

Care home life, what it's really like!

Ashwood Court



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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 15th October 2019 and was carried out by Healthwatch Sunderland staff 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

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	Time  Neutral Skills  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	 Agree
6.	Regular access to health professionals	 Strongly agree
7.	Accommodation of resident's personal, cultural and lifestyle needs	 Agree
8.	An open environment where feedback is actively sought and used	 Agree
9.	Provide a physical environment which is suitable for the needs of the residents	 Agree



Findings

Ashwood Court Care Home is a purpose built home, located at:

Suffolk Street
Hendon
Sunderland
SR2 8JZ

Telephone: 0191 565 9256

Provider: Hendon PIF Ltd

Provider's Website: <https://www.ashwoodcares.co.uk/>

See the latest CQC inspection report here:

<https://www.cqc.org.uk/location/1-3526844093?referer=widget3>

The home has the capacity to support 30 residents aged 18 years and over, residents are supported under the categories of Enduring Mental Ill-health (EMI) Residential, Nursing EMI and Mental Health.

All bedrooms are en-suite and residents and their families are actively encouraged to personalise rooms as much as possible. Although the home currently doesn't have a double room for couples they could accommodate couples if required.

The home has three communal lounges and provides WiFi and a hearing loop system for use by its residents. Families are allowed to join residents at mealtimes, as no restrictions are in place.

Activities are provided for residents every day of the week and the home employs a full time Activities Coordinator.

The home currently has a pet cat and dog living at the home.

At the time of our visit there were 26 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch Team were only able to support two residents to fully complete the survey. The team received eight staff (one Manager, two Senior Care Assistants, four Care Assistants and one Activities Coordinator) and two relative surveys back.

The results of these surveys are given below:

Indicator 1 - A strong visible management

The indicator states that the Manager should be visible within the care home, provide good leadership to staff and have the right experience for the job
The Healthwatch team STRONGLY AGREE this was met.

When asked by the Healthwatch Team if they knew who the Manager was both residents spoken to, responded to say that they did and gave the following comments when asked what they thought of her;

“Helen is a breath of fresh air and relates well with colleagues.”



“She is alright in a good way.”

Both relatives who responded to the survey, when asked, were able to name the Manager and told us the following, when asked to tell us a little about her;

“Helen is a very pleasant and helpful girl. She goes out of her way to ensure that the home is running perfectly.”

“Helen took over from the previous Manager with some improvements.”

Staff were asked by the Healthwatch Team what support they receive from the Manager, all gave positive comments, which included;

“I feel that I can approach/speak to my Manager about any issues or day to day queries at any time.”

“We receive a lot of support from the Manager if we have any issues.”

“Any problems I have, if personal or work related, there is always someone there to listen. If I need a solution to a problem they will always try to offer me one.”

“A great help and good support and is very approachable.”

“Always offers support and operates an open door policy.”

“Yes, very approachable and supportive in all issues.”

“Yes, very good support from Manager.”

When asked what has been their experience of talking to the Manager when they want to ask a question or raise an issue, all gave positive comments, these included;

“My Manager would take the time to listen and follow up on an issue I have.”

“Very approachable and answers all questions or issues when asked.”

“She has always been there to listen.”

“My Manager is always there to help with any questions or issues or if I have any issues.”

“Whenever I have an issue it is always dealt with in the most appropriate manner. There is never a silly or stupid question with our Manager. You can ask anything and feel comfortable when doing so.”

“My Manager will listen to what I have got to say and will do her best to deal with the situation.”

“My Manager and Deputy are always available to answer anything which I need to know and are approachable and always there if I need anything.”

The Manager who has been in post for approximately 18 months was asked what attracted her to the role of Care Home Manager. She stated; “Working as a Bank



Nurse I fell in love with Ashwood Court. The staff and residents make the home feel very special.”

She added what she enjoys about the role; “I enjoy everything. The team work from staff is second to none. My favourite thing is spending time with residents and families and ensuring they are receiving a high standard of care.”



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.

Residents were asked what they think of the staff at Ashwood Court. Comments received included;

“I get on really well with one staff member and have good banter with others.”

“I know some staff from my previous home which is good. I feel well looked after. If I want anything I just need to ask a member of staff or the Manager and they will find out for me.”



Residents, when asked, informed the Healthwatch Team that staff don't always have time to stop and chat with them. Their responses included;

“They do if they have got the time, if they haven't they will tell you and come and see you later.”

“Staff are thin on the ground so it has to be the right time of the day. Staff are limited on a night time.”

When asked by the Healthwatch Team if they feel staff have time to care for their relative, those relatives who completed the survey gave mixed responses, comments included;

“Yes however when there is only one Carer it does not work, luckily friends and family help.”

“All staff in the home work to the best of their ability at all times. Although some work long shifts and could do with a little a help at times.”

Since the Healthwatch visit the Manager informed us; “We have never worked with only one member of staff this would be unsafe. If at anytime sickness is a major issue I would work the units along with my deputy and senior staff. Night shift as like any other home works with reduced staff. However if needs were to change this number would increase to support the needs of residents.”

Relatives added that they feel that staff have the skills to care for their relatives commenting that staff are very experienced.

When asked if they feel they have enough time to care for residents, most staff agreed that they do. An additional two giving the following comments;

“On most shifts yes. If we are short of staff this can be difficult.”

“Yes but when staff ring in sick it's sometimes difficult.”

Staff went on to tell us how they are encouraged to continue to develop their skills;

“Through National Vocational Qualifications (NVQ's) and training etc.”

“Through training. There is always training within the care setting.”

“Yes. I have great encouragement from my Manager and Deputy to do my Access to Nursing Course. They are behind me 100%.”

Staff informed us what they enjoy about their job;

“I enjoy all aspects of my job, knowing I'm providing in the best care possible.”

“Knowing that what I do with the residents is giving 100% care and when the residents give you a smile.”

“Helping and assisting the residents in their day to day lives.”

“I love it as it very rewarding.”



“I love providing my residents with stimulating and meaningful activities. Even when an activity does not go to plan I love seeing smiles on their faces. It makes it all worthwhile.”

“I love looking after the residents by giving them personal care and interacting with them by talking.”

“I enjoy caring for our residents and getting to know their likes and interests.”

The Manager explained how the home ensures that staff have enough time to care for residents, they stated this was done through; “Time management, having a resident of the day and having Senior Care staff who lead shifts.”

They added how they encourage staff to develop their skills; “Training via NVQs in Care, in house learning and spending time one to one with myself.”



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.

When asked by the Healthwatch Team if staff at Ashwood Court know them, know what they like and dislike the two residents spoken to gave a mixed response, their comments included;

“Some do and some don’t.”

“Yes they do, they would know if I was having a bad day and know how I like my tea and coffee etc.”



When relatives were asked if the staff know their family members life history personality and health and care needs well, both relatives who responded to the survey stated that they do and gave the following comments;

“Very well”

“Very well, they always give him full attention at all times.”

The Healthwatch Team asked relatives if staff at the home notice and respond to changes in their relative’s needs and if they are informed of changes, all relatives stated that they are and added how they are kept informed, comments given included;

“I get updates daily on Dad’s progress.”

“Posters, letters, or occasionally verbal.”



Staff and the Management Team informed the Healthwatch Team how they get to know a resident’s life history, personality and health and care needs when they first arrive at the home. They informed that this is done by staff speaking to residents and their families to get to know their life stories, reading individual care plans and speaking to previous care givers and/or professionals.

The Activities Coordinator added the following comments; “When an individual comes to our home, if they have any family, I will chat to them and the individual to find out their history and what they like to do and what they don’t. I then go and formulate a file for staff members to read. We also hold formulation meetings before the individual moves here.”

Staff and the Manager were asked by the Healthwatch Team how the information relating to residents likes, dislikes and care needs are updated and then passed on to staff. They gave the following comments;



“The information is on the computer and also paper based. We also communicate well so when a change occurs, we are informed.”

“Care plans are updated and the Nurse in charge would also pass on information.”

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.

When asked about the activities provided in the home the residents which the Healthwatch Team spoke to gave the following comments;

“There are dedicated activities in the home but they are sadly not to my liking. I prefer to watch TV and read.”

“I prefer to watch TV in my own room, as I then can choose what to watch, but I do enjoy playing bingo on a Friday.”

Residents added they are aware that activities take place outside of the home, with one mentioning that they choose not to go out and the other resident spoke about his trips to the cinema with staff which he enjoys.”

Both of the residents stated that they are able to make use of the garden if they wish with both mentioning that when the weather is good they have BBQs which they enjoy and family of other residents join in.

Relatives when asked about the activities available for residents inside and outside of the home gave the following comments;

“Sometimes could do with more going on in the afternoon.”



“Not enough activities.”

Relatives went on to inform that their family members are informed when activities take place and the Carers encourage them to join in. They added the following comments when asked if their relative is able to continue their hobbies or interests since joining the home;

“Dad’s illness has deteriorated, so he can’t do much now.”

“No not a lot. They love listening to music which I always play when I visit.”

Staff, the Manager and the Activities Coordinator were asked by the Healthwatch Team about which activities are available for residents inside

the home. They informed on a range of activities including; beauty and pamper sessions, tasting sessions, reminiscence, music and movement, knitting, bowling, entertainers and singers, arts and crafts, clothes and jewellery parties, pet therapy, group reading, resident social groups, person centred movie days, and sensory sessions including essential oils etc.

They went on to tell us about the activities that are available to residents outside of the home including; trips to the cinema, panto at Sunderland Empire, football matches at the Stadium of Light, Back on the Map (local Voluntary and Community Sector organisation) classes, trips to cafés and meals out, trips to nearby towns to see art and learn about local history, trips to town for shopping and regular visits to the cemetery so individuals can visit late family members.



The Activities Coordinator was asked what activity provision is made for those residents who cannot or do not wish to undertake group activities. She gave the following response; “For those who cannot, I try to provide person centred activities as much as possible for them. The majority of the time residents will be of reflex ability, so usually all sensory for them. If they are bound to bed, I will take the activities to them. If we have entertainment in I will get them to visit those who are bed bound. For those who do not wish to participate, I ensure they are encouraged and have support from me. If they still do not want to be involved I always respect their wishes and their choice.”



Staff and management gave the following comments when asked what encouragement and assistance is given to residents so that they can take part in activities;

“Verbal encouragement is given to residents and I physically show them the activity.”

“By giving them encouragement and joining in.”

“If a resident will not engage, I will leave them and try later or help them with what activities there are.”

The Activities Coordinator added; “Encouragement and assistance changes daily depending on the specific needs of the resident. There may be lots of encouragement needed for those who have dementia or if they are feeling low or



agitated. Assistance does differ daily, I always offer support when needed however I promote independence when appropriate.”

They went on to tell us how they ensure that residents have the opportunity to continue to take part in their hobbies and interests; “I ensure that the interests of the individual are planned in advance. For example a resident and I go weekly to an art class she participated in before coming into care. I wanted to ensure she was still able to attend these classes just like she would have at home.”

The Manager added that some residents were encouraged to bring pets with them and these now live with them at Ashwood Court.

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 AGREE this was met.

When asked what they think of the quality and choice of food in the home, residents the Healthwatch Team spoke to all complimented the food, stating that it was good and they had a wide choice. They added that staff are willing to tailor the food to their preferences, for example one resident stated that the home provides a Sunday lunch every week, which isn't to his liking so the home instead makes him a meat and sage and onion stuffing sandwich, which he really enjoys.

The other resident also commented that he really enjoys soft drinks and staff make trips to the shops to buy these for him.



Both residents added that they either eat their meals in the dining room or their bedroom and this is their choice, although they did comment that staff encourage them to join other residents in the dining room for a more sociable experience.

During the Healthwatch Team visit we witnessed refreshments and snacks being served with residents getting their preferred choice of hot drink in their own mugs.

When asked about the quality and choice of food at the home the relatives who responded to the survey question, gave the following comments;

“7/10, could be hotter as food is sometimes cold.”

“Excellent.”

They added the following comments when asked how confident they were that their relatives are supported to eat and drink as much as needed;

“Most mealtimes are fine but I like to feed him on a teatime, but this is my choice.”

“7/10.”

Staff respondents to the survey were asked what they thought of the quality and choice of food available at each mealtime, all but one staff member stated it was either good or very good. The other staff member stated that it was OK but could benefit from more choice.

The Manager added comments on how the home ensures high standards of quality and choice of food. She stated this is done via training, care plans, all residents



are encouraged to make choices, the menus are reviewed every six months and they ask for feedback from residents and family.

When asked by the Healthwatch Team how they ensure that residents are able to eat and drink at mealtimes as well as outside of mealtimes, staff and the Manager informed us that this is achieved by having drinks stations around the home, snacks are offered all day and night, offering assistance when needed, providing adapted cutlery, bright coloured plates and cups and following individual's care plans.

They added that residents are also offered a choice of what, when and where they eat, comments included;

“Residents have no time restriction on when or where they eat and drink and have a choice from a menu at mealtimes and choice of where they eat.”

“If a resident chooses not to eat at mealtimes, they will be given food at other times of the day. They are also given a choice of where they would like to eat and drink.”

“Residents have a range of food and drinks to pick from and can choose to eat and drink where they want, as long as it is safe to do so.”

“Some residents like to eat in a quiet place by themselves, so staff will take their meal to them.”

The Manager and staff added when asked the ways in which the home ensures that mealtimes are sociable, they stated that they get all residents to sit together in the dining room to encourage them to socialise, families are invited to eat with loved ones, background music is played and staff sit and chat with residents.

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 STRONGLY AGREE this was met.

When the Healthwatch Team asked residents if they have access to a range of health professionals both were able to mention a range of different visits including GPs, Opticians and Dentists. One resident mentioned they still visit their own GP in the community and staff go along with them to these appointments. The other resident commented on the GP who is aligned to Ashwood Court, who often checks in with them to see if they are OK. Both stated that if they need to see the GP for a particular reason then Carers would arrange this for them.

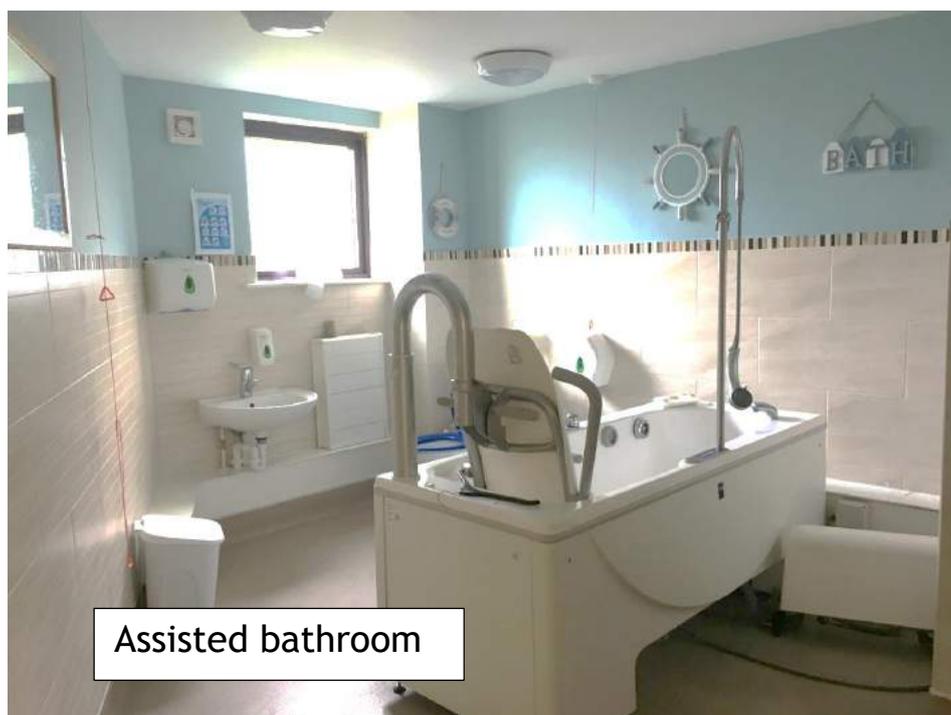
The relative respondents when asked by the Healthwatch Team about the access to health professionals, gave the following replies;

“The home has organised all of these for us.”



“We as their family have to request these, unless there is an emergency.”

Staff and the Manager informed the Healthwatch Team about the range of regular visits to the home from health professionals including; Opticians, Dentists and Chiropractors. They added that the Practice Nurse visits weekly and the GP hosts a Multi-Disciplinary Team (MDT) meeting every other week. One staff member stated; “We have a GP who comes every month to see the residents. If a resident needs some professional assistance the right professional will be contacted.”



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 the Healthwatch Team spoke to stated that they had any specific religious, cultural or lifestyle needs.

Residents did add that they have their hair styled by the visiting hairdresser who also helps them with shaving. One resident informed the team that they utilise the home’s laundry service which is good and the other launders his own clothes himself at the home. (The home has a communal washing machine and those residents who are able are encouraged to be as independent as possible).



Relatives who responded to the survey were asked how the home accommodates the lifestyle needs of their family member. They all informed us that their relative didn't have any specific religious or cultural needs but stated that their relative has access to the visiting hairdresser, and that their relative is always clean and appropriately dressed.

When asked about the laundry service available at the home one relative stated that it was excellent and the other informed that items do go missing.

The Healthwatch Team asked staff and the Manager how the home finds out and caters to the residents cultural, religious and lifestyle needs. Those who responded informed us that they speak with residents and their families to help them to accommodate resident's personal preferences.

Examples given of how the home accommodates some of the needs included;

“We have regular visits from Father Andrew. We also had a resident who was Jewish and his meals were made especially to cater to his needs.”

“We have a Father who is linked to our home that provides those of the Catholic and Protestant faith sessions and one to ones. I also respect Prayer Time and take this into consideration with planning activities.”

The Manager reiterated that the home has a visiting hairdresser or residents are able to visit their own Hairdresser in the community. The home also uses a labelling system to help ensure that the laundry staff get the resident's clothing back to them.

When asked what mechanisms are in place to ensure that residents are always clean and appropriately dressed, the Manager replied; “Care staff ensure a high standard of care.”





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 asked if they get asked what they think of the home or if they are happy residents who the Healthwatch Team spoke to gave a mixed response. One resident stated his Key Worker regularly checks in with him and he lets them know if he is happy and the other stated he hadn't been asked, but if they were to ask, he would let them know he would prefer to still be in his own flat.

When asked if there was anything they would like to change about the home, one resident stated no and the other resident commented that they would like to go on more nights out.

The Healthwatch Team asked relatives if they felt a welcome participant of life in the home, all survey respondents replied positively stating that they did. They went on to tell us how they and their relative can have a say in the home;

“Praise when due and they take notice of suggestions for improvement.”

“Managers and Carers are always there for this.”

Survey respondents added that should they wish to make a complaint about the home they would either speak to the Manger or a Carer and all felt confident that the complaint would be acted on appropriately.

Staff and the Manager informed the Healthwatch Team when asked, how families and residents can have a say in how the home is ran and stated that this is done by hosting regular coffee mornings, having a comments box, and holding care reviews.

The Activities Coordinator explained the ways in which residents and their family and friends can have a say in what activities are delivered both inside and outside the home; “There is a suggestion box that I encourage everyone to use. I am very approachable and invite others to suggest ideas and new activities.”

They went on to give an example of how residents and family have contributed to the change of activity provision, they stated; “We have bingo every Friday. This was influenced by one of our resident's daughters. We now have stimulating activities for our residents, that family still help with. The daughter still brings in bingo books for the home.”

When asked how members of staff can have a say in how the home is ran, staff replied stating that they have regular staff meetings where they are kept up to date, they have regular supervisions where issues can be brought up or they can approach the Manager with issues.



The Manager reiterated the staff comments when asked how staff can have a say and added; “All staff are encouraged to give ideas and feedback.”



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 AGREE this was met.



When asked by the Healthwatch Team if the home is always clean and tidy both residents replied positively, comments included;

“Yes I have a touch of OCD and my room is always clean and tidy.”

“The cleaners come in and clean and tidy and I always see them cleaning other areas of the home. It always smells nice.”

Residents, when asked about what the temperature is like in the home, replied to say that their rooms can on occasion get either too hot or too cold and this is dependent upon whether their radiators are working or not. They both stated that they had reported this recently to



the Manager, who has passed this on to the maintenance team and they are currently waiting for this to be fixed.

When relatives were asked about the temperature in the home, a mixed response was given. One relative stated the home was always a comfortable temperature, and the other stated it was often too hot.

Both relatives when asked about the physical environment of the home gave positive responses, they informed that the home was well decorated and well maintained and believed it to be a dementia friendly environment.

The Manager explained that they ensure that a comfortable temperature is maintained in resident's rooms and all communal areas of the home by having thermostats in all rooms and carrying out regular maintenance.

When asked how she ensures that the home is always hygienic and clean and well decorated and maintained, she replied stating that she carries out daily checks around the home and undertakes regular inspections and audits.

The Healthwatch Team asked both staff and the Manager how the home is made a dementia friendly environment, they explained that the home has bright colours, themes in the corridors and parts of the home, provides person centred activities, and staff are trained in this area.

The Activities Coordinator gave the following comments; "We have a very stimulating environment on the units. I provide a number of activities which can help a lot with the environment and we have appropriate music playing throughout the day."





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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