

Care home life, what it's really like!

The Laurels Care Home



Date of Healthwatch Sunderland visit: 29th January 2018



Distribution List:

The Laurels - Helen Bell, Manager

Four Seasons Health Care - Rd. Claire Royston, Medical Director

Care Quality Commission - enquiries@cqc.org.uk

Healthwatch England - Katie Johnson, Development Officer

Sunderland Clinical Commissioning Group: Dr Ian Pattison, Clinical Chair David Gallagher, Chief Officer Debbie Burnicle, Deputy Chief Officer Janet Farline, Clinical Quality Officer Aileen Sullivan, Lay Member Patient and Public Involvement

Sunderland Local Authority

Graham King, Head of Commissioning Anne Fairhurst, Commissioning Specialist Fiona Brown, Executive Director of Adult Services

Health and Wellbeing Board

Councillor Graeme Miller, Portfolio Holder, Health, Housing and Adult Services Karen Graham, Office of the Chief Executive, Sunderland City Council

Public Health - Gillian Gibson, Director of Public Health, Sunderland City Council
Sunderland Care Alliance - Angela Richardson, Network Development Officer
HealthNet Sunderland - Gillian McDonough, Chief Officer of VCAS
Sunderland Echo - Joy Yates, Editorial Director
Age UK Sunderland - Tracy Buck, Director
Independent Age - Catherine Seymour, Policy and Research Manager
Sunderland Alzheimers Society - Helen Williams & Penny Easton
Action on Dementia Sunderland - Ernie Thompson, Chairman
Sunderland Carers Centre - Graham Burt, Chief Executive Officer
Essence Service - Anthony Gonzales, Service Manager
MP Houghton & Sunderland South - Bridget Philipson
Local Councillors for Copt Hill
Councillor Anthony Allen
Councillor Kevin Johnston
Councillor Mary Turton

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	17
Appendix 1 - Questions for residents	17
Appendix 2 - Questions for Managers	18
Appendix 3 - Questions for staff	19
Appendix 4 - Questions for friends and relatives	20

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 Helen Bell was held at The Laurels. 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 29th January 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 disa	agree Disagree Neutral	Agree	Strongly agree
1.	A strong visible management		
			Strongly agree
2.	Staff with time and skills to do their jobs	Time	Skills
		Agree	Strongly agree
3.	Good knowledge of each resident and their changing needs		Strongly agree
			Strongly agree
4.	A varied programme of activities		Agree
5.	Quality, choice and flexibility around food and mealtimes	d	Strongly agree
6.	Regular access to health professionals		Agree
7.	Accommodation of resident's personal, cultur and lifestyle needs	al	Agree
8.	An open environment where feedback is actively sought and used		Agree
L	1		



Findings

The Laurels Care Home is located on Francis Way, Hetton-le-Hole, Houghton le Spring, DH5 9EQ. It is a two-storey property, features single bedrooms each with en-suite facilities and can provide nursing and personal care for up to 50 older people. People living with dementia are cared for on the first floor and those who require nursing care live on the ground floor. Residents are encouraged to bring in personal items to personalise their own rooms.

Care includes general nursing care, residential care, and residential dementia care. The home also has facilities to provide end-of-life care if required.

See the latest CQC inspection report here: http://www.cqc.org.uk/location/1-128588859

At the time of our visit there were 49 residents living in the home. Due to the health and capacity of the majority of the residents, the Healthwatch team were only able to support 6 residents to fully complete the survey. The team received 10 staff and 4 friends and relatives 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.**

The majority of the residents at The Laurels had difficulty naming the Manager, this may have been due to their own individual health or capacity, however, all did know that the Manager is female and said they recognised her by sight. All residents commented positively when asked what they thought of her, comments included;

"She is very efficient in her job, she listens and she is very nice."

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 Healthwatch team.

Four relatives completed the survey and all of them knew the Manager by name and gave positive feedback including;

"She is a very gifted lady, all round very great for her job."

"She is very caring and polite."

"OK from what I can see - very pleasant - asks how we are."



When asked if the Manager offers support to staff, staff members agreed that the Manager at The Laurels is easily approachable, gives full support, is very easy to talk to, listens, gives advice, deals with and acts on any issues that may arise. Staff members stated:

"The Manager is always approachable, if she cannot answer a question immediately she will get back to you when she can."

"I can talk to our Manager quite freely and openly - In the past I have raised an issue and it has since been acted upon."

The Manager informed the Healthwatch team that she has been a care home manager for 11 years and added;

"Being able to make a difference to resident's lives is satisfying for me and the reason I love my job. The residents and families become part of The Laurels family. I have a wonderful staff team who really care for residents."

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 asked about staff at the home, all residents gave positive comments which included:

"I am looked after very well",

"They are marvellous, everything is done for me",

"We get on very well together"

Residents went on to say that staff have the time to sit and chat with them and they enjoy this time.

Relatives who completed the survey agreed that staff do have the skills and time to effectively carry out their roles and they are very caring. Their comments included:

"Staff are good - any problems and they are happy to help."

"My mam has complicated diabetes, they take their time with her and understand."

When asked about having enough time to care for residents, staff indicated that most of the time they do have the time, however, on occasion, due to staffing levels, the volume of paperwork and/or a particularly busy time of the day it may become very stressful. For example on a morning when everyone wants to get up at the same time, another example being that there is adequate time to care for residents but not enough time to sit and talk with them.



Staff stated that their Manager encourages and supports them to undertake relevant training which both updates their skills and enables them to learn new skills. One staff member stated that they have completed the Care Home Assistant Practitioner (CHAPS) training.

Together" We " "Make A Family One of the communal corridors

All staff indicated that they enjoy their job. Some of their comments included:

"Being part of a caring team who all work together for the best care of residents."

"Sometimes we are able to improve quality of life and see health improve, this makes me feel that we are doing our job well. Also when people are at the end of life I like to see that they have everything they need and that they are comfortable."

"I like everything about my job, I am a caring person and thrive on helping our residents with their everyday needs. I love getting to know each individual, their families and their friends."

The Manager informed us that staff are encouraged to develop skills by gaining National Vocational Qualifications (NVQ), by attending training relevant to their role and what she feels would benefit them. The home also ensures that staff have their breaks on shift.

The Manager also stated that staffing is based on the dependency tool and that skills mix is considered when rotas are completed. She added;

"We can see if residents are being cared for and that all of their needs are being met."



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.

The majority of the residents the Healthwatch team spoke to felt that the staff knew them and knew their likes and dislikes. Some commented that staff soon get to know new residents by sitting and chatting with them. Relatives told us that staff take the time to find out past history, lifestyle and possible 'weaknesses'. They explained that staff are on the ball, care plans are in place and they know residents really well.

Staff stated that they are familiar with resident's histories and preferences and that this is achieved by conducting an initial meeting with residents before they move into the home. Also, by looking at a resident's care plan, spending time with residents along with their friends and relatives gives a good knowledge base and insight into an individual's likes and dislikes.

Information on changes to residents tastes, health and care needs is discussed in handover meetings at every shift change, is written in notes, observations and passed on through communication with relatives. All care plans are reviewed on a monthly basis.

The Manager stated a detailed assessment is carried out prior to admission and staff get to know the resident in a detailed handover. The care plan is discussed with staff and the resident is allocated a keyworker who will ensure each individual has everything they need. The care plan is updated when a resident's needs change and communicated to staff.

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.

When asked about the activities in the home residents were able to list some of what is available. Most responded positively to the choice, also stating that the list is displayed on the wall. Others commented that they don't join in anymore, with one commenting that due to her eyesight she would rather just watch than participate.

One resident commented that: "We do have occasional trips, but there is only one bus between 3 homes and there is not enough activities/trips, I have brought this up at the residents meetings."



Some relatives advised that activities are always available and residents are encouraged to join in at all times. One person advised that there should be more to do outside the home for those who are well enough.



The care home provides a range of in house activities as shown on the noticeboard here.

The staff and Manager informed the Healthwatch team that activities inside the home include; ball games, quizzes, baking, entertainment including singers - with residents being encouraged to sing along and themed days. Staff and the Manager also informed us that the home employs trained Activity Co-ordinators.

Access to the local community includes trips out on the minibus including; Beamish, the theatre, the park and to the beach when weather permits.

The Manager informed the Healthwatch team that activities are planned around life histories and preferences and that the home acknowledges that some residents prefer to be in smaller groups or on a one to one basis; this is planned and accommodated in activity sessions. She added that residents are supported to continue to do the things they used to enjoy, including members of the clergy visiting the home for those residents who are practising their religion, relatives bringing in pets to visit the home and by encouraging relatives to inform the home of previous interests enjoyed by the resident.

The Healthwatch team observed one resident enjoying time with his relative's pet dog which had been brought into the home for a visit.





One of the home's clocks indicating the date, time and also the weather forecast

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.

	Home Menus				
	We work or cycle and c fresh and co prem	all food oked on	is		
	The Laurels Ment		TEA MENU Overse & Crass Quicke with Boars		
WEEK I	HADN COURCE Hites & Lask Politing	Fruit Crundel	Overset & Onlos Quicke with Boards Or Selection of Sandwickes		
Honday	Tabara Data Cata	Castard	Selection of Sandwiches Sanauberry House & Crown nam, Potato Cooparts & Tornation		
Tuesday	Deserved Polisicas, Haved Vogstakke, Carocka Baeak and Octors Re	Broad and Butter Publics			
	Creativel pointies, Calorys and Childresser Or	Canterd	Selection of Sandwiches Sciontell Plus and Pean		
Wastrenter	Boost Earger Rossil Tarkey with Torkshire Pudding Deserved Publices, Satsula, Dancis	Larrest Sporter			
Westrandow	Desarred Publices, Sproats, Devolt	Custard	Selection of Sandwitches		
		Concerned Schoolings	Jam Doughts.43 Seusage, Beam & Figs Or		
Stripsday	Orchan Cuty & rice South process, Page/Sweetcon, Cauthows	with Castard			
			Final & Son Cristern Venda Bake		
Fister.	Battored Cod Or Posched Cod in Pankey Sector Or	Crocolute Sporage with			
		Outerti	Selection of Sandwiches July & Collard		
Seturday	Saled Ham Orga or cosmel polatis, man'ty polisi balled Ham Proce Function, Bestreet, Polare Process or Cosmed Polation Dr.	Apple & blackberry Pic	Hot Pot with Bread and Butter		
	Peace Punking, Bestreet, Pelana Peters of Creamed Polation	valet Cream	Selection of Sandwiches Strawberry Tart		
Sandary	Lands Rand with Yorkalest Pustiling Russil Rent with Yorkalest Pustiling Crearing & Roast Potnices, Spreaks, Carrols		Solp		
Sansad	Crewrod & Roast Potetons, Spreids, Carrots	life	Selection of Sandwiches		
WEEK 2	The Laurels Mer	DESSERT	TEA MENU		
	Deak and Contributes	Jam Sporige With	Becon, 599, Torreloss, & Black Pudding		
Mandaty	Or Fait Cales	Custant	Tomins Soup & Serviceties Fruit & Jehn Macon Bopt Of Characteristics		
Yuesday	Inaut Potstore, Pser, Card Forer Cartage Par	Baiesel Tatt With	Bacon Bops		
	Or Connel Beef The	InstaG	Selection of Sandwiches Cobine Caramet		
Wednestre	Polistows, Turnip & Carvots		Cerakdia: & BO915		
	Yorkshire Pudding, Dreamed Pelanes, Sprouts, Cost Rever	Consumption	Vegetubre Scop & Servitakhen		
Thursday	Peak Solid	Apple Pie	Vegetabric Soup & Sevetaurien Struwborry House Toaslad Toa Coles		
	Deserved Polators, Broccil, Turnin	With Owner	Cr Leetil Scap II: Sandreichen Meringun Kisk with Fruit & Cream		
	Chicken Burger Sattered Call Dr. Posched Call in Parriey Sauce		Maringua Nost with Fruit & Cream Quiche with Spegketti		
Pristay.		Raw Puebling	Gr Selection of Sandwiches		
	Bettered Sousier Chips or creamed potatis, musta peak	and the second second			
	Drips or created politik, middle 2444 Minise File Dreamed Politices, Grain Board, Torrigi	Barana Soonge With	Pizza, Chips and Salad		
Smirday		Custord	subotion of Sandwithen Custorid Silve		
Sallagan					
Saturday	Cheese and Bacon Turrover Road, Furkey with Yoststree Publica Diversal to Road Promotes, Sproute, Canada OF	Triffe	Seup		

The majority of the residents told us that the choice and quality of food is good and there is a varied menu to choose from. They went on to say that mealtimes are a very sociable time and that they can eat in the dining area or your room if preferred. Residents added that there is plenty of choice, which includes fresh fruit and vegetables. One resident stated;

"The food is well cooked and cheese and ham sandwiches are my favourite."

Friends and relatives agreed that the food at the Laurels is of good quality, there is always plenty of choice and alternatives are always available.

One relative commented that:

"Mealtimes are very sociable with a lovely sociable environment."

Staff stated that food is all home cooked, with several choices available at each mealtime and kitchen staff will also prepare special requests when possible. Staff are on hand to observe, offer encouragement and to ensure that mealtimes run



safely. The residents choose their own place to eat and if residents have special friends in the home, they try to accommodate this in the dining room by sitting them together.

During the Healthwatch visit the team witnessed staff supplying residents with tea, coffee, juice and homemade cake.

The Manager went on to say that the food at Laurels Care Home is very high standard. She added;

"I very rarely get any complaints about the food or the catering service."

Systems in place to support residents to eat and drink within and outside of mealtimes include some residents eating in their room, supported by staff or their relatives if they choose to do so. Staff recognise and accommodate this and it is included in the daily allocation. The Manager added;

"Staff and catering staff recognise that not all residents eat at mealtimes in the dining room."

The Manager went on to give an example of one resident who likes to sleep in late and enjoys breakfast late morning in his room. She explained that there are two choices at every mealtime with alternatives, such as snacks, if there is nothing the resident would like. Choices are respected depending on risk and if the residents will be safe, such as considering the risk of choking.

She reiterated that mealtimes are made sociable by residents sitting with their friends in the dining room where they can catch up, helping to make this an enjoyable part of the day.

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

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

The Healthwatch team AGREE this was met.

Residents and their relatives said that regular healthcare check-ups are undertaken. Some stated that the dentist, optician and chiropodist have visited the home and that they go to the medical centre to see a doctor or if necessary the doctor will visit the home. One resident stated;

"A carer always goes with you if you have a hospital appointment or my daughter will come with me."

Another resident told the team;

"The home has all the medical people come in when we need them."



When asked all staff and the Manager affirmed that health professionals including: GPs, district nurses, a dentist, an optician, a chiropodist, visit on a regular basis and also ensured that staff will arrange call outs as and when needed.

The Manager add that the main GP surgery is just next door to the home and a link nurse visits the home on a weekly basis. GP call outs are made when necessary.

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.**

Residents and their relatives felt that their religion and culture were respected at The Laurels. One resident commented that she receives Holy Communion in the home and often visits a local church. Some of the residents also stated that they have their hair cut and styled on a regular basis, which they enjoy. One relative noted that the laundry is an excellent, quick service.



Staff informed the Healthwatch team that a representative from the church visits on a monthly basis and a priest comes in to give Holy Communion. Residents can attend church services if they wish to do so.

The Manager stated that information on an individual's personal, cultural and lifestyle needs is obtained from the pre-admission assessment and any dietary requirements are communicated to the catering staff on a diet notification sheet.



A record is also maintained in the kitchen. Examples given included; diets suitable for diabetic residents and the provision of halal and vegetarian foods. Resident's likes and dislikes are informed by the relatives. The Laurels has a hairdresser who visits the home on a weekly basis, residents can book a perm between these times which will be accommodated.

The Manager also stated that to ensure residents get their own clothes returned to them from the laundry, spot checks are made by the Manager and other senior staff, with the Housekeeper overseeing the department. An audit is carried out each morning which includes a daily walk around to observe that residents are presenting well and are appropriately dressed.

The Manager added that feedback about the home is given by residents during residents meetings.

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 enquired if they were asked for feedback about the home, one resident stated;

"Staff and management do ask if we are happy."

Some residents agreed that they would be happy to offer suggestions, including a walk into Hetton, having access to daily newspapers and to sit in the garden (weather permitting).

Those relatives who completed the Healthwatch survey said that they gave feedback by attending residents meetings where they are also kept well informed. Some relatives informed the team that they would be confident to make a complaint and that it would be acted upon appropriately, stating that they would address any issues with the management of the home.

Staff informed the Healthwatch team that several resident's relatives have become more involved with activities, not only of their relative but with The Laurels

as a whole. They also stated that the Manager has an open door policy and you can speak with her at any point.

The staff and the Manager informed the Healthwatch team that the home holds regular residents and relatives meetings, also that residents and family members have a say in how the home is run through the Quality of Life Program, which encourages feedback, which can be given anonymously. All comments are analysed and acted upon. They can give their views of the service at residents meetings and can offer recommendations. Feedback and complaints are dealt with by analysis of any comments (which are displayed in the entrance to the home) and by feedback communicated in staff meetings and supervision. Staff do have a say in how the home is run through feedback of the 'Quality of Life Survey' anonymous feedback can be left on the



homes IPad for the Manager to act upon. During staff meetings, staff are given the opportunity to put forward ideas and to state if they are happy/unhappy or would like to see any changes. All views are listened to and respected in an honest, open environment. Staff stated that they are confident to make comments.



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?



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?



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?

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

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

 $\ensuremath{\mathbb{C}}$ Healthwatch Sunderland 2018