

Care home life, what it's really like!

## Ashwood Court



Date of Healthwatch Sunderland visit:  
4<sup>th</sup> April 2018





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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, 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, Hayley was held at Ashwood Court. 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 4<sup>th</sup> April 2018 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 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. On this occasion a neutral score also indicates a lack of information received, as a result this has had an effect on the overall rating of the indicators. 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	 Neutral
2.	Staff with time and skills to do their jobs	 Neutral
3.	Good knowledge of each resident and their changing needs	 Neutral
4.	A varied programme of activities	 Neutral
5.	Quality, choice and flexibility around food and mealtimes	 Neutral
6.	Regular access to health professionals	 Neutral
7.	Accommodation of resident's personal, cultural and lifestyle needs	 Neutral
8.	An open environment where feedback is actively sought and used	 Neutral



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## Findings

Ashwood Court Care Home is a purpose-built property, offering nursing and personalised care, covering a range of different dementia types and other related conditions.

There is accommodation for 30 residents in single en-suite rooms.

The home is dementia-friendly, with relevant staff training, signage and activities, allowing residents to live relaxed and dignified lifestyles. There is an Activity Co-ordinator facilitating a range of personal interests and activities.

See the latest CQC inspection report here:

<http://www.cqc.org.uk/location/1-3526844093>

At the time of our visit there were 28 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch team were only able to support 2 residents to fully complete the survey, these people were from the Enduring Mental Health Unit. The team received 1 staff (the administrator - no responses were received from care staff) and 1 relative survey back.

Healthwatch Sunderland invited the Manager of Ashwood Court to complete a survey but she did not respond to the offer, as a result this has had an effect on the overall rating of the indicators.

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 gave this a NEUTRAL rating which indicates both positive and negative feedback, which when averaged results in a neutral score. On this occasion a neutral score also indicates a lack of information received, as a result this has had an effect on the overall rating of the indicators.**

When asked by the Healthwatch team if they knew who the Manager is, residents supported to complete the survey both stated that they did know the Manager by name. When asked what they thought of the Manager, responses included;

“She is alright, she does not spend any time with me to talk because she is so busy. She tells me to go to the team leader if I have any questions.”

“I like the Manager - I chose this home so my mam and dad could come to see me.”

The relative who responded to the survey knew the Manager and described her as pleasant and friendly.

The staff respondent commented; “Hayley is very supportive and encouraging to me, she is very helpful and always ready to listen.”





The Manager was invited to complete a survey but did not respond to the offer, her comments are missing for this indicator which may lead to gaps in the information detailed.



## 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 NEUTRAL rating which indicates both positive and negative feedback, which when averaged results in a neutral score. On this occasion a neutral score also indicates a lack of information received, as a result this has had an effect on the overall rating of the indicators.**

When asked what they think of the staff and do staff have time to stop and chat, the residents said they were well looked after and explained that staff are busy but will stop and chat if they have the time.

One resident explained that he is moving to a new home, he commented that he has been happy at Ashwood Court and thanked the staff for their support.

Another resident commented; "I enjoy living here they are very kind."

The Healthwatch team observed staff having positive interactions with residents, they appeared to know each resident well and addressed them by name.



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When asked if staff have the time and skills to do their job, the relative answered, “Yes they always make time, needs are attended to and staff appear to be knowledgeable.”

The staff member who completed the survey stated that she is always encouraged to develop skills. They commented; “There is nothing I don’t like about my job, I enjoy everything.”

The Manager was invited to complete a survey but did not respond to the offer, her comments are missing for this indicator which may lead to gaps in the information detailed.

### **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 gave this a NEUTRAL rating which indicates both positive and negative feedback, which when averaged results in a neutral score. On this occasion a neutral score also indicates a lack of information received, as a result this has had an effect on the overall rating of the indicators.**

When asked if staff at the home know their needs and what they like and don’t like the two residents who were supported to complete the survey agreed that staff know them well. Their comments included;

“They do know me well and know what I like to wear.”

“Sometimes I like to sleep in and miss breakfast so I have my meals later on.”

The Healthwatch team observed one resident who had his pet dog living with him at the home, staff were attentive to his needs and the dog appeared to be a welcome participant in life at the home.

When asked ‘how well do you think staff know your friend/relative’s life history, personality and health care needs’ a relative commented; “My mother’s life history was discussed on admission, staff appear to have good knowledge and staff will always contact me if my mother has had a GP visit or if there have been any other changes.”

The staff respondent stated that good knowledge of residents and their changing needs is included in care plans.

The Manager was invited to complete a survey but did not respond to the offer, her comments are missing for this indicator which may lead to gaps in the information detailed.



#### **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 gave this a NEUTRAL rating which indicates both positive and negative feedback, which when averaged results in a neutral score. On this occasion a neutral score also indicates a lack of information received, as a result this has had an effect on the overall rating of the indicators.**

When asked about activities at the home, the residents the Healthwatch team supported to complete the survey stated that they enjoy activities including painting, crafts, drawing and it is easy to join in as they are reminded by staff.

Comments included; “There is a new Activities Co-ordinator at the home, she is really good and gives options on the activities we do.”

“I have been on trips to Edinburgh, Liverpool and Blackpool.”



“I go out to art classes and like to draw from memory, I have a music qualification, I like to sing and watch musicals. I also go out with my relatives.”

The resident in question showed the Healthwatch team his art work and gave a rendition of ‘The Lord Is My Shepherd’. When asked about past hobbies and interests, he went on to explain that he still enjoys activities that he always has including; singing, art, music - playing the saxophone and he often has a sing along with other residents at the home.

The remaining resident commented; “I am on a busy schedule and don’t have time to do any hobbies.”

When asked ‘what do you think of activities available for residents inside and outside the home’ the relative who completed the survey commented;

“They have a new Activities Co-ordinator who is doing a really good job and has said she will arrange outings when the weather improves.”

Staff encourage my relative to join in with activities - some group activities, some individual and she still enjoys the interests that she used to as far as possible.”

The staff respondent stated that there are a wide range of activities available at the home including ‘Daily Sparkles’- (this is a reminiscence newspaper with information and ideas including activities for care homes) meals out, trips, the allotment and residents are given as much encouragement as possible to join in.

The Manager was invited to complete a survey but did not respond to the offer, her comments are missing for this indicator which may lead to gaps in the information detailed.





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## 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 gave this a NEUTRAL rating which indicates both positive and negative feedback, which when averaged results in a neutral score. On this occasion a neutral score also indicates a lack of information received, as a result this has had an effect on the overall rating of the indicators.**

When asked about the food at the home, the residents who were supported to complete the survey gave mixed responses including;

“I don’t like most of the meals here, but there are other options, if I don’t like what is on the menu they will make something else.”

“I think the food is very good.”

The residents stated that there is plenty of choice of when and where they eat, saying that sometimes they eat in the dining room, the lounge or in their own room if preferred and they can make themselves drinks at any time.

When asked if they enjoy mealtimes both residents agreed that this is a sociable time, when they sit with friends, then wash their dishes; however one resident explained that he does like to eat alone on some occasions.

The relative respondent stated that the quality and choice of food at the home is good. Staff always support the residents at mealtimes and mealtimes are made sociable by eating in the communal dining room, the staff are friendly and ambient music is played in the background.

The staff respondent commented that food at the home is excellent and there is a wide variety and flexibility around food choice.

The Manager was invited to complete a survey but did not respond to the offer, her comments are missing for this indicator which may lead to gaps in the information detailed.

The Healthwatch team noted that there are several small communal areas in the Enduring Mental Health (EMI) unit, incorporating kitchen, dining and lounge area and residents’ are encouraged to make drinks and cook as part of working towards their independence.



Dining area



Communal Kitchen

### **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 gave this a **NEUTRAL** rating which indicates both positive and negative feedback, which when averaged results in a neutral score. On this occasion a neutral score also indicates a lack of information received, as a result this has had an effect on the overall rating of the indicators.

Both of the residents supported to complete the survey agreed that they do have regular access to health professionals, explaining that they have regular check-ups with dentists and chiropodists. If they need to see a GP or have a hospital appointment a member of staff will arrange this and accompany them if necessary.

One resident commented; “I fell on the ice and needed to attend hospital on a regular basis, staff would call me an ambulance and I would go on my own.”

When asked if residents have regular access to health professionals such as GPs, nurses, dentists, opticians and chiropodists the relative respondent agreed that there is access to all health professionals.

The Manager was invited to complete a survey but did not respond to the offer, her comments are missing for this indicator which may lead to gaps in the information detailed.



## 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 gave this a **NEUTRAL** rating which indicates both positive and negative feedback, which when averaged results in a neutral score. On this occasion a neutral score also indicates a lack of information received, as a result this has had an effect on the overall rating of the indicators.

When asked if residents' cultural, religious and lifestyle needs are met, residents agreed that these needs are met at Ashwood Court.



Resident's comments included;

"I wear my own clothes and the Activities Co-ordinator cuts my hair, the laundry service is good, I am happy with it. They will be having a leaving party at the home for me when I move."

"I was brought up in the Salvation Army, I am religious. A representative from the Salvation Army comes to visit me at the home. I also do my own ironing. I have a stereo, buy LPs and listen to music."

The Healthwatch team observed that residents were clean and appeared to socialise well, a resident stated that if they prefer privacy their wishes are respected.

The relative respondent stated their relative has no specific personal, cultural and lifestyle needs. They went on to say that their relative's hair is cut and styled as



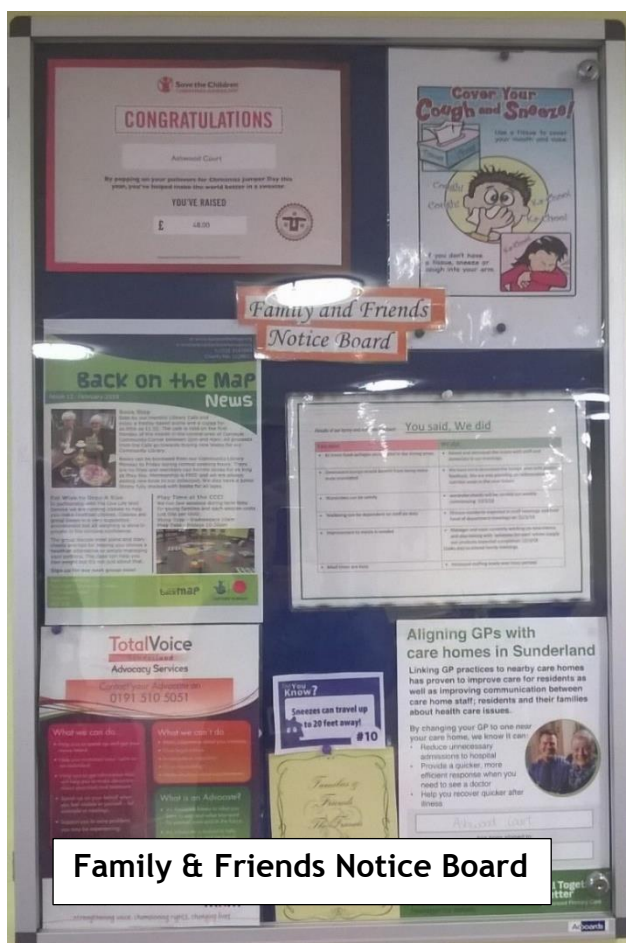
often as required, they have not had any issues with the laundry service at the home and their relative is always clean and appropriately dressed.

The Manager was invited to complete a survey but did not respond to the offer, her comments are missing for this indicator which may lead to gaps in the information detailed.

## 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 gave this a **NEUTRAL** rating which indicates both positive and negative feedback, which when averaged results in a neutral score. On this occasion a neutral score also indicates a lack of information received, as a result this has had an effect on the overall rating of the indicators.



The Healthwatch team asked residents if they are happy at the home and if anyone asks if they are happy; both residents who were supported to complete the survey stated that they are happy at the home. One resident stated that the Manager, Hayley asks if he is happy and another resident commented;

“When they do my care plan they ask if I am OK, well or unwell.”

When asked if they would like to change anything about the home, the residents who were supported to complete the survey said;

“I would not change anything, I am happy here. I am very contented it is a good regime.”

“I would like to spend more time with staff but they are always too busy writing notes and on the computer.”





When asked by the Healthwatch team if they knew what to do if they wanted to make a complaint about the home, both residents agreed that they would. Comments included;

“I would go to the team leader, or if I wanted to see the Manager I would ask the administrator in private.”

“I would see a member of staff, I am very well versed and know what to do, I am well educated.”

The relative who responded to the survey said that they do feel a welcome participant in life at the home, that they and their relative have a say in how the home is run by attending residents and relatives meetings and by talking to staff. They would make a complaint via the Manager or nurse and would be confident that the complaint would be acted upon appropriately.

The staff respondent commented; “Residents and their family and friends have a say in how the home is run by attending regular meetings. The Manager has an open door policy, inviting families to come in and say what they like. Staff can have a say in how the home is run by attending regular meetings, Hayley is very approachable to new ideas or to how things can be improved.”

The Manager was invited to complete a survey but did not respond to the offer, her comments are missing for this indicator which may lead to gaps in the information detailed.



One of the decorated corridors in the home



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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. What activities are there outside the home?
8. Is it easy to join in the activities?
9. Do you get a chance to do any of the things you used to enjoy before you came here?
10. What do you think of the food here?
11. Is there enough choice of what you eat and when you eat?
12. Do you enjoy mealtimes?
13. Have you seen a dentist to check your teeth or an optician to check your eyes recently?
14. What happens if you need to see a doctor or have an appointment at the hospital?
15. Is there respect for your religion or your culture here in your home?
16. Do you get asked what you think about the home or if you are happy?
17. Would you like to change anything about the home? Have you told anyone about this and what happened?
18. What would you do if you wanted to make a complaint about the home?



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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?  
  
How do you encourage staff to develop their skills?
3. **Have good knowledge of each individual resident and how their needs may be changing**  
How do you ensure that staff get to know a resident's life history, personality and health and care needs when the resident first arrives?  
  
How is information about a resident's tastes and their health and care needs updated as these change?
4. **Offer a varied programme of activities**  
What activities are available for residents inside and outside the home?  
  
What encouragement and assistance do you give to residents so that they can take part in activities?  
  
How do you support residents to continue to do the things they used to enjoy before coming into the home i.e. hobbies/interests/pets
5. **Offer quality, choice and flexibility around food and mealtimes**  
What systems are in place to support residents to eat and drink at mealtimes and outside of mealtimes?  
  
What choices do residents get about what they eat and drink and when and how they eat and drink?  
  
In what ways do you try to make mealtimes sociable?
6. **Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists**  
Please tell us about visits from health professionals such as GPs, nurses, dentists, opticians, chiropodists or other health care support mechanisms.
7. **Accommodate residents' personal, cultural and lifestyle needs**  
How does the home find out about and cater to residents' cultural, religious and lifestyle needs? Can you give an example?  
  
What provision is there for residents to regularly get their hair cut/styled?  
  
How do you ensure that the laundry staff getting the residents own clothes back to them?  
  
What mechanisms are in place to ensure that residents are always clean and appropriately dressed?
8. **Be an open environment where feedback is actively sought and used**  
In what ways can residents and their family have a say in how the home is run?  
  
Are staff able to have a say in how the home is run?  
  
How do you make use of feedback or complaints from residents and relatives?



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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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