

Care home life, what it's really like!

Thorncliffe House



Date of Healthwatch Sunderland visit: 4th October 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, 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 Lesley was held at Thorncliffe 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 4th October 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 relatives 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	 Agree
3.	Good knowledge of each resident and their changing needs	 Agree
4.	A varied programme of activities	 Agree
5.	Quality, choice and flexibility around food and mealtimes	 Strongly agree
6.	Regular access to health professionals	 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

Thorncliffe House is a converted domestic residence located in Thornhill Park, Sunderland, SR2 7LA and is run by Thorncliffe Care Limited. The home is a short walk from the city centre, is set in a residential street and has its own private gardens. It provides personal care and accommodation for up to 24 older people, some of whom are living with dementia. Day care is also available, which enables people to interact with the permanent residents.

See the latest CQC inspection report here:

<http://www.cqc.org.uk/location/1-112318096>

At the time of our visit there were 16 residents living in the home and 1 was on a short break. The Healthwatch team spoke to 10 residents, 2 of which were there for day care and received 17 staff and 1 relative survey 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.

Some of the residents at Thorncliffe House had difficulty identifying the Manager but this may have been due to their own individual health and capacity. During our visit the Healthwatch Sunderland team saw the Manager interacting with some staff and residents who seemed relaxed in her company.

A relative stated that they knew the Manager and found her to be very approachable.

All but one of the staff members who completed the survey stated that they found the Manager to be approachable, supportive, gave appropriate guidance and was always willing to help.

The Manager of Thorncliffe House told us that she has a long working history in care in the community and was attracted to her current role as she wanted to make a difference to the lives of people living in a care home. She enjoyed empowering both residents and staff to speak out and have open and honest relationships.

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 AGREE this was met.

From those residents asked, most said that the staff had time to chat to them, although they always look very busy.



A relative told us that they felt there is a good staff presence at their daily visit to the home and she felt that they were both confident and competent in their role. The Healthwatch team observed positive interactions between staff members and residents.

All Staff who completed the survey told us that they enjoy their job for a range of reasons including “I love looking after the elderly”, “It’s very rewarding to know that you are making people happy”. The majority also said that they had enough time to care for the residents and all mentioned that they were actively encouraged to take part in training to increase skills, knowledge and understanding. Many of them stating that they were completing National Vocational Qualifications (NVQ’s) in relevant job specific subject areas. The manager commented that she promotes professional development, offers in house workshops and one to one mentoring for her 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 AGREE this was met.

Most residents stated that the staff know them well, with some adding that they felt they were well looked after and that the staff are very nice. The Healthwatch team witnessed one lady, who is living with dementia and who seemed distressed and ask a staff member for someone to one attention, which was given without hesitation and the staff member then sat with the resident holding her hand and offering reassurance.

A relative told us that she felt that staff know her mother well and often share what ‘my mum has done or said’. They also watch out for any problems or issues and communication is very good.

The staff and Manager all informed us that they take their time to talk to all new residents and their families and friends during the initial transition period to find out their likes, dislikes and preferences. These are all then documented into the residents care plan, which is evaluated and updated monthly and the relevant staff are then informed of any changes that occur.

Indicator 4 - A varied programme of activities

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

The Healthwatch team AGREE this was met.

The care home provides a range of activities for residents including dominoes, seated exercise, crafts, baking, shows and BBQs etc. Only a couple of the residents when asked were able to tell us about activities at the home, but this could have



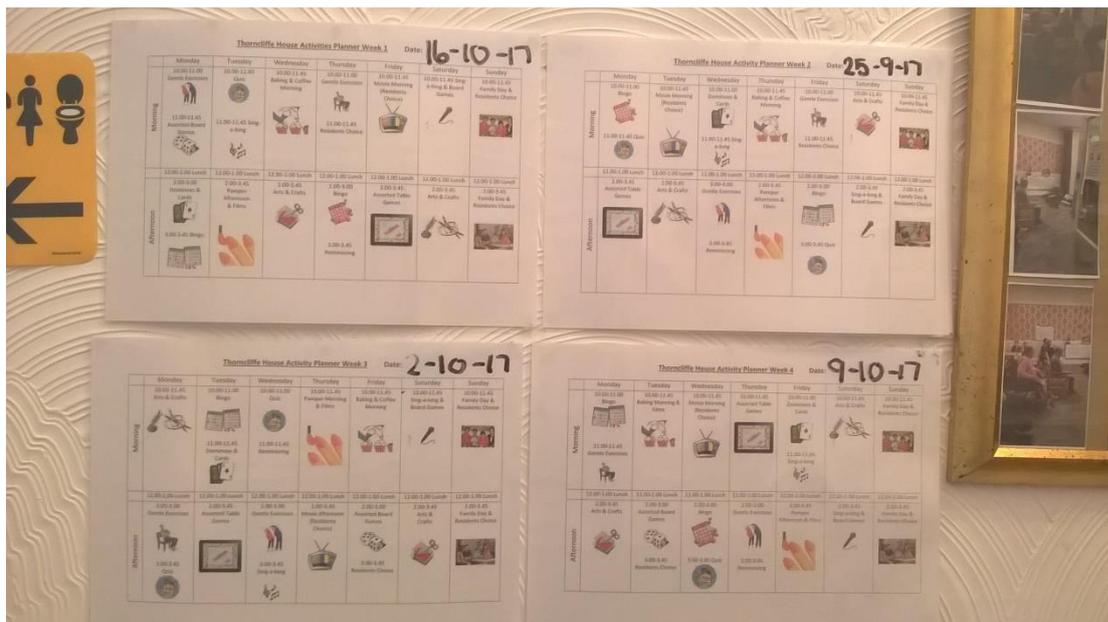
been due to their own individual health and capacity. Those who could, told us that they watch TV, play dominoes, read the paper and play bingo. One resident went on to say that it is easy to access the activities. During our visit we did see the activities planner for the upcoming weeks displayed on the notice boards and the TV in the lounge which was on. Several residents were chatting with one another and singing.

A relative informed us that there are a range of activities available and that there is a large TV in the main lounge and music was often played.

Staff informed us that in addition to indoor activities residents are escorted to personal shopping trips when required and outdoor activities such as a local art group. They went on to say that they support and encourage residents to take part in activities and encourage the residents to drive the choice in the range of activities available to them.



(Thorncliffe House Residents taking part in activities)



(The schedule of activities on offer at Thorncliffe House)

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 care home provides a breakfast when the residents require it and of their own choice. Lunch and evening meal is a protected mealtime (a period of time when activity is reduced so staff can be available to help serve and supervise meals and assist residents who need help to eat and drink. This time also include limiting visitors) served where the resident would like to eat. Residents can choose from a choice of two meals, with snacks and drinks available throughout the day and a buffet style supper later in the evening. All residents spoken to said that the food at Thorncliffe House is good, with plenty of choice. One resident added that an alternative meal will be made if there is nothing on the menu you want. Another resident told us that the food is especially good, the mushroom soup in particular. One resident did say that they felt mealtimes were rushed. Most of the residents said they enjoyed the social aspect of mealtimes.

During the visit the Healthwatch team saw the dining area and witnessed the residents being supported into it for their evening meal, music was also played in the background. We also witnessed both hot and cold drinks being offered to



residents in the main lounge prior to this and the chef took time to approach all the residents in the main lounge area to ask what they would like for their meal.

The relative who responded to the survey told us that the food is excellent at the home, that the kitchen staff are lovely and have asked about her mother's likes and dislikes on several occasions.

Staff informed us that although residents can eat whenever and wherever they wish they try to encourage residents to eat in the dining room to benefit from the social aspect of this. Staff are available to assist at mealtimes if this is required and the staff shared with us the importance of ensuring that each resident gets the food which they ordered.

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 but one of the residents we spoke to were unsure about the last time they saw a dentist, optician or chiropodist with some stating it had been some years ago.

However one resident told us that the optician and chiropodist visit the home and the dentist too, who can be called if they are needed. Another resident told us that their GP visits them at the home.

The relative states that an optician visited recently and a chiropodist visits the home regularly.

The Manager and the staff informed us that an optician and chiropodist visit the home on a regular basis. The Manager added that most residents have chosen to keep their existing dentist, but there is a dentist who will attend the home if requested to do so. Some of the staff told us that healthcare professions visit the home for call outs and check-ups.

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.

Most of the residents were unable to answer this question, this could have been due to their individual health problems or capacity. However, one resident told us that a hairdresser visits the home on a regular basis to cut / style their hair. Another resident told us that a local nun comes into the home and sings with the residents. She went on to say that she really enjoys her visits and likes her. The



Healthwatch team witnessed this visit as the Sister was finishing her session in the lounge area with many residents present and taking part. Some residents were speaking to her and had questions for her. The singing of hymns continued for some of the residents long after the sister left the premises.

The relative stated that her relative did not have any specific lifestyle or religious or cultural needs.

The Manager informed us that a resident's personal, cultural and lifestyle needs are discussed at admission and documented in care plans. This is where some of the staff said they would find this information. One staff member added that one resident attends his Evangelist Church and another said that trips out and visits were arranged for religious and cultural needs when requested.

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.

The home utilises a range of ways to collect feedback including family and residents meetings, regular surveys for staff, residents and relatives and a compliments and complaints book to capture additional information.

Residents gave us a mixed response to the questions in this section of the survey. Some said that the staff at the home asked them what they think of the home and some said that no one had ever asked them for their opinion. When asked if there was anything they would like to change about the home, one resident stated that she liked everything about the home and she liked the people there. One resident told us that there are no residents meetings but that they were happy and wouldn't change anything. Most of those asked stated that they had no need to complain, but they would approach a member of staff or the Manager if they felt they needed to.

The relative who completed our survey told us that they always feel welcome and relaxed at the home and that they enjoy chatting to the staff and other residents. They were unsure if there was a formal procedure, but felt relaxed about giving feedback to the staff or the Manager and if there was need to complain they would approach the Manager.

The Manager informed us that all feedback is looked at and used to build upon good practice - the team learn from it and is also discussed at staff meetings. The staff felt they had a say in the way the home is run and that new suggestions and ideas from staff are tried if appropriate and safe in accordance with risk assessments.



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 relative 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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