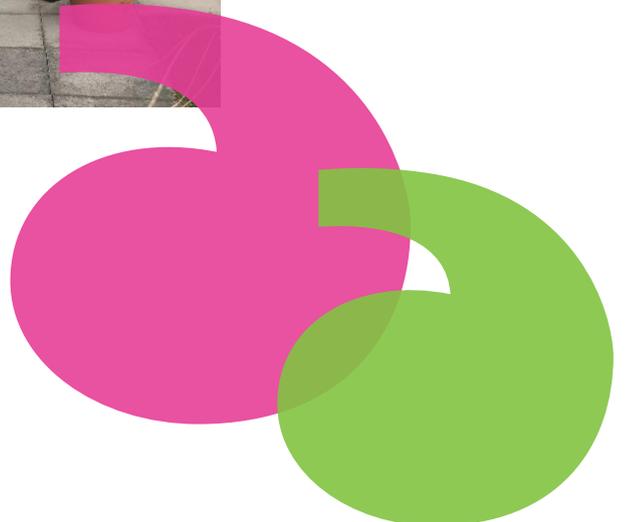


Care home life, what it's really like!

Maple Lodge



Date of Healthwatch Sunderland visit:
21st February 2019





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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 Sunderland?

Healthwatch Sunderland is the independent local champion for people who use health and social care services. We're here to make sure that those running services put people at the heart of care.

By speaking to Sunderland residents we aim to understand their needs, experiences and concerns of accessing and using local health and social care services. We can then speak out on their behalf to local service providers, focusing on people's concerns about current services and ensuring they are listened to and addressed by those who are running services.

We encourage and work with local services to involve Sunderland residents in the changes to health and social care provision. The ultimate aim is to get things right for the future, with health and social care services which meet the needs of the local community.



*We champion what matters to you and
work with others
to find ideas that work.*

*We are independent and committed to
making the
biggest difference to you.*





2. Background and rationale

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

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

To enable members of the public to make more informed choices when considering which care home to move into for themselves or their relatives, the complete results are available via our website, where you will also find a promotional video which will explain the work fully: www.healthwatchesunderland.com.

Professionals and members of the public are also welcome to contact us if they need further information or access to the reports in other formats.

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

The 9 indicators are:

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



3. Methodology

The ‘Care home life - What it’s really like!’ visit took place on the 21st February 2019 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	Time  Agree Skills  Strongly agree
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	 Strongly agree
6.	Regular access to health professionals	 Strongly agree
7.	Accommodation of resident's personal, cultural and lifestyle needs	 Agree
8.	An open environment where feedback is actively sought and used	 Strongly agree
9.	Provide a physical environment which is suitable for the needs of the residents	 Strongly agree



Findings

Maple Lodge Care Home is a purpose built home, located at:

Woolwich Road
Witherwack
Sunderland
SR5 5SF

Telephone: 0191 283 7621

Provider: Four Seasons Health Care

Provider's Website: <https://www.fshc.co.uk/maple-lodge-care-home/>

Provider's Facebook: <https://www.facebook.com/FourSeasonsHealthCare/>

See the latest CQC inspection report here:

<https://www.cqc.org.uk/location/1-128584655/contact>

The home has the capacity to support 46 residents aged 65 years and over, however individual cases below this age can be considered. Residents are supported under the categories of Enduring Mental Ill-health (EMI) Residential, EMI Nursing and both Residential General Nursing and Residential Care.

All bedrooms are en-suite and residents and their families are actively encouraged to personalise rooms as much as possible. Pictures and ornaments etc. are displayed in bedrooms before a new resident's admission so that they can identify with their own personal items when they arrive. Beds and wardrobes can also be accommodated if required.

Requests to bring along pets are considered on an individual basis prior to admission.

Although Maple Lodge does not have any dedicated double rooms, rooms have previously been assigned to couples, allocating one room as the couple's bedroom and one as a private lounge area.

There are three communal lounges on each of the two floors with each floor hosting its own dining area. Residents can use the homes Wi-Fi to access the internet if they wish to do so. There are currently no hearing loop systems in Maple Lodge.

The home boasts gardens to both the front and rear of the building. The rear garden is equipped with decking for seating and a pond. This garden also offers fabulous views of the countryside and beyond, as well as a field which houses some horses.

Activities are usually provided for residents Monday to Friday by the home's full time Activities Coordinator, however some events and outings do take place over weekends.

Maple Lodge Care Home operates protected mealtimes (a period of time when activity is reduced so staff can be available to help serve and supervise meals and



assist residents who need help to eat and drink. This time also include limiting visitors).

At the time of our visit there were 44 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch Team were only able to support five residents to complete the survey. The team received nine staff and five 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 STRONGLY AGREE this was met.

When asked by the Healthwatch Team if they know who the Manager is, one resident was able to name him and the remaining four were unsure, this may have been due to their own individual health and capacity. The one resident who was able to name the Manager went on to say that he is great.

During the visit the Healthwatch Team witnessed the Manager interacting with residents, he introduced them to the team by name and residents responded to him in a relaxed manner. One team member noted that the Manager is obviously very proud of the home.

Friends/relatives who replied to the survey were all able to name the Manager and were asked what they thought of him. All who responded gave positive comments and these included;

“He cares and staff know that he is in control. Paperwork on my mum is immaculate and he is always aware of my mum.”

“My surprise on my father moving into the home, was that the volume of information I got from the Manager about the home so quickly. I thought this was very professional. It helped to put my mind at ease.”

Staff who responded to the survey all gave complimentary comments about the Manager and the support that they receive from him;

“Whenever I need support/advice my Manager is always available.”

“He is available when needed. Either in the home or by the phone, our Manager can be contacted. He offers good leadership to staff.”

“My Manager is very supportive in anything I need.”

Staff went on to tell us about their experiences of talking to the Manager to ask a question or raise an issue, all comments received were positive and included;

“I find him approachable and very helpful.”



“Most recently I approached the Manager with regards to change in my contracted hours. He dealt with it professionally.”

“I feel fully supported by my Manager. He has an open door policy, is approachable and will help resolve any issues.”

The Manager was asked what attracted him to the role of Care Home Manager, he replied that he progressed from a Deputy Ward Manager role in the NHS to the Care Home Manager and added what he enjoys about his role;

“Trying to give good care to residents which gives their family peace of mind and confidence in the service.”

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 AGREE this was met for staff time and STRONGLY AGREE this was met for staff skills.

When asked by the Healthwatch Team what they think of the staff, all residents spoken to gave positive feedback including;

“Couldn’t do better they are wonderful.”

“Splendid I like them all.”

“I get on with all of them.”

When asked if staff had time to stop and chat with them, all five residents replied positively stating that they did.

During the Healthwatch visit the team observed staff interacting with residents, who both appeared to be familiar and relaxed with each other. Some residents were sitting alongside staff whilst they completed paperwork having a chat.

When friends/relatives were asked if staff have the time they need to care for their relative, all responses were positive. Comments included;

“Yes I do feel they give 100% care and have the right skills, my friend is always clean and tidy and has no complaints.”

“Absolutely.”

“They are kept busy but seem to cope.”

When asked if they feel staff at the home have the necessary skills to care for their relative, all respondents gave positive comments, including;

“Yes they all seem to be busy but do have the skills, very professional.”



“I feel as though they are very skilled and knowledgeable to deal with my father. Many times on visiting I’ve seen staff engaging with my father, so that he is not isolated or alone.”

“Absolutely, full confidence.”

Staff who responded to the survey were asked by the Healthwatch Team if they have enough time to care for the residents at the home, all staff who responded to the survey stated that this all depended upon the day. Comments included;

“Not all of the time, every day is different some clients can be very demanding, good team work makes a lot of difference.”

“Every day is different, some days are busier than others, I feel there is always room for improvement.”

“No, not always, as there are a lot of demanding residents, so there are times you feel rushed.”

The Healthwatch Team went on to ask if they feel they are encouraged to continue to develop their skills and in what ways. All responded to state that they are encouraged and some of the examples given of how this is done included;

“Yes by doing other job roles, this helps you develop your skills in other areas of the home. We are also encouraged to do National Vocational Qualifications (NVQs) and apply for other roles in the company i.e. CHAP (Care Home Assistant Practitioner) or Senior roles.”

“Yes there are always opportunities to do NVQs also our SOAR (Four Seasons in house training), keeps us updated and CHAP opportunities.”

Staff also informed the Healthwatch Team what they enjoy about their roles;

“I love interacting with residents and being able to see some smiles on their faces. Also I enjoy being able to help them in any way possible.”

“I enjoy caring very much and making someone happy, even if it is only for a few minutes, it could make a lot of difference to that one person. When a resident knows you by your name, you know you make them happy.”

“I enjoy caring for the residents and feeling like I make a difference to their quality of life.”

The Manager explained to the Healthwatch Team how he encourages staff to develop their skills; “We offer induction training that takes 6-12 weeks and a variety of e-learning and face to face courses are completed and revisited on a yearly basis. Support is given to staff to help to complete these.”

He added that he ensures that staff have enough time to care for residents by making staffing levels in line with the number of residents and how dependent they are.



Indicator 3 - Good knowledge of each resident and changing needs

The indicator states that staff should be familiar with resident's histories and preferences and have processes in place for how to monitor changes in health and wellbeing.

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



When asked by the Healthwatch Team if staff at the home know them, know what they need and what they like and don't like, all but one resident we spoke to replied that they did.

When friends/relatives were asked if the staff know their relatives life history, personality and health and care needs well, all friends/relatives who responded to the survey agreed that they did. Comments included;

“My friend is cared for by the lovely staff of this home, they call him by his first name, know when he is tired or feeling unwell. They seem to know him very well.”

“The staff seem to know each residents personality and care needs very well.”

“I feel as they are fully aware of my father's history personality and health needs. They have taken time out to talk to myself and family and keep us up to date with my father's health.”

When asked if staff at the home notice and respond to changes in their friend/relatives needs and if they are informed of any changes, all friends/relatives who completed the survey agreed that they did. Comments included;

“The home responds immediately, informing family or other health professionals if my father is unwell.”

“Yes they do. They are professional and care for mums needs.”



All friends/relatives added that they are informed by telephone or when they visit in person of any changes.

Staff and the Manager informed the Healthwatch Team of how they get to know residents life history, personality and health and care needs when the resident first arrives in the home. They explained that an extensive pre-admission assessment takes place, social service reports are made available and each resident has a file, journal and a 'My wants and wishes' booklet which their key worker completes. They added that they also take the time to talk to the resident and family and friends to gather this information.

Next staff were asked how any changes in a residents needs are updated and passed on to staff. They informed us that; "Every day a handover is given on any changes of each resident. Any changes in diet, health or other care needs should be updated in their care plans as soon as this change happens."

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.

When asked about the activities provided in the home the residents the Healthwatch Team spoke to gave examples of a range of activities available including movie afternoons, card games, dominoes, book library etc. They also mentioned some of the outdoor activities they had taken part in, including walks along the sea front, visits to restaurants, shops, parks etc.

When the Healthwatch Team asked relatives what they think about the activities available to residents both inside and outside the home responses were all very positive. Comments included;

"Varied and stimulating, they know how best to organise this programme."

"Fantastic, well thought out, well planned."

When asked what encouragement and support is given to residents to take part in the activities, comments included;



“By making my father aware and encouraging him to join in activities.”

“This is difficult due to my parent’s Alzheimers but they try a variety of approaches.”



When asked if residents continue to enjoy any previous pursuits eg. hobbies, interests, pets etc., relatives indicated that due to their family/friends individual health and capacity this can be limited. Comments included;

“No my friend has vascular dementia so it is difficult for him to enjoy pets but he does try to get involved with the help of staff.”

“With the severity of my father’s stroke it is hard for my father to do the things he used to do. My sister takes her dog up to the home. My father enjoys a little whiskey from time to time with my brother, which the home keeps safe for him. Which I think is lovely. We asked the home to do this for us.”

When asked by the Healthwatch Team what activities are available for residents inside the home the Manager and staff informed us that the home has a full time Personal Activity Leader who arranges a variety of group and individual activities such as dominoes, pamper days, bingo, crafts, cards, music therapy, knitting, films, chair exercise etc.

Staff also informed us of the activities that take place outside of the home including visits to local monuments, the beach, the theatre, The National Glass



Centre, museums, farms, outings for pub lunches. The Manager added, “The home does have the use of a company mini bus but mainly uses taxis as the resident activity fund is very healthy.”

All staff informed the Healthwatch Team that they encourage and assist residents to join in activities by informing residents what is happening, offering physical or one to one support if required and offering a range of activities that suits the needs of the residents. The Manager added; “This depends on the individual. Some residents enjoy taking part, others are more reserved. Staff are experienced and they will prompt and coax residents to join in. Praise and encouragement will often persuade the residents to take part.”

When asked how the residents are supported to do the things they used to enjoy before coming in to the home, including hobbies and interest, the Manager informed the team; “Staff collects information on what residents like to do and try to support them with interests and hobbies.”



During the Healthwatch Team visit we witnessed a reminiscence session taking place in a dedicated room, which was decorated and furnished with older items to ‘set the scene’ for these sessions. This session consisted of a small group of ladies and the Activities Coordinator who all seemed to very much enjoy the experience and each other’s company.



The home had various notice boards displaying information about activities and up and coming events. TVs were on in various communal spaces, with some residents sitting in each other's company watching them.

The team noted that residents of Maple Lodge have access to beautifully kept gardens with fabulous views across the city and countryside.

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

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

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



When asked what they think of the quality and choice of food in the home, residents the Healthwatch Team spoke to all complimented the food, stating that it was good or great and all stated that there was enough choice of what and when they eat, stating that there was always two choices and staff would always make an alternative if wanted. All residents informed that they eat their meals in the dining room and stated that was an enjoyable experience.

“Mealtimes are lovely it’s the best time of the day.”



“Yes I look forward to it.”

During the Healthwatch Team visit we witnessed the ‘Tea Trolley’ on its rounds of the home delivering a selection of hot drinks and snacks to the residents.

When asked about the quality and choice of food at the home, of the friends/relatives who responded to the survey question, all replied positively stating the choice and quality was either good or very good. They all added that they were confident that their friend/relative is supported to eat and drink as much as needed, comments included;

“My father has put on weight in the two months he has been in the home. This is very good news as he did lose a lot of weight in hospital.”

“Always have a hot meal at lunch time and have a good breakfast.”

“Excellent”



When asked by the Healthwatch Team how the home ensures that mealtimes are social, most relatives stated that residents are encouraged to eat in the dining room, with support from staff. Comments included;

“The home has a large dining room where residents enjoy sitting together.”

“The staff team are always around at mealtimes to support residents.”

Staff respondents to the survey were asked what they thought of the quality and choice of food available at each mealtime, all staff who replied to the survey gave positive responses, these

included;

“I think the menu is very well thought out a great range of choices. Kitchen staff really help support residents dietary requirements.”

“The food is always fresh and well presented. The residents are given a choice at mealtimes.”



The Manager added comments on how the home ensures that it provides high standard of quality and choice of food; “The home uses Four Season menus and these have been researched to be nutritious. Residents have a choice and staff will always ask what they prefer. All staff have food hygiene and allergens training.”

When asked by the Healthwatch Team how they ensure that residents can eat and drink outside of mealtimes, staff and the Manager informed us that outside of mealtimes a snack and tea trolley is available at 10.30am, 2.30pm and 7pm and they can ask for anything at any time and a kitchenette is available on the ground floor. During mealtimes which are protected, staff are available to support residents in the dining room if needed but promoting independence as much as possible. Residents are also monitored daily with eating and drinking and any changes are documented. If necessary referral will be made to the Speech and Language Therapy Team (SALT).

Residents are also offered a choice of what, when and where they eat. Daily residents are offered a choice of food available using pictures to help them make choices. The Manager commented; “From admission residents are asked their likes and dislikes. If residents are unable to say then family and friends are consulted. It is also important to remember that tastes can change and just because someone chooses something one day it does not mean that want it every day.”

Staff added that meals are offered at set times of the day but if a resident isn't hungry a meal can be kept to one side for later or something can be made when they are hungry. Residents can choose to eat in the dining room or their own room, however staff do try and encourage mealtimes to be sociable times and join residents in the dining room. The Manager added when asked what ways the home ensures that mealtimes are sociable; “Mealtimes are usually chatty and friendly. Staff ensure any music etc. is at an appropriate level and not too loud. Staff encourage residents to chat and if anyone is upset there are quiet areas for them to eat.”

Indicator 6 - Regular access to health professionals (GPs, Dentists, Opticians, Chiropodists, Audiologists etc.)

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

The Healthwatch team STRONGLY AGREE this was met.

When the Healthwatch Team asked residents if they have access to a range of health professionals, all were able to mention a range of different visits including from the GP an Optician and Audiologists. Many went on to explain that should they need to see the GP they would ask one of the Care Team or the Nurse who would arrange this for them and if necessary escort them to external appointments.

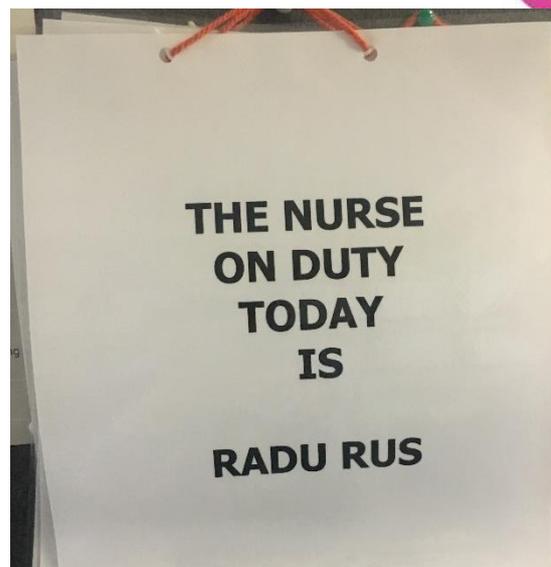


The relative respondents when asked by the Healthwatch Team about the access to health professionals all responded positively, some of the replies given included;

“The home deals with all appointments my friend has they are all updated, my friend is always chaperoned to each appointment by carers.”

“If needed they will see a health professional, no problems.”

“Excellent. The Nurse on duty informs myself or family if there are any concerns and takes prompt action, to inform doctor.”



Staff and the Manager informed the Healthwatch Team about the range of regular visits to the home from health professionals including the Optician which residents are registered with upon admission, the local Dentists and the Chiropractors that visits every six weeks. The GP and other health professionals such as the SALT team are called whenever they are needed. The Manager added; “The home staff are aware how to get visits from other healthcare professionals. This is usually asking the GP to make a referral to which ever professional is required. Reviews are held with the Doctor every 2 weeks and MDT (Multi-Disciplinary Team) members are invited if required.

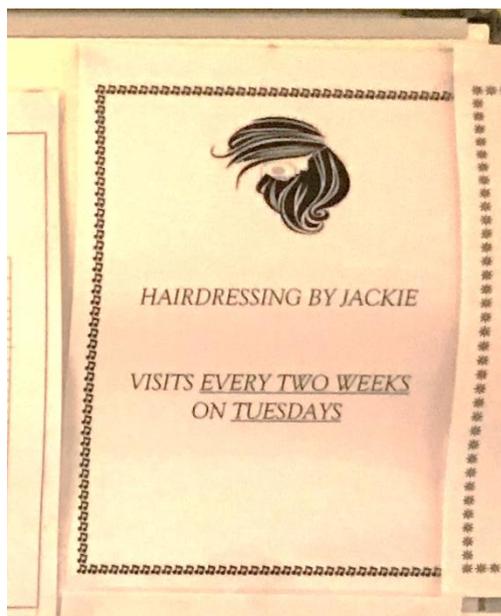
Indicator 7 - Accommodate resident’s personal, cultural and lifestyle needs

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

None of the residents the Healthwatch Team spoke to stated that they had any specific lifestyle or cultural needs, however, one resident did say that they sometimes attend the church services as they like the hymns.

A few also stated that they laundry service is good with one resident stating that they get their own clothes back, clean and smelling fresh.

Friends/relatives who responded to the survey were asked about how the home accommodates lifestyle needs of its residents. They informed us that their friend or relative didn’t have any specific religious or cultural needs but the home does respect them and addresses their individual needs. One relative commented; “The home accommodates her needs on a minute by minute basis whatever this entails.”



Friends/relatives went on to inform us that their friend/family members have access to a visiting hairdresser every 2 weeks, the laundry service is good or excellent and residents are always clean and appropriately dressed.

The Healthwatch Team asked staff and the Manager how the home finds out and caters to the residents cultural, religious and lifestyle needs. Those who responded informed that at pre-admission residents and families will be asked this information which is then added to the individual resident 'My wants and wishes' booklet and the resident's journal and care plan.

Examples given of how the home accommodates some of these needs included; visits from the local church who offer residents Holy Communion each week, and a church service monthly, the offer of appropriate activities and outings and various diets can also be accommodated.

The Manager added that the home has a visiting hairdresser fortnightly, or have their own hairdresser visit the home and others go out to the hairdresser if able. The home also uses a discreet labelling system to help ensure that laundry staff get the residents clothing back to them; "If anything does go missing it is usually found quickly. In rare cases if something was not found it would be replaced."

When asked what mechanisms are in place to ensure that residents are always clean and appropriately dressed the Manager replied; "Residents have individual hygiene and dressing care plans. Staff are aware of these and that they are to ensure all residents are clean and tidy, providing their dignity."





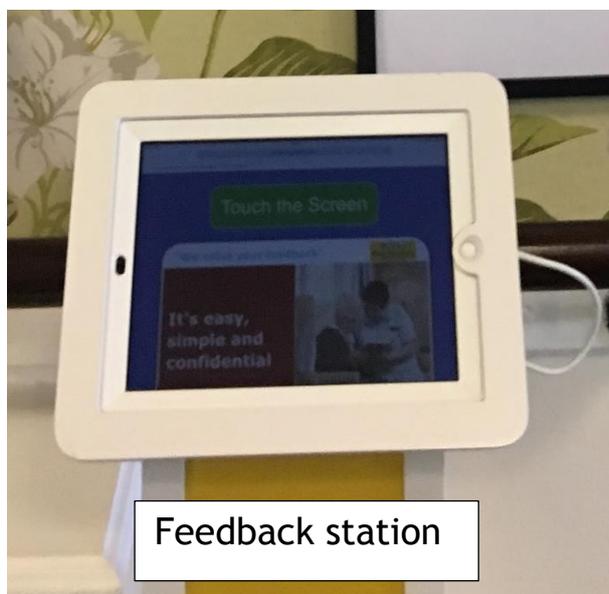
Indicator 8 - An open environment where feedback is actively sought and used

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.

When asked if they get asked what they think of the home or if they are happy there was a mixed response, some stating they have been asked and others saying they haven't but many did add that they were happy. When asked if there was anything they would like to change about the home all of the residents stated no.

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



“They have open meetings and also feedback boxes.”

“My father has not been at the home very long. My family have been made aware of the monthly meeting which will be our first.”

Survey respondents added that should they wish to make a complaint about the home that they would see a the Manager or contact the head office and felt confident that this complaint would be acted on appropriately;

“I 100% trust the home.”

“Yes 100%.”

“I don't feel as though there would be a problem if any issues were of concern.”

During the Healthwatch visit the team witnessed a comments box/iPad in the foyer which enables both residents and their friends and family to give feedback at any



time. Staff and the Manager informed the Healthwatch Team when asked how family and residents can have a say about how the home is run, that the Manager has an open door policy and asks residents and family to put forward any ideas or wishes. A resident/relative meeting takes place bi-monthly where opinions and ideas are encouraged. A few staff members gave examples of how residents and family have contributed to activity ideas and suggested ideas for trips and days out.

The Manager, when asked how the home makes use of feedback and complaints from residents, friends or relatives commented; “All feedback good or bad is feedback to staff. The home has a lessons learnt policy and will try to improve any issues. Reflective accounts are filled in by staff and good feedback is passed on too.”

When asked how members of staff can have a say in how the home is run, staff replied stating that they have regular staff meetings where suggestions, questions and concerns can be raised, they are issued with staff questionnaires or they can do this in person with the Manager.

The Manager reiterated this when asked this question and added that staff are given credit for suggesting ideas.

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 STRONGLY AGREE this was met.

When asked by the Healthwatch Team if the home is always clean and tidy all residents we spoke to responded positively stating that it was. They were also asked if the temperature was suitable for them, all agreed that it is, with one commenting that if it’s too warm they are able to open their window or can adjust the thermostat in their own bedroom.

All friends/relatives when asked about the temperature and cleanliness of the home gave positive responses stating the home was always at a comfortable temperature and hygienically clean and tidy. When asked if the home is well decorated and well maintained, all but one relative stated that it is. The relatives stated; “It could be better but we are in a ‘profit driven’ health system, the care is 100% though.”

Finally friends/relatives were asked if they thought the home was a dementia friendly environment, all those who responded to the survey agreed that it was.



The Manager explained that he ensures that a comfortable temperature is maintained in resident's rooms and all communal areas by carrying out regular maintenance of the home's heating systems. Heaters and fans are also available, thermometers are in placed in rooms and the Maintenance Man keeps records.



Dementia friendly signage

When asked how he ensures the building and its contents are well maintained and decorated throughout, he informed that the home is covered by a company contract and any other issues are passed onto the Estates Team. The decorating of the home is done on a rolling programme and carried out by the homes Maintenance Man and soft furnishings and flooring etc. are changes as required. He also added that the home is kept hygienically clean by following a decontamination and cleaning schedule and domestic staff sign off all completed jobs. He also does a regular walk around of the home to check that areas are clean and tidy.

The Healthwatch Team asked both staff and the Manager how the home is made a dementia friendly environment. They explained the home follows the company's Dementia Care Framework which helps to ensure that the home has a dementia friendly environment with appropriate furnishings and decoration, including colour schemes, signage and non-slip flooring etc. The home also has a sensory room available for use by residents and they try to keep its residents active and engaged in activities that they find enjoyable.

During the Healthwatch visit all team members noted that the home is light and bright with a welcoming atmosphere. It was clean and appeared well maintained and pleasant décor and furnishings. The back of the home boasts large windows with lovely views of the surrounding areas and countryside.



5. Appendices

Appendix 1 - Questions for residents

1. Who is the Manager of the home?
2. What do you think of the Manager?
3. What do you think about the staff here?
4. Do the staff have the time to stop and chat with you?
5. Do the staff know what you need and what you like and don't like? (your daily routines, personality, lifestyle, clothing etc.)
6. What activities are there for you in the home?
7. What activities are there outside the home? (Groups, trips etc.)
8. Is it easy to join in the activities?
9. If you would like to use the garden are you able to?
10. Do you get a chance to do any of the things you used to enjoy before you came here? (i.e. bringing in pets, hobbies, interests etc.)
11. What do you think of the food here?
12. Is there enough choice of what you eat and when you eat?
13. Where do you eat your meals? (Is it your choice to eat there?)
14. Do you enjoy mealtimes? (What do like/dislike about mealtimes?)
15. Have you seen a dentist to check your teeth or an optician to check your eyes or an audiologist to check your hearing recently?
16. What happens if you need to see a doctor or have an appointment at the hospital?
17. Is there respect for your religion or your culture here in your home? e.g. Are you able to wear your own clothes, get your hair/nails done, have a shave, are the laundry staff good at getting your own clothes back to you?
18. Is the home always clean and tidy?
19. What is the temperature like here? Are you ever cold or too warm?
20. Do you get asked what you think about the home or if you are happy?
21. Would you like to change anything about the home? Have you told anyone about this and what happened?
22. What would you do if you wanted to make a complaint about the home?



Appendix 2 - Questions for Managers

1. **Have strong, visible management**
What attracted you to the role of care home Manager/Deputy Manager?
What do you enjoy about the role?
2. **Have staff with time and skills to do their jobs**
In what ways do you encourage staff to develop their skills?
How do you ensure staff have enough time to care for residents?
3. **Have good knowledge of each individual resident and how their needs may be changing**
How do you ensure that staff get to know a resident's life history, personality and health and care needs when the resident first arrives?
How is information about a resident's likes/dislikes and their health and care needs updated as these change and passed on to staff?
4. **Offer a varied programme of activities**
What activities are available for residents inside and outside the home?
Does the home have access to its own transport and able to use this for trips and activities outside of the home?
What encouragement and assistance is given to residents so that they can take part in activities?
How are residents supported to continue to do the things they used to enjoy before coming into the home i.e. hobbies/interests/pets?
5. **Offer quality, choice and flexibility around food and mealtimes**
How do you ensure high standards of quality and choice of food?
What systems are in place to support residents to eat and drink at mealtimes and outside of mealtimes?
What choices do residents have about what and when they eat and drink?
What choices do residents have about where and how they eat and drink?
Does the home have permanent drink stations available to residents?
In what ways do you ensure that mealtimes are sociable?
6. **Ensure residents can regularly see health professionals**
Please tell us about visits from all health professionals such as GPs, nurses, dentists, opticians, audiologists, chiropodists or other health care support mechanisms?
7. **Accommodate residents' personal, cultural and lifestyle needs**
How does the home find out about and cater to residents' cultural, religious and lifestyle needs?
Can you give an example of how these have been accommodated?
What provision is there for residents to regularly get their hair cut/styled?
How do you ensure that the laundry staff get the residents own clothes back to them?
What mechanisms are in place to ensure that residents are always clean and appropriately dressed?
8. **Be an open environment where feedback is actively sought and used**
In what ways can residents and their family have a say in how the home is run?
How do you make use of feedback or complaints from residents and relatives?
In what ways are staff able to have a say in how the home is run?
9. **A physical environment suitable for the needs of the residents**
How do you ensure that a comfortable temperature is maintained in resident's rooms and all communal areas?
How do you ensure the building and its contents are well maintained and decorated throughout?
How do you ensure that the home is always hygienic and clean?
In what ways do you make the home a dementia friendly environment?



Appendix 3 - Questions for Care staff

- 1. Have strong, visible management**
What support do you receive from the Manager?
What is your experience of talking to the Manager when you want to ask a question or raise an issue?
- 2. Staff with time and skills to do their jobs**
Do you feel you have enough time to care for residents? If no, why?
Are you encouraged to continue to develop your skills? In what ways?
What do you enjoy about your job?
- 3. Have good knowledge of each individual resident and how their needs may be changing**
How do you ensure that you and other members of your team get to know a resident's life history, personality and health and care needs when the resident first arrives?
How is information about a resident's tastes and their health and care needs updated as these change and how do you know if there has been changes?
- 4. Offer a varied programme of activities**
What activities are available for residents inside the home?
What activities are available for residents outside the home?
What encouragement and assistance do you give to residents so that they can take part in activities?
- 5. Offer quality, choice and flexibility around food and mealtimes**
What do you think of the quality and choice of food?
How do you make sure residents are able to eat and drink at mealtimes as well as outside of mealtimes?
What choices do residents have about what and when they eat and drink?
What choices do residents have about where and how they eat and drink?
In what ways do you try to make mealtimes sociable?
- 6. Ensure residents can regularly see health professionals**
Please tell us about visits from all health professionals such as GPs, nurses, dentists, audiology, opticians, chiropodists or other health care support mechanisms?
- 7. Accommodate residents' personal, cultural and lifestyle needs**
Can you give an example of how the home caters for resident's religious and cultural needs?
- 8. Be an open environment where feedback is actively sought and used**
In what ways can residents and their family/friends have a say in how the home is run?
Can you provide an example of how a resident or their family member has influenced how the home is run?
How do you, as a member of staff have a say in how the home is run?
- 9. A physical environment suitable for the needs of the residents**
How is the home made dementia friendly?



Appendix 4 - Questions for Activities Coordinator

1. **Have strong, visible management**
What support do you receive from the Manager?
What is your experience of talking to the Manager when you want to ask a question or raise an issue?
2. **Staff with time and skills to do their jobs**
Do you feel you have enough time to provide varied activities for residents? If no, why?
Are you encouraged to continue to develop your skills? In what ways?
What do you enjoy about your job?
3. **Have good knowledge of each individual resident and how their needs may be changing**
How do you ensure that you and other members of your team get to know a resident's life history and personality when they first arrive at the home?
4. **Offer a varied programme of activities**
What activities are available for residents inside the home?
What activities are available for residents outside the home?
What activity provision is made for those residents who cannot or do not wish to undertake group activities?
What encouragement and assistance do you give to residents so that they can take part in activities?
How do you ensure that residents have the opportunity to continue to take part in their hobbies and interests?
5. **Accommodate residents' personal, cultural and lifestyle needs**
How are activities tailored to meet a resident's religious and cultural needs?
6. **Be an open environment where feedback is actively sought and used**
In what ways can residents and their family/friends have a say in what activities are delivered both inside and outside the home?
Can you provide an example of how a resident or their family member has influenced the provision of a new activity?
How are the activities provided evaluated to ensure residents are continuing to enjoy them?
How do you, as a member of staff have a say in how the home is run?
7. **A physical environment suitable for the needs of the residents**
How is the home made dementia friendly?



Appendix 5 - Questions for Friends and Relatives

1. **Strong visible management**
Who is the Manager of the home?
Please tell us a little about the Manager?
2. **Have staff got the time and skills to do their jobs**
Do you feel the staff have the time to care for your friend/relative? Please explain.
Do you feel the staff have the skills to care for your friend/relative? Please explain.
3. **Have good knowledge of each individual resident and how their needs may be changing**
How well do you think the staff know your friend/relative's life history, personality and health and care needs?
Does the home notice and respond when your friends/relative's needs change?
How do they let you know about the changes?
4. **Offer a varied programme of activities**
What do you think of the activities available for residents inside and outside the home?
Please tell us how your friend/relative is encouraged and supported to take part in the activities.
Now they live at the home, is your friend/relative still able to do the things they used to enjoy i.e. hobbies, interests, pets? Please explain.
5. **Offer quality, choice and flexibility around food and mealtimes**
What do think of the quality and choice of food?
How confident are you that your friend/relative is supported to eat and drink as much as needed?
Please tell us how the home ensures that mealtimes are sociable?
6. **Ensure residents can regularly see health professionals**
Please tell us about your friends/relatives access to health professionals such as GPs, nurses, dentists, opticians, audiologists, chiropodists or other health care support mechanisms?
7. **Accommodate residents' personal, cultural and lifestyle needs**
Does your friend/relative have any specific lifestyle or religious or cultural needs?
How do you feel the home respects and accommodates these needs?
What provision is there for your friend/relative to regularly get their hair cut/styled?
How good are the laundry staff at getting your friends/relatives own clothes back to them?
Is your friend/relative always clean and appropriately dressed?
8. **Be an open environment where feedback is actively sought and used**
Do you feel that you are a welcome participant in the life of the home?
In what ways can you and/or your friend/relative have a say in how the home is run or give feedback?
How would you make a complaint about any aspect of the home, management or the staff if you needed to?
Would you feel confident to make a complaint and do you think it would be acted on appropriately?
9. **A physical environment suitable for the needs of the residents**
Do you always find the home at a comfortable temperature for residents?
Is the home always hygienically clean and tidy?
Is the home always well decorated and well maintained?
Do you think the home is a dementia friendly environment?



DISCLAIMER:

- The observations made in this report relate only to the visits carried out.
- This report is not representative of all residents' views; it only represents the views of those who were able to contribute within the time available.

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