

Care home life, what it's really like!

Donwell House



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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 Nicola was held at Donwell House. 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 29th September 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	 Strongly agree				
2.	Staff with time and skills to do their jobs	<table border="0"> <tr> <td> Neutral</td> <td> Agree</td> </tr> <tr> <td>Time</td> <td>Skills</td> </tr> </table>	 Neutral	 Agree	Time	Skills
 Neutral	 Agree					
Time	Skills					
3.	Good knowledge of each resident and their changing needs	 Agree				
4.	A varied programme of activities	 Strongly agree				
5.	Quality, choice and flexibility around food and mealtimes	 Strongly agree				
6.	Regular access to health professionals	 Agree				
7.	Accommodation of resident's personal, cultural and lifestyle needs	 Agree				
8.	An open environment where feedback is actively sought and used	 Strongly agree				



Findings

Donwell House is a purpose built property located on Wellgarth Road, Donwell Village, Washington, NE37 1EE. There are two wings; one wing is made up of two residential care units and the other has two nursing units.

The home offers residential, nursing, dementia and palliative care for up to 63 people some of whom may be living with dementia.

The home has access to a minibus for trips and outings.

At the time of our visit there were 44 residents living in the home. The Healthwatch team spoke to 6 residents and received 7 staff and 3 relative surveys back.

See the latest CQC inspection report here:

<http://www.cqc.org.uk/location/1-326346915>

At the time of our visit there were 44 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch team were only able to support 6 residents to fully complete the survey. The team received 7 staff and 3 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 STRONGLY AGREE this was met.

Some of the residents at Donwell House had difficulty identifying the Manager but this may have been due to their own individual health or capacity. Others stated that they did know who she was and they all said that she was nice, with one resident stating that she also knew her job well. The Healthwatch team witnessed positive interactions between the Manager and the residents, where she addressed them all by name and made conversation as she introduced them to the team.

Relatives who were asked knew the Manager and found her helpful and friendly.

All staff who completed the survey responded positively to the question saying the Manager operates an open door policy making her very approachable and is available to support and guide them when necessary. One staff member also commented that the Manager visits all units regularly through the day to discuss any issues.

The Manager stated that she has been acting Manager at the home for 3 months. She is passionate about the role and enjoys all aspects of the role but especially being able to get involved with the residents.



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 gave this a NEUTRAL rating for staff time and AGREE for staff skills.

All of the residents asked commented that staff were pleasant, friendly and caring. When asked if the staff had time to stop and chat to them the responses given were split, some saying they did and others saying they didn't. The majority of the residents stated that the staff were very busy.

Relatives who completed the survey felt that the staff had enough time for relatives and that they feel part of the family and felt comfortable asking the staff questions when the need arises.

When asked about having enough time to care for residents the responses from care staff was mixed, some stated yes and others said yes for the majority of the time but that there was occasions when issues such as staff sickness can make this difficult. They added that this issue is now being addressed.

All staff commented that they are encouraged to take part in training and there is a wide choice available. They complete mandatory training but also have options to participate in additional training that is of interest to them and are supported to complete this. All staff commented that they really enjoyed their job and made remarks such as "I enjoy talking to the residents" and "I enjoy being able to enhance the lives of our residents and put smiles on their faces".

The Manager informed us that during supervisions staff are asked if there is any training they would like to develop and she will arrange this.

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.

All residents we spoke to felt that the staff knew them and knew their likes and dislikes. Relatives told us that they feel the staff know their relatives very well and always notice changes in their needs.

The staff stated that a good knowledge of the residents is built up by accessing care plans, talking to residents and their families to learn as much information as possible. This information is continually monitored and amended via the residents care plans making it a person centred approach. One staff member give an example of this, stating that when the dietary requirements for residents change they are noted and then communicated to the chef straight away.



The Manager stated that the home has introduced a one page profile for the residents. This is where they have information which is important to them for staff to read and also life memories which is from childhood up to current date.

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 STRONGLY AGREE this was met.

The care home provides a range of in house activities 7 days a week for the residents and have 4 activity staff to help provide this. Inside the home provides a range of activities including games, painting, baking, quizzes, arts and crafts, bingo and exercise etc. They also have regular visits from, entertainers, volunteers from the local church, Age UK and a local football team who come in and do activities with the residents.

One resident the Healthwatch team spoke to said she enjoyed the arts and crafts activities and pointed out a collection of materials available in the lounge area that she could pick up at any time and use. Other residents commented that the range of activities was good whilst others stated that they prefer not to join in any more. The majority of the residents we spoke to were sitting in the lounge area where they had been baking or watching the TV. Some of the residents also informed us that, that morning they had been out on a bus trip. They all stated that they really enjoy these trips. Relatives also agreed that the outdoor and other activities provided were either excellent or very good.

Staff and the Manager also informed us that the Activity Co-ordinators are trained in the art of stimulating resident's senses. They also stated that they have access to their own wheelchair accessible bus and have outings at least twice a week to shows, line dancing at the community centre, lunches, bowling, to the seaside and shopping trips etc. Staff informed us that they assist residents to take part in activities, examples given included using large print bingo sheets, encouraging residents to take part and sitting with them to support and explain what is happening. For those residents who are unable to take part one to one interaction is available. They also commented that resident's family are also encouraged to join in on activities.

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 majority of the residents told us that the food was really nice with a wide range of choice available to them. They also stated that there are set mealtimes but have the option to not eating at these times and instead are able to request snacks at any time of the day or night. The majority of the residents informed us that they are encouraged to eat in the dining area with other residents at mealtimes and do so most of the time. Relatives and friends also agreed that the quality, choice and flexibility of food and mealtimes was good.

Staff informed us that they monitor mealtimes to ensure residents are eating well. Residents have a choice from a menu and are supported to make choices. If there isn't anything they like on the menu they can request something else. The home encourages residents to eat independently where possible but they will be aided when needed. They also consult with speech and language specialist for advice with swallowing problems or have special aids/equipment if needed. They make mealtimes relaxing, playing music and encourage residents to sit and interact but residents who wish can have their meals in the lounge or bedroom.

During the Healthwatch visit we witnessed staff supplying residents with tea, coffee and juice and homemade cake.

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 AGREE this was met.

All residents spoken to said that they have regular healthcare check-ups. Some stated that they have visits to the home from GPs for example and others visit local practices with support from staff. One resident who the Healthwatch team was speaking to was enquiring about her Flu vaccination for the current year and wanted to know when she would be able to receive hers. Healthwatch staff approached the care staff regarding this on the behalf of the resident. The care staff then made a phone call to the GP practice to find out this information and then passed on her findings to the resident who was happy with the result. Staff also noted this on the resident's records to follow up at a later date.

Care staff also informed us that dentist, optician and chiropodists make regular visits to the home. GPs are contacted as and when needed and are backed up with the district nurse team.



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 AGREE this was met.**

During our visit the Healthwatch team noted that residents were appropriately dressed and their clothes were clean. Gentlemen were shaven and all residents' hair was clean and well kept.

All residents felt that their religion and culture was respected. One resident commented that she has Holy Communion in the home and often goes out of the home to a local church. Some of the residents also stated that they have their hair done on a regular basis which they enjoy.

Staff and management informed us that visits from priests or ministers can be arranged as and when required and that services are sometimes held in the home. In general the home will meet any cultural needs without problem and these needs are discovered in a pre-admission assessment with the resident and family.

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 STRONGLY AGREE this was met.

When speaking to residents the Healthwatch team asked if staff ever asked for their feedback about the home, some residents stated that they could not remember and others stated they may have been asked a similar question when they first came to the home. When asked if they would like to change anything, one mentioned the food, which she had raised at a residents meeting and another resident told us that she would like an en-suite in her room.

Those relatives who completed the survey said that they felt welcome in the home and also felt they were encouraged to speak their mind, could approach the staff at any time with anything and that there was always staff available to talk to.

The staff and the Manager told us that the home holds regular residents and relatives meetings and operates an open door policy for those wanting to give feedback which is always welcome. An example given of this was the introduction of a day room for families to use when they need privacy with their relative, or so they can sit in when their relative who is poorly and they going to be at the home for a long time. This was done as a result of a suggestion made during a relatives meeting.



They also stated that residents who are able sit in on new staff interviews and give input as to who is going to be looking after them.

The Manager added that they use feedback and complaints as a learning curve. Although they rarely get complaints, they follow company procedure and inform the complainant of the outcome and ensure they are happy before the complaint is signed off.

Staff added that they feel they can have their say about how the home is run and can put ideas for improvements forward which are taken seriously, never ignored and that staff respect each other ideas.



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 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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