



Care Home Life - What it's really like!

Belle Vue Care Home



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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.healthwatchsunderland.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 2nd March 2020 and was carried out by Healthwatch Sunderland staff and a volunteer 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  Agree Skills  Strongly 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	 Strongly agree
7.	Accommodation of resident's personal, cultural and lifestyle needs	 Agree
8.	An open environment where feedback is actively sought and used	 Strongly agree
9.	Provide a physical environment which is suitable for the needs of the residents	 Agree



Findings

Belle Vue Care Home is a converted domestic residence, located at:

1 Gray Road
Sunderland
SR2 8JB

Telephone: 0191 567 3681

Provider: Belle Vue Care Homes Ltd

Provider's Website:

<https://www.prestwickcare.co.uk/our-homes/belle-vue-sunderland/>

See the latest CQC inspection report here:

<https://www.cqc.org.uk/location/1-965550712?referrer=widget3>

The home is registered to accommodate people over 65 years of age and provides residential accommodation for up to 27 people who have dementia or general care needs.

Belle Vue is based over three floors and comprises three lounge areas and dining areas located on the ground and first floors and a small garden with seating, located to the front of the property.

Eight of the homes bedrooms are en suite and three rooms can accommodate couples with prior consent. The home also encourages residents to personalise bedrooms, by supporting them to bring in their own belongings.

The home currently has a resident who has her pet budgie living with her and new pets may be allowed to live at Belle Vue, following risk assessments and consultation with Managers.

There is a varied programme of activities at Belle Vue, both inside and outside of the home. These, in the main, are provided by the Activities Coordinator, however all staff support in the provision of activities.

The home has internet access for residents use. The home does not have a loop system and does not operate protected mealtimes.

At the time of our visit the home was at capacity with 27 residents living there. Due to the capacity of the majority of the residents, the Healthwatch Team were only able to support three residents to fully complete the survey and one resident to partially complete the survey. The team received five staff (one Manager, two Team Leaders, one Carer 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 residents were asked if they know who the Manager of the home is, two residents were able to name her and two were unable to, this may have been due to their own individual health and capacity. The residents went on to tell us what they thought of the Manager, comments included;

“She’s lovely, really nice.”

“She’s good.”

“She’s alright.”

The Healthwatch Team asked relatives who the Manager of the home was and to tell us a little about her. Both relatives who responded to the survey were able to name the Manager and told us the following about her:

“Alison is very approachable, easy to speak to and resident’s needs are first and foremost.”

“Alison is very friendly and runs a well organised home. She always provides a range of entertainment for the residents and works hard to secure funding for social gatherings. You will sometimes see her sitting having a chat and a cup of tea with residents.”

During the Healthwatch visit the team witnessed this. A resident had a family member visiting them and they were enjoying a cup of tea together in one of the lounges. We witnessed Alison join them and join in the conversation. They both appeared to know her well and appeared to be comfortable in her company.

When asked by the Healthwatch Team what support they receive from their Manager, those staff members who responded to the survey gave the following responses:

“I receive a lot of support from my Manager. I can ask for her opinion on which ideas to use for the best of the residents.”

“Plenty of support with my childcare and working around my children and she helps me with personal issues.”

“I receive a lot of support from my Manager with a lot of things, such as advice in anything I am unsure of.”

“The Manager is always available and supports us in any way she can.”



Staff went on to tell us about their experiences of talking to the Manager when they want to ask a question or raise an issue. Their comments included;

“I always feel comfortable talking to my Manager. She is always available.”

“Very helpful.”

“Very comfortable. If and when I need to raise any issues, I feel I can talk to my Manager.”

“I feel very comfortable. When and if I need to speak to management she is there to support me with work and home issues.”

The Manager, who has worked at the home for 17 years, informed us of what attracted her to the role of home Manager. She stated; “I have been the Manager since August 2019, beforehand I was the Deputy Manager for 10 years. I was looking for a new challenge and what better place than the one I have worked in for the past 17 years.”

She added what she enjoys about the role; “I enjoy the challenge and responsibility. I also like the continuity of care that becoming the Manager brought to the home.”

Indicator 2 - Staff with time and skills to do their jobs

The indicator states that staff should be well trained, motivated and feel they have the resources to do their job properly.

The Healthwatch team gave this an AGREE rating for staff time and STRONGLY AGREE for staff skills.

When asked what they thought about staff at the home, all the residents the Healthwatch Team spoke to gave positive comments, these included;

“The girls are alright.”

“They are nice people.”

“They are lovely. Really nice people.”

“They are lovely. Couldn’t get better and can’t do enough for you.”

The Healthwatch Team asked residents if the staff have time to stop and chat with them. All residents who took part in the survey commented that they did, but some added this depends on how busy they are. Comments included;

“Yes sometimes.”

“Yes now and again, they don’t have much time.”

“Yes.”

“Yes. The girls from the college come in and chat every week. It’s good.”



When the Healthwatch Team asked relatives if they feel that staff have the time to care for their family member, the following comments were received;

“All the staff are very caring and try to have time with individuals and interact. Sometimes this is difficult, as some residents are more demanding and need constant attention which takes it away from others.”

“Yes, the staff are very vigilant and caring.”

The relatives added the following comments when asked if they feel the staff have the skills to care for their family member;

“Yes the staff understand my mother’s needs as she has dementia and she gets very anxious at times.”

“Yes the staff are well trained and manage any situation they face. They know everyone’s individual needs and personalities, so they can provide the best possible care.”

The care staff who completed the Healthwatch survey, all agreed when asked that they have enough time to care for residents. The Activities Coordinator added the following comment when asked if she has enough time to provide varied activities for residents; “Yes, I make sure I plan ahead and agree with my Manager, the activities planned.”

All staff who completed the survey agreed that they are encouraged to continue to develop their skills and gave the following responses;

“Yes training is always provided.”

“Yes, online training and in house training.”

The following comments were received when we asked staff what they enjoy about their jobs;

“Looking after residents and making their life happy.”

“Making all the residents happy and keeping them safe.”

“Everything. Residents, staff etc. I enjoy coming into work and enjoy seeing all the residents, chatting to them and putting a smile on their faces.”

The Manager was asked how she ensures that staff have enough time to care for residents, she said; “Our staff levels have remained high ensuring staff can care for our residents and are not just task orientated.”

She added the ways in which she encourages staff to develop their skills; “All staff do mandatory training, they also do training to develop their skills in areas of interest and expertise.”



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 the staff at Belle Vue know their personality, likes and dislikes, all residents the Healthwatch Team spoke to either agreed that they do or said staff were getting to know them, as they hadn't lived at the home for very long. Some of the comments received included staff being aware of the fact they like to have a lie-in in the morning, how they like to have their porridge and how they take their tea and coffee.

The relatives who completed the survey gave the following comments when asked how well they think the staff know their family members life history, personality and health and care needs;

“Very well. They sit and chat with visitors and at night with residents. They tell me different things they keep learning about Mam.”

“Very well, especially her health and care needs. So much so I have an emergency care plan in place so my mam can be treated in the home if she is unwell.”



Staff members who completed the survey informed the Healthwatch Team how they get to know new residents life history, personality and healthcare needs when they first arrive at Belle Vue. They informed this is done by carrying out a detailed assessment and making sure that staff read each resident's care plan and by speaking to the residents and their friends and families about their life history. The Manager also added that she ensures that staff have the time to sit and chat with residents to help them to get to know one another. Some of the staff comments received included;

“We read their care plan, speak to their family and speak to the resident themselves.”

“We get informed about the resident and we also read their care plans to make sure their needs are met.”

The Manager and staff were asked how information about a residents likes,



dislikes and healthcare needs are updated as they change and how this information is then communicated. They stated that this is done immediately by updating care plans and then passing this information on in detailed handovers at each shift change. They also added that this is evaluated each month for any 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 AGREE this was met.

Some of the residents who the Healthwatch Team spoke to were able to tell us about some of the activities that are available to them in the home including visits from local entertainers, a daily delivery of newspapers and games of bingo. When asked, one resident also added that he was able to continue his hobby of following the horse racing with the help of the Carers. Other residents stated due to their own health, they could no longer continue with their hobbies or interests.

The Healthwatch Team asked residents, what they can do outside of the home. Some of the residents were able to answer the question and informed us about trips out to the local social club via a taxi, where they meet with other local care home residents and trips they have made to Beamish Museum. Others stated that there is a garden area to the front of the home which they often sit in, enjoying the sun in the warmer months.

Some of the residents were able to inform us that they are reminded or informed of the activities and when they were taking place and are supported along to them.

Relatives who took part in the survey process gave mixed responses when asked what they think of the activities available to residents inside of the home. One relative stating they thought it was very good and the other giving the following comment; “Excellent for those who are more able physically and mentally. Residents like my mam sometimes get left out as they are too vocal, or not vocal and able enough.”

The same relative gave the following comments when asked what they think of the activities available to residents outside of the home; “In the summer they used to have day trips but as they no longer have transport this has stopped. However some of the residents are taken to a social once a month by taxi.”

The other relative added they thought outside activities were good.

When asked how is their relative encouraged and supported to take part in the activities, one relative didn’t answer the question and the other gave the following reply; “A Carer may sit with my mam, holding her hand or dressing her up for fancy dress parties. They also assist her to eat at the afternoon tea parties.”



Relatives were asked now that their relative lives at the home, does the home help and support them to continue with their hobbies, interests and receive visits from pets. Relatives gave the following responses;

“Yes, the home has a dog who comes in to visit and they do baby yoga with babies and their mums. We also visit with our dogs.”

“My mam has advanced Alzheimer’s and dementia so not that I am aware of but I would think it difficult to do any other.”

During the Healthwatch visit the team met, Harry, a Labrador, and his owner who were in the main lounge with the residents. When asking the residents about Harry many commented on how much they enjoy and looked forward to his visits.

Staff who completed the survey were able to inform us of some of the activities that are made available for residents inside the home. They stated that the home provides the following activities; dog therapy, bingo, movie afternoons, pamper afternoons, sensory sessions, afternoon tea, baby yoga, arts and crafts, music, games, doll therapy, singing and musical instruments, colourings, puzzles, crosswords, reading, reminiscence books and cards, gentleman’s club, restaurant evenings, parachute games and a monthly service offered by the local church.

Staff went on to inform us of the activities available to residents outside of the home including shopping trips and day trips. The Manager added that Belle Vue

ACTIVITIES LOUNGE 2

MONDAY 24TH	TUESDAY 25TH	WEDNESDAY 26TH	THURSDAY 27TH	FRIDAY 28TH
10.00-11.00 PET THERAPY	10.00-11.00 PARACHUTE GAMES	10.00-11.00 BOARD GAMES	10.00-11.00 CARDS AND DOMINOES	10.00-11.00 HAIRDRESSER MOVIE MORNING WITH COLLEGE STUDENTS
11-12.30 PET THERAPY	11.00-12.30 NAILS AND HAND MESSAGES	11.00-12.30 SIT AND BE FIT	11.00-12.30 PAMPER SESSION	11.00-12.30 HAIRDRESSER MOVIE MORNING WITH COLLEGE GIRLS
LUNCH	LUNCH	LUNCH	LUNCH	LUNCH
2.00-3.00 KALMA BABIES	2.00-3.00 BINGO	2.00-3.00 EASTER ARTS AND CRAFTS	2.00-3.00 REMINISCENCE MOVIE AFTERNOON	2.00-3.00 QUIZZES AND PUZZLES MOVIE AFTERNOON
3.00-4.00 DOLL THERAPY	3.00-4.00 BINGO	3.00-4.00 EASTER ARTS AND CRAFTS	3.00-4.00 REMINISCENCE MOVIE AFTERNOON	3.00-4.00 QUIZZES AND PUZZLES MOVIE AFTERNOON



DERWENTHURST CLUB CARE HOME AND COMMUNITY GROUP DATES FOR 2020

JANUARY 10TH AT 2PM WITH MICHAEL STEVENS
FEBRUARY 7TH AT 2PM WITH MAGGIE NEWMAN
MARCH 6TH AT 2PM WITH AARON LODGE
APRIL 3RD AT 2PM WITH KAYLEIGH CARES
MAY 8TH AT 2PM WITH AL RITCHIE
JUNE 5TH AT 2PM WITH MIKE MEMPHIS
JULY 10TH AT 2PM WITH CHRISTINE ROSEMOND
AUGUST 7TH AT 2PM WITH MICHAEL STEVENS
SEPTEMBER 4TH AT 2PM WITH AL RITCHIE
OCTOBER 23RD AT 2PM WITH AARON LODGE FOR
HALLOWEEN FUN
NOVEMBER 6TH AT 2PM WITH MAGGIE NEWMAN
DECEMBER 11TH AT 1PM WITH KAYLEIGH CARES
AND 2PM WITH MIKE MEMPHIS FOR CHRISTMAS
PARTY.

facilitates a care home group, made up of seven local care homes. The group exists to ensure the sharing of good practice and community interaction. For example she explained that she helps to arrange for residents from across these homes to attend a local social group and she is also working with other care homes to help support them to introduce new activities, such as Baby Yoga. She went on to say that although the home doesn't have its own mini bus, the home is part of a local community mini bus scheme, which enables residents to access outside activities.

Staff were asked what encouragement and assistance they give to residents so that they can take part in activities. Some of the responses received included;

“Prompt them to join in, telling them how good joining in will be and we reassure them that we will help them.”

“Provide adequate staffing levels and one to one activities and encourage residents to participate. Listen at residents meetings to ideas and feedback on actions.”

“All staff in each lounge help out with the residents so they can join in on the activities on that day if they wish to.”

“We help them clap their hands, we dance with residents who can't stand, by holding their hands and they move side to side. They hold musical instruments and they all can sing and watch movies.”

The Manager and Activities Coordinator were asked by the Healthwatch Team how they ensure that residents have the opportunity to continue to take part in their hobbies and interests when living at the home whilst also promoting their wellbeing and independence. They replied;

“Residents are encouraged to continue with activities and hobbies. One to one activities care plans are in place to ensure this.”

“I do one to one support with each resident to do whatever they wish to do, activities wise.”

The Activities Coordinator added how the home meets all the residents' individual needs when delivering activities. They said; “Read the care plan and find out likes and dislikes and work activities around the resident's capabilities.”



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.

When asked about the food at the home, two residents stated that it was OK and the other two gave the following comments;

“Its lovely home cooked food. It makes a change from cooking for myself.”

“Very good. We get two choices at dinner time and sandwiches at supper time.”

Residents added that they are able to get food and drinks in between mealtimes, including tea and biscuits and there is enough choice of things to eat. Two of the residents also stated that if there was nothing they would like to eat they can ask for an alternative to be made, with one giving the following comment; “On a Friday we have fish and chips. It’s not a fish I like so they get me something else instead.”

The Healthwatch Team asked residents if they had a choice of where they eat their meals, those residents who answered this question stated that they do, with two choosing to eat in the dining room and one preferring to eat meals in the lounge area. They all added that they enjoy this time and those residents who visit the dining room said they enjoy sitting with others and chatting.

Relatives were asked what they think of the quality and choice of food at the home. Both relatives responded positively and gave the following comments;

“There always seems to be good choices of home cooked dinners and puddings. There are plenty of snacks and drinks available throughout the day.”





“Very good. We have also had meals with mum in the tea room. These are monthly, with different theme nights.”

The relatives added that they are confident that their family member is supported to eat and drink as much as needed. Comments included;

“My mum is always asked to select from a menu for dinner and tea. She also has a choice for breakfast. There is always water or juice supplied during the day.”

“Very confident, my mum is a very slow eater but the staff are patient with her and try to encourage her to have as much fluid and food as possible.”

Staff were asked what they think about the quality and choice of food at the home. The following responses were received;

“Good.”

“The quality of food is always very nice. There is always a variety to choose from and snacks and smoothies are provided with drinks and cups of tea available at any time of the day.”

“Most of our residents have a choice of meals that are on the menu.”

The Manager added how she ensures high standards of quality and choice of food at the home; “We have a nutrition group that consists of the two Cooks, one Carer, the Manager and residents and we discuss quality of food and choice.”

The Healthwatch Team asked the staff and the Manager how they ensure the residents are able to eat and drink at mealtimes and what provision is made for residents to eat and drink outside of mealtimes. Comments included;

“Staff are always there to give prompts and assistance.”

“There are always snacks and drinks provided outside of mealtimes for the residents.”

The Manager added that all areas of the home have a permanent drinks station.

During the Healthwatch visit the Team witnessed refreshments being served in the downstairs lounge, via the tea trolley. Staff were serving residents hot and cold

Sample food menu							
Dessert	Down Sponge & Custard	Biscuits & Cream	Butterscotch Angel Delight	Rice Pudding & Jam	Syrup Sponge & Custard	Meringue Surprise	Trifle
3pm	Cake, Biscuits or Smoothie						
Supper	Fishcake Waffles & Beans	Pork Curry, Rice Or Chips	Lentil potato & vegetable Soup	Hash Brown, Fried Egg & Tomatos	Cornbeef Beetroot Baby potatoes	Cheese Toast Or Sardines on Toast	Veg Soup, Tuna Mayo & chopped pork Sandwiches
2 nd Choice	Chicken Soup, & Turkey & Stuffing Sandwiches	Leak & Potato Soup, Cheese & Pickle Sandwiches	Chicken Mayo Sandwiches	Oxtail Soup, Assorted Paste Sandwiches	Mushroom Soup, Egg Mayo Sandwiches	Tomato Soup Corned Beef & Beetroot Sandwiches	
Dessert	Cream Scones	Banana & Custard	Chocolate Eclairs	Fruit & Yoghurt	Coconut, Jam Vanilla Slice	Apple Crumble & Custard	Chocolate Gateaux



drinks, milkshakes and biscuits. They were offering options to those residents who could make a choice and engaging in conversation as they went.

Staff went on to tell us about choices residents have about when and where they eat. They stated that residents have a choice to eat meals at the set mealtime or at any other that they choose, as the kitchen is always open. They also have a choice of eating their meals in one of the lounge areas or the dining room but they try and encourage residents to eat and drink together, to help promote socialising. Staff gave the following comments when asked about the ways they try to make mealtimes sociable;

“We chat to residents and ask them if their meal is nice. The residents chat amongst each other. Some of the residents like to sit in their normal seat with the same company but this may change.”

“Beautiful atmosphere and interaction by staff.”

“We sit them together in the tea room, with low music playing in the background. We sit them with different residents on different days.”

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.

Two of the residents were able to inform the Healthwatch Team about visits they receive from Opticians and the GP, the other residents were unable to remember visits, this may have been due to their own individual health and capacity.

One resident explained that they had recently been seen by the Optician and were expecting new glasses in a few weeks. Another resident stated that they felt their





hearing was deteriorating and thought they would benefit from a hearing check. With their permission the Healthwatch Team passed this information on to the Manager who informed they would action this.

Two of the residents spoken to added that should they need to go out of the home to see the GP or attend a hospital appointment the Carers at the home will escort them to their appointment, which they accessed via a taxi.

The relatives informed the Healthwatch Team of the range of healthcare professionals their family member has regular access to. This includes GPs, Nurses, Opticians, Dentists and Chiropodists. One relative also mentioned that the Urgent Care Team are also accessed when required.

When asked about access to health care professionals the staff at Belle Vue reiterated those already mentioned by relatives and added the home also accesses Audiologists. The Manager added that the home is aligned to New City Medical Group GP Practice who carry out visits to the residents and in addition to visits from District Nurses, the Care Home also has support from Care Home Nurses.

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.**

When the Healthwatch Team asked residents if their culture and lifestyle needs are respected and accommodated all residents agreed that they are. Comments received included;

"I am unable to go to church but every month a person from St Ignatius Church comes in. I take part in the service and enjoy it. I have my own Hairdresser who comes into the home every week and staff do my nails and I like them."

"The Hairdresser comes in here, I will be seeing her this week and my daughter paints my nails."

"The Hairdresser I used to use when living at home, comes here every Tuesday afternoon."

The residents were asked what they think of the laundry service and if they get their own clothes back. Three of the residents were able to answer this question one was unable to, this may have been due to their own health and capacity. Those who did answer gave the following responses;

"Laundry is done every day and it's always nice. I do sometimes get other people's clothes."

"It's good. My clothes come back immaculate."



“I’ve lost a few bits of clothes. I recently lost two pairs of jeans. I think they are upstairs, as I’m the only man who wears them.”

One relative respondent stated that their family member doesn’t have any specific lifestyle or dietary needs but they are aware that a priest visits the home on a weekly basis. Whilst the other relatives who took part in the survey process informed that their relative requires a purified diet, which the home caters for. Both relatives mentioned that their family members are able to have their hair cut and styled by the visiting Hairdresser, who comes into the home on a weekly basis. When asked how good are the laundry staff at getting their relatives own clothes back to them, a mixed response was received;

“The laundry staff change so clothes do go missing even with names on. I understand this cannot be avoided due to the amount of laundry that there is.”

“Very good.”

Both relatives added that their family member is always clean and appropriately dressed.

The Manager was asked by the Healthwatch Team how the home finds out about and caters for resident’s lifestyle, cultural, religious and dietary needs. She replied; “On admission we do a robust pre-assessment (within 48 hours). We ensure residents have food preference charts and lifestyle choices and encourage residents and family to have input in life story books.”



When asked to give an example of how the home caters for residents religious and lifestyle needs the staff members replied to say that the home has a service once a month with Father Andrew and the residents are invited to join in. The Activities Coordinator added that some residents go out to church on a Sunday morning.

When asked about the provision for residents to regularly get their hair cut and styled, the Manager informed the home has visits on a weekly basis by a regular Hairdresser. She added that having the same Hairdresser helps to bring continuity to the residents and she has a good understanding of the resident's needs. She added that she ensures that the laundry staff get the resident's own clothes back to them by encouraging residents to have their clothes labelled and an inventory of clothing items is carried out on each resident's admission. The Manager was also asked how she ensures that residents are always clean and appropriately dressed. She replied; "Personal care charts and daily inspections take place. Resident's needs, preferences and assistance needs are noted in care files and adhered to."



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.

None of the residents when asked by the Healthwatch Team stated that there was anything they would like to change about the home and all added that they couldn't remember being asked what they think about the home, with some stating this could be because they have memory issues.



The residents when asked, what they would do if they wanted to make a complaint about the home, all said that they would speak to the Manager. One resident stated they have done this in the past about small issues and they had all been sorted out for them. Another resident added that the home is good, everyone is nice and she wouldn't stay if it wasn't.

Relatives who responded to the survey were asked if they feel welcome participants in the life of the home. Both agreed that they are and added the following comments when feeding back on how they and their relative can have a say in how the home is ran and how they can give feedback;

“The staff and Alison, the Manager, have an open door policy and always take feedback and comments on board.”

“At regular meetings with staff and management.”

Staff and the Manager were asked how residents and their relatives and friends can have a say in how the home is ran. They reiterated what was mentioned by the relative respondents and the Manager added by implementing quality assurance.

When asked for an example of this the Manager said; “Action the examples given by families and residents to bring positive results to our residents.”

The Activities Coordinator was asked how residents, relatives and friends can have a say in what activities are delivered both inside and outside of the home. They said; “The residents and families can request or give me or Alison the Manager ideas and I will look into the possibility of doing those activities.”

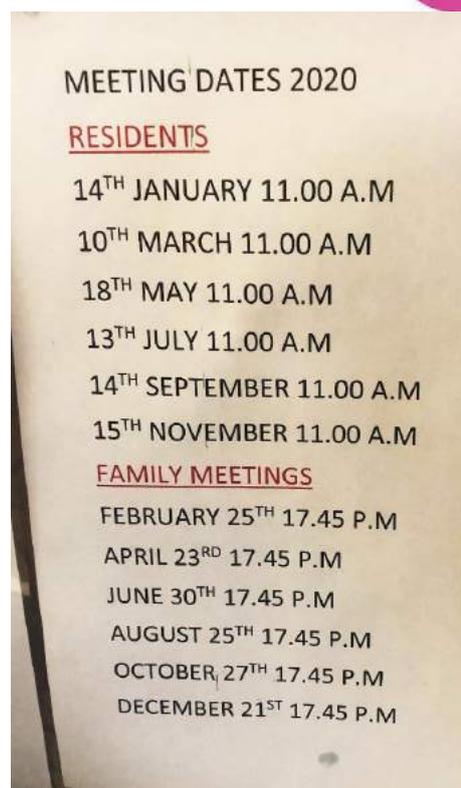
They gave the following response when asked to provide an example of how a resident, their relatives or friends have influenced the provision of a new activity; “When Kalma babies came they used a parachute to move up and down above the babies and the residents enjoyed this and now it is part of our weekly activities.”

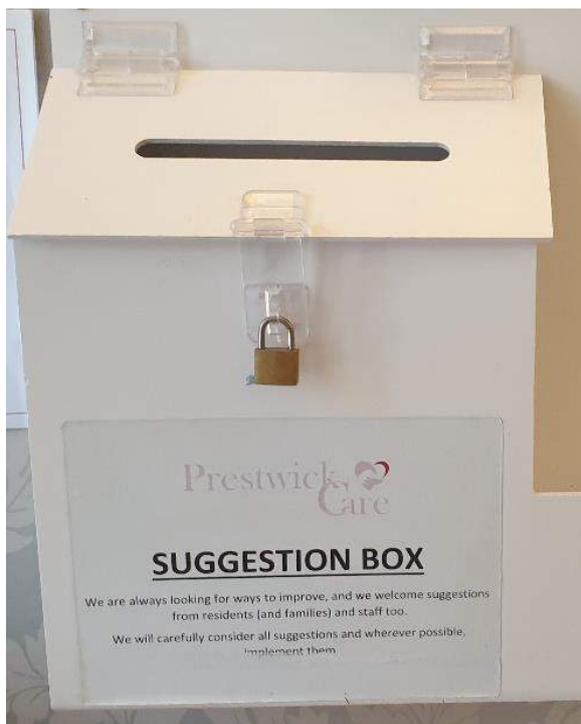
They added that activities provided are evaluated to ensure residents are continuing to enjoy them, by observing them throughout activities and asking residents if they are enjoying them.

Staff were asked by the Healthwatch Team how they can have an input into how the home is ran. One staff member didn't answer this question and others replied with the following responses;

“Staff meetings and there is an open door policy in place.”

“In staff meetings we can have our say. The Manager always listens.”





The Manager, when asked, stated that staff are able to have their say in how the home is ran by having in place staff meetings, daily handovers, flash meetings and supervisions.

She added that the home makes use of feedback or complaints from residents and relatives by putting into action responses where possible to improve the service, quality of life and grant the wishes of the residents.

During the Healthwatch visit the team witnessed a suggestion box that was placed in the foyer of the home and was available for residents, staff and visitors to use.

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 residents were asked if the home is always kept clean and tidy, they all agreed that it is.

When asked about the temperature at Belle Vue, residents were happy with the temperature, with some mentioning that when it becomes too warm they simply open a window or ask the Carers to do it for them.

When asked about the home's environment and whether it is always hygienically clean and tidy both relative respondents stated that it is. One relative gave the following comment; "Excellent. Cleanliness and hygiene is always 100%. The staff work 24/7 to maintain this and keep the home tidy."

One relative added the following comment when asked if the home is always well decorated and well maintained; "No. The home is definitely well maintained. The Handyman is always on hand. Downstairs is kept lovely but the upstairs lounge where





my mam is, is in bad need of decoration. I have viewed my concerns but the owner will not fund it. Although I have been told other homes he owns are first class.”

When staff were asked how the home is made a dementia friendly environment, they explained, they have a sensory room for dementia residents, they run doll therapy and reminiscence sessions. They utilise the appropriate cutlery and yellow coloured crockery, certain doors in the home have alarms or key pads for the resident’s safety and all staff added that they have undergone dementia training.

The Management Team explained that the home is kept at a suitable temperature by checking the temperature in bedrooms and

communal areas which is then recorded.

When asked how they ensure the building and its contents are well maintained and decorated throughout, the Manager gave the following reply: “Maintenance operative is in place and all maintenance requests are checked and signed off by the operative. We also have access to a wide range of tradesmen who are based at Head Office to support the contractors.”

She added the following comment about the ways they ensure the home is always hygienic and clean; “Rotas for Domestic are in place that I sign off after check-ins. I also carry out daily inspections and walk arounds.”

The Healthwatch Team observed during the visit that the home was clean and tidy with no malodours.



Dementia friendly signage



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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