

Pamela Wells

Choosing a Care Home

Supplement to my Report (July 2009)
(Campaigning for Quality Care in Care Homes)

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Choosing a Care Home

Introduction

There is a saying 'you don't know what you don't know'. This supplement has been written mainly for the benefit of people looking for a care home that for them is un-known territory.

What follows is a lot to take in but it will be worth it. Each person can simply take from this supplement what they recognise will be important for them.

It may appear to be directed only towards carers, be that partner, family, friend or indeed a neighbour but it is as much for the lone individual looking for a care home for themselves and for those individuals I would stress the need to seek support.

My hope, however, is that this supplement will reach a wider audience and be read by those involved in all areas of care including those who have responsibility for commissioning care. That there will follow an appreciation of how much more needs to be done to raise the standard of care everywhere.

This Supplement needs to be read in conjunction with my Report, 'Campaigning for Quality Care in Care Homes' (July 2009), and this Report can be viewed on both the website of Counsel and Care and through The Open University. The BBC's 'You and Yours' Radio 4 programme also placed my Report on their website following my interview with them on the 7th June 2010. It might still be available to listen to.

As you will read in my Report, I am a private individual serving my local borough as a volunteer in a number of ways. My experience comes from continuing to care for my husband when he had to enter a care home. I was with him constantly every day for 2 years and what he had to endure and what I witnessed I would never have believed had I not seen it for myself. My Report was written in the hope that it would create an awareness that would help to stop the injustice that is perpetrated on elderly and frail people in far too many care homes for as I later discovered, ours was not an isolated experience.

The purpose of this current Supplement is to help those who will be making the same journey as I had to, which began without having any knowledge of the questions it was important for me to ask. I want others to be better equipped to select a good care home which is run on the principle of a 'home from home' environment. In other words - a happy home to live in.

I have not included issues to be considered in regard to the physical structure, design and fabric of care homes.

As I have stated in my Report and in this Supplement (see pages 3, 6 and 7) excellent advice can be obtained from a number of reliable sources and it is important to avail yourself of this.

What follows is a comprehensive list of suggestions that is meant to help, not to cause concern. Do not be put off by its length but use it to your advantage. Remember, the content of this Supplement stems mainly from what I witnessed during the 2 years I spent with my husband in the care home, for so many hours. It may seem a strange thing to say but actually that experience placed me in a privileged position. It gave me the opportunity to observe, at close hand, the running of a care home throughout the day and night. There were staff who cared but too many who did not and that is what needs to be improved.

CHOOSING A CARE HOME

**IF I WERE CHOOSING A CARE HOME TODAY THE
FOLLOWING IS WHAT I WOULD WANT TO KNOW AND
WHAT I WOULD LOOK FOR.**

Questions prospective residents/carers should put to management.

- Is the certificate of registration prominently displayed detailing the level of care?
- Are all employees CRB checked including those who come directly from abroad?
- Do all staff speak and read English (or required language) sufficiently well to take instruction efficiently and be able to understand residents' needs?
- Do all staff receive comprehensive training, including emergency procedures?
- Are named photographs of the management and staff on display?
- What is the ratio of care workers to residents?
- Is a senior member of staff on duty day and night?
- Can residents keep their own GP?
- Are there any visiting restrictions and if so how restrictive are they?

What is the care home's policy regarding the resident's carer continuing their caring role and working together with care staff? Will they be included in all consultations concerning their loved one? (see page 6)

Is there a confidential complaints procedure for both residents and relatives?

Is there a residents/carers forum where problems and ideas can be discussed with staff?

Are staff able to hold a meaningful conversation with residents?

Do management ensure that all care-workers read the care plan for each resident and are given sufficient time to read subsequent additions/amendments at the beginning of each shift?

How are staff advised to cope with residents when they refuse care that they really need?

Staff have been heard to say "We are not allowed to force residents" which of course is correct. However this can be used as an excuse by staff to walk away instead of managing the situation. That is what training should teach them.

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Even if a home is recommended:-

Look at The Care Quality Commission's (CQC) Inspection Reports on the Internet – but still make your own investigations.

Look through your local Council's Care Home reference book.

A person is entitled to choose to stay in the area they are familiar with, enabling them to have regular visits from family, friends and neighbours. It is also in order to choose to live in another area if this would mean being near family who would otherwise find it impossible to be supportive or find it very difficult to visit.

Ask advice from reliable national organisations such as Counsel and Care and The Relatives & Residents Association.

If someone tells you the home is good ask them how often they visit and for how long.

When visiting, it is recognised procedure to arrive without an appointment. If the care home objects then that should raise serious doubts.

Any smell of urine is unacceptable but you need to speak about it. It could be a one off which is why there is a need to return. If it is still there – leave.

Do not be led only where management want you to go. Ask to see all public rooms, dining room, kitchen, toilets, bathrooms, unoccupied bedrooms, looking for brightness and comfort.

If initially you are shown around by a care worker ask to speak to the manager or if unavailable a senior member of staff who should be on duty.

Try to gauge the atmosphere in the home and the relationship between staff and management and staff and residents. Are the staff smiling and relaxed or looking stressed?

Ask how the care home ensures that there is a 'home from home' atmosphere?

In other words will a resident be allowed to:-

- Have their meals served in their room?
- Have a cup of tea when they fancy one, whenever that might be?
- Go back to bed when they feel the need to lie down?
- Get up at a reasonable time in the morning? Not at a time to suit shift changes.
- Stay up until they feel ready to go to bed? (Many people are used to sitting up till late.)
- Bring in their own furniture and personal belongings?

Are there a variety of comfortable armchairs (height, width and style) to suit residents' differing body structure - not chairs that are just for show?

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Do management ensure that staff:-

Give every resident respect and privacy and maintain their dignity?

Explain to a resident, before moving them from their chair, bed or wheelchair, what they are doing and why?

Keep residents' alarm chords within easy reach at all times? **Vitally important.**

Spend time talking to residents and discuss which TV and radio programmes they might like to watch or listen to?

Give consideration to the need for touch, especially for residents without any visitors?

Keep their conversation quiet at night times and make sure that televisions are not left on anywhere at an intrusive noise level?

How often are checks made to ensure that:-

- Residents' clothes are laundered professionally and returned to the right owner?
- Residents are asked what they wish to wear each day?
- Residents are wearing their own clothes and that slippers fit correctly and are safe?

Stimulation:-

What effort is made to stimulate resident's mental capability, and use their talents?

Are there pictures on the walls of the home that residents can relate to, i.e. people and scenes from the past?

How often do management arrange for local trips out and other outings, consulting with the residents as to where they would like to go?

Is a programme of daily activities displayed including entertainment from outside sources?

Is there conversation going on between staff and residents?

What consideration is given to residents with dementia or disabilities to ensure that they have as enjoyable a life as is possible?

Are residents and their families encouraged to bring family memorabilia in to share?

Do the staff ask residents what they would like to watch on television or just leave unsuitable programmes on for hours?

Do staff ask residents what music they would like to hear or is it chosen by staff for their own enjoyment and played too loudly?

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Other points for observation:-

Ask to share more than one meal with residents. Is the menu for the week prominently displayed? Is the food suitable for elderly/disabled people whose eyesight may be failing and who cannot always chew their food or handle utensils? Are they given a choice?

An enjoyable meal may be the only event they have to look forward to each day.

Are staff feeding residents or leaving them to fend for themselves which can mean that meals become cold are left uneaten and the resident is left hungry?

Is there any conversation between staff and residents during this time?

Do you notice residents being left alone in the lounge - where are the staff?

Although there should always be a member of staff in attendance this doesn't always happen, which is why alarm chords should always be within easy reach of the resident. **Not allowed to fall on the floor and certainly not left fixed to the wall.**

Observe if residents are left alone in the garden where they do not have any means of communication.

Talk to relatives and residents as much as possible and be concerned if this is discouraged by staff. Staying on to chat after afternoon tea or the evening meal gives visitors an opportunity to make observations.

Be mindful, however, that not every resident will wish to speak to you, so be respectful of their privacy. Also, remember that not everything they tell you will necessarily be correct.

Kindness and Sensitivity:-

Do you see staff kneel down to look up at residents who cannot raise their heads?

Do any of the staff sit and hold a resident's hand or give them a cuddle?

Touch is very important and especially comforting for people who are totally alone.

Comfort and Consideration:-

If it is hot weather, where are the fans? If it is cold weather, is the room warm enough?

Are residents being left by a window in the sun on a hot day and/or left in a draught? from windows and doors?

Look at residents' faces and body position, do they look comfortable?

Are residents' heads supported? Do noses need wiping? Are finger nails clean?

Have you heard residents' calling for the toilet and being ignored and, **for how long?**

Is water on residents' tables **and** within reach?

Is there always a choice of soft drinks or is it the same orange juice every day?

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Of course there are good care homes that are well run and this supplement will help you to identify them. You may well feel happy with a care home from the first interview, having been taken on a tour and meeting the staff. Sadly, some homes may not live up to their initial presentation and appearance, which was my experience. That is why it is vital to visit a number of times and to be observant.

As mentioned on page 1, it is very important to obtain management's confirmation that they accept carers as being an 'expert' in care' and as such included in all aspects of the life of their loved one (I wasn't, initially). There is every reason for you to attend when the GP visits and you are entitled to speak in private. (I made an appointment at the GP's surgery to establish my right to consult with him about matters concerning my husband's medical care.)

It is every carer's right to continue in their caring role and indeed they may need to do so if the care proves to be inadequate, as was my experience. It is important not to be intimidated by care staff. Having to be separated from the one you love and have cared for is upsetting and care staff should understand this and be supportive. The first time I went home alone was a dreadful experience. It can be a good idea to ask someone to stay with you.

Similarly a daughter, sibling, friend or indeed a neighbour, all of whom may have given their loving care and support over a long period of time, will be feeling a sense of loss.

Ask management if there is a policy in place to ensure that all staff are made aware of the need to act sensitively and respectfully towards the carer.

Obviously a carer should not be intrusive where specific nursing is required but equally there isn't normally a reason to be asked to leave the room. As I understand it there isn't any legal requirement to do so without a good reason being given. Holding your loved one's hand during a difficult time e.g. while a nurse is carrying out a possibly painful medical procedure should be acceptable. You should not be prevented from continuing to give all the care to your loved one that you always have. In a well-run thoughtful home this should not be a problem.

Everyone must observe Health and Safety Rules and carers should not attempt to use equipment and care staff should not ask you to (except in an emergency). There should always be the required number of staff to manage equipment.

If you have an issue with a member of staff do try to resolve it with them. Simply by having a friendly chat and explaining how you feel can often be sufficient to resolve matters. My perseverance in this regard eventually convinced care-workers that I was not critical of them and wanted to be supportive.

If, however, you have to take your concern to management it is advisable to have a witness with you, a relative, friend or your previous social worker. Alternatively, seek advice from an advocacy service or one of the national charities, i.e. Counsel and Care or The Relatives and Residents Association. If you are still unhappy and depending upon the severity of your concern, you might consider contacting The Care Quality Commission (CQC) or The Local Government Ombudsman (LGO).

In October 2010 new rules will also give self funders the right (for the first time) to take their complaints to the LGO.

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Service Providers and Carer Support Groups may also wish to note the following:-

I have voiced my opinion in different quarters that carers need to be advised, as a matter of course and early on in their caring role, that should the day come when their loved one has to enter a care home they can feel confident that they will not lose their caring role. They need to be assured that they are entitled to be treated with respect as the person whose years of selfless caring means that they usually know the best way to care for their loved one. (Naturally they must acknowledge those areas where they lack the necessary expertise.)

Once someone has moved in to a Care Home

This is the time to be really observant about how the care home is being run. Are the promises you were given being honoured? Use Your Eyes and Ears - for example:-

Breakfast is often served in a resident's room so if you visit at that time you can discover if it is appetising. Further, that each course is brought in separately not all at once, which means part of it will be cold before it can be eaten. This may suit the staff but it is not acceptable.

Are there signs of faeces underneath the nails or elsewhere? Yes! It does happen.

Cleaning of teeth and/or dentures is something that some staff will avoid so this is an area to be monitored regularly. Also ensure that dentures are kept safe overnight and if removed from the room that the correct ones are returned.

Go in late evening and I mean late, to discover if televisions are being left on loud in the lounge or in residents' rooms which will prevent other residents from sleeping. Check on how many staff are on duty and if there is a senior member of staff in evidence.

If you are discouraged from visiting at these times then this should be cause for concern. Without going in at different times, how can you be sure that all is as it should be?

So then, it will be understood why I am passionate about sparing others what I went through.

My hope is that, by writing this supplement to my Report, what I learned during those 2 years will take some of the worry out of what can be a very difficult decision to come to, making it easier for the enquirer to reach the best possible decision.

By being aware of the standard of care you are entitled to receive and the respect due to you as a carer you will feel confident of asking the right questions. Then when residency is taken up of making sure that promises are fulfilled.

Hopefully this will also encourage the care home management to remain vigilant in ensuring that standards are maintained. Importantly it will help you to recognise the good care homes and thankfully there are care homes who do earnestly wish to provide quality care.

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I believe there is now a growing awareness in many sections of the community of the need for a higher standard of care and for improved monitoring of care homes. Everyone can help by reporting anything they see that they believe is unacceptable (see my Report.)

In October 2010 new government legislation will come into force, giving the Care Quality Commission increased powers of inspection. This is very welcome.

It is important that respect and co-operation travels both ways and not withstanding how you or your loved one expect to be cared for it is important to acknowledge the responsibility that the care home management and care staff have to their residents.

When care homes employ the right calibre of staff who have a kind and professional attitude towards caring for elderly and frail people there can be many rewards. Yes, at times residents can be frustrating and difficult to manage but that is the nature of the job and is precisely why management should ensure that staff training gives them the ability to cope sensitively with these situations.

Whilst expecting (demanding) to be treated with respect, it is very important to let staff know that you understand their difficulties. Show them that you are happy to work as a team, helping in whatever way you can. This should go a long way to creating an harmonious environment which should surely be the ultimate aim of everyone involved -

A happy life for residents, bringing peace of mind to their carers and for staff, the satisfaction of a job well done.

Awareness Appreciation Respect Understanding Co-operation and Kindness

These qualities should be the watchword of Management, Nurses, Care Workers and Carers alike, for when we act kindly towards each other we can create something quite beautiful.

Good Luck in your search.