

# Redmayne House

# Wigton, Cumbria

Date 20<sup>th</sup> November 2024

Time 10.00 – 14.00

# Contact Details

## Address

Redmayne House, Wigton, Cumbria, CA7 9AF

## Practice Contact:

SALLY?

## Date and Time of our visit:

20<sup>th</sup> November 2024 from 10.00am – 2.00pm

## Healthwatch Cumberland Authorised Representatives:

Sally Thoburn (Manager)

Chloe Wallace (Senior Engagement Officer and Team Leader)

# Introduction

Healthwatch Cumberland is the independent public voice for health and social care in Cumberland and exists to make services work for the people who use them. We believe that the best way to do this is by providing the people of Lancashire with opportunities to share their views and experiences.

Healthwatch Cumberland has statutory powers to listen, act, challenge and gather feedback to improve local services and promote excellence throughout the NHS and social care services.

To help achieve this Healthwatch have a statutory power to 'Enter and View' health and social care services that are publicly funded. The purpose of an Enter and View is to listen to people who access those services and observe service delivery.

Following the Enter and View visit a report is compiled identifying aspects of good practice within the service visited along with any recommendations for any possible areas of improvement.

As we are an independent organisation, we do not make judgements or express personal opinions but rely on feedback received and objective observations of the environment. The report is sent to the service provider providing an opportunity to respond to any recommendations and comments before being published on the Healthwatch Cumberland website at:

[www.healthwatchcumberland.co.uk](http://www.healthwatchcumberland.co.uk)

The report is available to members of the public along with the Care Quality Commission (CQC), Healthwatch England and any other relevant organisations. Where appropriate Healthwatch Cumberland may arrange a revisit to monitor the progress of improvements and celebrate any further successes.

## General Information

Redmayne House is a residential care home that accommodates adults with learning disabilities. It can accommodate up to five adults. This home is well integrated in the local community. The staff promotes inclusivity, and the residents are empowered to live independently within the home.

## Acknowledgements

Healthwatch Cumberland would like to thank residents, staff and management, for making us feel welcome and for taking the time to speak to us during the visit.

# What did we do?

Healthwatch Cumberland Enter and View Representatives made an announced visit to **Redmayne House** on **20/11/2024** and received feedback from:



## Pre-visit survey

SALLY?

## Introductory meeting with manager

When we arrived, we were greeted by the team leader and the manager. We were asked to sign in and shown to the office.

They explained the way the home runs, what their values are and how they care for the individuals needs. That they value input from external bodies and the Learning Disabilities team, advocating for an MDT approach wherever possible. E.g they disclosed that they have a close relationship with the local dentist who will prioritise and give extra time/patience when seeing their residents.

We were given a rundown of each of the residents who were home during our visit regarding their communication needs, their preferred interaction style and what to expect from our time there. E.g. that there is a resident who is a sensory seeker, explaining that they may present as destructive, but this is not the case as this is a controlled and safe outlet which meets the needs of that individual.

The leadership team were well informed and compassionate towards those in their care and those in their team, they were open to improvements and feedback.

## One to one discussions with residents

We were given the opportunity to speak with the staff and residents, one of the residents needed the support from a staff member to communicate. This was observed by using prompts and giving options to choose from. Another was happy to chat to us and share independently.

There were no relatives available to speak with at this time.

## Discussions with members of staff

We were able to chat freely with staff, 1:1 and collectively.

Some staff had been there for 10+ years. It was evident that the staff know the residents well and care greatly about their quality of life.

## Observations

When you arrive at the home there is a porch with a locked door, which opens into a large L-shaped hallway space with a sign in book and a post box for residents. All the rooms come off the central corridor.

Opposite the entrance is the kitchen, which is dated but practical. They have an open kitchen policy; it is fully equipped for the needs of the home. The staff encourage independence with support, meaning that the residents are free to use the kitchen and eat when they want. It is rare that residents are left unattended but there are some locked cupboards for none food items. There are other measures put into place to minimise harm, e.g. one resident will drink endless cups of coffee if allowed, as an intervention there is a pre-made pot of decaffeinated coffee available for them to access to avoid over consumption of caffeine. Another resident drinks hot drinks very quickly and has a dairy allergy, so there is another pot of pre-made coffee which is luke-warm with dairy-free milk for them.

Meal times are varied and there are no menus ahead of time as this isn't what happens in a usual house, the residents are involved in the weekly shopping and meal planning, they can decide what they eat as an individual. This tailor-made meal process is feasible with such a small number of residents and their individual needs as per their Nourish system (a live system that is an app they access, which has a profile per resident which has their routine/care needs/care plans/dietary needs etc). e.g one resident has a level 5 SALT diet so has pureed food which is ordered specifically. Another resident has a dairy allergy, so this style of meal planning works for this number of residents. They also have a shop nearby which means they can change their mind and choose what they would like from there.

There is no activity co-ordinator, the residents have different hobbies/preferences, and they have the freedom to choose what they want to do. Each member of staff are responsible for arranging activities and trips out of the home. The residents get to go out daily, but within the home they have the chance to play games or watch tv or go to another day service provider etc.

There are two lounge spaces, we observed residents watching tv. Another resident was playing music and ripping paper in the conservatory. One resident was sitting with the staff. It was calm and they seemed content.

Opposite the front door there is a communal shower room. No privacy curtain was in use. Concerns regarding dignity and potential exposure to visitors of the home.

# Summary



# Service Overview



## Location and public access

Redmayne House is a large bungalow building, within a residential area of Wigton.

It is next to a shop, conveniently situated on a bus route and has several parking spaces.

They are well established within the local community and have a good relationship with the local shops and businesses.

## Background of the home

## Services available

# Enter and View observations

## External Environment

The exterior of the home is well kept, clean and tidy.

The back of the property is a large garden space, with secure fencing.

Some rooms have French double doors and one has a patio space.

Ramp access right round the bungalow.

## Internal Environment – first impressions

We were made very welcome when we first arrived.

It was like arriving in a large home, which felt spacious and clean.

We were given an initial walk around and introduced to the residents and the staff who were present.

Each resident had bedrooms personalised to their taste and needs, an example is favourite coloured décor, displaying photos etc.

There had been some renovations made with some legacy funding left from a relative of a resident, which has been directly invested back into the home. E.g a conservatory added to the lounge space, a new patio for one of the bedrooms.

## Observation of corridors, public toilets and bathrooms

Wide corridors and a public toilet off the main corridor.

A shower room is in the main entrance space, without a privacy curtain.

Some bedrooms are en-suite and there are residents who require interpersonal care provision.

## Lounges, dining and other public areas

We observed that there are two lounge spaces, one with a conservatory which has a dining table.

There is an open kitchen with another small, dining space.

Each lounge had different adaptations based on the individual residents needs, an example of this is that a particular resident requires very minimal furniture/décor and their own space so this room only had a sofa and tv. Whereas

the other room was homely and well furnished, to meet the needs of the other residents. There were different seating options and soft furnishings.

## Staff and resident Interactions



# Resident feedback

Healthwatch Representatives spoke with two patients during the visit.

## Do you feel that the environment adequate for your needs?

*"Yes, I like my room. I like watching tv. I like eating chips and ripping paper"*

*"I like my room, my stuff and going out. Everything is my favourite"*



## What activities are on offer and do you join in?

*"We go out a lot"*

*"Playing games"*

*"I like going out and listening to my music"*

## How do you find the care you receive?

*"I feel listened to"*

## How do you find the food provided?

*"I like the food. I like to make food with support. I can go to the shop and get what I want"*

*"It is nice, I like coffee and chips"*

## Any other comments or feedback

N/A

# Staff feedback



Healthwatch received feedback from two staff members during the visit.

## Do you have enough staff when on duty?

*"Sometimes yes, sometimes no. It averages on 3-4 staff a day, if a situation arises and we need to take residents out we are not able to do so so that can negatively impact the home"*

*"We could do so much more with more staff/hours. We all want the best lives possible for the residents and we do manage it well but we would to do more but the ratio doesn't currently allow for that"*

## Do you feel supported to carry out a person-centred experience?

*"Yes to all personal care needs but often quality time is hard to provide, due to the restrictive routines of some of our residents. Staffing numbers obviously contribute to this"*

*"Yes I feel that I always have enough time to provide support, I work flexibly to ensure this"*

## Do you feel you have enough training to carry out your duties well?

*"All our training is online or face to face in Carlisle, mine is all up to date"*

*"I would like to have more in depth autism training"*

*"I think we would benefit from some end-of-life training, perhaps an online course. Learning how we can support residents to pass away in their own homes"*

## What is your experience of working here and would you recommend this service to a close relative?

*"I would and have recommended working here to a relative. I also have family members with learning disabilities, and I would be happy for them to live here"*

*"I wouldn't have been here so long if I didn't recommend working here. I would also be happy to recommend this home to loved ones but only this home specifically, I know all home have challenges but because I know the staff well I would be comfortable. Management have been where I have been, so they understand and it keeps me feeling supported"*

## Are there any changes that can be made to improve the patient experience?

*"An increase in staff/hours like previously stated. It would be amazing to have independent vehicles to free up some time to improve experiences outside the home, but that would require funding or a grant"*

*"More activities outside of the home, which does require more staff"*

## Any other comments?

*"I don't understand the budgets and funding elements but why can't some people have what they want or need? I think that extra support with mobility issues or transport etc should be needs-led not money-led"*

*"I love the staff team I work with here and I am confident in our care"*

*"It feels like a proper family here. Redmayne supported me through a difficult time in my personal life, I will always be grateful"*

# Recommendations

The following recommendations have been formulated based on observations of the environment and feedback gathered from residents, relatives and staff.

- 1.

# Provider response

Recommendation	Action from provider	Timeframe	Comments

## Questions

Is the report factually accurate?

Did you learn anything new about residents' views and experiences, or anything else, as a result of the Enter and View undertaken by Healthwatch Lancashire?

Any other comments?



# healthwatch Cumberland

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