI unit, Madeley Court Unit, on the first floor. There are 9 residents in this unit at present.

There was a lack of organised parking at the Home, mainly owing to limited space, and we observed that the car park surface was in a poor condition. We were greeted by the management team on arrival. The team is relatively new and there has been a period of handover during the previous weeks. We were given a guided tour of the home to show the layout and we noted that all areas were accessible and clean.

We were informed that re-decoration was required in many areas of the home, and that this had recently been started. We were shown some of the newly

decorated rooms which were very fresh and pleasant, and provided a good standard for expectation of the other areas to be decorated in the future.



We found signage around the home to be excellent including those used for resident's rooms as well as other important facilities such as shower rooms which had suitable graphic signs; signs also included use of Braille on the sign. The doors to each Residents' room had a 3D-type 'Name plates' and each had a memory box. The corridor walls were painted with murals of shop fronts, trees etc. which made the surroundings more interesting for the people living in the home, particularly for those living with dementia.



### Ground Floor Unit

The lounge looked homely and comfortable and smelled fresh. Music was playing in the background, and we noticed a Carer was asking the residents if the sound level was all right for them. Residents could sit on their own or in groups for conversation. Another area appeared to be arranged for Residents to have a quiet time. We observed various items available in this area providing a good source of distraction for residents living well with dementia - twiddle muffs, twiddle cushions and a twiddle mat. We were told that drinks and snacks are offered throughout the day, and we observed residents being offered drinks

during our visit by the Carer staff. We noticed that a soft drinks dispenser was also available. Residents had walking aids and wheelchairs nearby and there was ample room for movement about the room and corridors. The call monitor situated in the hallway was visible from the lounge.



All residents were well-groomed and appropriately dressed. One resident was being served with breakfast and we observed the Carer ask the resident if she could reach her food and engage patiently with the resident taking time to have a conversation with her when appropriate. We also observed that another Carer was engaging a resident in conversation.

### **Madeley Court Unit**

The unit is accessed by stairs or lift. We observed that the unit was warm, clean and appeared well-run, with sufficient staff. The unit lounge has a double entrance, and a dining area was arranged with 4 tables laid-out with attractive table linen.

We observed staff interacting well with residents present and showing a good understanding of individual resident needs. We noticed one resident in the lounge who appeared to be calling-out for a cup of tea and this was noticed and promptly dealt with by a carer present. Another resident present was observed asking for music and we noticed the staff gave the resident a choice of CDs and helped them to select their preference.

There was limited opportunity to speak with residents in this unit either due to their level of dementia or medical condition, some on-going activities, or because residents were resting in their own rooms. From our observations, we gained the impression that the atmosphere of the unit was good and the staff friendly and responsive to the residents. We were shown two rooms which had been refurbished to a very good standard, and we gained a positive impression that Redwood Care was investing in improvements to the Myford House, supporting the new management, and there was a clear sense of improvement and direction.

### **Resident and Relative Feedback**

Conversations with some of the residents in the ground floor unit lounge who had dementia, was challenging. We had a conversation with 2 residents. One of the residents spoken to said she was happy and that the staff were lovely. The residents enjoyed the company of other residents. They praised the choice they were offered for food, and told us that they could choose the clothes they wore. Residents said they felt safe and that they could voice any concerns to the staff. We spoke to 2 residents in the Madeley Unit, and one told us they were happy, and described the staff as 'lovely'.

A relative in the ground floor unit said the staff are friendly, attentive and caring. The relative was very satisfied with the care and support that their family member was receiving. We were told that their relative had lost

confidence in their own capabilities at a previous residential home, and the relatives were very pleased that the Myford staff were motivating the resident to become mobile again.

## **Promotion of Resident Dignity and Respect**

We observed the carers and other staff interacting in a caring, friendly and polite manner with the residents, taking time to talk with them individually. A nurse dispensing medication was seen to get down to a seated Resident's face-level and explain what was happening.

All staff wear name badges so residents can see their role and see a reminder of their name. Nurses wear a red tabard when dispensing medications - used to indicate that they should not be disturbed in this task.

We were told that Residents choice was supported - they can choose when they would like to get up and when to go to bed.

Signs are used on the Resident's room door to indicate personal care activities are being undertaken. During hoisting, blankets are used for resident dignity, and when in a public area, a dignity screen is used to protect a Resident's dignity.

## **Activities**

On the 'Activity Board' was listed activities planned for the residents, which included 'balloon' exercise, seated exercise, knitting and crafts, and a daily 'sparkle quiz'. The activities staff member told us that some residents liked gardening and in good weather, some liked walking around the gardens. Residents had recently made Easter bonnets and Easter baskets. Residents who do not leave their rooms are included in some way if possible. We were also told about visiting PAT dogs, horses and the Exotic Zoo who visit the residents at the home, and the Darby Singers. There is an exercise instructor who attends every Thursday. We were told that one of the residents likes to go out to the Lightmoor café, and that other residents can also visit the cafe in Lightmoor village with staff. We heard that there will be monthly 'Relative's Meetings'.

A mobile hairdresser visits the home weekly using a well-fitted 'hair salon' on the ground floor, and this is popular with many residents. On the day of our visit some residents were looking forward to having a hand and nail 'pampering session'. One resident told us that she enjoyed having her nails painted.

## **Staff Information**

We observed that Staff interaction with the Residents was very good and the carers appeared to have a good understanding of the individual residents' needs.

We were told that Myford Home has a new management team and there is an recruitment drive ongoing for permanent staff. At present 75% of staff are permanent ie. non-agency.

Each member of staff has dementia awareness training as part of their induction, and all staff receive training from Bradford University in Dementia Care. Staff are given some training using E-learning (online training) courses, which management said was easier for them to monitor, and these covered all aspects of needed training. Management expected to put NVQ training onto 'Care

Shield', and graphs are used to show individual training progress. In-house training was also used as appropriate, and staff are tested throughout their training. All staff are 'Fire Marshall' trained.

We spoke to some care and nursing staff who told us of changes made by the new management team which had improved their working environment.

We found the changes (management, staffing and refurbishment) made so far at the home to be positive.

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## Recommendations

- Consider adding further items within the home to support resident reminiscing.
- Progress refurbishment of other rooms to the same standard as the two resident rooms already completed, and retain and extend the excellent signage used.
- Consider improvements to the car parking area be included with the refurbishment plans.

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## Service Provider response

The manager responded commenting that they had no additional comments, nor did they find any inaccuracies.