



healthwatch
in Devon, Plymouth and Torbay

**"Something Someone Told Me"
Care Home Lay Visiting Project**

Merafield View Nursing Home

Lay Representative Report

February 2025



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About us

Healthwatch in Devon, Plymouth, and Torbay (HWDPT) are the three local independent consumer champions for people using health and social care services across Devon.

Local Healthwatch organisations were established as independent bodies run by local people, for local people. They are part of a national network of Local Healthwatch in England that was set up under the Health and Social Care Act 2012.

Healthwatch engages with the local community effectively and gives residents of Devon, Plymouth and Torbay a stronger voice to influence and challenge how health and social care services are provided for them.

Background

In July 2024, Healthwatch Plymouth held discussions with the Social Care Quality Assurance & Improvement Team (QAiT) at Plymouth City Council to discuss ways of increasing feedback from residents in Care Homes by re-establishing a programme of care home lay visiting that was curtailed by the Covid-19 pandemic in 2020.

The “Something Someone Told Me” project is a joint initiative delivered by Plymouth City Council and Healthwatch Plymouth. Its purpose is to gather thoughts, views and ideas from residents, relatives and providers of local care homes and is based around the ‘My Home Life Programme’. It allows Healthwatch Plymouth to have conversations with residents and their relatives of local care homes that covers aspects of the ‘My Home Life Programme’. Healthwatch Plymouth also sought feedback from care home providers and managers to give them a say on the challenges they face in delivering the programme.

Feedback is gathered around five key themes:

- Maintaining identity
- Creating community
- Shared decision making

- Improving health and healthcare
- Promoting a positive culture.

To help in gathering feedback and to provide a consistent process, Healthwatch Plymouth devised a series of points to aid in the discussions with residents, relatives and providers. A list of these points is available in the Annex.

Merafield View Nursing Home

Merafield View Nursing Home is a residential and nursing care home situated in Plympton and accepts both private and Local Authority funded individuals.

Residents varied in age, being permanent residents or short term placements, and reasons why they were at the home. The visit focused on the residential care side of the home where there are currently 40 registered beds and 27 residents.

The home does not cater for residents with diagnosed Dementia and work with Adult Social Care if a resident is subsequently diagnosed to ensure that their needs are addressed. In 2024 they won four Celebrating Excellence Awards.

On the day of the visit the environment of the home was clean and tidy in all areas. We were able to observe and interact with differing types of residents, from those needing lots of physical care and limited communication ability, and those with more physical and communication ability.

Executive Summary

On the 4th February 2025 Merafield View Nursing Home was visited by two lay representatives of the Healthwatch Plymouth Volunteer Team. This report summarises insights from resident conversations with our lay representatives, as well as provider feedback, focusing on five key themes:

- Maintaining identity
- Creating community
- Shared decision making
- Improving health and healthcare
- Promoting a positive culture.

Summarised Key Findings

- Across all areas, residents expressed high levels of satisfaction, with staff praised for their warmth, attentiveness, and respect for individual preferences.
- The home creates a supportive environment where residents can maintain independence, stay connected with loved ones, and engage in activities that bring joy and meaning to daily life.
- Merafield View Nursing Home is to be commended for its dedication to providing meaningful, person-centred care to its residents.
- The home consistently goes the extra mile, creating special moments and making life as fulfilling and enriching as possible – even for those in their final stages of life.

Summarised Key Recommendations

We recommend that Merafield View Nursing Home be used as a benchmark for other Plymouth-based nursing homes, exemplifying what 'good' looks like in creating an environment that truly feels like home for residents.

Conversational Findings and Survey Responses

The following is a summary of the conversations held with residents during the visit, around the five key themes outlined previously. This also incorporates feedback from the care home registered manager, which was provided through an online survey.

Maintaining Identity

Findings from our visit

During our visit to Merafield View Nursing Home, it was clear that residents were supported in maintaining their independence and personal identity. There was evident positive communication between staff and residents, with residents openly expressing their ability to live their daily lives as they wished. This included participating in both group social activities and independent activities in their rooms, depending on their preferences and abilities.

A dedicated staff member is responsible for organising activities and exercise sessions for all residents, while also assisting with other duties when needed. Her enthusiastic and engaging personality made her a popular presence among the residents, who spoke highly of her contributions to their daily lives.

Residents also had access to various personal and communal resources that supported their ability to make choices about their day-to-day activities. Many had personal mobile phones, while others could use the home's phone and Wi-Fi. Newspapers, magazines, books in different readable formats, and televisions were available in communal areas, contributing to an environment where residents could interact in ways that suited them.

Family involvement in decision-making was also noted, with relatives being included when residents wished and were able to make personal and safe choices. However, it was also observed that at least one resident lacked the mental capacity to make decisions independently.

Residents' rooms were highly personalised, reflecting their individual tastes and preferences. During our visit, we had the opportunity to observe and interact with a diverse range of residents, from those requiring significant physical care to those who were more independent in their communication and mobility.

The overall impression was that the home fosters a supportive and flexible environment where residents' identities, preferences, and needs are respected.

Provider's Response to Maintaining Identity

The home stated the following:

- They have established policies, practices and staff training to ensure residents' spiritual, cultural, social, and personal needs are met. Upon admission and during monthly evaluations, nursing staff assess any specific requirements related to identity, such as religious observances, cultural practices, or personal relationships.
- Within 24-48 hours of admission, nursing staff identify any language or communication barriers and document them in Care Control, the home's digital care recording platform, to tailor support to the resident's needs. The introduction of Care Control has strengthened the home's ability to manage communication needs effectively, leading to a nomination for a 'Recognition Award for the Implementation of a Digital System' by the Health Innovations Southwest Network.
- In relations to safeguarding, staff and management state they are proactive and comfortable managing and reporting concerns to Plymouth Safeguarding Adults Board in an open and transparent manner, and that this is a smooth process with no concerns.

Examples shared by the provider include the following:

- At a family's request, the home arranged for a Catholic priest to visit a resident at the end of their life.
- Another resident receives weekly visits from their minister, who spends time reading and talking with them to meet their spiritual needs.

- Supporting two married couples living at the home, enabling them to spend quality time together despite physical and mental health disabilities. Staff facilitate moments, such as holding hands, sharing chocolates, or simply sitting together.
- Using a writing board to assist a profoundly deaf resident.
- Working with family members to learn key phrases for a resident who spoke Italian, and providing flashcards for a resident with expressive dysphasia.

Creating Community

Findings from Our Visit

Merafield View Nursing Home promotes an open-visiting policy, allowing families to visit at any time. During the visit, a birthday party had been arranged for a resident's son, demonstrating the home's commitment to fostering family connections.

The activities coordinator was seen working closely with both residents and their families to arrange events and activities that were meaningful to them. Residents and families spoke highly of the staff's efforts, and feedback on the whole was positive on all points.

Provider's Response to Creating Community

The home stated the following:

- The caring nature of Merafield View Nursing Home staff and empathetic approach builds relationships of trust and understanding with residents.
- Merafield View Nursing Home has received multiple awards for excellence in care, reflecting its commitment to maintaining high standards and fostering a strong community ethos.

Examples shared by the provider include the following:

- Hosting a wedding: One resident on end of life care was fearful of missing out on her son's wedding. The home arranged with her son to host their wedding at Merafield View Nursing Home, where an exchange of vows took place, in full bridal regalia, a celebrant, a harp, bubbles and wedding cake with the whole family present.

- One resident, a former Captain in the Navy, staff organised a surprise visit from the Captain of Devonport Naval Base and Royal Navy personnel, on his 101st birthday along with a homemade cake.
- Monthly visits from Plympton St Maurice Primary School, where children take part in themed activities with residents, building intergenerational connections.
- Pet therapy with Millie the dog.
- Pamper days, including hand massages and self-care treatments, promoting relaxation and wellbeing.

Sharing Decision Making

Findings from Our Visit

There was no indication of regular meetings between residents and management to discuss the running of the home. However, each resident had an individual care plan, which they had access to, and these were updated as required by visiting healthcare professionals and care home staff.

Residents appeared very happy with their day-to-day lives and were given personal choices around daily routines and room personalisation.

Provider's Response to Sharing Decision Making

The home stated the following:

- The provider acknowledged that formal resident and relative meetings had not been held regularly in the past but stated that, following this review, they plan to reintroduce monthly meetings. They noted that the home primarily accommodates nursing and end of life (EOL) care residents, which has previously limited opportunities for group engagement.
- Staff have a good working knowledge of the Liberty Protection Safeguards (LPS) and the Mental Capacity Act (MCA), and apply these principles daily with all residents.
- Merafield View Nursing Home was accredited as Plymouth's first Compassionate Care Home and continues its commitment to best practices in EOL care. Staff work closely with St Luke's Hospice, with the

Manager and a Nursing Assistant serving as EOL Champions after completing their Six Steps training. Regular training ensures nurses are equipped with essential skills such as symptom management, syringe driver use, and verification of death, allowing for dignified and well-managed care. The home also supports open discussions around advance care planning, with feedback from relatives highlighting how this process has made difficult conversations easier to navigate.

- The provider has integrated mental health support for staff, with trained Mental Health First Aiders, well-being initiatives, and recognition events to ensure a positive and emotionally resilient care environment.

Examples shared by the provider include the following:

- Staff knock on a door before entry, address residents with their chosen name, and find out residents likes and dislikes. They currently have a resident who is referred to on formal occasions as 'Captain'. These wishes and decisions are captured in their care plans from moment of admission.
- They receive many thank you cards and gestures from families and residents, thanking the staff for the care they have received and the positive experiences they have at Merafield View.

Improving Health and Healthcare

Findings from Our Visit

Merafield View Nursing Home demonstrated a strong commitment to residents' health and wellbeing, offering access to healthcare professionals and tailored support for individuals. A dedicated staff member focused on activities and exercise, promoting both social and physical wellbeing among residents. The home also has an established working relationship with St Luke's Hospice, ensuring additional support for residents receiving EOL care.

Residents had access to external healthcare services, including their GP surgeries, physiotherapists, occupational therapists, and district nurses. Some residents were at Merafield View Nursing Home on a temporary basis while waiting for care packages to return home. It was noted that one resident expressed frustration over the delays in arranging their discharge.

Residents had the opportunity to choose their meals the day before, with dietary needs carefully accommodated, including food options for those with swallowing difficulties or other dietary requirements. Medication was securely stored in a locked cupboard, though some residents had personal access to items such as inhalers and nutritional supplements in their rooms.

Overall residents were very positive in how staff interacted with them on many issues and felt included in ongoing health/discharge concerns.

Provider's Response to Improving Health and Healthcare

The home stated the following:

- Merafield View Nursing Home collaborates closely with external healthcare professionals. They highlighted the positive relationship with Beacon Medical Surgery, who provide an enhanced care home service with a local pharmacist, GP and advanced practitioner. This service includes regular medication reviews, acute prescribing, and online medication ordering.
- The home liaises with specialist services such as tissue viability nurses, continence services, speech and language therapists (SALT), and dietitians.

Examples shared by the provider include the following:

- A recent success story has been that a resident, previously reliant on liquid nutrition via PEG feeding, was able to transition to oral intake with support from dietitians and SALT. The resident's goal was to enjoy a cup of tea and a scone with jam and cream—while this has not yet been achieved, the liquid feed has stopped, and the resident is enjoying Weetabix for breakfast.

Promoting a Positive Culture

Findings from Our Visit

The home fosters a positive and engaging atmosphere, with residents benefiting from a variety of activities. A key feature of this was the involvement of animals, including dogs, alpacas, and Dartmoor ponies,

which were brought to the home for residents to interact with. These visits were extremely popular, with families also invited to attend, leading to apparently only standing room in the main reception!

A designated activities coordinator was responsible for planning and facilitating these events. Residents spoke positively about her efforts, and it was evident that she took an active role in making activities accessible and enjoyable. There was evidence individual residents were taken shopping by the coordinator. The home also supported residents to go out with family members if they wished and were able to do so.

One small note was that there was access to a very small lift between floors, leaving enough safe room for one member of staff and a patient. There was access to wheelchairs and other patient support equipment and seating, but this was limited.

Provider's Response to Promoting a Positive Culture

The home stated the following:

- They provide a structured activities programme that encourages residents to participate in both group and individual activities. The activities coordinator plays a key role in organising engaging sessions and facilitating visits from external guests to enhance social interaction. Residents who wish to go on trips to local community venues are supported in doing so.
- The home is designed to be accessible, allowing residents to access all common areas of the home, including those with disabilities.
- Family and friends are welcome to bring food, with storage facilities available to accommodate their contributions.

Healthwatch Observations

Merafield View Nursing Home was observed to be an outstanding nursing home by our visiting team and was clean and tidy in all areas. The home accommodates both permanent and short-term residents, with varying needs and circumstances, and maintains a strong working relationship with St Luke's Hospice.

Staff were genuinely working as a team, with employees themselves highlighting the positive working environment. Residents were offered a

range of activities and experiences, with opportunities for individual outings where possible and animal visits carefully managed with attention to health and safety.

Residents were delighted and pleased with their care and support. In fact, they made sure we knew their opinions quite forcefully! No obvious negatives were noted during the visit, and no concerns were raised that appeared to impact residents' wellbeing.

Merafield View Nursing Home is to be commended for its dedication to providing meaningful, person-centred care, ensuring that residents not only receive the support they need but also experience joy, dignity, and a true sense of belonging in their later years. The home consistently goes the extra mile, creating special moments and making life as fulfilling and enriching as possible – even for those in their final stages of life.

Recommendations

We recommend that Merafield View Nursing Home be used as a benchmark for other Plymouth based nursing homes, exemplifying what 'good' looks like in creating an environment that truly feels like home for residents.

Acknowledgements

Healthwatch Plymouth would like to thank staff, residents and relatives from Merafield View Nursing Home for their time to answer our questions. Their welcoming, helpful approach was much appreciated.

Particular thanks go to our lay representative volunteers, whose dedication and support continue to make this project possible.

Annex A – Residents/Relatives points for conversation

Maintaining identity

- Do you feel that you are treated as an individual by management and staff?
- If you have communication needs i.e. language, sign language, hearing loop, braille or large print documents, do you feel that the provider meets those needs?
- Do you have access to a fast Wi-Fi connection, computer access, email and internet, as well as phones/devices to video call with family?
- Do you feel that the provider is open to meeting any spiritual, cultural social and sexual needs that you may have in a sensitive manner?

Creating Community

- Does the management and staff promote a sense of community within the home, and do you feel that you have a sense of belonging, purpose and security?
- Do you have a sense of fulfilment from being a resident in that you are treated as an individual, but also a member of the home's community?

Sharing Decision Making

- Are there regular meetings between residents and management that look at how the home is run? If so, are your views residents and those of your relatives gained and considered to improve practice?
- Do you feel that you are empowered to make decisions about your care and daily living i.e. flexibility when you go to bed or get up, are you able to control the amount of lighting or temperature of your room?

Improving health and healthcare

- Are you registered with and have access to a GP, and do you receive annual health/medication reviews?
- Do you have access, if required, to support from specialist services i.e.: Parkinson's nurse specialist, heart specialist, dentist, optician, etc?
- Do you believe that your health needs are met, and you are taken seriously if you become unwell?
- Are your relatives/carers informed when you become unwell or any changes are made to your treatment?
- If needed, are you provided with specialist equipment i.e., walking aids, specialist chairs, pressure relieving mattress/aids?
- Is assistance readily available to help you with activities of daily living – getting in and out of bed, to the dining room, eating, etc?
- If you have a disability and need easy access shower/bath facilities, are they available for you to use with assistance if required?
- Are you encouraged to have regular showers or baths?

Promoting a Positive Culture

- Do you feel that the staff supports you to play an active role in the running of the home?
- Is an activities programme provided by the Home? If so, are you encouraged to take part in any activities with others?
- Does the Home encourage people from outside to visit i.e. someone playing music, simple exercise, Arts and Crafts?
- Equally are trips out organised for residents i.e. to local community venues?
- Are you able to access all resident's areas of the home, especially if you have a disability?
- Can you choose your meal from a menu and if you need a special diet, is this catered for?
- Can your family and friends bring in food?

Annex B – Provider Survey Questions

Personal details

- Care Home Name:
- Your Name:
- Job Title:
- Number of Residents:
- Patients: tick all that apply
 - Nursing
 - Residential
 - Dementia
 - Learning Disabilities or Autism Spectrum Disorder
 - Mental Health
 - Older People
 -

Maintaining identity

- As a provider are you open to meeting any spiritual, cultural social and sexual needs that residents may have in a sensitive manner? [Yes/No]
 - If 'yes', What are you able to facilitate?
- If a resident has communication needs i.e. language, sign language, hearing loop, braille or large print documents, are you able to meet those needs? [Yes/No]
 - If 'yes', What processes or systems do you have in place?
- Do your residents have access to a fast Wi-Fi connection, computer access, email and internet, as well as phones/devices to video call with family? [Yes/No]
 - If 'yes', What items do they have access to and how often are they used?

- Have you had recent experience (within the last 12 months) of making a safeguarding alert to the Plymouth Safe Guarding Adults Board? [Yes/No]
 - If 'yes', Is information on how to make a report clear?
 - If 'yes', Did you find the process to make the report easy?

Creating Community

- Do you feel that management and staff promote a sense of community within your home so that residents feel that they have a sense of belonging, purpose and security? [Yes/No]
 - If 'yes', What measures and activities do you have in place?
- How do you measure the sense of fulfilment a resident has, not only by being treated as an individual, but also as a member of the home's community?

Sharing Decision Making

- Are residents and relatives encouraged to have an active role in the running of the home? [Yes/No]
 - If yes, Are there regular meetings between residents and management (group and 1:1) that look at how the home is run? [Yes/No]
 - If yes, How often are these meetings held?
- Are the views of residents and their relatives considered to improve practice?
- Are residents empowered to make decisions about their care and daily living, for example, flexibility when they go to bed and get up, able to control the amount of lighting or temperature of their room? [Yes/No]
 - If 'Yes' what processes are in place to encourage this? [Free text]

- What processes are in place when an individual is approaching end of life?
- Do you initiate conversations to help someone plan their end of life care?
- Do you develop support systems for individuals, staff, friends and relatives as part of compassionate communities?
- Are End of Life patients, if appropriate, able to self-medicate?
- If a resident has a TEP (Treatment Escalation Plan) where are these kept?
- If applicable, do you recognise the challenge, and develop systems, for end of life care in dementia/those with learning disabilities?

Improving health and healthcare

- How are residents registered with a GP and what routine access to a GP do they have?
- Do they receive annual health and medication reviews from their GP [Yes/No]
- How is your relationship with GP practice(s) that support the home?
- If you request a GP visit, is this responded to in a timely manner? [Yes/No]
 - If no, when does the visit occur?
- Do residents have access to dental services and opticians? [Yes/No]
 - If 'yes', Will these services attend the home if the resident's mobility is severely restricted? [Yes/No]
- Is the home affiliated to any dental practice and optician service? [Yes/No]
 - If 'yes', what are the names of these practices
- Can staff and patients access support from specialist services, for example, Heart Failure, Parkinson's nurse specialist, tissue viability nurse specialist? [Yes/No]
 - If 'yes', what specialist services are you currently accessing?
- What processes are in place to meet residents ongoing health needs i.e. podiatry, dementia, mental health?

- Are residents' relatives/carers informed when they become unwell, or any changes are made to their treatment? [Yes/No]
- If needed, are residents able to access or are provided with specialist equipment, for example, walking aids, specialist chairs, pressure relieving mattress/aids? [Yes/No]
- Are residents encouraged to have regular showers or baths? [Yes/No/N/A]
- If residents have a disability and need easy access shower/bath facilities, are they available for use with assistance (if required) when requested by the resident? [Yes/No/N/A]

Promoting a Positive Culture

- Do you provide an activities programme for residents? [Yes/No]
 - If 'Yes', are residents encouraged to take part in the activities with others? [Yes/No]
- Does your care home encourage people from outside to visit i.e. someone playing music, simple exercise, Arts and Crafts? [Yes/No]
 - If 'No', what are the reasons for this?
- Are trips out organised for residents i.e. to local community venues? [Yes/No]
 - If 'No', what are the reasons for this?
- Are residents able to access all common areas of the home, especially if they have a disability? [Yes/No]
 - If 'No' What are the barriers to this?
- Can residents choose a meal from a menu? [Yes/No]
- If they need a special diet, is this catered for? [Yes/No]
 - If 'No', what are the barriers to this?
- Can family and friends bring in food? [Yes/No]
 - If 'Yes' is there a facility available for items to be stored in a fridge/cupboard? [Yes/No]

Additional Comments

- Is there anything you are currently doing in your care home that you are really proud of, has made a significant difference for residents, or that you feel is best practice in the industry? And is something you would be happy to share with other homes?
- Finally, do you have any additional comments you would like to share or any other general feedback?

healthwatch Devon

c/o Colebrook (SW) Ltd
William Sutton Memorial Hall,
6 Shelley Way, St Budeaux,
Plymouth, PL5 1QF
t: 0800 520 0640
e: info@hwdpt.org
www.hwdpt.org

healthwatch Plymouth

William Sutton Memorial Hall,
6 Shelley Way, St Budeaux,
Plymouth, PL5 1QF
t: 0800 520 0640
e: info@hwdpt.org
www.hwdpt.org

healthwatch Torbay

Paignton Library and Information Centre
Great Western Road,
Paignton, TQ4 5AG
t: 0800 520 0640
e: info@hwdpt.org
www.hwdpt.org