

Care home life, what it's really like!

Primrose Care Home



Date of Healthwatch Sunderland visit:
27th 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.



Table of Contents

1. Introduction	3
2. Background and rationale	4
3. Methodology	5
4. Findings - Summary.....	6
5. Appendices.....	15
Appendix 1 - Questions for residents	15
1 - Questions for residents	15
Appendix 2 - Questions for Managers	16
Appendix 3 - Questions for staff	17
Appendix 4 - Questions for friends and relatives	18



1. Introduction

What is Healthwatch?

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

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

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

We achieve this by:

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





2. Background and rationale

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 Manager, Kelly was held at Primrose Care home. 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 27th March 2018 and was carried out by Healthwatch Sunderland staff 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



Strongly disagree



Disagree
















Neutral



Agree



Strongly agree

1.	A strong visible management	 Strongly agree						
2.	Staff with time and skills to do their jobs	<table border="0"> <tr> <td>Time</td> <td>Skills</td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td>Agree</td> <td>Strongly agree</td> </tr> </table>	Time	Skills			Agree	Strongly agree
Time	Skills							
								
Agree	Strongly agree							
3.	Good knowledge of each resident and their changing needs	 Agree						
4.	A varied programme of activities	 Neutral						
5.	Quality, choice and flexibility around food and mealtimes	 Agree						
6.	Regular access to health professionals	 Agree						
7.	Accommodation of resident's personal, cultural and lifestyle needs	 Agree						
8.	An open environment where feedback is actively sought and used	 Agree						



Findings

Primrose Care Home is an independent care home based on 62 Station Road, Hetton-le-Hole, Houghton-le-Spring, Sunderland, DH5 0AT. The home is over two floors with a communal lounge, conservatory and dining area located on the ground floor.

The latest CQC report can be found here:

<http://www.cqc.org.uk/location/1-146803738> although the provider has changed since its publication.

The home provides care for up to 21 people (some rooms with en-suite facilities) and provides care for those with dementia or general care needs.

At the time of our visit there were 18 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch team were only able to support 2 residents to fully complete the survey and 1 to partially complete the survey. The team received 8 staff and 1 relative survey 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 who the Manager of the home was two of the residents had difficulty identifying her, but this may have been due to their own individual health or capacity. The third resident was able to tell the Healthwatch team that the Manager was new to the home and that they liked her and they felt that they could tell her anything. The Healthwatch team witnessed positive interactions between the Manager and the residents, where she addressed them all by name and made conversation as she introduced them to the team.

The relative who completed the survey was able to identify the Manager by name and said, “Kelly keeps us informed of what is going on with our relative. She is very approachable.”

All staff who completed the survey responded positively when asked if they received support from the Manager, they also stated that any support they need is given. Comments included;

“Management have always been seen on the floor. I’ve only worked here a short time but support has been fantastic.”

Staff went on to say that when speaking to the Manager or raising an issue she is a good listener, easy to talk to, approachable and she operates an open door policy.

“The Manager is easy to talk to and always helps to resolve any issues that I may have raised.”



The Manager stated that she was attracted to the role of Care Home Manager after she recently left University and wanted a new challenge. She added that she enjoys the role as she likes seeing the residents cared for with dignity and respect.

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

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

The Healthwatch team AGREE this was met for staff time and STRONGLY AGREE this was met for staff skills.

All of the residents who completed the survey commented positively about the staff saying they are lovely, considerate and very nice. They also added that staff do have time to stop and chat to them but also acknowledged that they are always busy.

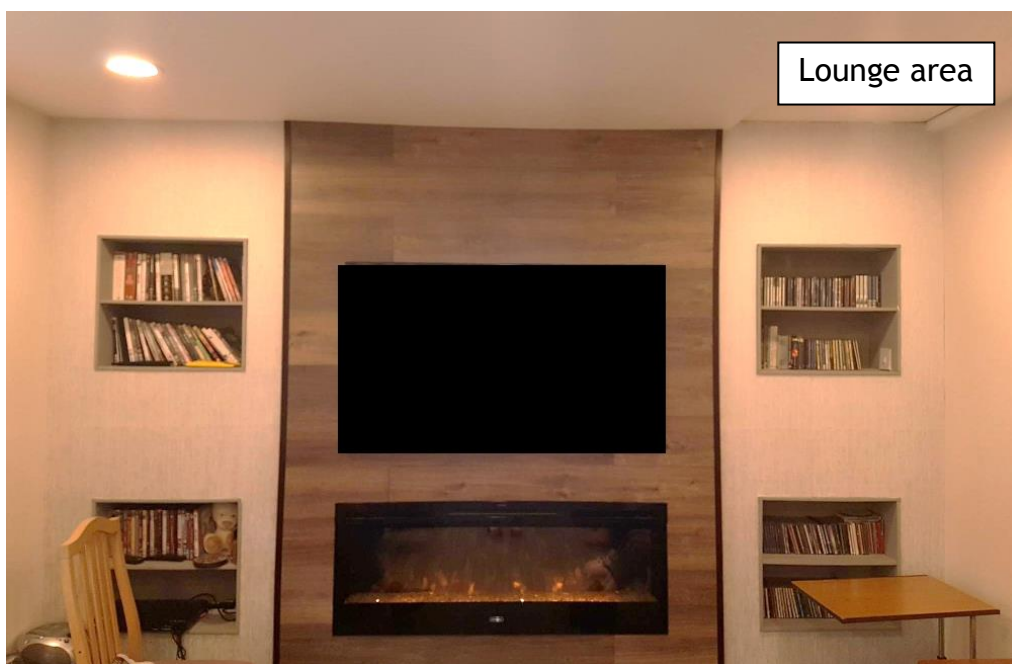
The relative who completed the survey when asked about staff having the time to care for their relative said, “Sometimes feel as if there isn’t enough time and not enough staff.” The relative failed to answer the question about staff having the skills to care for their relative.

When asked about having enough time to care for residents the majority of the carers felt that they did and their comments included;

“We make time for our residents.”

“I do feel there is enough time to care for residents.”

Only one care member of staff felt they didn’t have enough time, “No some residents take a lot more time than others and this leaves little time for other residents.”





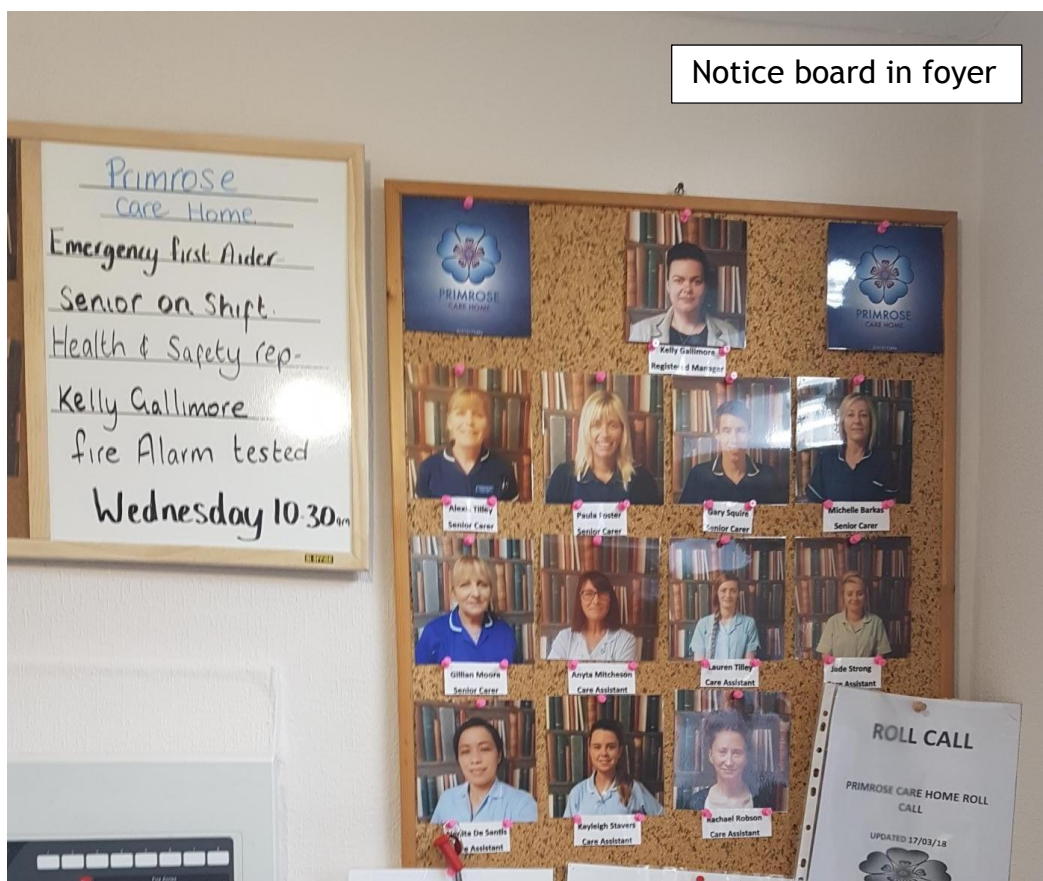
All staff commented that they are encouraged to take part in training and there is a wide choice available. They complete mandatory training but also have options to participate in additional training that is of interest to them and are supported to do this. All staff commented that they really enjoyed their job, remarks included;

“I enjoy talking to the residents.”

“I enjoy being able to enhance the lives of our residents and put smiles on their faces.”

“I enjoy knowing the home is a safe and clean place to live and feels homely. Knowing that the residents are happy, cared for and content”.

The Manager informed us that she encourages staff development by holding regular supervisions and daily chats. She also ensures that staff complete mandatory training via e-learning. She added that she ensures staff have enough time to care for residents using dependency assessments and being on the floor whilst working.





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 AGREE this was met.

All residents we spoke to felt that the staff knew them and knew their likes and dislikes. The relative completing the survey stated that they weren't sure about how well the staff knew their relative but did state that should there be any change in their relative's need that they are informed of this and a discussion takes place with them.

The staff and Manager stated that a good knowledge of the residents is built up by accessing care plans, talking to residents and their families and any care professionals involved in their care to learn as much information as possible. This information is continually updated, led by senior staff and management then communicated in the new online handover page, communications book and the home holds a likes and dislikes file for every resident's food preferences.

Indicator 4 - A varied programme of activities

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

The Healthwatch team gave this a NEUTRAL rating which indicates both positive and negative feedback, which when averaged results in a neutral score.

When the Healthwatch team spoke to residents about the activities in the home two of the residents stated there wasn't any activities provided in or out of the home. The third resident said that an activities lists is put up on the notice board to inform you of what is available and staff will remind him when something is about to start, but he didn't take part very often. He went on to tell us that he preferred to watch the TV in his room, where he can choose what to watch rather than going down into the communal lounge area.

The relative who completed the form stated that there wasn't enough activities to keep the residents stimulated but their relative does get asked if they want to join in when there is something taking place.

Staff and the Manager informed us that there is a range of activities taking place in the home including bingo, cards, events, baking, church visits, entertainer, arts and crafts, reading and films etc. Outside the home residents go on shopping trips, to the seaside, park, coffee shops and cinema etc. Staff went on to explain that residents are encouraged to take part in activities by being offered encouragement and reassurance and practical support to take part in the activities when necessary.



They went on to say that they support residents to continue doing the things they used to enjoy before coming into the home by creating events for the residents in areas that they are interested in and adapting where necessary.

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.



When asked about the food at the home, all the residents the Healthwatch team spoke to stated that they enjoyed the food and they were given two choices at mealtime to choose from. Comments included;

“It’s like a hotel the food is always lovely and you always get options”

“I like the hot dinners, the cook does a good job.”

All residents stated they had a choice to eat in their room or dining area but all choose the dining room as they felt this was a more sociable experience.

The relative who responded to the survey stated that they hadn’t seen the food themselves but her relative is always saying they are sick of the dinners.

Staff informed us that food at the home is all home cooked and freshly made, with a menu that varies daily. Residents are offered a choice of two meals and if they don’t like either choice they can request something different. They can either choose to eat in their bedroom, lounge, conservatory or dining area and mealtimes are protected (a period of time when activity is reduced so staff can be available to help serve and supervise meals and assist residents who need help to eat and drink. This time also includes limiting visitors). Staff explained they make mealtimes sociable by sitting with residents and starting conversations that residents can join in with. They also ask residents who they would like to sit with. Outside of mealtimes staff inform the residents that they can request refreshments when they like and they monitor food and fluid intake which is charted.



During the Healthwatch visit we witnessed staff offering drinks and refreshments to residents on an ongoing basis and the Chef informed residents that they were having chocolate eclairs for their dessert, which all residents present appeared to look forward to.

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.

Two of the residents we spoke to stated that they have had several visits from health professionals since living in the home, including the optician, dentist and chiropodists. The third resident was unable to answer this question, this may have been due to their own individual health and capacity. One resident went on to say that should he need to see a GP he only needs to mention it to the staff and it will be arranged straight away. The relative who completed the form reiterated this and said that the home will ring any of the health professionals on behalf of their relative, as and when required.

Staff and the Manager informed us that Healthcare professionals come to the home on a regular basis. The doctors and district nurses visit on a daily basis or when requested and chiropodists and opticians are scheduled to visit the home at least every 12 weeks, but also make other visits when needed.

During the visit the Healthwatch team witnessed a district nurse visiting the home to tend to a resident and the patient transport service was escorting a resident to a medical appointment.

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

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

The Healthwatch team AGREE this was met.

During our visit the Healthwatch Sunderland team noted that residents were appropriately dressed and their clothes were clean. Gentlemen were shaven and all residents' hair was clean and well kept.

All residents felt that their religion and culture was respected. One resident commented that she goes to church on a Sunday and two of the residents stated the laundry system is good and that 'the girls' help them to shave.



The relative who completed the survey mentioned that the hairdresser comes into the home on a regular basis and her relative is always kept clean. They went on to state that the laundry system isn't very good and their relative's clothing goes missing or they are given other residents items.

During the visit the Healthwatch team witnessed the hairdresser at the home. She was sitting with the residents and encouraging them to join in with a sing-a-long.

Staff and management informed us that the home caters for residents religious and cultural needs by firstly speaking to residents and their families

to find out their likes and dislikes. They can also arrange visits to the home from members of the church, or staff can accompany residents to local churches if the resident prefers. The Manager also stated that the home has a visit from a hairdresser every Tuesday and they ensure that residents are always clean and appropriately dressed by marking up each residents clothes and providing a laundry basket in each resident's room. The home tracks resident bathing by using a personal hygiene chart which is available to keep staff updated.

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 speaking to residents the Healthwatch team asked them if staff ever asked for their feedback about the home, two of the residents were unable to answer



the question, this may have been due to their own individual health and capacity and the third resident said that they hadn't but there was no reason to as the staff would know if he wasn't happy. He also added "I would recommend the home to friends if they were to ask, it's nice and small."

When this resident was asked what he would do if he wanted to make a complaint he said he would speak to Kelly, the Manager or one of the care staff and if he ever needed attention they are there straight away. The other two residents were also able to tell the Healthwatch team that they would either go the Manager or staff if they weren't happy.

The relative who completed the survey said they felt welcome in the home and said that there are family meetings occasionally where they and their relative can have their say in how the home is run and give feedback. When asked about how to make a complaint and if they felt confident that the complaint would be acted on appropriately they answered they were unsure.

The staff and the Manager told us that the home holds monthly residents and relatives meetings and can always talk to a member of staff or management if anything arises.

The Manager added that they use feedback and complaints as a learning curve. Although they rarely get complaints, they follow company procedure and inform the complainant of the outcome and ensure they are happy before the complaint is signed off.

Staff added that they feel they can have their say about how the home is run and can put ideas for improvements forward which are taken seriously, never ignored and that staff respect each other's ideas.



5. Appendices

Appendix 1 - Questions for residents

1 - Questions for residents

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



Appendix 2 - Questions for Managers

1. **Have strong, visible management**
What attracted you to the role of care home manager?

What do you enjoy about the role?
2. **Have staff with time and skills to do their jobs**
In what ways do you encourage staff to develop their skills?

How do you encourage staff to develop their skills?
3. **Have good knowledge of each individual resident and how their needs may be changing**
How do you ensure that staff get to know a resident's life history, personality and health and care needs when the resident first arrives?

How is information about a resident's tastes and their health and care needs updated as these change?
4. **Offer a varied programme of activities**
What activities are available for residents inside and outside the home?

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

How do you support residents to continue to do the things they used to enjoy before coming into the home i.e. hobbies/interests/pets
5. **Offer quality, choice and flexibility around food and mealtimes**
What systems are in place to support residents to eat and drink at mealtimes and outside of mealtimes?

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

In what ways do you try to make mealtimes sociable?
6. **Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists**
Please tell us about visits from health professionals such as GPs, nurses, dentists, opticians, chiropodists or other health care support mechanisms.
7. **Accommodate residents' personal, cultural and lifestyle needs**
How does the home find out about and cater to residents' cultural, religious and lifestyle needs? Can you give an example?

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

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

What mechanisms are in place to ensure that residents are always clean and appropriately dressed?
8. **Be an open environment where feedback is actively sought and used**
In what ways can residents and their family have a say in how the home is run?

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

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



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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