



# Healthwatch Wirral

**Enter & View Visit to The Aynsley Care Centre, 60-62 Marlowe Road,  
Wallasey, Wirral, CH44 3DQ**

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## Site Introduction



The Aynsley Care Centre is registered to provide accommodation with personal care or nursing care for up to 28 people. Single and double rooms are available. 60- 62 Marlowe Road, Liscard, Wallasey, Wirral, CH44 3DQ

Name of Care Home: The Aynsley Care Centre

Name of Manager: Stephanie Hooper

Owners: S.J. Care Homes (Wallasey) Limited

Care Home email and phone number: [info@aynsleycarecentre.co.uk](mailto:info@aynsleycarecentre.co.uk) , 0151 638 4391

HWW Representatives: Jacqui Canning, Dave McGaw, Georgina Higgins, Lisa Rand.

## Acknowledgement

Healthwatch Wirral would like to thank the Care Centre staff, residents and families for their cooperation during our visit.

## Foundations of Quality

Foundations of Quality Improvement should always have what patients tell us about their treatment and care at the heart of everything, as a system, that we plan and do. We must be able to evidence that all actions and decisions made come back to this, making certain that everyone feels respected, involved and valued at each and every part of the journey. We should all feel confident that we are either giving or receiving quality care.'

Healthwatch Wirral, Age UK Wirral, NHS England and ECIST, Wirral System

## What is Enter and View?

Healthwatch has statutory powers and duties to carry out Enter and View visits to any site where regulated care is given. Local Healthwatch Authorised Representatives carry out these visits to health and social care services to find out how they are being run and can make recommendations where there are areas for improvement.

Section 221 of 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 use, or provide, the service first-hand.

Healthwatch can also be invited in by providers to seek a ‘fresh pair of eyes’ on their service and gain some external assurances that they are on the right track prior to their CQC inspections.

## Disclaimer

The contents of this report are based on what the residents, staff and Manager told Healthwatch Authorised Representatives. The information within this report does not recommend or advocate on behalf of any service. Individuals should use a variety of information, such as CQC reports, when making a decision on where to reside and/or where to obtain care.

## Purpose of Visit

This visit is not designed to be an inspection, audit, or investigation, rather it is an opportunity for Healthwatch Wirral to get a better understanding of the service by seeing it in action and talking to staff and service users and carers /relatives. The visits are a snapshot view of the service and what we observed at the time of the visit.

Healthwatch Wirral seeks to identify and disseminate good practice wherever possible. If during a visit, Healthwatch Wirral considers there may be a serious concern then this will be referred to the appropriate regulator. This also applies if we have safeguarding concerns and these will be referred to the Local Authority or Commissioner for investigation and our visit will cease with immediate effect.

Once the report has been drafted by Healthwatch Authorised Representatives it will be sent to the provider which is the provider’s opportunity to add their comments and which will be added verbatim to this report. After twenty days the report will be published.

## What is Social Value

Social Value is a broader understanding of value. It moves beyond using money as the main indicator of value, instead putting the emphasis on engaging people to understand the impact of decisions on their lives. The people's perspective is critical.

Organisations will always create good and bad experiences, but on balance should aim to create a net positive impact in the present and for a sustainable future. They should measure their impacts and use this understanding to make better decisions for people.

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## How Healthwatch Wirral demonstrates Social Value: -

Healthwatch Wirral (HWW) is dedicated to ensuring how Providers meet Social Value standards. Our social value commitments aim to put people's perspectives first when supporting vulnerable individuals, economic pressures, and promoting environmental sustainability.

### Vulnerable People, Economic Pressures, and Environmental Sustainability.

People experience vulnerability at different points in their lives, which can increase and decrease over time. During our Enter and View (E&V) visits, we aim to understand the needs of vulnerable people who live in Care or Residential Homes.

During our visits, we discuss with the Providers their training practices, how they support both staff and families, and where they would signpost or refer to when supporting a person's clinical or non-clinical needs. We offer suggestions and recommendations to help ensure the Provider is utilising all available care and support resources. Our aim is to ensure that residents are allocated the right care at the right time, and to avoid unnecessary trips to A&E if the situation can be managed effectively for the person where they live.

By utilising our knowledge of the care system, we can assist Providers and members of the public in navigating what can appear like a complicated system. This includes directing them to the appropriate services like the Urgent Community Response Team, or GP Enhanced Access appointments, etc.

Providing the correct care in the right place and time can ensure a positive experience for residents while reducing pressures on the health and care system. Effective communication between providers, carers, and residents (such as promoting available clinical and non-clinical services) enables Care Providers to utilise the support they need more effectively.

HWW promotes Wirral InfoBank <https://www.wirralinfobank.co.uk/> which provides an online directory of provisions available across all sectors (clinical and non-clinical). We also promote HWW's Feedback Centre <https://speakout.healthwatchwirral.co.uk/> to ensure people can leave feedback about their experiences. This helps influence the design, commissioning, and deliverance of care to better reflect the needs of the community.

HWW ensures it is as paperless as possible. However, it is vital that everyone gets information in a format that is suitable to them. Our website is available in different languages and audio, and we share Public Health's commitment to addressing inequalities by providing documentation in different formats and languages.

We have adopted a culture of seeking assurances in relation to: -

- Quality and Equality of care.
- Clinical and non-clinical support and treatment.
- Equality Impact Assessments.
- Coproduction and integrated commissioning.

We engage health and care Commissioners and Providers in discussions about how effectively they collaborate to deliver integrated, seamless care and support for patients, families, carers, and the workforce. Coproduction is integral to achieving meaningful social value.

We prioritise using local services and providers for all our administration, office and operational needs, ensuring that our finances are spent locally. Whenever possible, we utilise free premises and have sponsored local sports clubs for women and children. Additionally, we support HWW staff by being Mindful Employers and providing equipment to meet the needs of individuals.

**Healthwatch Wirral CIC 2024.**



## What Healthwatch Wirral Authorised Representatives (HWWAR) observed and were informed of during the visit

The Care Centre Manager explained Aynsley Residential Care Centre is owned by S.J. Care Homes Limited. The Manager told us that they had been in post since 2023. We were advised by the Manager that the Provider had been given an *Inadequate* rating by CQC in December 2021 and were given an action plan to improve by the LA QIP team at the same time. The Manager said the service had been re-inspected by CQC in summer 2022 and received a *Requires Improvement* rating. A PAMMS Assessment had been carried out by the LA in October 2022 which stated *Good*.

We were informed the Care Centre has 22 beds with 21 currently occupied. 19 residents are LA funded and 1 CHC and 1 privately funded.

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### **Environment**

We were informed that the building consists of two large semi-detached houses converted into one larger building.

The Care Centre is on a main road with on-street parking. The outside of the building had a small, tarmacked area with two benches. The tarmacked area is also the Fire Assembly point for residents, staff and visitors; however, this this was not clearly marked.

The outside areas behind the building consisted of grassed and paved areas, which appeared to be in need of some maintenance. There was an obsolete door lying on the pathway to the side of the building, and a displaced bird table causing an obstruction on the narrow pathway. The grassed area at the side appeared to need some attention. On the other side of the building there were obsolete broken white goods which were obstructing the exit through to the front of the Care Centre.

There were no handrails in the outside areas leading from the conservatory.

A section of the outside area also formed part of the means of escape from the upper-level Fire Escapes. We highlighted the uneven and potentially hazardous flooring to the Manager on the day of the visit. We also informed the Manager of the need to cut back thorny bushes that could impede the escape route or could potentially be hazardous to evacuees.

The main entrance was small with lots of notices which created a rather 'busy effect' when trying to read and take notice of the information displayed.

We were welcomed by the Manager and Deputy Manager. Hand sanitizer was available and signing-in took place in the office.

A notice with staff photos and an information chart was visible.

HWWAR were escorted on a tour of the Care Centre by the Deputy Manager.

### **Our observations:**

The kitchen appeared both clean and in good condition. The hygiene rating was 4 and the certificate was displayed.

Also displayed was a four-week menu. We were informed by the staff that residents were not involved in the creation of menus. However, residents' choice of menu was available. We suggested to the Deputy Manager that pictorial menus may assist those residents with communication issues for better-informed choices.

During our visit there was a Halloween party in progress for the residents. with a buffet and tea in the dining room on display and covered with cling film, in an area close to the kitchen. The food buffet was not uncovered or eaten within the duration of our visit.

The Care Centre has ten ensuite rooms. Of the two rooms that we viewed, both had bathroom fans that were not operating. One of the communal bathrooms on the first floor was out-of-order, another adjacent wet room had the shower mixer disconnected so only toilet and handwashing facilities were available. Bathrooms appeared clean, tidy, with open window ventilation.

Some of the flooring had scuff marks that appeared to be caused by the lifting apparatus. The equipment testing (PAT) appeared to be in-date.

Of the residents' rooms we viewed, they appeared in good decorative order but seemed in need of a freshen-up. We were told by staff that residents were encouraged to bring in personal items to enhance rooms' appearance.

There were four Fire Escapes/staircases on this level and only one evac slide was available on this level. At the time of visit, the Deputy Manager was requested by HWWAR to speak to the local Fire Officer for advice on requirements to ensure they are compliant with safety regulations.

The treatment room was locked with key access, and the room contained locked and controlled drug cabinets and a fridge with temperature charts visible and updated.

We were informed by a staff member that the sluice room was out of order.

The lift appeared in good working order, although small, and it was felt it would be a tight fit with a wheelchair and a person.

There was no door on a first-floor storage cupboard.

NB – on the day of the visit, the Care Centre Manager was informed by HWWAR to check the operation of all the fans in the ensuites and of HWWAR concerns re faulty equipment.

### **Health and Wellbeing**

The Manager informed us they have had no issues regarding the Pharmacy they currently use, but that they are looking to change to Heatherlands Pharmacy as they are offering free face-to-face medication training for staff.

### **GP and Dental Access**

The Manager informed us that residents are offered to register with the GP the Care Centre works with locally, which is Manor Health Centre, but that residents can stay with their own GP Practice if they prefer.

They said they have a weekly visit from Manor Health Centre on a Tuesday, but they can call if concerned about a resident and someone from the GP Practice will call at the Centre.

We were told that the Care Centre staff use Teletriage when concerned about a resident, and they have accessed the Two Hour Urgent Community Response (UCR) Service. They said that both services were responsive and helpful.

The Manager explained they use the residents' own dentists for dental issues and ask a family-member to escort the resident. They said that, in the case of an emergency, the Care Centre can call Martins Lane Dental Practice, or they would contact the NHS Emergency Dental Helpline.

The Manager informed us that the staff have attended 'Mouth Care Matters' training and they conduct regular oral checks, as well as on-admission. Dental issues or changes are recorded onto the patient care plan while brushing residents' teeth during personal care. They said they also conduct oral checks if the resident has weight loss, cancer diagnosis, or if dentures no longer fit.

### **Activities**

A staff member explained they have an Activity Coordinator who arranges bingo, quizzes, chair exercises and ball exercises, which the residents are said to enjoy. The Activity Coordinator has been taking residents out to a local church and trying to connect the residents with events happening outside of the Centre. The staff told us they have recently made a bar area in the communal room and hope to be having themed nights for residents and families.

Staff told us they have a hairdresser who visits every fortnight for residents, and a podiatrist also visits the Care Centre regularly.

We were told staff give manicures to the residents, when required.

### **Safeguarding**

The Manager informed us that when/if a Safeguarding alert was raised then the family would be informed, and new procedures/processes would be put in place to learn from the incident.

### **Care Plans**

The Manager informed us that any issues relating to the residents are included onto the resident's Care Plan and family is informed if needed. At present, Care Plans are in written/paper format. The Manager told us they are trying to update and upload records electronically, but it is taking longer to achieve due to capacity.

### **Infection Prevention Control**

The Manager told us that if they have concerns (including with hospital discharge) they put preventative measures in place such as:

- Regular handwashing
- Having PPE in place
- Monitoring stool types and reporting of concerns
- Washing soiled clothing and bedding separately in red bags
- Following IPC guidelines.



## **UTI's**

We asked the Manager 'How do your staff identify UTI's?' They told us they:

- Check urine colour and odour
- Obtain urine samples and send to the GP Practice
- Monitor fluid intake
- Look-out for signs and symptoms.

## **Falls**

The Manager told us they have had a decrease in falls in the last twelve months. They told us they use the Safe Steps method:

- Good hydration
- Balanced diet
- Annual eye tests
- Medication review
- Keeping the environment safe and clear of potential falls
- Good lighting
- Observation for blood pressure.

They said they record falls as an incident in the accident book and follow the falls protocol, included in residents' care plans and that they update their risk assessments. They will also contact the LA Falls Team to make referrals and seek advice.

## **General**

### **Hospital Discharge**

The Manager told us that they have noticed issues, such as a decline regarding residents' mobility, upon admission and discharge from hospital, e.g. a resident walking on admission to hospital, but after two days in hospital they returned needing full hoist. They said the residents have inconsistent mobility issues if they have a longer stay.

### **Complaints**

The Manager explained that the complaint procedure is on the back of the resident's bedroom doors with information of who to contact regarding a complaint. They said they have had no complaints in the last twelve months.

The Manager said if they do have a complaint, they:

- Follow complaints policy and try to resolve immediately if possible
- Log complaint, investigate and resolve within 28 days
- Give formal acknowledgement and resolve the issues raised fairly
- Hold a discussion meeting regarding the complaint
- A response is given in a face-to-face meeting, via letter or email.
- Inform LA at contract meetings, and discuss any complaints (ongoing and outcomes).

## **Resident Engagement**

At the time of the visit, a Halloween celebration activity was taking place in the dining/conservatory area, facilitated by the Activity Coordinator.

The residents we spoke with said that they liked living there and they were treated well by staff. They told us that staff met their care needs, and that there were enough staff on duty.

The residents we spoke with said they had enough to eat and drink, although one person did mention that the food was not very good.

All the residents we spoke with said they liked the activities and felt safe living there. One resident said “ it was nice having people around and that they had a very nice room.”

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## **Staff**

The Manager told us they employ 25 staff which included management, maintenance and kitchen staff. They said they have a ratio of 8/9 staff to the 21 residents. The Care Centre does not employ any Registered Nurses. We were told during the day shift they have 1 senior staff member (who is authorised to issue medication) and 2 care workers on duty. During the night, they have 1 senior staff member (who can authorise medication) and 1 care worker.

The Manager said they complete supervisions quarterly and appraisals annually. They informed us the staff training includes:

- EOL
- Moving & Handling
- Fire Safety/Fire Warden
- Safeguarding
- MCA
- Food Safety
- Learning Disability
- H&S & First Aid / COSH
- IPC
- Medication
- Dementia
- Pressure Care
- Falls
- Equality & Diversity
- Data Protection
- Cyber Protection
- Pandemic Awareness
- Catheter Care
- 6 Steps to success in EOL care (renewed in August 2024)

## **Staff Engagement**

The staff that accompanied us around the Care Centre all appeared happy working there. HWWAR were told that staff all live locally to the area and have been employed there for a number of years. The Deputy Manager said they have plenty of staff on duty and they receive regular training, inductions and good supervision. One staff member said the thing they most like about their job is engaging with the residents.

### **Family Engagement**

We asked the Manager how they engage with families. They told us they:

- Make regular phone calls to families to give updates
- Have meetings (families don't often attend)
- Have face-to-face contact when families are visiting
- Have an open-door policy in place.

### **Community Support**

The Manager told us they regularly use the Teletriage and the 2-Hour UCR Service.

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### **Plans moving forward and Conclusion**

We asked the Care Centre Manager 'Are your processes and systems robust enough to keep your residents and staff safe?'

The Manager told us- Yes, they were confident, even though the Care Plans are not uploaded digitally that the plans are updated regularly.

We asked the Manager what their plans were moving forward, they told us they would like to build I.T. into the recording of Care Plans so that they are more person-centred and up to date, e.g., for medical results such as blood test results.

The Manager told us the Care Centre is owned and operated by S. J. Care Homes Group and is up for sale, along with another Home they own in Burnley. The Manager told us that although this is of concern to the staff, it will not have any effect on the quality of care delivered by staff to the current residents.

### **Recommendations and Conclusion**

- Need checks for signage for fire assembly and fire exits
- Shrubs and bushes need to be cut back so they do not impede the fire exit or cause harm to evacuees
- Clearing of discarded rubbish to ensure pathways are made clear and safe
- Involve residents in menu planning
- Pictorial menus may assist those residents with communication issues for better informed choices
- We informed the Manager on the day of visit that two of the ensuite bathrooms fans were not working. Not fixing this this may impact on ventilation
- First floor bathroom had broken shower/wet room equipment so only the toilet was operational. Equipment needs to be repaired
- Only one evac-slide was available. The Deputy Manager was advised by HWWAR to speak to the local Fire Officer for advice on requirements to ensure they are compliant with safety regulations
- Check the time fresh food can be left out of chill under Food Hygiene regulations
- Sluice room needs repairing to enable the staff to use this for IPC
- Handrails need fitting in outside areas
- Placing a door on the storage room on first floor to avoid incidents with stored items

## Glossary

CQC-	Care Quality Commission
ECIST-	Emergency Care Improvement Support Team
Evac-slide-	Specialist equipment that allows staff to help people with mobility issues safely exit a building during an emergency evacuation.
GP -	General Practitioner
HWWAR -	Healthwatch Wirral Authorised Representative
HWW-	Healthwatch Wirral
IPC-	Infection Prevention Control
LA-	Local Authority
NHS-	National Health Service
PAMMS-	Provider Assessment and Market Management Solution
PPE-	Personal Protective Equipment
RM-	Registered Manager
UCR-	[Two Hour] Urgent Community Response [Service]
UTI-	Urinary Tract Infection

## Distribution

Healthwatch Wirral submit the report to the provider for comment, and once comments are received and added to the report, the report will be sent to the Commissioner and CQC. Healthwatch Wirral publish all Enter & View reports on its website and submit to Healthwatch England in the public interest.

### Comment box

On page 5 – I have been registered since June 2022

On Page 6 – we were with Heatherlands Pharmacy and did already have face to face training, we are now with McKeever's Chemist, which we moved to due to them being closer to the Care Home.

On page 6 – Our lift fits a standard wheelchair and one member of staff. When assessing for residents to come to Aynsley we take this into consideration.

On page 7 – regarding dental, we would call Martins Lane Dental or other local dentists, and if resident and families want to go private there are dentists in the area which we can help with, and there is the option of the NHS Emergency Dental helpline .

RE:

- Need checks for signage for fire assembly and fire exits – All fire exit signage has been checked with Lancashire Fire and Safety and one was replaced in 2024 to ensure it was an up to date signage. The Fire assembly point signage at the front of the building had fallen off the back of the main sign for Aynsley. It has now been fully secured to the sign.
- Shrubs and bushes need to be cut back so they do not impede the fire exit or cause harm to evacuees – these were cut back the same day by Management and the Manager has spoken with our handyperson to ensure the path ways are always clear of any overhang or over grown weeds.

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- Clearing of discarded rubbish to ensure pathways are made clear and safe –was removed and discarded 31/10/2024
- Involve residents in menu planning – Our menus were changed in October 2024 to suit the residents' preferences after all residents being asked what they would like to change on the menus. Also, ongoing with further updates to the menus due to recent discussions with the residents.
- Pictorial menus may assist those residents with communication issues for better informed choices – We are currently ongoing with obtaining pictures of our meals on the menus as they are cooked each day and will be putting together a folder with them in so it enables the residents to see the food, when being asked their choice of meal and the pictures will be put up next to the options on our menu board.
- We informed the Manager on the day of visit that two of the ensuite bathrooms fans were not working. Not fixing this this may impact on ventilation – We have ordered all new fans for all bathrooms and they are being replaced week commencing 3rd February 2025.
- First floor bathroom had broken shower/wet room equipment so only the toilet was operational. Equipment needs to be repaired – The shower was booked in to be replaced by our plumbers which was completed the same week. We did have 2 bathrooms and 1 other shower room which were in working order for the residents to use whilst first floor shower was being fixed.
- Only one evac-slide was available. The Deputy Manager was advised by HWWAR to speak to the local Fire Officer for advice on requirements to ensure they are compliant with safety regulations – the Manager has spoken with our local fire officer and they informed us that we would need two evac-slides depending on how many residents on the first floor would need assisting with one. As precaution we ordered another Evac-slide and now have two in place on either side of the building for each staircase.
- Check the time fresh food can be left out of chill under Food Hygiene regulations – The Manager has spoken with our food hygiene inspector and she confirmed it is 4 hours which is in our SFBB folder too. Our food was put out just before 2pm and was then eaten at 4pm so it was within the 4 hour period for it to be out.
- Sluice room needs repairing to enable the staff to use this for IPC – Our sluice is in working order and is on ground floor, it is serviced by JLA each year. It wasn't out of order on the day of the HWW Enter and View Visit.
- Handrails need fitting in outside areas – Handrails have been put on our improvement plan with a time scale on and we are currently obtaining quotes for handrails to be fitted.
- Placing a door on the storage room on first floor to avoid incidents with stored items – The upstairs storage has all been removed and only filling cabinets are in situ, the items were in there for storage for a short while whilst a bedroom was being decorated as all rooms are decorated when they are empty or following our improvement plan for a freshen up. The items have been removed and is clear for our hoist to be charged.