Enter and View Report

Blakesley House Nursing Home October 31st 2023



A Report by Healthwatch Ealing



"I feel happy and safe here. I would like to live here as long as I can"

- Resident



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Visit Details	
Service Visited	Blakesley House Nursing Home, 7 Blakesley Avenue, London, W5 2DN
Manager	Margaret Lane
Date & Time of Visit	10:00 AM October 31st 2023
Status of Visit	Announced
Authorized Representatives	David Crawley, Ruchi Wadhwa
Lead Representative	David Crawley

1. Visit Background

1.1. What is Enter & View?

Part of the local Healthwatch programme is to undertake 'Enter & View' (E&V) visits.

Mandated by the Health and Social Care Act 2012, the visits enable trained Authorised Representatives (ARs) to visit health and care services - such as hospitals, care homes, GP practices, dental surgeries, and pharmacies.

E&V visits can happen if people tell us there is a problem with a service but can also be made when services have a good reputation.

During the visits, we observe service delivery and talk with service users, their families, and carers. We also engage with management and staff. The aim is to gain an impartial view of how the service is operated and being experienced.

Following the visits, our official 'Enter & View Report', shared with the service provider, local commissioners, and regulators, outlines what has worked well, and makes recommendations on what could work better. All reports are available to view on our website.



1.1.2 Safeguarding

E&V visits are not intended specifically to identify safeguarding issues. If safeguarding concerns arise during a visit they are reported in accordance with safeguarding policies. If at any time an authorised representative (AR) observes anything they feel uncomfortable about they will inform their lead who will inform the service manager, ending the visit.

If any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the Care Quality Commission (CQC) where they are protected by legislation if they raise a concern.

1.2 Disclaimer

Please note that this report relates to findings observed on this specific visit. It is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed on this date.

1.3 Acknowledgements

Healthwatch Ealing would like to thank the service provider, service users, and staff for their contribution and hospitality in enabling this E&V project to take place. We would also like to thank our ARs, who assisted us in conducting the visit and putting together this report.

2. About the Visit

2.1 Blakesley House Nursing Home

On October 31st, 2023 we visited Blakesley House Nursing Home which is located in Ealing.

The service is operated by Margaret Lane who runs this home.

The home may accommodate up to 22 residents and 12 were in residence at the time of the visit.

The home has a staffing complement of 19.



2.2 CQC Rating

The CQC is the independent regulator of health and adult social care in England. They make sure health and social care services provide people with safe, effective, compassionate, high-quality care and encourage care services to improve.

Blakesley House was last inspected by the CQC in January of 2023. The inspection report gave a rating of 'Requires Improvement' overall. Rating of 'Good' was given to the Caring aspect of the home, while it was rated 'Requires Improvement' for being Safe, Effective, Responsive, and Well-led.

2.3 Online Feedback

There is no recent online feedback for this service.

2.4 Purpose of the Visit

Enter and View visits enable Healthwatch Ealing to form an impartial view of how the home is operated and how it is experienced by residents, and to produce a report.

This visit is a part of a series of E&Vs for homes that are rated as Requires Improvement.

3. Executive Summary

This section of the report details the key findings from our observations and the resident and staff feedback collected during our visit.

Observations

What has worked well?

- · Residents are free to decorate their rooms.
- Artwork created by residents could be found hanging on the walls in the home.
- There were large comfy chairs in the lounge that residents were taking advantage of.
- Staff and residents had a good rapport. It was clear that staff cared greatly about those they were working with. Many of the residents of this home are in



- the advanced stages of dementia, and we observed tremendous patience from staff regarding this.
- There is a dementia-friendly menu in the lounge. Large pictures of what is on offer for the day is displayed.
- All residents are assigned a key worker who knows them on a more 1:1 basis than other members of staff. These key workers act as a champion for their residents. They inform other staff members of any potential issues or changes for the resident during handover. Each key worker has between 2-3 residents in their charge.
- · We witnessed good rapport between staff and management.

- While we found that the home was clean, the lounge did seem to be cluttered. Especially around the TV.
- · The TV in the lounge showed signs of failure.
- There were several wall hangings in the home that were displayed haphazardly.

Resident Feedback

What has worked well?

- Residents told us they like the food. They said it was filling and that they had good options.
- One resident described the food as lovely. The worst any resident we spoke with had to say about the food is that it "was not too bad". This was done in jest.
- · Overall residents told us that the environment was calm and happy.

What could be improved?

· Residents made no suggestions for improvement.

Staff Feedback

What has worked well?

- · All staff we spoke to said they had ample break and handover time.
- All staff are trained in safeguarding according to management. None of the staff we received responses from indicated any differently.

What could be improved?



• Staff have reported to us that sometimes they have difficulty communicating with patients who have or need hearing aids.

4. Full Findings

During the visit, we collected responses from 4 residents and 2 family members, 6 members of staff, and the head manager (13 people in total).

This report is based on their collective feedback, plus notes and observations made at the visit.

We would like to thank the staff and management for their time, and for their warm welcome and cooperation.

4.1 Observations

During our visit, our team of Authorised Representatives made observations on Entry and General Accessibility, General Environment, Safety and Visiting, Personal Care and Activities, and Staffing and Management. We have highlighted both good practice and areas for improvement.

Entry and General Accessibility

Notes

- · Blakesley House is an 8 minute walk from Ealing Broadway Station.
- · Signage outside of the home is very clear.
- · There is parking space for approximately 3 cars.
- · The home has step-free entry.
- · Visitors must sign in and out when entering and leaving the home.
- A visitor must be allowed in by the reception staff. There is a doorbell to signal the staff.
- The home has CCTV installed in communal areas such as the lounge in order to keep an extra eye on residents.

What has worked well?

• There is a code lock on the front door. A member of staff needs to enter the code in order for anyone to enter or exit.



- There were handrails installed all throughout the home for those with mobility issues to be more stable.
- There is an alarm system in all residential rooms and the bathrooms for residents to alert staff. There are panels on each floor showing where the alarm is being signalled from.

· We found no area for improvement for this category.



General Environment

Notes

- · The home is a converted house.
- · There are four floors, with 3-4 patients on each floor.
- · The first floor is dedicated to bed bound patients.
- The home is registered for 22 patients. They can get to this number by having some rooms be doubled up. Two patients in one room. However, there are only 12 in residence, as they do not want to have others in their room.
- · ARs found the home to be very clean during our visit.
- · Residents' rooms are spacious.



What has worked well?

- · There is dementia-friendly signage throughout the home.
- · The home feels more like a home than a medical facility.
- · All residents and staff report being happy with the cleanliness of the home.
- · Residents are free to decorate their rooms.
- Artwork created by residents could be found hanging on the walls in the home.
- There were large comfy chairs in the lounge that residents were taking advantage of.
- The day of our visit was cold, however, the home was very warm. They have taken great care to ensure that it is properly heated.
- The outside area adjacent to the living area was spacious. The cabinet that had activity material (books/colours/bingo etc.) was a little cluttered.
- The backyard was clean and well-kept, and it was secured with a key-locked door. Residents were allowed to indulge in gardening when the weather was good.
- There is a lift for residents to use. There is also a stair lift installed to help assist in going upstairs.

What could be improved?

- · While we found that the home was clean, the lounge did seem to be cluttered, especially around the TV.
- · The TV in the lounge showed signs of failure.
- There were several wall hangings in the home that were displayed haphazardly.
- One example of dementia-friendly signage we saw was pointing away from the room it was meant to be highlighting.





Safety and Visiting

Notes

- · Visiting times are from 10am-5pm.
- · Fire alarm tests are done every Monday.
- The nurse's station is locked. All medicine is also kept under lock in that station.
- · Medicine is stored properly, with a fridge for medicine that requires it.
- · All staff are trained in safeguarding measures.
- The home uses communal restrooms, each restroom is equipped with mobility aids and shower seats.

What has worked well?

- While the visiting times are officially 10am-5pm, the home does allow for flexibility. They are happy for arrangements to be made that make it easiest for families to visit.
- Family members are allowed to stay late and overnight if a loved one is in End-of-life care.
- A family member was visiting during lunchtime. They were thankful for the home being flexible for them.
- · The kitchen is clean and orderly. It has been rated 5 for food hygiene.



- Kitchen staff were observed following food safety protocols when serving lunch to residents.
- Most residents are always accompanied through the home due to mobility issues. ARs observed proper moving and handling techniques displayed when staff were assisting a resident to the restroom.

 We found areas of the home to have inconsistent lighting, for example, some hallways were dimmer than others, and the Nurse's station also seemed to be poorly lit.

Personal Care, Diet, and Activities

Notes

- · Care plans are created using a pre-assessment, along with a consultation with the resident's GP and family.
- · The menu is informed by these pre-assessments as well.
- · Activities for the week are displayed in the lounge.
- Activities include but are not limited to, bingo, singing, drama therapy, physical therapy, church, and board game time.
- · A hairdresser visits the home.
- · Drinks are available on demand.
- · The home takes residents on outings periodically.
- · Blakesley House specialises in dementia and end-of-life care.
- · All staff undergo training to best deal with those who suffer from dementia.

What has worked well?

- Two activities were observed during our visit. First was bingo and after that, the activity coordinator played catch with residents. Residents enjoyed both activities.
- All residents are assigned a key worker who knows them on a more 1:1 basis than other members of staff. These key workers act as a champion for their residents. They inform other staff members of any potential issues or changes for the resident during handover. Each key worker has between 2-3 residents in their charge.
- Staff and residents had a good rapport. It was clear that staff cared greatly about those they were working with. Many of the residents of this home are in the advanced stages of dementia, and we observed tremendous patience from staff regarding this.
- There is a dementia-friendly menu in the lounge. Large pictures of what is on offer for the day is displayed.



- · Resident's birthdays are celebrated.
- · Bed-bound residents are given 1:1 time with the activity coordinator.

· We found no area for improvement for this category.



Staffing and Management

Notes

- · The home has a staffing complement of 19.
- · Languages spoken by staff include English, Swahili, Urdu, Hindi, Kikuyu, Ekre, Fasi, and Arabic.
- · Staff wear uniforms and have name badges.
- · Management wears business attire and a name badge.

What has worked well?

- · We witnessed good rapport between staff and management.
- · Staff birthdays are celebrated.

What could be improved?

• Staff have reported to us that sometimes they have difficulty communicating with patients who have or need hearing aids.



4.2. Resident Feedback

At the visit, we collected feedback from 4 residents and 2 family members. It should be noted that the residents in this home are in the further stages of dementia and that not all surveys conducted were able to be completed due to this.

Staff

- Residents expressed fondness for the staff.
- · Staff were described as caring, good to talk to, and fun.

Environment.

- All residents surveyed reported that they felt safe at Blakesley House.
- · Overall residents told us that the environment was calm and happy.
- One resident did say that they felt the home was a bit boring at times.

Food

- Residents told us they like the food. They said it was filling and that they had good options.
- One resident described the food as lovely. The worst any resident we spoke with had to say about the food is that it "was not too bad". This was done in jest.
- · One resident said they liked being able to get a cup of tea whenever they wanted.

Improvements

· Residents made no suggestions for improvement.

Feedback and Complaints

· Residents told us they had nothing to complain about.

Selected Comments

General Care

"I feel happy and safe here. I would like to live here as long as I can."

Thoughts on Staff

"They are very nice to talk to."

"They take good care of me. If I need something I just ask, and they get it for me."



Diet and Nutrition

"It is lovely! I love the cooked food here".

4.3. Staff Interviews

During the visit, we received feedback from 6 staff members, from varied roles. Length of service ranges from a few months to 20 years, with most staff serving over 1 year.

General Feelings

- · Staff tell us that they enjoy working in the home.
- · Some had noted that interacting with residents is the highlight of their day.
- Staff all report satisfaction with pay, break time, and support from their direct supervisor and management.

Selected Comments

"I feel accomplished and satisfied at the end of the day."

"I like interacting with patients. I make it so they are not lonely."

Training

- Training staff reported undergoing include but are not limited to manual handling, food hygiene, fire safety, infection control, and care and support for residents.
- All staff are trained in safeguarding according to management. None of the staff we received responses from indicated any differently.

Break and Handover Time

- · All staff we spoke to said they had ample break and handover time.
- It was emphasized to us that the home aims to be flexible with staff giving them leave when they need it.

Accessing community health and social care services

 There have not been any issues getting in touch with community health and social care services.

Communicating with patients and their family

· Staff told us that they do not have issues talking to families.



- The biggest issue that staff have in terms of communication is when patients are displaying difficult behaviour.
- Language barriers were mentioned as a potential communication issue. Staff will get a staff member who speaks the residents' language if one is on the premises.

Selected Comments

"We want residents to treat this place like it is their own home"

4.4 Management Feedback

We also spoke with the matron of Ealing Manor Nursing Home, Lydia Kur, about a variety of topics.

In Summary

Identifying Healthcare Needs

• All healthcare needs are determined by a pre-assessment that is filled out by the resident's GP, family, and the home.

Supporting Cultural and Religious Needs

- We take our preassessment very seriously. Working with the residents, their families, and social workers we find out all we can about them. This helps us determine their care plan. This of course includes their cultural needs.
- The kitchen staff is also involved in this plan. If a resident is a vegetarian for example, the cook ensures their needs are met.

Raising Safety Concerns

- · All staff are trained on how to raise a safeguarding issue.
- These are reported as and when they occur.

Challenging Aspects?

• Funding from the council is our biggest challenge at the moment. It is something we are working with them on; however, we are stretched thin because of it.

Improvements



- We conduct a yearly check to see which renovations need to be done for the home.
- · We are working closely with the CQC on a work plan to improve our service.

5. Recommendations

Healthwatch Ealing would like to thank the service for the support in arranging our E&V visit.

Based on the analysis of all feedback obtained, we would like to make the following recommendations.

Recommendations

Entry and General Accessibility

We found no area for improvement in this category.

General Environment

- While we found that the home was clean, the lounge did seem to be cluttered. Especially around the TV.
- 5.1: We recommend reorganizing decorations to give the home a more orderly feel.

Response: "The clutters around the TV area have been cleared, the hangings have been rearranged."

- The TV in the lounge showed signs of failure.
- 5.2: We recommend replacing this TV at the home's earliest convenience.

Response: "We had an engineer check the television and he found no fault with it."



 There were several wall hangings in the home that were displayed haphazardly.

5.3: We recognize that this is a small thing. However, we believe that correcting this will make residents more comfortable in the long term.

• One example of dementia-friendly signage we saw was pointing away from the room it was meant to be highlighting.

5.4: We recommend fixing this sign as soon as possible.

Response: "The dementia-friendly signage is well positioned"

Personal Care, Diet, & Activities

We found no area for improvement in this category.

Staffing and Management

 Some members of staff have reported difficulty communicating with residents who are hard of hearing / need hearing aids.

5.5: We recommend working with appropriate stakeholders to ensure residents have appropriate hearing equipment.

Response: "We have advised the carers to make sure that the residents prescribed with hearing aids always have them on."

6. Glossary of Terms

AR Authorised Representative CQC Care Quality Commission

Enter & View E&V



7. Distribution and Comment

This report is available to the general public and is shared with our statutory and community partners. Accessible formats are available.

If you have any comments on this report or wish to share your views and experiences, please contact us.

Healthwatch Ealing, 2nd Floor, Rooms 15 & 16 45 St. Mary's Rd, London W5 5RG.

"Everything is good here for my [relative]. I am happy they are here."

- Family Member of Resident.

