



Care home life, what it's really like!

## Paddock Stile Manor



Date of Healthwatch Sunderland visit:  
14<sup>th</sup> May 2019



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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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## Table of Contents

1. Introduction .....	3
2. Background and rationale.....	4
3. Methodology .....	5
4. Findings - Summary .....	6
5. Appendices.....	28
Appendix 1 - Questions for residents .....	28
Appendix 2 - Questions for Managers .....	29
Appendix 3 - Questions for Care Staff .....	30
Appendix 4 - Questions for Activities Coordinator .....	31
Appendix 5 - Questions for Friends and Relatives .....	32



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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.*





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## 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](http://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



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### 3. Methodology

The ‘Care home life - What it’s really like!’ visit took place on the 14<sup>th</sup> May 2019 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 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	 Agree
6.	Regular access to health professionals	 Strongly agree
7.	Accommodation of resident's personal, cultural and lifestyle needs	 Strongly agree
8.	An open environment where feedback is actively sought and used	 Strongly agree
9.	Provide a physical environment which is suitable for the needs of the residents	 Strongly agree



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## Findings

Paddock Stile Manor is a purpose built home, located at:

Philadelphia Lane  
Newbottle  
Houghton-le-Spring  
DH4 4ES

Telephone: 0191 548 8159

Provider: Indigo Care Services Ltd (Orchard Care)

Provider's Website:

<https://orchardcarehomes.com/carehomes/paddock-stile-manor-newbottle-houghton-le-spring>

See the latest CQC inspection report here:

<https://www.cqc.org.uk/location/1-2579812052>

The home caters for people aged over the age of 65 who require dementia residential care and has capacity to support 40 people in its en-suite rooms. Although the home has no dedicated double bedrooms, couples can be housed in adjoining rooms. New residents are encouraged to bring personal belongings to make their room feel more like home. A Pet Policy is in place at Paddock Stile Manor and the possibility of pets coming to live with their owners would need to be discussed with the resident's family upon request.

The home has several communal areas for residents to enjoy, these include; two main lounges, one bar room, two main dining rooms and an activity room. The enclosed, accessible gardens can be accessed from the main lounge.

Residents have access to the internet, although there is no hearing loop system available at this time.

Activities are facilitated seven days a week, by a part time Activities Coordinator, who also works overtime for events.

At the time of our visit there were 23 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch Team were only able to support four residents to fully complete the survey, two of whom completed the survey together. The team received seven staff (one Manager, four Care Assistants, one Care/Laundry Assistant and one Activities Coordinator) and three relative surveys back.

The results of these surveys are given over the page:



## 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.**

From the four residents who were supported to complete the survey process, only one of them was able to name the Manager, but this could have been due to their individual health and capacity. The one resident who named the Manager stated; “Karl is a good bloke!”

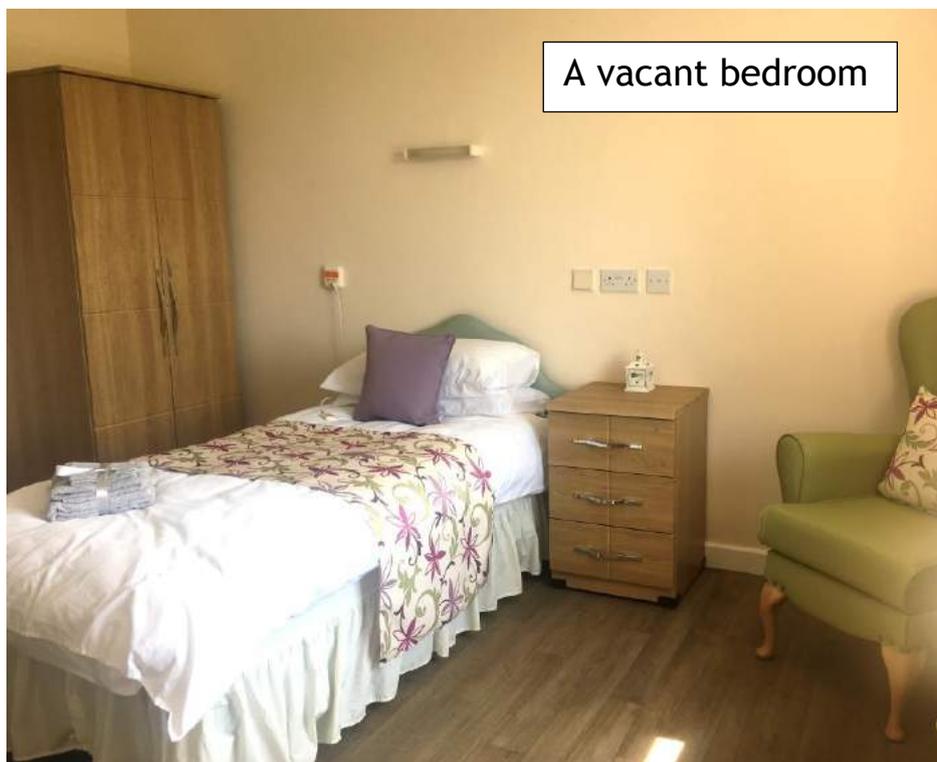
All of the relative respondents could name the Manager of Paddock Stile Manor and when asked to say a little about him, gave the following responses;

“Very knowledgeable of dementia, in particular, and all needs of the residents, running the care home and staff and procedures. Karl is very approachable, gives relatives confidence that family members are being cared for with integrity, care and sensitivity to the best possible standard.”

“Was able to explain some issues we had about dementia. Always visible around the home and located at the entrance. Open nature and very approachable.”

“Very efficient, professional and friendly.”

All staff who responded to the survey stated that they feel supported by the Manager of Paddock Stile and described him as approachable, friendly, a good listener, helps with issues or concerns and very helpful if they have childcare issues. They also stated that his door is always open if they need to see him.





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When the staff were asked about their experiences of talking to the Manager when they want to ask a question or raise an issue, all gave a range of positive comments, which included;

“He is approachable, listens, is understanding and deals with any issues and concerns promptly.”

“My Manager is always keen to help, he has very good knowledge, is very experienced and he goes out of his way to help resolve any issues.”

“My Manager is always there for staff to listen, his door is always open for staff and he is very approachable.”

The Manager informed us what attracted him to the role of Care Home Manager; “I worked as a Deputy Manager at one of the organisation’s other homes and was on a Management Development Programme. I had supported in this home before as a Deputy Manager and liked the feeling of team work and family atmosphere so when a role became available I took the chance and was appointed Manager.”

He went on to tell us what he enjoys about his role; “Working with the residents, their families and friends in the home and working with the staff team.”

During the Healthwatch visit to the home the team witnessed the Manager conversing, laughing and joking with the residents, who all seemed to be familiar, at home and relaxed in his company. He was also observed speaking to one resident who was visibly distressed. He chatted to her, calmed her down and reassured her. The lady headed off on her way to her room in a visibly happier state.

## **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 an AGREE rating for staff time and a STRONGLY AGREE rating for staff skills.**

When the residents who completed the survey were asked about the staff at the home, all gave enthusiastic responses, which included;

“They are nice girls and very fair. They are lovely and I can’t fault them.”

“They have all been good.”

“They are all lovely. The staff here are great.”

When asked if the staff have time to stop and chat to them, all of the residents agreed that they do, and said;

“Yes, they are all very friendly.”

“Oh yes definitely, all depending what they are doing and if they have the time.”



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“They do, yes.”

All three relatives who completed the Healthwatch survey agreed that the staff at the home have the time needed to care for their relatives. Comments included;

“Yes - staff always afford time to dad, even when dad is being difficult.”

“I feel the staff have time to care for dad, they are dealing with human nature, dad can be difficult and staff have to deal with this and do so in a professional manner.”

All also agreed that they feel the staff also have the skills and knowledge needed to care for their relatives. Comments included;

“Yes - on some visits I have seen training taking place. Dad has various needs and training has been undertaken to support this.”

Many positive interactions between the home’s staff and residents were witnessed by the Healthwatch Team during our visit. Staff were present in the communal lounges, chatting and laughing with the residents. There was a relaxed and friendly atmosphere across the home. One visitor to the home said; “The staff here are marvellous. They are really canny and supportive.”

When asked if they feel they have enough time to care for the residents at the home, the staff respondents gave mixed responses. The majority of staff stated that feel they have enough time, and added that as the home delivers 24 hour care, with day and night shifts working together as one team. This means if any tasks do not get completed, they are passed on to the next shift. Staff comments about time included; “Care is 24 hours, so what we can’t get done will be handed over and will be done by the next shift and vice versa.”

The remaining staff members said;

“Not always, as residents needs can vary day to day. More staff would benefit the residents and the staff.”

“Staff moral could benefit from being better and would benefit care for the residents.”

All staff who responded to the survey agreed that they are encouraged to continue to develop their knowledge and skills. They stated that this is done by completing both online and face to face training courses, as well as during supervision sessions. Comments included;

“Yes, I am still learning every day. I have developed my independence and creative skills.”

“Online training is continuous, National Vocational Qualifications (NVQs) are available to sign up to and other training is available upon request or as and when required.”



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All of the staff stated that they enjoy their jobs at Paddock Stile Manor and all put the residents and their colleagues at the heart of their responses. Comments included;

“Paddock Stile is a very friendly place to work. I enjoy talking with residents and their families and we have a very happy workforce that work well together as a team.”

“Knowing we are making life safe and comfortable for the residents who are less able, as well as being able to maintain a degree of independence.”

“Rewarding! Every day and every shift I can go home happy, knowing that I have helped someone in need and making their lives that little bit easier. Knowing that I’ve made a difference to their day.”

The Manager told us how he ensures staff have enough time to care for residents; “We use an Electronic Care Plan System and documentation system, this helps allow the care staff to document information as they work using a handheld device and laptops. This minimises the time spent documenting things and allows more time to be spent with the residents. We use a dependency tool that helps us staff the home to appropriate levels, ensuring the staff have the time they need to care for the residents.”

He went on to tell us how he encourages his staff to develop their skills; “The home has online training and face to face training that is booked by the home Admin and Manager. These help develop the staff team and we provide laptops for the staff to use to complete their training. We also enrol staff on their NVQ’s after 4 weeks of being with the organisation to help with their development.”

### **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 residents were asked if they feel the staff at the home know them, know what they need and what they like and don’t like, one resident said no, the remaining residents said;

“They know us all by our first names. They are not a bad bunch here, they are lovely.”

“We know the staff and they know us, we have both been here a long time.”

“Yes, they know how I like my cup of tea.”

When asked how well they feel the staff know their relative’s life history, personality and health and care needs, all of the responses from relatives were positive and included the following comment; “Staff look for signs and symptoms



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in dad's daily care and know how to make him at ease or when to call a doctor in for a diagnosis of problems. They know dad's idiosyncrasies and humour."

All relatives went on to say that the home also notices and responds to changes in their relative's needs. These are documented and family are informed as soon as possible, during their visits to the home or over the telephone.

When the staff were asked how they get to know a resident's life history, personality and health and care needs when a resident first arrives, they told us that they have conversations with the new resident, their family and friends and any professionals who have been involved in the resident's care. Staff also stated that they read resident's individual care plans. Staff comments included;

"It is my job to find out this information and pass it onto staff. Plus talking to residents is an activity, and it is important to find out this information to build a relationship with residents."

"Talk to resident's families. Ask if they have any preferences, they like; their name, what they would prefer to wear or how they like things to be done. Talk to residents about where they lived, how many children they have and what jobs they did etc."

"Read all care plans, ask any additional information from the Manager and communicate effectively with all members of care staff. Speak to and get to know the individual or ask any family members or visitors about their likes, history and hobbies."

The Manager informed us how he ensures all staff know the home's new residents. He said; "All staff have a handheld device that updates in real time. This is linked to the care plan system so all staff get up to date information. We have seven day handovers in place that take place twice daily at shift change over and we complete in-depth pre-admission assessments involving families and the residents. This helps to implement personal centred care plans, which are reviewed monthly and discussed with families and residents as part of the 'Resident of the day'. We also have a weekly meeting at the care home where the GP, District Nurses, Chiropodist and Care Homes Nurses meet and discuss any changes to the resident's."

Staff went on to tell us how information about a resident's tastes and health and care needs are updated. They stated that this is done by reading updated care plans, keeping Senior Carers informed of changes and if they are unsure, they ensure they speak to either the Manager or Senior Carers.

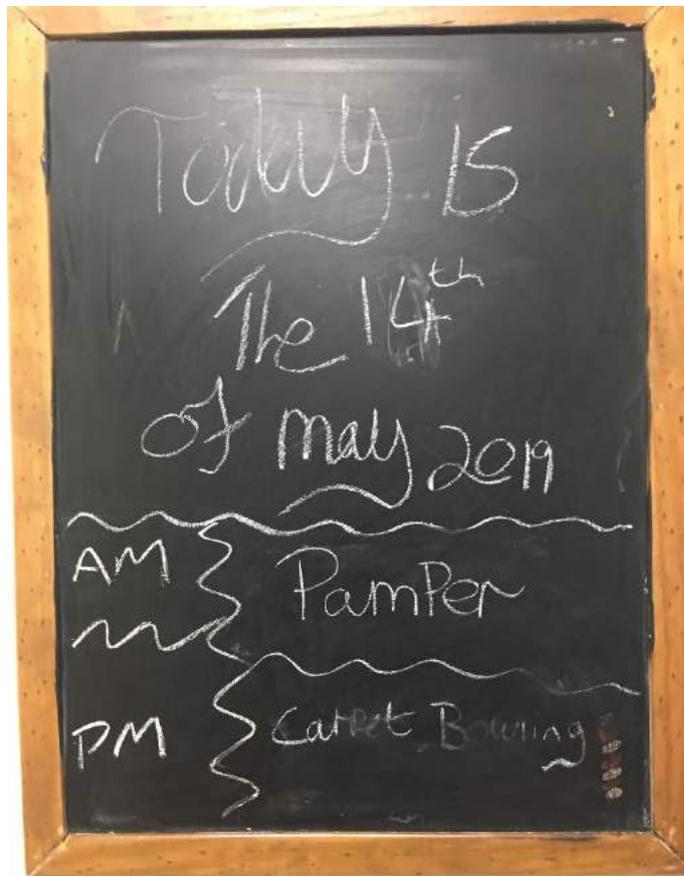
The Manager added; "By using the Electronica Care Plan System which is linked to the care staff's handheld devices. All information is updated monthly as part of 'Resident of the Day' and this is discussed in flash meetings, where all heads of departments meet for 10 minutes every day. This is also done as part of the care review."



#### 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 the Healthwatch Team asked the residents about the activities available to them inside the home, none of them were able to tell us much about them, but this could have been due to their own individual health and capacity. One resident said; “We like listening to the radio and have a bit of a sing-a-long. We like it here, we can do what we like and please ourselves. It’s a canny place and everyone knows each other.”

This was witnessed by the Healthwatch Team as the two residents were happily sitting in one of the communal lounge areas, singing along to the radio.

When asked about trips and outings, all residents were able to

tell us about at least one outing they had taken part in, comments included;

“I have been to the seaside three times and I thoroughly enjoyed it.”

“Sometimes we go out. We recently went to Seaham, I liked that.”

“Yes, we went to a trip to Newcastle.”

All of the resident respondents said that it is easy for them to join in the activities. Comments included;

“Yes, the girls come and tell you when things are going to start. They are all good with everyone.”

“We are very welcome to join in. The girls are lovely. They are a nice bunch and I speak as I find.”

All of the residents agreed that the garden at the home is somewhere which they like to spend time when the weather is nice.



The enclosed garden

During our visit we witnessed a group of residents, alongside family members sitting outside in the sun, wearing a variation of sun and special occasion hats. The group were taking part in a quiz, which was being facilitated by the Activities Coordinator, who had also applied sun cream for the residents to protect them from the sun. The group were all taking part and enjoying a laugh together.

When the residents were asked if they are still able to enjoy past hobbies and interests, one resident stated that they have never really had any hobbies. Other comments included;

“I like to garden and also complete jigsaws.”

“I have my music, which I like to have on in the background and I also like to sing along.”

All of the relatives who completed the survey process indicated high levels of satisfaction when asked about the activities available to residents, both inside and outside of the home. Comments included;

“Good activities and dad joins in with some which he wants to. There are a variety of crafts, singing, fun nights/afternoons, planting, family events, physical seated aerobics, to name just a few. He has been on outings in the mini bus to the coast, out for meals and walks to see the local area.”



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Relatives went on to tell us how the staff at the home encourage their relatives to join in the activities;

“Gently coaxed, but if she doesn’t want to participate, she is not pushed into it.”

“Staff engage with dad and encourage his participation.”

“Asked their wishes, encouraged by offering resources and on special occasions, upstairs and downstairs, residents are all together to join in e.g. singer/performer afternoon.”

Two of the relatives informed us that their family member is no longer able to enjoy past hobbies and interests, but this is due to their own individual health and capacity. One relative added that their relative does however still enjoy watching TV, listening to the radio and discussions. The remaining relative stated that their relative is still able to enjoy their hobbies.

When staff were asked about the activities which take place inside the home, they gave the following list; live music, bingo, quizzes, dominoes, knitting club, movie day, pamper sessions, exercise classes, trips out, themed events, fundraising, parties, catch the balloon, parachute games, men’s clubs, cooking, arts and crafts, gardening, carpet bowls, flower arranging, seasonal crafts, card making, singing, reminiscence sessions and pet therapy.

When asked about activities outside the home they listed; outings on the Oomph bus (Oomph offer exercise classes, creative activities and trips out to enhance mental, physical and emotional wellbeing in care homes and the community), going out with family and friends, shopping trips, walks outside, trips to the coast, museum, National Glass Centre and occasional afternoon teas.

The Manager was asked about the range of activities and said; “We have an enclosed garden that is secure with doors that lead from the lounge. This allows the residents to walk freely in and out of the garden. We use the Oomph Out and About Service, that helps us get the residents out into the community. We also have an Activities Co-ordinator that plans activities with the residents. An Activities Assessment is completed upon admission to the care home with the residents which helps to plan activities.”

When the Manager was asked if the home has access to its own transport and able to use this for trips and activities outside of the home, he said; “The Home uses the Oomph Out and About Service that allows us to take the residents out on trips.”

The staff and Manager went on to tell us what encouragement and assistance is given to residents so can take part in activities. This includes making activities interesting and fun, including activities which the residents or their family members have informed staff that the residents enjoy, giving residents a choice of activity, ensuring activities are accessible and by staff offering support to residents when required.



The Manager added “We encourage families and care staff to support the residents when taking part in activities. There are different activities daily and staff are available to ensure all residents are included.”

The Manager and the Activities Co-ordinator explained how residents are supported to continue to do the things they used to enjoy before coming into the home including hobbies/interests/pets. They said; “Look at the resident’s life history and see what activities they used to enjoy or ask them so you can plan activities they enjoy.” (Activities Co-ordinator)

“This is all included as part of the Activities Assessment and all staff can see this information using their handheld devices. This is updated monthly as part of ‘Resident of the Day’ and also included as part of the pre-admission process.”



During the Healthwatch Team visit there was a party taking place on the top floor of the home in one of the communal lounges. This was to celebrate the birthday of one of the male residents and also his wedding anniversary to his wife who was present, alongside some of their friends and other residents. Attendees were enjoying cake, hot drinks and small bottles of beer were also available to those who wished to partake. The room had been decorated for the occasion and the gentleman had been taken to the shops that morning to buy his wife a bunch of flowers, which she stated she had not expected.

One main lounge was decorated for the celebration

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

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

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

All of the resident respondents indicated high levels of satisfaction when asked about the food at the home. Comments included;



“The food is great. There are lots of things which are my favourites and they are really good to us.”

“I haven’t found any problems here and food is decent.”

Residents went on to say that they are able to choose what they eat at mealtimes from the menu. One resident went on to say that the kitchen staff would make her an alternative if there is nothing on the menu she likes.

They added that they mostly eat their meals in the communal dining areas of the home and that they all look forward to mealtimes. Comments included;

“Ah yes, we love our food.”

“Yes, I just like my dinners. They do good meals for us - I couldn’t fault them!”

All three relative respondents gave positive comments when asked about the quality and choice of food available at the home. Two relatives added that their family members have special dietary requirements and that these are catered for. One also commented; “The flexibility is excellent. If residents want to have a lie in, breakfast is provided when they get up, after the meal has finished.”

All respondents went on to say that they are confident that their relatives are supported to eat and drink as much as is needed.



When asked how the home ensures that mealtimes are sociable, we received the following comments;

“Everyone is encouraged, but not forced to eat in the dining room.”

“As much as possible residents sit and eat together.”

“All residents sit together in the dining room and staff support them. It’s good to see a couple of people who are good at talking dad to ‘eat up’ and making sure that each other have coffee, even though staff are serving.”

When staff were asked what they think about both the quality and choice of food available to residents, two respondents did not answer the question, one said; “Quality is reasonable.” The remaining staff stated that the quality is either good or outstanding. All respondents stated that residents are given choices at mealtimes and alternatives are also available to those who need them.

When we asked the Manager how he ensures high standards of quality and choice of food, he said; “We offer two to three options at mealtimes and encourage protected mealtimes and encourage the residents to make their own choices from a daily menu. The menu has pictures to help the residents make a choice. The food is sampled daily by either myself or my Deputy and we have external auditors visit the home that take part in a mealtime experience and give feedback on improvements. All food is made on site and fresh.”





Staff stated that residents are encouraged to eat and drink both inside and outside of mealtimes by encouraging them to eat small amounts and not overloading their plates. By using the picture menus to ensure that residents get the food they want. They encourage the residents who can feed themselves to do so and support those who need it and facilitate unhurried mealtimes. A range of snacks and drinks are always available in the communal areas. Resident food and fluid intake is monitored.

The Manager told us what systems are in place to support residents to eat and drink at mealtimes and outside of mealtimes; “We have Kitchen Special Dietary Consolidation in place in both dining rooms. This provides information to care staff regarding support needs for the residents. All care staff have a handheld device that provides information on the resident’s dietary requirements. This is updated monthly or as often as needed as part of ‘Resident of the Day’. All information and changes to resident’s dietary needs are then passed onto the kitchen staff in flash meetings.”

When staff were asked what choices residents have about what and when they eat and drink, they stated that this is very flexible and down to the choice of the resident. There are snack boxes available in the lounges, jugs and cups for juice out at all times and tea and coffee are available at any time. Comments included; “Residents come first where I work! There are set times, but these are very flexible. If a resident decides they want something which is not on the menu, the kitchen staff will go out of their way to make it.”

The Manager added; “Mealtimes are flexible and residents will be offered meals/snacks at alternate times if they do not want to eat at mealtimes, taking into account dietary requirements and health care needs.”



‘Help yourself’ snack boxes



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Staff stated that residents can choose both where and when they eat their meals and their preferences are documented in their care plans. Comments included; “We encourage residents to be as independent as possible. They have choices where they would like to eat a meal e.g. dining room, bedroom or lounge.”

“Residents have a choice where they would like their meals, but are encouraged to eat in the communal dining room with fellow residents.”

The Manager added; “This is discussed as part of ‘Resident of the Day’ and is incorporated into care plans and assessed and reviewed daily. Residents are asked daily where they would like to eat their meals and are offered alternative arrangements to support their preferences.”

The Manager also informed us that there are drinks and snacks stations in both lounges for residents to take as they like. All items are all individually wrapped for infection control purposes and tea trollies do the rounds three times a day.

When asked how they ensure mealtimes are sociable, staff stated that this is facilitated by background music being played, general conversations taking place between staff and residents, and between residents who can also choose where they would like to sit. The Manager said; “We encourage residents to use the main dining room at mealtimes. We also allow families to have meals with residents, as long as notice is given. All care staff and senior staff take part at mealtimes and we also promote protected mealtimes for residents.”

During our visit to the home, the refreshment trolley was being taken around the home, by a member of the staff team. Residents were invited to have either a hot or a cold drink and a piece of cake. In the communal lounges of the home there were small baskets of snacks readily available for residents to help themselves to. These comprised of wrapped chocolate bars and biscuits, bananas and tangerines.

## **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 residents were asked about their access to a range of healthcare professionals, some were able to say that they had recently seen a Chiropodist and an Optician. One resident said that they couldn’t remember seeing a Dentist, although they added that if they had any pain they would be out in a shot. Another resident stated that they had their hearing checked prior to their admission to the home.

Residents told the Healthwatch Team that if they need to see a Doctor they would tell either the staff or their family members and this would be arranged for them.



One resident stated that they see the Doctor who visits the home regularly. If they had a hospital appointment, one resident said that their family would accompany them to hospital appointments, two residents agreed that they would be escorted to hospital appointments by the home's staff.

When relatives were asked about their relative's access to healthcare professionals, all gave a range of positive comments, which included;

“Access is very good.”

“Doctors visit each week and also in between when called. The Nurse visits daily and the Chiropodist weekly.”

When staff were asked about the resident's access to healthcare professionals, they informed us that a range of professionals visit the home on a Tuesday each week, to both see and discuss resident's health. Senior Care Staff liaise with the medical visitors and all information is documented into residents care plans. The Manager added; “The home has its own Chiropodist and its own link GP. We hold a meeting in the home every Tuesday where all professionals attend; Nurses, GP, Chiropodist and Care Home Nursing Team. This allows access for all of the residents and families to see a professional at least once a week minimum if needed. There is a Multi-Disciplinary Team (MDT) meeting here once a week which has led to a reduction in hospital admissions. We also have an electronic system that is linked to the Optician and this helps us book appointments and ensure all residents are seen when needed.”



Assisted bathroom



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

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

Some of the resident respondents were able to give us an insight into the way in which Paddock Stile Manor accommodates their personal, cultural and lifestyle needs. One resident stated that although she considers herself to be Church of England and has seen religious services taking place in the home, she no longer wishes to practice her religion. Three of the residents told us that they have their hair cut and styled by the visiting hairdresser. One resident commented; "The hairdresser comes in here and I am happy with her." Another resident stated that the laundry system at the home is good, that she is happy with her washing and that the staff are brilliant!

One relative stated that their family member has no specific cultural, religious or cultural needs but added that there would be no restrictions at the home.

The two remaining relatives stated that their family member had received visits to the home by members of the clergy. They went on to indicate that the home respects and accommodates these needs.

All of the relatives were aware that there are weekly visits to the home by a hairdresser and all gave positive responses when asked how good the laundry staff are at getting their family members clothing back to them after the laundering process. They all went on to say that their relatives are always clean and appropriately dressed.

When staff were asked how the home caters for a resident's religious and cultural needs they stated that any religious visitors are welcomed into the home to enable resident's to continue to practice their religion of choice. Also special dietary requirements are accommodated and respected.

The Manager informed us how the home finds out about and caters to residents' cultural, religious and lifestyle needs; "This is done as part of the pre-admission process and as part of the activities assessment. It is reviewed monthly as part of 'Resident of the Day' and action can be taken to support residents cultural and lifestyle needs."

He went on to give the following examples of how these needs have been accommodated;

- "Some of the female residents only like female care staff, so this is accommodated by the allocation of staff.
- One Resident likes to go to an Age UK Club four days a week and we ensure that she is supported to do so.



- One resident does not eat meat, so we ensure alternatives have been made for him to maintain a well-balanced diet.”

The Activities Coordinator explained that she tailors the activity schedule to meet the resident’s religious and cultural needs by asking all of the residents about their individual needs and ensures any seasonal religious celebrations are celebrated within the home.

The Manager informed us what provision there is for residents to regularly get their hair cut/styled; “We have a home Hairdresser that visits every Monday to allow regular access for the residents. They will also attend the home if called for special events if needed.”

The Manager stated that the home currently has one full time Laundry Assistant and one part time Laundry Assistant to help manage the laundry. He ensures that the laundry staff get the residents own clothes back to them by asking all families to name clothing before bringing it into the home. This is followed up by laundry staff if names come off clothing.

He went on to tell the Healthwatch Team what mechanisms are in place to ensure that residents are always clean and appropriately dressed; “There is a daily Manager’s walk round and night visits to help check residents are appropriately dressed and all residents have a care plan in place that informs staff of how they like to dress. This information can be accessed by the care staff on their handheld devices.”

## **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.

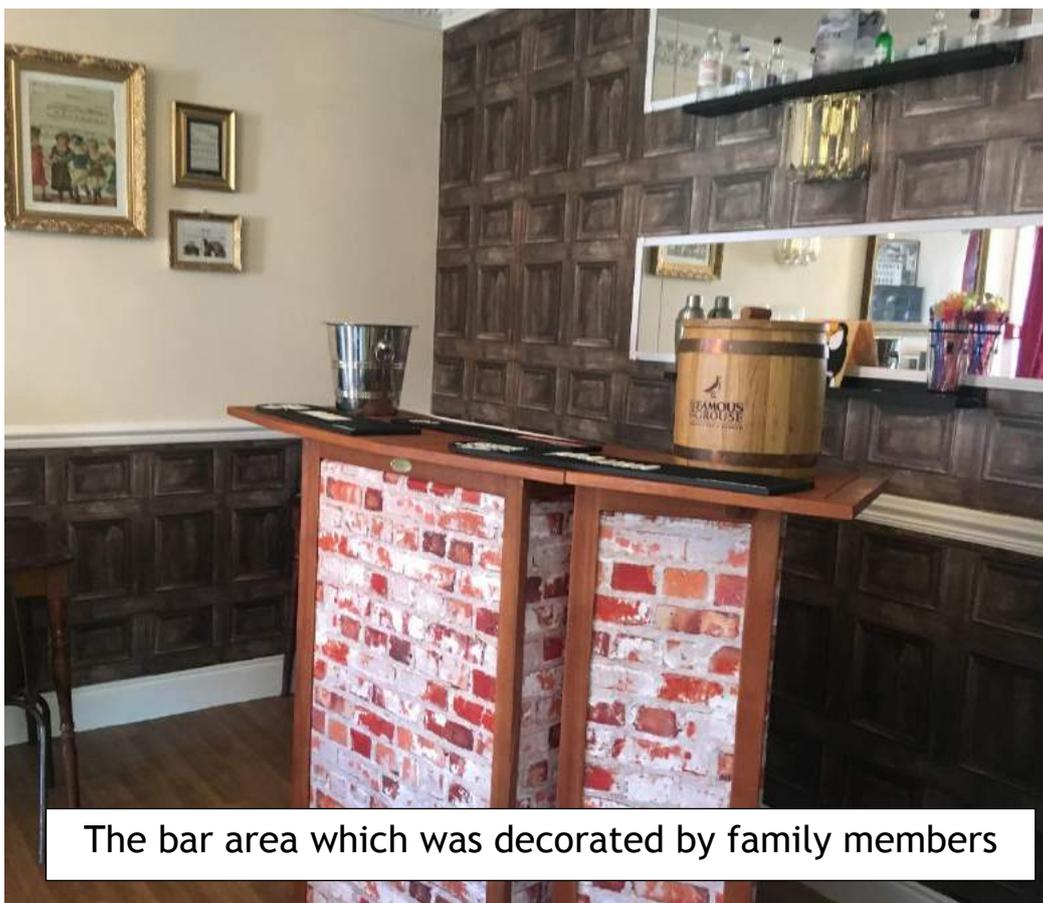
**The Healthwatch team STRONGLY AGREE this was met.**

When asked if they ever get asked what it is like to live at the home, only one person stated that their family ask them. Although all of the resident respondents stated that they are indeed happy living at Paddock Stile Manor. Their comments included;

“I’m happy here.”

“We are totally happy here. We have everything we want, including our friends. We are not restricted here, they’re a canny bunch.”

“Everything is great!”



The bar area which was decorated by family members

All residents went on to say that if they ever had cause to complain about anything at the home, they would either speak to a family member or a member of staff. Comments included;

“I would tell my daughter and she would approach the Manager.”

“I would speak to someone here and let them deal with it. We have never had any problems though.”

All of the relative respondents to the survey stated that they feel welcome participants in the life of the home, with one person adding; “Absolutely, no complaints and if there was I know it would be addressed by Karl, the Manager.”

They went on to say that they and their family members can have a say on how the home is run, by speaking to the staff or Manager or by adding a comment to the available suggestion box. One person said; “I would feel comfortable speaking to the team.”

When asked how they would make a complaint about any aspect of the home, management or the staff, we received the following comments from relatives;

“Talk to staff.”

“Go directly to Karl Fazakerly (Manager) and if necessary to Head Office, but I’m confident that this will be unnecessary.”

“Directly to Karl - don’t think it would be necessary to go further.”



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All went on to say that they would feel confident to make a complaint and would also be confident that it would be acted upon appropriately. One respondent said; “Yes to both, and it would be dealt with sensitivity and in-house.”

Staff informed us that residents and their families can have a say on how the home is run by attending regular resident and family meetings, the Manager has an open door policy so that families can raise any issues, ideas or concerns as and when needed and families can have their input into the resident care plans or by completing questionnaires. The following example of how family feedback was used was given; “The Manager contacts family members at least once a month to discuss their loved one’s care.”

The Manager said; “We have resident and relatives meetings every two months. We have an open door policy for all visitors to the home, to enable them to discuss the home with the Manager. We complete monthly surveys with the residents and families to give us feedback and an action plan is made up to address any concerns.”

The Activities Coordinator stated that residents and their families can have a say on the activities which are provided in the home. Suggestions can be left in the home’s suggestion box, she chats with family members and has ensured she has built up a relationship with residents and their families, so they can approach her with suggestions. She gave an example of how feedback has influenced the provision of a new activity; “One of the resident’s family members suggested the Alzheimers Cup Cake Day, and we are planning to undertake this. Another family member mentioned that their dad enjoys Bagpipes, so we celebrated Burns Night and had a Bagpiper come in.”

She went on to say that activities are evaluated to ensure that residents are still enjoying them by trying a lot of different activities and if the residents say they don’t enjoy an activity she will try to ‘change them up’. She went on the say; “The residents here don’t like exercise, so we do swat the balloon and carpet bowling, which they do enjoy.”

The Manager informed us how he makes use of feedback or complaints from residents and relatives; “This is discussed with all staff at staff meetings and ‘flash’ meetings as part of a ‘lessons learned’ process to help improve the quality of care, so we do not make the same mistakes twice.”

Staff stated that they can have a say on how the home is run by attending regular staff meetings, supervisions, appraisals and during one to one meetings. They also said that they can go to the Manager at any time with ideas or suggestions.

The Manager added; “We have staff meetings in the home and daily ‘flash’ meetings. We have regular supervisions, which allows staff to have their input in the running in the home. I also have an open door policy to enable staff to communicate ideas to me.”



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## 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.

All but one of the resident respondents (who didn't answer the question) spoke passionately when asked if the home is always clean and tidy. Their comments included;

“Always, they make sure that it is!”

“Exceptionally - I couldn't knock it! Spills are cleaned up straight away. The staff here are super.”

All of the residents stated that the temperature in the home is always at a suitable level for them.

All of the relative respondents informed us that the home is always at a comfortable temperature, it can be a little warm in the better weather and that the heating is controlled and windows are opened when required. All agreed that the home is always hygienically clean and any mess is cleaned up quickly and that the home also well decorated and well maintained.

When asked if they feel the home is a dementia friendly environment, all relatives agreed this to be the case, with one person adding; “I would recommend whole heartedly for residents with dementia.”

Staff informed the Healthwatch Team how the home is a dementia friendly environment. This included;

- Staff undergoing up-to-date dementia training
- Colour coded doors
- Coloured toilet seats
- Coloured plates are used, which also have lips on them to prevent spills
- Coloured hand rails are used
- Visual stimulation is used
- Pictures and signage are used along the corridors
- Stairwells and lifts are key coded
- Dementia friendly activities are provided

One staff member said; “To always be welcoming and to have time to chat with our residents with dementia who sometimes need that little bit extra time to express what they want us to know.”

The Manager informed us that a comfortable temperature is maintained in resident's rooms and all communal areas, by a daily Manager walk around being undertaken. This enables him to check the environment of the home, ensuring it is correct. Every room has their own temperature control which can be changed to

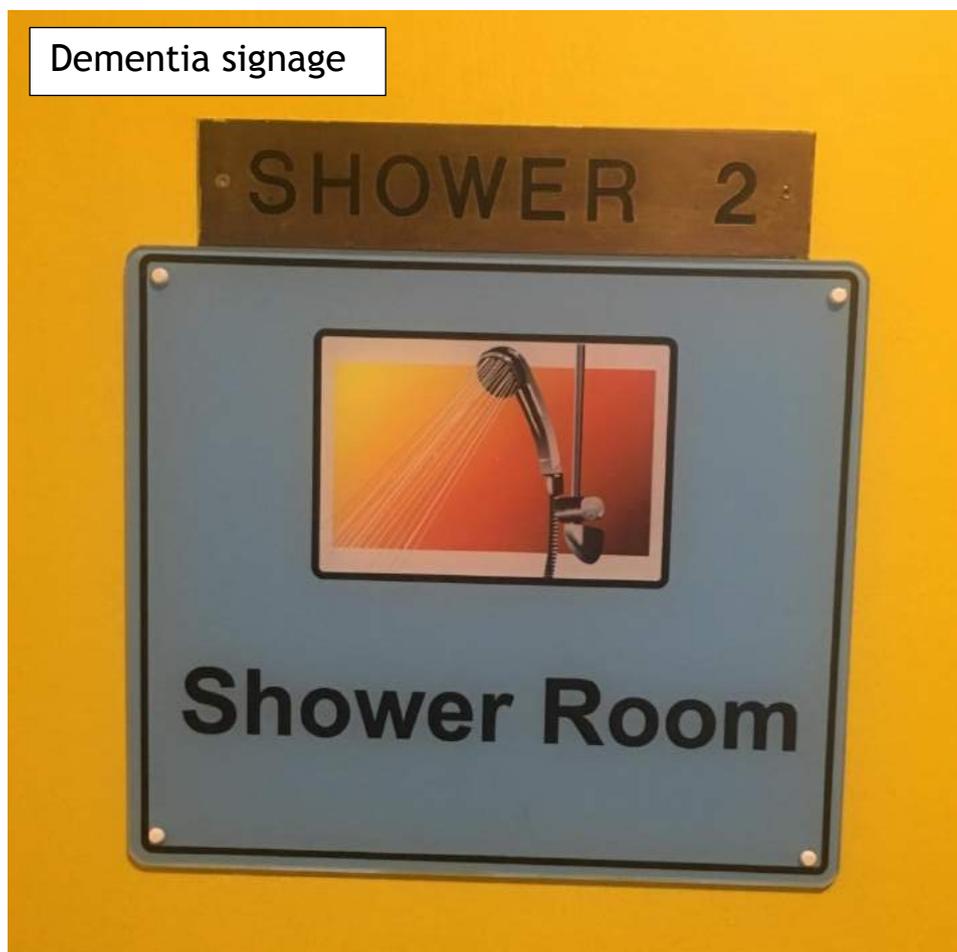


the residents liking. Thermometers are present in the communal areas and this is evaluated weekly as part of routine checks.

He added that he ensures the building and its contents are well maintained and decorated throughout by the home's maintenance person carrying out a weekly check and as part of the daily 'flash' meeting, where the environment of the home is also discussed. This is also assessed during the Manager's walk around. All faults are reported on an electronic system and jobs sent out to the maintenance person as needed. There is a full monthly check completed by the maintenance person and as part of the quality auditing system.

The Manager went on to tell us how he ensures that the home is always hygienic and clean; "We complete infection control audits every three months and smaller audits monthly. A daily walk around is completed and cleaning schedules are completed by our domestic staff and we have external quality monitoring staff do checks on the home.

During our visit the Healthwatch Team noted that Paddock Stile Manor appeared to be clean with no apparent odours throughout the building. The décor was light and bright, with a rolling programme of renovation being underway. During our tour of the building the Manager showed us several newly decorated rooms, which included vacant resident rooms, which had been furnished with coordinating items, which had been chosen by the home's Domestic Team.





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## 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?



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## 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?



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## 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?



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## 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?



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## 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?



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**DISCLAIMER:**

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

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