

Care home life, what it's really like!

Hylton View Care Home



Date of Healthwatch Sunderland visit:
23rd November 2017





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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, 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, Leigh was held at Hylton View Care Home. This was to explain the reason for the ‘Care home life - What 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 it’s really like!’ visit took place on the 23rd 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	<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	 Strongly 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	 Agree				



Findings

This purpose built facility provides nursing and residential care for up to 40 older people, some of whom are living with dementia. Care is provided over two floors and each floor has two lounges and a dining room. All rooms are en-suite and respite facilities are available.

The home is well-situated for residents who wish to remain active outside of the home, with good amenities and transport routes.

See the latest CQC inspection report here:

<http://www.cqc.org.uk/location/1-308151203#accordion-1>

At the time of our visit there were 40 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch team were only able to support 2 residents to fully complete the survey. The team received 8 staff and 2 friends and 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.

From the two residents who were able to complete the survey process, one person knew the Manager by name and stated that she is very nice. The other person was able to tell us that the Manager is a female but couldn't easily name her, this could have been due to their own individual health or capacity.

From the two friends and relatives who responded to the survey, one knew the Manager by name and said she is both lovely and friendly. The other person stated that they do not know the Manager.

All staff who completed the survey stated that they feel fully supported by the Manager of the home. Some of the comments staff gave regarding the Manager include; "I have good support whenever it is required" and "There is lots of support for staff and residents." Staff told us that they feel comfortable approaching the Manager with questions, issues or concerns and they added that she is understanding and has an open door policy, which enables them to speak to her at any time.

The Manager said that she was attracted to her role at Hylton View Care Home as she has full support from both the owner and the senior management team. She went on to say that things she enjoys most about her role are supporting her staff and supporting residents to live a fulfilled life.



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

The resident respondents informed the Healthwatch team that they like the staff at the home and feel well looked after. One resident said “I like them all, they are nice to me.”

Both of the residents we spoke to stated that the staff have time to stop what they are doing and chat to them. One person added “They are in and out all of the time and I sit in the main lounge for company.”

Friends and relatives stated that they feel the staff at Hylton View Care Home have both the time and skills to look after their friends and relatives.

When asked if they feel there is enough time to care for the residents, two staff members stated that they feel there is enough time, although the majority of staff members stated that there is not always enough time, some of their comments included; “Sometimes I could do with more time for interaction with residents”, “Depends upon the staffing availability and day to day activities as residents needs can change. But overall, residents receive the care they require.”

Staff wrote that they are encouraged to undertake both mandatory and additional training courses. Here are some of their comments “I have been encouraged to develop new skills since working here, from medication administration to management within nursing home environment” and “I am asked if I want to progress with advanced / new training courses.”

The Manager added that new staff work alongside more experienced staff for support.

Staff members told us what they enjoy about their jobs and here are some of their responses; “I love caring and making a difference, no matter how small a difference it may be,” “Making sure all of the residents are cared for” and “I enjoy having the knowledge that I am well supported by Management and floor staff.”

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 STRONGLY AGREE this was met.

Both of the residents supported to complete the survey process stated that the staff at the home know them well and know what they like and dislike.



Friends and relatives informed the Healthwatch team that the staff know their friends/relatives life history, personality and health needs well and notice and respond to changes in their needs. One relative said “The staff have a good bond with my relative and have a bit of a ‘carry on’ with them.” Another said “They respond great to her and are there for her.”

The Manager and staff told us that they get to know a resident’s life history, personality and health and care needs when a resident first arrives at the home by speaking to residents, their families, carers and the home’s Manager. They added that they are informed that a resident’s tastes and health and care needs have changed by reading care plans and individual files, reflection, daily handover meetings which all staff attend and communication between colleagues old and new. Care plans are updated monthly and as needed and time is allocated to this.

Here are some of the comments we received from staff “Staff put everything possible into residents personal files,” “I interact with residents as much as I can” and “The chef is included in pre-assessment, Speech and Language Assessments and quarterly resident’s menu meetings.”

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.

Residents told the Healthwatch team about the range of activities which are available at Hylton View which included; cooking (making toasties and pies), entertainers, dancing, singing and outdoor trips. One resident said “They take us to The Snow Goose café, which I like. I have hurt my leg, but they still ask me if I would like to go out on trips and I go out with my family.”

When we asked the residents if it is easy to join in the activities, one person said “Staff tell you when the activities are on.” The other resident added “The Activities Co-ordinator takes me shopping to buy beautiful clothes and she is also taking us out for Christmas dinner.”

One resident told us that before she moved into the home she used to enjoy painting which she can still enjoy at the home as part of the activities schedule.

Friends and relatives stated that outdoor activities are available for the residents at the home and one added that they were also invited to attend the pantomime with the home. Another added that she felt the home could do with more of a garden for her relative to sit in.

Staff and the Manager informed Healthwatch team that the home employs an Activities Co-ordinator to facilitate indoor and outdoor activities within both the residential and nursing units at the home. In addition to what the residents informed the team of, they added the following activities; a local football team



who call in to give the residents afternoon tea, a mother and baby group attend the home on a monthly basis, bingo, movie morning, quizzes, reminiscence sessions and attendance at a weekly Cinema Club at the local Salvation Army.

Staff went on to tell us they encourage residents to join in the activities by taking part themselves, as well as assisting and encouraging participation. The home participates in a '2 o'clock stop'. This is where all other activity in the home stops to allow both staff and residents to enjoy an activity together.

Here are some of the staff comments "I try to encourage the service users to take part in the activities, but it is their choice if they do not wish to" and "A new schedule is currently being drawn up to better reflect resident's needs and abilities."

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 STONGLY AGREE this was met.

One of the residents who was supported to complete the survey told us that the food is very nice and that they enjoy everything which is offered. The other stated that some of the food is nice and that drinks are available at any time.

During the Healthwatch team visit we witnessed a range of hot/cold drinks and biscuits being served to the residents in the communal areas. The staff were familiar with the residents and their preferences for drinks and how they prefer them.

One of the residents stated that they enjoy mealtimes at the home as this is a time to sit together and for chatting. They added "The staff are in and out at mealtimes and are there for us if we need them." The other resident stated that they enjoy mealtimes sometimes.

One of the friend and relative respondents told us that they feel there is plenty of food and choice available to their friend/relative and that they have put weight on since coming into the home. Another stated that staff had got their relative, who had only lived at the home for 6 weeks, to eat and that they were confident that they were supported to eat and drink as much as needed by the staff.

Staff informed us there is a varied daily menu for residents to choose from and an alternative is also available if required. A tea trolley provides a range of drinks and is available in resident's rooms or in the lounge areas several times a day. They went on to say if a resident is asleep, a meal is either kept aside for them or staff will order something from the kitchen when they are ready.



The Manager told us that residents can choose where they have their lunch, either in the dining room, their own room, or in the small lounges on either floor of the home. Staff stated that sitting in the communal dining rooms is encouraged, where an informal atmosphere is facilitated, the radio is played and staff are available to assist with eating and drinking if needed and to chat to the residents. Friends and relatives can also participate in mealtimes at Hylton View.

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.

One resident told the team that they have visits from an optician, chiropodist and dentist and that the GP visits if necessary or they go to the surgery to see the GP if it is possible. The other residents supported to complete the survey process stated that as they had only been at the home for a short time they were unable to comment.

Friends and family said that residents have regular visits from healthcare professionals. One said “Brilliant, my relative is always being assessed.”

The staff and Manager stated that there are regular dentists, podiatrists and opticians who visit the home and if there are any issues with a resident’s health a GP or 111 are called.

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.**

The residents which the Healthwatch team spoke to both stated that a hairdresser comes into the home to cut/style their hair. Whilst in one of the communal lounges residents were joking with one staff member who was said to offer ‘hair and care’ to residents, as she would often help them with their hair and nails.

One lady said that either the Activities Co-ordinator or one of the carers would paint her nails. Both residents stated that they are able to make choices of which of their own clothes they wear.

Neither of the friends and relatives stated that their friends/relatives have any specific lifestyle, religious or cultural needs.



The staff and Manager told the Healthwatch team that a resident's lifestyle, religious or cultural needs are discussed at pre-assessment and later during discussions with residents and their families. They went on to say that residents are able to express their chosen faith and this is encouraged. Residents attend services at local churches and a priest visits the home every week. One staff member said "One resident was of Muslim faith and her meals were catered to her faith."

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.

When we asked the residents if they get asked what they think about the home, they said "The staff are always here for us, anything we want, we just have to ask" and "They always ask if I'm happy." Neither of the residents said that they would like to change anything about the home.

One of the residents said that if they ever needed to make a complaint about the home they would speak to the Manager and the other resident said they would speak to any of the staff.

Both of the friends and relatives who completed the survey told us that they feel welcome participants in the life of the home. One felt their friend/relative was not given the opportunity to have their say on how the home is run, but the other respondent stated that their friend/relative is given the opportunity and that they are always kept informed. Both said that they would know how to make a complaint and that they felt confident that any complaint would be acted upon appropriately.

The staff and Manager stated that residents and their families can approach or telephone staff or the Manager at any time to offer feedback and suggestions. They told us the following mechanisms are in place to also enable this; quarterly surveys, residents and family meetings, care reviews, suggestion box and a complaints procedure. One staff member gave an example of this stating that the timings of meals were changed and lighter lunches are now available due to feedback from residents and family.

All of the staff who completed the survey stated that they feel they can have their say in how the home is run by speaking to the Manager or giving ideas and suggestions at staff meetings. The Manager added that staff can also have their say at Health and Safety meetings and that she operates an 'open door' policy.



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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