



Care home life, what it's really like!

Dairy Lane Care Centre



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Acknowledgements

Healthwatch Sunderland would like to acknowledge the support of the residents who allowed us into their home and talked openly and honestly with the team. We would also like to thank those staff members, family and relatives who took time out of their day to answer our questions and give their feedback.



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1. Introduction

What is Healthwatch?

Healthwatch England is the national consumer champion in health and social care. It was set up by the government to ensure that people's views around health and social care services are listened to and fed back to service providers and commissioners with a view to improving services.

There is a local Healthwatch for every Local Authority area in England. Healthwatch Sunderland aims to be a strong local consumer champion working with our partners to support:

- People to shape health and social care delivery
- People to influence the services they receive personally
- People to hold services to account.

We achieve this by:

- Listening to people, especially the most vulnerable, to understand their experiences and what matters most to them
- Influencing those who have the power to change services so that they better meet people's needs now and into the future
- Empowering and informing people to get the most from their health and social care services and encouraging other organisations to do the same.





2. Background and rationale

Independent Age and Healthwatch Camden have recently carried out some initial research into the information currently available on care homes. The results indicated that there is a need to provide qualitative information on care homes that goes beyond basic safety standards. It shows that the information needed by people looking for a suitable care home, should provide a real sense of what a home may be like to live in.

Healthwatch Sunderland have responded to this need and will be carrying out visits to all 47 care homes currently available to older people across Sunderland. The complete results will be published to enable members of the public to make more informed choices when considering which care home to move into for themselves or their relatives.

To enable this, 8 indicators have been devised to be used and will focus specifically on issues of quality, rather than safety, such as how much residents and family can have a say in how the home is run, and whether residents are able to pursue their hobbies etc.

The 8 indicators are:

1. A strong visible management
2. Staff with time and skills to do their jobs
3. Good knowledge of each individual resident and how their needs may be changing
4. A varied programme of activities
5. Quality, choice and flexibility around food and mealtimes
6. Ensuring residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists
7. Accommodate resident's personal, cultural and lifestyle needs
8. Provide an open environment where feedback is actively sought and used.



3. Methodology

An initial pre-visit meeting with the home Manager Jane was held at Dairy Lane Care Centre. This was to explain the reason for the ‘Care home life - What’s it’s really like!’ visit, to understand the needs of the residents and to arrange a visit that would cause as little disruption as possible.

The ‘Care home life - What’s it’s really like!’ visit took place on the 7th November 2017 and was carried out by Healthwatch Sunderland staff and volunteers who are trained so that they can effectively capture the resident’s experience.

At the visit residents were asked a range of questions via a set questionnaire (see appendix 1). The questions were constructed to reflect the objectives of the visit. Observations were also made on the physical environment and staff/resident interaction.

Staff and relatives were also given questionnaires to complete (see appendix 2, 3 and 4).

We also ran a facebook campaign asking local people to comment on their experiences of care homes across Sunderland. Any feedback we received was incorporated into the findings.

4. Findings - Summary

The Healthwatch team collated the survey findings we gathered from residents, their family and friends, staff and Managers and our observations made during our visit. The findings have been scored against the eight indicators in terms of the degree which they were met, from strongly disagree to strongly agree. A neutral rating indicates both positive and negative feedback, which when averaged results in a neutral score. A summary of this can be found below:

Here is the key which shows the indicator scores



Strongly disagree



Disagree



Neutral



Agree



Strongly agree

1.	A strong visible management	 Agree
2.	Staff with time and skills to do their jobs	 Strongly Agree
3.	Good knowledge of each resident and their changing needs	 Agree
4.	A varied programme of activities	 Agree
5.	Quality, choice and flexibility around food and mealtimes	 Strongly agree
6.	Regular access to health professionals	 Strongly agree
7.	Accommodation of resident's personal, cultural and lifestyle needs	 Strongly agree
8.	An open environment where feedback is actively sought and used	 Agree



Findings

Dairy Lane Care Centre is a domestic residence located on Dairy Lane in Houghton le Spring and is a short walk from Houghton high Street. The home is over two floors, with two lounges, a dining room, an activity room and bedrooms. The home has a garden to the front and side of the property with seated areas.

This small, family run care home offers long-stay and respite care. It provides residential care and support for up to 22 people, most of whom are living with dementia

See the latest CQC inspection report here:
<http://www.cqc.org.uk/location/1-1190113361>

At the time of our visit there were 18 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch team were only able to support 4 residents to fully complete the survey. The team received 4 staff and 9 relative surveys back.

The results of these surveys are given below:

Indicator 1 - A strong visible management

The indicator states that the Manager should be visible within the care home, provide good leadership to staff and have the right experience for the job
The Healthwatch team AGREE this was met.

The majority of residents we spoke to were unable to name the Manager but most were able to recognise her and commented that she was lovely.

The relatives who responded all said they knew the Manager and commented positively about her stating she is excellent, very friendly, makes time to talk and explain what is happening. “She has helped me on many occasion with my understanding and information.”

All staff who responded stated that they received all the support they required from the Manager and found her to be very approachable and easy to talk to.

The Manager informed us that she has worked as a care home manager since 1996 and worked at Dairy Lane since 2001 and she enjoys working with the elderly.



Indicator 2 - Staff with time and skills to do their jobs

The indicator states that staff should be well trained, motivated and feel they have the resources to do their job properly.

The Healthwatch team **STRONGLY AGREE** this was met.



Residents all positively commented about the staff stating “They are good, they look after my relative well and nobody says don’t do this don’t that”. All residents stated that staff have time to stop and chat to them, one commented that if you ask a question they do their best to answer it. Another added that they have good conversations which they enjoy.

All relatives positively agreed that staff have both skills and time to do their job and are well trained and knowledgeable. One commented “Staff are warm, caring and friendly, are undoubtedly busy but always make time to talk to my father”.

All staff stated that they have enough time to look after residents with one commenting that it is important to reminisce with residents as well as looking after their hygiene needs. They went on to say that they are encouraged to develop their skills by carrying out courses in house or online. They all enjoy their job and commented that they enjoy working with other staff as a team, caring for the residents and helping them with their everyday needs and talking to residents.

The Manager informed us that she tries to instil a sense of “ownership” into her staff. Their skills belong to them so it benefits them to develop and in turn it benefits the residents.

Indicator 3 - Good knowledge of each resident and changing needs

The indicator states that staff should be familiar with resident’s histories and preferences and have processes in place for how to monitor changes in health and wellbeing.

The Healthwatch team **AGREE** this was met.

Residents had a mixed response to this question, some stating that staff knew them well and others saying some did and some didn’t.

All relatives agreed that the staff knew their relatives well and notice and respond to changes in their relative/friend’s needs. One commented “The staff seem to know my relative really well and give him respect for his past professional life as a doctor. They also understand his personality well and his health care needs which they notice, respond to and inform them of any changes”. Another said “The home is small so everyone knows everyone”.



Staff commented that they use the residents care plans to ensure that they have good knowledge of a resident. In addition to this they receive regular updates from the Manager and talk to the residents and their family.

The Manager commented that they are a small team and talk to each other. They carry out the obligatory assessments and handovers but they find out the finer details by talking.

Indicator 4 - A varied programme of activities

The indicator states that care homes should provide a wide range of activities (and ensure residents access these) in the home and support residents in taking part in activities outside the home.

The Healthwatch team AGREE this was met.



The home has two Activities Co-ordinators who are in the home supporting residents to carry out activities from 12 noon to 4.00pm on a daily basis. Whilst on the visit the Healthwatch team witnessed a schedule of activities

displayed on the notice board and residents taking part in a range of activities in the dedicated room. These included dexterity activities, reading and a sing along. The residents also showed the team a poppy tree that they had created as part of a craft afternoon to mark Remembrance Day. All residents spoken to really enjoyed the activities with approximately 6 of them taking part on a daily basis. They all had high praise for the Activities Co-ordinator and commented that getting together and talking with one another was their favourite activity. Many of the residents commented that they don't go out on trips very often with one stating that it is difficult to do things that everyone will enjoy.

Relatives commented about the activities being available on a daily basis including activities to celebrate different aspects of the calendar, physical activities and music etc. They stated that they feel their relatives/friends are encouraged to take part. One relative commented that they could do with a timetable. Another one said "The Activities Co-ordinator is lovely, my mam is very fond of her."

Staff and management told us that there is a range of activities available including doll therapy, pet therapy, movie days, pub nights, theme days, coffee mornings, visiting performers and trips to the local shops etc. They also offer exercise classes to groups and individuals, as well as quizzes and games. They encourage residents to take part in the activities by getting them together to join in, giving them options of what they would like to do and supporting them to take part.



Indicator 5 - Quality, choice and flexibility around food and mealtimes

The indicator states that care homes should offer a good range of meal choices and adequate support to help residents who may struggle to eat and drink including between mealtimes. The social nature of eating should be reflected in how homes organise their dining rooms and accommodate different preferences around mealtimes.

The Healthwatch team **STRONGLY AGREE** this was met.



The home has a menu with two choices for residents to choose from at lunch and evening meal. They also have tea rounds in-between meals which offers residents various snacks. The Healthwatch team witnessed a menu displayed in the dining room and saw the staff serving tea and biscuits to residents.

All of the residents responded positively about questions about the food. Many stated that the food was tasty, suited them and that the choice was good. They all commented that they enjoyed getting together at mealtimes in the dining room and staff are also around to chat to.

The majority of relatives commented that they thought the quality and quantity of food was excellent. One felt they were

unable to comment as they are not around at mealtimes. Another went on to say that staff were able to offer and follow a diet for their father that respected his culture. One relative added “The cook will do anything mam asks for”. All relatives and friends were confident that their relatives/friends are supported to eat and drink and mealtimes are made sociable.

Staff told us that if residents don’t like the available choices, they can be offered something else that they would prefer. They also encourage and support residents with the meals and some residents have food and fluid charts to keep a note of what they are eating and drinking.

Mealtimes are made sociable with staff encouraging residents to join one another in the dining room.

The Manager informed us that a 3 week menu is formulated with input via questionnaires. They buy their food from a regular supermarket so food is not “ordered in” and is inspected before being bought. Besides the main mealtimes they have some residents who have meals in their rooms or lounges by choice. For those residents who can no longer give us their choice from the menu, staff rely on



their likes/dislikes documentation, they visually assess food and drink intake and their weight. Dieticians and medical staff are involved if necessary.

Indicator 6 - Regular access to health professionals (GPs, dentists, opticians, chiropodists etc.)

The indicator states that residents should have the same expectation to be able to promptly see a health professional as they would have when living in their own home.

The Healthwatch team STRONGLY AGREE this was met.

Residents informed us that they are regularly in contact with health professionals with the support of the home staff this included opticians, dentist and GPs. During the visit the Healthwatch team witnessed a resident having her regular appointment with a chiropodist.

The majority of relative and friends agreed that all health professionals are seen as appropriate and one commented that she was unsure as her relative had only been in the home for 3 months.

“Mam’s eyes are tested every year and the staff call the optician if there is any problems with her glasses.”

Staff and management informed us that they have regular visits from health professionals who come out to see the residents for eye tests, oral assessments and that additional visits are arranged as required, for any changes.

The Manager added that the home has been in receipt of the oral health award for the last 3 years.

Indicator 7 - Accommodate resident’s personal, cultural and lifestyle needs

The indicator states that care homes should be set up to meet residents cultural, religious and lifestyle needs as well as their care needs and shouldn’t make people feel uncomfortable if they are different or do things differently to other residents. **The Healthwatch team STRONGLY AGREE this was met.**

A few of the residents commented that the home respects their faith and visits from a local churches are arranged for those who would like them.

Residents when completing the form stated that they are supported with having a shave and have regular visits from a hairdresser. One resident also informed us that the Activities Co-ordinator helps her with painting her nails.

The majority of friends and relatives asked stated that their friends/relatives do not have any specific lifestyle, religious or cultural needs. One relative whose father is Jewish commented that staff have enthusiastically sought help and advice and are not only aware but very keen to ensure that all cultural needs are met. They went on to say that this was commendable



The staff and management commented that they interact with residents, their family and friends to devise the resident's life history documentation. They also complete "living well with dementia" framework documentation as this is more in depth.

Indicator 8 - An open environment where feedback is actively sought and used

The indicator states that there should be a mechanism in place for residents and relatives to influence what happens in the home, such as a residents and relatives committee. The process for making comments or complaints should be clear and feedback should be welcomed and acted on.

The Healthwatch team AGREE this was met.

None of the residents spoken to said they had anything to complain about but were aware that they could raise any concerns to staff.

All relatives commented that they felt welcome participants in the home and felt that they and their relatives could contribute to how the home is run by openly talking to the Manager, staff or completing an annual questionnaire. One relative added that there is a comment box present in the home. Another commented that their father is regularly asked for his opinion and readily gives it. They also added that they were confident to give feedback to the Manager and agreed that procedures were clear and feedback is given to relatives. One said "As the Manager and her team are so professional that the need to complain is unlikely."

Staff and management commented that residents and family can speak to staff at any time and that the home also has a comments box if they would like to leave an anonymous comment. The home also carries out questionnaires, reviews and surveys. There are currently no relative/residents meetings because all returned surveys have stated that all interested parties prefer to discuss as needed. The Manager went on to further comment that due to the size of the home that this allows for better communication.

Examples were given how residents can influence how the home is ran. This included residents being able to bring in their own hairdresser rather than use the homes and bring in their own furniture if they wish.

The home records all comments and complaints along with any investigations or actions which are discussed with the complainant. Agreed actions are then implemented to resolve the situation.

All staff stated that they can have a say in how the home is run by communicating with one another and holding meetings when necessary.



5. Appendices

Appendix 1 - Questions for residents

1. Do you know the Manager of the home?
2. What do you think of the Manager?
3. What do you think about the staff here?
4. Do the staff have the time to stop and chat with you?
5. Do the staff know what you need and what you like and don't like?
6. What activities are there for you in the home?
7. Is it easy to join in the activities?
8. Do you get a chance to do any of the things you used to enjoy before you came here?
9. Do you go on trips outside?
10. What do you think of the food here?
11. Is there enough choice of what you eat and when you eat?
12. Do you enjoy mealtimes?
13. Have you seen a dentist to check your teeth or an optician to check your eyes recently?
14. Is there respect for your religion or your culture here in your home?
15. Do you get asked what you think about the home?
16. Would you like to change anything about the home? Have you told anyone about this and what happened?
17. What would you do if you wanted to make a complaint about the home?



Appendix 2 - Questions for Managers

1. **Have strong, visible management**
What attracted you to the role of care home manager?

What do you enjoy about the role?
2. **Have staff with time and skills to do their jobs**
In what ways do you encourage staff to develop their skills?
3. **Have good knowledge of each individual resident and how their needs may be changing**
How do you ensure that staff get to know a resident's life history, personality and health and care needs when the resident first arrives?

How is information about a resident's tastes and their health and care needs updated as these change?
4. **Offer a varied programme of activities**
What activities are available for residents inside and outside the home?

What encouragement and assistance do you give to residents so that they can take part in activities?
5. **Offer quality, choice and flexibility around food and mealtimes**
What systems are in place to support residents to eat and drink at mealtimes and outside of mealtimes?

What choices do residents get about what they eat and drink and when and how they eat and drink?

In what ways do you try to make mealtimes sociable?
6. **Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists**
Do residents have regular, preventative dental and optometry (eye-care) appointments?
7. **Accommodate residents' personal, cultural and lifestyle needs**
How does the home find out about and cater to residents' cultural, religious and lifestyle needs? Can you give an example?
8. **Be an open environment where feedback is actively sought and used**
In what ways can residents and their family have a say in how the home is run?

Are staff able to have a say in how the home is run?

How do you make use of feedback or complaints from residents and relatives?



Appendix 3 - Questions for staff

- 1. Have strong, visible management**
What support do you receive from the manager?

How easy is it to talk to the manager when you want to ask a question or raise an issue?
- 2. Have staff with time and skills to do their jobs**
Do you feel you have enough time to care for residents?

Are you encouraged to continue to develop your skills? In what ways?

What do you enjoy about your job?
- 3. Have good knowledge of each individual resident and how their needs may be changing**
How do you ensure that staff get to know a resident's life history, personality and health and care needs when the resident first arrives?

How is information about a resident's tastes and their health and care needs updated as these change?
- 4. Offer a varied programme of activities**
What activities are available for residents inside and outside the home?

What encouragement and assistance do you give to residents so that they can take part in activities?
- 5. Offer quality, choice and flexibility around food and mealtimes**
How do you make sure residents are able to eat and drink at mealtimes as well as outside of mealtimes?

What choices do residents get about what they eat and drink and when and how they eat and drink?

In what ways do you try to make mealtimes sociable?
- 6. Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists**
Do residents have regular, preventative dental and optometry (eye-care) appointments?
- 7. Accommodate residents' personal, cultural and lifestyle needs**
Can you give an example of how the home caters for religious and cultural needs?
- 8. Be an open environment where feedback is actively sought and used**
In what ways can residents and their family have a say in how the home is run?

Can you provide an example of how a resident or their family member has influenced how the home is run?

Do you feel staff can have a say in how the home is run?



Appendix 4 - Questions for friends and relatives

- 1. Strong visible management**
Do you know who the Manager of the home is?

Is the Manager friendly and helpful?
- 2. Have staff with time and skills to do their jobs**
Do you think the staff have the time and skills to care for your friend/relative?
- 3. Have good knowledge of each individual resident and how their needs may be changing**
How well do you think the staff know your friend/relative's life history, personality and health and care needs?

Does the home notice and respond when your friends/relative's needs change?
- 4. Offer a varied programme of activities**
What do you think of the activities available for residents inside and outside the home?

Is your friend/relative properly encouraged and supported to take part in the activities?
- 5. Offer quality, choice and flexibility around food and mealtimes**
What do you think of the quality and choice of food?

Are you confident that your friend/relative is supported to eat and drink as much as needed?

Do you think that mealtimes are sociable?
- 6. Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists**
Does a dentist and an optometrist (optician) come to see your friend/relative regularly or only if there is a problem?
- 7. Accommodate residents' personal, cultural and lifestyle needs**
Does your friend/relative have any specific lifestyle or religious or cultural needs? Are these respected and accommodated?
- 8. Be an open environment where feedback is actively sought and used**
Do you feel that you are a welcome participant in the life of the home?

In what ways can you and your friend/relative have a say in how the home is run or give feedback?

Would you know how to make a complaint if you wanted to?

Would you feel confident to make a complaint and do you think it would be acted on appropriately?



DISCLAIMER:

- The observations made in this report relate only to the visits carried out.
- This report is not representative of all residents' views; it only represents the views of those who were able to contribute within the time available.

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