

Care home life, what it's really like!

# St George's Residential Care Home



Date of Healthwatch Sunderland visit:

5<sup>th</sup> February 2018





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## Acknowledgements

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



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## 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.





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## 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, rather than safety, 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.



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### 3. Methodology

An initial pre-visit meeting with the home Manager, David was held at St George's Residential 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 5<sup>th</sup> February 2018 and was carried out by Healthwatch Sunderland staff and volunteers who are trained so that they can effectively capture the resident's experience.

At the visit residents were asked a range of questions via a set questionnaire (see appendix 1). The questions were 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	<div>Time</div>  <div>Skills</div>  Agree      Strongly agree
3.	Good knowledge of each resident and their changing needs	 Strongly agree
4.	A varied programme of activities	 Agree
5.	Quality, choice and flexibility around food and mealtimes	 Strongly agree
6.	Regular access to health professionals	 Agree
7.	Accommodation of resident's personal, cultural and lifestyle needs	 Strongly agree
8.	An open environment where feedback is actively sought and used	 Strongly agree



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## Findings

St George's Nursing Home is located at 13 Vigo Lane, Harraton, Washington, NE38 9AH. The care home is part of Wellburn Care Homes and provides accommodation and support for up to 38 people, some of who may be living with dementia. All of the rooms are single occupancy and some have en-suite facilities. There are communal areas, gardens and an on-site hairdresser.

Respite facilities are available.

See the latest CQC inspection report here:

<http://www.cqc.org.uk/location/1-126290416>

At the time of our visit there were 35 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch team were only able to support 11 residents to fully complete the survey. The team received 9 staff and 1 relative surveys back.

The results of these surveys are given below:

### Indicator 1 - A strong visible management

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

Some of the residents at St George's had difficulty identifying the Manager but this may have been due to their own individual health or capacity. Others stated that despite not being able to remember his name, they recognised him by sight and made many positive comments about him, "I'm not sure of his name but I speak to him every day, he is lovely".

The relative who completed the survey process knew the Manager by name and said "David is approachable, highly professional, supportive and kind. His door is always open to residents, staff, relatives and other visitors."

Staff who completed the survey all gave positive feedback about the support they received from the Manager. They commented that he is very approachable, supportive, will listen and support with any issues that are raised.

"The Manager always takes the time to listen if I have any queries".

"I feel the Manager is very approachable and is always willing to listen and help whenever he can".

The Manager informed us that he has worked for the company for five months having worked as a Care Home Manager for approximately four and half years. He went on to say he enjoys the satisfaction that the job role brings, forming relationships with all of the residents, their families and staff. He also said, "There is always a new challenge which constantly keeps me on my toes", he went





to acknowledge the support he receives from Wellburn's Senior Management Team, who are always available when needed.

## 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 that this was met for staff skills.**



Residents gave some very positive comments when asked what they thought of the staff at the home. These included "Staff are lovely, we are well looked after," "The carers make it, couldn't fault them" and "Very helpful and professional."

When asked if staff had time to stop and chat, there was a mixed response. The majority of the residents acknowledged that staff are generally very busy and can be pushed for time but also told us that when they need them for help or assistance, staff are there straight away.

"Yes of course, if there is something I want they come and see to me straightaway, they always make time."

The relative who responded to the survey agreed that the staff have the time to care for their relative and added, "Days are busy, however, no matter how occupied, staff make time to stop and say a cheery word with residents and to acknowledge and speak to relatives and friends. A welcoming, caring family atmosphere prevails." This relative also added that the staff have the skills to care for their relative and indicated a knowledge and awareness of the availability of continual staff development, training and teamwork. They also stated that the staff appear happy in their chosen professions.

During the visit, the Healthwatch team witnessed staff laughing and singing with residents in the communal areas of the home. All the interactions between staff and residents seen by the team were very positive.

A mixed response was given from those staff who completed the survey, when asked if they had enough time to care for residents. Some clearly stated they did



and others said they either make time during their day and others said that due to a busy routine they felt they didn't have enough one to one time as they would like to have with residents.

All staff did agree that they are encouraged and given the opportunity to develop their skills. Examples given included regular in house training, availability of training CDs on certain subject areas and one staff member mentioned they were currently completing a National Vocational Qualification (NVQ).

“Yes I am currently completing an NVQ and have attended training sessions.”

The Manager informed us that staff training is a big part of encouraging staff development. Out-sourced training is booked through different providers such as Tyne & Wear Care Alliance (who facilitate training, provide information, advice and guidance relating to legislation, regional and national strategies and offer support around recruitment from the company's pre-employment training programmes for the care sector) and staff attend this training regularly. He went on to add that “Staff have an area in which they are ‘Champions’, they attend training in these areas to add to their attained knowledge. Holding regular supervisions with staff enables me to get a better understanding of which areas staff have a strong interest in and areas they need development.”

Staff informed us why they enjoy their jobs, comments included “I enjoy working as part of team,” “Delivering good care and making residents happy” and “Everything, most of all the smile on the residents faces.”

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

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

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

When asked if the staff know what they need, like, and their preferences etc, the majority of the residents agreed staff knew them well enough. One resident commented “They are pretty good that way, I get to wear the clothes I like and they know I have Alzheimer's and get stressed a bit.”

During the Healthwatch team visit, we witnessed staff showing their knowledge of individual residents. They highlighted one gentleman who enjoys singing, this was encouraged by staff who started an impromptu sing-a-long, enjoyed by all.

When asked how well the staff know their relative's life history, personality and health and care needs, the relative respondent said “Staff are fully aware of resident's needs, they are extremely caring and kind. Residents are treated with love, dignity, understanding and infinite patience.” This relative also stated that changes to their relatives needs are noticed by staff, noted and recorded. They went on to say “Changes are discussed with the Manager, staff, family members



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and the resident (if appropriate). Any necessary changes are discussed, agreed and implemented.”

The Healthwatch team witnessed staff talking and supporting residents in a caring manner, they appeared to be knowledgeable about the residents that they were interacting with.

Staff and management informed us that they get to know residents via various means. When a resident first arrives at the home a pre-assessment is carried out to ensure the home can meet the resident’s needs and everything is in place for them when they arrive. They also talk to all health and social care staff involved in the residents care and complete ‘life history’ documentation with support from family and the resident. The home also has regular staff handovers and care plans are person centred and updated as and when changes take place. Information is added to the handover board for each shift for one week or longer if needed. One staff member told us that they read the care plans but find the best way to get to know residents is to talk and listen to them.

#### **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 AGREE this was met.**

The home provides a range of activities for residents, a list of which the Healthwatch team witnessed on the notice board. When speaking to residents about the activities available, the majority of the residents were able to give us examples of what was available and what they enjoyed. Many mentioned the activities in the home such as arts and crafts, chair exercises, bingo and dancing etc. “We sit around the table together and do activities, it’s very inclusive, and I feel that they care.”

Others mentioned the activities that they do outside they home including trips out to local coffee shops, Sunderland Empire and the beach etc.

One resident talked about the Activity Co-ordinator, “Helen is brilliant, we had a Christmas party and buffet, I’ve never seen a buffet like it.”

A couple of residents stated that they would like to see more activities provided as they felt there wasn’t enough both in and out the home. Others stated that they weren’t interested in joining in on activities and this was their preference.



	Day	Activities
1 <sup>st</sup>	Thursday	Bus Trip Metro Centre
2 <sup>nd</sup>	Friday	One to ones, Gentle chair exercises
3 <sup>rd</sup>	Saturday	Sing-along
4 <sup>th</sup>	Sunday	Church Service at St George's Church 10am
5 <sup>th</sup>	Monday	Aromatherapy with Sharon, Manicures
6 <sup>th</sup>	Tuesday	One to Ones, Virtual Reality 2pm
7 <sup>th</sup>	Wednesday	Mother's Union Coffee Morning, Crafts
8 <sup>th</sup>	Thursday	Pam Snowball Armchair Yoga 2pm
9 <sup>th</sup>	Friday	Knitting, Sewing, Dominoes
10 <sup>th</sup>	Saturday	Bus Trip to Hancock Museum
11 <sup>th</sup>	Sunday	Church Service at St George's Church, Movie Afternoon
12 <sup>th</sup>	Monday	Aromatherapy with Sharon,
13 <sup>th</sup>	Tuesday	Pancake Day
14 <sup>th</sup>	Wednesday	Valentine's Day Meals for the couples
15 <sup>th</sup>	Thursday	Tea dance at NE6 Suite at Walker 12pm, Sister Act the musical at St Roberts School 7pm
16 <sup>th</sup>	Friday	Zoo Labs 2pm
17 <sup>th</sup>	Saturday	One to ones
18 <sup>th</sup>	Sunday	Church Service at St George's Church 10am
19 <sup>th</sup>	Monday	Aromatherapy with Sharon
20 <sup>th</sup>	Tuesday	Pam Snowball Armchair Yoga 2pm
21 <sup>st</sup>	Wednesday	In House Church Service
22 <sup>nd</sup>	Thursday	Andy James 2pm
23 <sup>rd</sup>	Friday	Gentle Chair exercises, Musical Bingo
24 <sup>th</sup>	Saturday	Board games, Getting to know You
25 <sup>th</sup>	Sunday	Church Service at St George's Church
26 <sup>th</sup>	Monday	Aromatherapy with Sharon
27 <sup>th</sup>	Tuesday	Bus Trip to Sunderland Glass Centre
28 <sup>th</sup>	Wednesday	Bread Making for Real Bread Week

Activities and Trips may change.

When asked if they were able to maintain their hobbies since coming into the home, some residents were able to tell us that they still do activities such as knitting and following their favourite TV programmes. Others mentioned due to their own physical fitness they are unable to go for long walks or read like they used to.

All but one resident stated that staff inform them when the activities are taking place and all the necessary support is offered should they need it to join in. Comments included “Helen tells us what is on and when they are on”.

During the visit the Healthwatch team witnessed a time table of events in many of the residents bedrooms, which is used to help

to remind them of what is taking place and when.

The one resident who told the Healthwatch team she hadn't been informed of when the activities were available did acknowledge that her daughter did see a leaflet advertising them and she had only been at the home for two weeks.

The relative who engaged with the survey process stated that the activities at the home are well organised, extremely varied and set at a level for all of the residents to enjoy. They went on to say, “Seasonal activities are presented throughout the year, with work aesthetically displayed. Outside activities (visits and outings) are very popular and well attended.” They added that residents are given a schedule of activities and are supported and encouraged to take part. Outings are advertised in prominent positions around the home and friends and relatives are also invited to attend. Individual hobbies and interests are catered for and pets are brought into the home for short visits.

Staff and management informed us that the home has an Activities Co-ordinator who organises activities for the residents which are then posted monthly on the home's notice boards. The activities mentioned included bingo, reading, games, baking, one to one time and trips out. Trips included visits to local shops, pantomime, theatre, museum, tea dances etc. They went on to state that they encourage residents to join in activities by explaining about the activity thoroughly





and explaining what it entails. Assistance is then given to residents to participate based around their individual needs and preferences.

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

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

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

When asked about what they thought of the food at the home, the majority of the residents gave positive feedback, “Very happy with it, it’s very good,” “Lovely, it’s always nice.” They went on to state that they can choose whatever they would like for breakfast and are then given options to choose from at lunch and dinner. Many of the residents also mentioned that if they don’t like the choices available they can request an alternative, or soup or sandwiches are always available.



“The food is good and you are given an alternative if you’re not keen on the choice.”

A few residents commented that they didn’t think that there was enough choice of the type of food that they liked. When the Healthwatch team asked if they had fed this back to the staff they said they had and that they had been told that the menu is being changed to reflect this.

Most of the residents stated that they eat their meals in the dining room and enjoyed this as a sociable time. A few mentioned that they eat in their rooms but this was their choice.

The relative who responded to the survey informed us that the meals at

St George’s are excellent, their comments included, “Food is nutritious and plentiful...and well presented.” They went on to say that the tables are set out beautifully at mealtimes with fresh flowers displayed on each of them. Residents are able to make their own choices from the menu, staff are available in the dining areas to assist residents if required and a range of snacks and drinks are offered throughout the day. The relative stated that mealtimes are a sociable time at the home, with friends sitting together, chatting and music being played in the



background. Staff are present to encourage and support the residents where necessary.

Staff and management informed us that the home has set mealtimes for lunch and evening meal but do allow for flexibility to accommodate those who wish to eat outside of these times. They also have hydration and snack trolleys throughout the day with a wide range of snacks and drinks available. The Healthwatch team witnessed this on the visit. Staff were serving drinks and snacks to residents to their individual tastes, these included biscuits, crisps, fruit, homemade cake, and hot and cold drinks. The staff also assisted those residents who required it and provided clothing protection to certain residents.



### **The menus are displayed on individual tables**

Staff went onto say that they are aware that some of the residents aren't keen on more 'modern' food that the home had been serving and instead would prefer to have more traditional meals. The Manager informed us that new menus are now in place to reflect this feedback.

To try and make mealtimes more sociable, staff informed us that the residents are encouraged to eat in the main dining room where background music is played. They also stated that they try to sit people together who have similar interests to encourage conversation and try to offer a restaurant like experience.



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## **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.**

When asked if they have regular access to health professionals, all residents mentioned that they had all the necessary checks which are required and stated which health professionals visit them in the home. When asked specifically about GP access and hospital appointments, the residents informed the Healthwatch team that they can gain support for these with no problem. Some mentioned that relatives will support them to make and attend appointments and others mentioned that their GP visits them at the home or staff can support them to any outside appointments.

The relative stated that health issues are discussed and recorded on admission to the home. All residents have access to a wide range of health professionals and staff liaise with medical personnel, pharmacies and arrange transport for appointments etc.

Staff and management informed us that dentists, opticians, chiropodist's etc. regularly visit the home. An example given included, Vision Care visiting to carrying out annual eye tests within the home or more frequently if required and dentists coming into the home to carry out 6 monthly check ups. One staff member informed us that "Care and team leaders hand over if anything is needed and a list is made for chiropodists and GPs are phoned the same day." The Team was also informed that the team leader will monitor when residents require these visits and record in resident's care plans.

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

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

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

Some of the residents we spoke to who followed a religion informed us that there are regular religious services provided in the home, including visits from representatives from the local Catholic Church who give Holy Communion. Other residents informed us that they regularly visit the church next to the home for services, with support from staff.

"Every Sunday the Activities Co-ordinator asks if we would like to go to church and supports those who want to go."

Some of the residents mentioned that they have their hair regularly cut and styled by the hairdresser who visits the home, whilst others visit their own hairdresser



outside the home. All but one resident informed us that the laundry service is either good or excellent, the one resident said there had been a previous mix up with their laundry so now their daughter takes her washing home.

The relative who engaged with the survey process stated that all of their relative's specific lifestyle or religious or cultural needs are met. They added, "Staff are aware of each resident's, personal needs, religion, tastes and intellectual capacity." They went on to say that the home respects and accommodates these needs. The hairdresser attends weekly and appointments are made in advance. They added that the laundry is returned to residents rooms both clean and pressed. The relative also noted that their relative is always appropriately dressed and neat and clean, with his hair brushed, teeth are clean and he is clean shaven.

Staff and management informed us that staff within the home speak to the resident to find out what cultural/religious or lifestyle needs they may have. If the resident is unable to speak to staff and express their needs and wishes, staff will speak to the resident's family and friends to find out more information. All the information will be documented within the residents care plan and 'Life Story' documentation.

Examples were given to highlight this. One which was a resident who is a vegan and certain foods are prohibited. The home found out what the resident's food and drink preferences are, this was documented and communicated to all staff. The home also has Appetito ordering (Appetito is a food producer for the health and social care sector, providing meals for people at home or in care) which is tailored to the resident's individual dietary requirement and this is changed around weekly to ensure that there is variety in their diet.



The nearest church is visible from the home





## 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 the Healthwatch team asked the residents if they ever get asked about what they think of the home and if they are happy, the residents gave a mixed response. Some residents were unable to answer the question, this may have been due to their own individual health and capacity. Others answered no and some said yes and staff were aware that they were happy.

When asked if there was anything they would like to change about the home they all said there wasn't anything they would like to see change. Some of the comments given from residents included "If I wasn't happy, I wouldn't be here and I would say so." "I think the home is brilliant and beautiful, I can't fault it, I wouldn't change a thing."



All residents when asked knew who to complain to if they ever needed to, naming either carers, the Manager or one of the staff, as people they could go to.

The relative who responded to the survey stated that they feel very much a part of the life of the home. They added "I am made to feel welcome, supported and cared for, with love and understanding. Both their relative and they are able to give feedback on how the home is run by attending residents meetings. They went on to say that they would initially approach the Manager of the home if they needed to make a complaint and they would feel both confident in doing so and that it would be taken seriously and would be acted upon.

The Manager and staff informed us that they have regular residents and family meetings within the home to keep everyone up to date with any changes that may be occurring and to get feedback. Also in the entrance of the home the Healthwatch team witnessed a comments box for residents and relatives to leave feedback and information on how to nominate a star of the month for an award.

The Manager informed us that a questionnaire is given to the residents and their family members to gain feedback, from which an action plan is produced to address the issues or concerns they may have.

Staff informed us that they can contribute to how the home is run via staff meetings, supervisions and appraisals. They can also access the home's comments box. One staff member said; "I come up with ideas and improvements in my own job role which in turn should improve the mealtime experience.



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## 5. Appendices

### Appendix 1 - Questions for residents

1. Do you know the Manager of the home?
2. What do you think of the Manager?
3. What do you think about the staff here?
4. Do the staff have the time to stop and chat with you?
5. Do the staff know what you need and what you like and don't like?
6. What activities are there for you in the home?
7. Is it easy to join in the activities?
8. Do you get a chance to do any of the things you used to enjoy before you came here?
9. Do you go on trips outside?
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. Is there respect for your religion or your culture here in your home?
15. Do you get asked what you think about the home?
16. Would you like to change anything about the home? Have you told anyone about this and what happened?
17. 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?  
  
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?
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**  
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**  
Do residents have regular, preventative dental and optometry (eye-care) appointments?
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?
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?



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## 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?



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## 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?



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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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