

# Enter and View Report



**Linden Manor,  
Wellingborough  
March 2019**



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# Details of the visit

Name and address of premises visited	Linden Manor, 159 Midland Road, Wellingborough, Northamptonshire NN8 1NF
Name of service provider	Miss Raice Cook, Registered Manager Mr Kanapathipillai Thirumalthasan, Nominated individual
Type of service	Residential Home
Specialisms	<ul style="list-style-type: none"><li>• Caring for adults over 65 yrs</li><li>• Dementia</li><li>• Physical disabilities</li><li>• Sensory impairments</li></ul>
Date and time of visit	26 March 2019, am
HWN authorised representatives undertaking the visit	Dora Shergold, Margaret Moss
Support Staff	Becky Calcraft, Healthwatch Manager
Contact details of Healthwatch Northamptonshire	Moulton Park Business Centre, Redhouse Road, Northampton, NN3 6AQ enquiries@healthwatchnorthamptonshire.co.uk

## Acknowledgements

Healthwatch Northamptonshire would like to thank the manager, residents and staff of Linden Manor for their assistance in planning the visit and the preparation of this report as well as providing us with information and feedback.

## 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.



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## Purpose of visit

Healthwatch Northamptonshire is carrying out a series of visits to NHS and Social Care funded accommodation in Northamptonshire to ascertain the quality of life, experience and opinions of residents, with a particular focus on activities, nutrition, hydration and access to dental health. Linden Manor was selected as one of the homes to visit.

## How the visit was conducted

The visit was an announced visit, with the manager being given three weeks' notice of the intended visit. We sent letters, posters and leaflets to the home to inform residents, relatives (and other carers and visitors) and staff about our visit and Healthwatch Northamptonshire.

This visit was conducted by Healthwatch Northamptonshire volunteers Dora Shergold and Margaret Moss, who took notes during the visit to record their observations and conversations. They asked the staff if there were any residents who they should not approach and they also asked if any residents had hearing or other communication difficulties.



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# Observations and findings

## Summary

Linden Manor provides a warm and stimulating environment for its residents. There is a relaxed yet attentive atmosphere. All residents' needs are considered and well catered for. The building has pleasant gardens and seems well-maintained.

## About the home

The home provides a range of care for people with dementia, sensory impairment and physical impairments.

## General impressions of the home

Linden Manor is pleasantly situated, set back from the main road in central Wellingborough, with a nice garden for residents to look out on. There are 25 bedrooms and the home currently has 23 residents. The building is old but well-maintained. The three communal sitting rooms have views to the garden and are light, with a homely feel to them.

## Activities for residents

The home employs an activity worker who offers one-to-one and group activities, including gentle exercise, arts and crafts, board games, singing, walking, gardening, flower arranging, colouring and baking. Trips out are also organised.

A local theatre group visits to sing with and for the residents. Any family or friends visiting are welcome to join any of the activities. With consent, the staff take photographs of residents when taking part in activities, then email the photos to family who are unable to visit. These photos are then kept in the residents' own rooms in a memory folder.

There are weekly visits from a hairdresser and a staff member paints nails for residents. 'Pets as Therapy' visit on a regular basis and on one occasion brought a Shetland pony to the home.



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## Food, drink and meal times

As we spoke to each resident in turn, everyone without fail said the food was good. Residents were offered two choices of main evening meal and two choices of dessert. The menu is displayed on a blackboard in the main lounge. Residents from minority ethnic groups are well catered for, with a local Asian restaurant providing a delivery service when required.

We were told by several residents they had plenty to eat and could have more if they wanted. Biscuits were offered with mid-morning tea and there was also a bowl of fruit on the side in the main lounge for residents to help themselves to at any time. Residents are free to take their meals wherever they feel most comfortable.

## Oral hygiene and dental care

Each resident's oral health needs appeared to be met and all have regular access to a local dentist. Some residents had been identified as needing more specialist interventions and a more appropriate treatment provider is being pursued to meet their needs. Staff help with nightly cleaning of dentures if required.

## Care and dignity of residents

The level of care given to residents that we observed during our visit was outstanding. Staff were very clearly ensuring nothing was done to residents without consent, even those who had asked to get their hair done were asked, "The hairdresser is here, do you still want yours done today?"

Residents' privacy was clearly respected: the manager asked a resident's permission for us to look at her room, and with consent the resident came with us, so to not have her concerned we might touch her things. We were impressed with the way the manager handled the situation.



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## Staff behaviour, attitudes and relationship with residents

Staff were warm and friendly, always spoke in a pleasant tone to residents, explained what they were doing and, where necessary, why they were doing it. They interacted with residents in a warm, calm, caring manner.

We had three positive comments from members of staff:

“It can take a while, but it is important to build a bond, a relationship as we are all family here and this is our family’s home.”

“Each resident is an individual, so needs to be treated and spoken to in slightly differing ways.”

“Our family here includes family and friends of our residents; we have to include and care for them also.”

## Other observations

During our visit there was a celebration for a resident’s birthday with their family, extended family and friends. We spent time talking with one gentleman, his son and daughter-in-law. They stated the home provided their father with all of his care needs, was treated with respect and kindness by all of the care team, as though he was a family member. They were very happy with all aspects and the quality of care he received.

Another resident told us:

“If I had not come here, I do not know what kind of state I would be in.”



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# Recommendations

1. Fit an additional door ramp to the wheelchair access point and move the unit opposite the staircase, as it restricts access for wheelchair users.
2. Identify and arrange access to an appropriate dentist with specialist skills to ensure the oral health needs of all residents are met.
3. Encourage new residents to bring a memory book, compiled with help from family members if necessary, when they move into the home.

## Service provider response

“Thank you very much for this report. Dora and Margaret were professional and friendly; they brought a positive atmosphere with them when entering the home.

I’ve had multiple comments from residents, relatives and staff about how well the visit went. They felt at ease and happy to talk to Dora and Margaret. Everyone was comfortable with them, especially when it came to questions being asked and when concerns were expressed. We look forward to the next visit!”

With regards to the recommendations that have been made:

1. We are looking into better access for wheelchair users to have more of a smoother entry into the home.
2. Dentist access for residents has been sourced and registration forms have been completed and sent to ensure that good oral health is maintained.
3. Relatives and friends have been asked to bring items in to complete memory boxes and also other items to help make the individuals’ bedrooms more personalised.

**Raice Cook, Registered Manager**



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# About Enter and View

Healthwatch Northamptonshire representatives carry out 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 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 part of a formal inspection process, neither are they any form of audit. Rather, they are a way for Healthwatch Northamptonshire to gain a better understanding of local health and social care services by seeing them in operation. Healthwatch Enter and View Authorised Representatives are not required to have any prior in-depth knowledge about a service before they Enter and View it. The representative's role is to observe the service, talk to service users, families, other visitors and staff if appropriate, and make comments and recommendations based on their subjective observations and impressions in the form of a report. All Healthwatch Northamptonshire authorised representatives have been through a recruitment process (either as staff or volunteers), had a Disclosure and Barring Check, and received Enter and View and safeguarding training.

This Enter and View Report is aimed at outlining what we see and hear during our visits and making relevant recommendation for improvement to the service concerned. The reports may also make recommendations for providers, commissioners, regulators or for Healthwatch to explore particular issues in more detail. Unless stated otherwise, the visits are not designed to pursue the rectification of issues previously identified by other regulatory agencies.

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. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform Healthwatch Northamptonshire of their concerns, who will inform the service manager and may terminate the visit.

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.



# About Healthwatch Northamptonshire

Healthwatch Northamptonshire is the local independent consumer champion for health and social care. We are part of a national network of local Healthwatch organisations. Our central role is to be a voice for local people to influence better health and wellbeing and improve the quality of services to meet people's needs. This involves us visiting local services and talking to people about their views and experiences. We share our reports with the NHS and social care, and the Care Quality Commission (CQC) (the inspector and regulator for health and social care), with recommendations for improvement, where required.

Our rights and responsibilities include:

- We have the power to “Enter and View” health and social care services (with one or two exceptions). Our primary purpose is to find out what patients, service users, carers and the wider public think of health and social care. Our role should not be confused with the role of the Care Quality Commission (CQC) or OFSTED. CQC is the regulator and inspector of health and adult social care and OFSTED is the regulator and inspection of children's social care. Both organisations have a legal requirement to inspect care provision with reference to national standards and guidelines.
- We strive to be a strong and powerful voice for local people to influence how services are planned, organised and delivered.
- We aim to be an effective voice rooted in the community. To be that voice, we will find out what local people think about health and social care. We will research patient, user and carer opinion using lots of different ways to find out views and experiences so that the community is effectively represented.
- We will provide information and advice about health and social care services.
- Where we don't feel the views and voices of Healthwatch Northamptonshire and the people who we strive to speak on behalf of, are being heard, we will escalate our concerns and report our evidence to national organisations including Healthwatch England and CQC.





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# About Connected Together CIC

Connected Together Community Interest Company (CIC) is the legal entity and governing body for Healthwatch Northamptonshire.

The remit of the Connected Together CIC includes:

- Contract compliance
- Legal requirements
- Financial and risk management
- Sustainability and growth
- Agreeing strategy and operations
- Agreeing policies and procedures

Connected Together CIC is a social enterprise and a partnership between the University of Northampton and Voluntary Impact Northamptonshire. It aims to be first for community engagement across the county of Northamptonshire and beyond.



**Connected Together**  
First for Community Engagement



Email: [hello@connectedtogether.co.uk](mailto:hello@connectedtogether.co.uk)

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



# Contact us

Address: Healthwatch Northamptonshire  
Moulton Park Business Centre  
Redhouse Road  
Northampton  
NN3 6AQ

Phone number: 0300 002 0010

Text message: 07951 419331



Email: [enquiries@healthwatchnorthamptonshire.co.uk](mailto:enquiries@healthwatchnorthamptonshire.co.uk)

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

Facebook: [www.facebook.com/Healthwatchnorthamptonshire](http://www.facebook.com/Healthwatchnorthamptonshire)

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