

Care Home Life - What it's really like!

# Cedar House



Date of Healthwatch Sunderland visit:  
21<sup>st</sup> January 2020



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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.*





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## 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](http://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



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### 3. Methodology

The ‘Care home life - What it’s really like!’ visit took place on the 21<sup>st</sup> January 2020 and was carried out by Healthwatch Sunderland staff and a volunteer 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 	Skills 
3.	Good knowledge of each resident and their changing needs		Agree
4.	A varied programme of activities		Agree
5.	Quality, choice and flexibility around food and mealtimes		Neutral
6.	Regular access to health professionals		Agree
7.	Accommodation of resident's personal, cultural and lifestyle needs		Agree
8.	An open environment where feedback is actively sought and used		Agree
9.	Provide a physical environment which is suitable for the needs of the residents		Agree



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## Findings

Cedar House is a converted domestic residence and is situated within a scenic conservation area. The home has front facing views over Backhouse Park and a private south facing garden to the rear. Located at;

3-4 The Cedars  
Ashbrooke  
Sunderland  
SR2 7TW

Telephone: 0191 565 5385  
Provider: Parkside Care Ltd  
Provider's Website: <https://www.parksidecare.co.uk/index.php>

See the latest CQC inspection report here:  
<https://www.cqc.org.uk/location/1-119633891>

Cedar House has the capacity to support 31 residents aged 65 years and over. Residents are supported under the categories of Enduring Mental Ill-health (EMI) Residential.

26 bedrooms are en-suite and residents are allowed to personalise own rooms. The home offers one double room for a couple.

The home has six lounge/communal areas and an accessible garden.

Internet access is available to residents but the home does not have a hearing loop system available in communal areas. Requests to bring pets to live at Cedar House are considered on an individual basis.

The home operates protected mealtimes. (A period of time when activity is reduced so staff can be available to help serve and supervise meals and assist residents who need help to eat and drink. This time also includes limiting visitors).

Cedar House employs a part time Activities Coordinator and activities are provided five days per week.

At the time of our visit there were 27 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch Team were only able to support two residents to fully complete the survey. The team received three staff (one Manager, one Deputy Manager, one Activities Coordinator) and five relative surveys back.





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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.**

The two residents the Healthwatch Team spoke to could not name the Manager of Cedar House or tell us what they thought of her, this may have been due to their own individual health and capacity.

During the visit the Healthwatch Team witnessed positive interactions between the Manager and the residents. When showing the Healthwatch Team around the home, the Manager addressed residents by name, appeared very caring and ensured residents were comfortable in their seats.

The relative respondents knew the Manager of the home by name and when asked to tell us a little bit about her, they gave the following comments;

“Extremely friendly, informative and interested. Lynne is always here when I visit and is very well informed and in touch about my mother. She is very thoughtful and kind to me too.”

“She is busy, efficient and wise.”

“She keeps me well informed about my relative’s health and wellbeing. A very friendly person.”

“She is friendly to all and is approachable with any problem you may have.”

The Activities Coordinator who has worked at the home for seven years said that the Manager is supportive at times when needed and she has had no problems with anything, saying; “The Manager has always been supportive.”

The Manager who has been at the home for 18 years told the Healthwatch Team what attracted her to her role, she said; “To be able to oversee tasks are carried out to a high quality and the people who live in care are cared for to an excellent degree.”

She explained what she enjoys about the role of Manager, saying; “When people achieve tasks which normally would be difficult it makes life worthwhile.”

The Deputy Manager said; “I have worked at Cedar House for 11 years and was attracted to my role to gain higher qualifications, I enjoy meeting people and helping others.”



## 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 an **AGREE** rating for staff skills .

When asked, both resident respondents agreed that staff at the home are very good, with one resident saying that staff treat them well. Both respondents told the Healthwatch Team that staff do not have the time to chat with them.

When relatives were asked if staff have the time they need to care for their relative, respondents gave positive comments, including;

“Yes they are excellent. Sometimes on a weekend or evening they can be a bit stretched at busy periods but they do a brilliant job.”

“All are helpful.”

“At the time I have been to the care home, which is now only an hour a week, they seem to be doing their job.”

The majority of relative respondents agreed that staff have the skills to care for their relatives. Comments included,

“Yes, definitely.”

“No complaints about the staff.”

“Some appear to but others less so.”

When asked if they have enough time to provide varied activities for residents the Activities Coordinator commented; “Yes, we have an activity programme in place which works well alongside the daycentre.”



Seating area



They went on to say that training to develop their skills is provided whenever needed. When asked what they enjoy about their job the Activities Coordinator said; “Seeing people enjoy activities and seeing their moods lifted.”

The Manager and Deputy Manager told us ways in which staff are encouraged to develop their skills and how they ensure there are enough staff to care for residents. They said this is achieved by ensuring staff have the skills to do their job, by offering training and assistance, sharing knowledge and by giving praise when deserved. They added that they ensure there is enough staff to care for residents by having extra staff on duty if able to.

### **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 speaking with the Healthwatch Team, the resident respondents informed that staff do know some of their needs such as what time they like to get up on a morning, one resident commented: “You have to keep telling them.”

When relative respondents were asked if staff at the home know their relatives’ life history, personality and health and care needs well, relatives agreed that they do, comments included;

“They know needs very well indeed, they are constantly aware of changes in needs and always let me know about changes.”



“They let me know about changes during normal chat and over the telephone.”

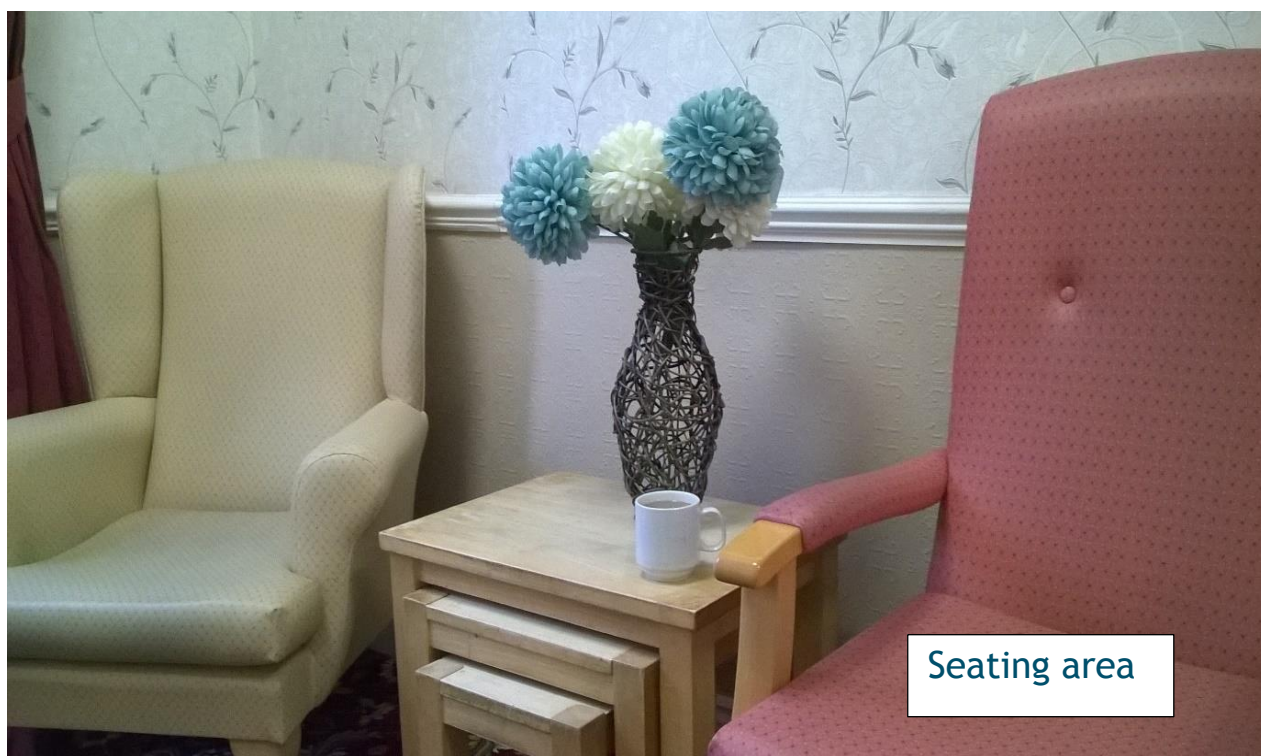
“They know my relative very well and yes they do respond to changes in her needs.”

“They seem to have a good relationship with my relative, keep me well informed about her at all times by phone and at every visit.”

The Healthwatch Team observed a significant staff presence in communal areas. Staff knew residents by name, were aware of and attended to residents needs with dignity and respect.

The Activities Coordinator informed the Healthwatch Team that they get to know a resident’s life history and personality when they first arrive at the home by speaking with relatives, friends and healthcare professionals.

The Management Team informed that they get to know a resident’s life history, personality and healthcare needs when the resident first arrives at the home, by getting an overview from their Social Worker, setting a full care plan as early as possible and through encouraging chats and family involvement. They went on to tell us how changes in residents likes, dislikes, health and care needs are updated and passed onto staff; saying this is achieved by updating care plans and by passing on information at daily handovers and staff meetings.





## Indicator 4 - A varied programme of activities

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

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

When asked about activities at the home, one resident said they do not bother with activities much but they do still enjoy playing board games. They went on to say that they very rarely have a trip out unless they have an appointment.

**Cedar House - Forthcoming Events**  
January 2020 - June 2020

- **January 20<sup>th</sup>** - **John Casey** - Singing for the brain. A fun packed time down memory lane.
- **January 23<sup>rs</sup>** - We shall be celebrating the life of **Robert Burns** with a haggis and whiskey and Scottish music
- **February 25<sup>th</sup>** - **Kayleigh Cares** - Come and join us to listen to the beautiful voice of Kayleigh who transports us to the 1940s and 50s.
- **March 17<sup>th</sup>** - **St. Patricks day** - we will celebrate whilst enjoying some Baileys and Guinness!
- **March 25<sup>th</sup>** - Back by popular demand - **Siobhan McCavanagh**. Another of our favorites returns to entertain us and have a good sing-a-long
- **April 22<sup>nd</sup>** - "Mr. Balloon Man" and popular all round entertainer - **Allan Cutler**
- **May 20<sup>th</sup>** - Always one of our favourites - **Harmony 4 U** getting us tapping our feet
- **June 17<sup>th</sup>** - **John Doonan** is back again following a very popular show last year singing a range of classic hits that will get you singing and dancing along.
- **July** - We will be having our **annual summer fair** - there will be the usual stalls and BBQ
- **Trip to visit Orchard Cottage at Beamish Museum** - We will be taking some residents for another trip to Orchard Cottage as part of our corporate membership of Beamish. This is a 1940s cottage which has been a wonderful place to visit as provide reminiscence therapy
- **Poppy from Wag and Co** - We will continue to have visits from our favourite dog - Poppy - thank you to the good work of the Wag and Co team.

See our notice boards for more details of other upcoming

**Reading for Wellbeing Project**  
every Friday at 10:00

At Cedar House

**Activity provision**

Another resident stated that they no longer bother with the activities.

When asked if they can enjoy time in the garden one resident answered positively saying "Yes, it is lovely out there."

The Healthwatch Team observed as residents enjoyed a game of bingo in the lounge, they were using adapted bingo boards, players were being supported by two staff members who appeared to know them well and addressed them by name.

When the Healthwatch Team asked relatives what they think about activities available to residents both inside and outside the home, one relative stated that it



is not easy for dementia patients due to capability, another said they did not know about activities but had previously mentioned that they only visit the home for one hour per week. Other comments included;

“Very good, although I think it would be nice to have some small group activities, colouring in, knitting, gardening for example. Outside activities are good, taking people on trips which cannot be easy. My mam is invited to join in with activities, they are always very enthusiastic and encourage participation. Some ad-hoc small group activities would be nice.”

“Activities both inside and outside of the home are very good, she gets involved when able to, because of her health issues.”

When asked if residents continue to enjoy any previous pursuits, relative

respondents gave the following comments;

“Yes, they encourage her to do arts and crafts which she likes. I think she would like to do more but needs encouragement so I can see that this is difficult to achieve.”

“Yes, pets come in once a week and they know she likes colouring in.”

“Not now, she has lost the ability to concentrate on anything.”

The Management Team and Activities Coordinator explained that there is a wide range of activities inside the home, indoor activities include, monthly entertainers, arts & crafts, quizzes, bingo, dominoes and chair exercises. Cedar House owns its own mini bus in which Day Centre and residential clients have regular outings.

They informed that provision is made for those who cannot or do not wish to undertake group activities in the form of one to one activities in line with residents likes, dislikes and their health and limitations. Adding that residents are always consulted on their choice of activities and their needs, health and otherwise are assessed to try to encourage participation. Staff offer support to participate, to continue with previous hobbies and interests in order to promote residents health and wellbeing.



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

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

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



The Healthwatch Team asked residents what they thought of the food at Cedar House, they said;

“It could be better.”

“Very poor.”

We went on to ask residents if there is enough choice of what they eat and when they eat. Responses were mixed. Both residents agreed that they have snacks and drinks in between meals. Only one resident said there is enough choice of food, both residents stated that an alternative will not be made for them if they do not like what is on the menu, both agreed that they eat in the dining room and that they enjoy sitting and chatting with friends at mealtimes.

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

“Excellent, lovely food and thoughtful treats.”

“What I have had was very good.”

Relative respondents went on to say that they are very confident that their family member is supported to eat and drink as much as needed.

The Healthwatch Team observed as refreshments, including tea, coffee, juice and biscuits was served to residents, staff appeared to know residents preferences and took time with their needs. We also observed jugs of juice and plastic cups were available throughout the home.



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The Management Team explained how they ensure high standards of quality and choice of food. They told the Healthwatch Team that menus with choices are set out and different food is on offer over the day, which residents are able to request.

The Manager also informed that residents and family members have input on menus.

They informed that resident's care plans include their needs and staff are insitu to support residents throughout mealtimes, specialist crockery and cutlery is available to those who need it. The dining room is a well ordered area where residents sit according to their preference.

Permanent drink stations and fruit bowls are available throughout the home, sweet dishes are available on occasion and residents can request food at any time of the day.

Residents are consulted around when and where they would like to eat and drink, there is a choice of two dining rooms, their own room, or during the summer months residents may choose to eat outside in the garden. Mealtimes are made sociable by encouraging conversation, playing ambient music and having enough staff on duty to manage resident's needs.

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

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

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

When asked about regular access to Dentists, Opticians, Audiologists and other health professionals, one resident stated they have had appointments with health professionals and one resident told the Healthwatch Team that they have not had access to health professionals. Both resident respondents said that if they have an appointment outside of the home, a member of staff will accompany them.

The relatives who completed the survey indicated that their family member has access to a range of healthcare professionals including; GP, Nurse, Optician, Dentist and Chiropodist.

The Management Team stated that residents have access to a range health professionals including; GP, Nurse, Dentist, Optician, Chiropodist, Audiologist, Physiotherapist, Mental Health Team, SALT (Speech and Language Therapists) and Dietician, adding that Cedar House is aligned to Vilette Surgery.





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

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

When the Healthwatch Team asked if personal, cultural and lifestyle needs are met at the home the residents who undertook the survey said that they choose the clothes they would like to wear, they can have their hair cut and styled by the Hairdresser and when asked about laundry services at Cedar Lodge, residents gave the following comments;

"It's OK, but sometimes I don't get them back."

"I sometimes use it but never get my clothes back."

When asked, the majority of relative respondents said that their relative doesn't have any specific lifestyle or dietary, needs. One relative stated that their family member is Diabetic and is watched at all times.

Another relative stated that their family member's religious and cultural needs are met at The Cedars. They added that there are regular visits from the Hairdresser, they have no complaints with the laundry service and their relative is always clean and appropriately dressed. Comments included;

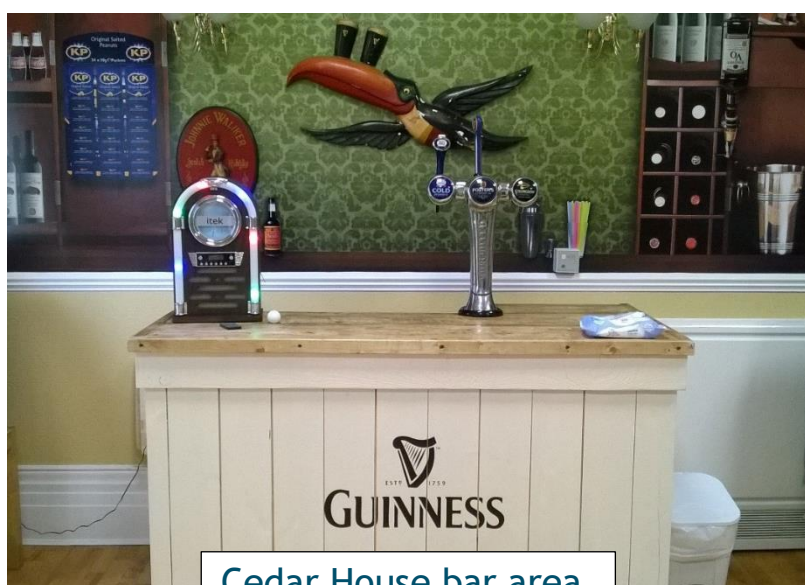
"The Hairdresser visits every week, she is very kind, the laundry service is very good and yes, my relative is always beautifully dressed."

"My relative gets regular visits from the local Priest, has her hair styled every week at the home and the laundry service is quite good just the odd missing item sometimes."

"My relative is happy, she has her hair done every week in the salon at the home and the laundry service is very good."

"There is a hairdressing service which she refuses to use and a lot of clothes seem to go missing from the laundry."

The Activities Coordinator explained how activities are tailored to resident's



Cedar House bar area



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needs, she said; “By writing their health needs, likes, dislikes and dietary specification in the care plan.”

The Management Team informed on how they find out and cater to resident’s needs, including cultural, lifestyle and dietary, by conversing with residents, their family and friends and by taking advice from health workers whilst also listening to and respecting resident’s choices. The gave an example of one gentleman’s vegetarian requirements which are logged and adhered to along with resident’s diabetic, religious and lifestyle needs.

### **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 we asked if there was anything resident respondents would like to change at the home, one respondent said it was ‘OK’ and the other respondent stated they would like to change the food. Both residents stated that they have not been asked what they think about the home and they said they would speak to staff or the Manager (The head lady) about any complaints they may have.

The majority of relatives who responded to this part of the survey agreed that they are welcome participants in life at the home. One relative said “Only at times they want you to visit.”

Other comments included;

“Yes, very much so. All of the staff are friendly, kind and understanding.”

When asked how residents and relatives can give feedback or have a say in how the home is run or make a complaint, comments included;

“I always feel able to give feedback. I would speak to the Manager, Lynne or a senior member of staff to make a complaint and I feel confident that it would be acted upon appropriately.”

“I have never been asked for an opinion, if I wanted to make a complaint I would speak to the Manager and I do feel it would be acted upon appropriately.”

“They are always open to suggestions about the home, if I had a complaint I would go directly to the Manager, they always take notice of what we say.”

The Activities Coordinator was asked how activities are tailored to meet a residents religious and/or lifestyle needs she said that this is accomplished by writing their healthcare needs, likes, dislikes and religious specification in their care plan.



The Activities Coordinator explained ways in which residents and their families can have a say in what activities are delivered both inside and outside of the home; she said that resident's wishes are written down and followed through on an individual basis. Adding that requests from friends and relatives are put into the activities programme. She commented; "Activities are evaluated by keeping an eye on the participation and interest of the clients."

The Activities Coordinator explained how, as a staff member she can have a say in how the home is run, she said; "We have staff meetings where ideas can be raised to the Manager and the Director."

The Management Team explained how residents and their relatives can have a say in how the home is run, this included; by attending monthly minuted meetings where management and families come together to discuss any concerns they may have. There is also a suggestion box available at Cedar House. The Manager gave an example of how a family member has influenced how the home is run by the addition of a new TV in the main lounge area. She added that feedback or complaints from residents and relatives are all addressed in an appropriate manner and are dealt with by the home's Directors.

When asked how staff are able to have a say in how the home is run, the Management Team explained this is accomplished at staff meetings with Management and Directors, also during appraisals and supervision where any ideas are discussed.

### **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 residents who completed the survey agreed that the home is always clean and tidy, one resident stated and that the temperature at the home is OK and one resident said it can be too hot at times.



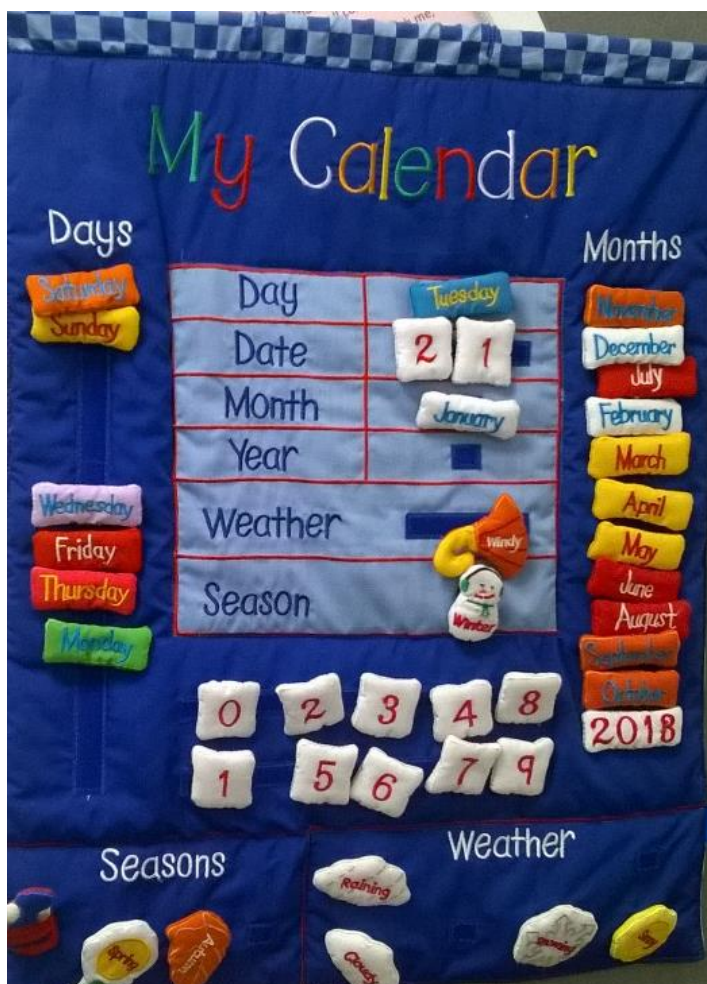
Dementia friendly signage



The Healthwatch Team observed that the home was clean, tidy and the temperature was at an ambient level, however there was a slight malodour throughout.

All of the relatives who responded to this part of the survey stated that the home is always hygienically clean and tidy, one relative said that the home is very attractive and another commented that the home could do with some redecoration.

When asked how a comfortable temperature is maintained throughout the home the Management Team informed that this is achieved through the use of thermostatic controls on heating panels, also by regular checks from Maintenance Personnel. They went on to say that the building and its contents are well maintained and decorated through the Management Team, Directors and Maintenance Personnel conducting checks on a weekly basis; adding that the home is always hygienic and clean by ensuring there is a Domestic Worker on duty at all times of the day and also use of professional cleaners when needed.



The Management Team advised that Cedar House does accommodate residents who have dementia and went on to give examples of how the home is made dementia friendly, which included; dementia signs throughout, colour code for bathroom and toilet doors, signs and pictures on residents room doors, key coded areas for outside and kitchen doors. They went on to say that activities suitable for residents with all levels of dementia are available at Cedar House.

The Healthwatch Team noted several dementia friendly aids around the home including a clock, calendar and signage.



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## 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 understand what you need and what you like and don't like?
6. What activities are there for you in the home? Do you have any hobbies and interests? Are you still able to do any hobbies or interests?
7. What can you do outside of the home?
8. How do you know when the activities are taking place?
9. Can you get out into the garden if you want to?
10. What do you think of the food here? Are you able to get food and drink in between meals?
11. Is there enough choice of things you like to eat? Will they make you something else if there is nothing you like?
12. Where do you eat your meals? Is it your choice to eat there?
13. Do you look forward to mealtimes?
14. Have you seen a dentist to check your teeth recently? Have you seen an optician to have your eyesight checked recently? Have you had your hearing checked by an audiologist recently?
15. What happens if you need to see a doctor or have an appointment at the hospital?
16. Are you a religious person? What is the laundry service like, do you get your own clothes back?
17. Is the home always clean and tidy?
18. What is the temperature like here? Are you ever cold or too warm?
19. Would you like to change anything about the home? Do you get asked what you think about the home? Have you told anyone about this and what happened?
20. What would you do if you wanted to make a complaint about the home? Who would you speak to about it?



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## 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?



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## 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?



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## 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?





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## 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?



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**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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