

Care Home Life - What it's really like!

Evaluation January 2020



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Executive Summary

Key themes/findings

Healthwatch Sunderland have undertaken visits to each Care Home in Sunderland during 2019 and produced reports on every one to help ease the decision making of ‘which home do I choose?’ In early 2020, a review of all the Care Home Life Reports has been undertaken and good practice identified. The purpose of this report is to highlight and share that good practice with commissioners and service providers, with a view to enabling residents living in care homes to live their best life.

The format of the report centres around nine indicators which cover what is important for those living in care homes and those looking for a suitable care home either for themselves or someone else. The results are based on feedback from 168 residents, 185 friends and relatives and 319 staff.

Amongst the most positive responses were 100% of care homes achieved ‘strongly agree’ or ‘agree’ for staff having the skills to do their job and also providing regular access to health professionals. This was closely followed by providing an open environment where feedback is actively sought and used, and staff having a good knowledge of each resident and their changing needs.

The areas where there is most scope for learning and improvement are staff having the time to do their job - only 6% of care homes achieved a ‘strongly agree’. It is acknowledged that this is a challenging area for providers to carry out, but there are still some good practice ideas around technology and continuous improvement initiatives.

The other indicators which failed to achieve a score of over 90% for ‘strongly agree’ and ‘agree’ were quality, choice and flexibility around food and mealtimes and accommodating personal, cultural and lifestyle needs.

Good practice for the food and mealtimes indicator included home cooked fresh food, ample alternatives to suit needs as well as likes and dislikes, picture menus, hydration stations, snack baskets, and presentation of dining rooms.

Good practice examples for cultural and lifestyle needs were demonstrated by homes where residents were supported to continue practising their chosen faith. Homes also scored highly where residents were able to maintain their lifestyle choices such as regular hairdresser and manicurist visits. A reliable laundry service is an important factor for family members in particular.

This report will be shared with commissioners of the care home services in Sunderland and also those who provide and deliver these services to support continuous improvement amongst all care home services.

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.*



Scope and Purpose

This report looks at the care homes as a whole across Sunderland and highlights the good practice as identified in the findings of the Care Home Life - What it's really like work, of Healthwatch Sunderland 2018/2019.

Under each of the nine key indicators, we have drawn out some of the good practice examples we either witnessed during our visits to each of the homes or the residents, their friends and relatives or care home staff and Managers have informed us of during each home's survey process.

It is hoped that this will help Care Home Managers and the providers of the services to understand how to perform well in all nine indicators and use the report as a means to draw on, replicate and further develop their practice.

The ultimate purpose of this report is to benefit the residents, living in the care homes of Sunderland, to live their best life.

Methodology

All 47 older peoples care homes in Sunderland were visited over a 12 month period (October 2018 - November 2019) as part of Healthwatch Sunderland Care Home Life - What its really like work, which aims to discover what it's like to live in a care home for residents in Sunderland utilising a set of nine indicators.

As all care homes have worked with Healthwatch Sunderland previously on our Care Home Life visits, no pre-visits were carried out unless a new Manager was in place and they felt they would benefit from this meeting.

Dates and times of the Care Home Life visits are always agreed in advance with the Care Home Managers, in order to cause as little disruption on the day as possible.

All visits were carried out by Healthwatch Sunderland staff who were supported by our volunteers who are trained to effectively capture the resident's and relative's experience. Each visit lasted around 2-3 hours depending upon the size of the home and the number of residents and their friends and relatives who were available to speak to.

At the visit, residents were asked a range of questions via a set survey (see appendix 1). The questions were designed to reflect the objective of the visit.

Although discussions with residents were sometimes difficult, with some residents lacking the capacity to understand and answer some of the questions on the surveys, the Healthwatch Team were able to have more relaxed conversations with these residents and ask a selection of the questions. The majority of residents were able to respond to the questions around the food and tell us a little about the staff working at the home.

Observations were made on the physical environment and on interactions between care home staff and residents during all visits. Also when possible observations were made on the provision of activities that were taking place during the visit.

Staff and resident's friends and relatives were given surveys to complete (see appendix 2, 3, 4 and 5) prior to our visits, along with pre-paid envelopes for them to return their survey directly to the Healthwatch office, if they wished their responses to remain confidential.

Each care home was provided with promotional posters and leaflets prior to our visit to display around the home in order to promote our visit and encourage engagement.

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

Findings

Overall of the 47 care homes we visited we were able to receive feedback from:



The findings for this report will be categorised under the 9 key indicators used by the Healthwatch Team, which underpin the framework used when carrying out our visits.

The 9 key indicators are:

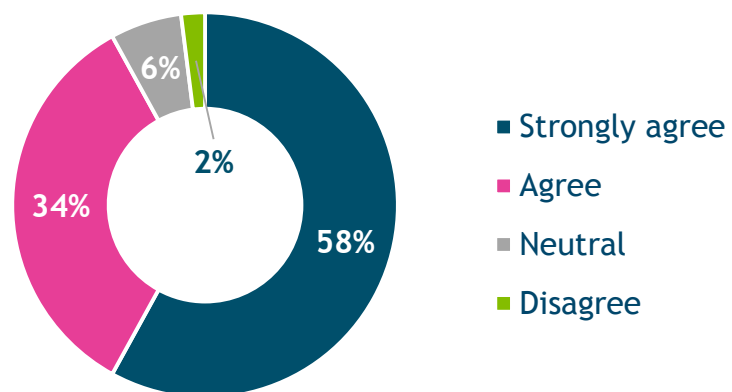
1. A strong visible management
2. Staff have the time and the skills to do their job
3. Staff have a good knowledge of each individual resident and how their needs may be changing
4. The care home offers a varied programme of activities
5. Offer quality, choice and flexibility around food and mealtimes
6. Ensure residents can regularly see health care professionals such as GPs dentists, opticians and chiropodists
7. Accommodate resident's personal, cultural, religious and lifestyle needs
8. Be an open environment where feedback is actively sought and used
9. Provide a physical environment which is suitable for the needs of the residents

Indicator 1 - A strong visible management

The first indicator the care homes were scored against states that the Manager should be visible within the home, provide good leadership to staff and have the right experience for the job.

Across the care homes in Sunderland there was a high level of satisfaction expressed by residents, their friends and relatives and care home staff with regard to their Manager. As seen below **58% of the care homes received a strongly agree rating for this indicator:**

The service has strong and visible management



The main themes that care homes demonstrated which helped them to score well in this indicator were;

Strong visual presence from the Manager

Many residents and their friends and relatives commented how it was important to them that the Manager of their care home know them well and are visible on a daily basis. Those homes who scored well were able to demonstrate this.

On the occasions, when this hasn't been the case, often it is due to lack of continuity in the Manager.

One of the homes who could demonstrate that their home is visible was Marquis Court where one relative said;

Over the course of visits during 2018/2019

16 homes had a new Manager in post.

“Emma is always at hand and has time to answer any questions we may have. She knows the residents very well and joins in with staff and residents and their family. It's a very well organised ship.”

During our visits to the homes, it became apparent that the majority of residents we spoke to were unable to name the Manager of their home, but this may have been due to their own individual health or capacity. Some of the residents however stated that they knew the Manager by sight or would know where to find them if they needed to ask a question or make a complaint.

An approachable Manager

Those homes who scored well, were those where it was also apparent that relationships with the Manager are at a level where residents, their friends and relatives and staff feel comfortable to approach them should they need to.

Managers in **74%** of the homes were described as approachable.

One example given of this was at St George's Care Home, where a resident gave the following comment when asked about the Manager;

“He always has time to listen, he is a good Manager. I love him to bits and like to give him a hug and a cuddle.”

A Manager who goes the extra mile

Those care homes who scored high on this indicator were able to demonstrate that their Manager ‘goes the extra mile’, whether this is for the residents or for their friends and relatives. One particular example of this was at Princess House Care Home, when a resident said;

“Lynne took me to an appointment and my hearing aid moulds weren't ready, so she took me out for lunch instead. That's the type of thing she would do!”

This was also apparent at Washington Manor Care Home where, during our visit, the Healthwatch Team were observing a sing-along session, which was being facilitated by an Activities Coordinator in one of the communal lounge areas. The Manager came in and sat with one of the residents who had been coughing, he checked she was OK and then proceeded to sing ‘Daisy, Daisy’ to her, which she visibly enjoyed. The resident then stated that this was a usual occurrence and she thought the Manager had a good voice.

A Manager who provides good leadership to staff

Care homes who demonstrated that their Manager is a good leader to the staff scored high on this indicator. With only a few exceptions, the staff in the care homes across Sunderland indicated high levels of satisfaction when asked about the support they receive from their Manager. One example of this was a comment we received from a staff member at Lansbury Court Care Home;

“Suzanne will always listen and try to help in whatever way she can. Our Deputy Manager is also very good with staff and they make you feel you can go to them with any issues.”

During our visit to Ashwood Court Nursing Home, one resident gave the following comment about the Manager’s relationship with her staff;

“Helen is a breath of fresh air and relates well with colleagues.”

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

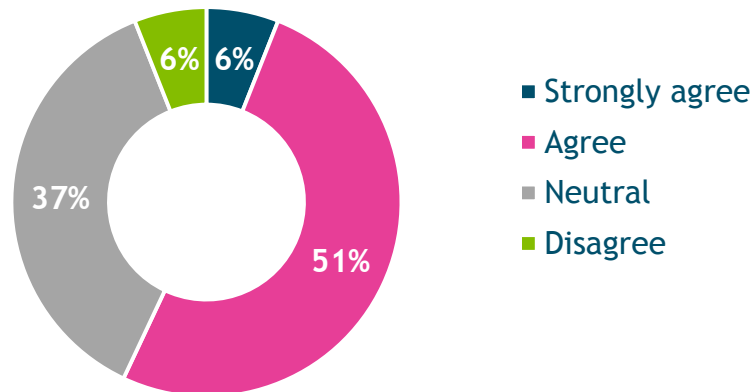
The second indicator states that staff should be well trained, motivated and feel they have the resources to do their job properly.

To ensure fairness across this indicator staff time and staff skills are split into two distinct areas.

Staff time

Across the care homes in Sunderland this indicator was the one where many were unable to achieve a strongly agree rating. Only 6% received a strongly agree rating and 51% received an agree rating. See below;

Staff with the time to do their job



The main themes that care homes demonstrated which helped them to score well in this indicator were;

Staff spending time with residents

Care homes who scored high on this indicator were able to demonstrate that the staff have the time to spend with residents. Residents from both Ashton Grange Care Home and Elizabeth Fleming Care Home gave the following comments:

“Yes they talk to me and keep me right.”

“Yes, they talk to you and show you things. They take you places when its fine.”

A relative from Bryony Park Nursing Home said:

“The staff are friendly and always have time for residents or visitors.”

Staff members at some of the homes informed of the recent introduction of hand held devices, which give them immediate access to resident’s care plans and other information and documentation. As these are ‘on the go’ they have freed up some of the staffs time. An example of this practice was given by the Manager of Paddock Stile Manor Care Home;

“We use an Electronic Care Plan System and documentation system, this helps the care staff to document information as they work using a handheld device and laptops. This minimises the time spent documenting things and allows more time to be spent with the residents. We use a dependency tool that helps us staff the home to appropriate levels, ensuring the staff have the time they need to care for the residents.”

Another way a Manager has supported his staff to free up some of the time to spend more with residents was given by the Manager at Washington Manor Care Home who informed us that he ensures staff have enough time to care for the residents and had reduced the amount of paperwork completed by consolidating various forms into one daily form.

It was noted, from the feedback we received, that although staff and resident’s friends and relatives informed us that staff were always busy and this then impacts on their time to stop and chat with residents, the majority of residents across all homes did not see this as an issue.

Residents in 60% of the homes did not see staff time as an issue, reporting that staff have time to chat to them.

Staffing levels

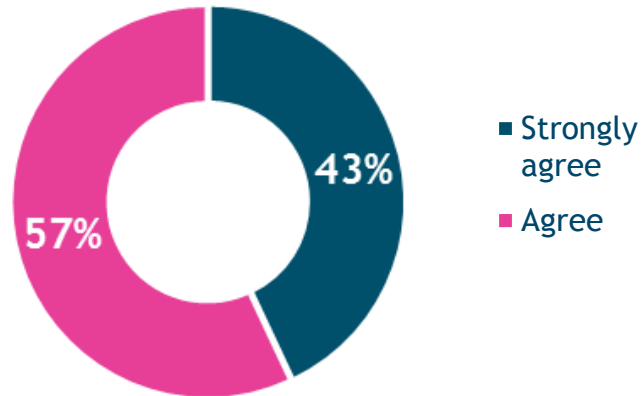
Care homes which scored high on this indicator demonstrated adequate staffing levels at all times, including times of staff sickness and annual leave. Staff informed us about the importance of team work to aid with the smooth running of the homes. One example was given by a staff member at Bryony Lodge Nursing Home, who said;

“It’s a busy home but with appropriate team work all residents are given the time they need. Both floors help each other, especially qualified staff and Care Home Assistant Practitioners.”

Staff Skills

All the care homes across Sunderland either scored a **strongly agree 43%** or an **agree 57%** rating when we considered staff skills, see below;

Staff with the skills to do their job



The main themes that care homes demonstrated which helped them to score well in this indicator were;

Motivated, caring and dedicated staff

The care homes which scored high in this indicator are those who could demonstrate that their staff are motivated, caring and dedicated. The majority of staff from the homes in Sunderland cited the residents as the main reason why they enjoy their jobs, highlighting the residents as their biggest motivation to do a good job and putting the residents at the heart of their responses. Here are comments from staff members at Marigold Nursing Home, Barnes Court Care Centre and Blossom Hill Care Home;

“I love interacting with residents and being able to see some smiles on their faces. Also I enjoy being able to help them in any way possible.”

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

“The staff at Blossom Hill are all amazing, dedicated people. I’ve become great friends with some of them.”

Continual learning, with time given to attend training

Care homes which scored high in this indicator were able to demonstrate that the staff who work there are given the opportunity to attend a range of training opportunities suitable for their job role. Staff stated that some of the courses they are given access to are either on-line e-learning opportunities or in house training. Others told us about either College or University courses they had or were attending at the time of our visits.

Career development is important and some care home staff members who commented on the support they have received from the Managers to do this. An example was given from one member of staff from Princess House Care Home said;

“Yes, I am encouraged to develop skills and I’m currently studying Dementia Studies at Stirling University.”

During the survey process at The Laurels Care Home we were told that within the last six months they had had two Senior Care Assistants commence Nurse training within Northumbria University. They added that the experience and clinical skills gained whilst working in the home have been invaluable to their Nurse training.

A relative from Springfield House Care Home, when asked if they feel the staff at the home have the relevant skills to care for their relative said;

“Yes - all staff seem well trained. It’s a policy of the home, even the support staff (like domestics) are trained to handle residents if needed.”

Another relative from Glenholme House Care Home gave the following example when asked what they think about the skills of the staff at the home;

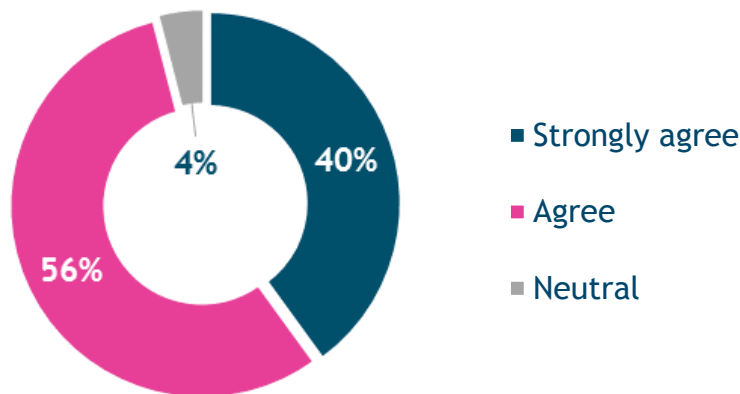
“My Dad has Parkinson’s, so he struggles with mobility, especially getting in and out of chairs unaided. It never ceases to amaze me how easily they can get him up and moving. They have excellent people skills and are fantastic at dealing with varied and complex emotional and physical needs; again, they go above and beyond.”

Indicator 3 - Good knowledge of each resident and changing needs

The third 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 majority of the homes across Sunderland scored well when we considered good knowledge of residents and their changing needs in this indicator, **40% received a strongly agree rating and 56% received an agree rating**, see below;

Good knowledge of residents and changing needs



The main themes that care homes demonstrated which helped them to score well in this indicator were;

Person Centred Care

Care homes who scored highly in this indicator highlighted the importance of staff spending time with residents when they first arrive at the home, getting to know them, their likes and dislikes and also getting to know their friends and relatives.

Spending quality time with the purpose of getting to know the residents, their friends and relatives can make a huge difference to the residents. A good example of this was highlighted at Marigold Nursing Home, where one member of staff spent time downloading Beatles songs for one resident to play in their room as they knew the resident was a huge Beatles fan.

Other good examples of this are those homes who utilise an initiative called 'Resident of the day'. This helps care home staff to really understand what is important to each resident and to review in depth what would make a difference to them. Each day, the resident of the day initiative enables all staff, whether Carers, Nurses, Housekeepers or Gardeners, time to get to know one resident so that they can personalise their care and provide an enjoyable environment whilst providing as much stimulation as possible.

Our visits found that many of the homes in Sunderland have adopted this approach.

When asked if the staff at the home know them, what they like and don't like and know their routines etc. one resident from Ashbourne Lodge Care Home said;

“They know what I like as I have settled in over the year.”

When asked how well the staff at the home know their friend or relative, some of the good practice examples received came family and friends of residents at Marquis Court Care Home and Falstone Manor Care Home;

“Yes when Mam first went into the home she was in an upstairs room but quite soon after she was moved downstairs, as the staff realised that she was less demanding and would suit a quieter environment.”

“Yes they are able to identify his moods and if needed they will either update me in person or call me at home.”

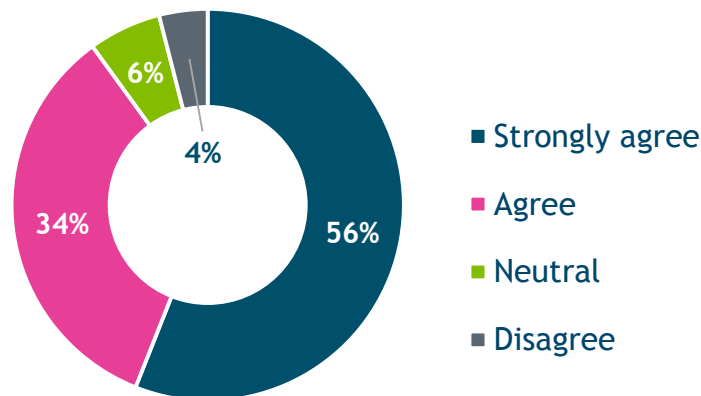


Indicator 4 - A varied programme of activities

The fourth 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.

Of all the homes across Sunderland, the majority scored a **strongly agree (56%)** or an **agree (34%)** rating when we considered how well they offered a varied programme of activities, see below;

A varied programme of activities



The main themes that care homes demonstrated which helped them to score well in this indicator were;

A Range of activities provided seven days per week

High scores in this indicator were accomplished by those homes who demonstrated that they provide a range of activities to their residents seven days a week. Those homes who did this told us that this is achieved by employing of more than one Activities Coordinator or by other staff, such as Carers, offering support to the activity staff.

One example was Thornbury Care Centre, who employ several activities staff, where one resident said;

43% of the Managers informed us that activities are available in their home 7 days a week.

“There are lots of activities on every day.”

Range of activities provided to suit all the needs of its residents

Homes which achieved high scores in this indicator were able to show that their programme of activities was varied and met the needs of their individual residents. One example of this was shown at St George's Care Home where the Manager said;

“We have an interest in resident goals and helping to achieve these, for example a resident wanted to learn to swim so we have enrolled them in swimming lessons to help them learn to swim.”

Another example was demonstrated at Marquis Court Care Home, where the Activities Coordinator commented;

“On admission every resident is asked if they have any clubs they wish to continue attending, if they do every effort is made to ensure this happens.”

During our visit to Dairy Lane Care Centre the Healthwatch Team witnessed a range of activities which a small group of residents were taking part in. These were led by the Activities Coordinator and consisted of card games (using a large deck of cards), a quiz, a sing-along, arm chair exercises and arts and crafts. The activities were tailored to the needs of those residents in the group and the Activities Coordinator encouraged them all to join in, offering support when needed.

Some residents shared with the Healthwatch Team during our visits that they still like to access the internet for either shopping or simply browsing purposes.

One of the homes which accommodates this is Elizabeth Fleming Care Home. They have an iPad for residents to access.

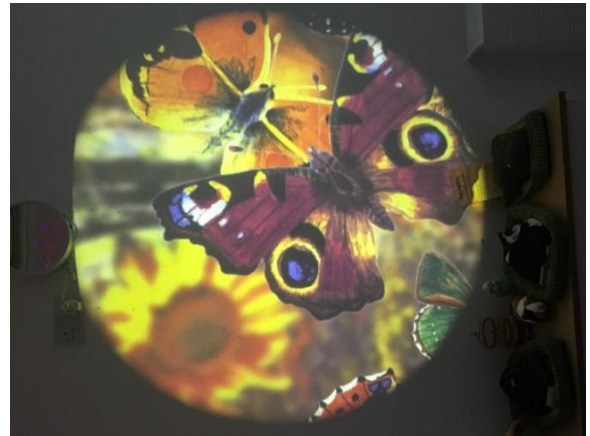
85% of the Managers informed us that their home has Wi-Fi which is accessible to residents.



Tovertafel 'Magic Table' game

Another good example of the homes using technology was observed at Glenholme House Care Home as, during our visit, residents appeared to be enthralled and animated by the 'Magic Table' which was encouraging participants to touch flowers, pop bubbles and catch fish.

Some of the homes have their own dedicated sensory rooms, these include Maple Lodge Care Home and Marigold Nursing Home.



Sensory rooms in Maple Lodge Care Home and Marigold Nursing Home

Some of the homes in Sunderland are embracing technology by the use of Virtual Reality sessions, which most who use them do so by bringing in external companies to provide this service. During our visit to Archers Court Care Home the Healthwatch Team watched as a resident was undertaking a one to one reminiscence session using a virtual reality headset to view local landmarks and family events. The resident in question seemed to be enjoying the experience.

The care homes of Sunderland advertise their activities programme in different ways, with some having a pictorial planner displayed in a prominent part of the home. Other homes have an activities book and some display a planner in resident's own rooms so they have a constant reminder to what is going on in any particular week. The majority of residents when asked how they get to know when an activity is about to begin told us that staff members alert them to this and assist them to the activity venue if required.

Homes also scored highly if they could demonstrate provision of one to one activities, which is very important as many residents are bed bound or prefer not



to go along to the communal areas for group activities. Some of the one to one activities provided across the homes were reading to residents, chatting and reminiscing with them and pamper sessions which included manicures and hand massage.

Pictorial activity board showing the range of activities at Thornbury Care Centre

Across the homes there is a very strong focus on group activities, with many residents enjoying the sessions provided for them, the following are a few examples of this;

- During our visit to Springfield House Care Home, we witnessed a word association game, which saw the Activities Coordinator asking residents for ‘types of shoes’ then ‘modes of transport’ this simple and easy to implement game was visibly enjoyed by residents and staff who came into the room and who also took part.
- At Thornbury Care Centre we observed a seated exercise session, which involved some ‘Cheer Leading’. Residents were visibly enjoying the session, smiling and singing along to the music which was being played. The Activities Coordinator was involving all of the residents present, although some had chosen just to watch, they were obviously enjoying the experience. The Activities Coordinator took time to explain the exercises to all of the residents, who he knew by name. Other residents were also encouraging the attendees to join in the fun.
- During our visit to Marquis Court Care Home we witnessed their Activities Coordinator leading a singing activity that involved residents using musical instruments and reminiscence. All residents and a relative who were also in the room were taking part, joking and laughing and we heard many comments where residents stated how much they were enjoying themselves.
- Marigold Nursing Home host an annual Sports Day, involving all of the residents and their friends and relatives. Residents from the neighbouring home, Bryony Lodge Nursing Home were also invited to join in the fun. Competitions appropriate to the abilities of the residents take place, such as table tennis, dancing, bowling, colouring in and one lady played her Accordion.
- Highcliffe Care Home have fresh flowers delivered weekly. These are then arranged by residents who are supported to do so by the Activities Coordinator.

Community links

Those Care Homes that scored well also illustrated that they help their residents to preserve their links with the local community. Some good examples given were;

During our visit to Primrose Care residents told us;

83% of the homes described how community links are retained and utilised for their residents.

“We are going for a walk to Hetton this morning. We go out often, but if I don’t feel like going, I don’t go. The girls take us, but I’m not bothered who takes me as long as I get out.”

“I am taken out to meet people from different homes and trips out to the shops in Hetton Centre.”

Also at Primrose House two students were there undertaking their work experience, one was assisting staff to take residents to an outing at the local shops and another was assisting the Cook in the kitchen. The residents looked to be enjoying their company.

When asked how they ensure their residents retain their community links, the Manager from Donwell House provided us with the following example;

“We ensure a wide range of activities are available within the home and have volunteers who attend the home from the local community. This ensures our residents maintain their community links.”

Another example of good practice was demonstrated by the Manager at the Laurels care home who said;

“We have joined up with the Young Carers Association in Sunderland on some intergenerational work where children who are young carers at a local school have become pen pals with a group of our residents. The children met the residents for the first time at Christmas and there is a visit planned to the school in the Easter holidays where the school will be opened up to allow the residents to have time in the school and enjoying their experience. The students will be giving the residents a tour of the departments, showing them things such as the computer room and technology that they are using.

There is a generational gap of around 80 years for some of the residents and we are looking forward to this and the benefit that it will have on the residents and the pupils will be great.”

Some residents informed us that their home facilitates the opportunity for residents to still go to some of their groups and activities or still have regular contact from support services they used to enjoy before coming into a care home. An example of this was given by one resident at Donwell House Care Home who receives a weekly telephone call from an Age UK befriending volunteer, which she looks forward to. Other homes also ensure that their residents attend community activities. For example, during our visit to Sycamore Lodge Care Centre one relative said;

“Mum liked cooking, the home does take residents to Pennywell Neighbourhood Centre for cooking on a rotation basis.”

Homes which scored highly on this indicator also provided visits from external entertainers, such as singers and musicians, petting zoos and comedians. During our care home visits we have witnessed many of these visits, which add a vibrancy to the atmosphere of the homes. An example of this was demonstrated at Archers Park Care Home where we observed a singer who was in one of the home’s communal lounge areas. Residents, their relatives and staff were obviously having an enjoyable time, staff were supporting residents to dance and sing along, including residents who remained seated.

We were told by **77%** of the homes that they book external entertainers to come into the home.

In Marigold Nursing Home the Healthwatch Team witnessed another example of good practice as part of this indicator when an activity involving an external entertainer who was singing to the residents. Staff, residents and friends and relatives were joining in with the singing and dancing. All appeared to be enjoying themselves.

Access to outdoor activities

Homes which scored highly in the ‘Activities Indicator’ could also demonstrate that they have regular trips and activities outside of the home. Some of the homes informed us that these are facilitated by the fact they have their own transport and dedicated drivers, others stated that they use local taxi firms and two of the homes told us that they access the Oomph trips (Oomph are a company who offer fully trained drivers and dedicated specialist vehicles).

Homes were able to share some good examples of their outings, which included Elizabeth Fleming Care Home

35% of the homes told us that they have access to their own mini bus and staff who can drive it, or that they share a mini bus with another home.

where one resident still enjoys going along to support his local team at the football matches. The resident is supported by staff to enable him to do this.

Shortly after our visit to Primrose Care Home, one staff member was undertaking a parachute jump to raise funds to help with the hire of a mini bus and driver from a local charity to facilitate trips and outings for the residents. One resident in particular was very excited about the prospect of going along to watch the event.

Another example was given from one resident from Donwell House Nursing Home who commented;

“There are regular trips, which can last all day and include stopping off for lunch.”

Many of the homes across Sunderland have beautiful, accessible gardens which the residents have told us that they enjoy spending time in, in the warm weather.

A good example of how a home’s garden was utilised was during our visit to Paddock Stile Manor Care Home. The Healthwatch Team witnessed an activity session taking place in the garden, all residents present were wearing a selection of both sun hats and formal hats as it was sunny and hot, sun cream had been applied and cold drinks were being served. The Activities Coordinator was also present and was facilitating a quiz with the group. Lots of laughter was heard and everyone seemed to be having a fabulous time.

During our visit to Blossom Hill Care Home we witnessed the garden being used by residents and their visitors. Residents were being supported out into the garden



by staff, on what was a sunny day, refreshments were being served and there was chatting and socialising with other resident’s visitors as well as their own.

Blossom Hill Care Home also had a Summer House which was providing shade to one resident and their relatives.

The summer house at Blossom Hill Care Home

Family and staff involvement

Activities that involve the friends and relatives of residents are also important as it helps residents to feel that the home belongs to them. Good examples of this were found in The Pavillion Care Home where residents, relatives and staff were working together to put on a performance of a pantomime.

Family members supporting their relatives to activities was witnessed at other homes around the city, including at Grangewood Care Home, Archers Park Care Home, Marigold Nursing Home and Ashton Grange Care Home.

In **74%** of the homes it was indicated that staff and friends and relatives get involved in a range of activities, offering support the residents.



Marquis Court resident's bar

Several of the homes in Sunderland have a dedicated bar area, which is used particularly for men's activities, family parties and celebration events, some of these homes are;

Marquis Court Care Home, Barnes Court Care Centre and The Cedars Care Home.

Encouraged and enabled

It has become apparent that those homes who are able to achieve a good score in this indicator were able to demonstrate that they use different methods to encourage, enable and involve all residents to participate in activities at some level; that residents are encouraged by staff to take part, but that they are still given a choice to whether they want to get involved. For example, one resident at Donwell House who has a visual impairment told us that staff are on hand to assist her with activities to enable her to be involved.

Another good example was given by a relative of a resident at Paddock Stile Manor Care Home who said;

At **94%** of the homes, friends and relatives indicated high levels of satisfaction with the encouragement that their loved ones are given to access activities.

“Gently coaxed, but if she doesn’t want to participate, she is not pushed into it.”

Many homes also demonstrated how they continue to ask residents if they wish to participate in activities. One survey respondent from Archers Court Care Home informed us that staff ask the residents if they would like to go out on trips, even if they have declined in the past. This is important as residents may change their mind.

Residents at the majority of the homes informed the Healthwatch Team that the home’s staff employ good practice around promoting when an activity is about to start, by letting them know this and also assisting them to the relevant room. One example of this was given to the Healthwatch Team at St Mark’s Nursing Home, where one resident said;

“Staff tell me what is on, they help me into the lounge to take part in the activities as I am in a wheelchair.”

During our visit to Thorncliffe House Care Home, one of the residents who enjoyed spending time in the kitchen, had her apron on and was about the help the Chef with the washing up, which he encouraged. They were very relaxed in each other’s company and the Chef stated that they always enjoy a cup of tea and chat together before they get started.

Involvement of pets

Pets were visible in some of the homes we visited and this assisted them to score high on this indicator. Where a home has their own resident pet and when speaking to residents having a pet gives them a lot of pleasure. During our visit to Thornbury Care Centre they had recently rescued a cat, Ruby and several of the residents spoke warmly about her and were keen to tell the Healthwatch Team about her and introduce her to them.

The majority of the other homes have regular visits from pets who come along with their owners to visit family members who live at the homes. It is evident that this not only benefits the resident they are visiting but also other residents who live at the home. Many knowing the pet by name and enjoying their time with them. This was the case at

76% of the homes indicated that they either welcome visiting pets, pets can come to live at the home with their owners or that the home has a pet in permanent residence.

Grangewood Care Home where the Health Team witnessed the effect Shady, the dog had on the home and it's residents.



Ruby is a permanent resident at Thornbury Care Centre



Shady is a regular visitor to Grangewood Care Home

The Mews Care Home have a fish tank in the main communal dining space. The Team witnessed one resident sitting just watching them for a good length of time. He stated that he finds this very relaxing.

Valley View & The Lodge have a resident Budgie, Geordie who brings pleasure to both residents and the home's staff.

One resident from the Laurel's Care Home said;

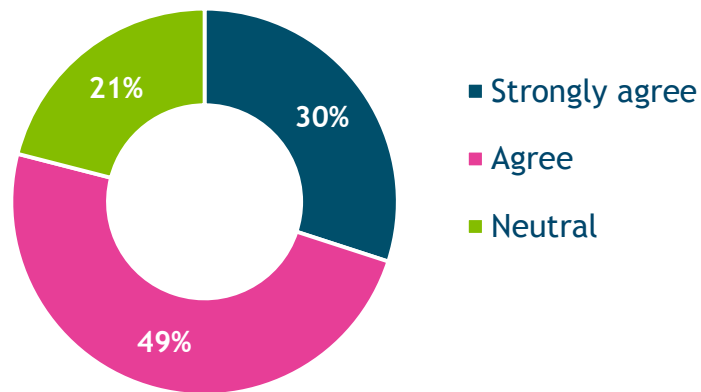
“A lovely dog comes in once a week. I love to see him.”

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

The fifth 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.

Across the homes in Sunderland we discovered that **30% of homes scored a strongly agree rating and 49% scored an agree rating**, see below;

Quality, choice and flexibility around food and mealtimes



The main themes that care homes demonstrated which helped them to score well in this indicator were;

Home cooked fresh food provided

Many residents commented how important food was to them and those who scored well were able to meet the needs of their residents, by providing them with home cooked fresh food. Examples given included those made by residents and staff from Bryony Park Nursing Home, Primrose Care Home and Ryhope Manor Care Home:

“Food is always freshly cooked and the menu is visible for visitors to see.”

“Good quality food and the fresh meat is supplied by the local butcher.”

“The food is home cooked to the way the residents like it. They are offered choice and if they don’t like it, another meal is made to suit them or their dietary needs.”

Choices offered

Those homes who scored well were able to offer residents a choice around food and drink to suit their needs, likes and dislikes. This included choice around the range of styles of food and beverages offered, alternatives being made available and a choice of where residents can eat their meals.

We witnessed some of this good practice during our visit to Cedar House Care Home where we observed the Chef who was taking orders for meal choices for that day, he commented that residents could make changes to their meal choices should they wish to do so. Some of the other good practice examples were received from residents at Elizabeth Fleming Care Home, Bryony Lodge Nursing Home and Thorncliffe House Care Home.

67% of the homes informed us that diets can be altered to suit the physical and medical needs of the residents. Some stating that they receive input from the Speech and Language Therapy Team.

“If I don’t like the dinners, they will make me a toasty.”
“There is something different every day, meals are really nice here, I like the desserts best. I take my meals in the dining room.”
“I love cheesy pasta, especially made for me when I ask for it.”

All homes were able to demonstrate good practice examples when asked about the choices they give to residents around where they eat their meals. The majority of residents stated that they enjoy the social experience of the communal dining rooms offered by the home, with others preferring the privacy of their own rooms.

Many staff across the homes in Sunderland added that they were able to offer residents the choice of where they can eat their meals, if there is no risk involved. Otherwise residents eat in the dining areas where they can be observed and supported to eat and drink at mealtimes. Some examples given came from staff at St George’s Care Home, Falstone Court Care Home and Marigold Nursing Home;

“St George’s offer choice and independence in all aspects of the care we provide and where a resident eats and drinks and how they eat and drink is completely down to their personal choice and we will have no restrictions on this. Residents are encouraged to experience mealtimes for social stimulation, but if they do not wish to eat in the dining room they can have their meals in their room, in the lounge, or wherever they request.”

“They can sit in the dining room or if they would rather their food can be brought to them in the lounge, if they would like to watch TV.

“The residents always have a choice at mealtimes and if they are not ready to eat then something is always available for when they are.”

Supporting residents to eat and drink

The care homes who scored well in this area were able to demonstrate the range of methods that they have in place to support residents to eat and drink. Some of the good practice examples we witnessed in some of the homes was the use picture menus and in particular the use of photographs of real food demonstrating menu choices, as opposed to written menus. An example of this was seen at Ashlea Lodge Care Home.



Picture menu at Ashlea Lodge

Another good practice example we witnessed was during our visit to The Village Care Home, where the Manager showed the Healthwatch Team pictorial menus of meals on offer at the home, she informed us;

“I made the picture menus myself, what is on the picture is what the residents get.”

All of the care homes were able to inform us of the good practice they employ when helping residents to eat and drink during and between mealtimes. The methods we were informed of included the use of tea trollies, hydration stations, snack baskets and communal kitchen areas that provide the residents and their friends and relatives to access hot and cold drinks and snacks throughout the day.



Chocolate fountain at Glenhome House Care Home, the tea trolley at Highcliffe Care Home and Snack basket at Paddock Stile Manor Care Home



Another of the good practice examples we were informed of was at Springfield Care Home who implemented a dedicated staff member to monitor and encourage fluid intake following a relative's feedback that we received as part of Healthwatch second year visits.

Some of the homes were able to inform or demonstrate good practice around the use of specialised equipment to support residents to eat and drink. Examples given or witnessed included the use of differing coloured crockery, which aid the resident to distinguish the food from the plates and the use of specialised cups and cutlery etc.

Many of the homes gave good practice examples demonstrating how during mealtimes they make it a sociable experience by laying the dining room appropriately and staff encourage and facilitate conversation.

We also witnessed in many homes well laid out dining areas that encourage the social nature of eating. This was seen in Glenholme House Care Home, Blossom Hill Care Home and St George's Care Homes who had furniture arranged to encourage conversation and offered residents a restaurant style experience.



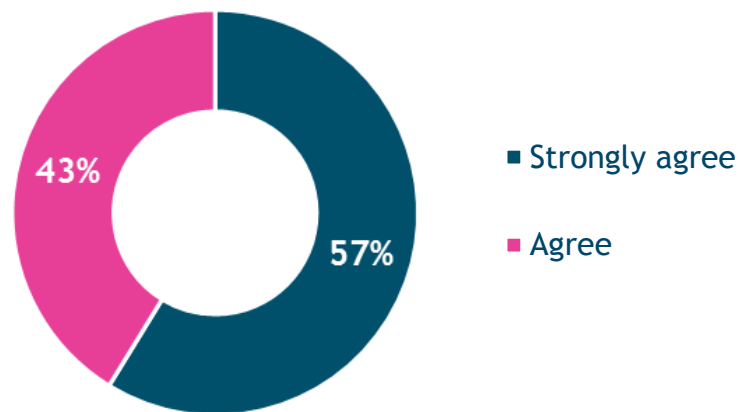
Many of the homes have well-presented dining rooms

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

The sixth 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.

57% of the care homes scored a strongly agree rating against this indicator followed by 43% who scored an agree rating, see below;

Regular access to health professionals



Main themes that care homes demonstrated which helped them to score well in this indicator were;

Residents have access to a full range of health care professionals

The homes who scored highly were able to demonstrate a range of health professionals they access to support the care of their residents. This includes access GPs, Nurses, Opticians and Dentists etc.

Many of the homes informed us that they are aligned to a GP practice which gives the home access to a GP and other healthcare staff who make regular visits to the homes to regularly check on their resident's health. The Healthwatch Team witnessed such a visit at Archers Park Care Home where in conversation with one of the residents they were informed of such GP visits to the home.

62% of the homes informed us that they are now aligned with a local GP practice with many adding that residents can choose if they are registered with this GP practice or stay with their original GP.



62% of the homes informed us that they host regular Multi-Disciplinary Team meetings.

The majority of the homes also mentioned they facilitated good practice of joined up working by hosting Multi-Disciplinary Team meetings. These are meetings of the group of professionals from one or more clinical disciplines who together make decisions regarding recommended treatment of individual residents. One of the good practice examples of this kind was received from a staff member at Alexandra View Care Home;

“We have regular visits from members of the Multi-Agency Team, where we support their accessing the home. There is a weekly GP round which facilitates a review for each resident across a three-week cycle. Interim visits are booked and managed on a need led basis. The home has a strong link to the local surgery and has regular visits with the Elderly Liaison Nurse. When residents choose to remain with a GP practice outside of the local arrangements, we support this and maintain close links to ensure support is available when needed. Residents are supported and encouraged to have a minimum of yearly checks with Podiatrist, Dentist and Optician. The home has strong working links with an Optician and Dentist who will visit the home if needed.”

The minority of the homes residents and staff members informed us that they have access to Audiologists. Those homes who scored well were able to demonstrate the access to this service. One such example included that of Dairy Lane Care Centre where staff and the Deputy Manager informed the Healthwatch Team about the range of visits to the home from health professionals including regular visits or access to GPs, Dentists, Opticians and Audiologists.

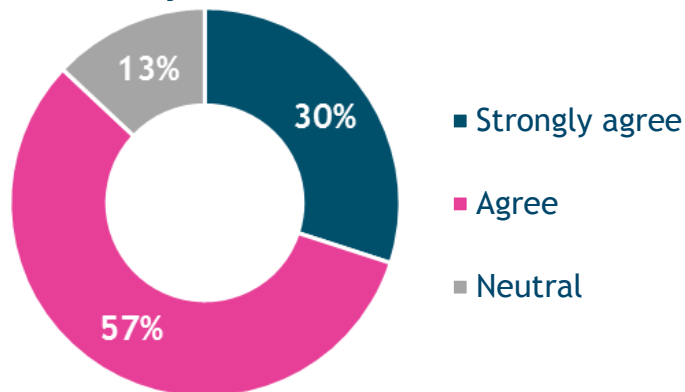
In addition to this homes who scored well were those who informed that staff had the skills and training to encourage residents to wear their hearing aids and any follow up care such as being able to change batteries and clean them correctly.

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

The seventh 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.

30% of the care homes scored a strongly agree rating against this indicator followed by 57% who scored an agree rating, see below;

Accomodate residents personal, cultural and lifestyle needs



Main themes that care homes demonstrated which helped them to score well in this indicator were;

Continue to practice faith or religion

In this indicator many of the homes were able to demonstrate good practice examples that supports residents to continue to practice their chosen faith.

Some examples of this were demonstrated in Marigold Nursing Home and Holy Cross Nursing Home both of whom have a dedicated space at the home to facilitate this. Marigold Nursing Home have a Multi Faith Room and Holy Cross Nursing Home has a Chapel.



Some of the other good practice examples we were informed of also mentioned the support the home offers to residents when they wish to visit a church or religious services outside of the home. Staff from Valley View & The Lodge gave the following good example;

“The home also has visits from a local priest but residents can go to services outside of the home if they wish.”

Residents able to maintain lifestyle choices

For many residents it is important to them that they are able to continue their lifestyle choices when moving into a care home. Therefore those homes who scored well were able to demonstrate that they helped residents to achieve this.

Examples we were informed of included access to regular haircuts and styling, with many homes having a dedicated hair salon and others supporting residents into the community to visit a local Hairdresser. This is important as it offers residents a real life experience of being pampered or having a treat, which adds to their general wellbeing.

100% of care homes offer the provision of regular haircuts and styling.

During our visits we witnessed many of the residents who accessed this and when talking about this with residents, many spoke enthusiastically about the fact they have their hair done on a regular basis and that this is important to them, as it is something they always did when living independently.

In addition to this, other areas of good practice we were informed of included resident’s being able to have their nails manicured. In many of the homes this was offered by the home’s Activities Coordinators.



Sycamore Care Centre’s dedicated hair salon

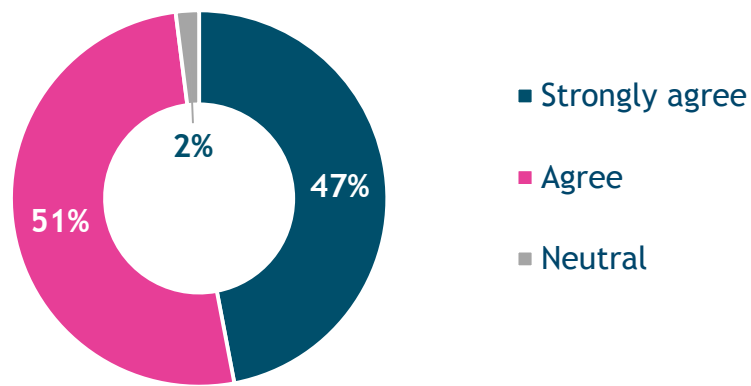
A final area of good practice which some homes were able to demonstrate or inform of in this indicator was the ability of the laundry service to return resident’s own clothing back to them after the laundering process. Overall the majority of the homes were able to achieve this, although in some homes this can be a real concern for family members, in particular.

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

The eighth 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 Majority of the care homes, **51% scored an agree rating** against this indicator, see below;

An open environment where feedback is actively sought and used



The main themes that care homes demonstrated which helped them to score well in this indicator were;

Homes offering a welcome environment to visitors

Those homes who scored highly were able to demonstrate that they made visitors, and in particular the friends and relatives of residents, feel welcome and involved in the life of the home.

Some of the examples given were received from relatives and friends at Washington Grange Care Home, Washington Manor Care Home and Bryony Park Nursing Home;

85% of resident's friends and relatives stated that they are made to feel welcome participants in the life of the home.

“Yes I am greeted by name and invited to events.”

“I’m always greeted with a smile and hello.”

“The home is a very friendly and welcoming to relatives and visitors.”



We also witnessed a good practice example whilst visiting Valley View & The Lodge Care Home, where we noticed a sign that was displayed in the entrance of the home, inviting family to join their relatives for Sunday lunch.

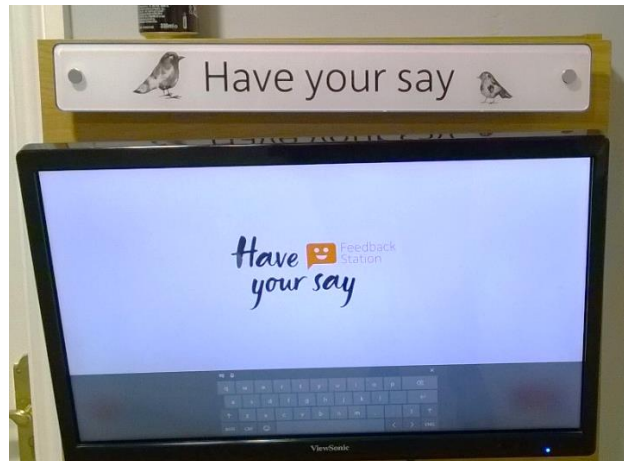
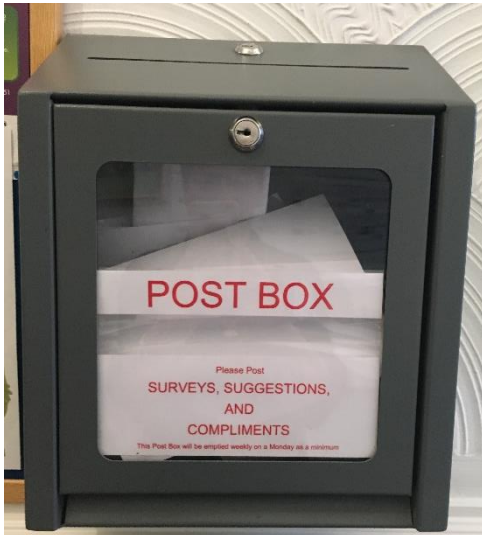
Feedback encouraged and actioned

Those homes who scored highly were able to inform or demonstrate that they actively encourage and invite residents, their family, friends and staff to become involved and influence what happens in the home.

Some of the good practice examples we were given on how they encourage involvement included;

- Regular well-advertised resident and relative meetings, where an open environment is achieved and actions implemented. We were also informed that where the responsibility for these meetings has been handed over to the Activities Coordinator, they tend to go ahead on a regular basis. Some examples of this were demonstrated at The Village Care Home and St George's Care Home.
- The gathering of resident and friends and relative feedback through a variety of methods. Many of the homes were able to demonstrate that they have in place various mechanisms to collect service user feedback including feedback stations, suggestion boxes and or annual questionnaires.
- The Manager implements an open door policy and creates an environment where conversations between staff residents, friends and relatives is welcome and encouraged.

90% of the homes told us that they operate resident and relative meetings.



Feedback station at Ashbourne Lodge Care Home and feedback post box at Thorncliffe House Care Home

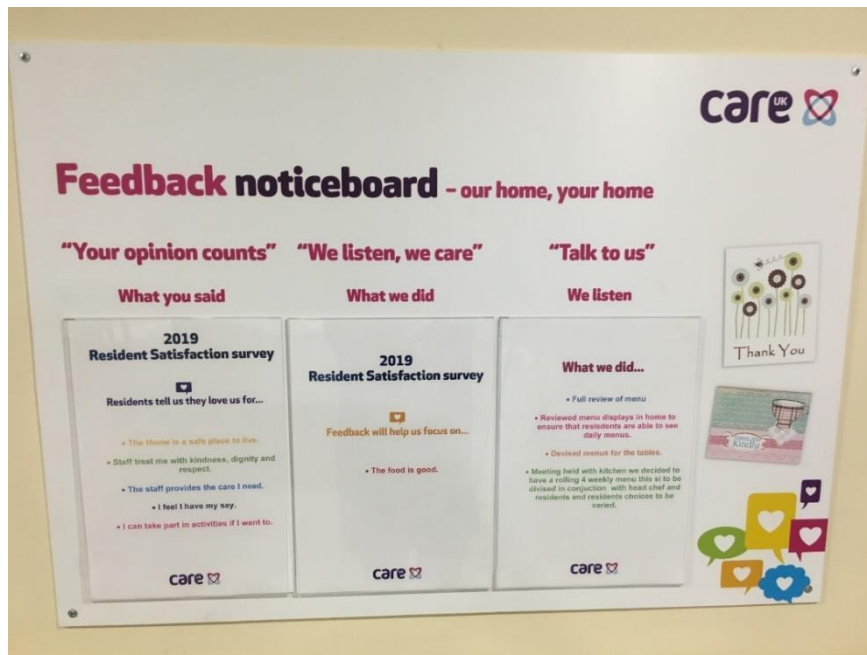
On receiving feedback many of the homes were able to inform of some good practice examples highlighting how the feedback was acted on. Some of these examples came from staff at Regents View Care Home, Marigold Nursing Home and Belle Vue House Care home;

“Some family members said that one resident liked watching the birds feeding and bought a bird feeder, which we placed in an area that the resident could watch the feeder for as long as they wished.”

“Residents had asked for a vintage tea room at the home through ‘You Say, We Did!’ Once a month the vintage tea room hosts a restaurant night for residents and their relatives as some residents felt they could not manage to go out to a restaurant. Meal bookings are taken and meals are served by staff.”

“I am able to make suggestions through the suggestions box or I can discuss any issues with my Manager. We also have staff meetings once a month where we are able to voice any concerns or issues.”

Other homes make use of ‘You said - We did’ boards in communal areas. These boards indicate things which have been discussed at a resident and relative meeting or items which the home has received feedback on. They display what the home has done to respond to issues or requests.



‘You said - We did’ board at Grangewood Care Home

Provide a clear complaints process

Homes who scored highly were able to demonstrate that residents, friends and relatives are aware of the complaints process in place and were confident to use it if they needed.

Some of the good practice examples we witnessed included posters and information files made available in the home. These are usually found in the reception/foyer area of the homes and are there to inform residents, friends and relatives how they can make comments or complaints.

Many of the relatives informed us that they had been made aware by the home of the complaints process and that they felt confident should they need to utilise it and that any complaints would be dealt with appropriately. Some of the good practice examples received came from relatives at Marquis Court Care Home and Paddock Stile Care Home;



Complaints Procedure on display at the Croft Care Home

“No problem, always sorted as soon as possible, appropriately and sensitively.”

“Go directly to the Manager and if necessary to Head Office, but I’m confident that this will be unnecessary.”

Many of the residents in the homes informed us that they had been made aware of who they should approach or talk to if they had any comments or complaints. Many mentioned that they would talk to a staff member or ask their family to support them with this. It was noted that many added that they were happy in the home so hadn't needed to do this, but were confident it would be acted upon appropriately if the need arose.

Some of the good examples were received from residents at St George's Residential Home and Washington Grange Care Home;

“If I wasn't happy then I would say something to the Carers, who are easy to talk to, they are just like friends and family.”

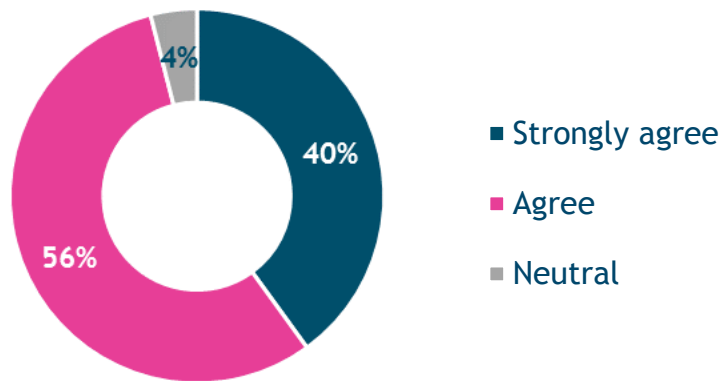
“Yes they have asked me and I am happy, there is nothing I would like to change, I would say if there was, I'm happy enough to speak up.”



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

The ninth indicator states that care homes should be suitable for their resident's needs. Be comfortable, homely, well maintained with high standards of hygiene. The Majority of the care homes, **56% scored an agree rating** against this indicator, see below;

Provide a physical environment which is suitable for the needs of the residents



Main themes that care homes demonstrated which helped them to score well in this indicator were;

High levels of cleanliness with no malodours

The majority of the homes were able to maintain a high level of cleanliness with no malodours. In 77% of the homes visited the Healthwatch Team didn't notice any malodours and none of the survey respondents at those homes mentioned any issues around this to us.

Residents, friends and relatives in **92%** of the homes told us that the home is always clean and well kept.

Dementia friendly décor and features

Those homes across Sunderland who scored highly were able to demonstrate, where appropriate, that their home was made a dementia friendly environment to suit the needs of the residents. Below are some good practice examples received from staff and Managers when asked how they achieve this;

- Contrasting coloured toilet seats
- The use of bright colours
- Residents having personal items and belongings around them
- The use of good lighting

- Appropriate low sheen, non-slip flooring throughout the home
- Use of large clocks
- Residents have bedroom doors painted to look like front doors and have their pictures and names on them
- Use of dementia friendly crockery (yellow in colour)
- Notices and signs to help with orientation are coloured
- Maintaining a calm atmosphere
- Having a dedicated sensory room
- Suitable activities available
- Orientation boards



Orientation Board at Hylton View Care Home



Memory boxes displayed outside of residents rooms

Some of the staff from Blossom Hill Care Home and Donwell House Care Home gave us the following good practice examples;

“We have butterflies outside of our dementia resident’s rooms and we have exercises to help them remember certain parts of their lives.”

“With the refurbishment we have captured points within their lives and given them a sense of belonging, the chance to feel part of a community and it helps enhance their lives. Lighting has made a vast improvement to the environment.”

Spaces to meet resident's needs

Some of the homes have been able to demonstrate good practice under this indicator by having rooms altered to provide dedicated spaces which fit the needs of their residents. For example some homes have done this by altering resident's rooms to adjoin two rooms in order to accommodate couples.

Another example was witnessed at Elizabeth Fleming Care Home where a room is dedicated to those residents who smoke. It was explained to the Healthwatch Team during our visit, that this was a decision which was made when the smoking ban originally came into force. The room was sparsely furnished to keep fire risks to a minimum. Residents were observed using the space on what was a freezing cold day.

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 in time available.

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