



Care and Extra Care Housing

Enter and View REPORT

Monica Court

Scheme Contact Details:

Monica Court
Half Edge Lane
Ellesmere Park
Eccles
M30 9AR

Date of Visit:

Monday 13th August 2018

Healthwatch Salford Authorised Representatives:

- Safia Griffin
- Mark Lupton
- Phil Morgan
- Vania Burnell
- Ruth Malkin



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1.1 Introduction

Extra Care Housing (the model of Extra Care)

Extra care housing schemes are self-contained flats within a communal housing scheme that enable older people over 55, and others who require extra support, to continue to live independently with flexible support and the security of 24/7 emergency response and care from on-site staff.

Extra Care is defined by having 24-hour care presence in the building to meet the care and housing support needs of tenants in the scheme. Extra Care housing is often classed as independent living with some supported living, like the mid-day meal being provided as part of the tenancy. Support is tailored to the needs of the individual, as part of their care package, to enable people to live in their own home as independently as possible.

Schemes incorporate community-based facilities and visits by professionals from the community i.e. communal spaces and facilities such as an activities room, hairdresser, restaurant/dining area, visiting priest for a monthly service and others.

All properties are self-contained with a fitted kitchen, bathroom with walk in shower [*level access wet-room*], one or two bedrooms, a lounge and their own front door.

Extra care housing schemes operate under a model of having a third of tenants with high care needs, a third with medium care needs and a third with low care needs. As people age sometimes their care needs increase and they are reassessed by social services to ensure it is still appropriate and safe for them to stay on at the scheme. Although 'a home for life' is encouraged sometimes this can lead to more than a third of people living at the scheme with high care needs, which requires more staff time and care.

The size and model of Extra Care varies across Salford. Some are purpose built schemes and others have been converted from other types of housing. In some schemes the housing provider is responsible for activities and in others it is the care provider. As well as variation in contract specification and models, schemes are also shaped by their size and layout and what resources they have available.

Healthwatch Salford

Healthwatch Salford is the independent consumer champion for children, young people and adults who use health and social care services in the city of Salford.

Healthwatch Salford:

- Provides people with information and support about local health and social care services
- Listens to the views and experiences of local people about the way health and social care services are commissioned and delivered
- Uses views and experiences to improve the way services are designed and delivered
- Influences how services are set up and commissioned by having a seat on the local Health and Wellbeing Board
- Passes information and recommendations to Healthwatch England and Care Quality Commission



Healthwatch Salford have statutory powers that enable local laypeople to influence Health and Social Care services under the Health and Social Care Act 2012. One of these statutory powers is to undertake Enter and View visits of publicly funded adult Health or Social Care premises. The Health and Social Care Act allows local Healthwatch Authorised Representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies.

Enter and View visits are undertaken when Healthwatch Salford wants to address an issue of specific interest or concern. These visits give our trained Authorised Enter and View Representatives the opportunity to find out about the quality of services and obtain the views of the people using those services.

Healthwatch Salford also produces reports about services visited and makes recommendations for action where there are areas for improvement. Information gathered and reported on is referenced against information from health and social care providers, commissioners as well as national and local research sources.

1.2 Acknowledgements

Healthwatch Salford would like to thank the Monica Court scheme staff team, tenants and relatives for their contribution to the Enter and View visit. Healthwatch Salford would also like to thank the landlord and care management for their time and involvement in the preparation for the visit.

1.3 Disclaimer

Please note that this report relates to findings observed on a specific date. Our report is not a representative portrayal of the experiences of all tenants, relatives and staff, only an account of what was observed and contributed at the time.

Some of the tenants spoken to had some difficulties recalling the days' events, such as what they had for breakfast and what activities there are and took part in and this has been factored into how and what is reported from the survey data.



2.1 Visit Details

Care Service Provider:	Comfort Call Ltd
Housing Provider	City West
Scheme Address:	Monica Court, Half Edge Lane, Ellesmere Park, Eccles, M30 9AR
Visit Date and Time:	Monday 13 th August 2018, 13pm-16pm
Authorised Representatives:	Safia Griffin Mark Lupton Phil Morgan Vania Burnell Ruth Malkin
Healthwatch Salford Contact Details:	The Old Town Hall, 5 Irwell Place, Eccles M30 0FN Email: feedback@healthwatchsalford.co.uk Telephone Number: 0330 355 0300 Website: www.healthwatchsalford.co.uk

2.2 The Care Provider

See Care Quality Commission* (CQC) website to see their latest report on Monica Court.

** Care Quality Commission is responsible for the registration and inspection of social care services in England.*

Comfort Call work with the housing provider and local authority to offer a home for life. Together we aim to ensure we promote independence safely and we adapt our ways of working to suit the individual. We always aim for the least restrictive option and explore all avenues before the need to explore different placements are discussed.

Comfort Call provide for a range of care needs which include; Personal Care, Low, Medium and High level care needs, Meal preparation, Medication administration, Domestic tasks, Shopping Tasks, Background support, Escorting within the scheme, Emotional support

Current shift patterns are; 7am-1pm, 7am-1pm, 7am-2pm, 7-2pm, 8am-5pm, 1pm-6:30pm, 5pm-10pm, 5pm-10pm, 10pm- 8am. Our shift patterns match the needs of the service, taking into account the increase in many high levels needs.

Comfort Call recruitment is currently ongoing. We have 13 staff permanently placed at the scheme. Comfort Call have a robust recruitment process in place which includes a pre-screen, a selection process including interview and basic numeracy and literacy tests, DBS application and 2



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suitable references. Once staff are successful following the interview process they are placed on a five day Training Programme.

Comfort Calls Branch Structure currently includes a full time Care Coordinator onsite Monday to Friday. Comfort Call have a Scheme Manager who visits the scheme regularly and leads on all team meetings. Comfort Call have a Regional Manager and Regional Director.

Comfort Call have different communication methods used within the scheme and outside professionals, these include;

- Team Meetings
- Housing Meetings
- Tenants Meetings
- Monitoring Meetings with the Commissioners
- Quality Assurance Visits
- Annual Internal Surveys
- Annual Reviews with the Commissioners
- Email interaction with families

The Housing Provider is invited to the Care Providers team meeting.

Both Comfort Call and the housing provider meet regularly to work effectively, promoting partnership working. Weekly meetings are held with the coordinators, monthly meetings with the Management and Regional Managers meet quarterly. We have an effective partnership and we share good practice and ideas. We promote this partnership within the care team and this has improved over the last year.

Comfort Call work with families, ensuring regular and good communication both ways. Any issues or concerns are dealt with promptly and we work hard to ensure any changes are implemented where required.

We have effective professional relationships with outside agencies and we take responsibility to refer to these professionals such as;

- Bladder and Bowel Team
- Community Mental Health
- Community Dentist
- Chiropody
- Falls team
- Occupational Therapists
- SALT (speech and language therapy)
- Dietician

Comfort Call go above and beyond their care role. We are often faced with challenges which we work together to resolve. We are currently dealing with a high increase in tenants living with dementia which is proving difficult to manage due to the independent setting. Care staff act quickly to ensure the tenants are safe and this can sometimes impact on the allocated calls.

Comfort Call assist with ad-hoc tasks which are not necessarily part of an individual's support plan. We recognise the need for further support quite early on and ensure we input this support rather than wait for a re-assessment. This has proved successful on many occasions, as with this early intervention many individuals have been enabled to maintain their independence and remain at the scheme.



2.3 The Extra Care Scheme Housing Landlord

City West Housing Trust is committed to improving lives through their Extra Care offer. They work hard to engage and involve their tenants as much as possible to ensure that they continue to live happy, healthy lives and remain living independently in their own homes for as long as possible.

The Monica Court scheme comprises of 47 private one-bedroom apartments designed for Independent living. With access to care and support 24 hours a day and regular housing management support the scheme also offers a wide range of events and activities helping to maintain and improve health and wellbeing.

City West has one staff member who works across Monica Court and Astley Court, spending one day a week in each of these schemes. In addition to this, the Extra Care Scheme Management Officer has overarching responsibilities across the schemes and has a regular hourly drop-in once a week that is advertised to tenants and their families. City West has recently recruited a new post of Community Wellbeing Officer to work with the care provider to develop engagement and activities across the schemes they manage.

Cooked meals are prepared offsite and provided by Appetito and delivered and heated at Monica Court for the mid-day communal meal in the dining room and menus are agreed in advance.

The four Extra Care City West schemes are:

- Monica Court, in Eccles
- Astley Court, in Irlam
- Amblecote Gardens, in Little Hulton
- Bourke Gardens, in Walkden



2.4 Purpose and Objectives

Rationale - purpose of Enter and View programme into Extra Care Housing

- The care provided is regulated by the Care Quality Commission (CQC) but the facility itself is not inspected
- Commissioners are in the process of reviewing these schemes and our engagement would provide an opportunity for the voice of tenants to be heard more fully in this process
- Healthwatch Salford wants to understand how care is experienced by tenants and dignity and choice is maintained within an extra care housing scheme
- Little is known about whether schemes of this type support the reduction of social isolation and loneliness and/or promote social interaction
- To assess whether communication is fully accessible for tenants

Objectives

- To assess the impact of the variation in care, as rated by the CQC, on tenants
- To evaluate the capacity of Extra Care housing to reduce indicators of loneliness and social isolation
- To capture and share areas of good practice and examples of where things are working and rated more highly by tenants, family and care staff
- To determine whether communication is being conducted effectively
- To recommend areas for improvement

The context

There is a shift across national and local health and social care services to renegotiate the relationship between healthcare and the service user. A change in relationship to enable more independence and allow people to take back control and responsibility for their own health and care. The model of Extra Care, if effectively run and resourced, should fit well into this new model of reablement, independence and personal responsibility. For details of this see Salford's locality plan, ['Start well. Live well. Age well.'](#)

However, like with other parts of the social care system there are challenges to operating this model both from an operational point of view and tensions from service user expectations when renegotiating responsibility of care.

Healthwatch Salford is interested in the tenant's perspective of Extra Care and if this model enables and provides wellbeing, social inclusion through activities, appropriate communication and levels of care. Through a programme of Enter and View visits into the six schemes in Salford Healthwatch Salford will engage with tenants, staff, relatives and landlords to explore and review these key areas.



3. Methodology

The project

This programme of Enter and Views is focused on the Extra Care Housing scheme context and the care providers who deliver care in these settings in Salford. The two providers operating in Salford in the Extra Care Housing schemes are Comfort Call and Care Watch.

All six Extra Care Housing Schemes will be visited:

1. Amblecote Gardens in Little Hulton – managed by City West Housing Trust
2. Astley Court in Irlam – managed by City West Housing Trust
3. Bourke Gardens in Walkden - managed by City West Housing Trust
4. Monica Court in Eccles – managed by City West Housing Trust
5. Moores House in Claremont and Weaste – managed by the Retail Trust
6. Mount Carmel in Ordsall – managed by St Vincent's Housing Association (Mosscares)

Due to the cross-over of some responsibilities in some schemes and variation in Extra Care models and because the care is being provided within a scheme that is managed by another company (the landlord), both the care provider and landlord, where relevant, will be reported on in this report.

Healthwatch Salford staff met with the three Extra Care landlords and care provider Comfort Call at the end of June to discuss this programme of Enter and Views and their involvement in this.

After this first meeting a three-way meeting at each of the schemes was arranged between Healthwatch Salford, the housing manager and the care manager and care coordinator. Where visit dates were confirmed and the Enter and View process was discussed in more detail.

All visit dates were announced and pre-arranged with both the landlord and the care provider.

The Project steps:

- Meet with commissioners and local CQC officer to brief on intention to Enter and View Extra Care Housing schemes and the care providers
- Commissioners to introduce Healthwatch Salford to the scheme and care managers to gain the full cooperation of the providers in this Enter and View process
- Project lead to meet and brief scheme and care managers
- Project lead to get information about tenant meetings and other communal meetings to coincide with Enter and View to survey residents and undertake observations
- Conduct visits and write reports within a 6-week turnaround

Timeline:

- June - Commissioner and CQC meeting
- July – meetings with scheme and care managers
- August-September - Enter and View visits
- October – Enter and View reports and report summary
- November – Presentations and commissioner meetings
- December-January - Follow-up meetings / telephone calls to review recommendations based on the visits



The visit

This was an announced Enter and View visit to Monica Court. The Enter and View visit date was arranged around a communal tenant meeting and staff meetings at the scheme.

Due to the nature of Extra Care Housing, both the care provider and the housing provider were involved in the Enter and View visit, with staff from both the care and the housing provider being surveyed.

At this scheme the following groups and number of people were surveyed.

- Tenants x 6
- Care staff x 6
- Housing staff x 2
- Relatives x 4
- Care Coordinator x 1

Survey questions were written to assess:

- the effectiveness and responsiveness of communication from the provider to the tenant
- provision of social activity within the schemes, with a focus on social inclusion
- the quality and type of care provided

A proportion of the visit was also observational, involving the authorised representatives walking around the public/communal areas and observing the surroundings, using their senses and a checklist prepared for this purpose.

Some staff referred to people as residents and others tenants. For consistency in terminology the word, 'tenant' will be used throughout this report.

When wording is included in square brackets [] it has been added by Healthwatch Salford for clarification.



4. Summary of key findings

The tenants we spoke to mentioned that they felt safe, with many responding positively about the scheme and stating that they did feel like their care needs were being met and that carers knew them, *“all [staff] very nice. Treated with dignity”* but with one being more negative, *“promises not kept. Windows not cleaned. Treated like children.”*

The activities were the responsibility of the care provider at Monica Court, with staff sometimes struggling to provide care *and* activities when care needed to be prioritised. Some tenants had high care needs and mobility issues that meant that they weren't always able to fully take part in activities or be as independent as they once were, before they lived at the scheme and their health declined.

Food and mealtimes were an important topic for tenants and there was some dissatisfaction about having to decide a menu choice a month in advance, with some tenants often forgetting what they had chosen. Although there were mixed comments about the food itself, staff we spoke to stated that most tenants had hearty appetites and often cleared their plates.

The tenant meeting was well attended and tenants were vocal. There was some issue with communication and responses from City West stated by tenants, this seemed especially an issue for tenants when City West didn't attend these meetings or feed back about important points.



5. Results of the visit

Environment

Monica Court is a multi-storey housing scheme with 47 one-bedroom flats. The scheme has:

- Activity room / lounge
- Laundry facilities
- Dining room
- Hairdressing room
- Garden and conservatory
- Assisted bathing facility
- Car park
- Wide corridors
- Step free access into the building

The scheme was light and clean throughout apart from some carpets in the corridors and dining room, which needed a deep clean or replacing. The dining room was a big room with pleasant seating and table settings, but the carpet was very stained and appeared beyond the ability to clean to remove all stains. This detracted from the nice feel of the room and the impression of cleanliness.

The lounge led onto a conservatory and then gardens, which seemed to be enjoyed by the tenants.

There were two lifts on either side of the building and staff were asked not to use the lifts after 10pm.

There was no smoking shelter. Several tenants we spoke to and at the tenant meeting we observed smoking was mentioned as an issue, with many saying that smoke was leaking into their flats if they had their windows open. The Enter and View team also observed that when people smoked just outside the conservatory smoke smelt in the conservatory and lounge, potentially making sitting in this area unpleasant for non-smokers.

Signage appeared minimal and plain, with little to no directional signage. The flat doors and door numbers were both white, making the numbers almost invisible and not dementia friendly.

Overall, the scheme had a pleasant, welcoming and homely feel.

6 Tenants - Survey Feedback

• Activities

Tenants were aware of the different activities going on at the scheme, with most saying that they found it easy to join in with social activities, like;

- Quizzes
- Dominos
- Primary school children visits
- Hip and heart exercises
- Monthly keep fit
- Films
- Bingo
- Gardening club



- Church service

However, when asked if they were still able to do the things that they used to enjoy before coming to live at the scheme tenant responses were less positive;

- *“a lot of sitting and waiting for interaction”*
- *“limited by disability”*
- *“not really”*

Some tenants did not seem to recall being asked about what social activities they would like to do or see organised. Tenants also did not recall being encouraged to plan and run their own activities, even though Healthwatch Salford had been present during the tenant meeting and there was some discussion around activities.

Tenants said they would like to see more physically active and exercise type activities and visits by therapy animals.

- **Wellbeing**

Two questions were asked to understand people's general levels and sense of wellbeing;

1. Do you feel happy here?
2. Has living in an extra care scheme been of benefit to you and your health?

Half of responses were positive about being happy, others were mixed, *“yes at times. Care team very helpful and approachable, though very busy,”* with some expressing some isolation, *“cannot get out, like my friend”* and *“Came here with husband, now deceased”*.

Several people expressed positive comments about living in an extra care scheme, *“on the whole yes. Good for company, in my room feel a bit lonely,”* and *“feel very safe,”* and *“better than the home.”*

- **Care needs**

Tenants did feel like their care needs were being met and that carers did know them, with one stating that they didn't have any care needs so couldn't comment.

Tenants on the whole did express that they were able to retain independence, while receiving some support for things like showering, medication and cleaning.

- **Food and mealtimes**

Tenants were encouraged to attend communal mealtimes, with one stating that they didn't eat at the scheme. Though responses about the number of communal mealtimes and quality of food were mixed, *“happy with [number of] meals. Edible. I ask for meal choice on the day,”* and *“don't like the food, wouldn't eat it,”* and *“make my own breakfast. Happy with dinner.”* What did come out from conversations was some dissatisfaction with having to decide on meal choices a month in advance and many then forgetting what they had chosen and some being unhappy with what they were presented with on the day.

[Meals were prepared offsite by Appetito and delivered to the scheme every day to be heated and served, so menu choices had to be decided on in advance but if there was enough food people could have a different choice on the day].

The monthly food plan and a menu board was on display for tenants to check what was ordered and to remind them of what was going to be served on the day.



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There were no drink or water machines at the scheme, but staff did serve jugs of water and juice and prepared hot drinks regularly and the Enter and View team were told that a tea trolley is taken round. One of the Enter and View team did observe a less mobile tenant asking repeatedly for a cup of tea, indicating that at busy times there could be a delay in staff responding and carrying out such requests.

- **Staff**

When tenants were asked if they knew who the care coordinator was, there was some confusion on who this was. With only one person mentioning them by name and that they did know them.

Most tenants stated that staff did treat them with dignity and respect, “*all of them very nice,*” with one person stating that they felt like they were treated like a child.

- **Communication**

Tenants seemed confident in approaching the office and staff if they wanted to speak to the Care Coordinator. No one spoken to had made any complaints about their care but all expressed confidence that they could speak to someone senior or speak to the Care Coordinator if they did have a complaint.

None of the tenants spoken to had any wish to change anything about their care and when there were changes made by the care provider they are spoken to on a 1-2-1 and relevant changes are also announced and discussed at tenant meetings.

Tenants were asked about how they would like to receive information and feedback and were given these choices;

- Newsletter
- Noticeboard
- Flyer through the door
- In care review
- Tannoy [*no tannoy system in the scheme but each tenant has an intercom in their flat*]
- Tenant meetings
- Private letter
- In person

Some tenants chose not to answer this question but those that did mentioned, newsletters, flyer through the door, through tenant meetings, in a private letter and in person. No one mentioned noticeboards.

Tenant meetings were organised by the care provider and 5 of the 6 tenants spoken to said that they were both aware of tenant meetings and attended, finding the meetings useful. Although often things came up at the meetings that were to do with the housing landlord City West and sometimes there were no City West housing staff in attendance [or so tenants assumed], so feedback and responses were sometimes delayed and not always fed back to tenants. An example of this was the decision on and the organising of window cleaners for tenant flats that had come up some months ago and that tenants stated they were still waiting on.

- **General questions and responses**

The tenants spoken to were asked how long they had lived at the scheme with one having lived there 15 years, one 8, one 5 years and with 3 tenants having lived there under 12 months.

When asked if they felt enabled to stay on at the scheme as their care needs changed 4 tenants said yes, with 2 not responding to the question. 2 tenants were positive about the scheme being a



home for life for them, with two finding it difficult to answer the question, *"difficult to answer. I'm comfortable in the evenings. Feel safe."*

Is there anything else you would like to tell us [Healthwatch Salford]?

- *"[there are] people around to talk to"*
- *"Wait a lifetime to get a job done by City West"*
- *"Very content"*
- *"Bedroom tidy and sheets changed"*
- *"Promises not kept. Windows not cleaned. Treated like children"*

4 Relatives - Survey Feedback

• Activities

Relatives stated that staff tried very hard but with no activities coordinator or funding, activities were limited and sometimes there was nothing for their family member to do, *"not enough to cater for tenants. There is a pool table, but it is not level,"* and *"armchair exercises are not regular. My mum is nearly blind, so bingo is no use and quizzes are too hard and questions not always appropriate"*.

When asked, relatives said that they weren't happy with the range of activities and that there should be more 1-2-1 activities provided. Tenants needed to be more active and encouraged to be more energetic. One relative stated that they understood the issues around running activities, especially with the range of abilities and suggested that maybe activities could be split.

Relatives said that they had been asked about their family member's interests and wishes around activities but knew that there were difficulties, *"people think everyone wants to do the same activities. There is unmet need. Adapt the care to the person"*, and *"what is needed is someone to jolly them along. Often mum had built up anticipation to an activity and then after 10 minutes staff were called away. She was very disappointed and didn't look forward to things as much."*

Relatives were asked if they felt able to make suggestions or comments about the activities that might benefit their family member and responses were mixed, with some saying yes and some no.

Relatives said that their family members had been able to maintain contacts or interests outside of the scheme but with one relative stating yes until their family member's health had deteriorated and that without family no, they wouldn't have been able to, only with family were they able to do so.

• Care needs

All the relatives spoken to were positive that their family member's care needs were being fully met, that they could go away and would always be informed if anything happened, *"very happy with care."*

As far as possible relatives thought that living in an extra care scheme enabled their family member's independence, with one relative stating, *"staff went the extra mile. She [the mum] is known as an independent person."*

Responses were positive, but with some reservations also, to if care staff knew their family members life history, personality and health and care needs, *"yes, very well. Both personally and*



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[their] care needs,” and “yes but not sure for others. I don’t feel that staff have the time. At night there is only 1 carer [onsite]”.

Relatives did think that staff had the time and skills to care for their family member, “*yes. Staff check in often. Mum liked staff to be prompt. Night staff were caring as far as they could be. It would be the same person [as routine needed by the mum],*” but one relative did have some concerns about security, “*security is a worry. Only one button to get in and out.*”

Relative’s family members all received some support for mealtimes, like staff helping with breakfast in the flat or escorting them downstairs to the dining room. One relative did make some comments about dining room standards, expressing a wish for standards to be improved, “*cutlery and crockery all mismatched.*”

- **Staff**

Relatives didn’t seem able to name the Care Coordinator but seemed happy with the care, “*all good, can’t fault them,*” and stated that staff were friendly and helpful, “*yes, [we] trust them.*”

In response to the question about if all staff treated their family member with dignity and respect all relatives stated yes, “*helpful, kind, proactive and understanding,*” and “*Yes. Mum went to hospital three times, each time the scheme took her back and provided higher care,*” demonstrating the ability of the scheme to adapt to changing care need.

- **Communication**

Relatives did feel that they were a welcome participant in the life of the scheme, “*welcome to sit in reception. Staff talk to you, ask if mum is okay.*”

When asked in what ways they or their family member could have a say or give feedback about the care provided relatives stated, “*I can go straight to the manager or speak to care staff,*” and “*we’re invited to meetings. Mum got surveys about the care and if any suggestions they will always take them onboard.*”

Relatives did know how to make a complaint if they felt that they had to, with two relatives doing so. All issues were resolved to their satisfaction. All relatives felt confident to make a complaint and that it would be dealt with appropriately.

- **General questions and responses**

Is there anything else you would like to tell us [Healthwatch Salford]?

- “*should be some joint training between care organisation and landlord. Who does what with families.*”
- “*not dementia friendly.*”
- “*flats not individually controlled temperatures. They are boiling.*”
- “*needs an activities coordinator shared between all the schemes.*”
- “*wonderful*”.
- “*yes. We would recommend the scheme. [relative] lived in the scheme for 3 years. Settled, liked the flat, big enough for her and her stuff. Was close for family to travel to.*”

City West – 2 Housing Staff Survey Feedback

Q) How long have you worked here?

1 and a half months.

3 months.



Q) What is your role?

Extra Care Housing Officer.

Community Wellbeing Officer. *[This was a new post funded by City West to promote wellbeing and organise more activities across the four schemes owned by City West; Monica Court, Astley Court, Amblecote Gardens and Bourke Gardens. They would be splitting their time between these schemes.]*

Q) What do you enjoy about your role?

Making a difference, working with people.

Enjoys speaking to the tenants and listening to their outlook on life. Also enjoys getting involved in activities with the tenants.

- **Activities**

When asked who they thought was responsible for social activities both staff were clear on the responsibilities of the care provider and landlord, with one going on to explain, *“everybody has a role, we work as a team”*.

Activities weren't currently linked to care plans but, *“they will be. We will be working to find dementia friendly activities.”*

Both staff stated that they reminded and encouraged tenants join in with activities. In response to the question about supporting tenants with dementia or sensory impairment etc to take part in activities one responded, *“1-2-1 approach and engaging them. Encourage through chatting to them.”*

Staff tried to involve tenants in developing and running activities through speaking to them and encouraging them to attend and do things they liked. The Wellbeing Officer as part of their role would be taking more of an active approach to develop this area, starting with a questionnaire and arranging a meet and greet in September.

- **Religion and culture**

Staff were aware that a local priest visits the scheme regularly for singing and felt that City West was an inclusive organisation. While the Enter and View team were at the scheme they saw a woman lead some tenants in singing hymns.

- **Communication**

Staff stated that City West communicates changes to service provision to tenants and family through a variety of means such as noticeboards, leaflets, tenant meetings, private letters and talking to tenants.

They also stated that City West tries to involve and gather feedback through a variety of ways, mainly through the channels mentioned above.

- **Staff involvement and support**

Both felt that staff were encouraged to give feedback, to develop skills and training and were supported well by housing management, *“management encourages communication from all staff members...”*



Comfort Call - 6 Care Staff Survey Feedback

- **Questions about the staff**

Staff had worked for Comfort Call from 2 to 7 years.

Staff roles were care worker and senior carers.

Staff enjoyed different things about their job including;

- *"Interaction."*
- *"Tenants – making you lough."*
- *"Communication, activities and social interaction. You see different people and get to know them."*
- *"Enjoy it all. Not planning on going. Good teamwork. I get on with the tenants."*

- **Activities**

When asked who they thought was responsible for social activities care staff said that they were and went onto say, *"everyone is but more the care provider,"* and *"staff get involved."*

Currently activities were not really linked to care plans, in some but not others. Some plans did note if people wanted more encouraging or reminding over the intercom or face to face. Mainly sheets are printed out and put on the board and tenants sign up if they want to join.

Support and encouragement were given to people with additional needs such as dementia or sensory impairment, with staff members also stating that it could be challenging sometimes, *"supporting for mobility can be often challenging but we still encourage,"* and *"we encourage them and look at adapting the activity itself."*

Responses varied to the question of how tenants are involved in developing and running activities and if they were. Some staff said that they asked tenants regularly and others stated that City West try and support tenants to organise their own trips and that there used to be a knitting club, but it doesn't meet regularly. Staff seemed to believe that tenants preferred activities to be organised for them and that sometimes groups just stopped meeting, especially if the organiser moved on.

Staff also wanted to know why some tenants don't take part in activities or come down out of their flats, they try to find out why.

- **Health**

Tenants didn't always need support from care staff to get to health appointment, especially if there were family members to take them and organise this. Staff would do things like remind the tenant and book transport for them.

- **Religion and culture**

Religion and culture were catering for, with consideration for different dietary requirements and other wishes. A priest visits and does mass and a vicar visits for holy communion.

- **Care for the tenants**

Staff get to know a tenant when they first arrive through their care plans and through talking to the tenant, *"everything is in the care plan, we also talk to the tenant. A lot of the tenants like to chat to you."*



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Any changes to a tenant's tastes and care needs are noted appropriately. If a serious change then the senior carer will update the care plan, otherwise there is a communication book for daily changes.

Staff responses to the question of if they had enough time to care for tenants varied, some said 'no', some 'sometimes' and one said 'yes' but that they only did day shifts, *"sometimes. It's really busy. You give the best you can,"* and *"sometimes. If you stick to your list and manage your time you can. I try to work so I have a little extra time to chat with tenants."*

- **Communication**

Staff communicate in different ways to tenants and family about service changes and document any changes as well as speaking to people in person and using newsletters, noticeboards and tenant meetings, *"newsletter. Family welcome to get involved,"* and *"we have regular staff meetings. We talk to family and tenants"*.

- **Staff involvement and support**

Staff did feel that they were encouraged to give feedback, both in 1-2-1s and meetings. Staff also stated that they get lots of support from the Care Coordinator, *"[we get] support to resolve problems. She stands up for staff. Feel supported,"* and *"get all the support we need, only have to ask."*

Staff stated that they are encouraged to continue to develop their skills and training, both update training and development training. Although training has to be done in their own time.

In response to the question about if they felt supported by housing management in their role, care staff responses were positive, with two stating that they didn't see much of them.

- **General questions and responses**

Is there anything else you would like to tell us [Healthwatch Salford]?

- *"want more time."*
- *"really good place and teamwork"*
- *"wages do not reflect the level of work"*
- *"Enjoy it. Everybody is nice. Good teamwork."*

The Care Coordinator

The Care Coordinator had been in post for 8 years and found the job rewarding, *"I like working with people, helping them be more independent."*

- **Tenant information**

Information comes from social workers before a tenant arrives and care plans are adapted once they arrive at the scheme. Staff are also encouraged to talk with and get to know tenants.

Staff are asked to read care plans in detail before a tenant arrives and any major changes are updated in the plan. All staff are told to check the communication book for any changes and there is a shift handover between day and night staff.

- **Activities**

There are many activities organised throughout the week and several were mentioned by the Care Coordinator. Care staff run the activities in the afternoons.



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Assistance and encouragement given to tenants included reminders, using the intercom and staff escorting people downstairs to the lounge. Activities are also promoted through the newsletter and on noticeboards.

- **Health**

Care staff book transport but tenants travel alone. GP appointments are all home visits and a staff member will attend in the flat so that they know the outcome. Family have to fund that part of the care *[some family do pay for a private carer for their family member who takes them to appointments and escorts them to activities outside of the scheme].*

- **Religion and culture**

Care staff find out about a tenant's cultural, religious and or lifestyle needs through their care plan and Appetito can cater for different dietary requirements i.e. halal.

- **Staff**

Staff are encouraged to develop their skills and training through NVQs and free courses. If a member of staff shows a particular interest in a subject they can request some training, i.e. end of life care.

Training is done in a staff member's own time.

Staff can have a say and are able to support changes in the care plan. Staff are encouraged to speak to the Care Coordinator and speak up in the quarterly staff meetings.

- **Communication**

Tenants and their family can have a say by coming to the Care Coordinator's office. They are invited to tenant meetings and there is a suggestion box at the front. They are also encouraged to speak to senior management.

The Care Coordinator was asked in what ways they communicate with tenants, as listed below:

- Newsletter
- Noticeboard
- Flyer through the door
- In care review
- Tannoy *[no tannoy. Individual intercom in flats]*
- Tenant meetings
- Private letter
- In person

Complaints and feedback have their own procedure. The Care Coordinator would speak to the family, learn from the feedback. The complaints procedure is outlined in the notice at the front.

To make their communication more accessible the care provider prints things in large print, speaks directly to tenants and informs them verbally and uses picture boards.

Additional Notes

None.



In summary

- **Care and independent living**

Care staff in the scheme were busy but tenants care needs were being met and none of the tenants we spoke to wished to make a change to their care. Tenants felt safe at the scheme and were generally able to maintain their independence. Although responses to the question of being happy were mixed, tenants were quite positive about living in an Extra Care Housing scheme.

- **Activities**

The care provider was responsible for organising activities in the scheme and care staff organised them around other duties. Relatives thought more activities should be organised and more done to include people, especially those who needed more 1-2-1 support. Tenants took part in activities and wanted to see more physical activities organised. Tenants were not organising and running their own activities in this scheme, although some had in the past.

Without more resources or an activities coordinator the scheme might struggle to be fully inclusive and develop further activities to meet all needs and reduce social isolation.

- **Communication**

The care provider and housing had clear processes in place to communicate and share information, with staff talking freely and willing to support each other. Tenants were communicated with in a variety of ways and felt confident to speak up and to staff. There were some comments about housing and tenants wanting more timely and responsive communication from them.



6. Recommendations

Care provider

1. There were both positive and negative comments about activities and some strain on staff to both deliver activities and care for tenants, with some staff being called away mid-activity.
We would recommend working closely with City West's new Community Wellbeing Officer to come up with solutions and new activities.
2. Menu choices being decided in advance seemed to be particularly an issue with some tenants and there is little flexibility in this.
We would recommend explaining again to tenants and their family members why meals are decided in this way and ensuring menus are always displayed prominently.
3. Many tenants didn't seem to know or understand the role of the Care Coordinator.
We would recommend that more effort be made for the Care Coordinator to meet with tenants and relatives in a formal manner such as feedback surgeries and regular meet and greet sessions.

Housing

1. There were both positive and negative comments about activities and so it is welcome to see that City West have been so proactive in recruiting a new member of staff to develop this area.
We would encourage this person to work closely with care staff and extend a questionnaire to staff also to understand their challenges and ideas around activities, not just tenants.

We would also recommend getting in touch with Salford CVS around volunteer involvement. Salford CVS run a 'Volunteering in Care Homes Project', which I've been told extends to extra care. The project aims to encourage the involvement of volunteers within homes and schemes, to support an Activities Coordinator to provide a wider variety of social activities.
2. With the extent of the marks and staining on the dining room carpet **we would recommend** replacing the carpets.
3. A relative seemed particularly concerned about the mismatch of cutlery and crockery.
We would recommend looking into this further and seeing if the tenants themselves are concerned by this.
4. We listened to several complaints about smoking and observed that smoking outside of the conservatory did result in smoke leaking into the indoor seating area with the windows open. **We would recommend** looking into installing a smoking shelter or moving the smoking area to another side of the building.
5. Tenants spoke of some communication issues and lack of feedback and a wish to see City West staff at the tenant meetings to improve three-way communication, that is between the tenants, the care provider and the landlord.



We would recommend that a member of City West make every effort to attend tenant meetings and make sure that tenants know that they are in attendance and follow-up on any relevant comments raised to feedback in a timely manner.

6. The flat doors and door numbers were both white, making the numbers almost invisible and not dementia friendly.

We would recommend replacing the door numbers with some that are a different colour that stands out and make sure that they are at an appropriate height for tenants to read or touch.

7. Service Provider Response

Care provider response to the recommendations

1. There were both positive and negative comments about activities and some strain on staff to both deliver activities and care for tenants, with some staff being called away mid-activity.

We would recommend working closely with City West's new Community Wellbeing Officer to come up with solutions and new activities.

Comfort Call are working closely with the Housing Provider to implement different activities and events. Comfort Call support the Housing Provider to communicate these activities and events to the tenants. The Housing Provider work hard to initiate activities, particularly in the community which the tenants enjoy.

2. Menu choices being decided in advance seemed to be particularly an issue with some tenants and there is little flexibility in this.

We would recommend explaining again to tenants and their family members why meals are decided in this way and ensuring menus are always displayed prominently.

Comfort Call plan to re-evaluate the menus in the New Year. This will be communicated to tenants and families during the tenant meetings and in letter form. Our ordering and planning process of the meal service will also be explained.

3. Many tenants didn't seem to know or understand the role of the Care Coordinator.

We would recommend that more effort be made for the Care Coordinator to meet with tenants and relatives in a formal manner such as feedback surgeries and regular meet and greet sessions.

Comfort Call have already requested the Coordinator to complete Quality Assurances over the next 2 months and have the conversation documented that she has explained her role within the company and directed tenants to the handbook in their file which holds other useful information.

The coordinator has been part of the company for a number of years and all tenants know who she is, she is often referred to as the Team Leader.



Housing response to the recommendations

City West welcome any feedback that can help us to improve our services.

Activities

City West Housing have recently introduced the post of the Community Wellbeing Officer to work with local agencies to further develop the Extra Care wellbeing offer, improve tenant engagement and accessibility to services to support and improve tenants' health and wellbeing. The Community Wellbeing Officer now holds weekly meet & greet surgeries at Monica Court to allow tenants the opportunity to discuss activities that they would like to participate in.

Some of the activities or projects planned include:

- Carrying out tenant surveys to find out what activities tenants would like to get involved in
- Engaging with local health improvement teams to deliver activities to improve health and wellbeing
- Liaising with the established tenant social group at Monica Court and supporting them to apply and gain funding to support activities of their choice.
- Funding achieved to enable us to commission Salford Community Leisure to develop an Extra Care choir, initially to be piloted at Amblecote & Bourke Gardens and rolled out to Monica court at a later date.
- City West funding for specific music based activities to support people living with dementia delivered by the Northern Chamber Orchestra and Manchester Camarata
- Working with Society Inc, to develop a be-friending project involving local volunteers with the aim to also encourage tenants to become befrienders for other tenants living across the extra care schemes.

The team at Monica Court and the Community Wellbeing Officer are working closely with tenants and staff to discuss ways to improve engagement for men's activities, expanding the existing portfolio of events based around tenant feedback. We will work with tenants to see how the range of activities can be further expanded to ensure everyone's needs are met.

We will contact Salford CVS to see how they could support the further development of activities with the "volunteering in care homes project"

We will also introduce the tenant survey to determine tenant's interest and support the development of an activity programme. We will support the care provider in delivering and facilitating activities that are both tenant and staff led, engaging with local providers to lead on activities within the schemes and supporting tenants to develop a social committee to fund raise providing them with a greater opportunity to build funds for activities and day trips.

Communication

City West Housing Trust work hard to engage with tenants and listen to their views. We work closely with the care provider at Monica Court to listen to their challenges and develop joint working that is supportive and addresses any concerns or challenges they feel may affect the quality of service provision.



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City West Housing Trusts scheme staff attend regular care team meetings and meet weekly for a contractual partnership meeting, there are monthly partnership meetings with scheme management staff and quarterly meetings with service management from both housing & care.

Tenant meetings are held monthly and advertised a month in advance on notice boards for tenants and family to attend, reminders are also given to ensure that all tenants have the opportunity to attend. These are attended by the scheme housing & care.

The Community Wellbeing Officer also now holds weekly surgeries to provide tenants and families with the opportunity to discuss activities and interests.

City West Housing trust staff provides a monthly newsletter that includes tenant articles and a monthly activities calendar developed by the care provider. We have recently introduced a "You said we did" poster and will be developing a notice board that promotes communication in this area.

In response to the recommendations we are also planning to hold an event for tenants, their families and other stakeholders based around the working together for change model, this will further explore the issues working, not working and things important for the future from the tenant's perspective.

Following this event, we will then develop Improvement plans to be put in place agreed by tenants and progress will be reported via regular tenant meetings.

Maintenance

City West Housing Trust works closely with the service centre and the maintenance team to ensure that jobs are completed in a timely manner. Jobs are reported and assigned a response time dependant on priority. In order to resolve any tenant concerns a member of the maintenance team will now attend the monthly tenant meetings to respond immediately to any concerns and feedback progress on any ongoing repair or maintenance issues.

The staining of the dining room carpet is extensive, we have accessed a cleaning company to deep clean the carpets and improve the overall appearance. The carpets were replaced 3 years ago in all communal areas including the dining area and it is disappointing that they are in such poor condition after such a short period of time. We will address the scheme cleaning schedule with the contractor and care provider and improved monitoring will take place with weekly building inspections by housing staff to identify areas that require attention.

We will review the door numbers and will look to change these so they stand out against the door colour.

We will carry out an inventory of crockery and cutlery at Monica Court to determine condition and quality and whether there is a need to replace, we regularly purchase replacements for the scheme following breakages which may have resulted in crockery being mismatched although we always attempt to buy a similar product.

Other areas for improvement



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We will review the pictorial signage displayed in the schemes and ensure posters are clear and that all communication is easy to read and large print. We will also ensure tenants are aware that we are able to provide all communication in alternative formats to meet their individual needs.

We will look to introduce staff name badges for the Housing team and further discuss this suggestion with the care provider to ensure all staff at the scheme are easily identifiable to tenants and families

We will work with the care provider and tenants to commence reviewing the smoking area for tenants. This will be moved to an area further away from the conservatory and building to reduce the amount of smoke that enters the building.



Healthwatch Salford

The Old Town Hall

5 Irwell Place

Eccles

M30 0FN

T: 0330 355 0300

W: www.healthwatchsalford.co.uk