

**Cravenside Home for
Older People
Barnoldswick
Enter and View Report
Tuesday 24th October 2017**



DISCLAIMER

This report relates only to the service viewed at the time of the visit, and is only representative of the views of the staff, visitors and residents who met members of the Enter and View team on that date.

Contact Details:

Cravenside Home for Older People

Lower North Ave

Barnoldswick

Lancashire

BB18 6DP

Staff met during our visit:

Claire Priestley (Manager)

Date and time of our visit:

Tuesday 24th October 2017 10.30am-12.30pm

Healthwatch Lancashire Authorised**Representatives:**

Michele Chapman: (Lead) Project Officer

Linda Brown Senior: Project Officer

Jeanette Newman: Project Officer

Gill Green: (volunteer)

**Introduction**

This was an announced Enter and View visit undertaken by authorised representatives from Healthwatch Lancashire who have the authority to enter health and social care premises, announced or unannounced, to observe and assess the nature and quality of services and obtain the view of those people using the services. The representatives observe and speak to residents in communal areas only.

This visit was arranged as part of Healthwatch Lancashire's Enter and View schedule. The aim is to observe services, consider how services may be improved and disseminate good practice. The team of trained Enter and View authorised representatives record their observations along with feedback from residents, staff and, where possible, resident's families or friends.

The team compile a report reflecting these observations and feedback, making comment where appropriate. The report is sent to the manager of the facility for validation of the facts. Any response from the manager is included with the final version of the report which is published on the Healthwatch Lancashire website at www.healthwatchlancashire.co.uk

Acknowledgements

Healthwatch Lancashire would like to thank Claire Priestley, together with staff, residents and visitors, for making us feel welcome and taking part in the visit.

General Information

Cravenside Home for Older People is owned by Lancashire County Council with places for forty-five residents. There were three vacancies on the dementia facility at the time of our visit. The person in charge is Claire Priestley.

Information obtained from carehome.co.uk states that the home provides care for people who are affected by dementia, old age, mental health condition and physical disability.

Methodology

The Enter and View representatives made an announced visit on Tuesday 24th October 2017 10.30am-12.30pm.

We spoke to 16 residents, seven staff and four relatives, where possible within the constraints of the home routine, people's willingness and ability to engage and access to people in public areas. Discussion was structured around four themes (Environment, Care, Nutrition and Activities) designed to gather information concerning residents overall experience of living at the home.

The team also recorded their own observations on the environment and facilities.

As some residents were receiving visits, choosing to stay in their rooms or being nursed, we spoke with 16 of the 42 residents.

Our role at Healthwatch Lancashire is to gather the views of service users, especially those that are hard to reach and seldom heard, to give them the opportunity to express how they feel about a service regardless of their perceived ability to be able to do so. It is not our role to censor feedback from respondents.

Observations were rated on Red, Amber, Green scale as follows;

Green = We would choose this home for a loved one.

Amber = We may choose this home if some improvements were made

Red = We would not choose this home for a loved one unless significant improvements were made.

Summary:

Cravenside Home for Older People is a purpose-built facility set in a pleasant area with public amenities and parking close by. Built in the late 1970s the building although adequately maintained is now in need of an update and redecoration however, the manager confirmed that the provider had a budget for addressing this.

Representatives found the home to be reasonably pleasant and comfortable with staff generally enjoying positive relationships with residents.

Representatives also considered that in terms of the external and internal environment Cravenside was adequate.

However, feedback from respondents in terms of food and menus, was consistently negative and representatives considered that this was an issue that required further consideration by the provider.

Similarly, there was significant negative feedback from both residents and staff in respect of staffing levels.

Based on the criteria, the Enter and View Representatives gave the home an overall score of:

Amber

Enter and View observations

Pre-visit and location

Prior to our visit we were able to access a comprehensive website and a printed brochure was available on the day as was a printed service user guide.

Cravenside Home for Older People is set in the rural town of Barnoldswick with the facility being close to a main road, transport and public facilities. The home is sited in a prominent position overlooking the town green and is clearly signposted. There was sufficient parking outside the facility.

Representatives noted appropriate disabled access and a dedicated disabled parking space.

All contact with the facility prior to our visit was courteous and helpful.

Green

The external environment

Information produced by the provider describes the facility operating and built in 1978 and being a 2-storey building with 45 bedrooms, stating, “The accommodation within the home is split into six separate residential units. The ground floor contains the reception, the office, main kitchen and staff room”.

During the time of our visit representatives focused on Glen and Dean residential Dementia units and the Valley, Marles and Stanley residential units.

Representatives considered the exterior of the building to be adequately maintained however we saw litter which appeared to be an incontinence pad outside one ground floor window facing the street.

A safe and pleasant hard landscaped area was available for residents to sit in the warmer months and we saw benches, tables and planted containers overlooking the main road.

Access to the home was secure and it was clear to where we should report. There was a slight delay in the door being answered and a further slight delay before we met the Manager.

Green

The internal environment/reception -first impressions

The Manager and her staff made us feel very welcome. However, first impressions of the environment were of a home in need of redecoration and a reception area which was cramped and dark.

We were able to use antibacterial hand gel and sign into a visitor's book provided. We also saw a comprehensive notice board. The Healthwatch poster was prominently displayed as requested and we saw further advice, information and brochures. Other noticeboards around the home displayed the one-page profiles of staff, signposting to Advocacy Services and information about social events.

Representatives also observed a "suggestion box" placed in reception.

Staff were easily identifiable by a standard uniform in different colours, but we did not see key staff identified photographically on the noticeboard.

There was no discernible odour throughout the building.

Green / Amber

The observation of corridors public toilets and bathrooms

Representatives considered that corridors throughout the home were restricted by the design of the building and we saw staff wheeling laundry trolleys experiencing difficulties navigating them.

Contrasting handrails were provided in corridors and we saw artwork displayed on the walls some of which had been produced by residents. Displays of items of reminiscence were also observed around the home such as representations of an old fashioned sweet shop and a "memory board". Generally, representatives observed the corridors to be clean, uncluttered and well-lit but requiring redecoration.

Representatives observed that where residents had requested memory boxes were displayed next to bedroom doors.

We saw that toilets and bathrooms were indicated by pictorial, written and colour coded signage, but that adaptations were not colour coded.

There were sufficient public bathrooms which were stocked with soap, toilet rolls and hand washing provision, the majority were clean however, in one toilet on the Dementia unit the seat was soiled and the toilet unflushed. Whilst we were there the cleaner attended to this.

Green / Amber

The lounges, dining and other public areas

Differing areas displayed names over the doors to the lounges aiding orientation. However, in common with the rest of the facility representatives considered that these areas too were in need of an update and refresh.

The initial part of our visit focused on the lounge areas of Glen Close and Dean Close. We found that both these areas were adequately maintained with sufficient comfortable seating for the number of residents. The Dean Unit was very quiet when we arrived, and most residents were gathered in the Glen Unit overlooking the garden. An adjacent “garden room” served as a quiet place for residents and visitors to sit. The units were served by a central small kitchen area and staff told us that relatives could use this to make drinks.

Lounges had integral dining areas which we found to be clean and comfortable with sufficient seating for the number of residents with homely touches such as fresh flowers and fruit on the table, soft toys and table lamps.

A daily menu was displayed throughout the home indicating a lunch of cauliflower soup or meat salad followed by spotted dick pudding. The evening menu indicated braised steak or vegetable sausage followed by summer fruit fool dessert. Residents told us there was some choice around the menu and we saw residents being offered melon and milkshake. One resident was heard to say he didn’t want “sandwiches and soup again” and he was offered spaghetti on toast instead.

Many of the residents in the Dementia unit were asleep with the TV on. We observed that two of these residents had drinks beside them and it was unclear whether other residents had been offered drinks.

Later we visited the residential units Marles Close and Stanley Close on the first floor and Valley Close on the ground floor.

The residential units echoed the layout of the ground floor units with the garden room being replaced by an attractive sitting room with a CD player and traditional lounge furniture. The residential facility appeared to be a little less bare and with more social activity than the ground floor units. We observed residents in a knitting circle with the activity coordinator which was a relaxed and friendly atmosphere. We observed that books, games and daily newspapers were readily available. Residents also told us that they attended “OOMPH” Exercise sessions.

The dining tables in the residential units were nicely set with tablecloths crockery condiments and napkins and the menu was displayed on the notice board. We also noted orientation aids such as clocks displaying date, day and time. We saw a notice on the notice board inviting residents to a meeting had taken place on 21st September 2017 however we did not see a notice for a more recent meeting in October 2017.

Green

Observations of resident and staff interactions

There were varying levels of interaction observed throughout the home. On the Dementia unit levels of interaction appeared to be limited and we observed some staff members passing by residents without acknowledging them. However, on other unit's staff and residents enjoyed a great deal of "banter" in particular a ground floor unit where the staff member appeared heavily invested in outcomes on "her" unit. Likewise, we saw some staff members being affectionate with residents and hugging them.

There were instances when it was difficult for representatives to be clear about the sufficiency of staffing levels. Representatives observing a lady with limited mobility exiting a bathroom and becoming disorientated and unsteady. A maintenance man seeing this helped her back to her room.

However, staff members reported going into town with residents for shopping trips and fish and chips. It was evident that family and friends were encouraged to visit and felt comfortable doing so. It appeared that residents enjoyed social events such as a weekly visit by the hairdresser and we saw photographs of a "Glamorous Grandmother" and "Gorgeous Grandad" competition. Staff told us about a trip to another care home for afternoon tea. We also saw examples of person centred provision with a resident celebrated on the noticeboard as a former RAF pilot in WW11.

When asked about their experiences of living at Cravenside a significant number of residents chose to comment negatively about the food and we have noted that this issue had also been raised at the last CQC inspection in May 2016.

Representatives did not hear any call bells throughout the duration of our stay.

Green / Amber

Additional information

The manager told us that Lancashire County Council had allocated funds to upgrade the facilities at its residential care homes.

Staff told us that there were laundry staff employed three hours a day.

Staff told us that hairdressers came in each Friday.

The Activity Coordinator told us that she works sixteen hours a week over five days on all six of the units.

Feedback from residents

Environment

"It's comfy. I like it, I wouldn't say so if I didn't".

"If I had a friend who needed a care home I would call them to come here. It isn't cheap, but you are fully catered for".

"It's comfortable - They can all fall asleep that's how comfortable it is".

"I fitted in - strange thing is I didn't expect it to be such a nice thing to do (coming here)".

"It's comfortable here. This place must have cost a fortune to build, look at it, I don't want to stay too long though".

"It's ok, I wouldn't like to stop at this end (unit)".

"Very nice, I could do with a bigger room, but I like the view from the window".

"It's kept clean".

"Remarkable really. There's so much in it and so much to come out of being here".

"I like it all I am happy here".

"I am comfortable enough".

"I make sure the curtains are put up as people walk outside."

Activities

"I started going to OOMPH! It depends on how I feel".

"I have been to bingo a few times but find it hard as I only have one hand and one leg working".

"I could go out but my wheelchair its broken and it's my own so I'm waiting for my son to mend it for me".

"They take me on outings".

"I can have a bit of fun here".

"We have jumble sales and all sorts of things on".

"I can't remember if we make suggestions, but they do ask us sometimes what we want".

"They really put themselves out to make it a good place for you".

"I did those two paintings on the wall - I would prefer them to be in the hall where everyone can see them".

"We sometimes go on trips".

"I play bingo".

"We have some laughs".

"I don't know if they will have a Halloween party. It depends when it is as to whether I join in - they have got decorations up".

"We do different things each week".

"It's such a laugh. Look at everyone's faces it's smashing".

"Everyone is doing their own thing but when we're together it's super".

"They do activities here, I am happy to be in my room most of the time. I like going out on trips. I will join in with other things when I want".

"We could do with more trips out - not been any lately".

"Such a lot of things to do that I enjoy. Lots of company and I like being nosey - you see so many things here that are interesting. Look at these blankets we are doing, and we will be doing something else next week".

"I used to love cooking and make bread but don't do any here. I think I may be doing some this week, but I am not sure."

"I don't join in they make me sit here. I don't watch tv, I don't do activities because I don't want to".

"I mainly watch TV at night".

"There is singing with a member of staff and a man I know comes in to sing songs".

"I like doing crosswords".

"I enjoyed being able to choose some jumpers for myself at the clothes party on Saturday even though my daughter said I didn't need them, but I just fancied buying them".

"There has been Army night and an Indian night and residents dressed up".

Care

"It can sometimes be a bit hectic but there is always somebody there to watch us".

"There seems to be enough staff".

"They take you the toilet when you want to go".

"I like living here it's very good".

"Everyone seems lovely".

"I don't get care I am old enough to look after myself".

"I get help to wash and dress. They are very good to me here".

"I think there are enough staff, but I do hear people crying out of a night, so I don't know if anyone goes to them".

"Some staff care and are nice".

"They are always short staffed".

"Some staff are nice some staff aren't Some care, and some don't".

"They think I should move all the time. It doesn't work like that with my condition sometimes I can move and sometimes I can't. It really gets to me when they think I am not trying. They say, "You moved yesterday so you can today" and they think I'm not trying so I tell them to bugger off".

"There are quite a lot of staff, but they seem to drift away in some cases. I wouldn't say they were busy though".

"Staff do pretty well".

"Staff are very nice".

"The staff are good".

"There are not enough staff".

"The service is terrible, if you want help during the night you can wait two hours and residents are walking around during the night with no staff to control them".

"There are no staff".

"The activity coordinator has no help from other staff when activities are being done".

Food

"It's like anywhere some food is really good and some I wouldn't give house room for. There are things you like and things you don't like. When there is nothing on the menu they will do me something like a baked potato. There is always some way around it".

"It's very good. You get to choose what you want, and we sit together at the table".

“Can’t really call it food. When they have a glut of something then that goes on sandwiches.”. Probably just get sandwiches again for dinner”.

“I don’t always get my favourite meals like stew and potatoes and carrots”.

“There could be a bit more variety”.

“The food could be better. I get a menu and the carer ticks it off. I don’t get a lot of chicken which I would like. The other day my potatoes were hard as they hadn’t been cooked enough. I told the carer who passed it on to the cook and I wasn’t given anything else”.

“We don’t get asked what should be on the menu. It’s the same food day in day out I get a bit bored with it. I would like more chicken, shepherd’s pie, corn beef hash, potato pie - they’re easy to make- and a full English breakfast”.

“We get cereals and scrambled or poached egg we don’t have fried egg. I don’t think they know what bacon is”.

“Sometimes the food is OK, but it could be better. I don’t know I get a choice if I don’t like it. Today’s cauliflower soup or meat salad doesn’t appeal to me”.

“I don’t think much of the food”.

“I ask for bacon with egg for breakfast, but they never give us bacon. I would like more bacon. An English breakfast instead of cereal and egg from time to time”.

“I like all the food I am not fussy”.

“I would like more variety in meals”.

“The puddings are very good but there could be more variety in the menu”.

“The food is no good its poor quality with poor quality raw ingredients”.

“The food is rubbish for what you pay for it”.

“The food is not good. I am on a soft diet and its really tough”.

Relatives and friend's views

How do you feel generally about the service?

"It's very, very good. (my relative) has settled in well".

"The staff are brilliant".

"(My relative) is being looked after fine".

"My relative didn't like the food so we brought in soups".

"I think the staff are very hard working".

"The staff are here on their days off it cleaning needs to be done".

"Staff are happy to help and go the extra mile".

"Staff take residents out on their day off if relatives agree".

Do you think that you are kept informed about your relative e.g. Health and future care plans?

"Definitely kept informed".

Do you know how to make a complaint if you need to?

"I would go to LCC health".

"I would complain to the place".

"The care staff very pleasant and have treated my relative well".

"The staff in the office are always approachable".

Are you aware of the social activities at the service and do you feel welcomed to join in?

"They have trips out to Oswaldtwistle Mill".

"I think they have had trips to Thornton Hall Farm, and Fleetwood for a walk on the prom and fish and chips".

"There are trips for Christmas shopping".

Would you recommend this service to others?

Yes (4 respondents)

Staff views

Do you have enough staff when on duty?

“We are not always fully staffed”.

“It is hard work when we haven’t enough staff and the agency didn’t turn in today”.

“No, as the client needs are more demanding now. We have more people, and some have come out of hospital and need more attention. We should have three in the day and three in the evening, but we could do with four as we feel like we are rushing a bit”.

“Yes, with being the Dementia unit they (management) would bring another member of staff from the general unit so we are never short staffed”.

“Sometimes no, but we have the option of an extra floating member of staff”.

“Mornings are hard work all residents to get up and staff are expected to do other jobs as well. Could be more spread out as the evenings are relaxed”.

“No”.

“There is a high turnover of staff and therefore too much reliance on agency staff”.

“There are not always enough staff especially when staff are off sick”.

“We don’t always have enough staff due to a lot of vacant posts as people move on. Staff have to try and cover shifts”.

Do you feel supported to carry out person centred care?

“Yes, with the manager and office. If you are struggling they come and sort it ”.

“They don’t just leave you”.

“By colleagues yes”.

“This personalisation doesn’t really work for everything as you need some rigidity for instance we can’t do 40 different meals. You can’t always do what people want you to do we need some rigidity to get everything done”.

“Yes, I always love to give more. One to ones are important and I put the clients first. The laundry can be left. We take one lady around the rooms with us to return the laundry, so we include them where we can”.

“Yes - It is a rush because they (management) put more on you”.

“There are some really good staff, so I can make time for the residents but it’s not always possible with other staff”.

“No -I Need more support from the manager”.

“A small budget to plan activities might be helpful”.

“Staff work well together as a team and you can always ask if you need help”.

Do you feel you have enough training to carry out your duties well?

“Too much - always courses, more than enough”.

“When we went to the dementia training it made me realise how they felt. It was brilliant. Best course I have been on. So, in depth and made you realise the “noise” people with dementia are experiencing. Through the simulations I found it very hard to complete the tasks, so it showed me what people are experiencing it was really good”.

“Yes, I always attend training and get a lot out of it. Even when we have done training we get put back on the course again. If we feel we need any training, we just need to speak to the office”.

“Yes, I have been here a long time and have received a lot of training”.

“Yes - Get offered training to develop”.

“Yes, I think we get a lot of training but would like to bridge the gap between residential and dementia care. People may also have mental health problems into old age as well as dementia”.

“I have been offered all mandatory and optional training”.

Are you happy working here?

“Yes”.

“Yes”.

“Yes - Must be I have been here so long”.

“All staff are lovely. A good team of girls”.

“I enjoy coming to work”.

“I am very happy, but this is not easy job”.

Would you be happy to recommend this care home to a close relative?

“Yes - All carers are good with residents and there is always something going on. They are always doing something”.

“Yes, we have got some really good staff”.

“Yes definitely”.

“Yes - but this is a tricky one my relative may be fine but there are staff shortages and agency staff might not have been here before”.

“No, they would need to increase staffing levels and be less reliance on agency staff”.

“No, I would not recommend this home for a loved one because although the care is very good, the building and facilities need upgrading”.

“The staffing and retention levels would need to improve with less reliance on agency staff”.

Response from provider



Leyland House
Lancashire Business Park
Centurion Way
Leyland
PR26 6TY
01524-235179

FEEDBACK FORM FOLLOWING ENTER & VIEW BY AUTHORISED REPRESENTATIVES

Healthwatch Lancashire values any constructive comments that would help to enhance our practice of the Enter & View process. Could we therefore ask the service provider to use this form to provide feedback to help us evaluate our effectiveness?

Organisation Address	Premises –if different
Cravenside HFOP Lower North Avenue Barnoldswick BB18 6DP	
Contact Name	Telephone Number and/or email
Claire Priestley	01282 816790 claire.priestley@lancashire.gov.uk
Name of Healthwatch Enter & View Authorised Representatives	Michele Chapman -Project Officer
Date & Time of Enter & View	24/10/2017 10:30
Were you happy with the Enter & View Arrangements prior to the visit? Comments-	
Yes, we were given sufficient notice and a poster to display in the home to inform staff, residents, family, visitors, etc.	
Please outline any Positive aspects of the Enter & View visit. Comments-	
The representatives were very polite and introduced themselves to the residents, staff + visitors.	
Please outline any Negative aspects of the Enter & View visit. Comments-	
I feel that having four representatives could have been a little overwhelming for the residents but they were polite.	
Please use this space to comment on how you think we could improve your experience of	

Healthwatch Lancashire Limited
Registered in England and Wales No 8430248

A response from Lancashire County Council can be found below.

www.healthwatchlancashire.co.uk

info@healthwatchlancashire.co.uk

Twitter: [@HW_Lancashire](https://twitter.com/HW_Lancashire)

Facebook: facebook.com/lancshealthwatch

Healthwatch Lancashire visited Cravenside residential home on the 24th October 2017, the home received the report and have responded with the below actions.

YOU SAID

WE DID

The following feedback came from the representatives of Health Watch who visited Cravenside.

1	The building although adequately maintained is now in need of an update and redecoration.	Cravenside is awaiting confirmation of a date for the refurbishment of the home to begin, this will include full re-decoration. Cravenside are working on de-cluttering the home and making it look more modern
2	Feedback from respondents in terms of food and menus, was consistently negative and representatives considered that this was an issue that required further consideration by the provider.	Cravenside have been using agency cooks due to a vacant post, the vacancy has now been recruited to and the home has 2 permanent cooks who are trained to a high standard. All issues mentioned in the report were fed back to the catering manager who has since addressed all issues.
3	There was significant negative feedback from both residents and staff in respect of staffing levels.	The home has some vacant posts to recruit to, all posts are being advertised and the manager will recruit to the posts once the right candidates are sourced. Agency staff are being used to cover some shifts at the present time due to the vacancies, the management do their best to try and use the same agency staff to ensure continuity for the residents.
4	First impressions of the environment were of a home in need of redecoration and a reception area which was cramped and dark.	As above see part 1
5	We did not see key staff identified photographically on the noticeboard.	The home is currently looking at how/where staff photographs will be displayed within the home.
6	We saw that toilets and bathrooms were indicated by pictorial, written and colour coded signage, but that adaptations were not colour coded.	The adaptations within the bathrooms/toilets were colour coded blue, this is different to the toilet/sink/bath etc so that residents are able to see the variation in colours.
7	In one toilet on the Dementia unit the seat was soiled and the toilet unflushed.	Toilets are checked/cleaned on a regular basis, it was unfortunate that at the time you went into the toilet it was not clean, once you informed a staff member the staff immediately ensured that the area was cleaned
8	Differing areas displayed names over the doors to the lounges aiding orientation. However, in common with the rest of the facility representatives considered that these areas too were in need of an update and refresh.	See above part 1

9	Many of the residents in the Dementia unit were asleep with the TV on. We observed that two of these residents had drinks beside them and it was unclear whether other residents had been offered drinks.	Staff are asked to encourage residents to take part in activities within the home. We have an activity care assistant who works Monday to Friday to support staff in order to ensure that residents are enjoying varied activities within the home.
10	We saw a notice on the notice board inviting residents to a meeting had taken place on 21 st September 2017 however we did not see a notice for a more recent meeting in October 2017.	The home will be holding monthly residents meetings and the meeting will be scheduled a year in advance, this way residents will always know when the meetings are scheduled for.
11	On the Dementia unit levels of interaction appeared to be limited and we observed some staff members passing by residents without acknowledging them.	The staff who work on the dementia area will receive further training in the care of people with dementia, the manager will also arrange for a Dementia Map to take place which will inform the manager what it is like to live on the dementia area with dementia, the mappers will also make recommendations on how to improve the lives of people who live in the dementia area.
12	There were instances when it was difficult for representatives to be clear about the sufficiency of staffing levels.	As above see part 3
13	When asked about their experiences of living at Cravenside a significant number of residents chose to comment negatively about the food and we have noted that this issue had also been raised at the last CQC inspection in May 2016.	As above see part 2
Below is the feedback from residents, staff and relatives/visitors. Comments in regards to staffing and food has been addressed above and therefore they will not be stated below.		
14	<i>We could do with more trips out – not been any lately”.</i>	Residents are invited and encouraged to go out on a monthly basis and there are activities taking place within the home on a daily basis however we will work on increasing this.
15	<i>“I think there are enough staff, but I do hear people crying out of a night, so I don’t know if anyone goes to them”.</i>	Night checks are in place for all residents and all residents have a nurse call system in place. Night staff also complete security and wellbeing checks during the night to ensure anybody requiring assistance gets it in a timely manner.
16	<i>“Some staff are nice some staff aren’t Some care, and some don’t”.</i>	Any issues which are reported are dealt with via LCC policies and procedures. Staff, residents, families, friends and health professionals are actively encouraged to report any issues.
17	<i>“They think I should move all the time. It doesn’t work like that with my condition sometimes I can move and sometimes I can’t. It really gets to me when they think I am not trying. They say, “You moved yesterday so you can today” and they think I’m not trying so I tell them to bugger off”.</i>	Staff try to encourage residents to keep active however they must keep in mind the needs and conditions of the residents. The manager will reinforce this with all staff.
18	<i>I Need more support from the manager”.</i>	The management team support staff through regular supervision, day to day conversation and staff meetings. The manager will encourage staff to speak to her should they feel they need further support.
19	<i>Even when we have done training we get put back on the course again.</i>	Training is renewed as required to ensure that people's skills are kept up to date.