

## Care Home Life - What it's really like!



## Donwell Care Home

Date of Healthwatch Sunderland visit:  
27<sup>th</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.healthwatchsunderland.com](http://www.healthwatchsunderland.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 27<sup>th</sup> January 2020 and was carried out by Healthwatch Sunderland staff and volunteers who are trained so that they can effectively capture the resident’s experience.

At the visit residents were asked a range of questions via a set questionnaire (see appendix 1). The questions were designed to reflect the objectives of the visit. Observations were made on the physical environment and staff/resident interaction etc.

Staff and relatives were also given questionnaires to complete (see appendix 2, 3, 4 and 5).

We engage with local people on an ongoing basis, encouraging them to share their feedback on their experiences of care homes across Sunderland. Any feedback we received was incorporated into the findings.

## 4. Findings - Summary

The Healthwatch team collated the survey findings we gathered from residents, their family and friends, staff and Managers and our observations made during our visit. The findings have been scored against the nine indicators in terms of the degree which they were met, from strongly disagree to strongly agree. A neutral rating indicates both positive and negative feedback, which when averaged results in a neutral score. A summary of this can be found below:

Here is the key which shows the indicator scores



Strongly disagree



Disagree












Neutral



Agree



Strongly agree

1.	A strong visible management	 Strongly agree
2.	Staff with time and skills to do their jobs	 Agree
3.	Good knowledge of each resident and their changing needs	 Agree
4.	A varied programme of activities	 Agree
5.	Quality, choice and flexibility around food and mealtimes	 Agree
6.	Regular access to health professionals	 Strongly 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

Donwell House Care Home is a purpose built home, located at:

Welgarth Road  
Donwell Village  
Washington  
NE37 1EA

Telephone: 0191 416 7663

Provider: Bondcare

Provider's Website: <http://bit.ly/3bbYHrE>

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

See the latest CQC inspection report here:

<https://www.cqc.org.uk/location/1-128584655/contact>

The home has the capacity to support 63 residents who are of older and younger age. Residents are supported under the categories of general nursing, general and dementia residential care.

All bedrooms are en-suite and residents and their families are actively encouraged to personalise rooms as much as possible.

The home is made up of four units, all of which have their own lounge and dining area. The home is currently fitting a new Wi-Fi system which will be available to all who wish to use it. The home currently doesn't have a loop system.

There is an enclosed patio areas and a garden, allowing residents to enjoy outside space safely.

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

Activities are provided in the home seven days per week and facilitated by the three staff employed to deliver activities.

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) but they do encourage relatives and friends to come in and assist and enjoy mealtimes with their relative or friend if this is required.

At the time of our visit there were 47 residents living in the home. Due to the capacity of the majority of the residents, the Healthwatch Team were only able to support five residents to fully complete the survey and three residents to partially complete the survey. The team received five staff (one Manager, one Deputy Manager, one Nurse, one Registered General Nurse (RGN) and one Senior Activities Coordinator) and five relative surveys back, (four fully completed and one partially completed).





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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 STRONGLY AGREE this was met.**

When asked by the Healthwatch Team if they know who the Manager is, the majority of the residents were able to tell us her name and when asked what they thought of her, those who completed the survey gave positive comments.

During the visit the Healthwatch Team witnessed the Manager interacting with the residents as she showed the team around the home. She was able to introduce all residents to us by name and residents greeted her warmly.

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

“Always pleasant and speaks when I visit.”

“She responds when we get in touch.”

“Very pleasant and approachable.”

“Victoria is a very pleasant and approachable young woman who brings a spark of light to the care home. She takes an interest in residents and relatives.”

“Very good.”

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

“I feel very well supported by the Manager and Deputy. I can ask about any concerns I may have and they are rectified as soon as possible. Victoria is very approachable as a Manager and walks around the home twice a day. She is very well liked by residents and staff.”

“Regular supervisions.”

“Our Manager is very supportive and is aware how important activities are within the home.”

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

“I quite often speak to the Manager about concerns, queries or ideas. The door is always open for staff, residents and families.”

“Very approachable. Will listen to concerns and help to sort them out.”

“If I need to raise an issue, I feel it is dealt with quickly and also in a confidential manner. Victoria will listen to concerns and issues raised and solve them for you. I



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have had questions to ask on many occasions, they have always been treated quickly and assistance has been offered if needed.”

The Management Team were asked what attracted them to their roles. The Manager who has been in post for around seven months stated; “I needed a new challenge and wanted to make the home better.”

The Deputy Manager who has also been in post for seven months stated; “To strive to improve the home and help lead staff to improve standards within the home.”

They went on to inform us about what they enjoy about their jobs;

“I love the challenge of turning the place around.”

“Making a difference.”

## **Indicator 2 - Staff with time and skills to do their jobs**

The indicator states that staff should be well trained, motivated and feel they have the resources to do their job properly.

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

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

“The Carers are good.”

“They are all pleasant here.”

“I feel well looked after and they are here if I need them.”

“Some are excellent and others not so good.”

“There’s some lovely staff.”

The Healthwatch Team also asked residents if the staff have the time to stop and chat with them. Residents gave mixed responses;

“They do in between doing other jobs. It varies due to staff duties.”

“Occasionally they do. They are very busy. They are very good if you ask them to do anything for you.”

“Yes. They are sociable.”

“Yes they always pass the time with you and ask how you are.”

“Yes they do.”

“If you need help, you approach them and they will talk to you.”

During the Healthwatch visit the team observed staff interactions with residents especially in the lounge area, where staff were sitting with the residents and chatting with them as they went about their work. The topic of conversations



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highlighted that the Carers present appeared to know the residents life history and personality well.

When relatives were asked if staff have the time to care for their family member the following comments were received;

“Yes the staff have the time. They talk to her and come to her room when I’ve been there.”

“I think that time will always be a subjective view but overall it’s a yes.”

“Yes my dad always get attention and his needs are always met.”

“Yes.”

“Yes when we visit. The staff always appear to have time and patience with my relative.”

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

“Yes, they have a friendly, patient and professional approach.”

“They talk to her, ask if she’s alright and talk about trips out that they have planned.”

“As far as I know they seem capable.”

“Yes.”

“Yes their skills are many.”

When staff were asked if they have enough time to care for residents, one staff member stated that they did and the other gave the following comments; “Usually I do but General Nursing is unpredictable and emergencies happen, which pulls you away from clinical and personal care.”

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

“Yes training is very good at Donwell House. E-learning and also courses are available to book, with ample time to do so.”

“Yes, completing e-learning and also attending training days.”

“Yes. In my supervision we discuss developing my skills.”

The staff went on to tell us what they enjoy about their job. The following responses were received;

“Making a difference to residents day and seeing them smile.”

“Looking after residents and building relationships with them.”



“I thoroughly enjoy Elderly Care Nursing and find this area very rewarding and interesting. I enjoy the social aspect with elderly residents alongside clinical care. I also enjoy the involvement with families.”

The Healthwatch Team asked the Management Team how they encourage staff to develop their skills, their comments included;

“We involve everyone in training and always ask what the staff would like to do. We develop areas of interest and highlight strengths within the team.”

“Continuous professional development through online and class room based training, staff meetings, supervisions and appraisals. Asking which areas they are keen to develop and sourcing the training.”



Conservatory area

When asked how they ensure staff have enough time to care for residents the Management Team stated that they ensure that they look at the dependency of the existing and potential new residents and allocate staff levels accordingly. The Manager gave the following comment; “Staff allocation, ensuring a good skill mix. Offer support with time management and ensuring residents care plans reflect their needs.”

### **Indicator 3 - Good knowledge of each resident and changing needs**

The indicator states that staff should be familiar with resident’s histories and preferences and have processes in place for how to monitor changes in health and wellbeing.

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

When asked by the Healthwatch Team if staff at Donwell House know them, know what they like and dislike, those residents who answered the question stated;

“I think they know me quite well now. They know my wishes and they help me to pick out my clothes.”

“After living here for two years, yes they do.”



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“Yes they do. All the girls are local so they know me well.”

“Well I think so. I think they know my background.”

“Some do and some don’t.”

“Yes.”

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

“We are in the process of providing this information.”

“If there are any health issues they deal with them. They know some life history.”

“Yes I think they know by now.”

“I feel that they are fully aware of all his needs considering my dad has only been a resident since September.”

“Don’t know.”

The Healthwatch Team asked relatives if staff at the home notice and respond to changes in their relative’s needs. All relatives stated that they do and commented that they are always informed of these changes and this has been done in person.

Staff and the Management Team informed the Healthwatch Team how they get to know a resident’s life history, personality and health and care needs when they first arrive at the home. They explained that this done by making use of the pre admission assessment and talking with residents their families and friends. They added that they also like to liaise with the resident’s GP surgery for a past medical history. The RGN gave the following comments; “Detailed handover and communication between Nurses and Carers. We encourage staff to look at care plans and liaise with families. As a Nurse communication and developing trust is vitally important.”

Staff and the Management Team were asked by the Healthwatch Team how the information relating to residents likes, dislikes and care needs is updated and the passed on to staff. They informed that this is done by noting any changes on the residents care files and then communicating the information in staff handovers. The Manager commented; “Staff are allocated residents and their care files. The allocated staff will update the care files with any changes etc. Detailed handovers are carried out and their histories, changes etc. are written on the handover sheet.”



## Indicator 4 - A varied programme of activities

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

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

When asked about the activities provided in the home the residents the Healthwatch Team spoke to gave examples of some of the activities available including quizzes, dancing, bingo, entertainers, dominoes and word games.

Residents added information about the activities that are available outside of the home including occasional trips to the beach for fish and chips, Beamish Museum and York.

All of the residents stated that they are able to make use of the garden if they wish, comments included;

“Yes, anytime I want to.”

“We have a conservatory and patio. Residents from the other units come down. It’s lovely in the summer.”

One of the residents informed us that he helps out in the garden and looks after the plants. He had spent some time recently in the homes patio and garden area tending to plants and commented that he had really enjoyed himself.

**Activities**

WEEK 1	MON 20/01	TUES 21/01	WED 22/01	THUR 23/01	FRI 24/01	SAT 25/01	SUN 26/01
MORNING	Jasmine <u>Movement to Music</u>	Poppy <u>Quiz &amp; Singalong</u>	Poppy <u>Residents Choice</u>	All Units <u>Trip Out</u>	Jasmine <u>Visit from George Washington Reception Class &amp; Quiz</u>	The Hub <u>Sunderland Museum Project with Little Onions</u>	Poppy <u>Baking</u>
AFTERNOON	Blossom <u>Movement to Music &amp; Singalong</u>	Jasmine <u>Singing for the Brain</u>	Primrose <u>Reminiscence &amp; Singalong</u>	All Units <u>Trip Out</u>	Blossom <u>Quiz &amp; Story Time</u>	All Units <u>One to Ones in Bedrooms</u>	Primrose <u>Story Time</u>
5.15 – 6.15	Jasmine <u>Sunderland Museum Project with Little Onions</u>						

Weekly activities planner



Many of the residents informed us that the staff help keep them up to date with what activities are available and when they are taking place. The Healthwatch Team witnessed this during the visit when one of the residents in the lounge area enquired about what activities were taking place that week. A Carer pointed out the planner displayed on the door and read out to the resident and others in the room what was taking place. Other comments we received included;

“They are put on the notice board and the girls come round and remind us.”

“I check the planner on the wall, or ask one of the Carers.”

“We all discuss this so that’s how we know.”

When asked by the Healthwatch Team some of the residents informed us that they still enjoy some of the hobbies and interest including, reading, carrying out quizzes, watching TV, painting and knitting. Others were unable to continue their previous interests due to their own individual health.

Donwell House has its own pet Cockatiel called Spike for residents to enjoy. The home also has regular visits from pets of friends and relatives, one resident reiterated this to the Healthwatch Team during the visit.

Relatives were asked by the Healthwatch Team what they think of the activities available for residents inside and outside of the home. The following responses were received;

“Good. They enjoy singing and coffee mornings. My aunt enjoys going out to the Metro Centre and garden centre or any other outings.”



“It’s a varied menu, although for obvious reasons not everyone can’t be involved in some outings. We are keen to provide our own outings.”

“Very good.”

“Most of the activities are excellent however some are quite dated and repetitive. There are outings available and my dad has partaken in a few which he enjoyed very much.”

“Don’t know my relative cannot take part in in house activities but they did go out at on a trip at Christmas.”

Relatives added how their family member is supported and encouraged to take part in the activities;



“As far as we can see my mam is encouraged and participates when she is in the right frame of mind.”

“They talk about outings that are planned and encourage them to go.”

“They try but my relative isn’t capable.”

“Dad is always encouraged to take part but he sometimes doesn’t want to take part. After all he is 95 years of age and likes to relax in his room quite a lot.”

“All the time.”

When asked how the home helps and supports their relative to continue to do their hobbies and interests some family members replied to state that this wasn’t applicable and others gave the following comments;

“My aunt was always a big church goer. The Curate comes to visit her. They had a remembrance service also which she attended.”

“Dad did not have any hobbies in the last couple of years. His main hobbies were going on holidays, which he has not been able to do for a couple of years. He does enjoy the outings though.”

When staff were asked about what activities are available for residents inside and outside the home they informed us of the following; quizzes, one to one time, church services, reminiscence, coffee mornings, trips out and they have good links with the local community who visit the home, including a local Primary School.

The Activities Coordinator informed about the activity provision that is made for those residents who cannot or do not wish to undertake group activities; “We do one to ones with everybody who doesn’t wish to engage in a group. Whether it is in a lounge or in their bedrooms. We obtain information from the files to prepare us.”



Working piano available for resident use

Staff and the Management Team went on to tell us the encouragement and assistance they offer residents so that they can take part. They informed that they offer one to one support to residents, based upon their needs. They also prompt residents to sit in the lounge areas when the activities are taking place and remind them what is taking place and where.

Many of the staff also mentioned that they try to take into account individual





residents personal preferences when devising the activities making them available for everyone. Some of the comments received included;

“Staff always support residents, one to one and resident meetings are held to ensure activity needs are accommodated. Families are also welcome.”

“We have employed an Activities Team and now have volunteers to assist with activities. Residents have regular meetings to discuss what they would prefer to do.”

“We now ensure that activities are rotated over the four units. We talk to the residents to find out if they like specific things and try to arrange an activity around that.”

The Healthwatch Team ask the Activities Coordinator and Management Team how they ensure that residents have the opportunity to continue to take part in their hobbies and interests whilst promoting their wellbeing and independence. We received the following comments;

“We adapt our activities around the individuals need i.e. if somebody is bed bound we would still do arts and crafts with them.”

“A person centred care plan will be written to include a life story and activities care plan, these will capture hobbies and interest etc. This info will then be given to the Activities Team.”

“Incorporated into care plan and daily delivery of care. Activities Team is seven days per week to assist with maintaining hobbies.”

The Activities Coordinator added that they try to meet all the residents individual needs including those with or without capacity when delivering activities. They informed; “We try hard to meet everyone’s needs and we have introduced a one to one file which helps.”





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

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

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

When asked what they think of the quality and choice of food in the home, residents the Healthwatch Team spoke to gave a mixed response, comments received included;

“Most people say it’s great but I’m a parky eater. They make me milkshakes. I also like dinners at dinner time and sandwiches at tea time. I don’t have supper. Staff know this and they did an assessment the other day and found all this out again. Staff are taking notice of this. The Chef said if I can offer you anything, what would it be and I asked for some chicken soup which they got for me.”

“There is a choice but you can request something else if it’s not for you and in between meals there is always tea and snacks.”

“It’s pretty good and well cooked. In between meals staff bring milk shakes, tea, biscuits and cakes. Whatever you fancy.”

“I enjoy the food, especially if it’s healthy.”

“The food menu is often repeated. We could do with a bit more variety. I enjoy breakfast and the puddings are lovely.”

“It’s not too good.”

“Yes it’s alright, I have no complaints.”

All residents added that they eat their meals in the dining room the majority of the time and this was their choice. Comments received included;

“I eat in the dining room. I look forward to mealtimes, I have a good appetite and it’s a good social time.”

“I eat in the dining room unless I am poorly then I eat in my room. This is my choice.”

During the Healthwatch Team visit we witnessed refreshments and snacks being served to residents. Staff appeared to know what the resident’s preferences were and were accommodating to these.

When asked about the quality and choice of food at the home the relatives who responded to the survey question, stated;

“My aunt seems to enjoy it. I have not seen the food.”

“We don’t really see the menu but it looks fine.”



“Don’t think he eats much but he likes the puddings.”

“My dad really enjoys the food and has put weight on since coming into care.”

The majority of the relatives added that they were confident that their relative is supported to eat and drink as much as needed. Two relatives added the following comments;

“Very confident, she has put on weight.”

“Don’t know, don’t come at mealtimes.”

Staff respondents to the survey were asked what

they thought of the quality and choice of food available at each mealtime, staff who replied gave the following responses;

“I feel this is an area that could be improved upon sometimes but I have seen some positive changes made by new management i.e. smoothies at snack times.”

“Residents have a good choice of meals from the home menu. Quality of food is good.”

The Management Team added comments on how the home ensures that it provides high standards of quality and choice of food;

“Regular audits and daily feedback forms. We have resident meetings to ensure choice of meals are to resident’s preferences and alternative options are always available.”

“Audits are carried out monthly in the kitchen. Mealtime checklists are completed and we have implemented a diet feedback form to capture feedback from residents.”

When asked by the Healthwatch Team how they ensure that residents can eat and drink outside of mealtimes, staff and the Management Team informed us that snacks and drinks are available throughout the day via the drinks trolleys which are brought round the home and they also have a kitchen and kitchenette available on each unit.



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

“Residents who can make their needs known are able to eat and drink where they feel comfortable and are supported to do this.”

“If they do not want to eat at mealtimes, food is saved for them and it is their choice when they eat.”

“Carers will ask what they would prefer and if they would like a meal at lunchtime or later on for example. It’s a good idea to always promote choice.”

“We have dining rooms in each unit which residents are able to use. If requested residents are able to eat in their rooms or lounges if they prefer.”

The staff and Management Team added when asked the ways in which the home ensures that mealtimes are sociable. They informed that residents are encouraged to eat in the dining room for a more sociable experience. The dining rooms are well decorated, clean, with good lighting and residents can request soft music to be played. The Manager added “Staff are encouraged to treat the dining service as a restaurant.”



Food menu



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

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

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

When the Healthwatch Team asked residents if they have access to a range of health professionals some were unable to answer this question (this may be due to their own individual health). Those who did answer were able to mention professionals who had visited them recently including; GPs, Chiropodists and Opticians. Some residents also mentioned that they go out into the community to access some appointments and are supported by staff of the home or friends.

Many went on to explain that should they need to see the GP they would ask a Carer who would arrange this for them. One resident also mentioned that the home also receives visits from the GP every Thursday, who comes in weekly to check on residents.

The relative respondents when asked by the Healthwatch Team about the access to health professionals, all responded positively, and stated that their relative receives regular visits from a range of health professionals including GPs, Nurses Dentist, Opticians, Chiropodists, Warfarin Nurse and an Oncology Consultant.

Staff and the Manager informed the Healthwatch Team about the range of regular visits to the home from health professionals including weekly visits from a GP (via the aligned surgery) and visits as and when needed from Dentist, Opticians, Chiropodists, Audiologist, Dieticians, Community Psychiatric Nurses and Care Home Liaison Nurses. The Manager also explained that the home hosts regular Multi-Disciplinary Team meetings to support the residents care.





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## 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.**

Some of the residents the Healthwatch Team spoke to stated that they do follow a religion and that the home had accommodated this. Comments received included;

"I go to church if I fancy going."

"Yes I receive Holy Communion."

"I used to go to Chapel. The Vicar from Springwell Minster comes in, which I enjoy. Also the ladies from church came in and told a Christmas story in a different way, it was very interesting."

The female residents added that they are able to have their hair styled and cut once a week by the visiting hairdresser and they enjoy this experience. A gentleman resident added that he visits a local barbers in the community where his hair is cut.

All the residents who spoke about the laundry service stated that it was very good and that they always got their own clothes back.

Relatives who responded to the survey were asked how the home accommodates the lifestyle needs of their family member. One relative informed that the home arranges visits from local church for their family member and the other relatives stated that this wasn't applicable.

Relatives went on to reiterate that their relative has access to a visiting hairdresser every week and one family member informed that their relative is also able to have their nails manicured at the home.

When asked about the laundry service relatives gave the following comments;

"Good everything is marked with initials and room number."

"Very good, had no problems."

"OK as far as we know."

"We've had a few issues here. Problem is more about good labelling e.g. all black socks have disappeared."

Relatives added the following comments when asked if their relative is always appropriately dressed and clean;

"My aunt always looks nice."

"Most of the time."

"Clean but not always dressed appropriately."



“Yes.”

The Healthwatch Team asked staff and the Manager how the home finds out and caters to the resident’s cultural, religious and lifestyle needs. Those who responded informed that a pre admission assessment is carried out to help inform this information. Information gathered is then relayed to relevant staff who are responsible for addressing resident’s preferences. Examples given of how the home accommodates some of the needs included;

“One resident in particular likes to remain in the room by choice. They are made as comfortable as

possible and monitored regularly.”

“We have introduced two churches into the home and we will look at introducing more should the faiths require. We also look into resident’s religion to give us some background information.

“We have one lady who is a vegetarian and we have sourced meals and alternatives for her.”

The Management Team confirmed that the home has a visiting hairdresser who comes into the home on a weekly basis or residents can choose to make visits their own. The Manager said; “We have an onsite hairdresser for the ladies and a barber for the gents. Staff on duty will style hair daily or as required.”

The home also uses a labelling system to help ensure that the laundry staff get the residents clothing back to them, they added; “Staff have received training. Relatives are encouraged to label clothes, staff will label clothes when and where required. There is a system in the laundry which unlabelled clothes are taken around the home and shown to families.”

When asked what mechanisms are in place to ensure that residents are always clean and appropriately dressed, Management replied stating that staff are trained and offer assistance with personal hygiene and dressing needs. To understand the level of assistance needed staff will also refer to the residents individual care plans. The Manager also carries out twice daily walks around the home and senior staff carry out walk arounds the homes four units.



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

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

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

When asked if they get asked what they think of the home and if there is anything they would like to change residents gave a mixed response;

“Yes staff know me well, but they don’t always listen to my views. I like to discuss these things with other residents so that we are all happy.”

“I get asked what I think about the home but there is nothing I would like to change. Everyone is friendly.”

“Sometimes I get asked but no there I nothing I would like to change, I’m happy here.”

“I’m not asked personally what I think about the home but we need to speak up if things need to change. I can’t think of anything I want to change.”

The Healthwatch Team asked residents what they would do if they needed to make a complaint and who they would speak to about it. Those residents who replied stated that they would speak to a Carer, the Manager or one of their relatives. One resident gave an example of when she recently did this. She explained she had a noisy neighbour and the home agreed to move her into a different room, she stated she is ‘over the moon’ about this.

The Healthwatch Team asked relatives if they felt a welcome participant of life in the home, all survey respondents replied positively. Some of the comments we received included;

“Yes. I’ve always been made welcome and they all know my name.”

“Yes very much so. I sometimes join in with the activities which is encouraged.”

Relatives went on to tell us the ways in which they can have a say in how the home is run or give feedback;

“There is a residents and relatives meeting where we can give feedback.”

“Speak to the Manager.”

“It’s up to us to participate/contribute.”

“We find the Carers easy to talk to.”

Survey respondents added that should they wish to make a complaint about the home they would contact the Manager of the home and were confident that it would be acted upon appropriately.





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Staff and the Manager informed the Healthwatch Team, how families and residents can have a say in how the home is ran. They stated that this is done by hosting regular resident and relative meetings, the Manager operates an open door policy and a surgery and they carry out feedback surveys.

The Management Team when asked how they make use of feedback or complaints from residents and relatives stated;

“Discussed with the staff in flash meetings, staff meetings and lessons learnt meetings.”

“We use all feedback to help strive to improve. We investigate complaints and look at ways to drive improvement strategies.”

The Activities Coordinator reiterated that the resident and relatives meetings which are held monthly are an opportunity to gather feedback on activity provision, whether this be to look at new opportunities or to evaluate existing ones. They provided an example of how this opportunity has been used to influence the activities provided; “A gentleman came into the home a number of months ago and was very sad. He asked if we could arrange a Vicar to visit. Through this we now have two churches carrying out services. We also discuss activities at our resident and relatives meeting, the new activity ‘Story Time’ has gone down very well.”

When asked how members of staff can have a say in how the home is ran, staff replied stating that there is a monthly staff meeting, staff supervisions or they can approach the Managers, whose office door is always open. One staff member was able to give an example of this; “In meetings held each day various queries arise. The food issue was brought up and improvements were made straight away.”

The Manager when asked how staff can have a say commented; “Staff are given the opportunity to add to meeting agendas and speak out in meetings. Flash meetings are held daily at 11am.”

## **Indicator 9 - Provide a physical environment which is suitable for the needs of the residents**

The indicator states that care homes should be suitable for their resident’s needs. Be comfortable, homely, well maintained with high standards of hygiene.

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

When asked by the Healthwatch Team if the home is always clean and tidy and to a suitable temperature, all residents replied positively, some of the comments received included;

“Yes it’s always clean and tidy and the temperature is fine.”

“Yes the cleaners are good and the temperature if fine.”

“Yes the home is very tidy and clean.”



Painted resident bedroom doors

All relatives when asked about the physical environment of the home gave positive responses stating the home is always hygienically clean and tidy, well decorated and well maintained. One relative did add; “Although odours seem inevitable.”

The Manager gave the following answer when asked how they ensure that a comfortable temperature is maintained in resident’s rooms and all communal areas; “We have thermometers throughout the home and thermostats on all radiators. Heaters can be used if necessary, once risk assessments are carried out.”

When asked how she ensures that the home is always hygienic and clean, the Manager replied; “We have a full time Maintenance employee who offers their services and we have a Decorator who comes in where necessary.”

She went on to add that she ensures the home is always hygienic and clean by having a Supernumery Head Housekeeper who is also an Infection Control Champion, who carries out twice daily walk around the home.

The Healthwatch Team asked both staff and the Manager how the home is made a dementia friendly environment, they explained that the home has two dedicated units within the home for residents with dementia. Within these units the home has been decorated appropriately including tactile areas, artificial shop fronts and train station etc. Resident’s bedroom doors have also been made to look like front doors and memory boxes are displayed around the home, for use by residents. Staff also informed us that they have undergone Dementia training and the Deputy Manager added that they also have close links with the Community Psychiatric Nurses and Community Mental Health Teams, who support with the residents care.



Tactile area



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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 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, chiropractors 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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