

Care home life, what it's really like!

Belle Vue House



Date of Healthwatch Sunderland visit:
9th October 2018





Distribution List:

Belle Vue House - Christine Scott, Manager

Malhotra Care Homes (Sunderland) Limited - Devinder Mohan Malhorta, Director

MP Sunderland Central - Julie Elliott

Local Councillors for Hendon Ward

Councillor Barbara McClennan

Councillor Michael Mordey

Councillor Victoria O'Neil

Care Quality Commission - enquiries@cqc.org.uk

Healthwatch England - Katie Johnson, Development Officer

Sunderland Clinical Commissioning Group:

Dr Ian Pattison, Clinical Chair

David Gallagher, Chief Officer

Janet Farline, Clinical Quality Officer

Aileen Sullivan, Lay Member Patient and Public Involvement

Anna Davidson, Safeguarding & Quality Admin Support Officer

Sunderland Local Authority

Councillor Graeme Miller, Leader of the Council

Graham King, Head of Commissioning

Anne Fairhurst, Commissioning Specialist

Fiona Brown, Executive Director of Adult Services

Health and Wellbeing Board

Councillor Dr. Geoffrey A. Walker, Portfolio Holder for Health & Social Care

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

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

Sunderland Care Alliance - Angela Richardson, Network Development Officer

HealthNet Sunderland - Gillian McDonough, Chief Officer of VCAS

Sunderland Echo - Joy Yates, Editorial Director

Age UK Sunderland - Tracy Buck, Director

Independent Age - Catherine Seymour, Policy and Research Manager

Sunderland Alzheimers Society - Helen Williams & Penny Easton

Action on Dementia Sunderland - Ernie Thompson, Chairman

Sunderland Carers Centre - Graham Burt, Chief Executive Officer

Essence Service - Anthony Gonzales, Service Manager

Total Voice Sunderland – Niall Salmon, Managing Advocate

Acknowledgements

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



Table of Contents

1. Introduction	3
2. Background and rationale	4
3. Methodology	5
4. Findings - Summary.....	6
5. Appendices.....	21
Appendix 1 - Questions for residents	21
Appendix 2 - Questions for Managers	22
Appendix 3 - Questions for care staff.....	23
Appendix 4 - Questions for Activities Coordinator.....	24
Appendix 5 - Questions for Friends and Relatives	25



1. Introduction

What is Healthwatch?

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

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

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

We achieve this by:

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





2. Background and rationale

Research carried out in 2016 highlighted that there is a need to provide qualitative information on care homes which goes beyond basic safety standards. It shows that the information needed by people looking for a suitable care home should provide a real sense of what a home may be like to live in.

Since 2017 Healthwatch Sunderland has responded to this need and began carrying out visits to all care homes currently available to older people across Sunderland. The aim is that these visits will be carried out on an annual basis to ensure the findings are current and up to date.

To enable members of the public to make more informed choices when considering which care home to move into for themselves or their relatives, the complete results are available via our website, where you will also find a promotional video which will explain the work fully: www.healthwatchesunderland.com Professionals and members of the public are also welcome to contact us if they need further information or access to the reports in other formats.

The work is based on 9 indicators which focus specifically on issues of quality, such as how much residents and family can have a say in how the home is run, and whether residents are able to pursue their hobbies etc.

The 9 indicators are:

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



3. Methodology

The ‘Care home life - What it’s really like!’ visit took place on the Thursday 4th October 2018 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 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	<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">  Time Neutral </div> <div style="text-align: center;">  Skills Agree </div> </div>
3.	Good knowledge of each resident and their changing needs	 Strongly agree
4.	A varied programme of activities	 Strongly agree
5.	Quality, choice and flexibility around food and mealtimes	 Agree
6.	Regular access to health professionals	 Agree
7.	Accommodation of resident's personal, cultural and lifestyle needs	 Strongly agree
8.	An open environment where feedback is actively sought and used	 Strongly agree
9.	Provide a physical environment which is suitable for the needs of the residents	 Agree



Findings

Belle Vue House is a converted domestic residence located on Gray Road, Sunderland SR2 8JB, which is a short walk from the city centre. The home is run by Malhotra Care Homes (Sunderland) Limited.

The home is registered for people over 65 years of age and provides residential accommodation for up to 27 people who have dementia or general care needs. It is based over three floors and eight rooms have ensuite facilities. There are three rooms which can accommodate couples with consent from by The Care Quality Commission (CQC).

Residents are encouraged to personalise their rooms with the help of family members, as it is very important for people to have familiar things around them. Pets may be allowed following risk assessments and consultation with Managers. There are three lounge areas and one dining room located on the ground and first floors and a small garden with seating is located to the front of the property.

There is a varied programme of activities at Belle Vue House, both inside and outside of the home. The Deputy Manager and one carer take the main responsibility for organising activities and events, however, all staff are involved in providing activities.

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

See the latest CQC inspection report here:
<https://www.cqc.org.uk/location/1-965550712>

At the time of our visit there were 26 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch team were only able to support six residents to fully complete the survey. The team received two management, ten staff and seven relative surveys back.

The results of these surveys are given below:

Indicator 1 - A strong visible management

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

When asked if they knew the Manager, some residents were unable to name the Manager but did know her by sight. This may have been due to their own individual health or capacity. Residents who recognised the Manager gave comments including;

“She is very good.”

“She is great, very kind and easy to speak to.”



“She is hard to approach but alright at times.”

All relatives who responded to the survey knew the Manager by name and gave positive comments, including;

“Christine is very approachable, ready to discuss and keep us up to date with how our mother is coping in the care home. Even though she is very busy she always makes time for us.”



Dining area

“The Manager is always willing to help and considers the best interest of the residents, very approachable and has a duty of care which her and her staff follow.”

All staff who completed the survey agreed that they receive the utmost support from their Manager, describing her as very approachable, understanding and easy to talk to. Any concerns or issues are talked through and resolved with her guidance and reassurance.

Staff comments included; “The support I have from my Manager is much appreciated. I have great respect for her as my Manager - I respect her and she respects me.”

The Deputy Manager commented, “I get lots of support, in my role I have responsibilities for medication and junior staff. I can always rely on my Manager if I am struggling with anything. I find her very approachable and easy to talk to, she will always find the time to help me and answer questions.”

When we asked the Manager of Belle Vue House what attracted her to her role, Christine told the Healthwatch team that she wants to make a difference to people and ensure residents lives are as happy as possible, also to promote a positive happy experience of 24 hour care.

The Manager informed the Healthwatch team that she enjoys being able to support people, seeing residents happy and their quality of life improving when they move into Belle Vue House. Seeing family members become less stressed as they watch their relatives settle into a happy environment. The Deputy Manager commented; “I have progressed through the home from carer, team leader to Deputy Manager, which has given me excellent links and knowledge to do my job. I enjoy the challenge, meeting people, the responsibility and making a difference to residents



and staff. I also enjoy seeing residents happy and knowing I have made a difference.”

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

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

The Healthwatch team gave staff time a NEUTRAL rating which indicates both positive and negative feedback, which when averaged results in a neutral score. The team gave a score of AGREE for staff skills.

The Healthwatch team observed that during the visit staff seemed to know residents well and used their names in conversation. Staff were reading to and conversing with residents, they were also playing games including ‘Connect 4’.

All Residents who engaged with the Healthwatch team gave positive comments around staff at the home, including;

“They are very good and very efficient.”

“They do make time to chat.”

“They are lovely - plenty of tea and biscuits.”

The majority of relatives stated that there is always plenty of staff on duty, they have time to spend with residents, they are caring and supportive of both residents and their relatives and friends. Comments included;

“Staff are lovely, they treat my mam the way they would treat their own mother.”

“Sometimes it can be difficult as there may only be one member of staff in the upstairs lounge and a couple of residents can be extremely demanding.”

All relatives agreed that staff do have the skills to care for their relatives, comments included, “Staff seem to be well trained and very knowledgeable.”

“Staff are very professional and able to adapt to residents’ concerns.”

“I am sure they are well trained and have continual updates to training and care.”

Staff who completed the survey gave mixed responses when asked if they have enough time to care for residents. Some said that they do have the time to care for residents, however, some respondents commented that due to fluctuations in the number of staff on duty at a given time this can prove to be difficult.

Staff responses included; “Yes, I have enough time to care for residents. We try to give them as much of our time as possible, their care is important.”



“Sometimes yes and sometimes no, because if staff are ill and cannot come in for their shift, it can be difficult at times.”



Home award certificates

“Some residents need more support than others, it can be quite demanding but we work as a team and do what’s needed”.

On visiting the home, the Healthwatch team observed staff interacting with residents in a kind, caring and cheerful way. This was affirmed by staff responses to the survey that they enjoyed their jobs at the home. Comments included;

“I enjoy the care part of my job. Talking to residents and seeing them happy makes my job so worthwhile. Seeing residents laugh and sing in their own way is just magical!”

“I enjoy everything about my job, from coming in to going home. I work in a very welcoming home with lots of residents. The residents are very nice, some may be challenging but that is all part of my job.”

“I love caring for residents and doing activities with them to help their day along.”

When we asked what ways are staff encouraged to develop their skills the Manager stated that all staff are encouraged to develop skills through National Vocational Qualifications (NVQ) by allocating ‘champion’ roles including, dignity, dementia, end of life and infection control lead. Commenting that “This gives staff responsibility and a pride in their role.”

All but one staff member agreed that they are encouraged to develop their skills, this is achieved by undertaking training including NVQ’s. One staff member did not answer this question.

The Deputy Manager said; “By discussing resident’s needs and how they can be supported, if staff have the right skills - personal development.”

Management stated they ensure that staff have enough time to care for residents by ensuring there is a high staff to resident ratio, currently it is 4-1. It is very important that staff enjoy their roles, this can be attained by spending time with



residents. Rotas are planned around resident's needs which can frequently change.

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.

The Healthwatch team observed that staff were attentive to resident's needs, seemed to know each individual very well and addressed them by name.

When asked, all residents who engaged with the Healthwatch team agreed that staff know them and their likes and dislikes very well.

Resident's comments included;

"They all know my needs and what I like to wear."

"Yes they know me and I have managed to continue a normal lifestyle."

All relatives who completed the survey process agreed that staff have good knowledge of the changing needs of their relatives and that the staff notice and respond to changes in those needs.

Relative's comments included; "Staff are quick to know needs, characteristics and quirks. They are observant and mindful and respond to changing needs."

"They do let family know of changes and explain thoroughly."

"We were asked to complete a booklet about my mother's history etc. and yes they do respond to her changing needs. The staff inform us of changes when we visit and they will telephone us with any major concerns."

"They know a lot about my mam, they will always listen. They notice changes and respond well."

"The staff know my mam very well and they can all tell if she is not herself. Staff are very good at picking up any problems and dealing with them promptly, they let me know about any changes by telephone or when I visit."

Staff informed that good knowledge of residents and their changing needs is accomplished by the use of individual care plans to inform on personal needs, life history, likes and dislikes. They learn as much as possible at updates during monthly meetings and by entering into conversations with residents, their relatives and friends. Staff adhere to care plans, update as and when necessary with any changes including changes in illness or mood. For example some residents have difficulty swallowing, the Speech and Language Team (SALT) team will make an assessment and diet requirements will be altered according to needs. The kitchen staff will then be updated on those dietary needs.

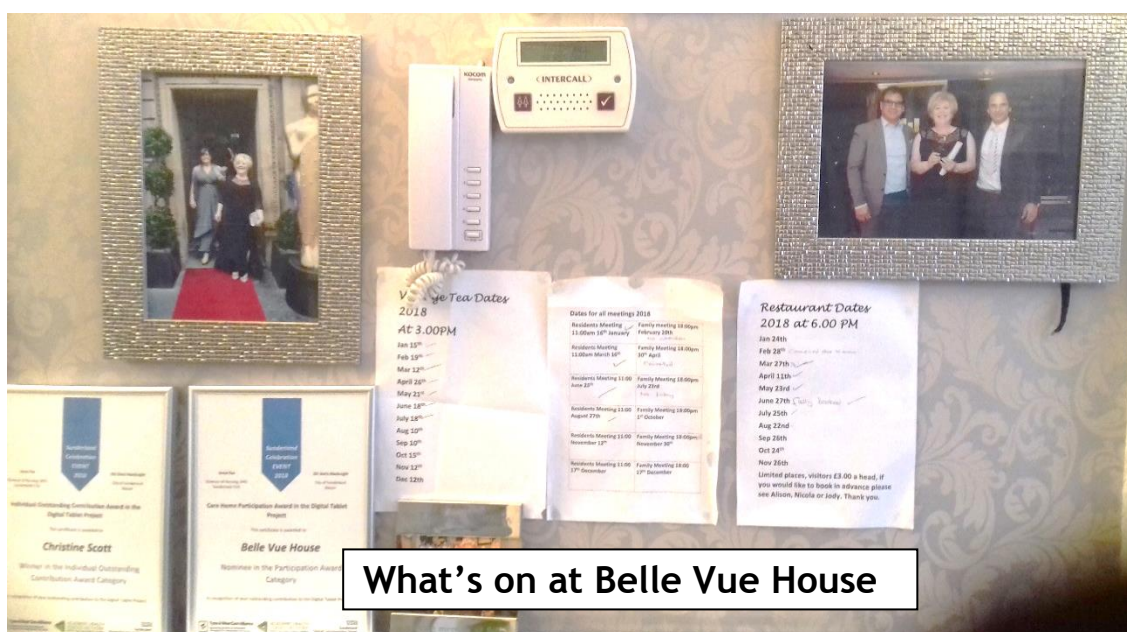


Staff comments included; “By reading individual care plans which tell us everything we need to know about our residents.”

“Handovers are updated daily with any changes to resident’s needs.”

“We check over the care plan and see the Manager if anything has changed.”

Both the Manager and Deputy Manager informed the Healthwatch Team that when a resident first moves into the home a pre-assessment and a social work assessment is completed, information is gathered from family and wherever possible the resident themselves. Care files are updated monthly or immediately if specific needs change, changes are communicated at staff handover or staff meetings. A care plan audit is in place to assure this.



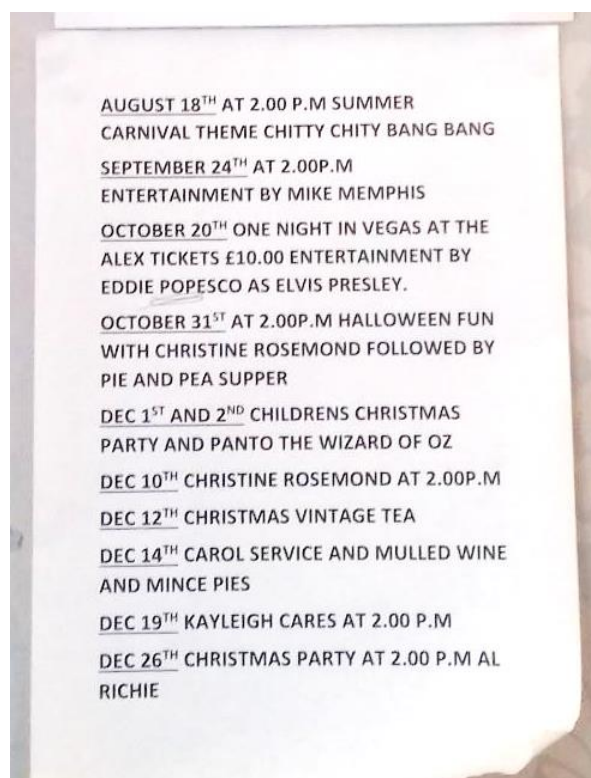
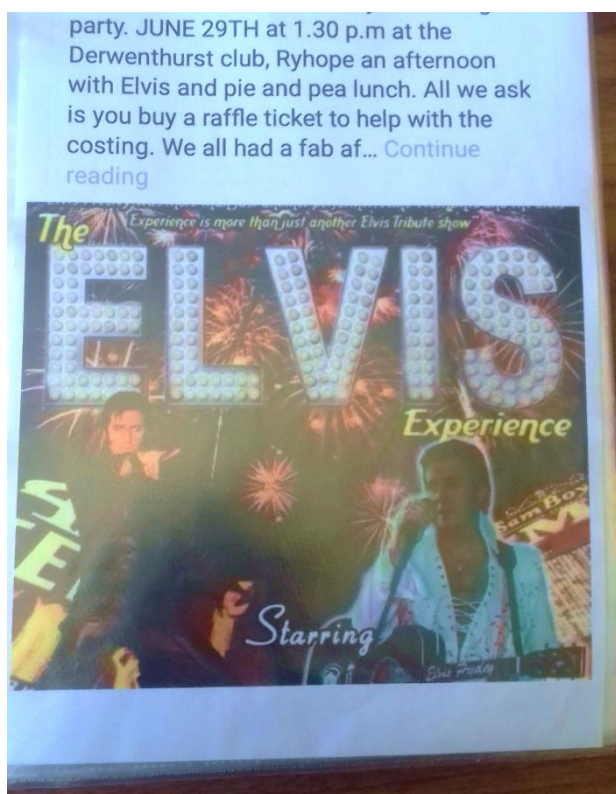
Indicator 4 - A varied programme of activities

The indicator states that care homes should provide a wide range of activities (and ensure residents access these) in the home and support residents in taking part in activities outside the home.

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

The Healthwatch team observed staff sitting with residents, reading to them, playing card games and Connect 4 whilst ambient music played in the background. There was a calm, homely and welcoming atmosphere in the home.

All residents who engaged with the survey agreed that there is a regular and varied programme of activities. Activities include singers, dancing, bingo, and card games and it is easy to take part. One resident informed us that he would like an exercise class, other residents told us that they enjoy sitting in the window seats and when the weather is good they sit in the garden and watch the world go by.



When relatives were asked what they think of the activities available for residents they all responded favourably, agreeing that there are numerous activities on offer both inside and outside of the home, including; singalong, dancing, bingo and that relatives are also encouraged to also take part.

Comments from relatives included;

“Activities are very good, my mother is encouraged to join in. She has even been dancing which she hasn’t done for years. (She used to be a dancer when she was younger). My mother’s quality of life has much improved since she went to live at the home.”

“Activities are outstanding, in house and outside events, lots of parties.”

“There are a lot of activities on offer, however, they are not always suitable for my mother who gets left out at times.”

“My mam is asked to all activities. Mam continues to enjoy music and singing.”

Management and staff who engaged with the survey process gave a list of activities which are available to residents inside the home; entertainers, vintage



tea days, sweet shop, bingo, board games, colouring books, jigsaws, playing cards, dominos, sensory equipment, TV, pool table, karaoke and DVDs.

Outside activities provided include numerous outings, including a monthly outing to Derwenthurst Club at Ryhope, which includes a buffet and provides links to the wider community and other care homes. Monthly restaurant nights, day trips to Butterfly World, Beamish and Tall Ships, town visits and a twice yearly fundraiser at Alexandra Pub and many others.

Management and staff informed us that residents are encouraged and supported to join in with activities and social events. This is accomplished by sitting with residents, helping them to participate with playing bingo and card games and making sure they have fun!

Residents are supported to continue their previous hobbies and interests with support from staff, including swimming, painting, organ recitals, shopping trips, knitting and other pursuits.

Staff comments included; “We encourage all of our residents. We help them to join in, we sing with them, help them to stand, hold their hands and dance with them.”

“We always encourage our residents to take part, we explain what we will be doing or where we will be going. There are some who do not want to join in at that time so we try and encourage them with something else.”

“We try to encourage all residents to take part in activities for the benefit of social stimulation.”

Indicator 5 - Quality, choice and flexibility around food and mealtimes

The indicator states that care homes should offer a good range of meal choices and adequate support to help residents who may struggle to eat and drink including between mealtimes. The social nature of eating should be reflected in how homes organise their dining rooms and accommodate different preferences around mealtimes.

The Healthwatch team AGREE this was met.

The Healthwatch team observed as staff offered refreshments and a choice of biscuits and snacks to residents and ensured that they were within easy reach.

When asked about food at the home, resident’s comments ranged from excellent to OK. One resident remarked “Food is very good, plenty of choice, if I don’t like it they will make me something else.”

All residents said they eat in the dining room and that it is a sociable time with lots of talking and good company.



All relatives responded positively about the quality, choice and flexibility around food and mealtimes. Relatives reported that staff are always available to offer assistance at mealtimes and support as and when needed, thus ensuring residents eat and drink as much as they need. Mealtimes are social occasions, where residents and staff converse together. Ambient music is played in the background.

Comments from relatives included; “There is a good variety of food, well made and enjoyable, she eats well, but does need to be cajoled at times. There is good interaction with staff.”

“My mam has a special diet and is always given a good choice and appetising meals. I know she is given help when needed, but staff encourage her to be independent. I see residents and staff chatting and laughing together - lots of banter! Staff encourage conversation, sometimes there is gentle music playing.”



Vintage dining room

Staff were asked about their views of both the quality and choice of the food provided at the home, they answered that there is always a choice of two meals, but residents can pick an alternative if there is nothing to their liking.

One staff member stated that breakfast and lunch options are normally good, however, teatimes can be poorly presented and not much thought put into meal ideas, also more home baking should be provided!

The Manager informed that the home does not operate protected mealtimes. Management and staff informed that assistance is offered to those who need support to eat and drink. Food and drinks are available on request and all lounges have drinks stations. Residents are encouraged to eat in the dining room as this makes for a sociable time with soft music and conversation with other residents and staff. However, they may choose to eat in the lounge or their own room, some



residents find it difficult to sit on dining chairs and residents who prefer to eat in private, as is their individual choice. Dining experience care plans are in place. Management told us that regular audits and surveys are undertaken around choice, quality and standards, the home also operates a nutrition group involving residents, care staff and kitchen staff.

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 AGREE this was met.

The majority of residents the Healthwatch team spoke with agreed that the home has regular visits from healthcare professionals, including opticians, dentists and audiologists. GPs are contacted as and when needed, staff will accompany residents to GP and hospital appointments if necessary.

Relatives reported that they are very happy with healthcare at the home. GPs visit as and when needed, chiropodists, dentists, nurses and other health professionals are also in attendance.

Comments from relatives included;

“Very good, all needs catered for. I am satisfied.”

“Excellent, my mam recently changed her GP as the Manager suggested a different practice may be more attentive to her needs.”

“Mother sees the chiropodist, has had the Urgent Care Team out twice when the home had concerns. Other professionals also make visits.”

Management and staff reported that residents have regular visits from health professionals, including; monthly visits from chiropodist, regular visits from opticians, GPs, nurses and dentists to ensure that resident’s health care needs are fully met. Appointments are made on behalf of residents for those in need of an audiology examination and they will be accompanied by family or a staff member.

The Management team advised that there are regular visits from the Care Home Liaison Team to ensure care plans are valid and to monitor health. The home is aligned with New City Medical Centre for the majority of residents, but others have chosen to stay with their own GP. Dieticians and Speech and Language Therapy Team (SALT) team visit as requested.



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

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

During our visit the Healthwatch Sunderland team observed that residents were very clean, well presented and their clothes were well laundered. Gentleman were shaven and all residents' hair was clean and well kept.



Residents said they would like to go to church services if possible but need to be supported to attend. One resident commented that a representative from a local church makes visits to the home.

Some relatives reported that their relatives have no current specific lifestyle, religious or cultural needs. Two reported that should such needs arise they are sure they would be accommodated as residents are treated as individuals. One relative commented that residents' choices and wishes are respected.

The majority of relatives stated that a hairdresser visits the home on a weekly basis, one relative informed that her mother is supported by staff to go to her hair salon every week. All agreed that the laundry service is very good and that residents are always appropriately dressed.

Comments included "Very good service, always dressed lovely!"

"My relative is looked after very well, the standard of care is very high".

Management, staff and residents agreed that a hairdresser visits the home. Most residents agreed that that the laundry service is good.

Management informed us that residents' clothes are clearly identified with name tags. An inventory is completed on admission and new garments are added.



Mechanisms are in place to assure residents are always clean and appropriately dressed including, personal hygiene charts, preferences on attire, make up, jewellery, perfume, shaving preferences etc. Also, Managers and team leaders monitor residents' appearance.

Management and staff informed the Healthwatch Team that the home has a monthly church service where residents can receive Holy Communion if they wish. Some residents go out to church services with family members. Other religious representatives also make visits to the home to attend to residents spiritual needs. Cultural, religious and vegetarian dietary requirements are also accommodated at Belle Vue House.

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.

Most residents who participated in the survey agreed that they are happy at the home and that they are asked 'How are you today?' by staff.

One resident said; "They do not need to ask me if I am happy - they would ask if I did not look right!"

When asked if there is anything residents' would like to change about the home, most residents who participated in the survey stated that they are happy and there is nothing they would like to change.

All relatives who completed the survey said that they are a welcome participant in life at the home, that residents and their relatives can and do have a say in how the home is run. Examples included speaking with the Manager or staff, completing questionnaires or attending meetings. All but one agreed that they would contact the Manager or staff with a complaint and were very confident that it would be acted upon appropriately.

One relative commented; "I do not know who to approach with a complaint ...perhaps social worker, but I am confident it would be acted on appropriately."

Management and staff informed the Healthwatch team that there are regular residents and relatives meetings at Belle Vue House. Residents had asked for a vintage tea room at the home through 'You Say, We Did!' Once a month the vintage tea room hosts a restaurant night for residents and their relatives as some residents felt they could not manage to go out to a restaurant. Meal bookings are taken and meals are served by staff. Also residents have asked for a bar and a juke box - this will be actioned soon!



Suggestion box found in home foyer

Staff comments include; “We have a monthly staff meeting to voice our opinions on the home and the residents.”

“We all have ideas to make our home run smoothly, we all work as a team and respect the residents, staff and family views on the home.”

Management comments included; “There are residents and family meetings and an open door policy to the Management office to offer feedback or complaints from residents and their relatives. A six monthly survey is undertaken and results calibrated with an action plan. Staff have a say in how the home is run at staff meetings, staff surveys and supervision.

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.

All of the residents who engaged with the survey agreed that the home is always clean and tidy. One resident commented that it is ‘immaculate’.

When asked about the temperature at the home, residents gave a mixed response. Some residents were happy with the temperature, however, some said it was cold and they wore extra clothes to keep warm. One resident commented; “I was cold this morning but I am warm now that I have put my jumper on.”

All relatives agreed that the home is kept at a comfortable temperature, is hygienically clean, tidy and sweet smelling, well decorated and well maintained. All but one respondent agreed that the home is a dementia friendly environment with two respondents saying that signs around the home help. However, one relative commented that there could be more specialist equipment or motivation.

Comments from relatives included; “The home is always at a comfortable temperature, is spotlessly clean, never any odours and is very tastefully decorated.”



“Excellent hygiene, Barbara, Jill and Jennifer provide a fantastic service. Regarding maintenance and decoration of the home - Brian is always pottering about and is very friendly.”



When staff were asked how the home is made dementia friendly they informed us that there are lots of dementia activities and apparatus. There is a sensory room with lights, water lights and projectors which residents seem to find relaxing.

Staff comments included; “In the upstairs lounge we have activities for residents with dementia, we have a projector showing various scenes including fish in the sea which is very relaxing for residents who may feel anxious or unsettled.”

“Floors are not patterned, no bright colours and the use of sensory objects.”

“We have sensory lights upstairs and also a lot of entertainment, activities such as board games and singalongs. We also have cutlery for those with dementia so food can be seen much better.”

The Management team advised that they ensure the environment at the home is suitable for the needs of the residents by completing temperature checks, water temperature checks, and regular heating system service. The home has an in house maintenance operative and head office has a vast maintenance department.

The home is kept hygienic through the use of cleaning rotas, room and communal area checks and Managers audit.



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.

© Healthwatch Sunderland 2018

Healthwatch Sunderland
Hope Street Xchange
Sunderland
SR1 3QD



Tele: 0191 514 7145

Email: healthwatchesunderland@pcp.uk.net

Web: www.healthwatchesunderland.com