



Care home life, what it's really like!

Holy Cross Care Home



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Acknowledgements

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



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1. Introduction

What is Healthwatch 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 1st November 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	 Agree
3.	Good knowledge of each resident and their changing needs	 Agree
4.	A varied programme of activities	 Agree
5.	Quality, choice and flexibility around food and mealtimes	 Neutral
6.	Regular access to health professionals	 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

Holy Cross Care Home is a purpose built home, located at:

Ettrick Grove
High Barnes
Sunderland
SR4 8QA

Telephone: 0191 567 0862

Provider: St Cuthbert's Care

Provider's Website:

<https://www.stcuthbertscarenursinghomes.org.uk/homes/index.php#hc>

See the latest CQC inspection report here:

<https://www.cqc.org.uk/location/1-423384939?referer=widget3>

The home has the capacity to support 56 residents aged 65 years and over. Residents are supported under the categories of Enduring Mental Ill-health (EMI) Residential, Nursing and Residential Care.

55 of the 56 bedrooms are en-suite and the remainder is a flat which a couple can occupy. Residents and their families are actively encouraged to personalise rooms as much as possible.

The home has three lounges, a library, a large activity room and three dining rooms spread over three floors. At the front of the home is a large garden area and residents can also access the homes veranda at the front of the building on the first floor.

The home has internet access for residents to use but currently doesn't have a loop system.

Activities are provided for residents seven days per week and the home employs a full time Activities Coordinator.

Requests to bring along pets are considered on an individual basis prior to admission.

At the time of our visit there were 52 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch Team were only able to support two residents to complete the survey. The team received seven staff (two Duty Managers, one Senior Care Assistant, four Care Assistants and one Activities Coordinator) and five relative surveys back.



The results of these surveys are given below:

Indicator 1 - A strong visible management

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

When asked by the Healthwatch Team if they know who the Manager is, one resident was unable to name her, this may have been due to their own individual health and capacity. The other resident was able to name Julie and when asked what she thought of her stated that she was very nice, friendly and they are able to approach her if they have a problem.

During the visit, the Healthwatch Team witnessed the Manager interacting with the residents as she showed the Team around the home. She was able to introduce all residents to us by name and residents greeted her warmly. One resident commented to the Team how much she likes and respects Julie.

All relatives who replied to the survey were able to name the Manager and made the following comments when asked to tell us a little about her;

“Very friendly and has worked her way up the ladder.”

“Julie is always very pleasant and approachable if we have any queries or problems.”

“Very accessible and approachable. Very caring and understanding. Always very helpful and professional.”

“My mother has been a resident at Holy Cross for three weeks. During the application process, Julie was less visible as I understand she was responsible for St Catherine’s in Newcastle. She has recently been more visible.”

“Julie is very caring and approachable, she will address any issues you may have promptly.”

Staff who responded to the survey gave the following comments when asked about the support they receive from the Manager;

“The Manager is onsite if staff need to speak to her. She is very supportive of staff and ensures rotas are fair and also cover the needs of the home. The Manager has been very supportive and encouraging of my training needs.”

“Approachable to speak to with any concerns.”

“The Manager is there if I need her. She is very supportive.”

“Supportive as and when required.”

“I have strong support from the Manager and Duty Manager.”



“Always available for support. Manager and Duty Manager have regular discussions about activity plans and make suggestions for upcoming events as a matter of course. Any significant plans over seen by Management.”

Staff went on to tell us about their experiences of talking to the Manager if they want to ask a question or raise any issue;

“Always has an open door policy. I have always found the Manager to be very approachable and open to new ideas. I have always felt listened to and taken seriously.”

“My Manager is approachable and tries to accommodate the staff needs as appropriate.”

“Always approachable to answer questions.”

“Very approachable.”

“Approachable.”

“They listen to me and deal with my issues.”

The Management Team were asked what attracted them to their role. The Healthwatch Team received two Duty Manager surveys, one of whom had been in post for 12 years and the other for 10 years. They were both asked what had attracted them to their role, they stated;

“To be promoted to a position with more responsibility to lead a team as Duty Manager. To make decisions and to broaden my knowledge and develop into a successful Duty Manager.”

“Progression throughout my time employed, enjoying the running of the home and support from my Manager.”

Both Duty Managers went on to explain what they enjoy about their role;

“Looking after service users, being supportive to the Manager and taking responsibility in her absence.”

“To ensure our residents have fulfilment within their home, ensuring they are comfortable, cared for well and safe and happy.”

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.

When asked by the Healthwatch Team what they think of the staff, all of the residents spoken to gave positive comments including;

“The girls are very nice. They are busy but when passing always have a word.”



“Very kind and friendly.”

The Healthwatch Team also asked residents if the staff have the time to stop and chat with them. Both residents agreed that they do, one resident stated; “Yes they always stop for a chat.”

During the Healthwatch visit the team observed staff interactions with residents. They were joining in with residents who were supporting and encouraging them to take part in a ball activity.

When relatives were asked if staff have the time to care for their relatives comments included;

“Yes - definitely.”

“Yes. I never feel anxious about all the care my husband receives.”

“Yes. Always very caring and attentive.”

“Yes they never try to push my mother, who is 96 years old, but at times they seem a little stressed, if there are any staff shortages.”

When asked by the Healthwatch Team if they feel staff at the home have the necessary skills to care for their family member, relatives gave mixed comments including;

“Yes very much.”

“Most certainly. All staff are well trained and caring.”

“Yes.”

“My mother has dementia. Staff sometimes use phrases such as ‘She has refused...’, I would like to be reassured that staff have training around techniques to help dementia residents join in with personal care, such as washing and dressing. Like all care facilities some staff have that ability and some just don’t have it.”

“Yes they are kind and compassionate and respectful to my mother.”

When staff were asked if they have enough time to care for residents, a mixed response was received, comments included;

“We all work as a team to ensure the residents receive the care they need.”

“Yes but not always.”

“Yes I do try my best to make sure residents are happy.”

“Not always, too much admin.”

“Yes we are able to provide the best care possible and also have time to chat with the residents giving holistic care at all times.”



The Activities Coordinator added the following when asked if they have enough time to provide varied activities for residents; “I would like to have more time to plan and prepare for activities. However I always feel that there could be more done. This is my own issue rather than an establishment problem.”

When asked if they feel they are encouraged to continue to develop their skills and in what ways, the following responses were received from staff;

“Our skills are updated regularly by attending courses.”

“Yes with regular training.”

“Plenty of training.”

“Yes continuous and ongoing training.”

“Ongoing training is always taking place. I do not feel that there has been much chance for my own specific personal development.”

“Yes. I have sourced training outside and my Manager has supported this, ensuring I have the time to complete it.”

Staff were asked what they enjoy about their job. Survey respondents gave the following replies;

“I enjoy interacting with different people on a daily basis and working with people from different disciplines.”

“Working face to face with residents and feeling that my role has a positive impact on their daily wellbeing.”

“Caring for service users.”

“Caring for service users, seeing them content and happy. I enjoy everything about my job.”

“Getting satisfaction that they are happy and cared for.”

“By looking after residents to the best of my ability. Ensuring they are given the care and support they need.”

The Healthwatch Team asked the Duty Managers how they encourage staff to develop their skills. They stated they achieve this by providing online and face to face training, through supervisions and workforce development plans. One Duty Manager informed; “We ensure that staff continue to learn and grow through training to improve professional skills and development. We recognise accomplishments and make them feel appreciated and valued. We carry out regular supervisions.”

When asked how they ensure staff have enough time to care for residents the Duty Managers gave the following comments;



“We ensure the home has sufficient numbers of suitable trained staff to meet the needs of the resident. Ensure the staff have the time and skills to care for each resident. We also encourage stop and chat time.”

“24 hour care. Staff take time and do not rush residents, ensuring they are comfortable and have everything to hand.”

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 AGREE this was met.

When asked by the Healthwatch Team if staff at Holy Cross know them, know what they like and dislike the residents spoken to stated;

“I think so.”

“Yes they know my needs.”

When relatives were asked if the staff know their family members life history personality and health and care needs well, relatives who responded to the survey gave the following comments;

“Staff interact with all residents.”

“I would like to have had the opportunity to develop a story board or ‘All about me’ information to help staff understand why there may be some barrier. There are so many staff it is hard to interface with each staff member.”

“Yes very good knowledge.”

“I think the staff have got to know my relative’s needs and health history very well in the last few months.”

“Yes as my relative has been here for years now.”

The Healthwatch Team asked relatives if staff at the home notice and respond to changes in their relatives needs and if they are informed of any changes, comments received included;

“Yes they can spot changes immediately in behaviour patterns.”

“Staff rotate day to day between 1st floor (nursing) and 2nd floor (residential). It is sometimes hard to get the continuity of care.”

“Yes very swiftly.”

“Yes.”

“Yes always.”



Holy Cross gift shop

Relatives all added that they are informed that they are made aware of these changes in their family members and this is communicated to them either in person or over the telephone, and this would depend upon the situation.

Staff and Management Team informed the Healthwatch Team how they get to know a residents life history, personality and health and care needs when they first arrive at the home. They explained that a pre-admission assessment is completed before admission and this gives a base line of what the resident's needs, likes and dislikes are. Upon arrival additional assessments are carried out on a resident's mobility, nutritional needs and other needs. Staff also spend time with the resident getting to know them, reading their profiles and care plans and talking to the resident and their family.

Staff and the Management Team were asked by the Healthwatch Team how the information relating to resident likes, dislikes and care needs is updated and then passed on to staff. They informed that this is done by updating the care plans on a regular basis and handovers are utilised to pass over this information to staff. One of the Duty Managers gave the following response; "We have an electronic recording system in place, a message of the day is updated. Also information is written in the communications book which is brought to each handover for staff to read and sign and changes are verbally handed over to staff."





Indicator 4 - A varied programme of activities

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

The Healthwatch team AGREE this was met.

When asked about the activities provided inside and outside the home the residents the Healthwatch Team spoke to are aware that activities are available and told us that staff inform them when they take place but they were unable to give any specific detail (this may be due to their own individual health and capacity.)

When asked if they are able to make use of the garden if they wish, both residents stated that they do when the weather is nice, their comments included;

“Yes I go out into the garden in the summer with my friend.”

“Yes I like to walk around the perimeter.”

The Healthwatch Team asked residents if they are able to continue to pursue any previous hobbies and interests since living in the home. Both residents stated that due to their ill health they could no longer partake in their past hobbies.

The Healthwatch Team asked relatives what they think of the activities available for residents inside and outside the home. Relatives responded and gave the following comments;

“My husband does not take part in many activities now. But I think they are very varied and accommodate people’s need.”

“I understand it must be difficult to meet the needs of residents, however although there is a full activity programme there are occasions when residents are less engaged in activities, such as glass painting or colouring in. Residents are often asleep.”

“There is plenty.”

“Very varied. Some excellent and innovative activities.”



“Various activities are arranged for residents.”

Relatives added that their family member is encouraged and supported to activities by the staff who will inform residents when the activity is taking place and physically support them along to the room.



Staff and the Duty Managers were asked about the activities that are available to residents inside the home. They informed of the following activities; singers, arts and crafts, games (table top and physical), wheelchair exercises, movie nights, daily coffee mornings, party afternoons, word games, hand and nail treatments, themed events (Halloween, Christmas) and animal therapy etc.

They added comments about the activities that are available for residents outside the home, including; Community care home outings (meeting with resident from other local homes), trips to the shops, garden centres, coffee shops, cinemas, clubs to see local singers and entertainers. They also added that residents are encouraged to use the home's garden. The Duty Managers informed that the home has its own mini bus to use for trips out or they will access taxis.

The Activities Coordinator told us of the provision made for those residents who cannot or do not wish to undertake group activities; "One to one activities are carried out at least one day per week. These can be planned according to each resident's preferences. Resident's wishes are also honoured, if they do not wish to take part they will still be made aware of what is available each week, so that they can make an informed choice."

All staff were asked what encouragement and assistance they offer to residents so that they can take part in activities. They replied that residents are given a weekly activity planner to have in their room and staff prompt them each day to remind them what is on. They also explained that they offer residents support along to the activity room if needed. One Carer stated; "I ask and tell them what is on, giving them a good explanation so that they can decide if they would like to go. Even if they go and don't want to stay I would bring them back upstairs."

Activities	Morning	Afternoon
Monday 28th	Coffee Morning Mass at 11:15	Arts & Crafts Making Halloween Decorations
Tuesday 29th (Vicky OFF)	Hand & nail Pamper Session Mass at 11:15	Sit & Be fit Seated Exercise
Wednesday 30th (Vicky OFF)	Coffee Morning Mass at 11:15	No activities due to hairdresser
Thursday 31st	Coffee Morning , Music & Chat Mass at 11:15	Halloween Spooktacular Party Music, Games & Spooky Buffet Tea
Friday 1st	Active Body / Active Mind Mass at 11:15	Music Through The Decades Quiz—Guess that tune
Saturday 2nd (Vicky OFF)	Coffee Morning No Mass Today	Afternoon Movie Sabrina
Sunday 3rd (Vicky OFF)	Coffee Morning Mass at 11:15	Table Top Games & Puzzles



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 **NEUTRAL** this was met.

When asked what they think of the quality and choice of food in the home, residents the Healthwatch Team spoke to gave the following comments;

“Not good, it hasn’t much flavour and I don’t have a good appetite.”

“On the whole it’s OK. There is plenty of choice and I’m well fed.”

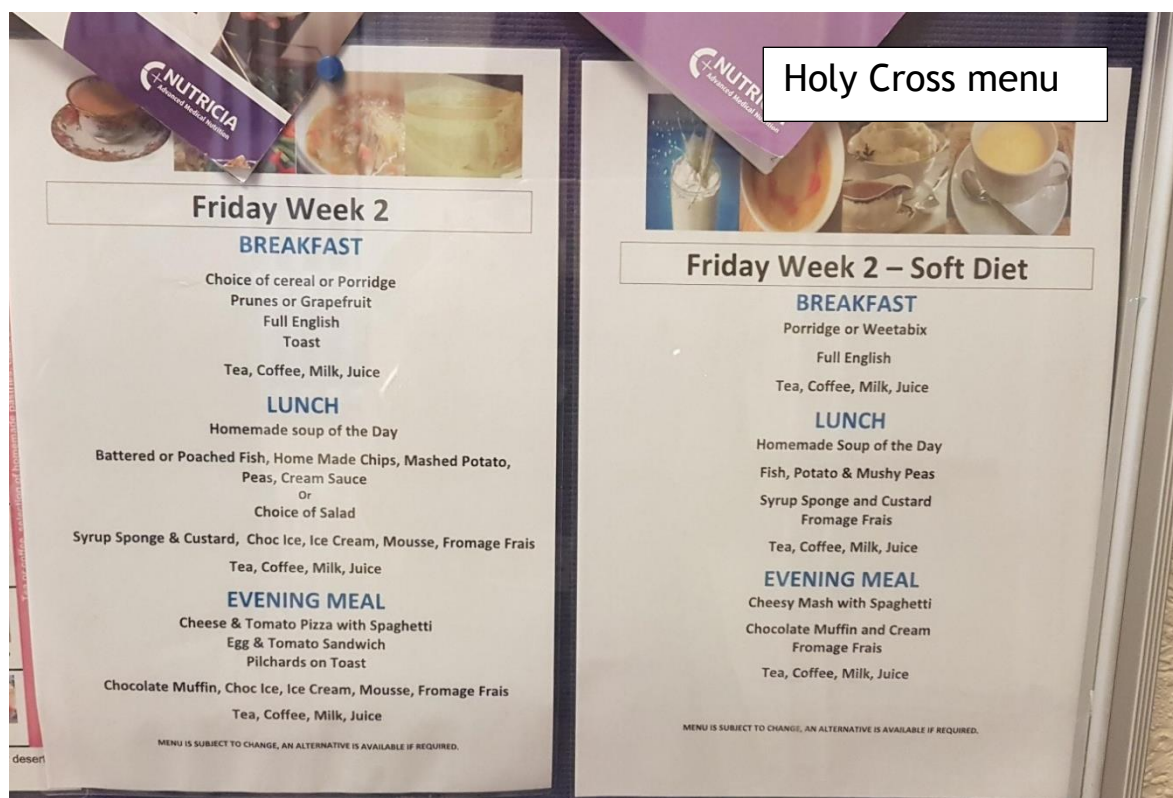
One resident added that they eat their meal in the dining room and the other mostly ate in their bedroom, both stating that this was their choice.

When asked about the quality and choice of food at the home the relatives who responded to the survey, gave the following comments;

“Excellent and very varied. Good quality and it is always served in a comfortable situation.”

“It’s good, my husband eats everything, he loves his food.”

“A varied menu. Often the menu that was ordered the day before is different to the food that is delivered to the room.”





“Food is excellent.”

“Excellent choice of food.”

All but one relative added that they were confident that their relative is supported to eat and drink as much as needed. The remaining relative stated her mother hadn't been in the home long enough for her to make a comment.

When asked by the Healthwatch Team how the home ensures that mealtimes are sociable, relatives stated that residents are encouraged to go into the dining room to socialise with others. The also stated that staff encourage conversations and the dining room is set up with circular tables, seating four which allows residents to chat in small groups.

Staff who responded to the survey were asked what they think of the quality and choice of food available at each mealtime, replies were mixed and included;

“There is always a need for improvement. By giving egg and chips, corned beef pie, being a change from meat and veg.”

“Quality of food needs improvement. Choice of food should be a bit of a wider range, (more English Fayre for residents.)”

“Quite a good range of choice of meals. Nice quality.”

“Could be improved.”

“I think the residents get a good choice of food.”

The Duty Managers added the following comments on how the home ensures that it provides high standards of quality and choice of food;

“We have a six week running menu. Staff ask service users daily what they would like at meal time. If there is nothing on the menu which the resident would like we would accommodate and get the request from the resident.”

“Give plenty of choice. If there is something on the menu that is not suited then alternative options are available. We find out likes and dislikes and add to the care plan. Ensure food is fresh and cooked to a high standard.”

When asked by the Healthwatch Team how they ensure that residents can eat and drink outside of mealtimes staff and the Duty Managers informed us that residents are offered the correct support and assistance to eat and drink if needed. The correct cutlery and cups are made available to residents and snacks and drinks are made available between mealtimes including, smoothies, tea, coffee, cold drinks biscuits, fruit, sandwiches, scones, cheese and biscuits. The home also ensures that residents have a jug of water/juice, to their preference in their rooms and this is changed daily.

They added that residents are also offered a choice of what, when, where and how they eat, comments included;



One of the dining rooms

“The residents are able to choose what they would like from two main items or choose an alternative. They can choose when they would like to eat by letting staff know. It is on their choices care plan. The residents can eat in their room, dining hall or one of the dining rooms on the second floor.”

“The menu is provided to residents on a weekly basis and they are also asked what they would like each day by Housekeepers and Carers. Residents have a choice of eating in the dining room or their own room.”

“If a resident is happy to eat with fingers we would encourage this with finger foods.”

“The residents choose if they would like to attend the main

dining room for main meals. Some choose their own rooms but we like to encourage them to attend the dining area. Some who are at risk of choking etc. are in a dining area where they can be closely observed with food and drink.”

The Duty Managers added when asked, the ways in which the home ensures that mealtimes are made sociable. They informed that music is played in the background, the tables are set to seat four and the staff encourage conversation and interaction between 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.

When the Healthwatch Team asked residents if they have access to a range of health professionals, residents were able to tell us that they have regular access to GPs, Dentists and Opticians and staff inform them when someone is due to visit. Both residents explained that should they need to see the GP, staff would arrange this for them.



The relative respondents when asked by the Healthwatch Team about the access to health professionals, all responded positively, some of the replies given included;

“He has full access to all health professionals if necessary and regular Doctor visits in the home.”

“GPs visit weekly and other professionals visit on a regular basis.”

“Excellent access. Always attentive to any medical needs.”

Staff and the Duty Managers informed the Healthwatch Team about the range of regular visits to the home from health professionals including regular visits from GPs and District Nurses and planned visits from Opticians, Chiropodists and Dentists.

One of the Duty Managers added the following comment; “GPs walk around every Monday with Community Nurses and the District Nurses visit as and when needed. Dentists come every year or sooner if needed. Chiropodists comes every 6-12 weeks or sooner if needed. Opticians visit yearly or sooner if we notice any changes.”

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.**

The residents the Healthwatch Team spoke to stated that the home accommodates their specific religious, cultural or lifestyle needs well. One resident mentioned she was a Catholic and had access to the Chapel based in the home.

Both residents went on to inform the team that they have their hair styled and cut by the visiting Hairdresser.

Relatives who responded to the survey were asked how the home accommodates the lifestyle needs of their family member. Many informed that their relative is a Catholic and that they attend Mass in the home’s Church daily.

Relatives went on to inform us that their relative has access





to a visiting Hairdresser every week, the laundry service is good and their relative is always appropriately dressed and clean.

The Healthwatch Team asked staff and the Duty Managers how the home finds out and caters to the residents cultural, religious and lifestyle needs. Those who responded informed that the home has its own Chapel and provides daily Mass and Holy Communion for those who wish to attend. They stated that they can also provide visits from representatives from other religions and food is adapted to suit individual resident's cultural needs.

When asked if they could provide examples of how the home accommodates some of the needs of residents, staff gave the following comments;

“The home has a lovely Chapel with daily services. Food for a Jewish resident is catered for.”

“We have Mass every day other than Saturday. We also ask if residents of other religions would like to have someone come in.”

The Duty Managers reiterated that the home has a Hairdresser who visits weekly. The home also uses a labelling system to help ensure that the laundry staff get the residents clothing back to them.

When asked what mechanisms are in place to ensure that residents are always clean and appropriately dressed, one of the Duty Managers gave the following reply: “Daily washes on none bath days. Bath charts are in place for staff to sign. Residents are given the choice of clothes to wear. Staff to accommodate appropriate clothing if residents are unable to choose.”





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 they get asked what they think of the home or if they are happy, both residents stated that staff often ask them and they know they are happy. When asked if there was anything they would like to change about the home one resident stated the food and the other told us they couldn't think of anything.

The Healthwatch Team asked relatives if they feel a welcome participant of life in the home, all but one relative responded positively. Comments included;

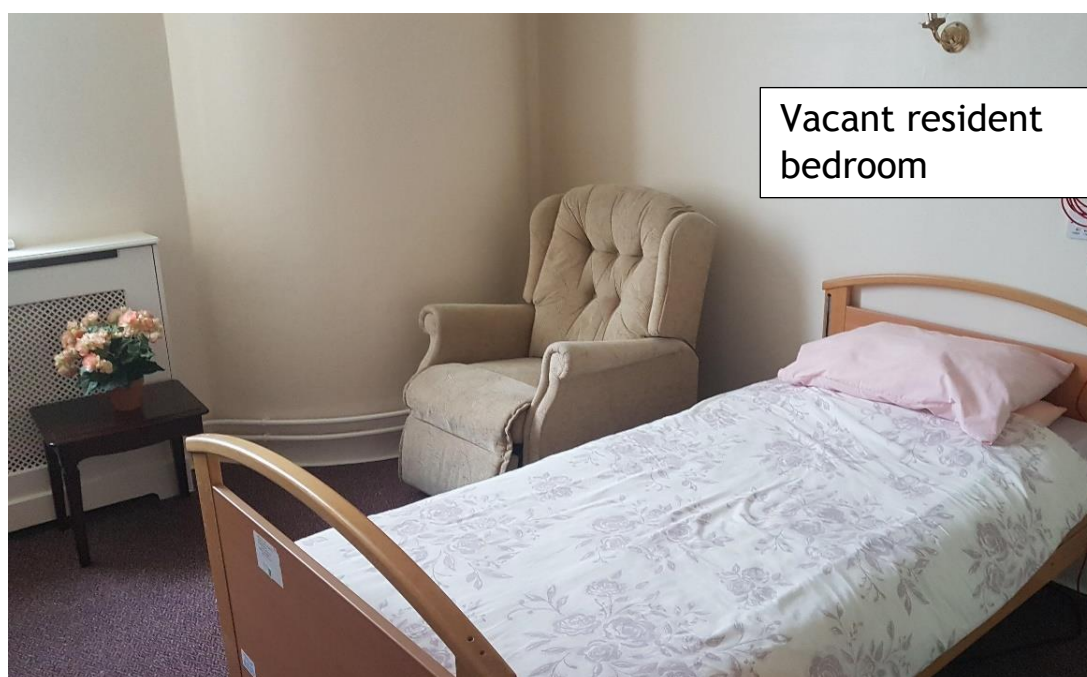
“Most of the time.”

“Yes and I can always join in.”

“Very welcomed by the lovely staff.”

Some relatives went on to tell us that the home has regular resident relative meetings to allow them to have a say in the home. Survey respondents added that should they wish to make a complaint about the home they would speak to the Manager or Head Office with some mentioning the complaints procedure the home had in place and all felt confident that the complaint would be acted on appropriately.

Staff and the Manager informed the Healthwatch Team when asked, how families and residents can have a say in how the home is ran and this is done by attending





resident and relatives meetings which are held quarterly, having conversations with staff and the Managers or by completing surveys.

One of the Duty Managers added; “Through resident meetings and things can also be discussed when we have ‘sit and chat’ time. Residents are asked regularly if they are happy.”

The Duty Managers were asked how they make use of feedback or complaints from residents and relatives. Comments received included; “We action complaints and add to the complaints file. We discuss with staff in handovers to ensure complaints are dealt with ensuring all residents and families are reassured and happy.”

The Activities Coordinator gave an example of how residents/relatives have contributed to the change of activity provision. They stated; “Residents expressed their love of Disney and happy memories of attending the cinema. This led to a one to one outing to see the new Aladdin movie at the cinema. Relatives made a comment that their mother did not enjoy current seated exercise but needs to do more physical activity. I now provide a physical games session with equipment which is enjoyed and very well received.”

Another staff member stated when asked the same question; “A resident requested that the home has a book club. There is now a book club available.”

The Activities Coordinator added how the activities provided are evaluated to ensure residents are continuing to enjoy them. She commented “Ongoing attendance, ongoing discussions, staff feedback and resident/relative meetings.”

When asked how members of staff can have a say in how the home is ran, staff replied stating that they are able to feedback comments and suggestions at quarterly team meetings .

The Duty Managers when asked how staff can have a say, gave the following comments;

“Through regular supervision all concerns are discussed and actioned if beneficial to the residents.”

“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 AGREE this was met.

When asked by the Healthwatch Team if the home is always clean and tidy and to a suitable temperature, both residents replied positively saying that the home is always clean and that there are no unpleasant smells. They both also stated that



Mirror in corridor

the home is of a comfortable temperature, and they are able to open and close the windows to suit their needs.

The majority of relatives when asked about the physical environment of the home gave positive responses, stating the home was always at a comfortable temperature, hygienically clean and tidy, well decorated and well maintained and a dementia friendly environment. One relative did mention that the bedrooms needed some refurbishment.

The Duty Managers explained that they ensure that a comfortable temperature is maintained in residents' rooms and all of the homes communal areas, by asking

residents if they are too hot or cold so that staff can open windows or turn the heating up or down.

When asked how they ensure that the home is always hygienic and clean and well maintained and decorated, the Duty Managers replied informing that maintenance staff carry out regular walk arounds and they also have a book to document any contents or decoration that needs attention. They added that the home has cleaning schedules in place, which the Housekeeper maintains and things are cleaned up as they are noticed.

The Healthwatch Team asked both staff and the Duty Managers how the home is made a dementia friendly environment, they explained that the home has suitable signage, stimulating activities, dementia friendly plates and cutlery, appropriate flooring and good lighting.



Holy Cross garden area



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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