# **'Enter and View' Report**Chaston House Care Home

11 Acacia Road, Acton, London, W3 6HD



Healthwatch Ealing

8<sup>th</sup> February 2018



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# Introduction

#### **Details of Visit**

Details of Visit:		
Service Visited	Chaston House Care Home	
Service Address	11 Acacia Road, Acton W3 6HD	
Service Provider	Chaston House Limited	
Care Home Manager	Rosalinda Taylor	
CQC Rating	Good	
Date of CQC Report	27 July 2016	
Status of Enter & View Visit	Announced	
Date and Time	Thursday 8 <sup>th</sup> February 2018, 10am to 2pm	
Authorised Representatives	Oyinkan Adesiyan, Sahar Alla	
Lead Authorised Representative	Oyinkan Adesiyan	
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# Acknowledgments

Healthwatch Ealing would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme.

#### **Disclaimer**

This report relates to findings observed on the specific date set out above. This report is not a representative portrayal of the experiences of all service users and staff. It is an account of what was observed and reported at that time.



# What is Enter and View?

Enter and View is a statutory power of every local Healthwatch organisation. Local Healthwatch Enter and View Authorised Representatives carry out these visits to a range of health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch Enter and View Authorised Representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies.

Enter and View visits can happen if people tell us there is a problem with the service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of good practice from the perspective of people who experience the service first hand.

Healthwatch Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch safeguarding policies. If at any time, an Enter and View Authorised Representative observes anything they feel uncomfortable about, they need to inform their lead representative who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the CQC and Ealing Council's social services team where they are protected by legislation if they raise a concern.

## **Purpose of Visit**

• To engage with service users of care homes at the point of service provision



- To assess care homes against Healthwatch England's quality indicators of a good care home
- Observe residents and relatives engaging with the staff and their surroundings
- Capture the experience of residents and relatives and any ideas they may have for change

#### **Strategic Drivers**

- CQC Dignity and Wellbeing Strategy
- Healthwatch Ealing delivers an enhanced Enter and View programme. Several
  care homes have been selected to be visited as part of this programme due to
  the relative isolation of these type of services. Chaston House Care Home was
  chosen as part of this list of care homes and this visit was part of Healthwatch
  Ealing's Enter and View programme

### Methodology

This was an announced Enter and View visit. Healthwatch Ealing Enter and View Authorised Representatives approached a member of management at Chaston House Care Home before commencing the visit and took their advice on whether any residents should not be approached due to their ability to give informed consent, or due to safety and medical reasons.

Healthwatch Ealing Enter and View Authorised Representatives conducted short interviews with two members of staff and one resident at the care home. The interviews centred around Healthwatch England's indicators of a good care home<sup>1</sup>;

- 1. Have strong, visible management
- 2. Have staff with time and skills to do their jobs
- 3. Have good knowledge of each resident and how their needs may be changing
- 4. Offer a varied programme of activities
- 5. Offer quality, choice and flexibility around food and mealtimes

<sup>&</sup>lt;sup>1</sup> Healthwatch England (2017) What's it like to live in a care home



- 6. Ensure residents can see health professionals such as GPs and dentists regularly
- 7. Accommodate residents' personal, cultural and lifestyle needs
- 8. Be an open environment where feedback is actively sought and used

The interviews also included specific questions about fluid intake, taking the recent iHydrate report<sup>2</sup> into account. This report gave recommendations to increase fluid intake among care home residents.

A large proportion of the visit was observational, involving a tour of the public/communal areas of the home. Healthwatch Ealing Enter and View Authorised Representatives observed the surroundings to gain an understanding of how the home works and how residents engaged with staff members and the facilities. An observation checklist/guide was created for this purpose (Appendix 1).

# Summary of Results

## **Summary of findings**

At the time of our visit, Healthwatch Ealing Enter and View Authorised Representatives concluded that the home was operating to a good standard of care. The tour of the home, and the interviews with staff and residents showed us that Chaston House Care Home was able to demonstrate Healthwatch England's indicators of a good care home. We saw evidence of positive relationships between staff and residents, and this was supported by information received from interviews with a resident.

# **Background**

We were informed that Chaston House Care Home has accommodation for 11 residents and they have 8 residents at present. The home is completely residential,

<sup>&</sup>lt;sup>2</sup> University of West London, CWHHE Clinical Commissioning Group Collaborative, and NIHR CLAHRC (no date) The I-Hydrate project Optimising hydration of elderly residents in nursing homes.



and most residents have a diagnosis of mild to moderate dementia. We were informed by the director that staffing consists of:

• Day: 2 staff plus 1 extra floating staff

• Night: 2 staff members

According to CQC guidelines, there should be "sufficient numbers of suitably qualified, competent, skilled and experienced staff to meet the needs of the people using the service at all times". There is no specific ratio highlighted in the guidelines. In this case, there is 1 staff member for every 4 residents.

# **Detailed Results**

#### **General Observations**

The visit commenced with a tour of the care home. This section details the direct observations made by the Healthwatch Ealing Enter and View Authorised Representatives.

## **Reception Area**

There is no formal reception area at the home. We were led through the hallway into a small sitting area at the front of the home between the communal areas, bedrooms and kitchen. We were then met by the deputy manager who showed us around the home.

## Information displayed

The CQC certificate of registration, last rated CQC inspection and Chaston House Care Home complaints procedure and policy were displayed on noticeboards in the hallway. In the sitting area, we observed a large noticeboard detailing events occurring at the home i.e. meetings, residents' medical appointments, and visits by

<sup>&</sup>lt;sup>3</sup>CQC (2017) CQC Regulation 18: Staffing



external organisations. We were informed that all staff members update the noticeboard regularly and keep aware of any changes. We observed the deputy manager inputting information on the board.





Information Displayed at Chaston House

#### **Environment**

Upon entering the home, there was a urine odour. However, we were informed by the deputy manager that there is maintenance going on throughout the home to eradicate this. We were told that this includes changes in the flooring from carpeted floors to linoleum. The home was homely, clean and clutter free and the living room was bright. The kitchen located on the ground floor was small but clean and tidy.



The kitchen and lounge are situated on the ground floor. We were told that all residents are encouraged to socialise and eat in the lounge apart from one resident who is weak and eats in their room. We observed three residents having tea with a student who was there to organise activities and entertain them. There was a range of drinks on offer such as tea, coffee, water and juice which we saw on the lounge table. We were told that the student comes in three days a week to do activities with the residents. The lounge door led into the garden which was also used as an emergency exit, we observed that it was tidy and spacious with no evident hazards. We observed that a ramp was being built in the garden to improve garden access for residents and that the pantry and storage rooms were in the garden. We also observed a laundry room which was small but tidy located in the garden. We saw that the staff toilet was also outside, beside the kitchen door.

We were informed that there are no en-suite rooms at Chaston House. On the ground floor there are two resident bedrooms as well as two meeting rooms, Room 2 & 3 in which there was a meeting being held in both rooms. We observed a stairlift which took residents to the first floor. We were informed that only two residents use the stairlift as the others are able to walk up and down the stairs with no difficulty.

On the first floor we observed a shower, a toilet and five bedrooms. We were informed that 'double bedrooms' at Chaston House are large rooms used by two residents. We were told that residents or their families could pay extra to occupy double rooms singly as was the case with one of the residents currently at the home. We were also informed that residents who can't use the bathroom upstairs use the stairlift and use the shower room upstairs.

On the second floor, there were two single bedrooms and one bathroom. There was also a bedroom which we were told was for on-duty night staff. We observed that on the third floor there were three rooms in which two rooms were for students and the other room for a night shift staff member. We were told that resident bedrooms are decorated according to their wishes. We were informed that residents whose



bedrooms are on the first floor and who use wheelchairs shower downstairs as there is no stairlift to the second floor. This is due to the stairway being too narrow to accommodate a stairlift. We were told that all residents who have bedrooms on the second floor are mobile and do not require assistance going up and down the stairs. We were told that 50% of residents were independent and staff try as much as possible for them to be independent.

#### Staff

Staff were recognisable with distinct uniforms. We were told that there is no agency staff at Chaston House Care Home. The supervisor informed us that all staff receive induction training which is either carried out by the supervisor or the manager. We were informed that there are approximately 11 members of staff at the home. We were also told that there are regular volunteers and placement students at the home. We observed a placement student in the lounge with residents taking part in activities. We were told that the placement students and volunteers do not conduct any personal care for residents.

#### Relationship of staff members with residents

Upon observation by the Healthwatch Ealing Enter and View Authorised Representatives, the relationship between the staff members and residents appeared positive. Staff appeared to communicate well with residents, having general conversation with them, regularly making sure they are alright and joking with them about different topics. All conversations appeared relaxed and informal.

#### Food

We observed the weekly and daily food menu which was dated and displayed in the lounge. We saw from the menu that there are 2-3 hot meals served daily. We were told that residents can choose options that are not on the menu. We were also informed that the weekly meals are planned to residents likes and dislikes. As some



residents are unable to read, the food menu is read out to all residents. We were also told that residents religious, cultural needs, preferences and allergies are taken into consideration through looking at their care plans while planning the food menu.

During our visit, we observed residents being served their lunch in the dining area and in their bedrooms. We saw that staff were aware of each residents' dietary requirements and preferences as they served differing portions to the residents. We were told that one resident likes smaller servings and will eat more often throughout the day. We were informed that if the serving sizes are too large, the resident refuses their food.

	DMMENCING MON Breakfast	LUNCH	SUPPER
MONDAY	CERIALS OR PORRIDGE, TOASTED BREAD OR CRUMPET AND BUTTER AND JAM ICERIALS OR PORRIDGE.	Chicken Breast wrap in cheese , mash potatoes and mixed vegetable or rice. Cream cakes or donuts	ham and chips with baked beans or tinned spagheti. creamed rice pudding
TUESDAY	TOASTED BREAD OR CRUMPET AND BUTTER AND JAM	Fish cake William special. Ice cream with soft fruit	sausage rolls and minestroni soup; tiramisu
WEDNESDAY	CERIALS OR PORRIDGE, TOASTED BREAD OR CRUMPET AND BUTTER AND JAM	sliced roast beef with gravy and yorkshire pudding, roast parsnips and carrots and roast potatos or chips.	corn beef hash with mash potatoes; cream caramel
THURSDAY	CERIALS OR PORRIDGE, TOASTED BREAD OR CRUMPET AND BUTTER AND JAM	Turkey mince stir fry; rice or noodles; prunes or ice cream for pudding	baked beans on toast or ham sandwhiches;
FRIDAY	CERIALS OR PORRIDGE, TOASTED BREAD OR CRUMPET AND BUTTER AND JAM	battered haddock or white fish and chips; mushy peas or mashed butternut squash	Scramble eggs with cheese and tomatoe
ATURDAY	CERIALS OR PORRIDGE, TOASTED BREAD OR CRUMPET AND BUTTER AND JAM	Sausages, tomato, leek and butterbean mash	Chicken dippers and chips or ham and chips both with cooked choped tomatoes; semolina pudding topped with raisin
	CERIALS OR PORRIDGE, TOASTED BREAD OR CRUMPET AND BUTTER AND JAM	Roast leg of lamb, parsnips roast potatoes or mashed. Stewed fruit and custard.	Quiche or cheese sandwiches and grapes followed by hot cocoa drink made from fresh milk

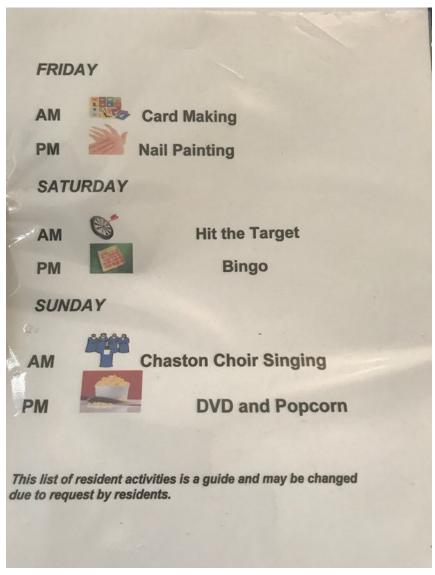
Chaston House's weekly food menu

#### **Activities**

There is an activity co-ordinator who comes in once a week to plan and carry out activities with residents. There is also a student who comes in 3 times a week. We



were told there is an activity every day and we observed an activity plan for each day. Upon observation we noticed that it did not specify the time the activities were taking place. We were also informed that staff also organise daily activities. We were told that all residents have an activity profile which outlines their likes and dislikes. We were informed that the planned activities are catered for residents needs and interests. We were also told that they are set monthly activities which include musicians, dancers and comedians including seasonal parties such as winter parties. Birthdays are also included in the activities plan and a small party is organised.



Activities at Chaston House



#### **Medication and Health**

We were told that all residents are registered with the local surgery. We were informed that there is a chiropodist who visits the home every two months. There are also visits by opticians quarterly, dentist as required, and the hairdresser every 2 weeks. We were told that nurses attend the home daily to administer insulin for residents who are insulin-dependent.

# Interviews

Healthwatch Ealing's Enter and View Authorised Representatives Oyinkan Adesiyan and Sahar Alla interviewed two members of staff and one residents. There were no visitors at the care home during the visit, and we were informed that most visits take place in the evenings and during the weekends. All interviews were carried out in quiet areas of the home where the conversation could not be overheard easily by others.

#### Residents

Healthwatch Ealing Authorised Representatives Oyinkan Adesiyan and Sahar Alla spoke with one resident. While we attempted to speak with more residents, residents were either unwilling to speak with us or did not have the capacity to give us enough feedback. We spoke to this resident for as long as we could but after a few questions, they did not answer any more questions we asked. We verified with the resident that we could use their feedback in this report at which they told us that they were "too tired" to answer any further questions but were happy for us to include the feedback they had given us already.

General Questions	We were told that they enjoy living at Chaston House
	Care Home and had no problems. They stated that the
	food and people were things they liked. They reported



	that the staff look after them properly and help them. This resident had no concerns about living at Chaston House Care home and added that "the ladies look after me".
Food and Mealtimes	Regarding the food, the resident reported that it is the same type of food that they were used to and they enjoyed it.

# **Managerial Staff**

The manager was not at the home during the visit. HWE Enter and View Authorised Representatives Oyinkan Adesiyan and Sahar Alla spoke with the supervisor.

Audits and Checks	We were told that medication audits are carried out by the manager and the supervisor each month. Fire safety and kitchen audits are done every six months and there are monthly fire drills at the home.  Healthwatch Ealing Enter and View Authorised Representatives were told that during the last CQC inspection, feedback was received that certain areas of the home needed to be refurbished. We were informed that the refurbishments are under way, with the radiators having been fitted with covers, the flooring being changed and plans for refurbishing the kitchen underway. We were informed that any health and safety issues are sorted immediately.  We were informed that staff are made aware of concerns and improvements at handover which is documented every day at every shift.
Feedback and Complaints	The supervisor told us there are resident and relatives questionnaires which are shared every 3 months. We were told that there are also regular meetings with residents and relatives to gather feedback. Every 6 months there is a survey specifically to gather feedback about the food at the home.  Staff take on board any feedback from family members and act on it.  Sometimes residents cannot express their needs to staff due to language barriers so they inform family members who pass it on staff.
Training	The supervisor told us that all new staff are trained in personal care and medication this is done face to face



	and online. Once the training is undergone all staff are
	trained in:
	Infection control
	Core Values
	Life support
	Person centred support
	Safeguarding
	Introduction to dementia
	Medication
	Pressure sores  Describe ris
	Dysphagia
	• Dignity
	Emergency life support
	End of life awareness
	Fire safety awareness
	Challenging behaviour
	Dementia care act
	We were informed that training is updated regularly
	and the safeguarding training is updated every 6
	months.
Food and Drink	We were told that the kitchen recently received a
	four-star rating for food hygiene. We were informed
	that residents have access to drinks 24/7. There is no
	designated drinks time, but residents can request drinks
	and express their preferences which gets honoured.
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# **Staff Members**

Healthwatch Ealing Enter and View Authorised Representatives Oyinkan Adesiyan and Sahar Alla spoke with one staff member.

Positive Aspects of the role	The staff member said that they enjoyed their roles and enjoy working at Chaston House Care Home. Staff reported support from management and working with the residents and other members of the staff team as positive aspects of their role.	
Induction process	The staff member stated that they received training and shadowed other staff as part of their induction which took place over 3 months.	
Safeguarding Procedure	One staff member stated that they were aware of safeguarding procedures. We were also told that safeguarding is repeated in the handover.	
Supervision, appraisal and staff meetings	Staff told us that supervision took place every three months and is carried out by the manager.	



Handover Procedure	Staff told us that handover occurs at the end of each shift and staff members pass on any issues that need to be addressed.
Involvement of family members	We were told that relatives who visit spend time with their relatives. We were informed that family members are informed of changes at Chaston House Care Home and any details are passed on to them. They informed us that there is a relatives' meeting however it was not specified how often this occurred. We were told that family members give feedback or complaints by contacting the supervisor and manager.
GP Access/Physiotherapy/ Hairdressers etc.	We were told that residents go to the GP when needed or in emergency cases the doctor does home visits. We were told that residents are registered with the local GP practice located a few minutes down the road. The staff told us that if they identify an issue with a resident, then an appointment is made with the GP practice. Hairdressers and dentists are visited outside the home where-as the opticians and a private chiropodist come to the home.  The access to services is as follows:  • GP - as required  • Hairdresser - every 2 weeks  • Nurses - every day to administer insulin  • Physiotherapy - as required  • Chiropodist - every six weeks  • Optician - Twice a year
Staffing Levels	Staff reported that there are four members of care staff and one floating staff on shift. There were no concerns raised by staff about staffing levels.
Support from Management	The staff member reported that they felt very supported by management. This staff member stated that they could always talk to their team leader or manager about anything and stated that there is effective communication between staff and management and that management have an open-door policy.

# **Conclusions and Recommendations**



Overall, positive feedback was received from the residents and staff members at Chaston House Care Home. However, we would like to highlight that we spoke to very few people at the home. During the visit, there were only two members of staff at the home and we were informed that the majority of residents at the home did not have the capacity to speak with us.

A resident told us that they enjoy living at Chaston House Care Home and commented that the food and people were the things they liked. A staff member commented that they receive adequate support from management and commented on managers having an open-door policy. Based on our visit we would conclude that Chaston House meets Healthwatch England's quality indicators of a good care home (see methodology). This report highlights good practice and provides a few recommendations for Chaston House.

This report highlights good practice at the home:

- We received good feedback from a resident about the food at the home.
   However, as this resident stated that the food available was food they were used to eating. We would have liked to have spoken to residents from other cultural backgrounds to understand their experience of the food on offer at the home, and how well the home approached their cultural preferences.
- The home has a system in place for sharing regular updates among all the staff. We were happy with the method the home uses the update board as staff were aware of it and are able to update it as needed.
- All staff had undertaken the necessary training and were aware of the safeguarding procedures at the home.

Healthwatch Ealing developed some recommendations for the home:

 Review displaying the activity schedule in the home. Displaying the activity schedule in prominent areas e.g. the lounge, hallways will make residents aware of upcoming activities. Information is currently solely displayed in the



sitting area outside the kitchen and the entrance hallway which did appear to be heavily trafficked by residents. In addition, the activity schedule was not observed to be displayed at any point in the home.

 Review displaying the menu in the home. Similarly to the above recommendation, the menu did not appear to be displayed in the home.
 Displaying the menu in prominent areas would make residents aware of the upcoming meals.

The report will be published on the Healthwatch Ealing website - www.healthwatchealing.org.uk and will be disseminated to the provider, commissioners and the public.

The Healthwatch Ealing Enter and View Team would like to thank the staff and residents at Chaston House Care Home for their courtesy, patience and openness during our visit.



# Appendix - Observation Guide

# Observations about home in general

Name of Home:	Chaston House Care Home	
Date and time of visit:	8 <sup>th</sup> February 2018 (10am – 2pm)	
Reception Area		
Observations:		

2. Information Displayed

Observations:			

3. Dining Area

Observations:		



## 4. Odour and Environment

Observations:
5. Choice of food and refreshments
Observations:
6. Dignity and Appearance of Residents
Observations:
7. Relationship of staff members with residents
Observations:



8. Appropriateness of activities
Observations:

9. Other Observations