

4th December 2023

Visit to
Merlin Manor
Care Centre



Contents

- 1) Introduction
- 2) Background – Merlin Manor Care Centre
- 3) Aims of the Visit
- 4) Methodology
- 5) The visit - Arrival at Merlin Manor Care Centre
- 6) Independence
- 7) Dignity & Privacy
- 8) Food & Nutrition
- 9) Involvement & Respect
- 10) Safety & Security
- 11) Health & Wellbeing
- 12) General Comments & Observations
- 13) Summary of Visit
- 14) Recommendations
- 15) Appendices
 - (i) Relative Questionnaire -summary
 - (ii) Visit Risk Assessment
 - (iii) Manager Questionnaire - summary
- 16) Acknowledgements
- 17) Service Provider Response

Healthwatch Hartlepool

Merlin Manor Care Centre

Enter and View Report

Visit to Merlin Manor Care Centre December 4th 2023

1. Introduction

In March 2020 Healthwatch England instructed all local Healthwatch organisations to follow government guidance and stop all face to face engagement with the public, including Enter and View visits. This prompted local Healthwatch organisations to develop other ways in which the delivery of health and care services could be observed and monitored. This was partially achieved by the development of virtual visits which enabled limited, but valuable insight into the delivery of services in health and care settings.

With the gradual lifting of Covid restrictions it has become possible to reintroduce face to face Enter and View visits and our visit to Merlin Manor is our second visit conducted fully in line with pre-covid visit arrangements. This allowed us to return to our normal practice of giving the service provider a two week window during which the visit would take place rather than a set date and time.

However, health and safety concerns are still paramount, and learning and practice develop which occurred during the pandemic have been incorporated into our visit procedures. This includes the continued use of visit risk assessments and conducting pre-visit discussions with the Home Manager online rather than in person.

Merlin Manor is Hartlepool's largest care home, so the visit was conducted by a five person visiting team. This was preceded by a virtual discussion with the Home Manager at which representatives from the visiting team were present. The visit followed parameters and safeguards mutually agreed by all parties which were formalised in a Risk Assessment which can be found in Appendix (i).

Details of visit

Details of visit:	
Service address:	Merlin Manor Care Centre Merlin Way Hartlepool TS26 0BF
Service Provider:	Prestige Care (HM) Limited
Date and Time:	4 th December 2023
Authorised Representatives:	Jane Tilly, Carol Sherwood, Margaret Metcalf, Michael Booth, Carol Slattery
Contact details:	Healthwatch Hartlepool, 1st Floor, Greenbank, Waldon Street, Hartlepool, TS24 7QS

2. Background – Merlin Manor Care Centre

Merlin Manor is a new, purpose built care home situated on the Bishop Cuthbert estate in Hartlepool. It is registered to provide personal and nursing care for up to 94 people. The home supports older people, those with physical disabilities or sensory impairments and people living with dementia. At the time of our visit there were 78 residents.

The home has a variety of lounges and dining rooms, and all 94 rooms have en-suite facilities. The home has a dedicated dementia floor which was specifically designed to promote a calm and relaxed living environment.

Specialist facilities, including adapted bathing areas and shower facilities, extra wide corridors and an integrated nurse call enable the provision of nursing care services.

This was Healthwatch Hartlepool's first Enter and View visit to Merlin Manor.

3. Aims of the Visit

Our overall aims were –

- To gather feedback from residents and family members of their impressions of care provision at Merlin Manor and how the care service has evolved since opening in 2022.

- To gain insight into the day to day provision of care within the home and the service provided including specific support for residents who are living with dementia.

4. Methodology

The visit to Merlin Manor was conducted by Healthwatch Hartlepool and as mentioned in the introduction, the visit was our second semi-announced visit since the relaxation of Covid 19 restrictions. It was delivered within parameters agreed with the Home and the Commissioning team of Hartlepool Borough Council and required considerable preparation and planning. The visit process commenced with an on-line discussion with the Home Manager at which the arrangements for the visit were discussed and agreed.

This was followed up by a five-person visit to Merlin Manor which took place during the afternoon of December 4th. The visiting team initially familiarised themselves with latest Healthwatch England guidance on conducting visits and most recent government guidance relating to Covid precautions when visiting residential care homes.

During the course of the visit, the visiting team spoke to 12 residents, 3 visitors the Care Home Manager, Deputy Manager and several staff members.

In addition to the visit, a questionnaire was also made available for family members to complete during a three week period around the date of the visit. A copy of the questionnaire and a summary of responses from the eight returned questionnaires can be found in Appendix(iii).

5. The Visit

On arrival at the Care Home, we were warmly welcomed by a staff member. Once we all signed the visitors' book, she took us to meet the Care Home Manager, Carole Gibson.

We thanked her for completing her manager's questionnaire (a copy of the completed questionnaire can be found in Appendix ii). We were seated in the large lounge area and further questions were asked. The questionnaires that the family members completed were given back to us, and then returned to Healthwatch. We did ask her if there was

anywhere in the home that we should avoid for any special reason, and Carol said she couldn't think of anywhere.

Near to the entrance, we saw a noticeboard on which a copy of the poster we had sent to the home informing family members of our intention to visit Merlin Manor was on display. The poster was also displayed in the lift. Dates of future resident/family meetings, and the agenda of the next meeting were also advertised.

We immediately noticed a lovely, welcoming Christmasy atmosphere, with lots of decorations on show. It is a large newly built home with 3 floors and large corridors. There are no problems with Wheelchair access. All of the staff are trained in basic dementia care. Those residents with dementia are on the second and third floor.

The home also accepts patients from hospitals and the community for rehabilitation to promote their independence and patients requiring palliative care.

6. Independence

Residents and relatives all agreed that there were plenty of activities on offer. There are weekly activities advertised on the noticeboard. One gentleman said he was playing carpet bowls earlier that day. Residents



also said that there are regular trips out, art sessions and quizzes. We noted examples of resident's artwork on the walls as we made our way around the building.

Different hairdressers visit the home twice weekly and all of those asked agreed there was choice in their daily routine.

There was always staff support, for those who needed assistance in moving about if required.

Personal items and choice of decoration in their rooms are encouraged, and residents told us that they had put up Christmas decorations in their rooms. We noted that some resident room doors had a picture of the occupant and some information such as their name and personal likes and

dislikes. We were told that relatives can visit at any time and did not have to give prior notice or make an appointment.

All the residents have the choice of voting if they wish to do so although most of those we spoke chose not to.

Residents told us that they have a choice in handling their own money. Most said they prefer family members to deal with their finances, but some do take care of their own money.

7. Dignity and Privacy

All agreed that staff always knocked before entering their rooms and residents informed us that they could bathe or shower as often as they wished. Assistance with dressing and bathing was always provided discreetly to those who required it.

All agreed that staff call them by their preferred name. All residents can practice their own religion if required and one resident said that her son takes her to church.

8. Food and Nutrition

Most residents agreed that the choice, temperature, quality and quantity of food were fine. One resident stated that “it was okay but not for them”. Another resident who previously had covid, had lost their taste at the time, but it has since returned. Overall, residents considered the choice of food available to be good.

All residents who responded said that they could choose where to eat but were encouraged to go into the dining room. There is always plenty of water and other drinks available. (Hydration Stations, throughout the home). However, we did notice that some resident rooms did not have water jugs in them.

Residents generally said that they enjoyed their meals, one resident said it varies and one said the staff encourage them to eat more.

One resident commented that they would prefer the food to be hotter.

Some residents commented that they must make their food choices for the day in the morning and sometimes cannot remember what they have chosen or wish to change their mind later in the day. Some found it hard

to read the menu from the noticeboard and would prefer to have a paper copy in plain large print.

Residents have a choice of dining rooms but can also eat in their room should they wish to do so. "I don't like to go to the dining room but can have my meals in my room."

9. Involvement and Respect

All residents and family members commented that staff are usually very respectful and polite. One person commented that one of the staff could be "a bit abrupt."

All agreed that any concerns raised are dealt with. (Suggestion box available).

The residents and families said that things are explained in an easily understood way, and when staff have time, they talk to us and listen to us talk about the things we like. Some relatives commented that staff are usually very busy so it can take a while before they are able to speak to you.

All said that they know how to make a complaint or give a compliment. In the main their relatives deal with it. Staff also support residents with day-to-day tasks.

Residents told us that the new manager had introduced resident meetings at which new ideas and any concerns could be discussed.

10. Safety and Security

Everyone we spoke to said that they felt safe and secure at Merlin Manor.

Residents also feel safe when equipment, such as hoists and mobility aids are being used, and there were always staff there to help and support if necessary.

Residents spoken to felt personal possessions were safe in rooms and staff always knocked, and only entered a resident's room when invited to do so.

Some residents were not aware of what the fire alarm sounds like, and others commented that they were aware as it regularly goes off!

Carol informed us that there are regular fire alarm checks.

We noted that one of the communal rooms was quite dark and unwelcoming. We were advised by the manager that it is due to be re-decorated in the new year.

We noted that much of the record keeping around medication was paper based rather than on a tablet or computer. A family member of a resident also told us that they had to remind staff to check their relative's medication in the afternoon.

11. Health and Wellbeing

Residents told us that staff regularly enquire as to how they are feeling and if they are happy with the care they are receiving. They also said that they felt involved in making decisions about their ongoing care. Some family members commented that their relative no longer had the capacity to make decisions themselves but that they were involved in discussions around changing care needs and wellbeing.

All residents agreed that the staff asked how they were feeling and if happy with their care. They are also encouraged/ and assisted to exercise.

If the residents' needs change, families are informed and involved in decision making along with Health Professionals and relevant outside agencies.

Some residents said they were encouraged/assisted to exercise but some said they had not been asked. Residents commented that the home plans for GP, optician, dentist and other necessary appointments.

Most residents agree that if they rang for attention, staff are available on each floor and will attend as quickly as possible. However, during the visit we did observe one resident who was in a distressed state and not quickly attended to, and another who was very upset as they did not have access to a table with water.

Concerns were raised by the Manager and other staff about late/unannounced discharge of residents back to Merlin Manor after 6pm. We were told that residents are always taken back, although it does create difficulties for the Home and the seamless, safe transfer of care.

Finally, as previously mentioned, two different hairdressers attend the home, one on Monday and one later in the week and are kept busy by the residents, ensuring they always look their best.

12. Dementia Specific Observations

Two members of the visiting team looked specifically at dementia care. They found the area to have neutral dementia friendly decoration and to be light and spacious.

Activities were provided in a dementia sensitive manner, and residents were encouraged to keep active. Chair exercises and other simple activities are regularly delivered for residents.

Staff were pleasant, friendly and interacted well with residents, and a lot of conversations were taking place. One lady who was unsteady on her feet was being supported by a staff member.

Rooms were spacious and room doors had pictures and some information about the resident on them.

We observed a quiet area in which the lighting was more subdued. There was a large bright clock in the passageway.

During discussions with staff we were told that when residents are taken to hospital appointments, they are accompanied by a staff member and there is no charge for transport.

Staff informed us that they had done dementia awareness training but would welcome the opportunity to do some more advanced training in order to enhance their understanding of dementia and the individual nature of the care they deliver. One or two staff were not wearing their ID badge.

We noticed that the phone often rang for long periods before being answered, or the call was ended before being picked up.

Externally, the garden area was not very attractive and is sloped. This is not ideal for residents who are living with dementia.

The dining area was quite clinical, and the walls would benefit from some pictures as in other communal areas of the building and a large clock in this area would also be beneficial.

Whilst staffing levels were said to be adequate, visitors were concerned that they would be stretched to the limit if an incident occurred in the unit which demanded the attention of several team members.

The Courtyard area on the dementia unit could be nice in the summer months but the visiting team felt it would be unsafe if dementia residents were left unsupervised as it is on the second floor, and someone could easily fall over the side. After speaking to Carol, she agreed it was not a safe area and is looking to maybe extend the railings or put something else in place.

13. Summary of visit.

We found Merlin Manor to be clean, warm, spacious, odor free and very welcoming. The building is new and the corridors are wide and accessible. All the staff we spoke to were friendly, engaging, and caring.

Residents were generally very happy with the home, their personal living space, and the quality of care they received. However, as previously mentioned we did encounter two residents who were quite distressed but did not see a quick response from staff in either case.

The choice and quality of food was good although some residents said that it could be warmer or wasn't for them. Drinks and snacks are readily available although some resident rooms did not have water jugs.

The specialist dementia area is appropriately decorated and as with other areas of the building staff were caring, sensitive and helpful. All areas were welcoming although the dining area would benefit from pictures on the walls as are present in other areas of the building. All staff have received dementia awareness training but more advanced training should also be made available and encouraged.

There is a good variety of activities which residents are supported to get involved in as well as trips out and special events and celebrations.

Externally the gardens are not attractive and due to sloping surface not suitable for use by most residents

14. Recommendations

1. That the manager and her staff team are commended for the overall standard of care provided at Merlin Manor and for recent improvements that have taken place.
2. Staffing levels continue to be monitored and reviewed, particularly in the dementia care area of the home.
3. Consideration is given to greater use of IT for recording and monitoring purposes.
4. Consideration is given to wider use of large print and pictures in menus, activity information etc to ensure all residents are aware of options and to maximise choice.
5. Redecoration of the dark communal area to create a brighter more friendly environment and pictures on the walls in the dementia unit dining area.
6. The current landscaping arrangements in the garden are reviewed in order to make the space more attractive and accessible for residents.
7. Dementia training is made available and promoted at a more advanced level to further develop staff awareness of the condition and understanding of support/care needs of residents living with the condition.

APPENDIX (i)

HEALTHWATCH HARTLEPOOL

VISIT RISK ASSESSMENT- ENTER & VIEW VISIT

Location of Visit Merlin Manor

Assessment Prepared by Stephen Thomas

Date of Assessment 09/112023

Date of Visit Between November 27th November and December 8th

Date Checked and Agreed by Home Manager

Comments - DRAFT Risk Assessment for proposed Enter and View visit to Merlin Manor between November 20th and December 8th by Healthwatch Hartlepool

What are the hazards/risks associated with the visit? What could happen? Please list	Who is particularly at risk?	What precautions or existing control measures are presently taken?	Risk of accident/dangerous occurrence of non-compliance High/Medium/Low	Actions
Risk of infection (Covid, Flu or other) from members of the visiting team	. <ul style="list-style-type: none">• Residents• Staff• Family members and other visitors	Pre-visit Precautions <ul style="list-style-type: none">• The visiting team will be limited to six Healthwatch Hartlepool E&V representatives (5 visitors and 1 support officer)• If available, visitors will be up to date with Covid vaccinations	High	<ul style="list-style-type: none">• Pre-visit virtual meetings with Home Manager (or designated representative) and HBC Commissioning Team to agree visit protocols and parameters.

	<ul style="list-style-type: none"> E&V visitor 	<ul style="list-style-type: none"> If available, visitors will have had the annual seasonal flu vaccine. Visitors will take a Lateral flow test on the day of the visit and on request, provide proof of a negative outcome to the Home Manager before the start of the visit. The Home Manager will provide HWH with any relevant H&S policies which the visitor is required to be aware of and observe during the visit. The visitors will attend a pre-visit virtual meeting with the HWH Development Officer, Home Manager (or designated representative) and HBC Commissioning Team representative to agree final visit H&S arrangements and protocols. 		<ul style="list-style-type: none"> HWH Development Officer to ensure that visitors present all relevant documentation prior to the visit and that it is made available to other parties on request. Visitor to ensure they have undertaken a Lateral flow test prior to the visit and that evidence is provided of a negative outcome. Visitor to attend any virtual preparatory meetings with HWH Development officer, Home Manager (or designated representative and HBC Commissioning Team) as required. Home Manager (or designated representative) to provide HWH with copies of all relevant H&S policies prior to the visit
<p>Risk of infection (Covid, Flu or other) from members of the visiting team</p>	<ul style="list-style-type: none"> Residents Staff Family members and other visitors E&V visitor 	<ul style="list-style-type: none"> Visit Precautions On arrival at the Home, the visitors will present evidence of positive lateral flow test outcome and their HWH Identity Card. The Home Manager (or designated representative) will provide a full briefing around H&S requirements which the visitors will be expected to follow during the visit. The visit will be limited to communal areas and 1:1 discussion with residents, family members and staff. 	High	<ul style="list-style-type: none"> Identification of best practice to ensure risk minimisation at pre-visit virtual meetings. <ul style="list-style-type: none"> Agreement of strict set parameters within which the visit will be conducted. Development of pre-visit questionnaire for residents' family members and visitors to minimise the need for face-to-face contact.

		<ul style="list-style-type: none"> • If requested, visitors will wear PPE in line with the policy of the Home and any underpinning legislative requirements during the visit, including mask, gloves, and apron. • If the Home reports an outbreak (Covid, Flu, sickness/ diarrhoea etc) the visit will be postponed. 		<ul style="list-style-type: none"> • Cancellation of visit if the home reports an outbreak (Covid, Flu, sickness/ diarrhoea etc)
	<ul style="list-style-type: none"> • Residents • Staff • Family members and other visitors • E&V visitor 	<p>General Requirements</p> <ul style="list-style-type: none"> • The visitors will dress in a manner which minimises infection risks in line with the Home’s health and safety policies. <ul style="list-style-type: none"> • Visitors will display their Healthwatch Hartlepool ID badge at all times. Failure to do so will bar them from taking part in the visit. • Visitors will observe all general H&S policies and practices of the Home and any instruction they receive from home staff during the visit. • All visitors will have completed the full HWH E&V training programme, and have a recent and verified DBS check. • Should a safeguarding concern arise during the visit, the lead visitor will immediately report the incident to the Home Manager and HWH CEO/Development Officer. A decision will be made as to whether the visit should be suspended. • The visitors will notify the HWH Office that they are safely home at the end of the visit. 	High	<ul style="list-style-type: none"> • HWH Development officer to ensure the visitor is aware of and compliant with all policies, procedures and requirements relating to the conduct of the visit • Visitors to contact HWH to confirm safe arrival home on conclusion of the visit. • Healthwatch Hartlepool Development Officer to ensure that the Home Manager is fully aware of the legislative parameters which govern the conduct and delivery of Enter and View visits • If a safeguarding concern arises, HWH and Care Home Safeguarding Policy/procedures will be followed

APPENDIX (ii)



A. About The Home

- Owners? [Prestige Care](#)
- Number of residents/beds? [94 beds 77 residents at present](#)
- Registration, what services are you registered to provide? [Nursing and personal care](#)
- Dementia friendly? (Examples of support for residents with dementia,)?
- [For those residents with Dementia activities are varied due to their level of need, some like 1-1 with staff. Some like anything musical.](#)
- [We take them out shopping, to the farm. At present they are helping putting up the xmas decorations](#)
- Specific Care needs of residents (eg living with dementia)?
- [Staff will check the residents care plan to ensure that if they have any specific needs they ensure that that need is catered for](#)

B. Staffing

- Number/types of staff? [16 day staff 2 nurses 3 seniors 12 care staff](#)
- Staffing levels day/night? [2 nurses 2 seniors 6 care staff](#)
- Staff Qualifications (including managers)? [Manager-level 4 and RMA](#)

- Seniors level 2 and 3
- Nurses have a pin number
- Staff Turnover? Varied due to home being in set up
- Staff training mandatory/optional? (for example, dementia awareness and safeguarding)?
- All staff have to complete courses with regards to safeguarding and dementia awareness.
- We also access the safeguarding team at Hartlepool council if we have further training needs

C. Activities

- Activities Co-ordinator? 3 at present
- Daily activities?
Merlin has a daily planner of activities, these may change but residents are always informed
- Special occasions?
- Are special occasions are also on the daily planner
- Do you find out about your residents' areas of interest and try to accommodate them?
- Activities try to accommodate residents choices of daily activities

D. Safety and Security

- Safeguarding procedures?
- We have our own policy and procedures for safeguarding but also follow the L/A guidance
- Access to the building?
- We have 2 entrances which are coded and maned by staff
- Trips and falls?
- All falls are referred to the falls team
- Wheelchairs and other equipment, management and use?
- These are checked monthly by the handyman, and if its not in working order it is referred to wheelchair services
- Personal possessions and money?
- Inventory list completed on admission
- Admin deals with any money the family wish to leave at Merlin

- Emergency/evacuation procedures?
- All staff are trained on emergency and evacuation procedures
- Staff also complete fire drills on a regular basis

E. Wellbeing

- Resident contact with GP's and community Nurses?
- All residents have access to both when they require
- Medication management?
- Cothams is our chosen pharmacy
- Oral hygiene/dentistry?
- Mr Powells
- Eyesight and hearing?
- Specsavers
- Podiatry?
- Fetching feet
- Feeding, hydration, diet and support offered to residents?
- Each resident has a diet notification sheet alerting staff and kitchen of the residents likes, dislikes and any food they have a reaction to.
- Hydration station and snack boxes are available on every floor.
- Some residents need verbal prompts from staff and some residents need full assistance from staff, this information is documented in their care plans
- Washing and bathing, frequency and timings?
- There is no frequency and timings, it is when the residents choose to bath
- Building temperature?
- Unknown-heating is now always on throughout the building

F. Other issues

- Residents and decision making?
- We openly encourage residents and family to be involved in their care plan

- Contact with family members?
- We have an open door policy and residents families are allowed to visit when they want

- Complaints/compliments procedures?
- We follow our companies procedure

- Hospital discharge – recent experiences?

Any other comments



Questionnaire For Relatives/Carers - Merlin Manor
Forms Completed - 8

Independence

1. Are you happy with the variety of activities and the amount of exercise offered to your relative?

Yes (7)

No, there are a few through the week but none over the weekend. Residents get bored.

2. Does your relative have a choice of when to go to bed and when to get up?
Definitely, can sleep whenever they want to.

Yes (6)

No

3. If your relative has a interest e.g. gardening/art – are they given the opportunity to enjoy this?

Yes, they enjoy art

N/a

Yes (5)

Yes, weather permitting.

Food & Nutrition

1. Is the food varied, plentiful and well presented?

Yes (5)

Normally yes (2)

No. Deserts are much the same. For someone who eats well it is not enough.

2. Has your relative the choice of where to eat his/her meals?

Yes, definitely

Yes (7)

3. Is assistance available if required?

Yes (8)

4. Are there sufficient drinks available?
Always
Yes (4)
Yes, drink stations on all floors.
Mostly yes, but there have been occasions when this has not been the case.
No

5. Are any health issues (e.g. diabetes) addressed?
Yes (7)
Health needs are well taken care of.

Involvement/ Respect

1. When you visit, have you noticed staff talking to your relative?
Yes, a lot
Yes (5)
Yes, very interactive.
The staff are great and x speaks very highly of them

2. Do they treat them with respect?
Yes (6)
Yes always (2)

3. Try to involve them in activities?
Yes, always (2)
Yes (5)
Sometimes

4. Are they aware of the needs/mood swings of your relative?
Yes (8)

5. Do they assist where necessary but encourage where possible?
Yes always
Yes (7)

6. Do they attempt to explain if a new situation arises?
Yes, they do but it must be hard
I believe so
Yes (5)
Yes always

Health & Wellbeing

1. Are you happy with the personal care given to your relative?
Yes (7)
Generally yes
2. Are they clean (nails, hair, teeth, etc) and offered the chance to bathe often?
Yes (6)
Believe so although not sure of frequency
Most times
3. Are their clothes their own and clean?
Yes, always
Yes (7)
4. Do they have their own spectacles; hearing aids etc?
Yes (7)
No
5. Is medication given on time?
Yes, always
Painkillers have often been requested, generally, I believe medication is given on time.
I believe so
Yes (5)

Safety & Security

1. Do you think your relative is safe and secure?
Yes, without doubt
Yes (6)
Yes very much so
2. Does he/she appear to be happy using equipment such as hoists and walking frames?
They don't need them
Yes (7)
3. Are there always staff available to help and support?
Yes, when needed
Yes, although you may have to wait until staff have completed another resident needs
Yes (5)
Yes, although occasionally you may have to wait a while

4. With regard to personal articles are you happy that your relatives' belongings are safe?
Yes (8)

If their needs change

1. Are you told about this?
Yes, as yet he is ok
Not always unless I ask
Yes (6)
2. If able, is your relative involved in decisions?
They lack capacity
Yes (7)
3. Are you involved in any decisions about their care?
No, I am the sister in law
Yes (5)
Yes, the staff talk to me and I am kept updated.

Complaints

1. If you are not happy or have an issue of concern, do you know to whom, how and where to pass on your complaints?
Yes (6)
Yes, Clinical Lead or Manager

Any other comments

- I am happy with everything thanks.
- Staff are always extremely helpful but like any organisation sometimes they appear to be short staffed. They have an excellent activities team and the situation has improved immensely since the new Manager's arrival.
- Basically it's a few things that need to be addressed but a fabulous place to live.
- The staff here are great, very caring and supportive. X is happy here.

16. Acknowledgements

Healthwatch Hartlepool would like to thank Home Manager Carole Gibson and the staff team for answering our questions honestly and for ensuring this was an enjoyable visit. We wish them all well for the future. Also, our thanks go to the family members who took time to complete our questionnaire and residents and visitors who spoke to us on the day of the visit.

Finally, we also want to thank staff from Hartlepool Borough Council's Commissioning Team for their help and support in organising and facilitating our visit.

17. Service Provider Response

Hi Stephen

Below is my response to the Healthwatch Visit.

We always have a varied choice with our menu and if residents do not like both choice the chef will accommodate with a meal of their choice.

Each resident is asked on admission their likes and dislike and this is put onto their landing page to make all staff aware, and the sheet is also given to the kitchen who have a file and a white board which confirms any allergies that a resident has.

Food temperature is checked prior to being delivered to each floor via the hot lock.

If a resident felt that their food was not hot enough, they have the option of a fresh meal.

Some of our residents choose not to have a jug of water in their room, These are taken out of the residents who choose to have a jug x2 daily and refreshed.

At Merlin we plate up 2 small meals to show the residents the choice of meal for that day, and we also have a picture menu book.

Sometimes it may take staff time to speak to them but this maybe because our residents need to take priority, and this may be why staff are not always available to speak to a family member immediately.

Staff ensure that if medication is time specific, they set their phones to activate an alarm, so family have no need to remind staff.

During your visit we did have a new resident who staff did attend to constantly during your visit and even I attended to him during your visit, sadly the resident passed away during the same night.

Redecoration is to start in February of the lounges, and the colour is to be changed in the top floor lounges.

Sometimes we feel that subdued lighting on that floor is more suitable, and this helps with sun-downing.

The company has increased its Dementia training and there is a full day course on today for those residents with challenging behaviour. As a growing care home and new staff coming into place, we now will increase the courses to benefit our staff ensuring that whatever floor they work on they feel comfortable in their job role. A course for Dementia is already on their ELFY training which has to be completed prior to starting work at Merlin Manor.

I check our dependencies on a daily basis to ensure that we are working to the correct level and at present we work over our expected hours and have a higher level of staff in each department of the home.

All staff have now received their name badge which were on order but do take a long time to come.

Our phones ring through to that floor and if staff are busy, they are unable to answer straight away, if its not answered an email comes to my computer and I will then deliver the message to the correct floor, at times the caller will pick any extension and not the correct one.

Our outside garden area is going to be looked at this year with the company's gardeners and adjust it to make it more accessible to all residents.

Kind regards

Carole Gibson