

Care home life, what it's really like!

Donwell House



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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 Sunderland?

Healthwatch Sunderland is the independent local champion for people who use health and social care services. We're here to make sure that those running services put people at the heart of care.

By speaking to Sunderland residents we aim to understand their needs, experiences and concerns of accessing and using local health and social care services. We can then speak out on their behalf to local service providers, focusing on people's concerns about current services and ensuring they are listened to and addressed by those who are running services.

We encourage and work with local services to involve Sunderland residents in the changes to health and social care provision. The ultimate aim is to get things right for the future, with health and social care services which meet the needs of the local community.



We champion what matters to you and work with others to find ideas that work.

We are independent and committed to making the biggest difference to you.





2. Background and rationale

Research carried out in 2016 highlighted that there is a need to provide qualitative information on care homes which 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.

Since 2017 Healthwatch Sunderland has responded to this need and began carrying out visits to all care homes currently available to older people across Sunderland. The aim is that these visits will be carried out on an annual basis to ensure the findings are current and up to date.

To enable members of the public to make more informed choices when considering which care home to move into for themselves or their relatives, the complete results are available via our website, where you will also find a promotional video which will explain the work fully: www.healthwatchesunderland.com.

Professionals and members of the public are also welcome to contact us if they need further information or access to the reports in other formats.

The work is based on 9 indicators which focus specifically on issues of quality, 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 9 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, chiropodists, audiologists etc.
7. Accommodate resident's personal, cultural and lifestyle needs
8. Provide an open environment where feedback is actively sought and used
9. Provide a physical environment which is suitable for the needs of the residents



3. Methodology

The ‘Care home life - What it’s really like!’ visit took place on the 8th November 2018 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 designed to reflect the objectives of the visit. Observations were made on the physical environment and staff/resident interaction etc.

Staff and relatives were also given questionnaires to complete (see appendix 2, 3, 4 and 5).

We engage with local people on an ongoing basis, encouraging them to share their feedback on their experiences of care homes across Sunderland. Any feedback we received was incorporated into the findings.

4. Findings - Summary Donwell House

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 nine 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	<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">  Time Neutral </div> <div style="text-align: center;">  Skills Agree </div> </div>
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	 Neutral
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
9.	Provide a physical environment which is suitable for the needs of the residents	 Strongly agree



Findings

Donwell House is a purpose built property located on Wellgarth Road, Donwell Village, Washington, NE37 1EE. The home can accommodate 63 residents, in single, ensuite rooms, which can be furnished with residents own belongings to ensure familiarity.

The home offers support to people 65 years and over who require general nursing, dementia nursing, general residential or dementia residential care.

The home has five communal areas and fully accessible gardens for residents to use. There is currently no hearing loop system available within Donwell House.

There is internet access available in some areas of the home, which residents can access if they wish to do so.

Residents are able to bring their pets to live with them at the home, following a risk assessment and assessment of their compatibility with other pets already at the home.

Donwell House currently employs two full time and one part time Activities Coordinators, who offer a range of activities seven days a week.

Meal times at the home are protected from GP visits and medication rounds however families are encouraged to attend meals with their family members.

See the latest CQC inspection report here:

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

At the time of our visit there were 41 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch team were only able to support five residents to fully complete the survey. The team received eight staff and two relative/friend 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.

From the five residents who responded to the Healthwatch survey, three were able to name the Manager of Donwell House, with an additional resident stating that they have seen her often, although they couldn't recall her name. When asked what they think of the Manager, the residents responded positively, using words like; friendly, very pleasant, adding that they have no complaints, and that they get on well with her.

The relative and friend who responded to the survey both knew the Manager by name and gave the following comments about her;



“She’s OK - does her best.”

“Both Nicola and Zelda are lovely caring management. They manage the place so well. A credit to Donwell House.”

All of the staff who completed a Healthwatch survey indicated high levels of satisfaction when asked what support they receive from the Manager. Their comments included;

“I am able to approach my Manager with confidence.”

“I feel I can generally go to management at any time and as long as they are not busy i.e. in a meeting or on the phone, they will find time to listen.”

“My Manager supports me when I need advice and help with anything.”

When asked what their experience is of talking to the Manager when they want to ask a question or raise an issue, all of the staff again responded positively commenting that the Managers door is always open, and help and advice is always available from the Manager and her Deputy. Comments included;

“In my experience, if I’ve had a question or an issue, the Manager would help me and give any advice needed.”

“Brilliant, always able to go to the Manager and if any issues do come up, she is always able to help to solve them or advise on the best way forward.”

“I speak to my Manager on a daily basis. For example to discuss staff rotas.”

When asked what attracted them to their current role, the Manager said; “I am passionate about providing person centred care and I want to make a difference in people’s lives.”

The Deputy Manager said; “Taking on a new challenge. I have deputy managed and managed a residential and EMI (enduring mental illness) residential home, but wanted to expand my knowledge to work with nursing and EMI nursing clients.”

The Manager and her Deputy went on to inform us what they enjoy about their current role. The Manager said; “I enjoy seeing people happy and I enjoy interacting with all of the residents, staff and visitors.”

The Deputy said; “I want to ensure that we, as a care provider, attend to clients’ needs in a dignified and person centred way and give them the opportunity to enjoy new activities and challenges.”



One of the spare resident rooms



During the Healthwatch team visit, friendly interactions between the Manager and residents were witnessed. The Manager knew the residents by name and introduced them to the team.

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 time, which indicates both positive and negative feedback, which when averaged results in a neutral score and an AGREE rating for skills.

When asked about the staff at the home, resident respondents gave a mixed response, with some residents giving positive comments such as; 'quite pleasant', 'good', 'fun loving' and 'no problems'. Others stated that some of the staff are good and some not so good. One resident added that some of the staff can be a little awkward.

The Healthwatch team then went on to ask residents if the staff at the home have time to stop what they are doing and chat to them. Two residents stated that the staff haven't got time for this as they are very busy, with one stating; "If you want something doing, they will do it, but there are two of them to ten of us, so it won't be immediately." Three of the residents stated that the staff do have the



time to chat to them. One resident commented; “They will find time if you need to talk to them.”

The relative informed us that they feel the staff do have the time they need to care for their relative, with the friend who responded stating that this is the case for most of the staff. Both respondents indicated that they feel the staff have the necessary skills to care for the friend/relative. Comments included; “Yes, staff are always doing courses or refresher courses. They are trained to deal with all aspects of care.”

When staff were asked if they feel they have enough time to care for the residents all of them indicated that they would like to spend more quality time with them. Here are some of their responses;

“I do enjoy giving my time to the residents, but there are times where I would love to do more for the residents as my time is very limited, especially assisting residents who need two carers for mobility reasons. Maybe extra staff on the floors that are busier?”

“I care for residents within the time I have, but I often feel I could do more for them. For example, sit and talk or for them to enjoy a soak in the bath and have a chat, but often I can’t do this as there are other residents to see to and my time has to be shared. More staff on busy units will help.”

“As well as doing my job role, I also try to find time to spend with the residents.”

The Activities Coordinator stated that she has enough time to provide a varied programme of activities for the residents.

All staff went on to say that they are encouraged and supported to attend training courses to keep their skills and knowledge up to date.

When asked what they enjoy about their role, all but one staff member put the residents at the heart of their responses. Their comments included;

“I enjoy caring for others and if they are happy, then I am happy. I also enjoy giving each individual the care they need to feel happy and content.”

“Making people smile. Watching family members go home happy, knowing their loved ones are happy and having fun.”

“I enjoy supporting the residents and making them smile and being able to help them with personal care.”

“Speaking with residents and staff ensuring the home is a clean, safe environment.”

The remaining staff member said; “The diversity of the day.”

The Manager and her Deputy stated that they ensure the staff have enough time to care for the residents by giving support, using a dependence tool to guide staff ratios to ensure all residents care needs are met (the Manager added that she always ensures that staff levels are over the guide).



They went on to inform the Healthwatch team that they encourage staff to develop their skills by providing in-house training and enrol staff onto external training, which may benefit them. The Deputy Manager added; “We like all staff to take on training which will challenge them and improve their knowledge.”

During the Healthwatch team visit several staff were visible and interacting with the residents, who seemed to recognise them and appeared relaxed in their company.

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 but one of the residents who responded to the survey process informed the Healthwatch team that the staff at the home know them, know what they need and what they like and don’t like. Although one of the residents added; “The staff from other parts of the building don’t know us when they come to work over here.”

The friend and relative respondents indicated that the staff know their friend/relative very well, including their life history, personality and health and care needs and notice and respond to changes in their needs, always keeping them informed either via the telephone or face to face when they visit. Comments included; “The staff know my gran really well. They take their time to look into all history to help her.”

The staff and management told the Healthwatch team that when a resident first arrives at the home, they get to know their life history, personality and health and care needs by speaking to the residents, their families, and any professionals who have been involved with the individual. Personal, individual care plans are then developed and staff are encouraged to read them alongside a one page profile about the resident. Care plans are evaluated at least monthly and are updated if the residents needs change in any way. Any changes are also passed on to staff during hand over (which take place at each shift) and ‘flash’ meetings. Staff comments included;

“We observe how the resident is adjusting to their new surroundings.”

“Often when you work on the same floor over a period of time you get to know the residents well, so if you notice any changes in their health or diet this can be documented and passed on to a senior carer or nurse.”

“We take time to get to know them.”

During the Healthwatch team visit it was noted that one staff member was encouraging a resident who was unwell to both drink her tea and eat some cake



which had been served to her. The staff member was empathetic and using humour to encourage her.



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.

All of the residents the Healthwatch Team spoke to agreed that activities take place at the home. Here are some of their comments;

“I will try any of the activities.”

“The activities are normally very good, although there is a lack of staff. Donna also works as a senior carer and she is very busy. She is doing the best she can and other carers help.”

“Some activities are the same as what I did at home.”

All of the residents went on to say that the home provides regular trips out on the bus, with many trips lasting all day and include stopping off for lunch. Comments included; “We are out all day if the weather behaves itself. We have a lovely time!”

All of the residents stated that it is easy to join in with the available activities and that the staff alert them to the fact that an activity is about to begin. Comments included;

“I have sight loss and the carers help me to take part in the activities. I also have a weekly call from an Age UK volunteer. The staff give me a shout when they call.”



“Yes, there is help if you need it.”

When residents were asked if they are able to use the garden area at the home if they would like to, three of the residents stated that they enjoy using the garden, one resident said that they are unable to use it and the remaining resident was unsure about this question.

When the Healthwatch team went on to ask the residents if they still have the opportunity to enjoy past hobbies and interests, one resident told us that they no longer wish to pursue their past interest. Other residents commented;

“I loved to read and watch TV, but I can’t see. I go to my room and listen to the radio though.”

“I still play cards and enjoy gardening.”

During the Healthwatch visit one resident who a team member spoke to stated that although they don’t get any visitors themselves, they enjoy spending time with people who come to the home to visit other residents. They added; “I admired one resident’s new slippers, and their daughter got me a pair too as I can’t get out to go shopping.”



A Christmas craft activity

The friend and relative responded very positively when asked about the activities which are available both inside and outside of the home. They commented that they are happy that their friend/relative is always encouraged to take part and added the use of humour is one of the ways this is facilitated. Both added that they feel their friend/relative is still able to do the things they used to do and this included one family taking their dog into the home to go for a walk with the resident.

The staff and management informed us of some of the activities available to the residents inside the home, these included; movie afternoons, arts and crafts, wine and cheese nights, bingo, sing-a-longs,

entertainers, pamper sessions, puzzles and crosswords, coffee mornings, baking, flower arranging, quizzes, reading, painting, games, music and move to music.



Staff comments included; “The residents enjoy a film or listening to music, we often have a singer come in to entertain, which all the residents enjoy.”

One staff member stated that there has been a lack of activities lately due to staff sickness.

The Manager said; “We ensure a wide range of activities are available within the home and have volunteers who attend the home from the local community. This ensures our residents maintain their community links.”

The management informed us that the home has its own mini bus, with a driver, who is aware of the residents needs and who takes residents out at least two to three times per week on planned trips and outings. Staff told us about some of the opportunities available to residents outside of the home, which included; visits to parks, the theatre, the beach, the Salvation Army, garden centres, local community centres, museums, meals out, bowling, line dancing, out for a coffee or for lunch, shopping, and afternoons at the pub.

The Activities Coordinator informed us that the home ensures one to one time is available for those residents who cannot or do not wish to undertake group activities.



The gardens

Staff encourage residents to take part in activities by asking them which activity they would like to do, by chatting with them, singing and dancing with residents to encourage them, explaining to them that they will enjoy it and show them what the activity involves. Staff comments included;

“We reassure them that we will help anyway possible.”

“All residents are encouraged at all times to take part in activities. Staff will sit next to them and assist in the likes of bingo, dominoes etc.”

“We encourage all residents on a regular basis to participate in all activities and encourage some with the activities that they enjoy the most.”



The management and the Activities Coordinator went on to inform us how they ensure the residents are supported and encouraged to continue to enjoy past hobbies and interests. These are documented into resident's care plans, staff pass on information which they gain over time. One lady was noted to still enjoy doing needlecraft and another resident has her pet budgie living at the home with her. The Manager stated; "We have pets in the care home, which the residents love. We support them to care for them and encourage them to keep previous hobbies they may have had prior to coming into care."

The Activities Coordinator stated that families are encouraged to be involved in activities and activities are evaluated to ensure residents are still enjoying them and changes are made where necessary.

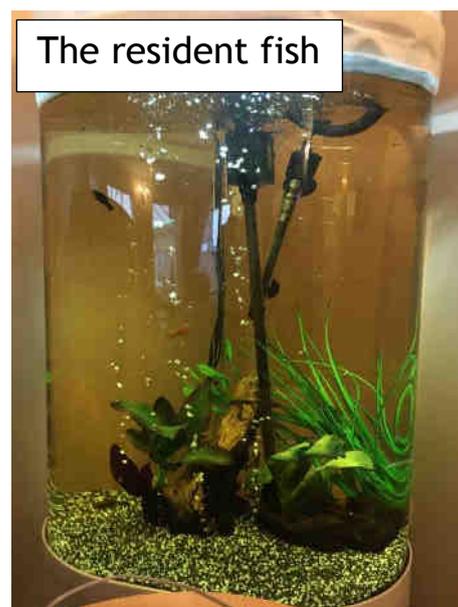
During the Healthwatch visit the team met the home pets, Snowy the budgie, Spike the cockatiel and the resident tropical fish. All of the pets were in the communal lounge areas for all residents to enjoy. Snowy was introduced to us by his owner, who was seated beside his cage, and she who told the team how much she loved him.



Snowy



Spike



The resident fish



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 gave this a **NEUTRAL** which indicates both positive and negative feedback, which when averaged results in a neutral score

The Manager informed the Healthwatch team during the visit that she had recently employed a new Chef to maintain the high standards offered around quality and choice of food after one of the previous Chef's left the home. Therefore some of the comments from residents may not reflect some of these recent changes.

When asked about the food at the home, one resident who responded to the survey said 'good' another stated 'all right'. The remaining residents responded negatively when asked for their opinion on the food. Their comments included;

"Could be better, there's not much variety."

"Personally I don't like it. I don't like lasagne or spaghetti etc. Sometimes they change the menu and you just have to accept what is there. They will make me poached egg on toast if I don't like what's available."

"I have a dodgy stomach and the food is not to my liking. The only decent meal is the fish and chips on a Friday. My daughter brings food in for me."

Donwell Nursing Home - Week 1



Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
BREAKFAST Cereals & Porridge, Toast & Preserves, Sausage, Hash Brown & Beans Yoghurt & Fruit, Fruit Juice	BREAKFAST Cereals & Porridge, Toast & Preserves, Scrambled Egg on Toast Yoghurt & Fruit, Fruit Juice	BREAKFAST Cereals & Porridge, Toast & Preserves, Cooked Breakfast, Yoghurt & Fruit, Fruit Juice	BREAKFAST Cereals & Porridge, Toast & Preserve Bacon, Egg & Tomatoes Yoghurt & Fruit, Fruit Juice	BREAKFAST Cereals & Porridge, Toast & Preserves, Egg & Beans on Toast Yoghurt & Fruit, Fruit Juice	BREAKFAST Cereals & Porridge, Toast & Preserves, Cooked Breakfast, Yoghurt & Fruit, Fruit Juice	BREAKFAST Cereals & Porridge, Toast & Preserves, Poached Egg on Toast Yoghurt & Fruit, Fruit Juice
Mid Morning Tea & Coffee, Biscuits	Mid Morning Tea & Coffee, Biscuits	Mid Morning Tea & Coffee, Biscuits	Mid Morning Tea & Coffee, Biscuits	Mid Morning Tea & Coffee, Biscuits	Mid Morning Tea & Coffee, Biscuits	Mid Morning Tea & Coffee, Biscuits
LUNCH Broth or Smoked Salmon with Scrambled Egg on Toast, or Selection of Sandwiches, Jacket Potatoes, Dessert ~ Fruit Flan with Cream	LUNCH Leek Soup or Homemade Sausage Plait with Baked Beans, or Selection of Sandwiches, Jacket Potatoes, Dessert ~ Summer Fruits & Ice Cream	LUNCH Tomato Soup or Ham & Cheese Melt on a Toasted Bun, or Selection of Sandwiches, Jacket Potatoes, Dessert ~ Apple Strudel & Cream	LUNCH Lentil Soup or Cauliflower Cheese with Sautéed Potatoes, or Selection of Sandwiches, Jacket Potatoes, Dessert ~ Coconut & Jam Sponge	LUNCH Fresh Battered Cod with Homemade Chips & Mushy Peas or Fishermans Pie or Battered Sausage, Dessert ~ Mandarin Sponge with Custard	LUNCH Mushroom Soup or Sausage & Croquettes with Plum Tomatoes, or Selection of Sandwiches, Jacket Potatoes, Dessert ~ Butterscotch Mousse	LUNCH Roast Pork & Stuffing with Yorkshire Pudding, Roast & Creamed Potatoes, Seasonal Fresh Vegetables, or Roast Pork, Ham or Cheese Salad with Roasties, Dessert ~ Jam Jolly Paly & Custard
Mid Afternoon Tea & Coffee Home Baking	Mid Afternoon Tea & Coffee Home Baking	Mid Afternoon Tea & Coffee Home Baking	Mid Afternoon Tea & Coffee Home Baking	Mid Afternoon Tea & Coffee Home Baking	Mid Afternoon Tea & Coffee Home Baking	Mid Afternoon Tea & Coffee Home Baking
TEA Minced Beef & Onion Pie, Creamed Potatoes & Garden Peas, or Tuna, Cheese & Potato with Peas, Dessert ~ Rice Pudding and Strawberry Jam	TEA Chef's Special or Liver & Onions, with Seasonal Vegetables & Creamed Potatoes Dessert ~ Treacle Pudding & Custard	TEA Turkey Casserole & Herby Dumpling with Creamed Potatoes & Seasonal vegetables, or Sausage & Onions, Dessert ~ Eve's Pudding & Custard	TEA BBQ Chicken Breast with Rice and/or chips or Creamy Mushroom Penne, Dessert ~ Fruit Crumble with Cream	TEA Vegetable Soup or Cheesy Potato Wedges, Selection of Sandwiches, Jacket Potatoes, Dessert ~ Semolina with Strawberry Jam	TEA Corned Beef & Onion Hash or Bacon & Egg Flan with New Potatoes & Beans, Dessert ~ Devonshire Scones	TEA Buffet Selection of: Sandwiches, Savoury Treats, Crisps, Cheese & Crackers, Jacket Potatoes, Dessert ~ Gateaux

Always available 24/7: Tea, Coffee, Cold Drinks, Milk Shakes, Sandwiches, Biscuits, Fruit, Yoghurts, Ice Creams

Example food menu



Two residents stated that there is not an adequate choice of food available to them, but the three remaining residents disagreed stating that there is. One resident stated; “There is a choice of three things at mealtimes and there is always ice cream if you don’t like the pudding option. If you have a hospital appointment your meal is kept for you and when you’re out on a trip you get a meal out. There is always plenty of milk if you want it.”

The residents who took part in the survey process, went on to explain that they eat their meals in the communal dining area at the home, there is also a choice of where they eat and other areas include, the lounge and their own rooms. When asked if they enjoy mealtimes, residents gave a mixed response, their comments included;



Residents who are able to help themselves to water from the cooler

“I always sit in the same place.”

“Sometimes there it’s enough gravy.”

“Yes and no. We four ladies sit together - we have to shout at each other, as we are all deaf.”

One resident informed the Healthwatch team member she was chatting to that when she first arrived at the home she was underweight, the staff weigh her regularly and she is encouraged to eat.

When asked about the quality and choice of food and mealtimes at the home, only the relative responded to these questions and stated; “The food is good, but she never eats, so they try to cater for her needs.” They added that the home ensures mealtimes are made sociable by residents all sitting together at the same time and being encouraged to chat.

During the Healthwatch team visit a selection of hot drinks, biscuits and cakes were being served to the residents.

The staff who commented about the food all stated that the quality is good. All but one member of staff stated that the choice is also good, with the remaining staff member said the choices could sometimes be better.

The Manager and her Deputy informed the Healthwatch team that they ensure high standards of quality and choice of food by undertaking regular audits, having meetings about the food, residents put forward menu ideas and Managers check the Chefs daily paperwork. During the Healthwatch visit the Manager informed us that she tastes the food on a daily basis to ensure its quality and she has recently



employed one new chef to ensure high standards of food quality and choice are maintained at the home.

When asked how residents are supported to eat and drink at mealtimes and outside of these times, the staff and the management stated that those residents who require support to eat and drink have this documented in their care plans and are supported as noted. Snacks and drinks are available throughout the day and night and residents are offered choices at each mealtime. Permanent drink stations are in situ for the residents to help themselves to drinks when needed.

Residents are also offered choices when it comes to where they would like to eat their meals, including; the dining room, lounge or their own room, although eating in the communal dining areas is encouraged to ensure mealtimes are a sociable time. Sociable mealtimes are also facilitated by ensuring there is a calm and quiet atmosphere and residents and staff sit with each other to encourage conversation.



Communal dining room

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

When the Healthwatch team asked the residents if they have access to a range of health professionals, one resident was unable to answer this question, but this may have been due to their own individual health and capacity. The other residents who responded to the survey said that they have seen a dentist and an optician whilst living at Donwell House. One resident went on to say that they have regular audiology checks at the local Spec Savers store and added that the staff at the home change the batteries in her hearing aid when required and also accompany her to regular appointments at the Sunderland Eye Infirmary. Another resident was able to tell the Healthwatch team that a chiropodist visits them at the home.



One resident informed us what happens when they need to see a doctor or have an appointment at the hospital, they said; “I would see a senior carer and they would ring to make me an appointment or ask the doctor to visit. They also got in touch with the hospital for me as I needed a bone scan.”

The other respondent to the survey stated that they hadn’t needed to see a doctor or had an appointment whilst living in the home, so couldn’t answer, this may have been due to their individual health and incapacity.

The relative and friend who responded to the survey indicated they are happy with the access to health professionals, with the relative saying; “The support she needs comes in as and when the staff feel it is needed.”

The staff and management of the home informed us of some of the healthcare professionals who visit the home on a regular basis, these included; care home nursing team, GPs, district nurses, chiropodists, opticians, dentists. Some of the professionals attend the home on a regular basis with others being called by senior staff members when required. Comments included;

“Residents are supported with all aspects of healthcare; GPs are regularly phoned to visit. Opticians, dentists and podiatrists call every so many weeks or when called on and nurses call in on a weekly/daily basis.”

“We usually have visits from different care professionals. They visit the residents who can’t make visit themselves.”

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.**

None of the residents which the Healthwatch team spoke to stated that they had any specific religious, lifestyle or cultural needs, with one resident informing us they couldn’t recall seeing any religious visitors to the home. Residents stated that there are regular visits to the home by a hairdresser, who cuts and styles their hair. One resident added; “Everyone admires my hair.”

Residents went on to say that the Activities Coordinator, Donna, paints their nails. They gave a mixed response when asked about the laundry system at the home, with one resident describing the service as good and another saying that a few of their items of clothing and bedding had gone missing during the laundering process.

Both the friend and relative who responded to the survey stated that their friend/relative has no particular specific lifestyle, religious or cultural need. Both



went on to say that there is regular access to a visiting hairdresser who cuts and styles their friends/relatives hair.

When asked about the laundry system and how good they are at getting items back to residents, one respondent stated that they place their relative's room number on tags to ensure items are returned. The remaining respondent informed us that some things do go missing.

The management of the home informed the Healthwatch team that they find out details of the residents cultural, religious and lifestyle needs during the pre-admission assessment, where questions are asked and preferences are noted. Both management staff went on to tell us that there are a range of religious visitors to the home and residents who wish to continue to go along to church services are supported to do so. Special diets are also catered for, such as dairy free or vegetarian. Comments included;

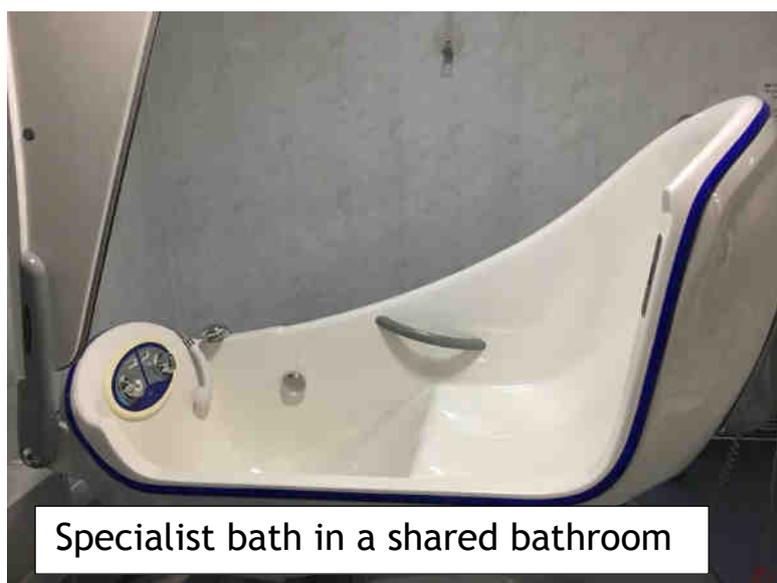
“When residents have been very poorly, they are often visited by request from the family, by a priest or vicar. Visits for Holy Communion are often made.”

“There are residents who have Holy Communion and residents who have a prayer box that they listen to.”

The Activities Coordinator added that the home has a volunteer who comes in from a local church to see the residents.

The management informed us that the home is visited by a hairdresser four to five times a week to ensure residents are given the opportunity to have their hair cut/styled.

They went on to say that the home ensures the laundry staff get residents clothes back to them after the laundering process by having individual property lists for each resident and all of their clothing being 'labelled up'.



Specialist bath in a shared bathroom

The management added that they also ensure that residents are always clean and appropriately dressed by care plans identifying what assistance is needed, staff support with bathing and aprons are provided to those residents who require them.



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 the residents were asked by the Healthwatch team if they get asked what they think about the home and if they are happy, a mixed response was received from those who responded. Two residents stated that they are not asked, with another two residents stating that they do get asked. Responses included;

“Yes, I am quite happy.”

“Yes, periodically I get asked. I couldn’t manage in my own home and I have no family, so basically yes I am happy, but I have no choice.”

Both the friend and the relative respondents stated that they feel welcome participants in the life of the home, with one respondent telling us that they are always made to feel welcome and made to feel at home. Both went on to say that if they ever needed to complain about any aspect of the home, they would go straight to the care home Manager and would be confident that their complaint would be acted upon appropriately. Comments included; “Management are so easy to talk to and I feel any issues would be dealt with immediately.”

Staff and management stated that residents and their friends and families can have a say on how the home is run and what activities are provided by attending regular residents meetings, making suggestions and sharing ideas, the Manager has an open door policy allowing both residents and their friends and relatives to see her at any time. Comments we received included;

“We are always ready to listen and encourage families and friends to be involved as much as they possible can be.”

“Meetings are often held for residents and their families to voice their opinions and make requests on how they wish to live their lives and share their likes and dislikes.”

“Residents are invited to meetings to have an input into their care, alongside the family members.”

Some staff members told the Healthwatch team that residents have influenced discussions for the decoration during the recent refurbishment.



Residents chose the wallpaper for the new reading nook on the ground floor of the home



The management informed us that feedback and complaints are acted upon, investigated fully and escalated where necessary. The person who has given the feedback or made the complaint is kept up to date with the progress of the investigation. Feedback statistics are used to identify any trends.

Staff and the management of the home went on to tell us that staff can have a say on how the home is run by attending staff meetings to give their input and ideas or by speaking to the Manager.

The Activities Coordinator said; “The Manager always asks for my involvement when new residents come into Donwell House, to help and assess their needs and wishes.”

Indicator 9 - Provide a physical environment which is suitable for the needs of the residents

The indicator states that care homes should be suitable for their resident’s needs. Be comfortable, homely, well maintained with high standards of hygiene.

The Healthwatch team STRONGLY AGREE this was met.

All of the residents the Healthwatch team spoke to indicated high levels of satisfaction when asked if the home is always clean and tidy, using words such as; immaculate, spotless and great. One resident said; “The cleaners here are marvellous! You really can’t fault them.”

When asked about the temperature of the home and if they are ever too cold or too hot, the residents gave the following responses;



“Sometimes it’s warm, but the staff will open the windows.”

“It’s lovely here in the lounge, but it’s cold in my room. Tony the Handyman is looking at it and I have my own little heater.”

“It’s not bad.”

Only one of the residents gave a response when asked if there is something they would like to change about the home, they said that this would be the menu, although they hadn’t informed any of the staff that this is what they would like.

All of the residents which the Healthwatch team spoke to stated that if they ever needed to make a complaint they would speak to either



the staff or management of the home. One resident added that if the complaint was very serious they would ‘go to the big bosses’.

The friend and relative stated that they always find the temperature within the home to be at a comfortable level and that the home is always hygienically clean. When asked if the home is always well decorated and well maintained, the friend who responded to the survey stated that this is the case some of the time. The relative said; “The home is undergoing a refurbishment, which is looking really good. It was nice before too.” Both respondents stated that they feel the home is a dementia friendly environment.



The management of the home informed us that they ensure the home is always at a comfortable temperature for the residents by all radiators having a thermostat control. They also ensure that the building and its contents are well maintained and decorated throughout. This is done by employing maintenance staff to ensure decoration is ongoing throughout the year and issues are dealt with in a timely manner. They added that they ensure that the home is always hygienically clean and tidy by completing regular infection control audits, walk arounds and by employing a House Keeper who supervises the domestic team.

Staff and the management went on to inform the Healthwatch team how the home is made a dementia friendly environment, this included, fully trained staff and Dementia Champions, an interactive environment, dementia friendly dolls being available and sensory boards in place. Their comments included;

“With the refurbishment we have captured points within their lives and given them a sense of belonging, the chance to feel part of a community and it helps enhance their lives. Lighting has made a vast improvement to the environment.”

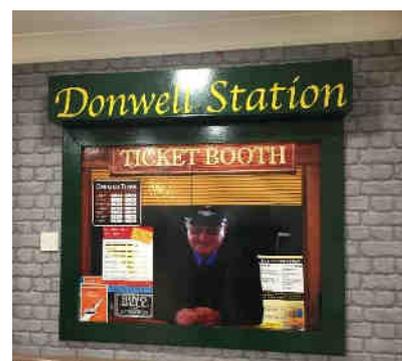


“Everyone who works in the home has had at least some level of dementia training to help them to understand the multi-dimensions of dementia, the effects and how everyone with dementia is different.”

“The home is dementia friendly and we are always looking for ways to help an individual’s needs.”



Some of the new dementia friendly additions -
interactive wall art





5. Appendices

Appendix 1 - Questions for residents

1. Who is 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? (your daily routines, personality, lifestyle, clothing etc.)
6. What activities are there for you in the home?
7. What activities are there outside the home? (Groups, trips etc.)
8. Is it easy to join in the activities?
9. If you would like to use the garden are you able to?
10. Do you get a chance to do any of the things you used to enjoy before you came here? (i.e. bringing in pets, hobbies, interests etc.)
11. What do you think of the food here?
12. Is there enough choice of what you eat and when you eat?
13. Where do you eat your meals? (Is it your choice to eat there?)
14. Do you enjoy mealtimes? (What do like/dislike about mealtimes?)
15. Have you seen a dentist to check your teeth or an optician to check your eyes or an audiologist to check your hearing recently?
16. What happens if you need to see a doctor or have an appointment at the hospital?
17. Is there respect for your religion or your culture here in your home? e.g. Are you able to wear your own clothes, get your hair/nails done, have a shave, are the laundry staff good at getting your own clothes back to you?
18. Is the home always clean and tidy?
19. What is the temperature like here? Are you ever cold or too warm?
20. Do you get asked what you think about the home or if you are happy?
21. Would you like to change anything about the home? Have you told anyone about this and what happened?
22. 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/Deputy 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?
How do you ensure staff have enough time to care for residents?
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 likes/dislikes and their health and care needs updated as these change and passed on to staff?
4. **Offer a varied programme of activities**
What activities are available for residents inside and outside the home?
Does the home have access to its own transport and able to use this for trips and activities outside of the home?
What encouragement and assistance is given to residents so that they can take part in activities?
How are residents supported to continue to do the things they used to enjoy before coming into the home i.e. hobbies/interests/pets?
5. **Offer quality, choice and flexibility around food and mealtimes**
How do you ensure high standards of quality and choice of food?
What systems are in place to support residents to eat and drink at mealtimes and outside of mealtimes?
What choices do residents have about what and when they eat and drink?
What choices do residents have about where and how they eat and drink?
Does the home have permanent drink stations available to residents?
In what ways do you ensure that mealtimes are sociable?
6. **Ensure residents can regularly see health professionals**
Please tell us about visits from all health professionals such as GPs, nurses, dentists, opticians, audiologists, chiropodists or other health care support mechanisms?
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 of how these have been accommodated?
What provision is there for residents to regularly get their hair cut/styled?
How do you ensure that the laundry staff get the residents own clothes back to them?
What mechanisms are in place to ensure that residents are always clean and appropriately dressed?
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?
How do you make use of feedback or complaints from residents and relatives?
In what ways are staff able to have a say in how the home is run?
9. **A physical environment suitable for the needs of the residents**
How do you ensure that a comfortable temperature is maintained in resident's rooms and all communal areas?
How do you ensure the building and its contents are well maintained and decorated throughout?
How do you ensure that the home is always hygienic and clean?
In what ways do you make the home a dementia friendly environment?



Appendix 3 - Questions for care staff

- 1. Have strong, visible management**
What support do you receive from the Manager?
What is your experience of talking to the Manager when you want to ask a question or raise an issue?
- 2. Staff with time and skills to do their jobs**
Do you feel you have enough time to care for residents? If no, why?
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 you and other members of your team 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 and how do you know if there has been changes?
- 4. Offer a varied programme of activities**
What activities are available for residents inside the home?
What activities are available for residents 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 do you think of the quality and choice of food?
How do you make sure residents are able to eat and drink at mealtimes as well as outside of mealtimes?
What choices do residents have about what and when they eat and drink?
What choices do residents have about where and how they eat and drink?
In what ways do you try to make mealtimes sociable?
- 6. Ensure residents can regularly see health professionals**
Please tell us about visits from all health professionals such as GPs, nurses, dentists, audiology, opticians, chiropodists or other health care support mechanisms?
- 7. Accommodate residents' personal, cultural and lifestyle needs**
Can you give an example of how the home caters for resident's religious and cultural needs?
- 8. Be an open environment where feedback is actively sought and used**
In what ways can residents and their family/friends 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?
How do you, as a member of staff have a say in how the home is run?
- 9. A physical environment suitable for the needs of the residents**
How is the home made dementia friendly?



Appendix 4 - Questions for Activities Coordinator

1. **Have strong, visible management**
What support do you receive from the Manager?
What is your experience of talking to the Manager when you want to ask a question or raise an issue?
2. **Staff with time and skills to do their jobs**
Do you feel you have enough time to provide varied activities for residents? If no, why?
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 you and other members of your team get to know a resident's life history and personality when they first arrive at the home?
4. **Offer a varied programme of activities**
What activities are available for residents inside the home?
What activities are available for residents outside the home?
What activity provision is made for those residents who cannot or do not wish to undertake group activities?
What encouragement and assistance do you give to residents so that they can take part in activities?
How do you ensure that residents have the opportunity to continue to take part in their hobbies and interests?
5. **Accommodate residents' personal, cultural and lifestyle needs**
How are activities tailored to meet a resident's religious and cultural needs?
6. **Be an open environment where feedback is actively sought and used**
In what ways can residents and their family/friends have a say in what activities are delivered both inside and outside the home?
Can you provide an example of how a resident or their family member has influenced the provision of a new activity?
How are the activities provided evaluated to ensure residents are continuing to enjoy them?
How do you, as a member of staff have a say in how the home is run?
7. **A physical environment suitable for the needs of the residents**
How is the home made dementia friendly?



Appendix 5 - Questions for friends and relatives

1. **Strong visible management**
Who is the Manager of the home?
Please tell us a little about the Manager?
2. **Have staff got the time and skills to do their jobs**
Do you feel the staff have the time to care for your friend/relative? Please explain.
Do you feel the staff have the skills to care for your friend/relative? Please explain.
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?
How do they let you know about the changes?
4. **Offer a varied programme of activities**
What do you think of the activities available for residents inside and outside the home?
Please tell us how your friend/relative is encouraged and supported to take part in the activities.
Now they live at the home, is your friend/relative still able to do the things they used to enjoy i.e. hobbies, interests, pets? Please explain.
5. **Offer quality, choice and flexibility around food and mealtimes**
What do think of the quality and choice of food?
How confident are you that your friend/relative is supported to eat and drink as much as needed?
Please tell us how the home ensures that mealtimes are sociable?
6. **Ensure residents can regularly see health professionals**
Please tell us about your friends/relatives access to health professionals such as GPs, nurses, dentists, opticians, audiologists, chiropodists or other health care support mechanisms?
7. **Accommodate residents' personal, cultural and lifestyle needs**
Does your friend/relative have any specific lifestyle or religious or cultural needs?
How do you feel the home respects and accommodates these needs?
What provision is there for your friend/relative to regularly get their hair cut/styled?
How good are the laundry staff at getting your friends/relatives own clothes back to them?
Is your friend/relative always clean and appropriately dressed?
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/or your friend/relative have a say in how the home is run or give feedback?
How would you make a complaint about any aspect of the home, management or the staff if you needed to?
Would you feel confident to make a complaint and do you think it would be acted on appropriately?
9. **A physical environment suitable for the needs of the residents**
Do you always find the home at a comfortable temperature for residents?
Is the home always hygienically clean and tidy?
Is the home always well decorated and well maintained?
Do you think the home is a dementia friendly environment?



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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