

Care home life, what it's really like!

# Ashlea Lodge Care Home



Date of Healthwatch Sunderland visit:  
22<sup>nd</sup> November 2017



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## **Acknowledgements**

Healthwatch Sunderland would like to acknowledge the support of the residents who allowed us into their home and talked openly and honestly with the team. We would also like to thank those staff members, family and relatives who took time out of their day to answer our questions and give their feedback.



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## 1. Introduction

### What is Healthwatch?

Healthwatch England is the national consumer champion in health and social care. It was set up by the government to ensure that people's views around health and social care services are listened to and fed back to service providers and commissioners with a view to improving services.

There is a local Healthwatch for every Local Authority area in England. Healthwatch Sunderland aims to be a strong local consumer champion working with our partners to support:

- People to shape health and social care delivery
- People to influence the services they receive personally
- People to hold services to account.

We achieve this by:

- Listening to people, especially the most vulnerable, to understand their experiences and what matters most to them
- Influencing those who have the power to change services so that they better meet people's needs now and into the future
- Empowering and informing people to get the most from their health and social care services and encouraging other organisations to do the same.





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## 2. Background and rationale

Independent Age and Healthwatch Camden have recently carried out some initial research into the information currently available on care homes. The results indicated that there is a need to provide qualitative information on care homes that goes beyond basic safety standards. It shows that the information needed by people looking for a suitable care home, should provide a real sense of what a home may be like to live in.

Healthwatch Sunderland have responded to this need and will be carrying out visits to all 47 care homes currently available to older people across Sunderland. The complete results will be published to enable members of the public to make more informed choices when considering which care home to move into for themselves or their relatives.

To enable this, 8 indicators have been devised to be used and will focus specifically on issues of quality, rather than safety, such as how much residents and family can have a say in how the home is run, and whether residents are able to pursue their hobbies etc.

### **The 8 indicators are:**

1. A strong visible management
2. Staff with time and skills to do their jobs
3. Good knowledge of each individual resident and how their needs may be changing
4. A varied programme of activities
5. Quality, choice and flexibility around food and mealtimes
6. Ensuring residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists
7. Accommodate resident's personal, cultural and lifestyle needs
8. Provide an open environment where feedback is actively sought and used.



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### 3. Methodology

An initial pre-visit meeting with the home Manager, Gillian Varley was held at Ashlea Lodge Care Home. This was to explain the reason for the ‘Care home life - What it’s really like!’ visit, to understand the needs of the residents and to arrange a visit that would cause as little disruption as possible.

The ‘Care home life - What it’s really like!’ visit took place on the 22<sup>nd</sup> November 2017 and was carried out by Healthwatch Sunderland staff and volunteers who are trained so that they can effectively capture the resident’s experience.

At the visit residents were asked a range of questions via a set questionnaire (see appendix 1). The questions were constructed to reflect the objectives of the visit. Observations were also made on the physical environment and staff/resident interaction.

Staff and relatives were also given questionnaires to complete (see appendix 2, 3 and 4).

We also ran a facebook campaign asking local people to comment on their experiences of care homes across Sunderland. Any feedback we received was incorporated into the findings.

## 4. Findings - Summary

The Healthwatch team collated the survey findings we gathered from residents, their family and friends, staff and Managers and our observations made during our visit. The findings have been scored against the eight indicators in terms of the degree which they were met, from strongly disagree to strongly agree. A neutral rating indicates both positive and negative feedback, which when averaged results in a neutral score. A summary of this can be found below:

Here is the key which shows the indicator scores



Strongly disagree



Disagree
















Neutral



Agree



Strongly agree

1.	A strong visible management	 Agree		
2.	Staff with time and skills to do their jobs	<table border="0"> <tr> <td>Time  Disagree</td> <td>Skills  Agree</td> </tr> </table>	Time  Disagree	Skills  Agree
Time  Disagree	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	 Strongly Agree		
6.	Regular access to health professionals	 Agree		
7.	Accommodation of resident's personal, cultural and lifestyle needs	 Agree		
8.	An open environment where feedback is actively sought and used	 Agree		





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## Findings

Ashlea Lodge Care Home is a purpose built property located at Hylton Road, Sunderland SR4 7AB, which is a short walk from the city centre. The care home provides residential care for up to 40 older people, over two floors, some of whom are living with dementia.

Rooms are en-suite and the home encourages residents to personalise their own space to ensure their comfort and sense of place and home.

See the latest CQC inspection report here:

<http://www.cqc.org.uk/location/1-2580362025>

At the time of our visit there were 36 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch team were only able to support 5 residents to fully complete the survey. The team received 4 staff and 6 friends and relative surveys back.

The results of these surveys are given below:

### Indicator 1 - A strong visible management

The indicator states that the Manager should be visible within the care home, provide good leadership to staff and have the right experience for the job.

**The Healthwatch team AGREE this was met.**

Some of the residents at Ashlea Lodge had difficulty identifying the Manager but this may have been due to their own individual health or capacity. Others stated that they did know who she is, but didn't know her by name. One resident did know the Manager by name and said "She's good, she takes me to the toilet."

All of the friends and relatives who completed the survey process said they know the Manager and find her to be helpful and friendly.

Two out of the three staff members who completed the survey stated that they feel supported by the Manager of the home. One staff member said "Support is available when required." All three staff members said that they find the Manager to be approachable.

The Manager told us that she has been a care home Manager since 2012 and has held her position at Ashlea Lodge since November 2016. She stated that she likes to make a difference and see smiles on the resident's faces. She added "I like to work with staff who have strengths in different areas."





## 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 a **DISAGREE** rating for staff time and an **AGREE** rating has been given for staff skills.



(Care home entrance)

All but one of the residents said that all of the staff at the home are very good, with some adding that the staff are also caring. One person stated “Some are good and some are bad and don’t care”. Although one resident said that the staff don’t have time to stop and chat, the rest of the residents responded that they do. Here are some of their comments; “They make time to talk, but they are busy” and “They very rarely walk passed without saying hello - both night and day staff.”

The majority of the friends and relatives stated that they feel the staff have both the time and the skills to care for their friends and relatives. One person said “Although the staff have the skills to carry out their duties, they don’t always have the time due to excess clerical work” and another said “Yes, they have the skills, no they don’t have the time - they need more staff.”

From the three staff who completed the survey process, one stated that they work as a domestic at the home and the other two respondents did not answer the question ‘Do you feel you have the time to care for residents?’ All three staff



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members said that training is available to them to develop their skills. We went on to ask them what they enjoy about their jobs, here are their responses;

“I enjoy carrying out my duties to the best of my ability, which enables residents, staff and visitors to feel comfortable and safe.”

“Everything, except the heat.”

“Working alone 99% of the time, too much workload to one person, as there should be two people and I am still expected to do everything that two people would normally do. No time for a lunch break.”

The Manager told us that she encourages staff to progress in their learning by putting them forward for Level 3 Diplomas in Health and Social Care and taking part in training available through the Tyne and Wear Care Alliance, who offer support around workforce development to the care sector in Sunderland.

### **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 we asked the residents if they feel the staff at the home know them and know their likes and dislikes, here are some of their comments we received; “They are starting to build a picture”, “They have a good idea” and “Yes, to an extent.”

All of the friends and relatives told us that they feel the staff at the home know their friends/relative’s life history, personality and health and care needs and notice and respond when their needs change. One relative said “They know her and her little ways very well.”

The Manager and one member of staff informed us that they get to know residents by building a person centred care plan, which are evaluated monthly and updated immediately when there are 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.**

The residents who were supported by the Healthwatch team to complete the survey process stated that there are activities available. The majority said that they weren’t really interested in taking part in the activities. One person said that although they do not like to take part, they do sit and listen to what is going on. Here are some of the additional comments we received from the residents about



the activities at the home; “If it is a music day I will take part” and “They come into my room to play dominoes with me.”

Three of the residents were able to tell the Healthwatch team that they had been out on a trip. All of them told us about an event they had been to which included singing. One resident said “It was a nice day out.”

Friends and relatives spoke positively about the activities at Ashlea Lodge and stated that they their friends/relatives are encouraged and supported to take part.

“There are plenty of activities if the residents wish to join in and take part.”

The Manager and staff informed us that there are a range of activities available within the home, which are promoted on the home’s notice boards. The Manager went on the say that staff are available to assist residents to take part in activity sessions, either group or one to one. She added that Orchard, the company who own the home, have a mini bus which is available for trips outside the home.

## 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.



(Daily menu)



(Dining room entrance)

Residents told the Healthwatch team that prior to mealtimes the chef visits them to ask what they would like from two choices. If neither of the choices suit them, the chef will make them an alternative meal. A couple of the residents told the team that they are never hungry. Here are some of the comments we received about the food at the home “They always ask me if I would like a cooked breakfast, but I like toast and Weetabix, I have that every day.”



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“I enjoy the food and I am a fussy eater.”

All but one of the residents found mealtimes an enjoyable time. One resident stated that they eat their meals in their own room, but the staff ask if they would like to eat in the dining room.

One of the residents highlighted the fact that they get plenty of drinks.

When asked what they think of the quality and choice of food at the home all friends and relatives gave positive comments and added that they feel confident that their friend/relative are supported to eat and drink as much as is needed. All went on to say that they feel mealtimes at Ashlea Lodge are a sociable time.

The Manager told us that staff at the home are utilised to support residents to eat and drink, both at mealtimes and at other times. She went on to say that snacks are available throughout the day. These include; crisps, biscuits and fruit.

One staff member stated that they talk to the residents to ensure that mealtimes are a sociable time. The Manager added that there is ambient music played, the tables are well set, there is a choice of hot and cold drinks too.

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

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

**The Healthwatch team AGREE this was met.**

The residents which the team spoke to stated that they have a range of health professionals visit them at the home. These include, dentists, opticians and GPs. Here are some of their comments; “I had a painful infection and they sent for the doctor for me” and “Every day glasses have been issued since I came into the home and they take me to the doctors when needed.”

All of the friends and relatives stated that healthcare professionals visit the home, either on a regular basis or when there is a need.

The Manager informed the Healthwatch team that ‘Vision Call’ (optician) visit the home at regular scheduled dates throughout the year. None of the staff responded to this question.



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## **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 asked the residents who were supported to complete the surveys gave the Healthwatch team a mixed response as to whether there are any religious visitors to the home. Some said there are regular visitors, others said they didn't know of any visits. One resident told us that a vicar comes to the home now and again, they like to watch Songs of Praise on the TV and that residents can visit St Mark's Church (which is close to the home) if they would like to. One resident added that a hairdresser is available at the home each Thursday for those who wish to get their hair washed/styled.

All of the friends and relatives who completed the surveys stated that their friends/relatives have no specific lifestyle, religious or cultural needs.

The Manager informed us that the home finds out about and caters to a resident's cultural, religious and lifestyle needs by speaking to families, social workers or the resident themselves to build a picture of how best to support these needs, which are then added to the persons care plan. She added that the vicar from St Mark's Church used to visit the home, but hadn't been for some time and that the Activities Co-ordinator is going to chase this up.

One staff member stated that the home follows an equality and diversity policy and procedures.

## **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.**

None of the residents which the Healthwatch team spoke to stated that they get asked what they think of the home, but one resident added "I can't fault it here and my daughters have no worries."

None of the residents stated that there was anything in particular that they would like to change about the home. Here are some of the comments they gave us to this question; "I have no problems what so ever - I don't know how I would have managed by myself."

"I like it and I don't like it."





All of the residents who the Healthwatch team spoke to said that they would either speak to their family, staff or the Manager if they had any reason to make a complaint about the home. One resident added “My daughter knows all the procedures.”

All of the friends and relatives stated that they feel welcome participants in the life of the home. The majority of these respondents said that they are able to give feedback and have their say on how the home is run by either speaking to the staff, Manager or going to meetings. They all added that they know who to contact if they ever need to make a complaint, would feel confident enough to do so and would also be confident that it would be acted upon appropriately.

The Manager and two of the staff members told us that there are regular resident and relative meetings, where there is an opportunity to get involved and offer suggestions for improvements. None of the staff gave an example of how a resident or family member has influenced how the home is run.

One staff member stated that they can have a say on how the home is run at staff meetings. The Manager added that staff supervision sessions are carried out to ensure that the team work together to produce high standards of care and best practice.

The Manager stated that feedback and complaints are used to highlight where improvements can be made.



(One of the communal corridors)



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## 5. Appendices

### Appendix 1 - Questions for residents

1. Do you know the Manager of the home?
2. What do you think of the Manager?
3. What do you think about the staff here?
4. Do the staff have the time to stop and chat with you?
5. Do the staff know what you need and what you like and don't like?
6. What activities are there for you in the home?
7. Is it easy to join in the activities?
8. Do you get a chance to do any of the things you used to enjoy before you came here?
9. Do you go on trips outside?
10. What do you think of the food here?
11. Is there enough choice of what you eat and when you eat?
12. Do you enjoy mealtimes?
13. Have you seen a dentist to check your teeth or an optician to check your eyes recently?
14. Is there respect for your religion or your culture here in your home?
15. Do you get asked what you think about the home?
16. Would you like to change anything about the home? Have you told anyone about this and what happened?
17. What would you do if you wanted to make a complaint about the home?





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## Appendix 2 - Questions for Managers

1. **Have strong, visible management**  
What attracted you to the role of care home manager?  
  
What do you enjoy about the role?
2. **Have staff with time and skills to do their jobs**  
In what ways do you encourage staff to develop their skills?
3. **Have good knowledge of each individual resident and how their needs may be changing**  
How do you ensure that staff get to know a resident's life history, personality and health and care needs when the resident first arrives?  
  
How is information about a resident's tastes and their health and care needs updated as these change?
4. **Offer a varied programme of activities**  
What activities are available for residents inside and outside the home?  
  
What encouragement and assistance do you give to residents so that they can take part in activities?
5. **Offer quality, choice and flexibility around food and mealtimes**  
What systems are in place to support residents to eat and drink at mealtimes and outside of mealtimes?  
  
What choices do residents get about what they eat and drink and when and how they eat and drink?  
  
In what ways do you try to make mealtimes sociable?
6. **Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists**  
Do residents have regular, preventative dental and optometry (eye-care) appointments?
7. **Accommodate residents' personal, cultural and lifestyle needs**  
How does the home find out about and cater to residents' cultural, religious and lifestyle needs? Can you give an example?
8. **Be an open environment where feedback is actively sought and used**  
In what ways can residents and their family have a say in how the home is run?  
  
Are staff able to have a say in how the home is run?  
  
How do you make use of feedback or complaints from residents and relatives?



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## Appendix 3 - Questions for staff

- 1. Have strong, visible management**  
What support do you receive from the manager?  
  
How easy is it to talk to the manager when you want to ask a question or raise an issue?
- 2. Have staff with time and skills to do their jobs**  
Do you feel you have enough time to care for residents?  
  
Are you encouraged to continue to develop your skills? In what ways?  
  
What do you enjoy about your job?
- 3. Have good knowledge of each individual resident and how their needs may be changing**  
How do you ensure that staff get to know a resident's life history, personality and health and care needs when the resident first arrives?  
  
How is information about a resident's tastes and their health and care needs updated as these change?
- 4. Offer a varied programme of activities**  
What activities are available for residents inside and outside the home?  
  
What encouragement and assistance do you give to residents so that they can take part in activities?
- 5. Offer quality, choice and flexibility around food and mealtimes**  
How do you make sure residents are able to eat and drink at mealtimes as well as outside of mealtimes?  
  
What choices do residents get about what they eat and drink and when and how they eat and drink?  
  
In what ways do you try to make mealtimes sociable?
- 6. Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists**  
Do residents have regular, preventative dental and optometry (eye-care) appointments?
- 7. Accommodate residents' personal, cultural and lifestyle needs**  
Can you give an example of how the home caters for religious and cultural needs?
- 8. Be an open environment where feedback is actively sought and used**  
In what ways can residents and their family have a say in how the home is run?  
  
Can you provide an example of how a resident or their family member has influenced how the home is run?  
Do you feel staff can have a say in how the home is run?



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## Appendix 4 - Questions for friends and relatives

1. **Strong visible management**  
Do you know who the Manager of the home is?  
  
Is the Manager friendly and helpful?
2. **Have staff with time and skills to do their jobs**  
Do you think the staff have the time and skills to care for your friend/relative?
3. **Have good knowledge of each individual resident and how their needs may be changing**  
How well do you think the staff know your friend/relative's life history, personality and health and care needs?  
  
Does the home notice and respond when your friends/relative's needs change?
4. **Offer a varied programme of activities**  
What do you think of the activities available for residents inside and outside the home?  
  
Is your friend/relative properly encouraged and supported to take part in the activities?
5. **Offer quality, choice and flexibility around food and mealtimes**  
What do you think of the quality and choice of food?  
  
Are you confident that your friend/relative is supported to eat and drink as much as needed?  
  
Do you think that mealtimes are sociable?
6. **Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists**  
Does a dentist and an optometrist (optician) come to see your friend/relative regularly or only if there is a problem?
7. **Accommodate residents' personal, cultural and lifestyle needs**  
Does your friend/relative have any specific lifestyle or religious or cultural needs? Are these respected and accommodated?
8. **Be an open environment where feedback is actively sought and used**  
Do you feel that you are a welcome participant in the life of the home?  
  
In what ways can you and your friend/relative have a say in how the home is run or give feedback?  
  
Would you know how to make a complaint if you wanted to?  
  
Would you feel confident to make a complaint and do you think it would be acted on appropriately?



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**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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