

Care home life, what it's really like!

Washington Manor



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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 5th April 2019 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 designed to reflect the objectives of the visit. Observations were made on the physical environment and staff/resident interaction etc.

Staff and relatives were also given questionnaires to complete (see appendix 2, 3, 4 and 5).

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

4. Findings - Summary

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

Here is the key which shows the indicator scores



Strongly disagree



Disagree













Neutral



Agree



Strongly agree

1.	A strong visible management	 Strongly agree
2.	Staff with time and skills to do their jobs	Time  Disagree Skills  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	 Neutral
6.	Regular access to health professionals	 Strongly agree
7.	Accommodation of resident's personal, cultural and lifestyle needs	 Agree
8.	An open environment where feedback is actively sought and used	 Agree
9.	Provide a physical environment which is suitable for the needs of the residents	 Agree



Findings

Washington Manor Care Home is a purpose built home, located at:

Hollin Hill Road
Washington
NE37 2DP

Telephone: 0191 419 3081

Provider: St Martin's Care Ltd

Provider's website: <http://www.smcgroup.co.uk/washington-manor/>

Facebook: <https://www.facebook.com/>

See the latest CQC inspection report here:

<https://www.cqc.org.uk/location/1-111575945>

Washington Manor has capacity to support 68 residents aged 65 years and over, who require general residential or Enduring Mental Ill-health (EMI) residential care.

All bedrooms at the home have en-suite toilet and basin facilities and all bathing facilities are communal. All rooms are single occupancy, although at the time of the Healthwatch visit a couple were occupying two rooms in the home. One room was used as a bedroom and the other as a lounge area. Residents and their families are actively encouraged to personalise bedrooms as much as possible. Furniture and soft furnishings can be brought to the home as long as they meet current fire safety regulations.

Requests to bring along small pets to live with residents are considered on an individual basis prior to admission as long as vaccinations are complete and risk assessment criteria is met.

Washington Manor has internet access, which residents can utilise and a hearing loop system is present in the home's six communal areas. The garden area is fully accessible to residents.

Activities are provided by two full time Activities Coordinators and delivered seven days a week.

Although the home operates protected mealtimes (a period of time when activity is reduced so staff can be available to help serve and supervise meals and assist residents who need help to eat and drink. This time also includes limiting visitors), under special circumstances requests from families to join their relative would be considered by the Manager.

At the time of our visit there were 65 residents living in the home. Due to the individual health and capacity of the majority of the residents, the Healthwatch Team were only able to support three residents to fully complete and one resident to partially complete the survey. The team received two staff surveys (one of which was the Manager's), which were fully completed and three staff surveys



which were partially completed. Two completed friends and relative surveys were also received.

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.

Two of the residents which the Healthwatch Team spoke to knew the Manager by name, one other resident could point out the Manager, who he explained had not been at the home long. The remaining resident was unable to name the Manager, but this may have been due to their own individual health and capacity.

When asked what they think of the Manager, the three residents who responded to this question gave the following positive responses;

“He’s friendly and nice. He came to speak to us after our dinner today.”

“For the short time I have known him, OK and so was the Manager before. He is on the ball.”

“He is cheerful. He sings war time songs to uplift our spirits.”



The first floor corridor



One of the two relatives who responded to the survey were able to name the Manager of the home and when asked about him said; “He is a friendly person, who is approachable, whether he is busy in the office or walking in the corridors.”

When the staff were asked what support they receive from the Manager, all of the staff who completed this section of the survey spoke positively. Their comments included;

“I feel like I have full support of the Manager.”

“When I ask for support he is always on hand to give support when needed.”

“My Manager is very supportive to his staff. He is approachable, however since we have new management I personally haven’t had any major issues. If any should arise, I would have no problem speaking about it.”

The Manager informed the Healthwatch Team he has been in the role of Care Home Manager at Washington Manor for three months. He added that he was attracted to this role as he enjoys the challenge of providing high quality care to all residents. He went on to tell us what he enjoys about his role; “Using my existing skills combined with the skills of the staff to give the best care. Spending time with residents, I love the sing-a-longs!”

On our arrival at the home there was one resident sitting with the Manager in his office chatting, they seemed relaxed in each other’s company. The resident then left the office, saying that she would see the Manager later.

The Healthwatch Team made several observations of the Manager’s interactions with residents. During our tour of the building, he was witnessed calling residents by name, also reassuring one resident who appeared to be distressed. He wiped her nose and ensured her hands were clean, in a gentle manner and spoke softly to the lady during this time. He then went to highlight to a staff member that another resident needed to use the bathroom. He came back to the resident and discreetly reassured her that a staff member would be there soon to offer support.

As the Healthwatch Team were observing a sing-along session, which was being facilitated by an Activities Coordinator in one of the communal lounge areas, the Manager came in and sat with one of the residents who had been coughing, he checked she was OK and then proceeded to sing ‘Daisy, Daisy’ to her, which she visibly enjoyed.

One of the Healthwatch Team members noted that the Manager appeared to know residents likes and dislikes as he spoke about residents preferred foods on the tour of the building. Another team member noted that she witnessed the Manager talking to a member of staff and that there seemed to be a good rapport.



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 DISAGREE this was met for staff time and AGREE this was met for staff skills.

When the residents who were supported to complete the Healthwatch survey were asked about the staff at Washington Manor, all gave positive comments;

“They work too hard and very long shifts. I have no issues with the staff.”

“Good, they are all nice people - I have no complaints.”

“Wonderful. They all work very hard and for long hours. They are very pleasant with you.”

“Fine, all the staff speak, there’s only one man who doesn’t.”

All of the residents the team spoke to stated that the staff have time to stop and chat to them. Their comments included;

“We have friendliness and a laugh. The girl who looks after me is lovely.”

“Yes, they normally ask what you have been doing.”

“As much as they can. I get a chat when I want one.”

“Yes, I talk to them all of the time. The staff here are good workers.”

When the relatives were asked if they feel the staff at the home have enough time to care for their relatives, we received these mixed responses;

“Yes, making sure my relative is clean and fed appropriate to their needs.”

“No, despite having no problems with the care my mam receives, I feel at the moment the home is understaffed.

When asked if they feel the staff have the relevant skills to care for their relatives, both gave positive responses;

“Yes and they will always get help if unsure.”

“I do believe the staff are well enough skilled to care for my mam, but I say again that I feel the care is at risk due to being understaffed.”

The staff who completed this question of the survey stated that they do not have enough time to care for the residents, citing demand on their time from some residents and the high volume of paperwork to be completed.

All of these staff went on to say that they feel encouraged by the home to continue to develop their skills by undertaking courses and getting advice and support from senior staff.

All of the staff indicated that they enjoy their jobs at Washington Manor. Their comments included;



“I enjoy changing people’s lives and seeing smiling faces.”

“I like all aspects of my job. Teamwork is essential in the kitchen. We have a good team and all help each other. I also enjoy the cooking and receiving feedback from the residents and their families.”

“I love to help and support residents to live life to the full.”

“I like all of what I do in my job role, but it can get stressful at times.”



The Manager informed the Healthwatch Team that he ensures staff have enough time to care for the residents and has recently reduced the amount of paperwork completed by consolidating various forms into one daily form.

When asked in what ways he encourages staff to develop their skills, the Manager said; “We have recently implemented e-learning to support face to face training. All staff are encouraged to enrol on apprenticeship courses.”

During the Healthwatch Team visit to Washington Manor, we witnessed several positive interactions between staff and residents. During an activity session, one resident was seen shivering, a member of staff immediately wrapped her in a blanket and sat rubbing her arms until the lady was more comfortable. One other staff member was seen supporting a resident from her chair to her walker, this was done gently and the staff member chatted to the resident as the task was undertaken. The resident seemed relaxed in the staff member’s company.



Another staff member was observed helping one of the residents up from the dining room chair to go into the lounge. The member of staff was patient and taking things at the resident's own pace, without rushing her and lending a hand to get the resident up from the chair.

One of the Healthwatch Team noted that Washington Manor felt like a relaxed and friendly environment.

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 at the home know them well and know their likes and dislikes, three of the residents stated that they do. Their comments included;

"I think so yes. Here is an example, if I have the same clothes on for two days, they notice and ask if I think I should change and then help me to do so."

"Oh yes, they tick me off for not pressing the buzzer when I need them, but I try not to be a nuisance."

When asked if the staff at the home know their relatives life history, personality and health and care needs, both relatives gave positive responses;

"Health and care needs are great. The rest they are still learning as mam has only been in the home for a short time."

"I feel they look after my mams needs very well."

Both relatives agreed that the home both notice and respond to changes in their relative's needs, with one relative adding that staff inform them of any changes. The other relative said; "Most of the time I get to know from my mam as she still understands everything going on around her."

When the staff and Manager were asked how all staff get to know a new resident's life history, personality and health and care needs, they stated that this is done firstly during the pre-assessment. Also by speaking to the resident, their families and senior staff members who were in attendance at the pre-assessment meeting. All information is then used during the formulation of the resident's individual care plan, which all staff are encouraged to read and familiarise themselves with.

They went on to say that resident information is updated into their care plans as needed and that care plans are evaluated on a monthly basis. Staff get access to these changes by speaking to senior members of the team and medical professionals, attending handover meetings and reading care plans. The cook said; "Information is passed on to me via a Senior Carer or management e.g. dietary requirement forms."



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 available to them inside the home, three residents responded and spoke enthusiastically about them. Activities they told us about included; keep fit, meditation, bingo, spending time in the garden, reading, talking and sing-a-longs. Resident comments included;

“The meditation is very relaxing and very popular. The carers get everyone along to join in. I join in where I can.”

“I enjoy the sing-alongs. I do everything that is going on.”

When the team asked residents about trips and outings, we received the following responses;

“I want to go out, but get very anxious now and can’t anymore.”

“I haven’t been on any outings to date, but my family come here every day.”

“I’m quite happy here, but we have been to the beach.”

“We will be going out when the weather gets better.”

The residents added that they are looking forward to using the home’s garden in the warmer months.

Residents were then asked if they get the chance to engage in past hobbies and interests. One person stated that they used to like bird watching, but is no longer interested. The remaining resident respondents to the survey gave the following list of their hobbies and interests; knitting, watching TV and DVDs, listening to the radio, using their iPad to send messages to their friends and family and reading.

When the relatives were asked what they think of the activity provision at the home, they both gave positive responses;

“Very good inside the home. I have to check the board in case there is something happening before I arrange to take mam out.”

“There are inside activities like excercises and bingo, as well as other activities.”

Both relatives added that their relatives are encouraged by the homes staff to take part in the available activities.

One relative went on to say that as their relative is elderly, they are now unable to undertake the majority of the past interests and hobbies, although she still enjoys reading.



St. Martin's Care Ltd

Activities

Washington Manor Care Home

WEEK 1st 7th APRIL

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	Pamper Day Hand + nails	Keep Fit	Hair Dresser	Keep Fit	Arts + Craft	Music - Instruments	One to one
Afternoon	One to one	Bingo	Hand + nails	Mix up	movie afternoon	Board Games Quiz	Bingo
Evening				Little Onion Club 5.30/7pm			

Activity schedule

Staff and the Manager of the home gave the following list of activities which take place in the home; one to one activities for those residents who stay in their rooms, crafts, music, exercise, knit and natter, pamper sessions, films, bingo, visits from external entertainers, the summer event, sing-a-longs, quizzes, dancing and nail art. The Manager added that the home is waiting for the delivery of a new pool table, which will form part of a new 'men's themed area' on the upper floor.

When asked about the activities available to residents outside of the home, we were given the following list; visits to local shops, museums, meals out, Sunderland Illuminations and other trips. One member of staff said; "There is very little at present."



Dementia dolls

The Manager informed the Healthwatch Team that the home does not currently have its own minibus.

When asked what encouragement is given to residents to join in the activities, the staff and Manager stated that staff sit with residents during activities to offer support if required. Their responses included;



“We ask them if they would like to join in.”

“Sit with them to give help where needed. Residents love it if staff join in with singing and dancing.”

“I feel some residents are not encouraged enough.”

When the Manager was asked how residents are supported to continue to do the things they used to enjoy before living at the home, he said; “This is asked as part of the pre-assessment process and encouraged by activities staff and care staff. All pets are welcome in the home.”

During the Healthwatch visit some team members witnessed a sing-a-long session taking place in one of the communal lounge areas of the home. Residents were sitting around a large screen which displayed the words to the songs which they were singing along to. The Activities Coordinator was facilitating the session and was also playing a ball game with residents at the same time. The Activities Coordinator was also supporting one resident to drink a fortified drink during the session. The atmosphere was vibrant and happy.

During our tour of the building the Manager pointed out the presence of an organ in one of the communal areas of the home and added that one female resident enjoys playing it. The Manager also showed the team photos of ‘The Little Onion Club’ which are a group of young children who come into the home and support residents to engage with gardening activities and chat to residents on a one to one basis.



The secure garden area



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

All of the residents who were supported by the Healthwatch Team to complete the survey spoke mostly favourably about the quality of food at the home and stated that there are choices made available for them. Comments included;

“It’s very good. I don’t have a favourite as it is all tasty. A lady comes to see me every day to introduce the menu to me so I can make my choices.”

“Breakfast is lovely, then there is a main meal at lunchtime and soup and sandwiches for tea. I eat small meals due to my health.”

“I eat everything they put on my plate, I have no complaints.”

“The mushroom soup is nice, but the potato and leek is like wallpaper paste and I don’t like the gravy.”

All of the residents stated that they eat their meals in the communal dining areas, where they can chat to other residents and added that they enjoy mealtimes. One resident said, laughing; “I enjoy mealtimes, we all have a bit of a whinge if the tea is cold or something.”

Comments also included; “One day somebody made my porridge with cream. Oh, it was beautiful, so I have it like that every day, followed by sausage, egg and tomatoes.”

When asked what they think about the quality and choice of food at the home the relatives replied;

“From what my mam says, some days the food is not too good, but usually is good.”

“The food is very good and the choice is also very good.”

When asked if they feel confident that their relative is supported to eat and drink as much as needed the relatives both responded positively. Comments included; “Very, as mam went through a time when she had no appetite.”

The relatives stated that mealtimes are made sociable by their relatives being encouraged to sit in the communal dining areas at tables with other residents. One relative added; “I was thinking every now and again to meet other residents it would be good to change tables.”



The menu board

When staff were asked about the quality and choice of food available to residents the Healthwatch Team received a mixed response. One member of staff stated that the quality of food at the home is very good and that kitchen staff will make alternatives to the menu upon residents requests. The Cook stated; “There is a wide variety of food. Residents are encouraged to say how they feel about their food as it is very important. I have very good feedback when asked.”

Other staff stated that they feel there should be more choices available as the same foods are offered. The Manager said; “There is a choice of two options at each meal, plus sandwiches, omelette and baked potatoes.”

When staff were asked how they make sure residents are able to eat and drink both at mealtimes and outside of these times, they stated that residents can make their own choices from mealtimes menus, staff offer assistance when residents require it, food and fluids are offered throughout the day, staff know the needs of the residents, staff use encouragement techniques, food is cut up for residents who need this kind of support and drinks are offered in specialised beakers. The Manager said; “Snacks and drinks are available outside of mealtimes in addition to mid-morning and mid-afternoon drink and snack rounds.”

When asked what choices residents have about what and when they eat, staff informed us that although the home has set mealtimes, residents can eat and drink at any time of the day and that this is facilitated by the kitchen staff. One staff member said; “There is not much choice. Residents do request other things from



the teatime menu. Mealtimes can be changed to suit the residents at any time. Snacks and fluids are always available.”

The Manager said; “Residents are asked what they would like to have. We also use information gathered at pre-assessment and course of stay.”

All of the staff who responded to this part of the survey agreed that residents can always choose when and where they eat and drink. Comments included;

“Some residents will tell you where they would like to eat and when. Staff always give choices.”

“Some residents sit in the dining room, others prefer to stay in their rooms or sit in the corridor with a table. It’s the resident’s choice here.”



The Manager informed the Healthwatch Team that there is a permanent water station available at the home, alongside tea and coffee making facilities on both units.

Staff and the Manager went on to tell us that mealtimes are made sociable times, by staff sitting with residents and chatting to them. Residents are also encouraged to chat amongst themselves. Mealtimes are unhurried and a calming atmosphere is facilitated. The Manager added that he is going to implement two sittings at mealtimes to allow extra time for those residents who need assistance.

During the Healthwatch Team visit one team member observed two ladies sitting at a dining table near the window after lunch. They seemed quite happy chatting and singing. We also witnessed the ‘tea trolley’ serving a variety of drinks, biscuits and homemade cakes to residents in their own rooms and the communal areas.



Indicator 6 - Regular access to health professionals (GPs, Dentists, Opticians, Chiropodists, Audiologists etc.)

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

The Healthwatch team STRONGLY AGREE this was met.

When asked about health professionals who visit the home, none of the residents stated that they had seen a dentist, although one person said that they would ask the staff to make an appointment if required. Residents informed us that they had seen an optician, with one resident adding that she had received the new glasses she was wearing on the day and is very happy with them. Residents also said they had seen a Chiropodist. One resident said they had not had their hearing checked whilst living at the home, however staff apply a spray to her ears every week as prescribed.

All three residents who responded to this section of the survey stated that if they needed to see a doctor the staff would arrange this for them. Two residents added that the home is now aligned with a dedicated GP practice and the GP visits every week to ensure the residents are well. Comments included; “The new doctor is lovely. She comes in every Monday to see us. If you need anything, she sees you, she’s very nice.”

Another resident added that if they have a hospital appointment, staff accompany them using either patient transport or a taxi.

When relatives were asked about their relative’s access to healthcare professionals the relatives who responded to the survey said;

“Everything is OK, but the doctor never visited the home until recently.”

“You just have to ask a Carer to make an appointment, The Carers do notice if anything needs doing.”

When the staff and Manager were asked about visits from all health professionals who offer support to the residents at Washington Manor, we were informed that the home is now aligned to a local GP practice. A GP from this surgery attends the home on a weekly basis to visit residents. The home also has regular visits from a Chiropodist, Vision Care Opticians and District Nurses. All medical visits are documented into the 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 AGREE this was met.**

Two residents were able to respond when asked the questions on the survey about their lifestyle and cultural needs. They told the Healthwatch Team that they have choices around which of their clothes to wear and that clothes have gone missing on occasion during the laundering process. One resident said; "There are mix ups sometimes, but they come back to you. It must be a big job."

One resident informed us that although there is a hairdresser that comes into the home on a regular basis, she still prefers her hairdresser of 20 years, who comes to the home to look after her hair. She added that there are regular church services at the home from visitors from a local church, she said; "Church people come in here and the services are quite nice. They are from the local Church."

A gentleman respondent said that he has all his own shaving equipment and is still able to shave himself.



The home has a dedicated Hairdressing Salon

Neither of the relative respondents stated that their relatives have any specific lifestyle, religious or cultural needs. One respondent, when asked if the home respects and accommodates these needs, replied saying; "Not good, as mam has been in the lounge when communion is given."

When relatives were asked about the provision at the home for their relative to have their hair cut/styled, they were both aware that a hairdresser visits the home, although one person added that their relative prefers to go out to a hairdresser, which gets them out and they meet other people.



Both of the relatives agreed that the laundry service at the home is good. One relative added that they choose to wash their relatives clothes themselves and the other did say that there has been occasions when items have been mixed up.

When asked if their relative is always clean and appropriately dressed, the relatives said;

“Mam is always dressed comfortably for the day.”

“Very, at all times.”

The Manager informed us that the home finds out and caters for a resident’s cultural, religious and lifestyle needs at the pre-assessment stage and that spiritual needs are built into care plans.

The Manager and some of the staff who responded to the survey process stated that visitors from a local church come to the home to offer religious services and Holy Communion.

The Manager went on to say that the home has weekly visits from a hairdresser who cuts/styles resident’s hair. Clothing is either named or has a resident’s room number on them to ensure they get back to the correct resident after the laundering process. When we asked the Manager what mechanisms are in place to ensure residents are always clean and appropriately dressed he said; “Staff take pride in the people they support and their appearance. This is monitored by the Management Team.”

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 asked if the home is always clean and tidy, two residents responded and said;

“Dot and Louise are always around. They clean my toilet and bathroom every day.”

“It’s lovely - spotless! They clean every day.”

All three residents agreed that the home is always kept at an appropriate temperature. The Healthwatch Team observed that radiators were fitted with thermostats, windows could be opened and one resident the team spoke to has a portable fan in her room, which she was using on the day.



Both relatives who responded to the survey process stated that they feel welcome participants in the life of the home. One person said; “I am always greeted with a smile and hello.”

When asked how they and their relative can have a say in how the home is run, the relatives stated that there is a monthly meeting, where comments and feedback can be given and that they had witnessed a questionnaire asking for feedback.

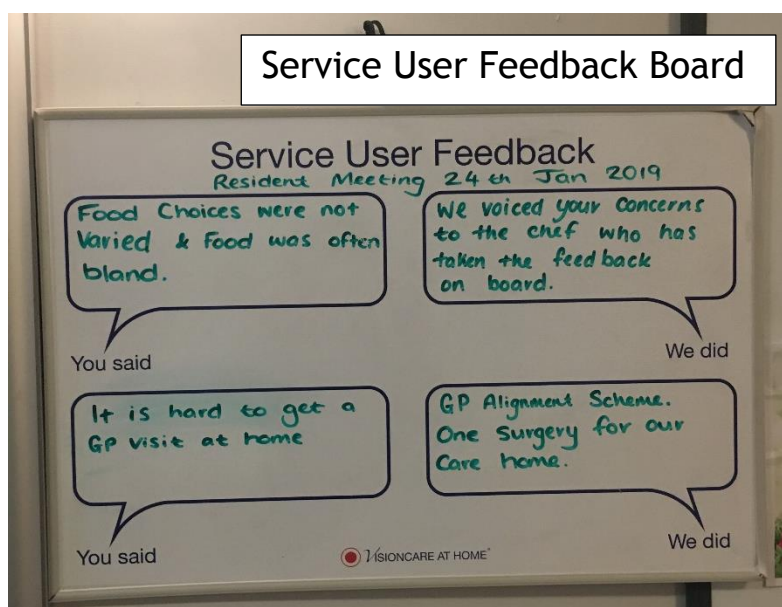
Relatives said they would speak to either the Lead Nurse, Senior Carer or Office Staff if they ever need to make a complaint. When asked if they were confident that their issue would be acted on appropriately they said;

“Yes, hopefully.”

“I have never really had to make a complaint, but I would guess it would be acted upon.”

Date	Time	Venue
22 nd February	2pm	Small Lounge Albany Unit
18 th April	2pm	Small Lounge Albany Unit
20 th June	2pm	Small Lounge Albany Unit
22 nd August	2pm	Small Lounge Albany Unit
26 th October	2pm	Small Lounge Albany Unit
12 th December	2pm	Small Lounge Albany Unit

Residents meeting schedule



When the staff and Manager were asked in what ways residents and the friends and relatives can have a say on how the home is run by attending regular resident/relative planned meetings or the Manager’s Surgery and by the Manager having an open door policy to allow them to access him at any time.

The Manager stated that he makes use of feedback and complaints from residents and their relatives by looking at them as lessons learnt to adjust practice.

Two staff members informed us that they can have a say on how the home is run by attending staff meetings with the Manager. The majority of staff did not answer this question on the survey. The Manager stated that staff can have their say by attending staff meetings, the Manager’s Surgery and that the Management Team is open to new ideas.



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 AGREE this was met.

Although none of the residents the Healthwatch Team supported to complete the survey said they had been asked if they are happy at the home, they all indicated that they are happy. Comments included;

“It's the situation we live in. I would rather be here than sitting in a chair at home.”

“I need to be safe. Before I came here my family were running around after me and they have their own life to live. I have had a few awful falls and my family were frightened that something would happen to me.”

All three residents said that there is nothing about the home which they would like to change. Here are their comments;

“No, I'm happy here.”

“No, I don't think so. I'm well looked after and everyone is nice.”

“I can't say there is anything.”

When asked what they would do if they ever felt they needed to make a complaint, all three residents stated they would either speak to the Manager or other staff members.

When asked if the temperature of the home is always at a comfortable level for their relative, relatives responded;

“Yes, definitely.”

“Sometimes it can be a little warm.”

Both relatives strongly agreed that the home is always hygienically clean, tidy, well decorated and well maintained.

The relatives also agreed that the home is a dementia friendly environment. Comments included; “Yes, I do. The home is safe, warm and there are activities to help the residents.”

The Manager stated that he ensures the home is always at a comfortable temperature for residents by asking residents and having a central heating system in place as well as fans in individual rooms to cool residents when needed.

He ensures that the building and its contents are well maintained and decorated by employing a full time maintenance person, having a supportive Head Office and undertaking Environmental Audits.



He also ensures that the home is always hygienic and clean by having excellent housekeeping staff, cleanliness is monitored daily and monthly Infection Prevention Control Audits are also undertaken.

When asked how the home is made a dementia friendly environment, only two staff members responded to this question, they said;

“All staff are trained in dementia. There are posters and lots of nice surroundings for dementia. There are dolls and sing-a-longs.”

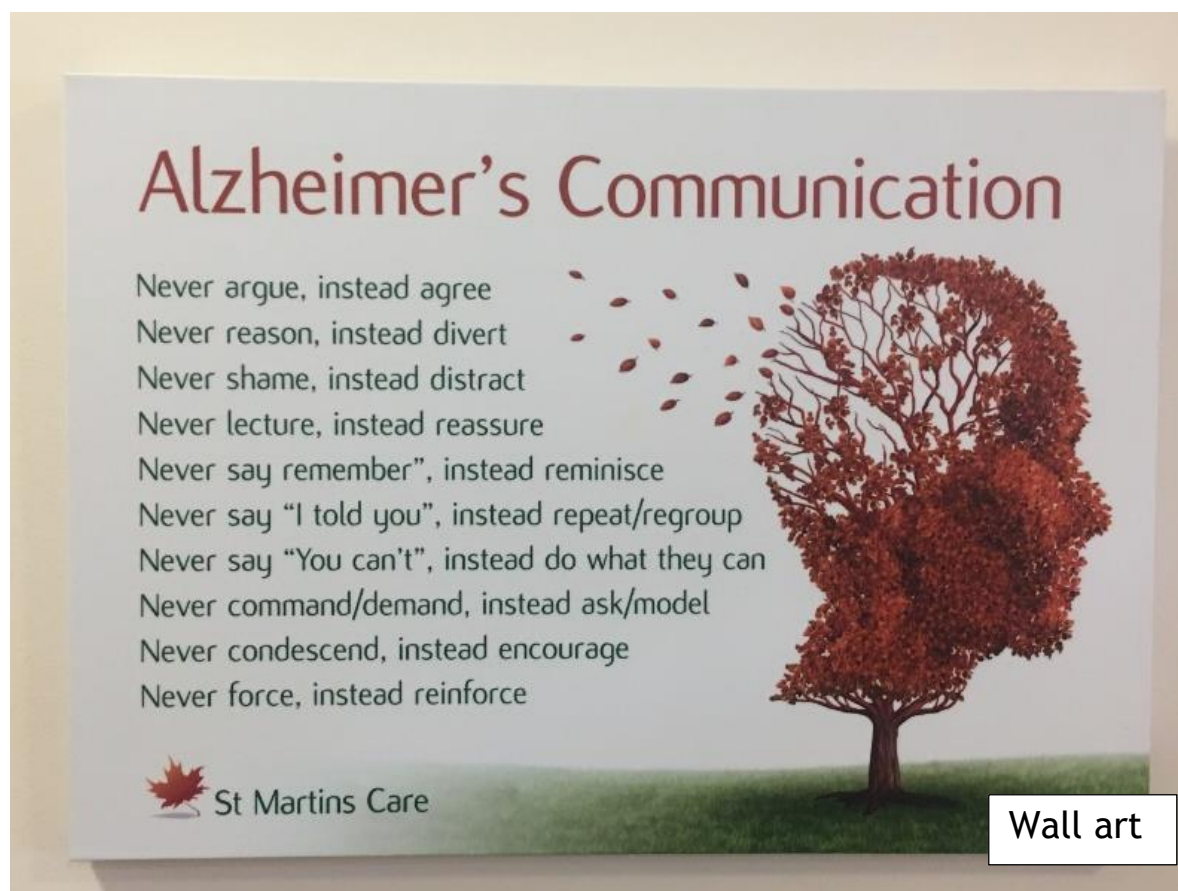
“We have a floor for dementia. We also have dementia dolls etc.”

The Manager said; “We are currently awaiting new dementia friendly signage and we keep the home bright and relaxed.”

During the Healthwatch Team visit the team noted that the home appeared to be clean and well maintained. The Manager informed us that the carpets in the home are gradually being replaced for washable laminate flooring. Communal areas and residents rooms were light and bright, with large windows.

In the communal areas there were several displays showing past activities and events, including photographs of residents taking part.

Some Healthwatch Team members noted the presence of unpleasant odours in two areas of the home.





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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