

The Sands Care Home

Enter and View Report

Tuesday 4th June 2024 10:00-12:00



Disclaimer: This report relates only to the service viewed at the time of the visit and is only representative of the views of the staff, visitors and residents who met members of the Enter and View team on that date.

Contact Details

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Registered Manager

Tracey Burrell – Manager

Date and Time of our Visit

Date: 4th June 2024

Time: 10:00-12:00

Healthwatch Lancashire Authorised Representatives:

Jodie Carney (Manager)

Sue Edwards (Senior Engagement Officer)

Austin Staunton (Volunteer)



Introduction

Our role at Healthwatch Lancashire is to gather people's views and experiences, especially those that are seldom heard, to give them the opportunity to express how they feel about a service. The aim of an Enter and View visit is to gather views and experiences of residents, relatives and staff of a service and observe the environment to assess the quality of the service.

This was an announced Enter and View visit undertaken by authorised representatives who have the authority to enter health and social care premises, announced or unannounced.

The team collate feedback gathered and observations made to compile a report. The report identifies aspects of good practice as well as possible areas of improvement. Healthwatch Lancashire is an independent organisation, therefore we do not make judgements or express personal opinions but rely on feedback received and objective observations of the environment. The report is sent to the manager for their opportunity to respond before being published on the Healthwatch Lancashire website at www.healthwatchlancashire.co.uk.

Where appropriate, Healthwatch Lancashire may arrange a revisit to check the progress of improvements. The report is available to the Care Quality Commission, Healthwatch England and any other relevant organisations.

General Information

The Sands Care Home has capacity for 97 residents; at the time of the visit there were 91 people residing at the home. Needs catered for range from independent residential through to those with advanced dementia/Alzheimer's and palliative care. Residents are located over four floors dependant on their needs. Services include round-the-clock care, hairdressing services, laundry services and various activities.

Acknowledgements

Healthwatch Lancashire would like to thank management, staff, residents and relatives, for making us feel welcome and for taking the time to speak to us during the visit.

Methodology

The Enter and View representatives made an announced visit on Tuesday June 4th, 2024 and received feedback from 7 residents, 2 relatives and 9 members of staff.

Healthwatch Lancashire obtain the views and experiences of residents, relatives, and staff. Conversations with each are adapted to capture individual experiences to help assess the quality of services.

Conversations with residents were structured around four themes (Environment, Care, Food and Activities). Conversations with staff included their experiences of staffing levels, support and training.

Relatives were asked to speak about their general experiences including how they feel about the service and if they feel involved and informed.

The Enter and View team also recorded their own observations on the environment and staff-member interactions. To retain confidentiality and anonymity of respondents, names, pronouns and any identifiable details have been removed from quotes.



Summary

An announced visit was carried out at The Sands Care Home, Morecambe, on Tuesday June 4th, 2024 10:00am -12:00pm. Healthwatch Lancashire representatives spoke with seven residents, nine members of staff and two relatives.

The care home has the capacity for 97 residents, at the time of the visit there were 91 people residing at the home.

The Sands Care Home is located in close proximity to local amenities enabling residents to have easy access to the local community. As the home is situated on the seafront residents are also able to easily access the promenade and beach.

The home is situated in a four storey building with differing levels of need on each floor

- **Keswick** - Ground floor: for those more independent
- **Grasmere** - First floor: general nursing care
- **Langdale** - Second floor: general nursing care and those with more complex needs
- **Derwent** - Third floor: for those with advanced dementia/Alzheimer's and palliative care, as well as Elderly Mental Health. Offices, a hairdressers salon and the laundry service were also located on the third floor.

Palliative care is provided at The Sands Care Home and this made up for a high percentage of the people currently residing at the home during the visit.

Each floor has a communal lounge, dining room, communal bathrooms, a nursing station and a small kitchen area; with meals being prepared on the third floor in the main kitchen and transported to the other floors at mealtimes.

During the visit some of the residents were utilising the communal areas, especially the dining rooms, whilst others had preferred to stay in their rooms.

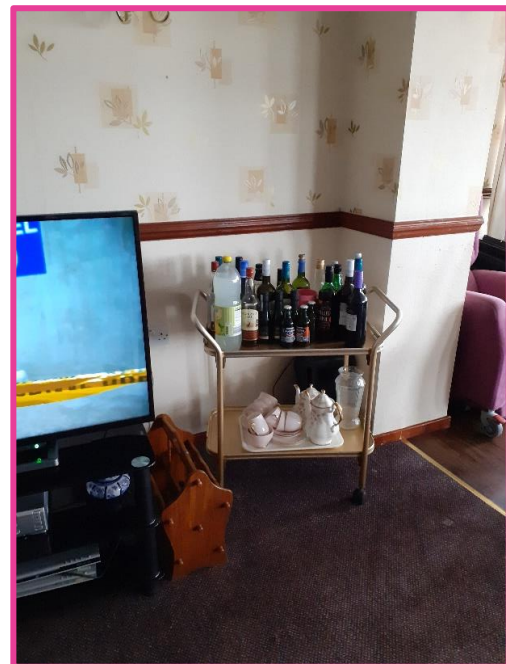
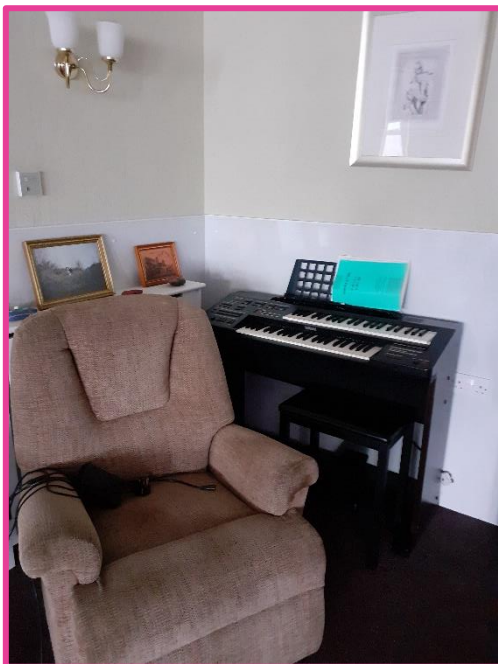
The residents appeared well cared for and safe, although they appeared subdued during the visit and in need of more stimuli by way of more activities and engagement with staff. Encouraging more residents out of their rooms would also enable new friendships to be formed and residents to feel more included in the day to day activities.

It was felt by Healthwatch Lancashire representatives that the care home environment would benefit from a more vibrant, stimulating appearance such as that demonstrated on the Derwent floor; and features which encourage memories and reminiscing are of great benefit to those who have advanced dementia/Alzheimer's. Good practice needs to be shared between the floors and there is a need for a more overall cohesiveness to the care home rather than four individual teams each having a different approach.

Residents were generally happy with their care and were praising of the staff; and observations showed them to be relaxed with staff and at ease within their environment. The majority of the residents remained in their chairs throughout the visit although some were observed moving round with support.

Feedback from relatives was positive, with good communication and care being talked about. Both relatives spoken with said that they would recommend the care home to others.

Staff were happy in their roles, felt well supported and that they had had sufficient training. The need for more activities was raised by several members of the team, as was more one to one time for residents who do not enjoy group activities. One staff member suggested monthly residents meetings to enable residents to be involved in their care. All staff members who provided feedback said that they would recommend the care home to a close relative or friend.



Enter and View observations

Pre-Visit and Location

The Sands team were found to be welcoming of a proposed visit; although it was disappointing that a pre-visit questionnaire sent in advance of the visit wasn't completed and returned as this allows for the Healthwatch Lancashire team to fully prepare for the visit. A poster announcing the Enter and View was sent in advance to notify residents and relatives of the visit but this wasn't utilised and which therefore reduced the opportunity for relatives to feed back to Healthwatch Lancashire.

The Sands Care Home Group website has a clear and easily found link to the individual care home site; overall the website is informative and easy to read with clear contact information. A Facebook page is used to keep relatives informed which showed photographs and videos of their loved ones carrying out activities, having visits from family etc.

The Sands Care Home is located on the seafront, to the north of Morecambe town centre. It was easy to find with good signage. A small car park was located to the rear of the home which was shared with neighbouring properties; there was also some street parking available along the seafront and down nearby side streets. An area of reserved space for pick/up drop offs was available in the car park; disabled car spaces were not observed.

Morecambe town centre is a 15-20 minute walk away; and there are good public transport links, with a bus stop directly outside the home.

The home is located within a four-storey stone building which is modern in appearance. On arrival the front exterior appeared well presented and maintained. To the rear of the property, adjacent to the carpark, was a small seating area with several benches and a small covered space. Two raised planters were also located in the outside space, although these appeared in need of additional plants in order to create a more pleasing environment for the residents when accessing this area.



The internal environment- First impressions

Access into the facility was via the main entrance on Marine Road East which led directly to the reception desk; although it should be noted that two of the Healthwatch Lancashire team entered via the rear entrance door leading from the car park and walked through the ground floor residents area unchallenged.

There was a visitor signing-in book which was located by the main entrance and Healthwatch Lancashire representatives were asked to sign in/out.

At the main entrance a small porch area led to the reception area where there was some informal seating. The reception desk faced the main entrance and reception staff were present throughout the visit greeting visitors as they entered the building.

Healthwatch Lancashire representatives were greeted warmly by the deputy manager who gave a tour of the home and explained the day-to-day running of services.

On the ground floor of the home were residents requiring minimal care and support, with those residents able to come and go freely. On each floor there were bedrooms, communal bathrooms, lounge areas, dining spaces and small kitchen areas, as well as a nursing station; with a large kitchen located on the third floor where the main meals were prepared.

A lift was available to all floors, and to access the lift a member of staff was required to use a key ensuring those with advanced dementia/Alzheimer's were unable to wander away from their floor. Visitors were assisted by staff to use the lift.

Stairs to all floors were available; fire evacuation chairs were located in the stair wells for in the event of an emergency. It should be noted that one of the fire evacuation chairs had fairy lights wrapped round it which is a health and safety concern should there be a need for quick access. Access doors to the stairs consisted of two handles which required simultaneous use in order to open the doors, and as the handles moved in different directions this prevented those with limited capacity to be able to be able to open the doors. It did concern Healthwatch Lancashire representatives that there could be delays in evacuation in the event of a fire as it could be confusing, however the deputy manager stated that a fire safety check had been carried out the week prior to the visit and the doors had been approved.



Offices were located on the third floor of the building which were accessed via the lift or stairs, along with a large kitchen where all the meals were prepared and then transported to each floor via the lift.

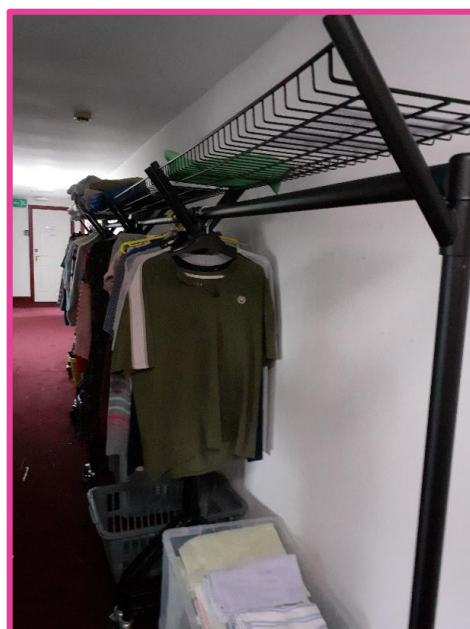
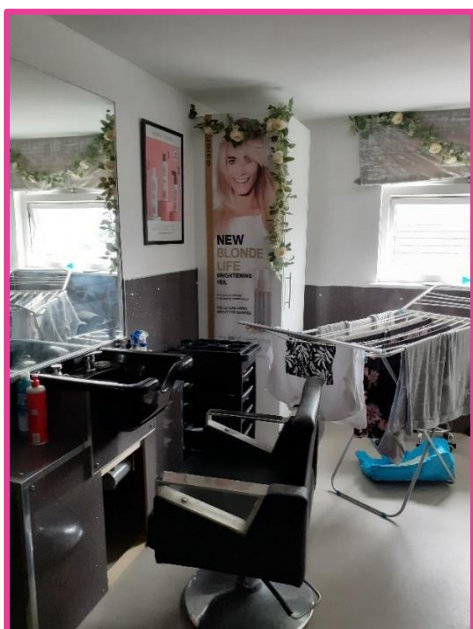
A laundry service for residents was also located on the third floor. Healthwatch Lancashire representatives asked how the laundry team kept track of the individual residents clothes and it was explained that the team use tags for each resident; however they were unable to find any on the clothing during the discussions. It is recommended that this is addressed to prevent residents wearing someone else's clothing, and therefore maintain individual resident dignity.

A hairdressers studio was located on the third floor with a hairdresser working in The Sands twice a week; residents were also able to get their nails done in the salon. The salon was closed at the time of the visit.

A call bell system was in place which enabled staff to respond to resident's needs; it was noted during the visit that these were going off for a length of time before staff responded, although it was unclear as to whether this was because staff were already caring for another resident or were slow to respond. The bell had quite a piercing sound and some residents appeared to find it unsettling.

At the time of the visit the deputy care home manager informed Healthwatch Lancashire representatives that there were no residents who were profoundly deaf or in need of interpreters.

When entering the care home Healthwatch Lancashire representatives observed a busy environment with some residents gathered in the lounges and dining rooms, few residents were observed moving about.



The observation of corridors, public toilets and bathrooms

The main hallways were well lit and suitably decorated; although they would benefit from handrails along some of the walls to aid those with limited mobility (*BS 8300-2:2018 Design of an accessible and inclusive built environment. Buildings - code of practice*).

Corridors were noted to be cluttered in places, with mobility equipment as well as boxes and cleaning equipment located throughout. It was also noted that a trolley for teas and coffees was left unattended with hot tea/coffee pots accessible for anyone with limited capacity who could potentially receive burns or scalds.



The deputy manager explained that none of the rooms had showers or baths so all residents used the communal bathrooms; these were large and with appropriate equipment to support residents when carrying out personal care. Emergency pull cords were seen to be in need of replacing due to being frayed/repared and in need of bangles (handles) and this was pointed out to the deputy manager at the time of the visit.

Some information was displayed along the corridors including activities and services, and one of the floors displayed photographs of residents and family/friends, although this appeared sparse. No compliments, comments or complaints forms were seen to be available during the visit in order to enable continual feedback from residents and/or relatives; discussion with the deputy manager identified that these were available on request from reception on the ground floor.

It was felt by Healthwatch Lancashire representatives that there was an inconsistency between the floors on what was displayed in corridors etc. dependant on the individual team preferences, with the Derwent floor appearing more personalised and visual compared to the others. It would be good to share good practice between teams and ensure that all communal areas have visual stimuli and are welcoming.

Some of the bedrooms had a photograph of the resident displayed outside their room to easily identify the occupant, although this wasn't consistent. It would be good for residents to personalise these more with things such as memory boxes where residents can more easily recognise their room, especially for those with more advanced dementia/Alzheimer's.

The home would benefit from more dementia friendly signage and features such as clocks as it was felt that these were lacking during the visit. It is recommended that a dementia audit is carried out by an appropriate person(s) to identify how the home could be made more accessible for those who may become confused or lack capacity.

During the visit Healthwatch Lancashire representatives noticed that some of the lights in the corridors were motion-sensored and were set to turn off very quickly; this was seen at times to be a frustration for both staff and relatives as they would

switch off whilst walking down a corridor or switch on and off whilst talking with others when stationary. As the care home is a large property it is understandable that energy costs need to be reduced wherever possible and it is a good sustainability practice; however it is recommended that the timers are set for longer to minimise risk for residents, relatives and staff as well as reducing the impact on the quality of the resident experience.



The lounges, dining and other public areas

Communal spaces were located on all floors with lounge areas and dining rooms allowing for residents to have a choice on where they sat and who they engaged with. At the time of the visit most residents observed were located in the dining rooms with only a small number utilising the lounges.

The lounges were spacious but seemed under-utilised, with some having minimal seating which was placed around the edges, this reduces social interaction between residents and it's recommended that layouts are looked at to see how the space can be used more effectively. Large screen TVs were in all the lounges but not all were switched on and only a very small number of residents were watching them. One of the lounges had an electric organ and on discussion with the deputy manager it was determined that residents can play this if they so choose. Seating types in the lounges was varied allowing for individual choice and needs. One of the lounges also had a drinks trolley which residents could use and it was felt that this added a homely touch.

The dining rooms were pleasantly set out with a café style layout which encouraged social interaction. The top dining room had a sign saying Bay View Café which added a personal touch, although this wasn't replicated with the other dining rooms. It was noted that some residents who were wheelchair users were placed along the wall of the dining room rather than at the tables, although it was unclear if this was due to personal preferences/needs or whether it was a

staff decision; it is recommended that social inclusion/interaction is encouraged and supported wherever possible.

It was observed that there were no visual images of the meal choices in order to help those who may not be able to comprehend a written menu. On discussion with the deputy management it was identified that this was something that they had previously done but that there had been issues with keeping the information up to date. However, it was felt by Healthwatch Lancashire representatives that this could be reinstated and updated daily so that residents who have limited or no capacity to understand a written menu can make informed choices.

Due to the fact that the home is on the seafront the cafes and lounges were located to the front of the building allowing residents good views across the bay and some residents were seen to be enjoying the view.

Overall The Sands Care Home appeared clean and well maintained; although there was the potential to make the communal spaces more vibrant and stimulating. Information on display was limited throughout the communal spaces and the walls appeared sparse and underutilised.



Observations of resident and staff interactions

At the time of the visit many residents were in their rooms, although by choice, necessity or staffing aspects is unknown. Most of the residents seen in the communal areas were observed to be sitting on their own and the atmosphere was subdued with little chatter.

The care home staff were observed to be friendly and approachable; and demonstrated good understanding of individual needs and person centred care. Residents appeared at ease with the staff team.

No activities were observed during the visit and staff were seen to be meeting needs rather than actively engaging with residents. There was an activities coordinator in post and there was some evidence that activities were being carried out. The residents spoken with were unclear as to what activities were occurring on the day of the visit, although this could be contributed to the fact that they have dementia/Alzheimer's. It is therefore recommended that there is more information regarding activities on display in strategic locations around the home so that both residents and relatives can easily see what is happening at any given time. Some research with residents and relatives would help identify further activities, and residents encouraged to participate in order to create a more stimulating environment.

Resident feedback

During the visit Healthwatch Lancashire representatives spoke with seven residents who were able to provide feedback. Observations were also used to gather further information about the resident experience.

Environment

All seven residents spoken with were satisfied with their environment, although one stated that they had issues with noise from other residents, and one stated that they don't have everything that they need but didn't elaborate further.

Observations showed that the care home was generally clean and in good repair, bedrooms were not observed.

"Everyone seems to get on ok"

Activities

Healthwatch Lancashire representatives saw very little information about upcoming activities displayed within the home nor observed any activities during the visit. Discussion with the deputy manager determined that there is a regular activities timetable with residents able to access the local community if they so choose.

Several residents spoke about making friends in the home, and one resident said that the hairdresser is very good.

Activities mentioned by residents included bingo, painting, walks along the promenade and watching TV. Several residents stated that there was no or limited

activities available. One resident stated that they don't enjoy some of the activities but that they can't think of anything else to do.

“Isn't a lot”

“There's no activities”

Care

All seven residents spoken with felt that their care is good, with staff being spoken about as friendly:

“Very good”

“Excellent care”

“Generally the people who run the place are lovely, staff are really nice...”

Observations showed staff to be providing person-centred care, and were respectful, friendly and appeared to know the residents well. Residents appeared at ease with staff and were seen to be supported to move around the home.

The home appeared sufficiently staffed and roles were seen to be clearly defined with staff wearing appropriate uniforms and name badges.

Call buttons were in place throughout the home in order for residents to call for support as/when needed; the bell was heard ringing for quite a while during the visit but staff response time was not observed.

Food

Overall residents were happy with the food and the choices on offer; all residents stated that they could have an alternative if they didn't wish to opt for what was on the menu that day. Two residents stated that they didn't know what was for lunch as they hadn't seen a menu and couldn't recall if they had requested anything in advance.

“Excellent food – all of it, I can't fault it”

“Very good indeed”

“Quite happy most of the time, sometimes not as good”

“It's ok, sometimes don't like it but get enough choice”

Other comments

One resident told Healthwatch Lancashire representatives that they had wanted to come to the home and that they wanted to stay there. Two residents commented that it is close to family so is easy for them to visit. Another resident stated that they are quite happy there:

“Wonderful place for me”

Relative feedback

During the visit Healthwatch Lancashire representatives observed relatives entering and leaving the home, and it was apparent that there are no restrictions on visiting times or length of visit. Staff were observed engaging with relatives and providing relevant information in a professional, friendly manner.

How do you feel about the service provided?

Two relatives spoke with Healthwatch Lancashire representatives at the time of the visit. The deputy manager informed Healthwatch Lancashire representatives that The Sands Care Home has recently created a relative support group on Facebook to support families of residents, although at the time of the report this wasn't visible to the Healthwatch Lancashire team and is therefore taken as being a private group so not visible to the general public.

Overall both relatives were satisfied with the service being provided:

“Seems very good, friendly”

“Really happy...”

One relative stated that the alarm bell goes off for quite a while and that their loved one can be startled by it. One relative talked about their frustration with the lighting as the lights were switching on and off during the conversation due to the short timers.

Do you feel that you are kept informed about your relative?

Both relatives felt that they were kept well informed about their loved one:

“Communication is good, they call me if there are any problems, I'm never kept in the dark... They notify me immediately if there's an incident”

“Answer any question asked”

Do you understand the process to make a complaint if you needed to?

One relative said that they wouldn't make a complaint, the other relative stated that they understood the process and would feel able to raise a complaint should the need arise.

No Compliments, Complaints and Comments forms were seen to be readily available for residents or relatives.

Are you aware of the social activities and feel able to join in with these?

One of the relatives spoken with explained that activities aren't relevant for their loved one due to the fact that they are in palliative care, the other relative felt that the activities provided were good.

Would you recommend this service to others?

Both relatives stated that they would recommend the service to others:

“Certainly”



“Staff always greet me and everyone's really friendly”



Staff feedback

During the visit Healthwatch Lancashire representatives observed staff carrying out various roles including care, administration and housekeeping. All were smartly dressed in appropriate clothing for their roles. Staff in caring roles were seen to have name badges. Staff were friendly and approachable and very welcoming to Healthwatch Lancashire representatives.

Nine members of care home staff provided feedback during the visit.

Overall the care home has a team of 111 staff including 3 clinicians who were assigned one to each of the three upstairs floors in order to deal effectively with resident's needs.

Do you feel you have enough staff when on duty?

Most of the staff felt that overall the care home was sufficiently staffed other than last minute sick leave; although two members of staff felt that there were regular occasions when staffing levels were lower than needed:

“Most of the time”

“Yes, unless there is last minute sickness which is unavoidable”

“Not all of the time”

One staff member commented that it is stressful when there is not enough staff on duty

Do you feel supported to carry out person centred care?

Overall the staff who worked directly with residents felt that they were able to carry out person centred care, although staffing levels clearly impacted on how much time could be spent with an individual resident:

“...it would be nice to have more time to chat with them”

“Mostly, certain residents require more time than others and I don’t always have time to give them”

“...mornings can be busy and it can sometimes feel rushed”

“Absolutely”

“Yes, when we’re fully staffed we have plenty of time”

Do you feel you have enough training to carry out your duties well?

All nine staff members felt they had sufficient training and were able to request further training if they felt that it would be beneficial. One staff member spoke about new staff shadowing experienced staff when starting work at the care home.

“Very much so”

Discussion with the deputy manager identified that all care staff are trained on hoists, the fire evacuation chairs and any/all other equipment needed to maintain resident safety.

Are you happy working within the care home?

All staff who provided feedback were positive about their experience working at The Sands Care Home, with support and friendliness of colleagues being raised as the main reasons for liking their work environment. Comments included:

“On the whole positive, a friendly environment”

“Love working here”

“My working experience here has been excellent”

“I am very happy here and love my job... have no intentions of leaving”

“All departments work well together by supporting each other. This results in a better, positive environment for our residents”

Would you be happy to recommend this care home to a close relative or friend?

All nine staff stated that they would recommend The Sands to a close relative or friend:

“...feel this is a lovely home and would definitely recommend it to close relatives”

“Yes I would definitely recommend our care home”

Are there any changes that can be made to improve the residents experience?

Three staff members discussed a need for further activities, including more one to one time for those residents who don't enjoy group activities:

“Maybe more things for them to do”

“More 1 on 1 time, some residents don't enjoy group activities”

One staff member suggested a regular meetings with residents so that they are fully included in decisions:

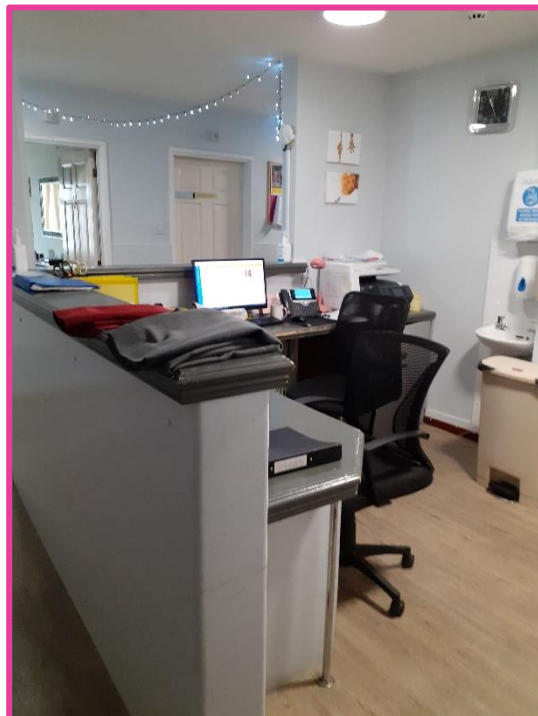
“Hold monthly meetings with resident group so that they may have a say and put forward any suggestions”

Other comments:

“We work in the residents home and respect them so much”

“We don't always have enough equipment for somethings”

“Our residents are listened to and cared for”



Recommendations

The following recommendations have been formulated based on observations of the environment and feedback gathered from residents, relatives and staff.

1. Ensure the building is secure and keep the door from the carpark locked, direct visitors from the carpark to the main entrance which is observed by reception staff to ensure residents safety
2. Look at creating a more stimulating environment for residents, including adding interest to the communal spaces, more activities, and making lounges more inviting to encourage residents out of their rooms and reduce social isolation
3. Include residents in decision making by holding regular residents meetings; also encourage relatives to be involved by holding regular relative meetings where good practice, concerns and suggestions can be raised and discussed
4. Carry out a dementia friendly audit to identify where improvements can be made in order to reduce resident confusion and maintain independence as much as possible
5. Share good practice between floors so that there is a consistency in services
6. Display more information for residents such as around activities and meal options, reintroduce pictorial menus for residents and ensure it is updated daily
7. Look at health and safety around corridors and ensure communal spaces are kept free from clutter and hazards such as unattended tea/coffee pots, review lighting timers, ensure fire evacuation chairs are quickly accessible
8. Identify and address accessibility needs including handrails in corridors and red emergency pull cords in bathrooms, consider how information is provided for those with visual impairments; this could be done as an accessibility audit possibly with appropriate person(s) with lived experience <https://app.croneri.co.uk/topics/disabled-access-and-mobility-care-home/indepth?product=134>
9. Look at current laundry practices to ensure all residents have the correct garments returned in order to maintain resident dignity

Provider response

Recommendation	Action from provider	Timeframe	Comments
Safeguarding - ensure the building is secure to maintain resident safety	There are signs on the door to keep it closed	Immediate	We will keep reminding staff
Environment - look at creating a more stimulating environment for residents	On the 2 nursing units there is a redecoration programme starting 15/07/24	ongoing	
Decision Making - include residents/relatives in decision making by holding regular residents/relatives meetings	There are monthly meetings happening already the first relative meeting was held but no-one attended	immediate	
Dementia Friendly - carry out a dementia friendly audit to identify where improvements can be made	Alzheimer audit done 10/07/24		3 glass doors on Derwent need transfer so that residents can see them Red toilet seats ordered 10/07/24
Sharing Good Practice - share good practice between floors	Good practice is shared and the clinical leads coordinate this		
Communication - display more information for residents such as around activities and meal options, reintroduce pictorial menus for residents	A new menu is being sorted on the iPad, work started 12/07/24	Will take about a month	As above
Health and Safety - ensure communal spaces are kept free from clutter and hazards, review lighting timers, ensure fire evacuation chairs are quickly accessible.	Keep the hazards to a minimum		Electrician has replaced the faulty lights 11/07/2024 Note from Healthwatch Lancashire: Fire evacuation chair - The Sands have provided a picture of the chair without fairy lights attached. Please see picture below
Accessibility - identify and address accessibility needs including handrails	There are handrails on Keswick. The nursing units were		We put the aqua board which means they can just be wiped down. There are very few people that even

in corridors and red emergency pull cords in bathrooms, consider how information is provided for those with visual impairments	removed after IPC (<i>infection prevention and control</i>) visit. The IPC have inspected and approved.		walk and no one without a frame on the 2 general nursing units. There are handrails on the residential suite.
Services - Look at current laundry practices to ensure all residents have the correct garments returned			

The Sands Care Home provided further comments regarding the content of some of the report:

- *The Laundry Service – All the laundry is washed so that reduces the instance of clothes getting lost. Each resident has name buttons ordered when they come in. I do the order when I have accepted them and they come the next day. When the resident comes in the staff on the floor put the name buttons in the clothes so cannot understand why the name buttons were not in on that day. On making enquiries the Keswick staff had run out of buttons and not requested any more. This has been rectified*
- *The salon- The photo you have of our hairdressers has drying on it. Some of the clothes a resident has will not go in the dryer and therefore will need to be dried in a clean area. The salon was not in use that day so they were drying. I have included nicer pictures to show something that we are proud of (see below). The time the residents spend up here is important. They can have a cup of tea or even something stronger. The staff like to make an effort on their birthdays and will bring them up for a pamper. Martyn our hairdresser (The Singing Hairdresser) is entertainment himself. The nail bar is portable and can be moved around the home if they want their nails done elsewhere*
- *Menu choices - We do not have printed menus on the units (Except on special occasions such as Christmas). We now intend to photograph all options and put the menus on the tablets. Although we do not seem to have any problems at the moment but have taken on board that people with sensory difficulties could benefit from this*
- *Resident photos- all of the floors display the residents photo on the side of the door. The empty rooms however would not have one*
- *Seating for residents- Seating in the lounges varies as to the needs of the residents, most resident have a needs for specialist seating usually on wheels, this is in the*

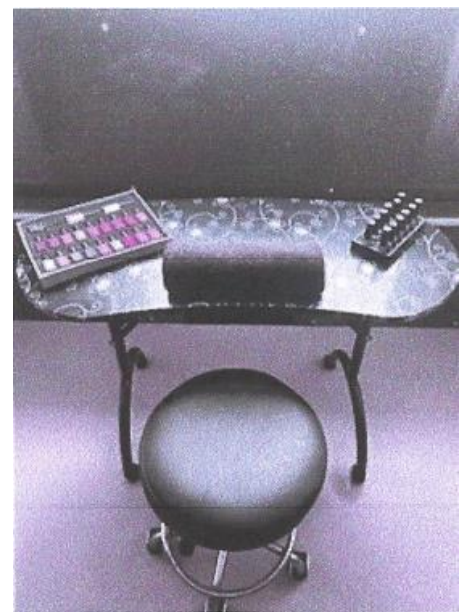
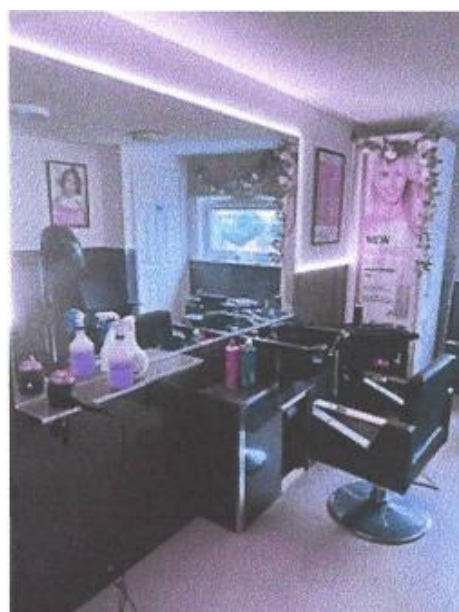
residents room, but can be pushed out if they want to sit in the lounge or the dining room

- *Activities – we have taken on board what was said and evidencing what we do is done mainly on our social media page. We will discuss in our regular meetings with Sam the ways in which we can ensure people know what he is doing*
- *Comments, compliments and complaints – the report repeated that these were not readily available in the home. These are held on reception and can easily be obtained on request. We were advised during Covid to remove these from the units whilst making required IPC changes. Our Shining Star referral forms (for recognising employee actions) are available at the back door.*



Photograph of fire evacuation chair provided by The Sands Care Home as part of the Provider Response

Photographs of the salon provided by The Sands Care Home as part of the Provider Response





healthwatch
Lancashire

Healthwatch Lancashire
Leyland House
Lancashire Business Park
Centurion Way
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