

Care home life, what it's really like!

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



Findings

Barnes Court Care Home is a purpose built home, located at:

Wycliffe Road
High Barnes
Sunderland
SR4 7QG

Telephone: 0191 283 3962

Provider: Maria Mallaband Care Homes

Provider's Website: <https://www.mmccarehomes.co.uk/>

Provider's Facebook: <https://www.facebook.com/mariamallabandcaregroup/>

See the latest CQC inspection report here:

<https://www.cqc.org.uk/location/1-310512450>

Barnes Court Care Home is a purpose-built home comprising of three floors and provides care for up to 66 people.

Six rooms have en suite facilities and there are some very large rooms which can accommodate couples if need be. Residents are encouraged to bring in their own items to furnish and personalise their room.

Care is available for individuals aged 18 years and over with complex physical and neurological needs on the ground floor, with dementia care on the first floor and nursing care on the second floor.

There are seven communal areas across the home. Barnes Court has internet access, a hearing loop system and an accessible garden for residents and relatives use. Residents wishing to have pets living with them at the home will be assessed on an individual basis.

There is a full-time Activities Coordinator employed at Barnes Court and activities are available seven days per week.

Protected mealtimes are promoted within the home, (a period of time when activity is reduced so staff can be available to help serve and supervise meals and assist residents who need help to eat and drink. This time also includes limiting visitors).

At the time of our visit there were 53 residents living in the home. Due to the individual health or capacity of the majority of the residents, the Healthwatch Team were only able to support 5 residents to fully complete the survey. The team received 13 staff (1 Manager, 1 Deputy Manager, 2 Nurse, 1 Activities Coordinator, 6 Care Staff, 1 Administrator, 1 Domestic staff) 1 fully completed relative survey and 1 partially completed relative survey 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 the Healthwatch Team asked residents if they could identify the Manager, some residents had difficulty with this, however, this may have been due to their own individual health or capacity, other residents knew the Manager by name.

Residents gave the following comments when asked what they think about the Manager;

“I see her every day, she is easy to approach.”

“She rarely comes to this area, the previous Manager used to come in often. She has been working at the other home for the past few weeks.”

“Depends what you want.”

The relatives who responded to the survey knew the Manager by name adding that they have little to do with her. One relative stated that this is a time issue.

When the Healthwatch Team asked staff about support they received from the Manager, the majority of staff members agreed that they have good support from their Manager, one staff respondent stated they have not had any support as they had not asked for any. Comments included;

“Mandy is a lovely Manager, she looks after all of her residents and staff well. Mandy will help with anything she can if possible.”

“I have received both personal and professional support from my Manager, her door is always open.”

“My Manager supports me in every way, she is passionate about activities and supports staff and residents in all aspects of their daily life.”

When asked about their experiences of talking to the Manager about any questions or issues, the majority of staff respondents gave positive responses, one staff member stated that they have never needed to. Comments included;

“I always feel at ease, she is easy to get along with and always willing to help.”

“Very good, very helpful and thoughtful.”

“She has an open door at all times and I can approach her with any issue. She is proactive and supportive.”

When asked what attracted them to the role of Care Home Manager/Deputy Manager, the Manager commented; “I have been in a management role for many years and been in care (health and social) for thirty four years.”



The Deputy Manager said; “To be able to actively contribute to ensuring that the care home is running efficiently and the delivery of care is to a high standard.”

The Manager and Deputy Manager explained what they enjoy about their roles. The Manager stated; “I enjoy all of my role, management, support and development to my team and delivering care and support to my residents.”

The Deputy Manager stated; “The diversity of the role, support from the team, contact and direct care - still available to deliver this.”

On entering the home the Healthwatch Team observed readily available information referring to the availability of a private meeting room, activities provided, the cinema room and the complaints procedure.



Entrance area - information stand



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 gave staff time a NEUTRAL rating which indicates both positive and negative feedback, which when averaged results in a neutral score and staff skills an AGREE rating.

When asked what they thought about staff at the home, the majority of residents gave positive responses, including, very good, good, all great, lovely and okay, they treat me nicely. One resident commented; “Generally pretty good, new staff not so good, they are trying to incorporate dementia patients. Sometimes the feeding of residents is not so good.”

The Healthwatch Team asked residents if the staff have the time to stop and chat with them. The majority of residents agreed that they do, one resident said they have not had time lately as there are only two staff members on the floor, but staff used to have time to talk. Other comments included;

“Yes, if I am upset they will come to see if I am okay.”

“All the time.”

When staff were asked if they feel they have enough time to care for residents, the majority of staff respondents agreed that they do, one staff member commented that there could be more one to one time given to bed rest residents. Comments included;

“Yes I help carers when needed but I also have time to chat with residents whilst undertaking my role.”

“Yes, time management is part of my job role working in a nursing home.”

“Every day is different and all care needs fluctuate from day to day. Staff spend as much time as possible with residents tending to their needs.”

“If day to day things run smoothly yes. If there are appointments or an emergency, then no the best care cannot be provided.”

When asked if they are you encouraged to develop their skills, staff respondents agreed that there are always training and development courses on offer and they are asked if there is any training they need or would like to undertake. Comments included;

“Yes, I am currently doing my National Vocational Qualification (NVQ) a staff member is supporting me with this.”

“Yes, any courses and literature I need are made available to me.”

Staff members who completed the survey explained what they enjoy about their job, some of the comments included;



“I enjoy my job because I like to help people who can no longer look after themselves. I love everything about my job.”

“I enjoy that it is rewarding making a person feel safe and secure at all times.”

“Providing enjoyable, meaningful and memorable activities which improve quality of life.”

When asked how she ensures staff have enough time to care for residents, the Manager said that this is attained by ensuring the right skills mix of staff and rotas are covered for quantity and quality, and she also works the floor.

The Deputy Manager said; “Encourage staff to take time with the residents, ensuring that they are all aware that this is a fundamental part of their role and support staff to facilitate this.”

The Healthwatch Team asked the Manager and Deputy Manager about ways staff are encouraged to develop their skills. The Manager commented; “I always develop the team by encouraging to develop themselves with training etc.”

The Deputy Manager said; “I enjoy supporting staff to be the best they can be, watching them develop into their roles, bring individuality to their roles.”

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 do staff know your personality, likes and dislikes, the majority of residents gave mixed responses, including;

“Regular ones do but new ones don’t.”

“Yes but I pick my own clothes.”

“Yes, but they do it in their way.”

There was no response from relatives regarding this question.

Staff members who completed the survey informed the Healthwatch Team that they get to know residents’ life history, personality and healthcare needs at pre-assessment, by communicating and spending time with residents, their families, friends and care professionals, by reading care plans and at handover meetings. Comments included;

“We get to know residents and their families by spending time with them, asking about their life. We also create a ‘one page profile’ about their history, likes, dislikes and hobbies.”

“All staff have access to pre- assessment and spending time with residents.”

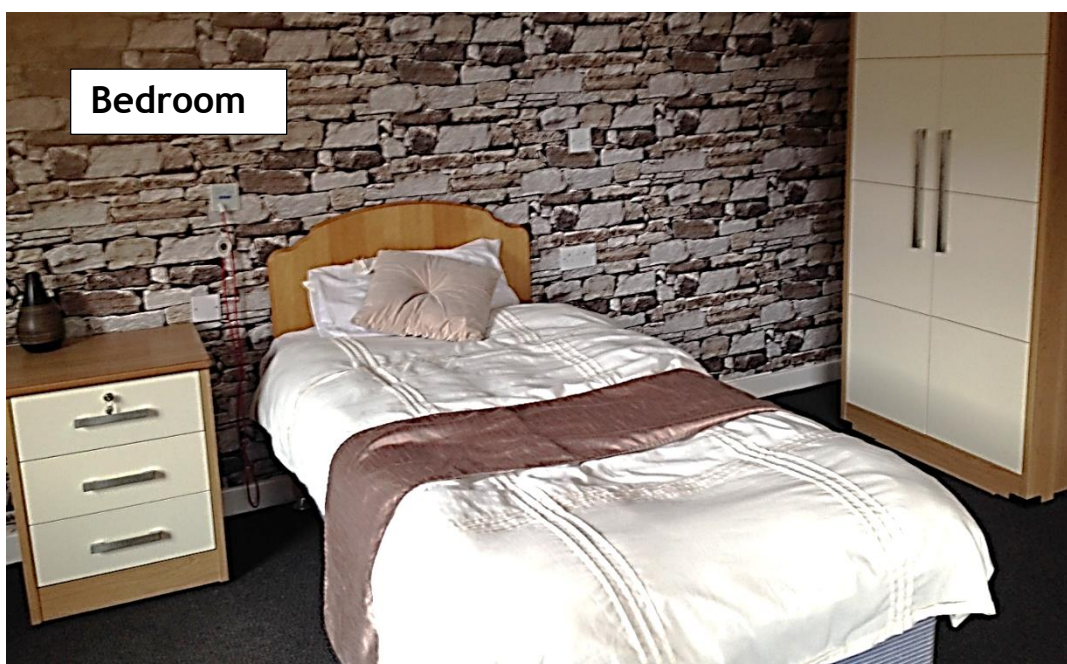


Staff informed that any changes in needs or preferences are recorded on care plans, at staff handovers, from the Nurse or other staff members, also by speaking with residents their families and the Multi-Disciplinary Team (MDT).

When asked how she ensures staff get to know a resident's life history, personality and health care needs when the resident first arrives at the home, the Manager said; "Encourage staff to read care plan before admission and each person is discussed in handovers."

The Deputy Manager was also asked this question and commented; "Give staff the opportunity to read care plans, give them time to talk to residents and family members, making them feel welcome and valued."

The Manager and Deputy Manager were asked how information about a resident's likes/dislikes and their health and care needs are updated as they change and how are they passed on to staff, they stated that this is accomplished verbally at staff handovers and through the use of care plan documentation.



Indicator 4 - A varied programme of activities

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

The Healthwatch team STRONGLY AGREE this was met.

When asked about activities provided at the home, residents named some of the activities they like to take part in; karaoke, bingo, dominoes and jigsaw puzzles. Comments included;

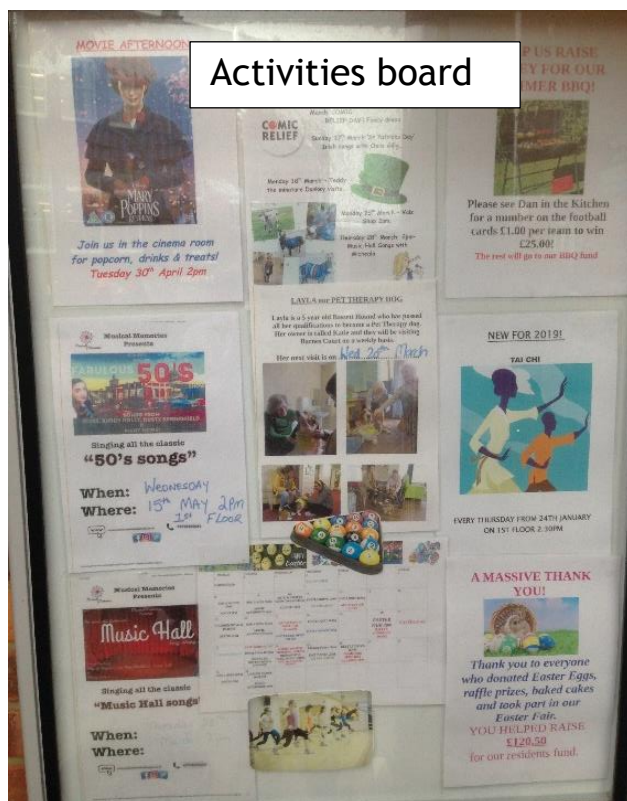
"I don't usually bother, I have done them all before, I just like to potter around."



“I like arts and crafts and I enjoy drawing Charlie Chaplin. We have been doing some gardening this morning, I planted rhubarb in pots.”

“Lots of activities and trips, Sue (Activities Coordinator) is the best ever.”

Residents told the Healthwatch Team about activities they enjoy outside the home, including going out on trips to see the Sunderland Illuminations and Penshaw Tea Rooms.



One resident said that they would like to go to Seaburn, she has asked the Activities Coordinator about this and was informed, she will arrange this when the weather gets a bit better.

When asked if it is easy to join in with activities, residents gave mixed responses, including;

“If I want to join in I can, the new Activities Coordinator is great.”

“Yes, Sue tells me.”

“The bus only takes one wheelchair, so I am careful not to take more than my share of trips.”

“I don't join in with activities any more.”

When the Healthwatch Team asked about using the garden, residents said they would enjoy sitting in the accessible garden when the weather is nice. One resident commented; “I can sit in the garden if I want to, last year we had barbeques, played games and the Ice Cream Man came.”

The Healthwatch team visited the secure garden which included an aviary with canaries, a pond and rhubarb which had recently been planted by the residents.

The Healthwatch Team asked residents if they are able to enjoy any hobbies or interests that they undertook before moving into the home. Two residents said they do not carry out any previous hobbies. Other comments included;

“I like to watch TV in my room.”

“I do not have any pets but I like it when the pony visits us, I had my photograph taken with it.”

“I like to do jigsaws.”



The Healthwatch Team observed residents watching a film in the lounge they appeared comfortable and relaxed.

When the Healthwatch Team asked the relative respondent what they think about activities available to residents both inside and outside the home and if it is easy for their relative to join in with activities, they stated that there are

activities available both inside and outside of the home and that their relative does join in but often wanders away during the activity. He went on to add that their relative does make use of the garden.

When the Activities Coordinator and staff were asked about activities for residents at the home, they all agreed that there is a range of activities available both inside and outside the home, including; movie afternoons and evenings, bingo, baking, arts and crafts, quizzes, Daily Sparkle Newspaper, music, entertainment, seasonal fairs, raffles, Tai Chi, keep fit, one to one chats, knit and natter, coffee mornings, pamper/beauty days, weekly visits from the hairdresser, therapy dogs and horses.

The Healthwatch Team visited the snooker/computer room which was in use by residents and their relatives at the time.

Outside activities include, gardening therapy, garden bowls, garden parties and barbecues in the summer, summer fairs, aviary, regular trips out on the homes' mini bus to Penshaw Tea Rooms, South Shields, the seaside, wildlife centre, walks in the local parks and shopping trips. Comments included; "Residents who decline activities are offered alternatives, including the Daily Sparkle Newspaper with reminiscence materials and quizzes. They are also offered music and TV in their room, along with one to one sensory/cognitive games and chats depending on their needs and or requests."

When asked how residents are encouraged and assisted to take part in activities, staff stated the Activities Coordinator tailors activities around residents wants, and needs, alternative activities are provided, staff join in with activities and support residents to and from areas that activities are taking place. Comments included;

"Residents are always asked a couple of times just in case they change their mind."



“We ask individuals what activities they like and work around that so everyone can have something they like doing.”

The Activities Coordinator said; “Residents are assisted with mobility by myself and staff members. They are encouraged and made welcome to all activities with a friendly atmosphere. Residents are encouraged to build friendships with each other and to find out about what they have in common.”

The Activities Coordinator was asked how she ensures that residents have the opportunity to continue with their hobbies and interests. She stated; “Hobbies and interests are encouraged, by visiting our ‘one page profile’ and good knowledge of our residents, we ensure all equipment and supplies are supplied to enable full participation.”

When the Manager and Deputy Manager were asked about activities provided at Barnes Court they stated that there is a good variety of activities both internal and external. The Deputy Manager stated; “We offer a variety of internal and external activities and our Activities Coordinator is amazing, a crucial part of the team here at Barnes Court, Care staff and qualified staff also get involved in activities.”

The Manager and Deputy Manager went on to say that Barnes Court has its own mini bus and also uses the local taxi service.

The Manager and Deputy Manager said that residents are assisted and encouraged to take part in activities by using residents ‘This is me’ document which covers activities and hobbies. They went on to say that residents are asked on a daily basis and there are discussions around activities they would like to do. Posters are available around the home and prompts given to all staff regarding activities available that day. Residents are supported to continue with previous hobbies, interests and pets, by staff getting to know residents past likes and dislikes and developing individual plans that will keep their attention and aid active reminiscence, also through discussion and welcoming pets to visit the home.

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

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

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

When the Healthwatch Team asked residents about the quality of food at Barnes Court, residents gave mixed responses ranging from very nice to it depends on what you get.



When asked about choice of what and when you eat, responses were mixed, some residents stated that there is enough choice, one resident said there was limited choice and too many sausages. Comments included;

“Sometimes the choice is not what I want, soup and sandwiches every night for tea. I have asked for waffles today but I probably won’t get them.”

“Yes, they will make me something else if I do not like what is on offer.”

The majority of resident respondents said that they eat their meals in the dining room and that they enjoy chatting with friends during their meal, one resident stated that they prefer to eat in their room. Comments included;

“I meet all of the other residents but I do not stay to chat after my meal. Fresh vegetables are short, we need more. We need fresh fruit to be brought up to the floor.”

“It is a sociable time”

When asked what they thought of the quality and choice of food at Barnes Court the relative respondent stated that his daughter will say yes to any food but really likes fish and chips, adding that his daughter is assisted by staff at mealtimes.

The Healthwatch Team asked the Manager, Deputy Manager and staff about the quality of food on offer at Barnes Court, the majority of staff responses were positive, however two staff members said that there should be more salad, vegetables and fruit on offer. Staff commented; “There is a variety of food available at all times throughout the day.”

“Residents have their say in menu choices for different weathers and are asked if there is anything they would like to see on the menu. All residents tend to enjoy their meals.”

“I think the quality and choice of food is good, however, I think salads, fruit and vegetables should be promoted and encouraged at every meal.”

The Manager and Deputy Manager added that there are daily choices, some residents have their own menu, the menu changes with the season, the carry out food tasting to ensure that meals are high quality and home cooking is encouraged.



TV/Lounge area

When asked how residents are able to eat and drink at mealtimes as well as outside of mealtimes, staff stated that this is accomplished by checking residents care plans, offering food options, alternative choices and by snacks being readily available to residents. Food guards are in place for those who need them and staff assist residents to eat and drink. Comments included;

“Residents are offered fluids throughout the day, some residents are independent with their fluid intake others buzz for staff assistance if they want a drink.”

“Snacks are available at all times, the tea trolley and snacks are offered between meals.”

“By providing residents with food options and by making sure aids are in place such as plate guards and cutlery and making residents as comfortable as possible.”



Satellite Kitchen

When asked about systems to ensure that residents can eat both at mealtimes and outside of mealtimes the Manager said this is dealt with in care plans. The Deputy Manager commented; “We offer fruit, cakes, snacks and milk shakes with high calorific values.



Staff actively go along to local shops for residents if we do not stock what they fancy that day.”

The Healthwatch Team asked staff about resident’s choice of where they eat and drink, staff responses were positive and included;

“Staff ask residents what they would like for lunch and tea. Residents are always asked if they would like to eat in the dining room, if they choose not to, it’s their choice as it’s their home and staff respect residents wishes.”

“Residents can choose to eat where they like. Some residents are encouraged to eat and drink in communal areas due to SALT (Speech and Language Therapy) guidelines.”

The Manager said; “Residents choose to eat when and where they want, also what they want, if they do not like the menu choices for the day, there are two choices on each meal and residents are asked what they would like for each meal.”

The Deputy Manager commented; “Full choice at all times, we monitor food and drink intake for most residents, so unless we have any concerns regarding weight loss or gain then choices are always available, residents are encouraged to socialise in dining areas for the whole meal experience, but acknowledge individuality and choice at all times.”

When asked what ways are mealtimes made sociable, staff respondents stated that this is accomplished by offering food and fluids throughout the day and by offering choices of times residents would like to eat and drink. Staff added that mealtimes are made sociable by staff sitting and chatting with residents, offering a relaxed environment, by encouraging conversation and interaction with each other with ambient music playing. Comments included;

Water Dispenser



“The residents sometimes like music playing which they sing along to, they also like to guess who sings the song and mealtimes are sociable.”

“A lot of residents come into the dining area for their meals, where they socialise with others but some prefer their own company.”

The Manager and Deputy Manager were asked if the home has permanent drinks stations available for residents, they stated that each unit has a satellite kitchen and a water cooler is available to all residents at all times, adding that drinks are always available in all areas. They went on to say that mealtimes are made sociable by encouraging residents to use the dining room and looking at the whole dining experience on each unit.



Indicator 6 - Regular access to health professionals (GPs, Dentists, Opticians, Chiropractors, 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 regular access to Dentists, Opticians, Chiropractors, Audiologists and other health professionals, all resident respondents agreed that there is regular access to health professionals if needed. When asked about GP or hospital appointments, residents gave the following comments;

“I ask the Nurse and she will get the Doctor to come in. Staff go with me to hospital appointments and I pay for my own taxi.”

“I have been to the Eye Infirmary and to see my GP, a staff member came with me.”

“I see the Nurse and she will arrange it, I go in the ambulance with a member of staff.”

When asked about regular access to health professionals the relative respondent informed the Healthwatch Team that his daughter has changed her GP and has seen a Dentist whilst living at Barnes Court, he added that she is accompanied to any GP or hospital appointments by himself or a staff member.

When asked about access to health professionals the Manager, Deputy Manager and staff members who completed the survey told the Healthwatch Team that GPs visit the home on a weekly basis, Chiropractors, Dentists, Opticians and District Nurses and other health professionals visit on a regular basis. The Manager stated that Barnes Court has good relations with all health professionals.





The Deputy Manager commented; “Some are routine and regular, some are on an appointment basis and all are on an individual basis for each resident; should any resident require support in any area then they will be referred in a timely manner.”

Staff comments included;

“Residents are made aware of professionals who will be visiting them, this happens very often.”

“Professionals who come to see residents always see them in private.”

“Staff refer residents to MDT (Multi-Disciplinary Team) health professionals as required or requested by residents. Dentists and Opticians regularly visit the home.”

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

When the Healthwatch Team asked residents if their culture and lifestyle needs are respected at the home the majority of residents agreed that they are met at Barnes Court. One resident did not agree that their needs were met. Comments included;

“Yes I get my own clothes back and use the hairdressers.”

“I am happy, I get my own clothes back, I get my hair cut and styled in the salon and Sue (Activities Coordinator) cuts my nails. My church is Bethesda but the vicar does not come in.”

“I am a scientologist, I do my own nails and I have my hair cut at the salon here. I have no problems with the laundry.”

“I don’t get my clothes back from the laundry all of the time. My name is on clothing and sometimes I see someone else wearing my clothes.”

The relative respondent said that there are mix ups with the laundry, his daughter does not always get her own clothes returned to her.

When asked how residents’ religious and cultural needs are met the Manager, Deputy Manager and the majority of staff agreed that such needs are met at Barnes Court, one staff member did not answer this question. Comments included;



“Organise local churches, priests and other religious patrons to come into the home or take residents to preferred religious settings. Activities include a range of different cultural and environmental ideas.”

“Various activities are made available to meet all needs, if we have any requests from residents or family members they are actioned. Religious needs are met by a visiting priest on request.”

The Manager and Deputy Manager were asked about how the home finds out and caters to residents cultural, religious and lifestyle needs. They stated that the ‘This is me’ document is completed with information gathered from residents and family members, also by using the assessment process to identify individual residents personal, cultural and lifestyle needs and then develop that into each individual care plan. They went on to give examples including; church services at the home for bed bound residents, ensuring staff understand cultural needs of residents, update care plans and ensure it is carried out.

When asked about provision for residents to regularly get their hair cut/styled, the Manager stated that there is an in house hairdresser at Barnes Court.

The Deputy Manager commented; “We have a hairdresser who visits the home, we also have residents who visit the local hairdressers and barbers, also some residents have their own hairdressers.”

The Manager and Deputy Manager went on to say that they ensure that the laundry staff get the residents own clothes back to them by the use of a labelling system, families are advised of this system, any clothing not labelled will be checked for ownership by family.

When asked about mechanisms to ensure that residents are always clean and appropriately dressed the Manager and Deputy Manager stated that audits are in place, there are regular walk arounds where any issues are dealt with in a sensitive and timely manner, the Deputy Manager went on to say that individuality and choice are supported at Barnes Court.





Indicator 8 - An open environment where feedback is actively sought and used

The indicator states that there should be a mechanism in place for residents and relatives to influence what happens in the home, such as a residents and relatives committee. The process for making comments or complaints should be clear and feedback should be welcomed and acted on.

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

When asked do management or staff ask what you think about the home or are you happy at Barnes Court, the majority of residents stated that they are happy but that they are not asked this question. One resident did not answer this part of the survey and one resident said that staff do ask if they are satisfied or happy, going on to say that they are okay.

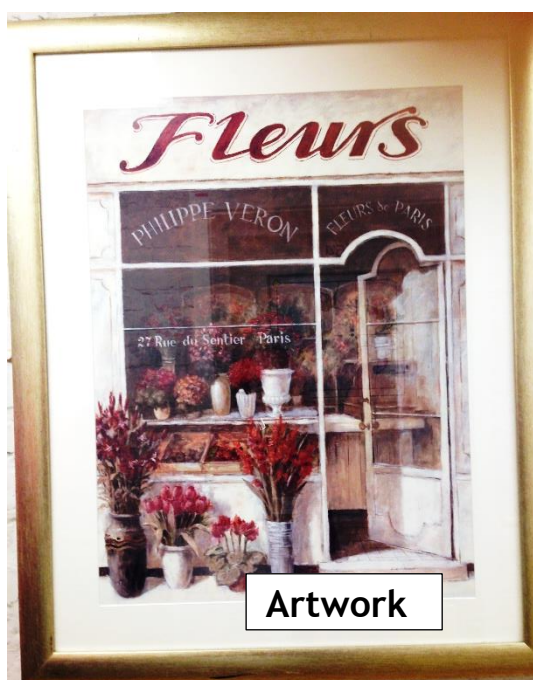
When asked if there was anything that needed to be changed at the home and if so who would they tell about this, three residents said there is nothing they would like to change. Other comments included;

“My carpet, I like things to match, I would like my room painted and new curtains, I have told the Manager, she said I keep changing my mind.”

“I like it the way it is, nothing to change.”

When asked, what would you do if you needed to make a complaint about the home, residents stated that they would inform the Manager or the staff. One resident commented; “I would tell the Nurse, then the Manager then Human Resources.”

The relative respondent said he would speak to whoever is on duty around any issue or complaint.



Artwork

When the Healthwatch Team asked staff how residents and their family and friends can have a say in how the home is run, staff stated that this is accomplished by holding regular meetings where residents and their family and friends can discuss any issues, concerns or ideas they may have regarding the home. They added that there are flyers around the home to advertise these meetings, there is also a suggestion box and the Manager and staff are available to speak to. When asked to give an example of how a resident or family member has influenced how the home is run, staff told us that there are regular meetings which are minuted and viable ideas are then introduced. Comments included;



“Residents have been included in choosing different foods from the menus and also included in decorating the home by choosing colour schemes etc.”

“One of our resident’s daughters donated bulbs and vegetable seeds which we used to start our gardening club in our garden. This was and still is very popular.”

“Residents are asked their opinions on decorating, events, days out, they are always encouraged to have a say in what happens. Family members join in with fund raisers by offering suggestions and also with organising.”

When asked how activities are evaluated, the Activities Coordinator commented;

“Activities are documented after every session, it is our aim to provide activities that everyone can enjoy therefore, after every session residents are asked if they enjoyed it or would they like another option.”

When asked how are staff members able to have a say in how the home is run, staff stated that this is accomplished at regular staff meetings to discuss ideas, food choices and skills, by passing information around the home and via surveys. Comments included;

“My Manager is open to suggestions and listens to any ideas I may have.”

“I can always talk to my Manager Mandy.”

“I can voice my opinions regarding different ideas I have or any issues I have.”

When asked about ways that residents and their family can have a say in how the home is run, the Manager and Deputy Manager stated that this is accomplished through operating an open door policy, resident and relative meetings, surveys, Managers Surgery and also on an ad hoc basis. The Deputy Manager said; “We encourage participation in the running of the home, for example helping to interview potential staff.”

The Manager and Deputy Manager went on to say that they make use of feedback and complaints from residents and relatives by the collating information and using a ‘You say, we did’ procedure which is available on posters at the home. Also, through the complaints and complements procedure and ensuring that everyone is made aware.

When asked about how staff have a say in how the home is run, the Manager and Deputy Manager said this is accomplished at staff meetings, surveys, through informal and formal feedback and by operating an open door policy at Barnes Court.



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.

The Healthwatch Team observed that the home appeared very clean and tidy and was sweet smelling. There was an imitation garden area and sensory equipment including twiddlemuffs available for residents to use. (A twiddlemuff is a double thickness hand muff with bits and bobs attached inside and out. It is designed to provide a stimulation activity for restless hands for patients suffering from dementia).

When asked about living conditions at the home and is it kept clean and tidy, residents gave mixed responses. Three residents agreed that the home is always clean and tidy, one resident stated that it is clean but not always tidy and one resident said not always, there is a hole in the carpet at my door.

When asked about the temperature at Barnes Court, one resident said it is never cold, one resident said the temperature is okay, one resident stated that it can be a bit cool if heating pellets have not arrived, one resident stated that they have a fan, a thermostat and can open the window if they need to, with one resident adding that it is too warm but they have a drinks machine just outside of their room.

When asked about the home environment the relative respondent stated that the home is always clean and tidy, the temperature is fine and in the main his daughter is settled at Barnes Court.

When staff were asked how the home is made dementia friendly, they explained that this is accomplished in many ways, including; wide corridors, colour coordination, key pad doors for safety, signage, picture references, sensory areas and activities, photographs and adaptive cutlery. Comments included;

“The home is safe, staff have knowledge of dementia and sensory objects. All staff are dementia trained, interaction is first and foremost with all residents.”

“Picture cards for lunch, door signs and a safe secure environment. Active Minds activities and reminiscence materials are readily available. Fully trained staff are on hand at all times.”

“Staff are all trained in dementia care. The Dementia Unit has reminiscence style décor. Resident's safety is priority and all exits are secured. Activities and outings are almost a daily occurrence and residents are encouraged to participate.”

The Manager and Deputy Manager explained that the home is kept at a suitable temperature by carrying out twice weekly temperature checks and all areas of the home are monitored by the Maintenance Team.



The Healthwatch Team asked the Manager and Deputy Manager how they ensure the building and its contents are well maintained and decorated.

The Manager said, “Health and safety checks and audits are carried out on a weekly, bi-weekly and monthly basis.”

The Deputy Manager said, “Through a decoration programme that is regularly reviewed.”

The Management Team went on to say that they ensure that the home is always hygienic and clean by the use of cleaning schedules and checks, feedback from residents and relatives, through the complaints procedure, also by ensuring that the home has ancillary staff and by completing documentation to evidence same.

When asked what ways is the home a dementia friendly environment, the Management Team said the home has a Dementia Unit which is decorated with internal garden and an external garden is also available. The home is also made dementia friendly through staff undertaking training, keeping up to date with new ideas and techniques and keeping a consistent approach to individualised delivery of care.



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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