

Care home life, what it's really like!

Glenholme House



Date of Healthwatch Sunderland visit:

Friday 15th December





Distribution List:

Glenholme House - Ashleigh Wood, Manager of Ayton Lodge

Wellburn Care Homes Ltd - Mr Richard David Guppy

Care Quality Commission - enquiries@cqc.org.uk

Healthwatch England - Katie Johnson, Development Officer

Sunderland Clinical Commissioning Group:

Dr Ian Pattison, Clinical Chair

David Gallagher, Chief Officer

Debbie Burnicle, Deputy Chief Officer

Janet Farline, Clinical Quality Officer

Aileen Sullivan, Lay Member Patient and Public Involvement

Sunderland Local Authority

Graham King, Head of Commissioning

Anne Fairhurst, Commissioning Specialist

Fiona Brown, Executive Director of Adult Services

Health and Wellbeing Board

Councillor Graeme Miller, Portfolio Holder, Health, Housing and Adult Services

Karen Graham, Office of the Chief Executive, Sunderland City Council

Public Health - Gillian Gibson, Director of Public Health, Sunderland City Council

Sunderland Care Alliance - Angela Richardson, Network Development Officer

HealthNet Sunderland - Gillian McDonough, Chief Officer of VCAS

Sunderland Echo - Joy Yates, Editorial Director

Age UK Sunderland - Tracy Buck, Director

Independent Age - Catherine Seymour, Policy and Research Manager

Sunderland Alzheimers Society - Helen Williams & Penny Easton

Action on Dementia Sunderland - Ernie Thompson, Chairman

Sunderland Carers Centre - Graham Burt, Chief Executive Officer

Essence Service - Anthony Gonzales, Service Manager

MP Sunderland Central - Julie Elliott

Local Councillors for Fulwell

Councillor Margaret Beck

Councillor Bob Francis

Councillor George Howe

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.



Table of Contents

1. Introduction	3
2. Background and rationale.....	4
3. Methodology	5
4. Findings - Summary	6
5. Appendices.....	15
Appendix 1 - Questions for residents	15
Appendix 2 - Questions for Managers	16
Appendix 3 - Questions for staff	17
Appendix 4 - Questions for friends and relatives.....	18



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 Deputy Manager, Craig was held at Glenholme. 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 it's really like!' visit took place on the 15th December 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	Time  Agree Skills  Strongly Agree
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	 Strongly agree
8.	An open environment where feedback is actively sought and used	 Strongly agree



Findings

Glenholme House Residential Care Home is located on Park Avenue, Sunderland SR6 9PU. It is a two storey converted townhouse, a short walk from the seafront, with bedrooms located on both floors. The home provides residential care for up to 40 older people some of whom may be living with a dementia or general care needs. It also has a new Time to Think Service which allows individuals 6 weeks to decide if the home is the right choice for them.

See the latest CQC inspection report here:

<http://www.cqc.org.uk/location/1-126290369>

At the time of our visit there were 35 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch team were only able to support 3 residents to fully complete the survey. The team received 9 staff and 2 friends and relative surveys back.

The Deputy Manager which the Healthwatch team initially met with was unavailable at the time of the Healthwatch visit. The comments provided in this report are that of Ashleigh Wood who was Deputy Manager of St George's Care Home at the time of the visit, (St Georges Care Home is also provided by Wellburn Care Home Ltd). Ashleigh was offering support to Glenholme House at the time of the Healthwatch team visit.

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.

Two of the residents at Glenholme House had difficulty identifying the Manager but this may have been due to their own individual health or capacity. The other resident knew who the Manager was and commented that he was a nice natured man.

The friends and relatives who completed the form said they knew who the Manager was and found them friendly and helpful.

The staff commented that despite not having a permanent Manager at the time, they feel fully supported in the home. They stated that the management is there to support and help with any issues and are very approachable. One staff member also told us that if the Manager is not available they can go to the Area Manager or Head Office to raise issues or ask questions.

The Deputy Manager informed us that they had worked for the company for three and a half years and were attracted to the Deputy Manager role due to the progression opportunities within the company. They went on to say "I thoroughly



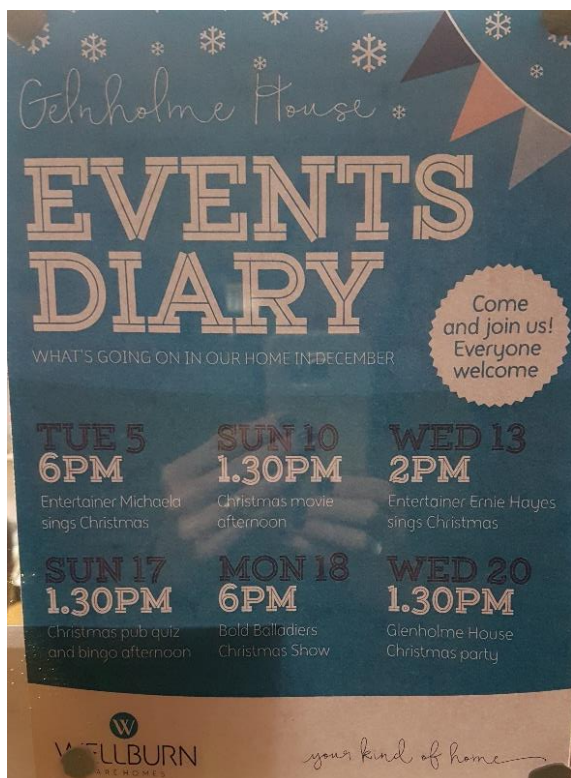
enjoy the satisfaction the job role brings to me because of the close relationships I have made with all of the residents, their families and staff. There is always a new challenge and this adds to my attained knowledge and there is a lot of support offered from senior management”.

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 an AGREE rating and staff skills a STRONGLY AGREE rating.

When the residents were asked about the staff at the home, all commented positively and told us that they were very pleasant, fantastic and that they had no complaints. They went on to say that they were well looked after and staff had time to stop and chat with them, are able to answer any questions they had or have a conversation at any time.



Both friends and relatives commented that they felt staff had both the skills and time for residents but one added that extra staff would allow for more time with residents.

The majority of the staff gave a positive response to having enough time to care for residents with a few stating that on occasion they struggle for time.

All staff commented that they are encouraged to take part in training with one saying “I have recently passed an NVQ (National Vocational Qualification) in social activities and have been signed up to numerous courses to improve my skill set in the 8 years I have been employed.”

Staff told us that they enjoy their job for various differing reasons including,

making people happy, talking to the residents about their past life and getting to know residents and their families.

The Deputy Manager stated that they encourage staff to take part in training and source this via various local providers and that she also attends these regularly. She also stated that staff have an area in which they are champions for and they attend training in these areas to add to their attained knowledge. Regular supervisions are also held which helps Managers to have a better understanding of which areas staff have a strong interest in and which areas they need development.



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.

When asked if staff knew them well and knew their likes and dislikes, residents responded positively stating that they believe they do with one resident stating that the staff picked up on their daily emotions and sensed what they were feeling. The friends and relatives who responded also stated that they felt staff knew their relative very well. One person added that the staff at the home notice and respond to the friends/relative's changes in need.

Staff and management informed us that prior to being brought to the home a pre-assessment is carried out to ensure that the home can meet a potential resident's needs and everything is in place for their arrival. Once at the home, handovers are used to inform staff of the residents needs prior to assisting and supporting them.

The home has recently introduced "Life Stories" which the Activities Co-ordinators informed us they use with support from residents, friends and relatives to gather information on the resident's needs, personality, past jobs and hobbies etc. This is then used to tailor activities around their interest and all staff then read these.

Any changes in resident's needs are documented in the care plan and in the handovers for each shift, for one week or longer if needed. Any involvement from other professionals is documented and recommendations followed as per guidelines. Any changes in dietary requirements are passed onto the kitchen technicians who sign the resident's diet sheets to say they are up to date with changes.





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.

Day	Activities
1 st Friday	XMAS tree decorating, mystery drive, daily chat & exercises
2 nd Saturday	XMAS card making, sing-a-long, daily chat & exercises
3 rd Sunday	Drive - to see Christmas lights, walk around park, daily chat & exercises
4 th Monday	Trip to clays garden centre, memory games, daily chat & exercises
5 th Tuesday	Entertainer- Mykalo, aromatherapy, daily chat & exercises
6 th Wednesday	Music therapy, mystery drive, daily chat & exercises
7 th Thursday	Panto @ NE6 suite, daily chat and exercise
8 th Friday	XMAS Quiz, proverbs, daily chat & exercises
9 th Saturday	Ward association, crosswords, daily chat & exercises
10 th Sunday	XMAS Movie afternoon, quizz, daily chat & exercises
11 th Monday	Trip to Richardson garden centre, sing-a-long, daily chat and exercises
12 th Tuesday	Aromatherapy, music quiz, daily chat & exercises
13 th Wednesday	Entertainer- Ernie Hayes, sound quiz, daily chat & exercises
14 th Thursday	Arts & Crafts, board games, daily chat & exercises
15 th Friday	Trip to Fenwick's, jenga, daily chat & exercises
16 th Saturday	Board games, jigsaws, arts & crafts with Louise
17 th Sunday	Daily chat & exercises, XMAS pub quiz afternoon
18 th Monday	Board games, XMAS show, daily chat & exercises
19 th Tuesday	Aromatherapy, mystery drive, daily chat & exercises
20 th Wednesday	Christmas party, YouTube reminiscing, daily chat & exercises
21 st Thursday	Card singing, XMAS snakes and ladders, daily chat & exercises
22 nd Friday	Animal zoo, scrabble, daily chat & exercises
23 rd Saturday	XMAS crosswords, arts & crafts, daily chat & exercises
24 th Sunday	XMAS movie afternoon, XMAS reminiscing, daily chat & exercises
25 th Monday	XMAS DAY!
26 th Tuesday	Blanking day
27 th Wednesday	Baker making, mystery drive, daily chat & exercises
28 th Thursday	Jigsaws, arts & crafts, daily chat & exercises
29 th Friday	New year quiz, reminiscing, daily chat & exercises
30 th Saturday	Times puzzle, 'what's in the bag?', daily chat & exercises
31 st Sunday	New year's eve, movies and mystery drive

Whilst on the visit the Healthwatch team witnessed the two Activities Co-ordinators carrying out a range of different activities with the residents. This included a Christmas pantomime and quizzes that were performed in the resident's lounge that aimed to engage residents in the activities and encourage movement.

Residents informed us that they engage in the activities available and are encouraged and reminded to join in. One resident explained that they go on various trips outside, including to the illuminations, the local church, shopping and mystery trips out. They explained that they thoroughly enjoy these. The friends and relatives who responded stated that they

thought activities were “very good, residents responded and look forward to the activities” and “Fantastic and very varied”. One stated that their friend/relative is properly encouraged and supported to take part in the activities.

Staff also explained that they have a range of activities available in the home including exercise, arts and crafts, making and baking, reminiscing, sensory activities (bubble fun and aromatherapy). They also have visits from outside entertainers such as Discovery Zoo and Virtual Reality Technology. Staff also explained to the Healthwatch team about the subscription to a Daily Chat magazine that goes to every resident in their rooms. They use this as a conversation starter with residents collectively in the lounges where they can discuss the articles from the past and fill in the quizzes. This is also used as a tool to aid conversation when staff visit residents in the rooms to spend one to one time with them, including those who may be bed bound. They also went on to say that if assistance is required for the residents to participate in the home activities this is given by staff who try to encourage everyone to join in, but respect those who don't wish to.

Residents are also encouraged to join in with bus trips which are provided at least twice monthly to venues that cater for wheelchair users.





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.

Of those residents we spoke to, they all told us they really enjoyed the food at the home and stated that it was really nice, fresh and tasty with a wide range of choice available to them. They also stated that there are set mealtimes and that the carers inform them when this is. They also stated that if they fancy something different from the set menus they can ask and the kitchen will do their best to accommodate it.



One friend/relative said “I don’t see the food but the frequency of food and drink offered is second to none.” They went on to say that they feel their friend/relative is supported to eat and drink as much as is needed and that mealtimes look to be sociable times at the home.

Staff and management informed us that there is a wide range of cold and hot drinks and snacks that are brought out on the trollies

4-5 times throughout the day. At mealtimes staff show residents the menu of the two meals choices available so that they can make their own choices. At tea time soup and sandwiches are provided and a choice of two desserts is served. If there is nothing that the residents would like to eat an alternative can always be made by the kitchen.

Residents are encouraged to eat in one of the two communal dining rooms (see photo above), so they can sit together making the experience more sociable. Music is played at mealtimes and staff interact with residents, chatting and supporting those who require assistance. The Healthwatch team were informed that some residents prefer to have their meal in their rooms or the lounges and if residents are not hungry at mealtimes they will be offered lunch and tea when they are ready to eat, which the home respects and accommodates.



The Healthwatch team witnessed a refreshments trolley being wheeled round the home by staff, serving drinks and snacks to residents to their preference and a menu on the wall displaying the day's menu.



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

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

The Healthwatch team AGREE this was met.

All residents spoken to said that they have regular healthcare check-ups. Some stated that they have visits to the home from GPs for example and others visit local practices with support from staff.

One relative who responded informed us that the only health professional she hadn't seen in the home was a dentist. The other stated that these services are not required for their friend/relative.

The Manager and care staff also informed us that dentists, opticians and chiropodists make regular visits to the home. Vision Care visit the home to carry out annual eye tests or more frequently if needed and all residents have check-ups 6 monthly by the dentist. GPs are contacted as and when needed and are backed up with the district nurse team.



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

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



New relatives and friends area of Glenholme

Residents informed us that their cultural needs are respected with all those we spoke to, visit local churches or take part in the services that takes place in the home. The residents also have their hair done once a week by the hairdresser who visits the home.

The friends and relatives completing the survey explained that their friend/relative have no specific lifestyle or religious or cultural needs.

Staff and management informed us that they find out residents cultural/religious or lifestyle needs by talking to residents or family members and friends. Information gathered is then documented in the residents care plan and life stories. The home uses a food supplier that allows residents to

receive a pack that can be given to residents prior to the ordering being done to ensure they can make their own choices.

An example given explained how a resident who is vegan is catered for and all staff are aware of her dietary requirements via communication in her care plan.



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.



All of the residents which the Healthwatch team spoke to informed us that they were happy and do get asked if they are happy, with one mentioning they keep up to date with the residents meeting.

None of the residents wanted to make any changes to the home and when asked, knew to make a complaint they would need to speak to one of the staff members as a way of raising a concern.

The friends and relatives told us that they feel welcome participants in the life of Glenholme House. They went on to say that they would know how to make a complaint to the home if necessary and felt confident that it would be acted upon appropriately. One person said “I have never

needed to make a complaint, but the staff are so accommodating I would not envisage there being a problem.”

Staff and management informed us that there is several ways that residents and relatives can feedback. For example they hold regular meetings, to keep everyone up to date with any changes that may be occurring and to gather feedback.

Residents and relatives are given questionnaires and an action plan is produced to address the issues or concerns they may have. The home also has a comments box (see above) for residents and relatives to offer feedback and www.carehome.co.uk promotional cards are available at the front entrance.

Examples given of how this has been put into practice have included family members requesting entertainment for the residents on a weekend as it only ran Monday to Friday. This was acted upon and now they have an Activity Co-ordinator seven days a week. Another example is that family members now come in and help with activities that they have suggested i.e. biscuit making and baking cakes.

The Manager informed us that staff have supervisions every six to eight weeks and have their chance to express any ideas they may have. They also have regular staff meetings to give the opportunity for staff to get together and discuss any issues or concerns. She ensures that feedback from residents and relatives is made use of by producing an action plan to ensure all areas of concern or ideas are covered. Staff reiterated this when asked if they could input into the home.



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. What activities are there outside the home?
8. Is it easy to join in the activities?
9. Do you get a chance to do any of the things you used to enjoy before you came here?
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. What happens if you need to see a doctor or have an appointment at the hospital?
15. Is there respect for your religion or your culture here in your home?
16. Do you get asked what you think about the home or if you are happy?
17. Would you like to change anything about the home? Have you told anyone about this and what happened?
18. 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?

How 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?

How do you support residents 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**
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**
Please tell us about visits from health professionals such as GPs, nurses, dentists, opticians, 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?

What provision is there for residents to regularly get their hair cut/styled?

How do you ensure that the laundry staff getting 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?

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.

© Healthwatch Sunderland 2018