



Care Homes Vanguard Evaluation: The residents' perspective

A Comparative Report

March 2017



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Executive Summary

Healthwatch Wakefield was commissioned in early 2016 to provide a residents' perspective on the interventions developed by the Wakefield Care Homes Vanguard. Five care homes were identified by Public Health and Vanguard colleagues to take part in a baseline survey in February 2016. It was anticipated that all five of these care homes would subsequently have the full range of Vanguard interventions and therefore a second visit approximately one year later would demonstrate change in residents' experience of externally provided health and care services in those care homes. The provision of care by the care homes themselves was not part of the evaluation.

Due to a reduction in Vanguard funding, only three of those care homes were included in the second year of the Vanguard, so the comparator survey was conducted only in those three care homes.

So what did people say had changed?

- At the second visit residents still reported mostly having contact with the GP, district nurse, practice nurse and physiotherapist. A couple of people had seen a pharmacist and/or an Age UK worker, but overall it was a similar picture as the first visit.
- Fewer residents (22%) interviewed reported they felt that health and care services worked well together compared to 47% previously.
- Fewer people (79% compared to 88%) reported that they felt they could see the GP when they wanted to.
- More people reported that when they went to hospital their medication and other needs were known at 65% compared to 57% in our first visit.
- In the first visit 84% of residents said that they know who to contact with questions about their health and care needs; and 69% felt that this person understood them and their condition. In the second visit, the responses were much the same (84% and 67%).
- During our second visit, only 13% of those interviewed said they were aware of or had discussed their health care plan with someone; 22% of those felt that the health and care provided met their needs. Both of these questions were less positive than previously with 30% having discussed their health care plan and 83% feeling that health and care provided met their needs.
- There was no improvement in the responses to questions on how involved people felt in making decisions about their care, or in how independent they felt.
- The remaining qualitative questions evoked similar mixed responses to the first visit, although there was a slightly less positive overall 'feel' to the interviews with more people than previously reporting feeling depressed.
- As in the first phase, people felt that being healthy, having contact with other people and being able to get out and about and do things were most important in giving them a good life.

Overarching outcome

The overarching outcome for the resident element of the evaluation was that Wakefield care home residents who experienced the early implementation of the Care Homes Vanguard programme had the opportunity to take part in the evaluation process.

The objectives of the evaluation were as follows

- To provide a valid and reliable means by which to engage residents in the Care Homes Vanguard evaluation.
- To industrialise the resident engagement process to provide it at sufficient scale to be valid.
- To use local volunteers to conduct the interviews via Healthwatch Wakefield.
- To provide the process in a way that overcomes barriers of literacy, language and access
- To add value to the Wakefield programme by working in alignment with both the proposed national evaluation and the other five Care Home Vanguards.

Summary of findings

In February 2017, Healthwatch Wakefield revisited three care homes that had been included in the first phase of the evaluation. Healthwatch Wakefield conducted 32 residents' interviews in these three care homes, with a view to review, compare and analyse the findings. 42 residents of these homes had previously been interviewed in May/June 2016. As interviews were anonymous it was not possible to track whether or not we spoke to people twice or if the second cohort was entirely different from the first, although anecdotally interviewers reporting recognising some but not all individuals from the previous visit.

The findings provide some insight into residents' views and experiences but on the whole there was not much conclusive evidence either of the Vanguard interventions being noticed by the residents, or that their quality of life had changed as a result. However, there are many limitations and validity issues for this evaluation and the findings cannot therefore be treated as robust.

It had been expected that for the second phase of residents would report having seen a greater mix of health and care professionals due to the Vanguard interventions, but this does not appear to have been the case for the residents we spoke to. However, this may reflect that the Vanguard services have been supporting those residents who are less well and therefore less likely to have been able to be interviewed.

In comparison to the first phase of the evaluation, fewer residents:

- Felt that they were able to see a GP when they needed to.
- Felt that they would know who to contact if they needed to ask questions about their healthcare.
- Had discussed their healthcare plan.
- Felt that the care they received met their needs.

However, more residents felt that if they went to hospital their medication and additional needs would be understood.

Shared decision making was another factor that should arguably have improved with the Vanguard new model of care, but the second phase findings for the questions around shared decision making did not reflect an improvement.

The findings also provide insight into residents' quality of life. In comparison to the first phase of the evaluation:

- The majority of residents in the second phase of interviews did not report feeling independent. Immobility was cited as the main contributor, as people mostly associated feeling independent with being able to get themselves out and about.
- Residents reported similar feelings of life satisfaction; the majority of residents reported that they felt somewhat to completely satisfied with their life.
- However more residents reported feelings of depression to varying degrees. Taking into consideration environmental factors, it is possible to suggest that the residents' mood may have been negatively affected by the time of year, February 2017 as compared with June 2016.

Limitations

An overarching aim of the care home Vanguard evaluation was to provide a valid and reliable means by which to engage residents in the evaluation. In practice the approach that was adopted has a number of limitations in a care home setting which affected both the validity and reliability of the results. The limitations are discussed later in this document in the section on lessons learned.

Recommendations

Based on our experience of evaluating resident experiences in care homes, Healthwatch Wakefield suggests an alternative approach for any future resident evaluation of care home interventions.

1. Simplify the survey

Residents struggled with some of the questions and the length of the interview was also too demanding for some. A reduction in the number of questions would be helpful.

2. Observational methods

The survey and interview approach used for the evaluation was not ideal for the population or environment. We felt that an observational approach could be used alongside the interview process. Observation methods including time sampling – an observational sampling method involves observing individuals and environments at different times – are advantageous when interviews are inappropriate. Observational methods can be strong on validity and provide a greater depth of understanding.

3. Broaden the sample

The sample – residents in care homes – may not provide an accurate account of the care home Vanguard programme. Broadening the sample to include residents' families, care home staff and healthcare professionals may provide different perspectives of the Vanguard programme, contributing to a more comprehensive evaluation.

4. Increase the frequency of care home visits

Attending the care homes on more occasions would facilitate a better understanding and 'feel' of the care home; that is how things work and what services residents have contact with.

Methodology

The survey

The survey, at Appendix A, was designed in three parts; to include a selection of National Voices 'I' statements to measure the variety and integration of services going into the care homes; a validated wellbeing measure (ONS-4); and two qualitative questions regarding independence and wellbeing. It was created collaboratively with Public Health colleagues and input from the NHS England national team.

Sampling method

A purposive sampling method was adopted. Vanguard and Public Health colleagues identified the five care homes to take part in the baseline survey which was done in May/June 2016. It was anticipated that all five of these care homes would subsequently have the full range of Vanguard interventions and therefore a second visit approximately one year later would demonstrate change in residents' experience of living in those care homes. Due to a reduction in available Vanguard funding, only three of those care homes were included in the second year of the Vanguard, so the comparator survey was conducted only in those three care homes and the data from the other two has not been included.

Structure of the evaluation

Phase one (January – August 2016):

- Developed survey questions and shared with stakeholders for comments.
- Piloted survey questions in care homes outside of Vanguard programme – amendments were made where required.
- Public Health identified five care homes – two care homes outside of the Vanguard programme and three which were due to be included in the second phase of the Vanguard programme.
- Healthwatch Wakefield conducted 70 resident interviews using the pre-designed survey in these five care homes (42 in the three care homes that subsequently became part of the Vanguard).
- Pathways were set up to allow for referrals of residents to voluntary sector support (Age UK Wakefield District and Carers Wakefield & District); or alert to the [multi disciplinary team](#) where interviewers identified a need.
- Healthwatch Wakefield produced an interim report (August 2016).

Phase two (February – March 2017):

- Contacted the three care homes visited in the first phase and included in second phase of Vanguard programme.
- Healthwatch Wakefield conducted 32 resident interviews in these three care homes.
- Produced a final report (March 2017).

Preparation

Healthwatch staff approached the identified care homes and secured dates and times for their visits. On arrival, information was sought from care home staff as to the cognitive abilities / health and wellbeing of residents to ascertain who was within and out of scope.

A full verbal explanation was provided to each person approached. Written consent was obtained from each resident prior to the interview being conducted and information was left including Healthwatch Wakefield contact details should the person wish to ask any questions or provide more information at a later date or wish to share with their family, carers or relatives. Leaflets about other services such as Age UK and Carers Wakefield were also left with the residents. Consent for referral to other support services was obtained if relevant. We made it clear that taking part in the survey was voluntary. No pressure was placed on any person to participate and residents were able to withdraw from the interview at any time if they wished.

Lessons Learned

Interviewers

After the first set of interviews that involved volunteers, a decision was made that only experienced and trained Healthwatch staff conducted these surveys. This was due to the increased need in this project for sensitive and careful interviewing techniques and consistency of interviewing and recording. We also took into consideration the fact that the volunteers who were involved initially, despite being trained in previous Healthwatch survey work, told us that they found the care homes interviews a bit too challenging for various reasons.

Robust process, policies and risk assessments were in place. Staff had safeguarding, personal safety and dementia awareness training coupled with a thorough understanding of confidentiality and data protection. Some of the interviews were conducted in pairs, as this helps with more accurate recording of the findings and offers some mutual support and safety especially when interviews were conducted in non-communal areas.

Talking to residents

The initial aim was for us to interview 50% of residents in each care home, but it rapidly became evident that this target was ambitious. This was confirmed by other Vanguard colleagues who agreed that it would be unlikely that 50% of residents of most care homes would have cognitive ability, be sufficiently well or even just awake at the time of interviewing.

The residents vary in cognitive ability and concentration levels and therefore it was often necessary to take a short break or to steer the interviewee back to the present time and the survey. Some residents seemed to have cognitive ability, but during interviews would respond to some questions with variable accuracy e.g. "I am 30 years old and don't live here I just call in", "This is a council house; I was invited here by my friend for dinner".

The quality of life questions (good life; satisfaction; happiness; depression) were found to cause many residents to reflect and reminisce on their lives. The residents would comment on the stark differences of lives at home or when they were younger to their current living situation and this occasionally caused some upset. Healthwatch interviewers ensured that sufficient time was spent with each person to ensure they had time to talk through any issues that had been raised. We also made sure that staff were made aware and would offer further support if necessary after the interview.

Despite several efforts to explain some questions some residents were unable to answer some questions or understand some services, e.g. what a community geriatrician is. Some people also seemed to have difficulty with the questions which used the scale of 1-10 for their response, sometimes giving contradicting responses eg scoring themselves high for both being depressed and being happy.

The content of the questions was frequently not easily understandable for the residents. As an example, questions regarding which health and care services they had had contact with were confusing to residents, the majority of residents were unsure who they had had contact with during their stay at the care home.

The window of opportunity to speak to residents is narrow, and factors such as avoiding meal times, not expecting to interview people too early or late in the day, when entertainment is active, people at the end of life, whilst receiving medications, receiving personal care, visitors not wishing to be disturbed, hospital appointments and non-communicative people reduce this window significantly. Although we tended to spend a full day at the care home and went back in some cases, it was still difficult to reach all eligible residents.

Not all people in the homes are residents as some were there for respite so did not qualify for this survey.

It was virtually impossible to give space and privacy to people when conducting interviews in communal areas especially when speaking to the hard of hearing. There were a number of times that other residents involved themselves in people's interviews and staff were able to listen to the interview which sometimes has the effect of moderating people's responses.

Seating areas were an issue as Zimmer frames and other walking aids cluttered the communal areas making it difficult to get close to the interviewee.

Healthwatch staff on several occasions aborted interviews but chatted to people who were clearly unable to participate.

Findings

The aim of the second phase of the care home Vanguard evaluation was to conduct a comparative analysis; that is, to observe, review and compare the possible changes in resident views and experiences of the care home Vanguard intervention seven months since it was implemented in three care homes. Healthwatch Wakefield conducted 42 resident interviews in May/June 2016 and 32 resident interviews in February 2017 in these three care homes.

This report presents a comparative account of the findings, comparing the results found for the three care homes in the first phase of the evaluation to the second phase. The following findings will be discussed:

- A general informative overview of each care home including number of residents and number of beds occupied.
- A general overview of the results found in the first phase of the evaluation and comparison to the results found in the second phase of the evaluation.
- A detailed overview of the results found in the first phase of the evaluation for each individual care home and comparison to the results found in the second phase of the evaluation for each individual care home.

For the purpose of this report the care homes have been anonymised.

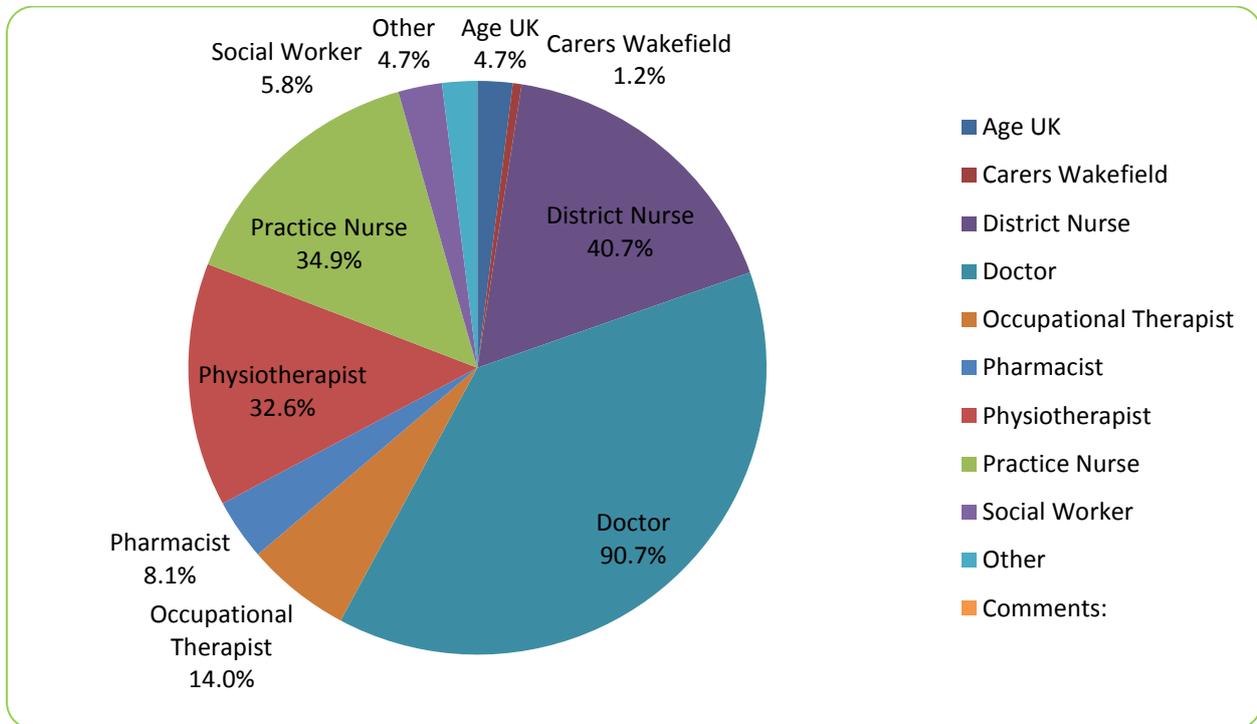
Table 1: Information of the three care homes visited by Healthwatch Wakefield

	Care Home		
	Care Home 1	Care Home 2	Care Home 3
Bed vacancies	64	70	35
Residents occupied	54	59	34
Target (50%)	27	30	17
Lacking in capacity	38	20+	20+
Declined	1	3	0
Unavailable	0	17	3
Cancelled interview	2	1	1
Interviewed	9	13	10
Healthwatch Visits (February 2017)	2	2	1

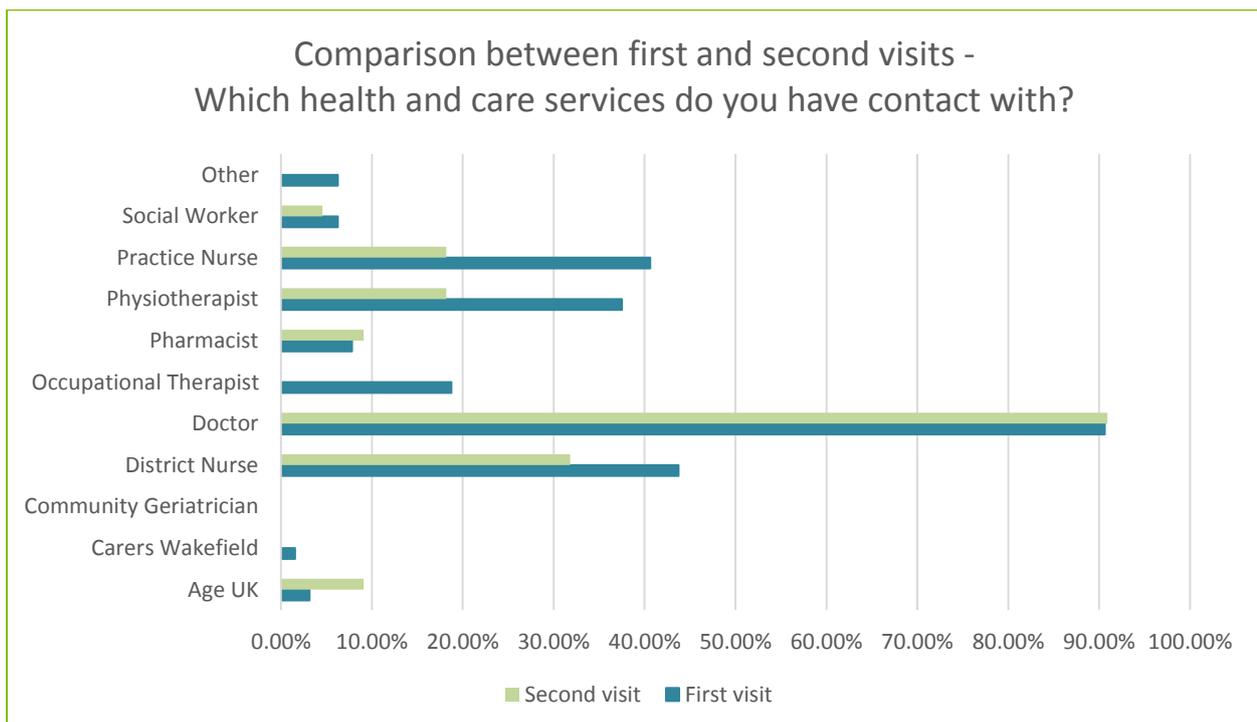
Healthwatch Wakefield was set a 50% target interviewing rate for each care home. This target was ambitious and taking into account the number of residents lacking capacity was not possible in practice.

A general overview and comparison – phase one and phase two

We asked the residents what health and care professionals they had contact with, and the majority of residents (91%) had contact with a GP. Please see the pie chart following for a visual representation of residents' contact with services overall.



The expectation for the second phase of visits was that residents would report having seen a greater mix of health and care professionals, but this does not appear to have been the case for the residents we spoke to. However, this may reflect that the Vanguard services have been supporting those residents who are less well and therefore less likely to have been able to be interviewed.



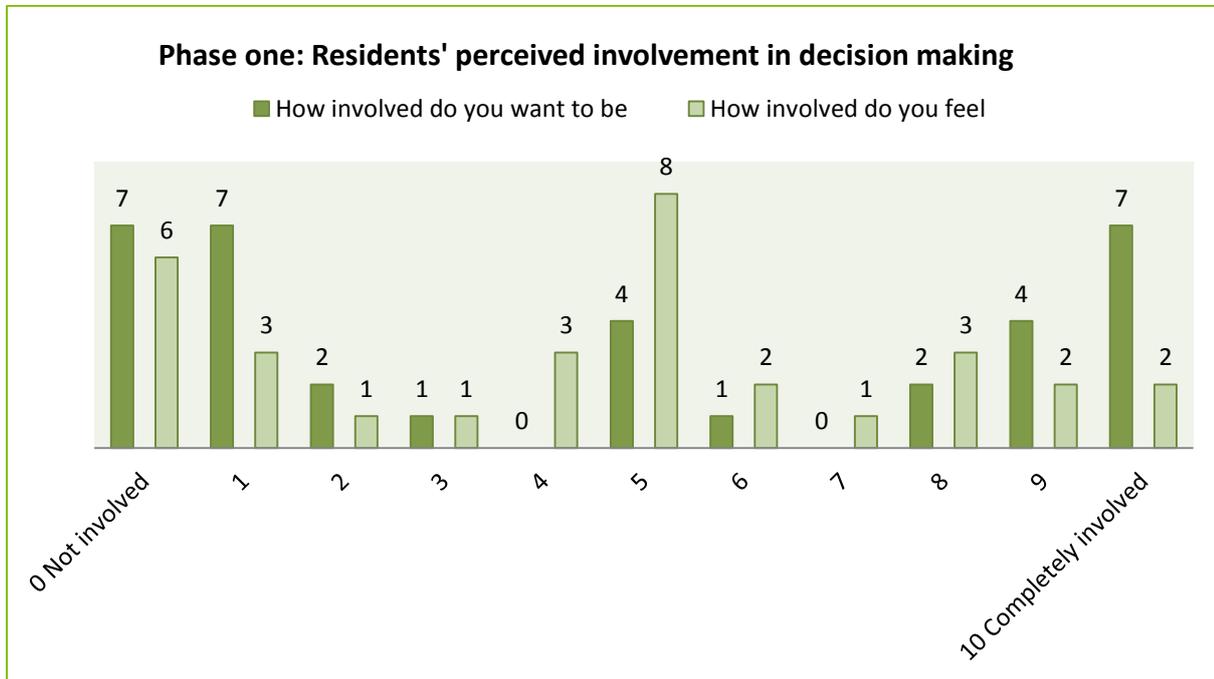
Residents' views and experiences of the services

The first set of questions in the survey explored residents' views and experiences of the health and care services they receive whilst living at the care home.

Question	Phase of the evaluation	
	Phase 1 (N=42)	Phase 2 (N=32)
Different health professionals and services worked well together	<ul style="list-style-type: none"> 37% said that people worked well together and things ran smoothly 	<ul style="list-style-type: none"> 22% said that people worked well together and things ran smoothly
You are able to see your GP when you need too	<ul style="list-style-type: none"> 88% said they felt that they could see their GP when they needed to 	<ul style="list-style-type: none"> 79% said they felt that they could see their GP when they needed to
If you go to hospital they know your medication and any other needs you may have	<ul style="list-style-type: none"> 57% said that if they went to hospital they would know their medication and other needs 	<ul style="list-style-type: none"> 65% said that if they went to hospital they would know their medication and other needs
If you need to ask questions about your health care do you know who to contact?	<ul style="list-style-type: none"> 88% would know who to contact if they had questions about their health care 	<ul style="list-style-type: none"> 84% would know who to contact if they had questions about their health care
Do you feel this person understands you and your condition?	<ul style="list-style-type: none"> 71% felt that this person understood them and their condition 	<ul style="list-style-type: none"> 69% felt that this person understood them and their condition
While you've been living here have you discussed your health care plan with anyone?	<ul style="list-style-type: none"> 48% said that they had not discussed their healthcare plan 	<ul style="list-style-type: none"> 53% said that they had not discussed their healthcare plan
Do you feel that the health care provided meets your needs?	<ul style="list-style-type: none"> 80% said that they felt the health care provided met their needs 	<ul style="list-style-type: none"> 17% said that they felt the health care provided met their needs

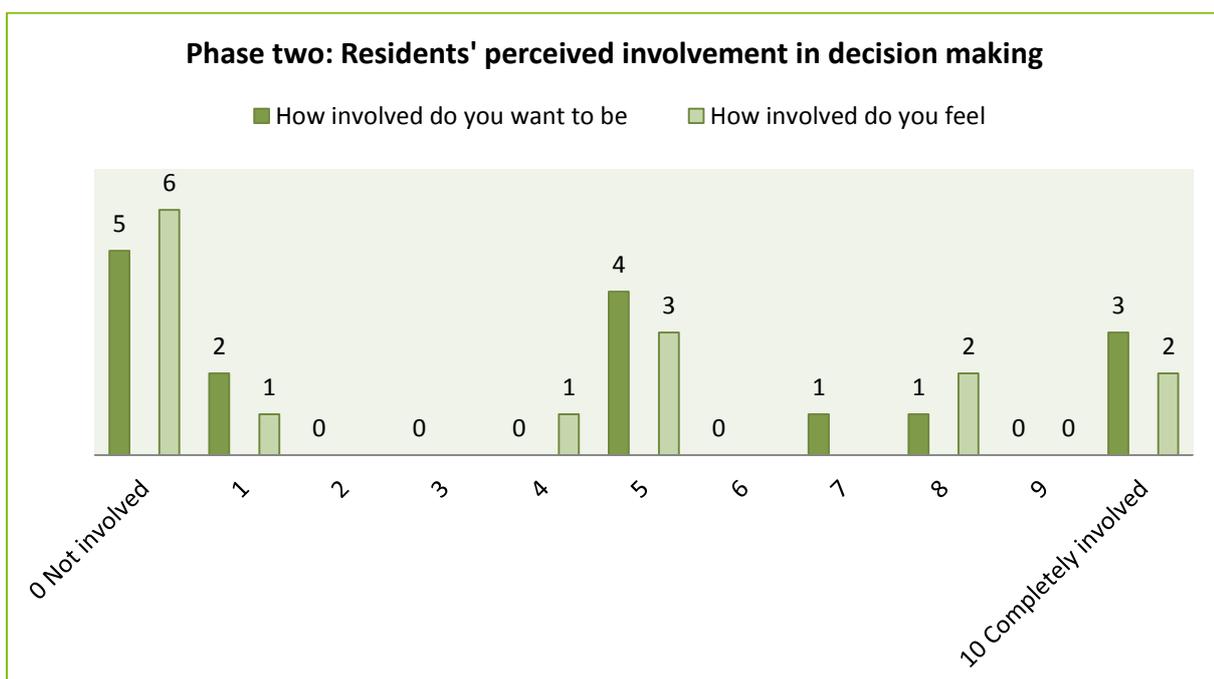
Residents' perceived involvement in healthcare decisions

The second set of questions explored residents' views and experiences of decision making. Specifically, the questions aimed to ascertain how involved residents felt in making decisions about their healthcare and how involved they would like to be.



The results of the first phase of the evaluation are quite mixed. Some residents wished to be more involved in making decisions about their healthcare than others. Interestingly, the majority of resident felt somewhat involved in decision making.

The results of the second phase of the evaluation are inconclusive. 'Spikes' in the results are notable; some residents wished to be completely involved, partially involved and not involved at all. The majority of residents did not feel involved in making decisions about their healthcare.

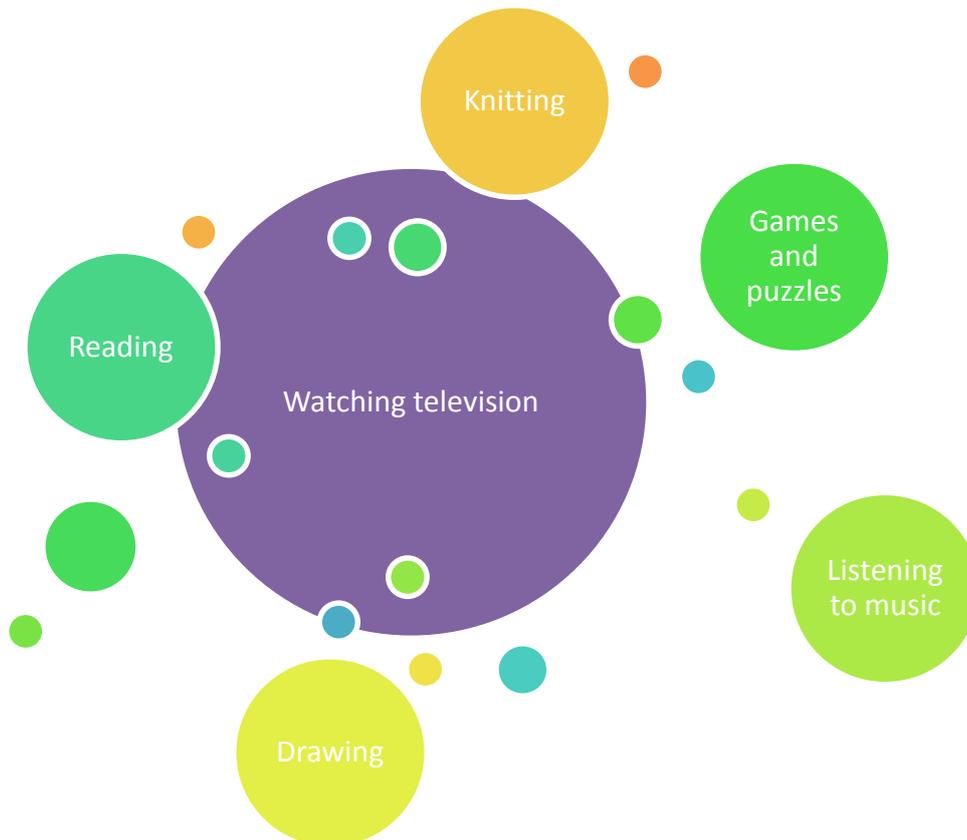


Residents' quality of life

In the survey, a number of qualitative questions explored the residents' quality of life; these questions were used to elicit richer information about residents' views of their quality of life in a care home setting.

Firstly, residents were asked about the activities they engaged in that helped them to feel independent. The activities that were mentioned in the first phase of the evaluation were also mentioned in the second phase of the evaluation.

Below are some of the activities residents mentioned that make them feel independent.



Many residents claimed that they were not independent as they experienced mobility difficulties or had a physical disability. It was made apparent that residents perceived immobility and independence to be mutually exclusive; that is, residents felt they could not be both immobile and independent.

Residents who did not feel independent were asked what activities would make them feel more independent. As found in the first phase of the evaluation, residents expressed that being able to get out and about would enable them to feel more independent.

Activities

Read, TV, I dress myself

Not a lot. I am in a wheelchair. Used to knit and read before I was in a wheelchair.

Knit, read, games, dominoes, etc.

I can't see - I don't do anything.

I watch television. I have friends here.

I have written 19 parts of a book.

I produce a monthly newsletter.

I watch TV and read.

I can join in with activities. I do go downstairs and help out with the dementia residents making Christmas cards and stuff. I sometimes take a taxi to town to the market. I have a laptop.

Watching television. I used to knit using my knitting machine but I can't do that while I'm living here.

Cleaning and keeping my room tidy.

Watching television. Reading books and magazines.

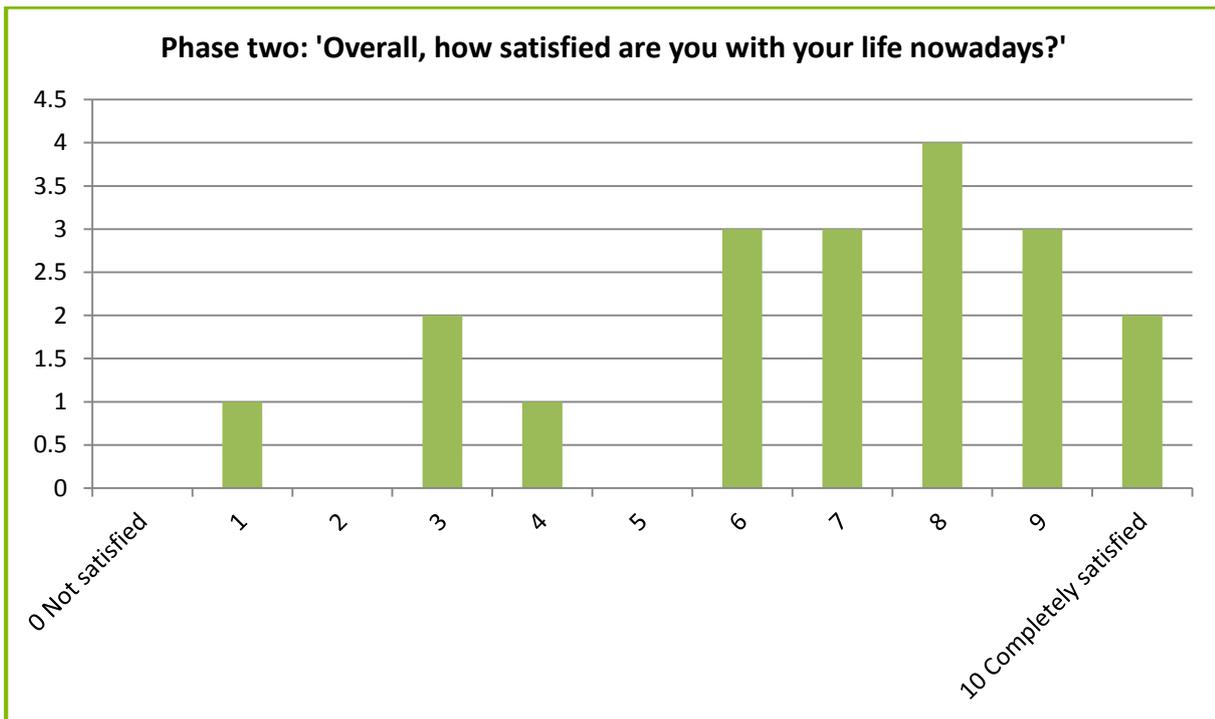
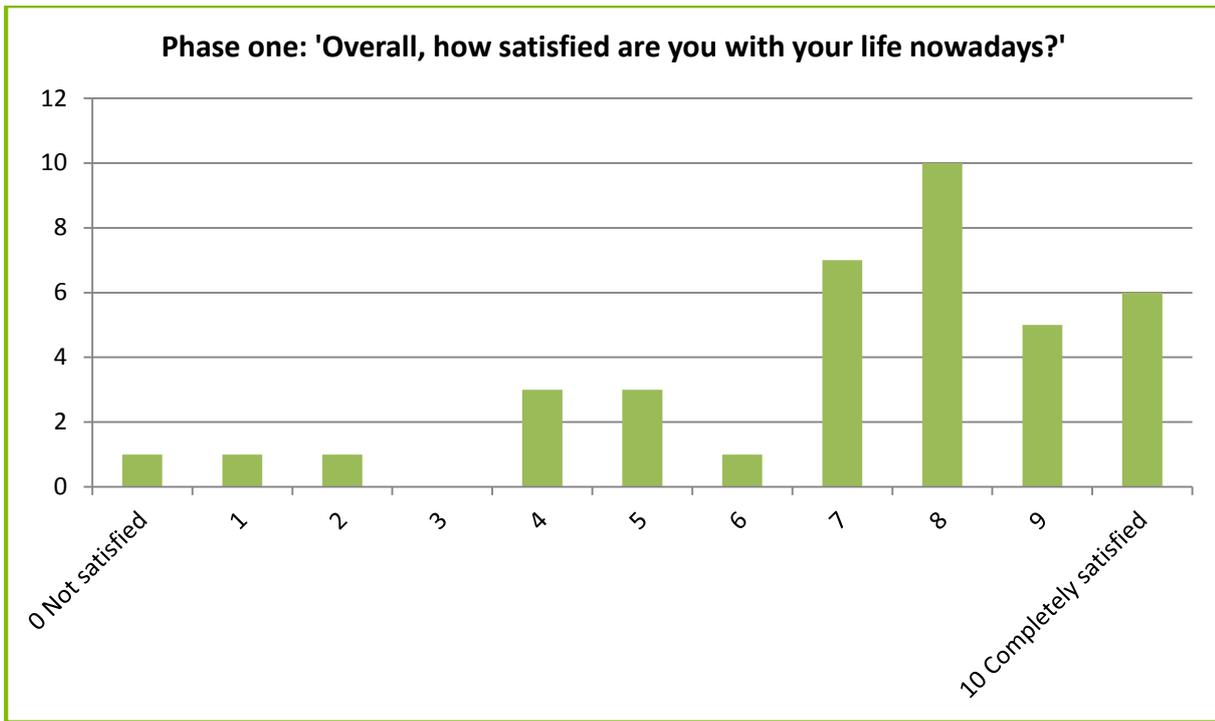
I like to go to the arthritis care and support group - there are three a week. I join in with activities when I can. I like to read.

I can't do nothing really.

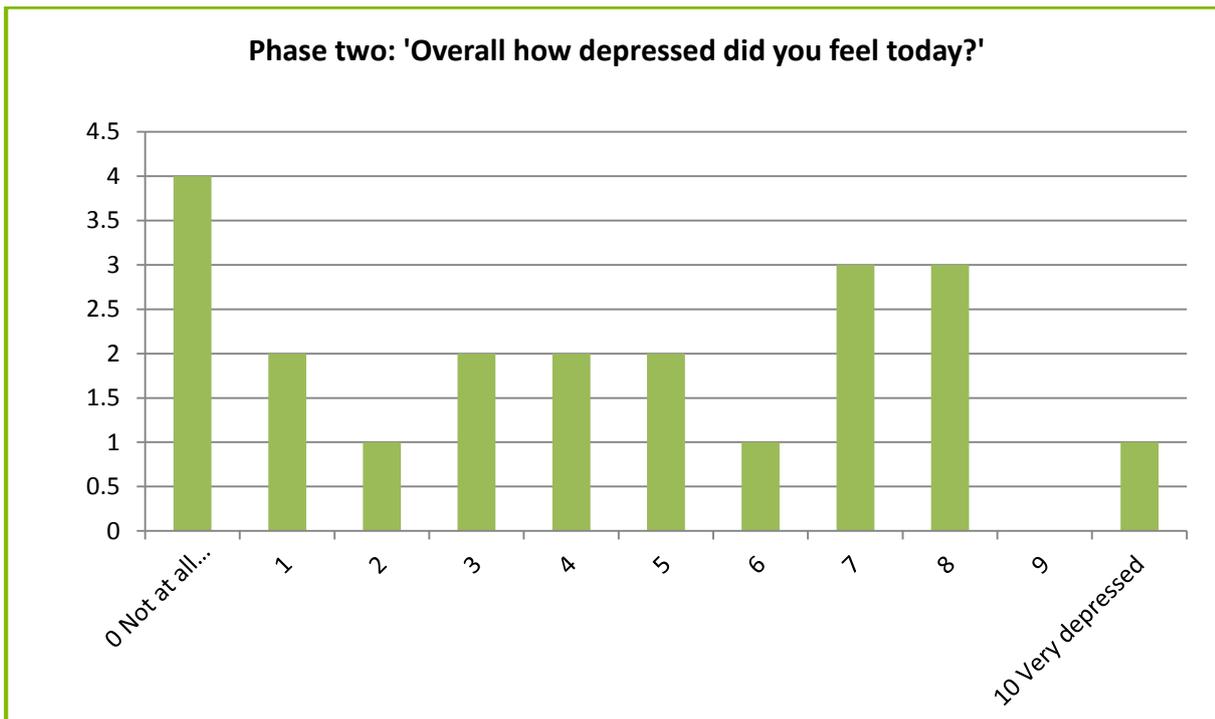
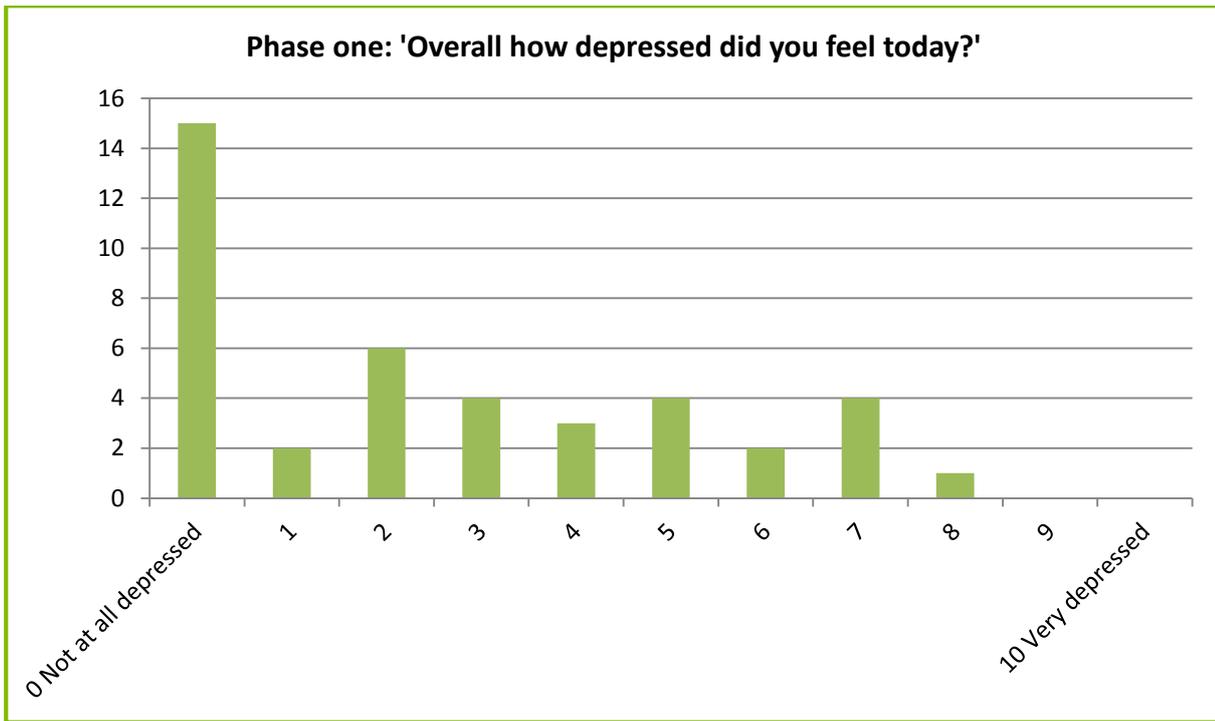
Residents were asked a further three questions from the ONS-4 wellbeing measure concerning:

- Life satisfaction
- Depression
- Happiness

For each of these Likert-scale questions, a score of 0 denotes low life satisfaction/very depressed/unhappy. A score of 10 denotes high satisfaction/not at all depressed/very happy. Please see the figures below which show the residents' scores for each of the aforementioned questions in the first and second phase of the evaluation.

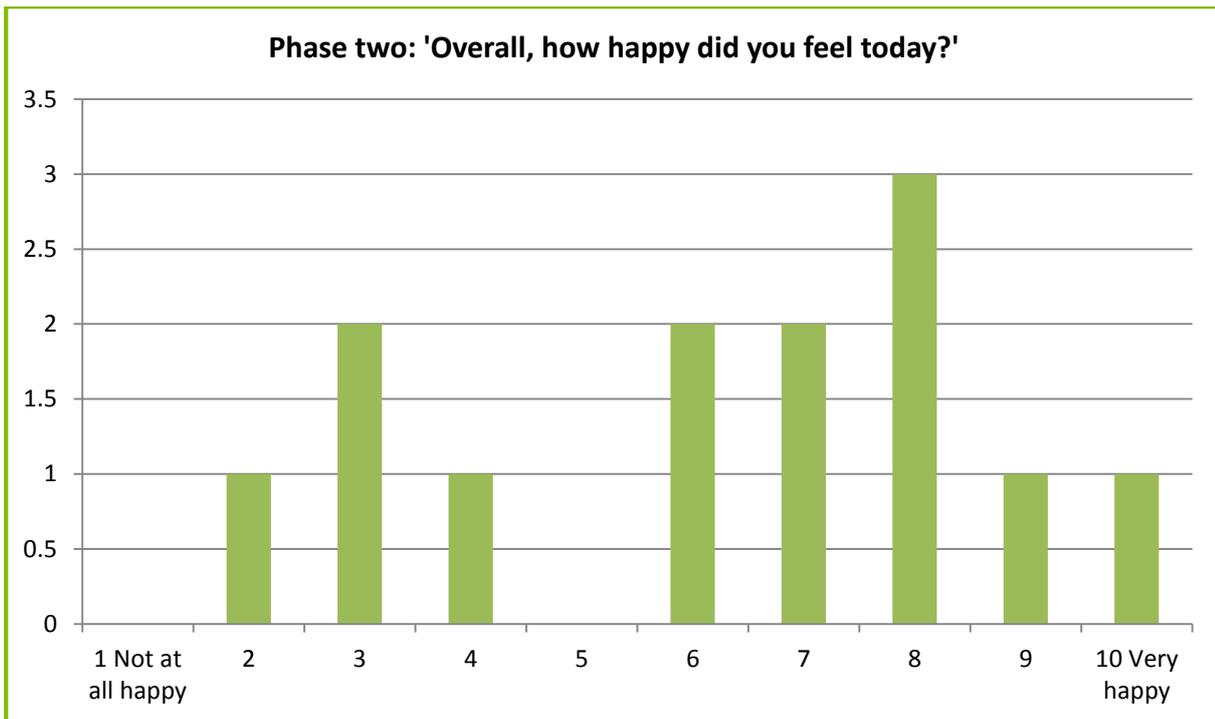
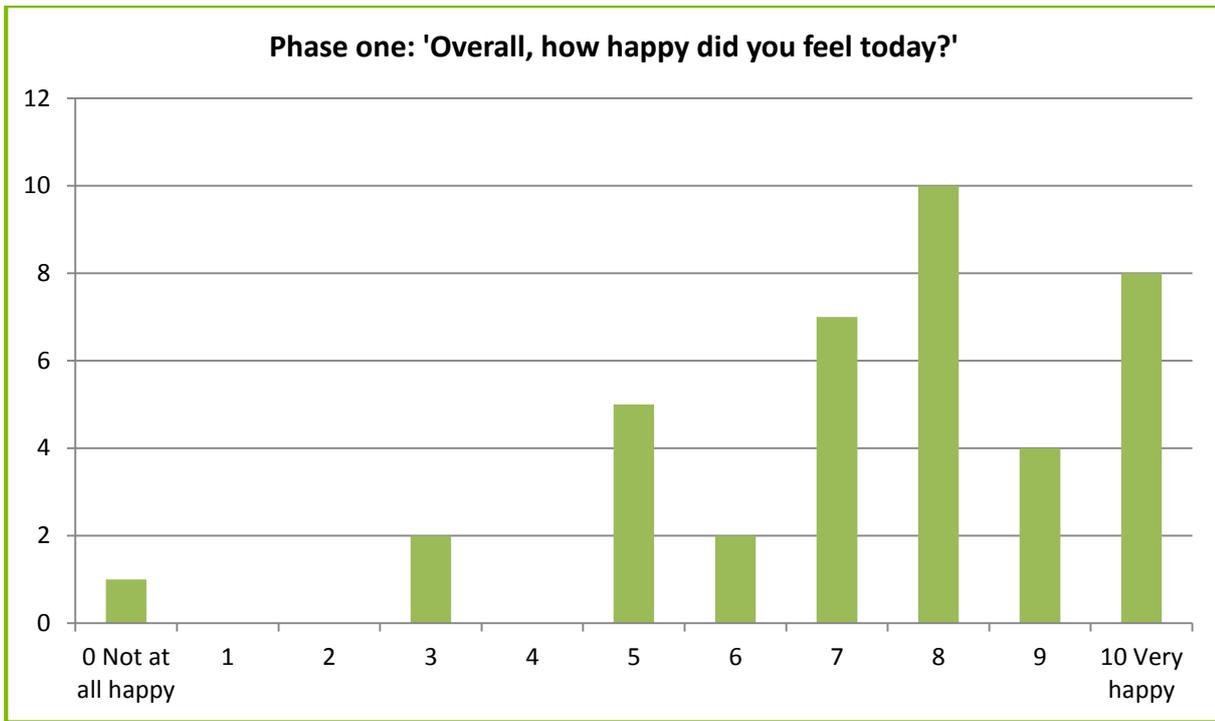


The trends observed in the first phase of the evaluation are similar to the trends observed in the second phase of the evaluation indicating that residents expressed similar levels of life satisfaction.



In the first phase of the evaluation, the majority of residents reported that they were not at all depressed. In the second phase of the evaluation the responses are mixed, indicating that some residents felt to varying degrees depressed when interviewed.

An explanation for this could be the time of year. Seasonal affective disorder (SAD), which is extensively researched, suggests that our mood is affected by the change in season. As the first phase of the evaluation was conducted in May/June and the second phase in February, it is possible to suggest that residents' moods were negatively affected by the time of year.



In the first phase of the evaluation, residents answered were skewed towards feeling happy. In the second phase of the evaluation, the responses are mixed.

Residents were asked what they thought gave them a good life. As found in the first phase of the evaluation, this question was difficult for some residents. Many residents answered with 'Don't know'.

The following things were mentioned as contributing to having a good life:

- Health and being healthy
- Having money
- Family and friends
- Family and friends visiting them in the care home
- The carers who take care of them
- Being able to be back at home
- Being able to get out and about
- To be able to see more people and having more visitors
- Activities such as, watching television, knitting and socialising

Excerpts of residents' responses to this question

"Seeing my family and my grandchildren – when they come to visit"

"Fred the dog"

"Life's what you make it"

"I'd like to be able to put my coat on and go shopping. I'd like to be spontaneous and in charge – but you have to accept it"

"My memories of my working life; I worked in health and safety and I loved it. I won an award"

"Visitors... my family don't visit very much as they live a long way away"

A detailed overview of each care home

The next section of results compares the resident's views and experiences of the services they have had contact with in the care home setting in the first phase and second phase of the evaluation.

1. Care Home 1

Question

Question	Phase 1 (N=15)	Phase 2 (N=9)
Different health professionals and services worked well together	<ul style="list-style-type: none"> 21% said that people worked well together and things ran smoothly 	<ul style="list-style-type: none"> 22% said that people worked well together and things ran smoothly
You are able to see your GP when you need to	<ul style="list-style-type: none"> 100% said they felt that they could see their GP when they needed to 	<ul style="list-style-type: none"> 89% said they felt that they could see their GP when they needed to
If you go to hospital they know your medication and any other needs you may have?	<ul style="list-style-type: none"> 60% said that if they went to hospital they would know their medication and other needs 	<ul style="list-style-type: none"> 67% said that if they went to hospital they would know their medication and other needs
If you need to ask questions about your health care do you know who to contact?	<ul style="list-style-type: none"> 87% would know who to contact if they had questions about their health care 	<ul style="list-style-type: none"> 100% would know who to contact if they had questions about their health care
Do you feel this person understands you and your condition?	<ul style="list-style-type: none"> 79% felt that this person understood them and their condition 	<ul style="list-style-type: none"> 67% felt that this person understood them and their condition
While you've been living here have you discussed your health care plan with anyone	<ul style="list-style-type: none"> 52% said that they had discussed their healthcare plan 	<ul style="list-style-type: none"> 11% said that they had discussed their healthcare plan
Do you feel that the health care provided meets your needs?	<ul style="list-style-type: none"> 73% said that they felt the health care provided met their needs 	<ul style="list-style-type: none"> 33% said that they felt the health care provided met their needs

In the first visit to this care home 52% of residents were aware they had discussed their healthcare plan. In the second visit to this care home, 11% of residents were aware they had discussed their healthcare plan, a noticeable decrease.

In the first visit to this care home, 73% of residents felt that the healthcare that they received met their needs. In comparison, in the second visit to this care home only 33% of residents felt that the healthcare provided met their needs.

Generally, residents felt they were able to see their GP when they needed to and believed the hospital would know their medication and additional needs, comparable to the residents' views in the first phase of the evaluation.

2. Care Home 2

Question

	Phase 1 (N=13)	Phase 2 (N=13)
Different health professionals and services worked well together	<ul style="list-style-type: none"> 33% said that people worked well together and things ran smoothly 	<ul style="list-style-type: none"> 23% said that people worked well together and things ran smoothly
You are able to see your GP when you need too	<ul style="list-style-type: none"> 85% said that they felt that they could see their GP when they need to 	<ul style="list-style-type: none"> 77% said that they felt that they could see their GP when they need to
If you go to hospital they know your medication and any other needs you may have?	<ul style="list-style-type: none"> 69% said that if they went to hospital they would know their medication and other needs 	<ul style="list-style-type: none"> 69% said that if they went to hospital they would know their medication and other needs
If you need to ask questions about your health care do you know who to contact?	<ul style="list-style-type: none"> 92% would know who to contact if they had questions about their health care 	<ul style="list-style-type: none"> 62% would know who to contact if they had questions about their health care
Do you feel this person understands you and your condition?	<ul style="list-style-type: none"> 62% felt that this person understood them and their condition 	<ul style="list-style-type: none"> 50% felt that this person understood them and their condition
While you've been living here have you discussed your health care plan with anyone	<ul style="list-style-type: none"> 46% of residents had not discussed their health care plan with someone 	<ul style="list-style-type: none"> 54% of residents had not discussed their health care plan with someone
Do you feel that the health care provided meets your needs?	<ul style="list-style-type: none"> 75% said that they felt the health care provided met their needs 	<ul style="list-style-type: none"> One person said yes, the others were not sure

Overall, responses recorded in the second phase of the evaluation were less favourable than those in the first phase of the evaluation.

3. Care Home 3

Question

	Phase 1 (N=14)	Phase 2 (N=10)
Different health professionals and services worked well together	<ul style="list-style-type: none"> 57% said that people worked well together and things ran smoothly 	<ul style="list-style-type: none"> 22% said that people worked well together and things ran smoothly (56% said this was not applicable to them)
You are able to see your GP when you need too	<ul style="list-style-type: none"> 79% said that they felt that they could see their GP when they need to 	<ul style="list-style-type: none"> 70% said that they felt that they could see their GP when they need to
If you go to hospital they know your medication and any other needs you may have?	<ul style="list-style-type: none"> 43% said that if they went to hospital they would know their medication and other needs 	<ul style="list-style-type: none"> 60% said that if they went to hospital they would know their medication and other needs
If you need to ask questions about your health care do you know who to contact?	<ul style="list-style-type: none"> 86% would know who to contact if they had questions about their health care 	<ul style="list-style-type: none"> 90% would know who to contact if they had questions about their health care
Do you feel this person understands you and your condition?	<ul style="list-style-type: none"> 71% felt that this person understood them and their condition 	<ul style="list-style-type: none"> 89% felt that this person understood them and their condition
While you've been living here have you discussed your health care plan with anyone	<ul style="list-style-type: none"> 57% of residents had not discussed their health care plan with anyone whilst living at the home 	<ul style="list-style-type: none"> 50% of residents had not discussed their health care plan with anyone whilst living at the home
Do you feel that the health care provided meets your needs?	<ul style="list-style-type: none"> 92% said that they felt the health care provided met their needs 	<ul style="list-style-type: none"> Only one individual answered this question (and said yes), the others didn't give an answer.

In the second phase there was an increase in the number of people who felt the hospital would be informed of their medication and other needs, who they should contact with questions about their healthcare and whether that person would know them and their condition.

Fewer people in the second phase felt that people worked well together, they could see their GP if they wanted, and that generally their health care provision met their needs.

Appendix A

RESIDENTIAL CARE HOME SURVEY 2016

VANGUARD

Are you:

A Resident

A Carer/Relative

Our first questions are to find out if the services that are taking care of you are working well together

Which health and care services do you have contact with?

Age UK

Doctor

Practice Nurse

Carers Wakefield

Occupational Therapist

Social Worker

Community Geriatrician

Pharmacist

District Nurse

Physiotherapist

Other:

If several different people or services were involved in your care and looking after you, did you find that everyone worked well together (that is they worked together as a team, sharing information and organising things so that everything ran smoothly)?

yes no sometimes not sure n/a

a) You are able to see your GP when you need to.

yes no sometimes not sure n/a

b) If you go to hospital they know your medication and any other needs you may have.

yes no sometimes not sure n/a

c) If you need to ask questions about your health care do you know who to contact?

yes no sometimes not sure n/a

d) Who is that?

e) Do you feel that this person understands about you and your condition?

yes no sometimes not sure n/a

In your experience, would you say that:

While you've been living here have you discussed your health care plan with anyone?

Yes No Not sure

Do you feel that the health care provided meets your needs?

Yes No Not sure

How involved do you want to be in decisions about your health care?

For example, 0 = I don't want to be involved; 10 = I want to be completely involved.

0	1	2	3	4	5	6	7	8	9	10
not involved					completely involved					

How involved do you actually feel in decisions about your health care?

0	1	2	3	4	5	6	7	8	9	10
not involved					completely involved					

Any comments:

The next questions are about your quality of life

1. What kind of things do you like to do that help you to feel independent?

For example, I can choose when to get up/go to bed or have a cup of tea; I get to go out to places I enjoy; I can be with people I like.

Do these things help you to feel as independent as you want to be?

Yes No Not sure

If 'No', what kind of things would you like to do that would help you feel independent?

Overall how satisfied are you with your life nowadays?

0	1	2	3	4	5	6	7	8	9	10
not satisfied						completely satisfied				

On a scale where nought is 'not at all depressed' and 10 is 'very depressed', overall, how depressed did you feel today?

0	1	2	3	4	5	6	7	8	9	10
not at all depressed						very depressed				

On a scale where nought is 'not at all happy' and 10 is 'very happy', overall, how happy did you feel today?

0	1	2	3	4	5	6	7	8	9	10
not at all happy						very happy				

What would you say gives you a good life?

Appendix B

Phase one highlight findings (all five care homes)

The highlight findings obtained from the first phase of the evaluation for *all five* care homes are presented below.

- Residents reported mostly having contact with the GP, district nurse, practice nurse, physiotherapist and occupational therapist.
- 47% of the residents interviewed reported they felt that health and care services worked well together.
- 88% felt that they could see the GP when they wanted to.
- 57% reported that when they went to hospital their medication and other needs were known.
- 84% said they know who to contact with questions about their health and care needs; 74% felt that this person understood them and their condition.
- Only 30% of those interviewed were aware of or discussed their health care plan with someone; 83% of those felt that the health and care provided met their needs.
- The remaining qualitative questions evoked mixed responses. Generally, themes of 'being safe and taken care of', 'being able to take part in activities and going out' and 'having contact with other people' were most prevalent.

Phase two highlight findings (three care homes in Vanguard)

- Residents reported mostly having contact with the GP, district nurse, practice nurse and physiotherapist. A couple of people had seen a pharmacist and/or an Age UK worker.
- 22% of the residents interviewed reported they felt that health and care services worked well together.
- 79% felt that they could see the GP when they wanted to.
- 65% reported that when they went to hospital their medication and other needs were known.
- 84% said they know who to contact with questions about their health and care needs; 69% felt that this person understood them and their condition.
- Only 13% of those interviewed were aware of or discussed their health care plan with someone; 22% of those felt that the health and care provided met their needs.
- The remaining qualitative questions again evoked mixed responses, although there was a slightly less positive overall 'feel' to the interviews with more people than previously reporting feeling depressed. As in the first phase, people felt that being healthy, having contact with other people and being able to get out and about and do things were most important in giving them a good life.

Contact us



Address: 11-13 Upper York Street, Wakefield WF1 3LQ



Phone numbers: 01924 787379 for staff and volunteers and 01924 234007 for advice, information and signposting



Email: enquiries@healthwatchwakefield.co.uk



Website: www.healthwatchwakefield.co.uk



Twitter: [@healthywakey](https://twitter.com/healthywakey)



Facebook: [Healthwatch Wakefield](https://www.facebook.com/HealthwatchWakefield)