

Care home life, what it's really like!

Valley View Care Centre and the Lodge



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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 Sunderland?

Healthwatch Sunderland is the independent local champion for people who use health and social care services. We're here to make sure that those running services put people at the heart of care.

By speaking to Sunderland residents we aim to understand their needs, experiences and concerns of accessing and using local health and social care services. We can then speak out on their behalf to local service providers, focusing on people's concerns about current services and ensuring they are listened to and addressed by those who are running services.

We encourage and work with local services to involve Sunderland residents in the changes to health and social care provision. The ultimate aim is to get things right for the future, with health and social care services which meet the needs of the local community.



*We champion what matters to you and
work with others
to find ideas that work.*

*We are independent and committed to
making the
biggest difference to you.*





2. Background and rationale

Research carried out in 2016 highlighted that there is a need to provide qualitative information on care homes which goes beyond basic safety standards. It shows that the information needed by people looking for a suitable care home should provide a real sense of what a home may be like to live in.

Since 2017 Healthwatch Sunderland has responded to this need and began carrying out visits to all care homes currently available to older people across Sunderland. The aim is that these visits will be carried out on an annual basis to ensure the findings are current and up to date.

To enable members of the public to make more informed choices when considering which care home to move into for themselves or their relatives, the complete results are available via our website, where you will also find a promotional video which will explain the work fully: www.healthwatchesunderland.com. Professionals and members of the public are also welcome to contact us if they need further information or access to the reports in other formats.

The work is based on 9 indicators which focus specifically on issues of quality, such as how much residents and family can have a say in how the home is run, and whether residents are able to pursue their hobbies etc.

The 9 indicators are:

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



3. Methodology

The ‘Care home life - What it’s really like!’ visit took place on the Thursday 25th October 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, 4 and 5).

We also engage with local people on an ongoing basis, encouraging them to share their feedback on their experiences of care homes across Sunderland. Any feedback we received was incorporated into the findings.

4. Findings - Summary

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

Here is the key which shows the indicator scores



Strongly disagree



Disagree












Neutral



Agree



Strongly agree

1.	A strong visible management	 Strongly agree
2.	Staff with time and skills to do their jobs	 Agree
3.	Good knowledge of each resident and their changing needs	 Strongly agree
4.	A varied programme of activities	 Strongly agree
5.	Quality, choice and flexibility around food and mealtimes	 Agree
6.	Regular access to health professionals	 Agree
7.	Accommodation of resident's personal, cultural and lifestyle needs	 Strongly agree
8.	An open environment where feedback is actively sought and used	 Strongly agree
9.	Provide a physical environment which is suitable for the needs of the residents	 Strongly agree



Findings

Valley View & The Lodge is a purpose built property located in Back Lane, Houghton le Spring, DH4 7ER.

The home provides accommodation for people who require residential, Enduring Mental Ill-health (EMI) residential and young disabled care. There is accommodation for up to 38 people, all rooms are en-suite, which are divided into two areas: one area providing care for 29 elderly people and a separate unit of 9 beds for young disabled people under 65 years. Residents are welcome to bring their own belongings to the home to decorate their own space and this is encouraged. The home currently doesn't have a hearing loop system or provide internet access for its residents.

There are three communal lounge areas at the home and also additional seating in the reception area. The home has a large garden at the back of the building which is accessible for residents.

The home currently has a pet budgie named Geordie and residents are able to bring in pets, which can be discussed prior to admission.

There is a full time Activities Co-ordinator providing activities seven days per week and access to a mini bus for resident trips and outings.

Protected mealtimes are promoted within the home.

See the latest CQC inspection report here:

<http://www.cqc.org.uk/location/1-2034462158>

At the time of our visit the home was at full capacity. Due to the capacity of the majority of the residents, the Healthwatch team were only able to support six residents to fully complete the survey. The team received eight staff, two relatives and one Independent Advocate surveys back.

The results of these surveys are given below:

Indicator 1 - A strong visible management

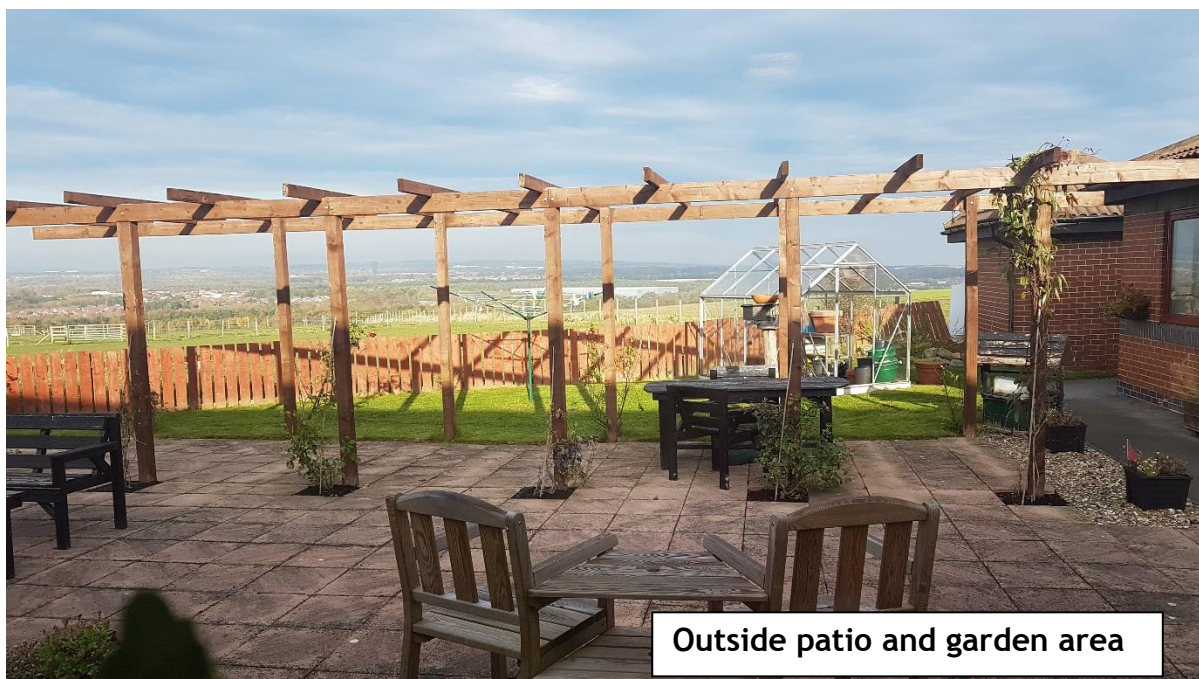
The indicator states that the Manager should be visible within the care home, provide good leadership to staff and have the right experience for the job
The Healthwatch team STRONGLY AGREE this was met.

When asked by the Healthwatch team who the Manager was and what they thought of her, all but one resident was able to name her or knew her by sight, they all added positive comments about her;

“Can't do any more for you.”

“Good lass, you can talk to her anytime and she never chases you away.”

“She is a nice women.”



Of those relatives who completed the survey, both were able to name the Manager and were complimentary when explaining what they thought of her;

“Very helpful and always available when needed.”

“I find her very approachable and flexible with residents, trying to accommodate their wishes where ever possible.”

The Advocate who responded was able to name the Manager in person but said that she hadn’t had the need to speak to her but knew where her office was should she need to contact her.

Staff were asked by the Healthwatch team what support they receive from the Manager and what their experience was of approaching her with a question or issue. All staff who responded were very positive of the Manager, stating that she was very supportive and approachable;

“I receive full support from my Manager no matter how small or big the issues are.”

“All the support I need and more.”

“My experience of talking to the Manager is very good she is always there to help.”

“She will listen to you and your issues.”

The Manager informed the Healthwatch team that she was attracted to the role of Manager, as she wanted to make a difference to resident’s quality of life ensuring that they had a safe happy home.

She added that she enjoys everything about her role including seeing residents happy and content and seeing and helping staff develop.



During the Healthwatch visit we witnessed the Manager sitting in one of the bedrooms with a resident having a conversation and joking and comforting other residents when showing the team around the home. All residents appeared comfortable in her presence.

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.

Residents were asked by the Healthwatch team what they thought of the staff within the home, responses to the question were all positive, with many complimenting the staff for being very nice, caring, and helpful.

“First class, can’t fault them.”

“All are very nice and very good at their job, can’t fault them.”

The Healthwatch team went on to ask if staff had time to stop and chat. Responses received were mainly positive with the majority of residents stating that they did but staff were often kept very busy.

The two relatives and Advocate who responded to the survey provided a mix of comments when asked ‘do staff have the time to care for their relative/client’.

“I find that there are times when the staff are fully occupied elsewhere and if there is a requirement for your relative, priority is given which is correct but can make your relative feel neglected.”

“I feel that staff try their best to give my mam the care she needs. The cook and tea girls, carers and cleaners are also pleasant.”

“Staff are always on hand to help when I visit and they appear to have relationships with their residents.”

The relatives and Advocate went on to positively comment about the skills of staff within the home, stating that they have no concerns about staff skills and staff are diligent in referring residents to GPs or address medical conditions immediately.

When asked if they have enough time to care for residents the majority of staff stated that they did, with two staff saying they didn’t and would like to spend more time one to one with residents.

Staff who responded to the survey added that they are encouraged to develop skills via training courses which are ongoing and provided in house or on line. All but two staff answered when asked, what they enjoyed about their jobs, comments included;

“I enjoy taking them out and doing things they enjoy. I am happy when they are happy.”



“Seeing to the residents and I get great satisfaction in my job role when I see residents happy.”

“Trying my best for others and meeting people from all walks of life.”

The Manager informed the Healthwatch team that she encourages staff to develop their skills in their three monthly appraisals and ensures that staff have enough time to care for residents by observing staff and speaking with residents.”

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 speaking with the Healthwatch team, all residents informed that staff have got to know them, their likes and dislikes and accommodate how they care for them by incorporating these, “Staff know I wear the same stuff all the time, that’s what I like.”

Family members and the Advocate who completed the survey told us of how the home gets to know residents, they explained how the home listened when their relative/service user was first admitted and make every effort to get to know them over time and updating records for the benefit of those involved in their care along the way.

When asked if the home notices and responds to changes in residents needs and how they are informed of this, the two relatives told the Healthwatch team that staff regularly keep them up to date either when they visit the home or via telephone if required. The Advocate who completed the survey added;

“Judging from the care plans in place staff are able to notice changes in my client’s needs and quickly respond to this. For example, they were able to realise that my client was largely independent and were able to arrange a selection of outings and community activities for her to enjoy.”

The staff and Manager stated that a good knowledge of the home’s residents is built up through information provided in care plans, by chatting to residents, their family and friends and attending handovers, where a more up to date information share is carried out. They added that any changes in a resident’s tastes or health and care needs are recorded in care plans which are evaluated on a monthly basis or earlier if any concerns arise.

Indicator 4 - A varied programme of activities

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



activities outside the home.

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

The residents when asked by the Healthwatch team informed us of a range of activities that take place in the home including dominoes, exercise classes, cards, bingo, entertainers etc. A couple of the residents said that the activities provided weren't to their liking so they preferred to carry out activities such as puzzles and crafts in their own rooms. All residents said that they are informed by staff about what activities are taking place and encouraged to join in.



Residents added that there is also a range of activities available outside of the home including trips to the local swimming pool, Empire Theatre, the local shopping centre, coffee shops, Salvation Army to watch a movie and the beach etc.

Some residents informed the team that they were able to continue with hobbies and interests that they had prior to moving into the home such as painting, gardening and housework.

During the Healthwatch visit the team observed a group of residents from both the younger persons unit and the care home sitting in the foyer playing a game of cards. When speaking to them they informed us that they do this on a regular basis and really enjoy it.

In the lounge area we also witnessed a staff member carrying out a pamper session with residents, who were having their nails painted and enjoying the experience.



Family members and the Advocate responded positively when asked about the range of activities in and outside the home. They explained that activities were wide in choice and inclusive of resident's likes and physical abilities. They added that staff are dedicated to keeping the home's residents active and entertained.

They went on to say that residents are always encouraged to join in by staff;

“My client tends to prefer to spend time on her own, however staff continue to ask her if she wants to get involved. Staff know my clients likes and dislikes and as such get her involved in tasks she likes to do. My client likes to go out on trips and staff regularly facilitate this to allow her to do so.”

Finally family members and the Advocate were asked if their family member or client was able to do the things they used to enjoy before joining the home. Some responded to say that due to ill health they weren't able to do as much but still encouraged to do things within their limits, whilst others stated they continue to do hobbies such as shopping and housework.

Staff, the Manager and the Activities Coordinator added that the home has a range of indoor activities for the residents, adding to the list; Therapy pet visits, reminiscence sessions, board games, life skills, weekly visits from Age UK and the home's mini bus is available throughout the week for trips out to the cinema, the pub for meals and drinks, the theatre, swimming once a week and one to one walks etc.

The Activities Coordinator explained that she finds out what hobbies they enjoy, which can be added to the weekly activity schedule or can be provided as a one to one.

“I like to sit and do one to one, reminiscing and chatting.”

All staff added that residents are informed of what activities are taking place and are reassured, supported and comforted to take part. Those who require additional assistance are provided with a staff member who can offer this.

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.

The Healthwatch team asked residents what they thought of the food and if there was enough choice of what they ate and when they ate. The responses given were mixed;

“Some of the choices are nice and some are horrible.”

“It’s nice and there is plenty of choice.”

“The fish and chips is my favourite.”

All residents added that should there be nothing to their liking on the menu then the home would accommodate this and an alternative would be made for them. They added that they all choose to eat their meals in the dining room where they can chat with others.



Family members who responded to the survey and the Advocate commented that the choice of food is varied for residents and were happy that their relative/client was being supported to eat and drink as much as needed; “I’m not there at mealtimes but I think they care enough to watch this and mum is weighed so they are checking she is eating enough.”

They went on to say that mealtimes are made sociable by the home by encouraging friends to sit together and resident’s family can stay for a Sunday meal free of charge.

When asked by the Healthwatch team about food choices and quality, staff give a mixed response ranging from poor to good. Some of the comments we received included;

“Could do with a few changes on the menu.”

“Food is repeated could do with change.”

“The quality and choice of food is good. If residents don’t like options given they are asked what they would like instead.”



Staff went on to tell us how residents are supported to eat and drink at mealtimes and outside of mealtimes. They informed us about how care plans ensure each residents needs are met with the use of special equipment i.e. cutlery, prompting and soft options for those who need it and the hydration station available in the foyer containing drinks and snacks which residents can help themselves to.

Staff and the Manager informed us that the home operates a set mealtime when residents can choose from two choices from the menu, but if they wish they can also eat their meals outside of these times as the kitchen is open 24/7. Residents have the choice to eat their meals in the dining room or their own room if they prefer. The staff make the dining experience sociable by playing soft music in the background and they encourage conversation and interaction by sitting with the residents.



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

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

The Healthwatch team AGREE this was met.

The residents when asked informed the Healthwatch team that they have regular visits from healthcare professionals. They mentioned about visits from the dentist, chiropodists, GPs and nurses. They explained that should they need to see a doctor they just need to speak to a staff member or their family who would then arrange this and GPs etc. would make a visit to the home or if they have an appointment at the doctors or hospital for those who need it, staff will accompany them.

Family members and the Advocate who responded to the survey all stated that the resident's healthcare needs are looked after by the home. One relative



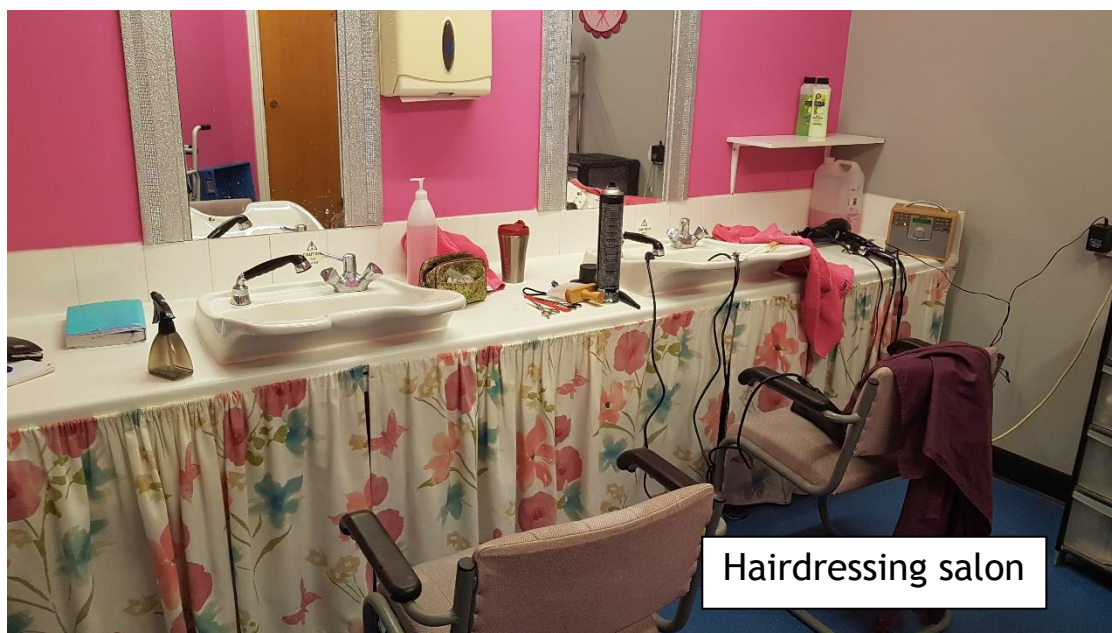
commented; “Since my mam has been at the home which is about 3 months she has had a visit from a doctor, also a dentist and a chiropodist, where slippers were issued.”

The Manager and staff informed us that the home has regular visits from healthcare professionals for example, chiropodists, weekly visits from a local GP and daily visits from the district nurse. Opticians come when needed or to do repairs and the home will record in residents 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.**

Of those residents the Healthwatch team spoke to on the visit, none stated that they had any religious needs. Many did use the homes laundry service with all stating that it was good. On the day of the visit the Healthwatch team witnessed the hairdresser who visits the home on a weekly basis to cut and style the resident’s hair. Several of the residents were getting a haircut by the hairdresser on the day of the visit.



Family and the Advocate informed the Healthwatch team that their relatives/service user didn’t have any religious or cultural needs but were confident that if they had this would have been respected by the home. They all stated that residents have access to the hairdresser on a weekly basis which they enjoy and that they are always clean and appropriately dressed. Two of the



relatives did state that laundry had gone missing on occasion but was quickly addressed by the Manager.

Staff were asked by the Healthwatch team how the home catered for resident's religious and cultural needs. They informed us that firstly they will find out about needs as part of the pre admission and findings are then recorded into care plans. The home also has visits from a local priest but residents can go to services outside of the home if they wish. "The priest comes in and residents have a choice to go to the service but residents beliefs are always taken into consideration." They reiterated that the hairdresser visits the home once a week on a Friday and those who wish to go to their own hairdresser are assisted to do so.

The Manager added that the home ensures that residents get their own clothes back by attaching name tags to clothes.

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 residents were asked by the Healthwatch team if they get asked by care home staff what they think of the home and if they are happy, all the residents responded to say that they do get asked and all but one stated they were happy, comments included;

"Manager asks if I am happy, she is good and friendly."

"Staff ask and I am reasonably happy. Staff are fantastic they go out of their way and never grumble."

The team went on to ask if there was anything they would like to change about the home and have they mentioned this to anyone. All residents but one replied to say that there wasn't anything that they would like to change and the one who did replied to say that they would like to be in their own home. All residents informed the Healthwatch team that should they need to make a complaint they knew that they could approach a staff member or could talk to the Manager, Kim and were confident they would be listened to.

The two relatives and Advocate all stated when asked that they felt welcome visitors to the home; "Staff have always been helpful and happy to answer my queries on my visit. I have never felt unwelcome on my visits."



When asked in what ways they could have a say in how the home is run or give feedback the two relatives stated that the Manager welcomes feedback and they often talk to her. The Advocate stated that she often provide reports in her role to the home on the care that her client receives and also regularly liaises with staff to express any concerns on behalf of her client. Both relatives and the advocate knew how to make a complaint, hadn't had any need to as yet but were confident that any complaint would be addressed appropriately and with respect.

The staff and Manager when asked about the ways that residents, family and friends can have their say in how the home is run informed us of the various methods including; speaking to staff, placing suggestions in the box in the foyer and attending monthly residents/relative meetings. The Manager added that this feedback and complaints are documented and used to make changes for improvement.

One example given to exemplify how this feedback has influenced change was how cash donations made to the home have been used towards projects improving the home such as a mural and a fish tank in the foyer.

Staff went on to say that they are able to have a say in the home by speaking with the Manager or Deputy Manager who both operate an open door policy or via staff meetings.

Indicator 9 - Provide a physical environment which is suitable for the needs of the residents

The indicator states that care homes should be suitable for their resident's needs. Be comfortable, homely, well maintained with high standards of hygiene.

The Healthwatch team STRONGLY AGREE this was met.

Residents were asked questions by the Healthwatch team relating to the physical environment of the home, including is the home clean and tidy and is it a kept to a suitable temperature for them.

All who responded were complimentary about the homes cleanliness stating that is always kept clean and tidy and the staff are meticulous at maintaining this. All were also happy with the temperature of the home saying that it is always



comfortable and many mentioned that they have the ability to control the temperature within their own bedrooms to suit them.

The relatives and Advocate who responded to the survey reiterated this, complementing the homes cleanliness and how it is kept to a suitable temperature;

“The home has always been clean and tidy on my visits and I have no concerns regarding the hygiene of the home.”

They also added that the home is always well decorated and maintained, commenting on how the home is decorated for events such as Halloween.

The Healthwatch team asked family of residents and the Advocate if the home’s environment is made dementia friendly, of those who did respond one stated yes they thought it was and another two were unable to comment as it didn’t relate to their relative.

The Manager informed the Healthwatch team that she ensures that the temperature of the home is made comfortable by regular monitoring of it by the maintenance team. She added that the home has a regular decorating programme, maintenance checks, full time domestics are employed to keep the home clean and well maintained.

When asked in what ways the home is made dementia friendly, staff and the Manager explained that the home is kept clutter free, has names on bedroom doors, bedrooms are personalised, doors are painted bright colours, there are coloured handrails, the home is all on one level and staff wear name badges.



5. Appendices

Appendix 1 - Questions for residents

1. Who is the Manager of the home?
2. What do you think of the Manager?
3. What do you think about the staff here?
4. Do the staff have the time to stop and chat with you?
5. Do the staff know what you need and what you like and don't like? (your daily routines, personality, lifestyle, clothing etc.)
6. What activities are there for you in the home?
7. What activities are there outside the home? (Groups, trips etc.)
8. Is it easy to join in the activities?
9. If you would like to use the garden are you able to?
10. Do you get a chance to do any of the things you used to enjoy before you came here? (i.e. bringing in pets, hobbies, interests etc.)
11. What do you think of the food here?
12. Is there enough choice of what you eat and when you eat?
13. Where do you eat your meals? (Is it your choice to eat there?)
14. Do you enjoy mealtimes? (What do like/dislike about mealtimes?)
15. Have you seen a dentist to check your teeth or an optician to check your eyes or an audiologist to check your hearing recently?
16. What happens if you need to see a doctor or have an appointment at the hospital?
17. Is there respect for your religion or your culture here in your home? e.g. Are you able to wear your own clothes, get your hair/nails done, have a shave, are the laundry staff good at getting your own clothes back to you?
18. Is the home always clean and tidy?
19. What is the temperature like here? Are you ever cold or too warm?
20. Do you get asked what you think about the home or if you are happy?
21. Would you like to change anything about the home? Have you told anyone about this and what happened?
22. What would you do if you wanted to make a complaint about the home?



Appendix 2 - Questions for Managers

1. **Have strong, visible management**
What attracted you to the role of care home Manager/Deputy Manager?
What do you enjoy about the role?
2. **Have staff with time and skills to do their jobs**
In what ways do you encourage staff to develop their skills?
How do you ensure staff have enough time to care for residents?
3. **Have good knowledge of each individual resident and how their needs may be changing**
How do you ensure that staff get to know a resident's life history, personality and health and care needs when the resident first arrives?
How is information about a resident's likes/dislikes and their health and care needs updated as these change and passed on to staff?
4. **Offer a varied programme of activities**
What activities are available for residents inside and outside the home?
Does the home have access to its own transport and able to use this for trips and activities outside of the home?
What encouragement and assistance is given to residents so that they can take part in activities?
How are residents supported to continue to do the things they used to enjoy before coming into the home i.e. hobbies/interests/pets?
5. **Offer quality, choice and flexibility around food and mealtimes**
How do you ensure high standards of quality and choice of food?
What systems are in place to support residents to eat and drink at mealtimes and outside of mealtimes?
What choices do residents have about what and when they eat and drink?
What choices do residents have about where and how they eat and drink?
Does the home have permanent drink stations available to residents?
In what ways do you ensure that mealtimes are sociable?
6. **Ensure residents can regularly see health professionals**
Please tell us about visits from all health professionals such as GPs, nurses, dentists, opticians, audiologists, chiropodists or other health care support mechanisms?
7. **Accommodate residents' personal, cultural and lifestyle needs**
How does the home find out about and cater to residents' cultural, religious and lifestyle needs?
Can you give an example of how these have been accommodated?
What provision is there for residents to regularly get their hair cut/styled?
How do you ensure that the laundry staff get the residents own clothes back to them?
What mechanisms are in place to ensure that residents are always clean and appropriately dressed?
8. **Be an open environment where feedback is actively sought and used**
In what ways can residents and their family have a say in how the home is run?
How do you make use of feedback or complaints from residents and relatives?
In what ways are staff able to have a say in how the home is run?
9. **A physical environment suitable for the needs of the residents**
How do you ensure that a comfortable temperature is maintained in resident's rooms and all communal areas?
How do you ensure the building and its contents are well maintained and decorated throughout?
How do you ensure that the home is always hygienic and clean?
In what ways do you make the home a dementia friendly environment?



Appendix 3 - Questions for care staff

- 1. Have strong, visible management**
What support do you receive from the Manager?
What is your experience of talking to the Manager when you want to ask a question or raise an issue?
- 2. Staff with time and skills to do their jobs**
Do you feel you have enough time to care for residents? If no, why?
Are you encouraged to continue to develop your skills? In what ways?
What do you enjoy about your job?
- 3. Have good knowledge of each individual resident and how their needs may be changing**
How do you ensure that you and other members of your team get to know a resident's life history, personality and health and care needs when the resident first arrives?
How is information about a resident's tastes and their health and care needs updated as these change and how do you know if there has been changes?
- 4. Offer a varied programme of activities**
What activities are available for residents inside the home?
What activities are available for residents outside the home?
What encouragement and assistance do you give to residents so that they can take part in activities?
- 5. Offer quality, choice and flexibility around food and mealtimes**
What do you think of the quality and choice of food?
How do you make sure residents are able to eat and drink at mealtimes as well as outside of mealtimes?
What choices do residents have about what and when they eat and drink?
What choices do residents have about where and how they eat and drink?
In what ways do you try to make mealtimes sociable?
- 6. Ensure residents can regularly see health professionals**
Please tell us about visits from all health professionals such as GPs, nurses, dentists, audiology, opticians, chiropodists or other health care support mechanisms?
- 7. Accommodate residents' personal, cultural and lifestyle needs**
Can you give an example of how the home caters for resident's religious and cultural needs?
- 8. Be an open environment where feedback is actively sought and used**
In what ways can residents and their family/friends have a say in how the home is run?
Can you provide an example of how a resident or their family member has influenced how the home is run?
How do you, as a member of staff have a say in how the home is run?
- 9. A physical environment suitable for the needs of the residents**
How is the home made dementia friendly?



Appendix 4 - Questions for Activities Coordinator

1. **Have strong, visible management**
What support do you receive from the Manager?
What is your experience of talking to the Manager when you want to ask a question or raise an issue?
2. **Staff with time and skills to do their jobs**
Do you feel you have enough time to provide varied activities for residents? If no, why?
Are you encouraged to continue to develop your skills? In what ways?
What do you enjoy about your job?
3. **Have good knowledge of each individual resident and how their needs may be changing**
How do you ensure that you and other members of your team get to know a resident's life history and personality when they first arrive at the home?
4. **Offer a varied programme of activities**
What activities are available for residents inside the home?
What activities are available for residents outside the home?
What activity provision is made for those residents who cannot or do not wish to undertake group activities?
What encouragement and assistance do you give to residents so that they can take part in activities?
How do you ensure that residents have the opportunity to continue to take part in their hobbies and interests?
5. **Accommodate residents' personal, cultural and lifestyle needs**
How are activities tailored to meet a resident's religious and cultural needs?
6. **Be an open environment where feedback is actively sought and used**
In what ways can residents and their family/friends have a say in what activities are delivered both inside and outside the home?
Can you provide an example of how a resident or their family member has influenced the provision of a new activity?
How are the activities provided evaluated to ensure residents are continuing to enjoy them?
How do you, as a member of staff have a say in how the home is run?
7. **A physical environment suitable for the needs of the residents**
How is the home made dementia friendly?



Appendix 5 - Questions for friends and relatives

1. **Strong visible management**
Who is the Manager of the home?
Please tell us a little about the Manager?
2. **Have staff got the time and skills to do their jobs**
Do you feel the staff have the time to care for your friend/relative? Please explain.
Do you feel the staff have the skills to care for your friend/relative? Please explain.
3. **Have good knowledge of each individual resident and how their needs may be changing**
How well do you think the staff know your friend/relative's life history, personality and health and care needs?
Does the home notice and respond when your friends/relative's needs change?
How do they let you know about the changes?
4. **Offer a varied programme of activities**
What do you think of the activities available for residents inside and outside the home?
Please tell us how your friend/relative is encouraged and supported to take part in the activities.
Now they live at the home, is your friend/relative still able to do the things they used to enjoy i.e. hobbies, interests, pets? Please explain.
5. **Offer quality, choice and flexibility around food and mealtimes**
What do think of the quality and choice of food?
How confident are you that your friend/relative is supported to eat and drink as much as needed?
Please tell us how the home ensures that mealtimes are sociable?
6. **Ensure residents can regularly see health professionals**
Please tell us about your friends/relatives access to health professionals such as GPs, nurses, dentists, opticians, audiologists, chiropodists or other health care support mechanisms?
7. **Accommodate residents' personal, cultural and lifestyle needs**
Does your friend/relative have any specific lifestyle or religious or cultural needs?
How do you feel the home respects and accommodates these needs?
What provision is there for your friend/relative to regularly get their hair cut/styled?
How good are the laundry staff at getting your friends/relatives own clothes back to them?
Is your friend/relative always clean and appropriately dressed?
8. **Be an open environment where feedback is actively sought and used**
Do you feel that you are a welcome participant in the life of the home?
In what ways can you and/or your friend/relative have a say in how the home is run or give feedback?
How would you make a complaint about any aspect of the home, management or the staff if you needed to?
Would you feel confident to make a complaint and do you think it would be acted on appropriately?
9. **A physical environment suitable for the needs of the residents**
Do you always find the home at a comfortable temperature for residents?
Is the home always hygienically clean and tidy?
Is the home always well decorated and well maintained?
Do you think the home is a dementia friendly environment?



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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