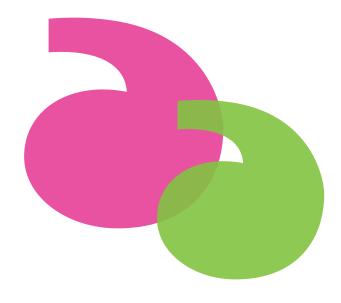


## Care home life, what it's really like!

# **Marquis Court**



Date of Healthwatch Sunderland visit: 28<sup>th</sup> March 2018





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#### Acknowledgements

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



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#### 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:

- o People to shape health and social care delivery
- o 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

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

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

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

#### The 8 indicators are:

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



## 3. Methodology

An initial pre-visit meeting with the home the Manager, Emma was held at Marquis Court. This was to explain the reason for the 'Care home life - What it's really like!' visit, to understand the needs of the residents and to arrange a visit that would cause as little disruption as possible.

The 'Care home life - What it's really like!' visit took place on the 28<sup>th</sup> March 2018 and was carried out by Healthwatch Sunderland staff and volunteer who are trained so that they can effectively capture the resident's experience.

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

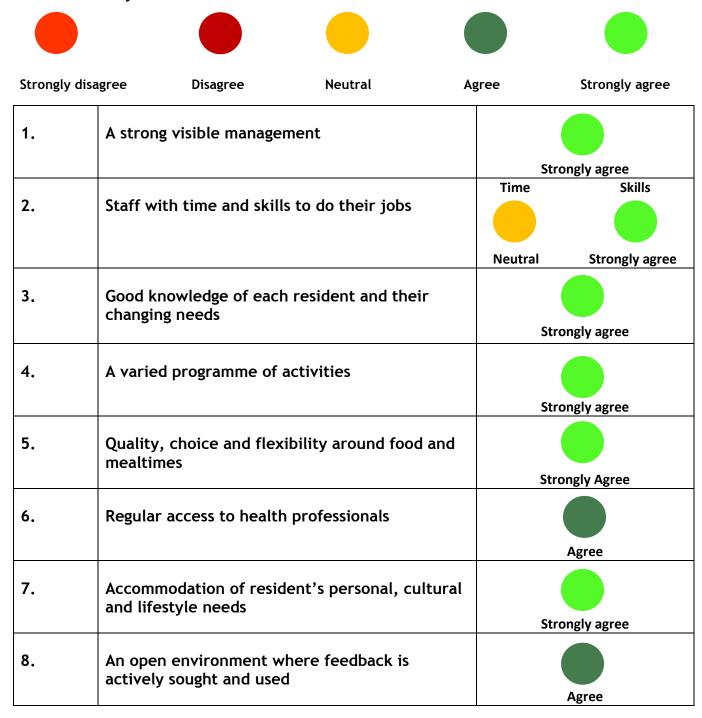
Staff and relatives were also given questionnaires to complete (see appendix 2, 3 and 4).

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

## 4. Findings - Summary

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

#### Here is the key which shows the indicator scores





## **Findings**

Marquis Court is a purpose built property, located on Tunstall Village Road, Silksworth, Sunderland, SR3 2BB. The home provides accommodation for personal care to a maximum of 47 older people, including people who live with dementia or a dementia related condition. Nursing care is not provided at this home.

The building has especially adapted interiors and exteriors, with accessible garden areas for residents and their visitors to enjoy. The home offers both long term and respite care as well as day care facilities.

See the latest CQC inspection report here: http://www.cqc.org.uk/location/1-2140037632

At the time of our visit there were 45 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch team were only able to support 8 residents to fully complete the survey and a further 2 residents to partially complete the survey. The team received 4 staff and 3 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 about the Manager, eight of the residents supported by the Healthwatch team to complete the survey process were unable to name the Manager of the home, this may have been due to their own individual health or capacity. Two of these residents did state that they would recognise her by sight, but couldn't recall her name. A further two residents were able to name the Manager and one could name her Deputy. Their comments included;

"I like her, she is very nice and friendly and she does a good job."

"Emma is the Manager and she is very good. Ashleigh (Deputy Manager) is also good."

Relatives who completed the survey process all knew the Manager by name and gave us a range of positive comments about her, which included;

"Emma is excellent and ensures that everything goes smoothly. If I have any concerns she attends to matters quickly."

"Emma's door is always open. She is a kind, caring and always willing to help or offer advice."

"The Manager is pleasant, approachable, professional and helpful."

The staff, when asked if they feel supported by the Manager, agreed that this is the case. Their comments included;

"If I need to speak to her, we arrange a time convenient to both of us and I have her undivided attention."

"She is very supportive and will help at all times."

Staff went on to indicate that their experiences of talking to the Manager, asking her questions and raising issues were positive. They stated that she is approachable, an easy person to talk to resolve their issues.

When asked what attracted her to the role of Manager of Marquis Court, the Manager said; "I believed that I would be able to implement a high standard of care and a good quality of life to the elderly."

### 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 a NEUTRAL rating for staff time, which indicates both positive and negative feedback, which when averaged results in a neutral score. The Healthwatch team STRONGLY AGREE this was met for staff skills.

When asked what they think about the staff at the home, the residents the Healthwatch team spoke to all gave a range of positive responses, which included;

"They are alright from what I have seen. I am well looked after."

"They are good to me. I feel settled here after so much personal turmoil."

"Brilliant, they treat me really well. I am well looked after."

When asked if the staff have time to stop and chat to them, the residents who were able to answer this question gave a mixed response. The majority indicated that although staff pass the time of day with them, the staff are very busy. Resident comments included;

"They do if I ask them anything."

"They do speak to me, but don't sit and talk to me."

"They come in a chat. They are very friendly and good to me."

"It all depends how busy they are."

All of the relative respondents, when asked about staff time, spoke favourably of the staff at the home, giving a range of positive comments about how their relatives are cared for by the staff. Their comments about staff time included;

"Considering the demands put on care staff, they are excellent. Obviously in an ideal world more time could be spent on the residents but this could be down to money."



"Any of the staff will help with any situation. However small it is done immediately."

"Whenever I visit, the staff always seem to promote a calm and caring atmosphere around the home. As in all jobs, they are always busy, but seem to have a genuine care for the people they look after."

When relatives were asked if they feel the staff have the skills to care for their relatives they gave positive comments. One relative did say that they felt unable to comment on this area, although they shared that if there dad had been ill, the staff were wonderful in looking after him and keeping him out of hospital, for which they are very grateful. Comments included;

"Yes, my mum is in her sixth year here and staff have remained constant and provide a happy atmosphere."

"Yes, all the staff go on regular courses."

The staff members who responded to the survey stated that they do have sufficient time to care for the residents. They said;

"Yes, when working as a team we manage to get into a routine and carry out our duties."

"Yes, I spend most of my working day with the residents."

The Manager stated that her team is always fully staffed for every shift at times during emergencies etc. She added;

"It can become hectic, which is when management and other staff assist."

When asked if they are encouraged to continue to develop their skills they agreed this was the case, through both internal and external training courses. The Activities Coordinator said;

"I have just completed a nationally recognised course for chair based exercise."

The Manager and her Deputy added that regular training is offered to staff, which included vocational courses and National Vocational Qualifications (NVQs). The Deputy Manager added that help and support is given to staff with current and up and coming course work. The Manager added;

"Diplomas are very popular at Marquis Court because staff often move on to promotion."

Staff were asked what they enjoy about their role, here are their comments;

"I put smiles on faces."

"Knowing I have done the best I can in the time I have. Making sure residents have had the best care that I and other staff can give, making them feel comfortable and safe."

When asked what they enjoy about their role at the home, neither the Manager nor her Deputy responded to this question.

### Indicator 3 - Good knowledge of each resident and changing needs

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

The Healthwatch team STRONGLY AGREE this was met.

When asked if the staff know what they need and what they like and don't like, all of the residents who were able to respond to this question gave a range of positive comments, with some residents indicating that the staff and the residents know each other well and have a positive rapport.





The garden area includes a resident's memorial garden

The relatives responded positively when asked if the home notice and respond to changes in their relative's needs. They agreed that communication from the home is good and that they are told about any changes. One relative said;

"They are quite quick to respond if dad is ever not well, by bringing in the nurse practitioner or doctor. They also let me know promptly by phone."

To ensure that they and their colleagues get to know a resident's life history, personality and health and care needs when a resident first arrives into the home, staff and the Managers informed us that the home have a pre-admission assessment process. This is where a potential resident's needs are assessed and information about the resident is gathered. On admission into the home a life history form is used to gain further information from the residents, their families and health professionals, which includes current medication and treatments. An individual, person centred care plan is developed for each resident which can be accessed by the staff team. Staff are trained to observe each resident and any changes are reported to senior members of staff. Information is updated in the care plan as and when required and changes and up-dates are shared at staff handover meetings at the beginning of shifts by senior care staff. One staff members said;

"When you work closely with people as carers do, you quickly get to know the resident's 'norm'. Any change is quickly noticed by experienced staff. We also

chat to residents and senior staff can enquire with families to see if the change relates to the past."

During the tour of the home the Deputy Manager explained to the Healthwatch team that residents can choose the colour of their room's door and that many choose the colour of the front door of their past home. This helps them to recognise their room and helps them to feel at home.

### 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 which are available to them at Marquis Court, some of the residents supported to complete the survey process indicated that they prefer to stay in their own rooms and watch TV or read. Others gave us a list of activities which they take part in, these included; bingo, music, sing-a-longs, karaoke, exercises, crafts, dominos and films. Comments about activities included;

"Valentine's Day was nice."

"There was a paste egg competition yesterday and I won!"



The Easter raffle - funds are raised by staff to provide additional activity resources

Relatives spoke very favourably about the activities at the home, with two of the respondents praising the Activities Coordinator. Their comments included;

"I think Elaine, the Activities Coordinator does a wonderful job. There is a very varied programme of events that are on a three week rota and then special events specifically for relatives to join in throughout the year."

"Excellent! Elaine, the one in charge of the activities is amazing."

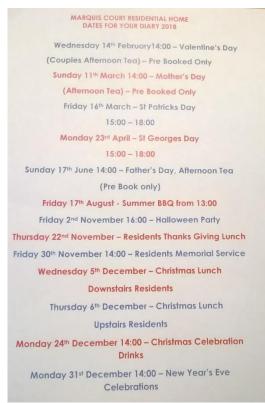
All of the relatives indicated that their relatives are encouraged to take part in activities with music playing a key part in this for two of their family members, they added;

"Mum is blind and unable to do hobbies, singing is very important."

"They know my dad loves anything to do with music, or musical films."



During the Healthwatch team visit we witnessed a game of bingo taking place in one of the communal areas of the home. Staff encouraged one resident to join in the game and she was supported by one of the Healthwatch team to play. The Activities Coordinator facilitated the game, with a large number of residents on her own. She was seen to be utilising her multi-tasking skills, which were tested on the day, one lady who was singing loudly, was encouraged gently to stop and join in the game, some residents needed support and reassurance to play the game, others wished to leave the room during the game and two residents were having a disagreement, which she handled quickly and with tact and diplomacy. The Activity Coordinator used a suitably loud voice to ensure all those taking part could hear her, as well as using a visual number display and using her skills, ensured all residents were included in the game and were keeping up. When the game was complete she then checked all of the resident's bingo cards to ensure no one had missed any numbers, whilst singing to the residents to keep their attention. Winners were congratulated and she invited them to choose prizes, which were displayed on a table in the room. At the end of the session the Activities Coordinator sang and danced as the residents left the room and she



encouraged them to join in, which some of them did. Those residents asked, stated that they had enjoyed the session.

When asked about the availability of trips outside the home, some residents were unaware of any trips, with others stating that they hope there will be some trips over the warmer, summer months. One resident stated that they go out with their daughter.

The majority of residents stated that the staff tell them when activities are about to start. Some residents did not answer this part of the survey, which may have been due to their individual health and capacity.

When asked if they are still able to do the things they used to enjoy prior to coming into the home, some residents stated that their friends visit them, they can 'potter' in the

garden in the summer. One resident commented that they are no longer able to take part in their hobbies, but this is due to the deterioration in their own health.

The staff and management added to the list of in-house activities which are available at the home, which included; men's social club, pub afternoons and evenings, garden activities, parties, visits from outside entertainers, beauty sessions and one to one time with staff.

They went on to tell us about the outdoor opportunities on offer to residents, which included; BBQs in the garden, shopping trips, walking through local parks, visit to the Sunderland Empire, restaurants, museums, taking residents to vote and football matches. The Activities Coordinator added;

"Residents are encouraged to keep their own clubs and interests going."

When asked what encouragement and assistance is offered to residents to enable them to take part in activities, staff and management told us that residents are prompted and encouraged in as much social interaction as possible and that the home has a designated space for activities so residents are familiar with the space. Each resident is told the nature of the activity and invited to participate and the Activities Coordinator uses a range of adapted 'tools' such as different sized bingo cards to enable people who may have deteriorating eye sight to also take part.

Staff and management comments about the activities included;

"Men's club is popular and was implemented by requests from residents."

"We will explain how good this will be for them, to get out and about, to see and do different things, rather than staying indoors."

"If an individual has full capacity and declines to take part, I immediately move on. If an individual has some level of dementia and I know they would enjoy and/or benefit from the session, I encourage them a little further."

When management were asked how residents are supported to continue to do the things they used to enjoy before coming into the home, the Deputy Manager said;

"Pets visit the home with families and friends, so residents continue to see family pets."

## 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.

The majority of the residents when asked about the food at the home gave a range of positive comments. One resident said it is good most of the time, they don't like the curry, but the staff always get them an alternative. They added;

"I am not the easiest person to feed, but they always sort something out for me. I never go without a meal."

Comments about the food also included;

"The food is good and I would sharp tell them if it wasn't."

"It is very good and it all tastes home cooked."

When residents were asked if there is enough choice of what they eat and when they eat they all spoke positively and reiterated that if the menu didn't suit them the staff would ensure that an alternative was provided for them. Their comments included:

"If I said I was hungry at 10pm they would make me a sandwich."

"There is a menu choice every day. They ask you what you want and the menu is also displayed on the board."

"The food is good and the staff are very kind. I can't complain about anything."

The Healthwatch team observed staff asking residents about their meal choices and staff were also served a range of hot and cold drinks to residents during our visit.

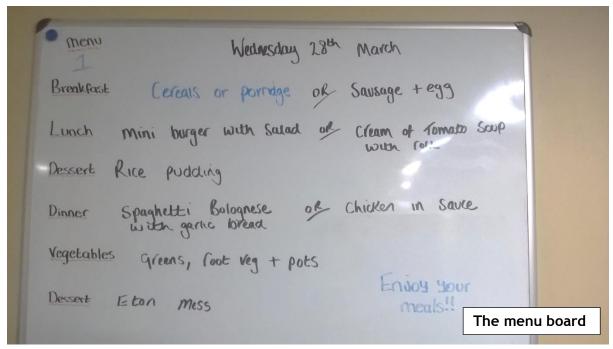
When we asked residents where they eat their meals and if this is their choice, they indicated that they can choose where they eat, with some stating they choose

to eat in the communal dining areas, others prefer to eat in their own rooms and that they enjoy mealtimes in the home.

The relative respondents stated that the quality and choice of food at the home is either good or excellent. Their comments included;

"I have never been here for resident's mealtimes, but I have been here for Christmas dinner and various buffets and the food has always been lovely."

They all went on to say that they feel confident that their relatives are encouraged to eat and drink as much as is needed. One relative added that they had seen an increase in their relative's weight over the last year and another added that they are always told if their dad is off his food and staff prompt him to drink as he often forgets. All relatives told us that they believe mealtimes to be a sociable time



and this is facilitated by relatives being seated next to their friends, at round tables in the dining room, which one relative said "Is a very pleasant dining room."

The staff who engaged with the survey process told us that the food at the home is of a very high standard. One staff member said;

"I think the food is of the highest quality and is always freshly made from scratch. The chef adds new dishes from time to time to add more variety and is always open to suggestions."

Staff stated how they ensure that residents are able to eat and drink at mealtimes as well as outside of mealtimes. This is done by meals being kept if residents are out with their families or at appointments to have when they get back, residents are assisted to eat and drink if needed and specialist cutlery is available to those who require it. One staff member told us;

"Drinks and snacks are always available and if a resident requests something specific, for example, a sandwich or a pint, they just have to ask."

The Healthwatch team saw this in action during our visit, when a gentleman stated that he fancied a pint. A staff member provided him with a pint of Guinness, which he sat on a sofa in a communal area to enjoy. Staff who passed him, asked him if he was enjoying his drink and passed the time of day with him.

Neither the Manager nor her Deputy gave us their opinion on the quality of choice of food at Marquis Court.

Staff and the Deputy Manager informed us that residents can eat their meals wherever they choose, which includes either of the main dining rooms, lounge areas or their own rooms. They added that they try to make mealtimes sociable and that the dining rooms are tastefully decorated, tables seat four people, they keep friends together if this is their choice, staff are available to sit with residents to help them to feel comfortable and facilitate conversation.

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

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

The Healthwatch team AGREE this was met.

Residents who were supported to complete the form informed the Healthwatch team that an optician and dentist regularly visit. Although one resident told the team that a chiropodist visits them every 6 weeks, another resident stated that they haven't seen a chiropodist for a while.

When asked what happens if they need to see their GP or have a hospital appointment some of the residents were able to tell us that staff would send for the doctor if required and that either staff or their relatives would accompany them to medical appointments. Resident comments included;

"Staff attend appointments with me, I've been for an x-ray this morning."

"The home book a taxi for me and I pay for it myself."

"I can chat to the doctor on the phone or they will come and visit me here."

The relatives who engaged with the survey process indicated they are happy with the provision of healthcare at the home. Their comments included;

"The optician visits the home once a year to change dad's glasses when needed, which is wonderful as it is very difficult for me to take dad out."

"Because of dementia the dentist now visits at the home as well as regular visits from nurses, a private chiropodist and an optician."

The staff and Deputy Manager reiterated that medical professionals are regular visitors to the home, with one staff member adding that visits from chiropodists, dentists and opticians are advertised within the home in advance to notify

residents and their families of their up and coming visits. Each resident has their own GP and visits are requested as soon as they are needed. A nurse practitioner visits the home each week to complete a 'ward round' to check on their patients and respond to concerns about residents from staff. Nurses also visit the home to administer medications and treatments which staff are not qualified to do. The Deputy Manager added that the Care Home team visit weekly to review emergency health care plans.

# 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.

When asked if they are still able to follow their religion, none of the residents who were supported to complete the survey could recall any religious visitors to the home, but none of those people stated that this was an issue for them. Residents gave positive comments about the laundry system in the home, stating that they always get their own clothes back. Their comments included;

"Laundry is a great service, I get my own clothes back and give them top marks."

"They wash my clothes one day, iron them and bring them back the next."

One resident added that her sister washes her clothes for her, but this is her own personal choice.

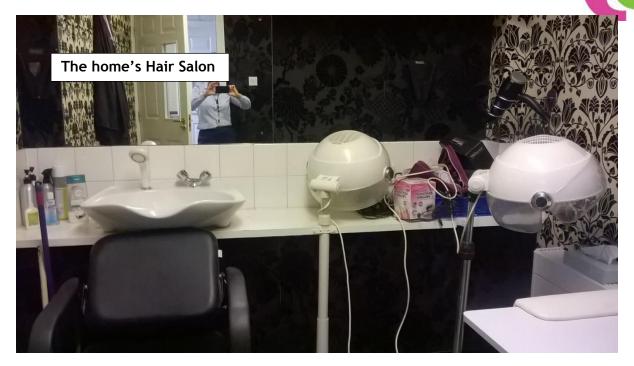
Residents stated that there is a hairdresser who visits the home on a regular basis and the Activities Coordinator shapes and paints the ladies nails if they wish.

Relatives stated that there is a hairdresser who visits the home twice a week to ensure that their relatives have the opportunity to get their hair styled/cut. They gave positive responses when asked about the laundry system at the home. Their comments included;

"The amazing Linda, the housekeeper is fantastic, I admire her work ethic."

"The laundry staff are great, everything is numbered and I've encountered very few mistakes."

"All of the relative respondents stated that their relatives are always clean and appropriately dressed."



The Deputy Manager informed us that the home finds out about and caters for a residents' cultural, religious and lifestyle needs at the pre-admission assessment. For one resident, her religious beliefs were accommodated by the home, as staff made arrangements for a weekly visit from a priest to enable her to continue practicing her religion. One staff member stated that the home has a resident who doesn't wish to be part of any parties or religious activities and the staff know this and ensures the resident is not involved in such activities. Another staff member informed the team that this is also the case for another resident who does not want to be involved in either St Patrick's Day celebrations or Halloween.

The Manager added that although the home has a regular on-site hairdresser, there are a further two who visit residents who prefer to keep their usual hairdresser.

When asked how the home ensures laundry staff get residents own clothes back to them, both the Manager and her Deputy informed us that clothes are labelled with residents individual room numbers, so they can be easily identified. The Manager did add that difficulties can occur when residents get new clothes and they are not labelled. These items are stored in the laundry until they are identified.

They went on to say that the home ensures that residents are always clean and appropriately dressed by residents choosing when they would like to be bathed/showered. Residents all have en-suite rooms and the use of the home's communal bathrooms and their clothes are laundered on a regular basis. Staff are also trained to make sure residents are offered assistance both morning and night to wash and change their clothing.



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

The indicator states that there should be a mechanism in place for residents and relatives to influence what happens in the home, such as a residents and relatives committee. The process for making comments or complaints should be clear and feedback should be welcomed and acted on.

The Healthwatch team AGREE this was met.

When residents were asked if they get asked what they think about the home and if they are happy, only one resident said that their family ask them. All of the residents supported to complete the survey process stated that they are happy at Marquis Court. Resident's comments included;

"I have always liked it here!"

"I like it. I didn't like it upstairs, but now I have moved downstairs I like it here better."

"Yes, I am happy and they can see I am."

When asked if they would like to change anything about the home, none of the residents stated that there was anything they would change, although one resident said that their family live too far away.

Residents told the Healthwatch team that if they ever needed to complain they would speak to staff members or the management. Their comments included;

"I have never had to complain, but I would go to the staff to do something about it."

"I would complain to a carer, who would tell the gaffer. The gaffer is lovely. I don't see her much, but if I needed her, she would be here."

"I would go to the Manager, Emma or her Deputy, Ashleigh. I complained a few weeks ago and got a letter to say they are looking into it, but I haven't heard anything since."

All of the relatives who responded to the survey said that they feel welcome participants in the life of Marquis Court, with one relative adding;

"Relatives are always encouraged to join in activities and are welcome to visit any time."

Relatives stated that they and their relative can have their say on how the home is run by attending regular meetings, speaking to the Manager and completing regular surveys. If they ever needed to make a complaint about an aspect of the home, the relatives stated that they would directly to the Manager, with one relative saying;

"The office door is always open."

All of the relative respondents went on to say that although they have never had to make a complaint they would be confident to do this and also confident that the complaint would be acted upon appropriately.

Staff and the management told us that both residents and their friends and family can have their say on how the home is run by attending the regular resident/relative meetings, which are chaired by the Activities Coordinator, completing questionnaires or speaking to the Manager at any time. One staff member gave an example of how feedback received had influenced how the home is run;

"A resident once suggested a change in mealtimes. This was trialled, but all concerned decided to go back to the original time."

Staff stated that they can have a say in how the home is run by attending regular staff meetings. One staff member said;

"As a staff member our input is always taken seriously by our Manager. She will listen and take it on board. If it is a better way, she will try other options."

The Manager informed the Healthwatch team that complaints are acted upon and reviewed by the management to enable an appropriate outcome. Complaints are fed back to the staff and training offered where required.

The Manager and her Deputy said that staff can have their say about how the home is run at daily handover meetings, staff meetings and that the Manager's door is always open if they want to share ideas.



## 5. Appendices

### **Appendix 1 - Questions for residents**

- 1. Do you know the Manager of the home?
- 2. What do you think of the Manager?
- 3. What do you think about the staff here?
- 4. Do the staff have the time to stop and chat with you?
- 5. Do the staff know what you need and what you like and don't like?
- 6. What activities are there for you in the home?
- 7. What activities are there outside the home?
- 8. Is it easy to join in the activities?
- 9. Do you get a chance to do any of the things you used to enjoy before you came here?
- 10. What do you think of the food here?
- 11. Is there enough choice of what you eat and when you eat?
- 12. Do you enjoy mealtimes?
- 13. Have you seen a dentist to check your teeth or an optician to check your eyes recently?
- 14. What happens if you need to see a doctor or have an appointment at the hospital?
- 15. Is there respect for your religion or your culture here in your home?
- 16. Do you get asked what you think about the home or if you are happy?
  - Would you like to change anything about the home? Have you told anyone about this and
- 17. what happened?
- 18. 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?

What do you enjoy about the role?

#### 2. Have staff with time and skills to do their jobs

In what ways do you encourage staff to develop their skills?

How do you encourage staff to develop their skills?

#### Have good knowledge of each individual resident and how their needs may be changing

How do you ensure that staff get to know a resident's life history, personality and health and care needs when the resident first arrives?

How is information about a resident's tastes and their health and care needs updated as these change?

#### 4. Offer a varied programme of activities

What activities are available for residents inside and outside the home?

What encouragement and assistance do you give to residents so that they can take part in activities?

How do you support residents to continue to do the things they used to enjoy before coming into the home i.e. hobbies/interests/pets

#### 5. Offer quality, choice and flexibility around food and mealtimes

What systems are in place to support residents to eat and drink at mealtimes and outside of mealtimes?

What choices do residents get about what they eat and drink and when and how they eat and drink?

In what ways do you try to make mealtimes sociable?

# 6. Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists Please tell us about visits from health professionals such as GPs, nurses, dentists, opticians, chiropodists or other health care support mechanisms.

#### 7. Accommodate residents' personal, cultural and lifestyle needs

How does the home find out about and cater to residents' cultural, religious and lifestyle needs? Can you give an example?

What provision is there for residents to regularly get their hair cut/styled?

How do you ensure that the laundry staff getting the residents own clothes back to them?

What mechanisms are in place to ensure that residents are always clean and appropriately dressed?

#### 8. Be an open environment where feedback is actively sought and used

In what ways can residents and their family have a say in how the home is run?

Are staff able to have a say in how the home is run?

How do you make use of feedback or complaints from residents and relatives?



#### Appendix 3 - Questions for staff

#### 1. Have strong, visible management

What support do you receive from the manager?

How easy is it to talk to the manager when you want to ask a question or raise an issue?

#### 2. Have staff with time and skills to do their jobs

Do you feel you have enough time to care for residents?

Are you encouraged to continue to develop your skills? In what ways?

What do you enjoy about your job?

## 3. Have good knowledge of each individual resident and how their needs may be changing

How do you ensure that staff get to know a resident's life history, personality and health and care needs when the resident first arrives?

How is information about a resident's tastes and their health and care needs updated as these change?

#### 4. Offer a varied programme of activities

What activities are available for residents inside and outside the home?

What encouragement and assistance do you give to residents so that they can take part in activities?

#### 5. Offer quality, choice and flexibility around food and mealtimes

How do you make sure residents are able to eat and drink at mealtimes as well as outside of mealtimes?

What choices do residents get about what they eat and drink and when and how they eat and drink?

In what ways do you try to make mealtimes sociable?

## 6. Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists

Do residents have regular, preventative dental and optometry (eye-care) appointments?

#### 7. Accommodate residents' personal, cultural and lifestyle needs

Can you give an example of how the home caters for religious and cultural needs?

#### 8. Be an open environment where feedback is actively sought and used

In what ways can residents and their family have a say in how the home is run?

Can you provide an example of how a resident or their family member has influenced how the home is run?

Do you feel staff can have a say in how the home is run?



#### Appendix 4 - Questions for friends and relatives

#### 1. Strong visible management

Do you know who the Manager of the home is?

Is the Manager friendly and helpful?

#### 2. Have staff with time and skills to do their jobs

Do you think the staff have the time and skills to care for your friend/relative?

## 3. Have good knowledge of each individual resident and how their needs may be changing

How well do you think the staff know your friend/relative's life history, personality and health and care needs?

Does the home notice and respond when your friends/relative's needs change?

#### 4. Offer a varied programme of activities

What do you think of the activities available for residents inside and outside the home?

Is your friend/relative properly encouraged and supported to take part in the activities?

#### 5. Offer quality, choice and flexibility around food and mealtimes

What do you think of the quality and choice of food?

Are you confident that your friend/relative is supported to eat and drink as much as needed?

Do you think that mealtimes are sociable?

## 6. Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists

Does a dentist and an optometrist (optician) come to see your friend/relative regularly or only if there is a problem?

#### 7. Accommodate residents' personal, cultural and lifestyle needs

Does your friend/relative have any specific lifestyle or religious or cultural needs? Are these respected and accommodated?

#### 8. Be an open environment where feedback is actively sought and used

Do you feel that you are a welcome participant in the life of the home?

In what ways can you and your friend/relative have a say in how the home is run or give feedback?

Would you know how to make a complaint if you wanted to?

Would you feel confident to make a complaint and do you think it would be acted on appropriately?



#### **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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