



Care home life, what it's really like!

Hylton View



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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 March 2019 and was carried out by Healthwatch Sunderland staff who are trained so that they can effectively capture the resident’s experience.

At the visit residents were asked a range of questions via a set questionnaire (see appendix 1). The questions were 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	 Agree
2.	Staff with time and skills to do their jobs	<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> Time Agree</div> <div style="text-align: center;"> Skills Strongly agree</div> </div>
3.	Good knowledge of each resident and their changing needs	 Agree
4.	A varied programme of activities	 Neutral
5.	Quality, choice and flexibility around food and mealtimes	 Agree
6.	Regular access to health professionals	 Strongly agree
7.	Accommodation of resident's personal, cultural and lifestyle needs	 Strongly 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

Hylton View is a purpose built property located at:

Old Mill Road
Sunderland
SR5 5TP

Telephone: (0191) 549 6568

Provider: Roseberry Care Centres

See the latest CQC inspection report here:

<https://www.cqc.org.uk/location/1-308151203>

This purpose built facility provides nursing and residential care for up to 40 older people, some of whom are living with dementia. Care is provided over two floors and each floor has two lounges and a dining room. All rooms are en-suite and respite facilities are available.

The home is well-situated for residents who wish to remain active outside of the home, with good amenities and transport routes. The home also has spacious gardens to the rear.

At the time of our visit there were 36 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch Team were only able to support five residents to fully complete the survey. The team received four staff and no friends and 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 AGREE this was met.

When asked about the Manager of the home three of the five residents the Healthwatch Team spoke to were able to name the Manager, and the remaining two informed us that they hadn't long been at the home so weren't sure who the Manager was. Those residents who could name the Manager went on to tell us what they thought of her;

“She seems ok.”

“She's great.”

“Haven't had a lot to do with her.”

All of the staff who responded to the survey stated that they feel supported by the Manager of the home. Their comments included;



“My Manager’s door is always open for staff, to ask questions or for help with problems. If I have any problems inside or outside of work, she listens and gives advice.”

“She is always available if you have any issues at work.”

“Her door is open at all times for staff if they have any problems or enquiries. She is understanding and reasonable.”

Staff also gave positive comments when asked what their experience was of talking to the Manager when they had a question or wished to raise an issue. Comments included;

“My Manager has listened to many of my issues, she sorts them out and understands. She also gives good friendly advice.”

“The Manager will answer anything the best she can and if unsure, she will get back to you.”

“She is always truthful and helps with any issues you have.”

The Manager was asked what attracted her to the role of Manager, she stated; “I was a Manager before and understood the challenges Hylton View presents.”

She added what she enjoys about the role; “I enjoy having a team with a similar outlook to care for residents.”

The Manager at the time of the Healthwatch visit had been in post for four months.

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

When asked about the staff at the home, the residents who spoke to the Healthwatch Team gave mainly positive responses. These included;

“Great nobody is perfect, I get on with some and not with others.”

“They are fine, they look after me well.”

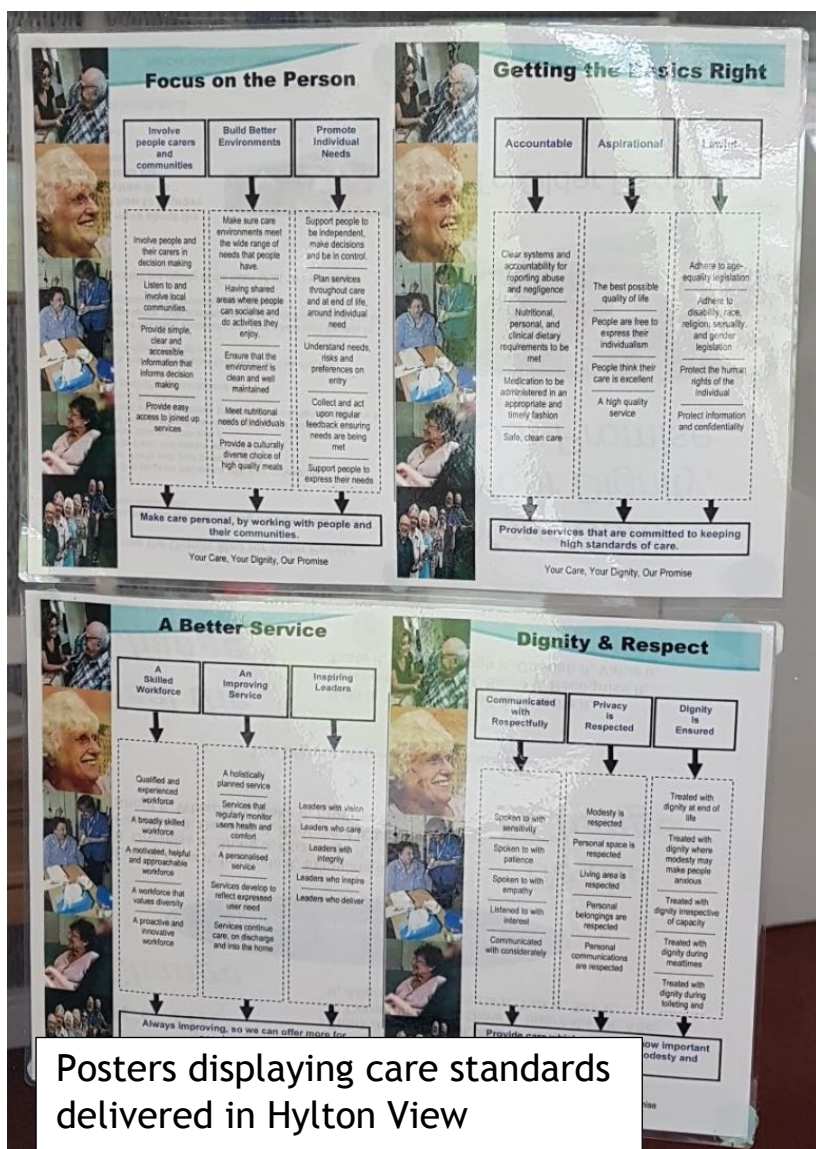
“You couldn’t get better.”

“The younger ones are good and others aren’t.”

“Fine.”

The majority of residents went on to tell the Healthwatch Team that staff have time to stop and chat with them. Comments included;

“Yes they always say hello to me.”



Posters displaying care standards delivered in Hylton View

“They are so busy, they don’t have a lot of spare time.”

“Yes they do have conversations with me.”

“Yes for the situation we are in, it’s quite good.”

When staff were asked if they have enough time to care for residents all staff who responded to the survey stated that they did, their comments were;

“I do have enough time to do my job the best way I can, with the correct equipment and people.”

“Yes we have plenty of time and support from other staff.”

“Yes we have plenty of time to do things and care and talk to residents.”

All of the staff respondents went on to say that they are encouraged to develop their skills. Comments given were;

“I have been encouraged, however I feel I am at the right stage for the time being.”

“Yes I am currently doing my Level 2 National Vocational Qualification (NVQ).”

“Yes I really want to progress up the ladder. I need to start my NVQ to keep progressing. My Manager encourages me to keep trying and learning every day.”

The Healthwatch Team asked the staff what they enjoy about their job, their replies included;

“The good working relationship with staff who support each other.”

“I enjoy helping residents, talking to them and ensuring that they are safe.”



“I love my job because I love to help and support residents the best way I can. I love spending time with them, talking, laughing and learning more about them and care itself.”

When the Manager was asked how she ensures that staff have enough time to care for the residents she answered that she uses a dependency tool and person centred care.

She went on to inform the Healthwatch Team how she encourages staff to develop their skills; “I encourage staff to do their jobs by ensuring staff have access to training. I ensure skills mixes are adhered to for the best possible outcome for carers, residents, families and business.”

During the Healthwatch visit the Healthwatch Team witnessed several positive interactions between the staff and the residents. The Carers supported residents to enjoy their drinks and supported them to speak to Healthwatch staff.

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.

Residents who were supported to complete the survey, were asked if the staff knew what they needed, what they like and what they dislike. Two of the residents were unable to answer this question, this may have been due to their own individual health and capacity, and the remaining three agreed that staff did.

When staff and management were asked how they ensure that all staff get to know a residents life history personality and health and care needs when they first arrive at the home, they informed the Healthwatch Team that they will read individual residents care plans, engage in conversation with family and friends and ask the residents questions to find out their likes and dislikes.

They went on to inform the Healthwatch Team how they update information on changes in a residents tastes, health and care needs and how they know if there has been any changes. They stated that by working with and caring for residents on a daily basis they keep an eye out for changes and document these in addition to passing this information on to a Senior Carer or the Nurse on duty. They added that they also carry out handover meetings, talk to other staff to ask if they have noticed changes, have safety huddle meetings and a communications book.



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

When asked about the activities that were available to the residents inside the home some of the residents were able to inform the Healthwatch Team about some of the activities they had taken part in, including; quizzes, dominoes, watching films, bingo and sing-a-longs. Several of the residents explained to the Healthwatch Team that the home's Activities Coordinator hadn't been at the home for several weeks, as a result they had missed the activities and found it boring.

When asked about activities outside of the home residents gave the following comments;

“There used to be activities but not anymore. There should be more.”

“There used to be when the young lady was here but we haven't been anywhere recently. I don't go into the garden but I would like to.”

“I have been to the cinema in the past with staff.”

“I'm no longer interested in joining in.”



“I don't go out much. I have asked but they are so busy and haven't got time, I would like to go for a walk or the shops.”



Some of the residents explained about some of their past hobbies and interests they are still given the opportunity to undertake since coming into the home. These included reading, listening to music and colouring in and trips to the shop.

When staff were asked what activities are available to residents inside of the home they gave the following examples; bingo, dominoes, board games, sing-alongs, listening to music, seated exercise games, karaoke, bowls, movie afternoons, card games and pamper afternoons etc.

Staff went on to give a list of the activities which are available to residents outside of the home and facilitated by the homes mini bus these included; cinema afternoons, trips to the local Salvation Army for events, walks and mini bus rides out.

Staff explained how they encourage residents to take part in activities. They stated that staff sit with them and encourage them to join in, join in the activity themselves, and get other residents to encourage them to join in. They also informed the Healthwatch Team that they explain everything clearly to the residents, and assist them if they need help or don't understand.

The Manager added that residents are supported to continue to do the things they used to enjoy before coming into the home such as hobbies and interests by finding out their hobbies and seeking support from the Carers and families when planning the activities.

Indicator 5 - Quality, choice and flexibility around food and mealtimes

The indicator states that care homes should offer a good range of meal choices and adequate support to help residents who may struggle to eat and drink including between mealtimes. The social nature of eating should be reflected in how homes organise their dining rooms and accommodate different preferences around mealtimes.

The Healthwatch team AGREE this was met.

When asked what they think about the food at the home residents stated that it was either alright or good. They added that they are given a choice of what they would like for their meal, which they get to know the day before and if they didn't like the choice they could always ask for an alternative meal to be made for them. When asked by the Healthwatch Team where they ate their meals the majority of the residents stated the dining room and a couple said their bedroom.

When asked about the choice and quality offered to residents in the home, all staff stated that the food is of a good quality but more options and choice is needed.

The Manager informed the Healthwatch Team how she ensures the home offers both high standards in both quality and choice of food offered to residents; "We offer choice on the menu based on likes and dislikes, I talk with the Chef and we have a comments book."



The staff and Manager informed the Healthwatch Team how they ensure residents are able to eat and drink at both mealtimes as well as outside mealtimes. They explained that residents have access to the kitchen and microwaves, snacks are available at all times and staff are trained to give food and fluids and will assist those who require support and records are kept of what each resident eats.

When the staff and Manager were asked what choices residents have about what and where they eat and drink, they informed that a different menu is offered everyday with different choices on it. If residents don't like any of the choices they can ask for something different, and although the home has set mealtimes they don't have to eat at the same time. They added that residents can choose to have their meals in the dining room, lounges or their bedrooms and are asked which their personal preference is.

To ensure that mealtimes are sociable staff informed the Healthwatch Team the following; staff chat with residents during this time, residents are asked who they would like to sit with, staff introduce people to new residents, menus are displayed on the tables, Carers will assist throughout and music is played in the background.

During the Healthwatch visit the team witnessed residents being served refreshments as they were watching TV in one of the lounges.

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 visits from healthcare professionals some of the residents were able to inform the Healthwatch Team that they had recently seen an Optician and a Dentist whilst other residents were unable to remember seeing these professionals, this may have been due to their own individual health or capacity.

The majority of the residents went on to tell the Healthwatch Team that if they needed to see a doctor a staff member would arrange this for them and should they need to go to the hospital for an appointment a staff member would chaperone them.

The Healthwatch Team went on to ask the staff and Manager of Hylton View about visits from health professionals to the home. They informed us that a range of health professionals visit the home on a regular ongoing basis or when required. One care staff member stated; "Healthcare professionals come in at least once a month. If needed sooner a Senior Nurse will book appointments so visit can be made to residents."



The Manager added that the home also receives professional support through Multi-Disciplinary Team (MDT) meetings and referrals.

Indicator 7 - Accommodate resident's personal, cultural and lifestyle needs

The indicator states that care homes should be set up to meet residents cultural, religious and lifestyle needs as well as their care needs and shouldn't make people feel uncomfortable if they are different or do things differently to other residents. **The Healthwatch team STRONGLY AGREE this was met.**

When asked if there is respect for their religion or cultural needs in the home all residents agreed that this is the case. All but one resident mentioned about the weekly visits from the Hairdresser which they all accessed when they needed to and the majority of the residents stated that the laundry services were either good or very good. One resident mentioned that although she felt the laundry service was excellent she had lost some items of clothing in the past.

Staff and the Manager informed the Healthwatch Team about the ways in which the home accommodates residents personal, cultural and lifestyle needs, this includes making everyone feel welcome, treating everyone with respect and



dignity and providing visits from the local church. The Manager gave another example of how this is done by explaining that the home currently provides 10 different specialist diets for their residents.

When asked, the Manager informed the Healthwatch Team that the home has its own dedicated hairdresser who visits the home once a week. She ensures that laundry staff get the residents own clothes back to them by labelling clothes with the residents name and she ensures that residents are always clean and appropriately dressed by carrying out walks round the home to observe the residents appearance.



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 the residents were asked if they ever get asked if they are happy at the home, some of the residents replied that they have and the remaining two said they hadn't been asked, but they were happy. Residents were also asked if there was anything they would like to change in the home, three residents said no there wasn't anything and two gave the following comments;

“Being confined to the home gets me down. I miss going out, it is a big thing to me as I like my freedom.”

“There are no activities. I would like to do something other than just sitting watching the TV.”

The Healthwatch Team mentioned this last comment to the Manager, on request of the resident. The Manager informed the team that the Activities Coordinator was currently on long term sick which had resulted in a reduction in the number of activities provided in the home at the time of the visit.

When the Healthwatch Team asked the resident what they would do if they ever needed to make a complaint about the home, all of the residents who were able to answer the question mentioned they would speak to a family member or one of the care staff.



Staff and the Manager informed the Healthwatch Team the ways residents and their family are able to have a say in how the home is run and which activities take place. They stated the home issues surveys to residents and family and they hold residents/relative meetings. All staff members who completed the survey also added that family and friends can talk to the Manager, comments included;

“They can speak to the Manager, her door is always open for anyone to see and to put their mind at rest. They can also give ideas or make complaints if they are unhappy.”

“They can go and talk to the Manager, as her door is always open for anyone to go and speak to her.”



The Manager added that she makes use of the feedback or complaints she receives from residents and relatives as constructive criticism.

When asked by the Healthwatch Team how are staff able to have a say in how the home is run, staff and the Manager mentioned the team meetings that are held and the Manager has an open door policy. Comments given included;

“You can go to the Manager with any ideas or concerns.”

“You can put ideas across to the Manager at staff meetings and express any complaints to her.”

“Staff meeting are held every month, where you can express ideas and opinions to the Manager.”

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 if the home is always clean and tidy, all but one resident stated that it was. The one resident who replied to say they didn’t think it is, and further explain this was due to the home being decorated at the time. Residents added that the temperature of the home is at a comfortable level for them and they can adjust the radiators in their bedrooms if needed.



The Manager informed the Healthwatch Team that she ensures the home is always at a comfortable temperature in resident's rooms and in all communal areas by having all heating set via heating clocks, which are checked by maintenance.

She went on to say that she ensures the building and its contents are well maintained and decorated throughout by carrying walkabouts round the home, observing the home having an action plan in place and keeping up with maintenance. The Manager added that she ensures the home is always hygienic and clean by having a full house keeping team in place, carrying out regular infection control audits, cleaning sheets are signed alongside a room checker.

When asked in what ways the home is a dementia friendly environment, the staff informed the Healthwatch Team that the home uses different coloured doors, has the same flooring throughout the home, it has themed areas and provides dementia friendly activities.

During the visit the Healthwatch Team observed a decorating programme taking place, where the Manager explained the changes that were planned to help the home become more suited to its residents and freshened up.



Dementia friendly signage and notices



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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