

Enter and View Report Minster Care Group

Ealing Care Homes – Sycamore Lodge,
Chestnut Lodge, Elm House, Martin House



A Report by Healthwatch Ealing
September 2022

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1. Enter and View Introduction

What is Enter and View?

Enter and View is a statutory power of every local Healthwatch organisation. Local Healthwatch Enter and View Authorised Representatives (AR) carry out 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 occur 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 the visits to Minster Ealing Care Homes:

- 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.
- To observe residents and relatives engaging with the staff and their surroundings.
- To 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. Minster Ealing Care Homes: Sycamore Lodge, Chestnut Lodge, Elm Lodge and Martin House were chosen as the list of care homes through Ealing Council Local Authority and confirmed by the CQC.

1.1. Methodology

All Enter and View visits to the four Minster Ealing care homes were announced visits. Healthwatch Ealing Enter and View Authorised Representatives approached management and nurses at each care home during 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. The interviews with on-site managers included conversations around CQC recommendations and whether they had been addressed.

Healthwatch Ealing Enter and View Authorised Representatives conducted short interviews with residents, staff members, the manager at the home and the senior area manager. The interviews centred around issues arising in previous CQC visit reports; how change, improvement and involvement in improvement would take place; satisfaction with various aspects of living or working in a care home; and Healthwatch England's indicators of a good care home:

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.
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.

Methodology of Interviews and Questions:

The managers, staff and residents were interviewed with separate questions to gain appropriate answers needed for our thematic data collection.

Interviews with On-site Managers

The on-site managers were interviewed by Healthwatch Ealing representatives and asked questions around the following areas:

- 1) Addressing CQC and Healthwatch Ealing observations/recommendations.
 - This was in order to understand what and how improvements had been made as a result of the CQC report and how future change and improvement might take place as a result of Healthwatch Ealing feedback.
- 2) How they plan to implement the changes.
 - Managers were asked what methods and processes they would implement in order for improvements to be made.
- 3) When they expect to see the changes made.
 - We asked managers for an approximate timeline including initiation and deadline for completion of expected improvements.
- 4) How they plan to get staff involved in implementing these changes.

- This question was asked to understand how the managers and the staff work as a team to ensure successful implementation of improvements.
- 5) What they are finding difficult and what has been straightforward for them to accomplish.
- This question was asked to understand any barriers and areas of progress within their role and responsibilities.

Interviews with Staff

Staff members were either given the questionnaire to complete themselves or were interviewed by Healthwatch Ealing representatives. They were asked the following questions:

- 1) Whether the company has their best interests in mind when making business decisions.
- 2) Whether their team helps them to complete their work successfully.
- 3) Their overall experience of working at the residence.
- 4) What they like about working at the residence.
- 5) What improvements they would like to see made.

Interviews with Residents

The Residents were interviewed by Healthwatch Ealing representatives and asked the following questions:

- 1) Whether they would recommend this place of residence to family or friends.
- 2) Whether they feel the staff worked well together to care of them.
- 3) To describe their overall experience of care at the residence.
- 4) What they like about the residence.
- 5) What improvements they would like to see made to the residence.

1.2. Report Layout

This report contains introductory information on Enter & View and our programme, 4 x independent Enter & View Visit Reports, an interview with the Senior Area Manager at Minster Care Group, and a final conclusion drawing together the combined findings and recommendations. Further detail on these sections is outlined below.

Those involved or interested in a specific care home may wish to review the relevant section and Care Home report, and note the specific recommendations.

Those involved in overall strategy will benefit from reading the full report, noting the individual recommendations for each care home, and the collective findings and recommendations.

Section 1 Introduction and background

Section 2	Sycamore Lodge Care Home visit report, complete with individual recommendations.
Section 3	Chestnut Lodge Care Home visit report, complete with individual recommendations.
Section 4	Elm House Care Home visit report, complete with individual recommendations.
Section 5	Martin House Care Home visit report, complete with individual recommendations.
Section 6	Interview with Senior Area Manager of Minster Care Homes
Section 7	Final Conclusion, including grading against Healthwatch England Quality Indicators of a good care home, and overall recommendations.

1.3 Disclaimer for Report

This report is a representative sample of the views of the staff members and residents that Healthwatch Ealing spoke to within the time frame. This does not represent the views of all the residents and staff members. The observations made in this report only relate to the visits carried out on the 7th of September 2022, 13th of September 2022, 27th of September 2022 and 28th of September 2022.

1.4. Acknowledgements

- Thanks to our Healthwatch Ealing Staff: Temitope Onasanya, Radha Reddy, Daniel Norman and Stuart McMichael.
- Thanks to our Healthwatch Ealing Volunteers: Suzanne Harb, Osman Yildirim, Navdeep Dhanoya, Esra Arif and Maryada Shrestha
- Thanks to the management, staff and residents from Sycamore Lodge, Chestnut Lodge, Elm Lodge and Martin House for taking the time to speak with us.

Enter and View Report

Sycamore Lodge

(7th September 2022)



Service visited:	Sycamore Lodge
Address:	1 Edgecote Cl, London W3 8PH
Date & Time of Visit:	7th September 2022 11 am - 3 pm
Status of Visit	Announced
Healthwatch Ealing “Enter & View” Authorised Representatives	Temitope Onasanya, Radha Reddy, Stuart McMichael, Suzanne Harb, Osman Yildirim, Navdeep Dhanoya
Healthwatch Ealing contact information	Healthwatch Ealing, 45 St. Mary’s Road, Ealing, W5 5RG Tel: 0203 886 0830 Email: info@healthwatchealing.org.uk
CQC Rating	Overall Requires Improvement
Date of CQC Report	17 th December 2021

2. Background of Sycamore Lodge

Introduction of Sycamore Lodge

Sycamore Lodge is one of the four Minster Care Group Ealing care homes, operated in partnership with Ealing Council. Sycamore Lodge has three floors with lift access, along with assigned en suite bedrooms for each resident. The residence also consists of a garden. Sycamore accommodates nursing for up to 77 older people, aged 65 and over. The residence also cares for dementia patients. The residence consists of five units, each coded a with street name. Each unit has its own dining room, lounge and kitchen area along with an activities room.

CQC Rating

The Care Quality Commission (CQC) are 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. At the time of writing Sycamore Lodge was last inspected on the 23rd of November 2021; in an unannounced visit by the CQC. The residence was rated ‘Requires Improvement’ overall, with individual ratings of ‘Good’ for effective and caring service, and ‘Requires Improvement’ for safe, responsive and well led service. This was due to medicines not always being safely managed and oxygen cylinders not being stored securely.

2.1. General Observations – Sycamore Lodge

Our analysis is based on the following:

- Observations from an Enter and View tour of the residence, given to our authorised representatives by the Sycamore Lodge Manager.
- Interviews with on-site managers, staff and residents.

Location & Signage

- Authorised representatives were welcomed into the residence by checking in with their name, who they are visiting, time/date of visit and their signature. All visitors, including authorised representatives are required to do this, as well as to ensure that they check out by noting the time of the end of their visit. The reception area was noticeably clean, tidy and odour free.
- Signage was clear with directions on floors, street coded units (image 1), offices, cleaning rooms, medication storage rooms, kitchen, laundry room and accessible toilets.



Image 1 - Signage for the five colour coded units

General Environment/Facilities

- The residence was bright and had good air flow, considering the time of our visit was warm. Each unit had a large lounge for residents to relax and communicate with each other in. A picture of each resident and their name was displayed outside of their bedroom. A majority of the residents' bedroom doors remained open throughout our time at the home. We were informed that all bedrooms are ensuite, to provide convenience for residents. All entrances to the unit and floors were coded for entry, with the use of street names.
- Authorised representatives observed information and notice boards throughout the residence which included CQC rating and reports, Health and Safety Certificates, Fire drill information and activity schedule.
- First aid kits were displayed in each unit (Image 2)
- Accessible toilets were clean and odour free on each floor except the ground floor. A leak was observed in the ground floor toilet which was also associated with a smell of damp.



Image 2 – Reception area of a unit

Accessibility

- Each corridor on every floor has handrails to assist residents when moving around the home.
- Designated fire exits were noticed, along with fire drill information displayed around the home.
- Corridors are wide enough to accommodate residents who use wheelchairs.
- Corridors are wide enough to accommodate residents who need assistance from another staff member to walk around the home.
- The residence is located near public transport (including buses).

Staff

- Staff were recognisable with colour coded uniforms for carers and nurses.
- We observed that staff did not have name tags attached to their uniform, therefore it was difficult to remember names of staff.
- The manager and deputy manager did not wear uniforms.
- We were informed that staff receive 1-2-1 training for their role.
- A good rapport was observed between the staff (on-site managers, nurses and carers) and the residents.
- The authorised representative found staff to be accommodating and welcoming during the visit.
- Although COVID regulations did not require use of PPE, staff still wore face masks during their visit, and authorised representatives were requested to.
- On duty staff lists were also observed in every unit, along with a first aid-kit.

Health & Wellbeing

- Residents are provided with their own GP, if required.
- We observed where medication was located, and the door was locked during our visit.
- We observed the cleaning storage door was left open and unattended at a point during our tour.

Food

- We were informed that residents are given the option of food choices to eat from the menu.
- Multiple choices of food are available for residents for lunch and dinner.
- We observed tea and coffee given to residents in between meals.

Fire Safety

- Weekly fire drills have been put in place.
- Information about the fire evacuation plan was posted on notice boards around the residence.
- Warnings to not use the lift during a fire were posted in the home.

Notice Boards & Information Displayed

- The notice boards included information on Health and Safety, CQC certificate and report, safeguarding policy, on-duty staff lists, activity calendar, fire evacuation plan and health and safety policies (seen in image 3).



Image 3 – Notice board near entrance

2.2. Interviews – Sycamore Lodge

Interviews with On-Site Managers

Methodology

We engaged with **two** on-site managers in total, including the manager and deputy manager. Managers were asked questions seen below.

To uphold confidentiality responses have been grouped and randomised for each question.

Question 1. Addressing CQC and Healthwatch Ealing observations

- Both managers have addressed the CQC recommendations and ensured the oxygen cylinders were tightened securely.
- Regarding aspects of refurbishment, they suggest that communal areas are painted.

Question 2. How they plan to implement these changes

- They have care plans which monitor risk assessments and implementation of changes.
- Regarding refurbishment, they intend to meet with different contractors and receive quotes which are then get passed to the head office. Once approved, they will start involving staff members.

Question 3. When they expect to see the changes made

- A week is always given for every task. However, if a resident's health and safety is at risk then they adjust this timeline accordingly.

Question 4. How they plan to get staff involved in implementing these changes

- Handovers are conducted every day at 11am to receive any concerns from staff members. Management believe that communication is key, which is why they are using a system known as Nourish to communicate with staff.
- Staff have handover meetings every day to discuss plans with management.

Question 5. What they are finding difficult and what has been straightforward for them

- Overall, management have not found any difficulty in managing the care home, except for staff and health issues which can be challenging.

Interviews with Staff

Methodology

We engaged with **fifteen** staff members in total, including kitchen staff, laundry staff, cleaners, nurses, and carers. Staff were asked questions seen below.

To uphold confidentiality responses have been grouped and randomised for each question.

Question 1. Whether the company has the best interests in mind when making business decisions

- 86.7% of staff members reported that they believe that the company has their best interest in mind when making business decisions.

Question 2. Whether their team helps them to complete their work successfully

- All interviewed staff members (100%) reported that their team helps them to successfully complete their work.

Question 3. Their overall experience of working at the residence

- Overall, most staff members (80%) reported a positive description of their overall stay.
- Three staff members reported experiencing some challenges.
- *“Excellent place to work, friendly, helpful management, hardworking, efficient care workers and domestics and lovely residents.” – Staff Member*
- *“It can be quite challenging sometimes but have good team work so that tasks can be completed. Have to be very patient with different approaches to the different behaviours’ residents present.” – Staff Member*

Question 4. What they like about working at the residence

- Some staff members reported good teamwork and support from management
- Few staff members reported enjoying working with residents due to their sense of humour and spending time with the elderly.
- *“Good team, good management, good communication.” – Staff member*
- *“Taking care of the elderly is a very rewarding experience, gives me valuable insight into how to look after the ageing population.”*

Question 5. What improvements they would like to see made

- Overall, staff reported the need to increase staff numbers due to the challenges associated with staff shortages.
- Some staff members also reported the need for increased wages as life is getting harder now.
- A few staff members shared that there are not enough activities for the residents
- A staff member complained that management do not respond quickly enough to maintenance issues.

Interviews with Residents

Methodology

We engaged with **ten** residents in total. Residents were asked questions seen below.

To uphold confidentiality responses have been grouped and randomised for each question.

Question 1. Whether they would recommend this place of residence to family or friend

- All residents stated that they would recommend the residence to family or friends.

Question 2. Whether they feel the staff worked well together to care for them

- All residents stated that they feel the staff worked well together to care for them.

Feedback: 3. Describe their overall experience of care at the residence

- The majority of residents (80%) reported positive attitudes towards their stay at the residence. *However, two residents expressed contrasting attitudes.*
- *"I have no problems. I am happy with this place." – Resident*
- *"The care provided at the moment is good." – Resident*
- *"Not so great as I want to be home." ... "It's good but it could be better." – Resident*

Question 4. What they like about the residence

- Residents (30%) reported that they liked the friendly environment of the residence.
- Some residents (30%) reported liking the food provided for dinner and lunch.
- Three Residents also reported receiving the staff members well.
- *"It's quite sociable and friendly."*
- *"It's good. Dinner and lunch are good. I like the coffee and tea during the day."*

Question 5. What improvements they would like to see made in the residence

- Some residents said they have no improvements (60%).
- A resident expressed wanting more independence such as going shopping and to the cinema.
- Two residents had an issue with staff. One explained that they do not take care of their hygiene. While another resident said that staff can sometimes be rude.
- *"...the staff do not shave me, staff do not change my pad."*

2.3. Conclusions and Recommendations – Sycamore Lodge

Overall, positive feedback was received from staff and residents at Sycamore Lodge. Most staff members enjoyed working at Sycamore Lodge due to good teamwork, communication and took pleasure in caring for the elderly. Organisation and solution techniques were observed among the management team. The majority of residents were satisfied and enjoyed staying at the residence, with extended appreciation for the care they received from staff.

Good practice:

- Good rapport and relationship were observed between staff members, management and residents.
- The feedback from the residents reflected a good quality of care in the residence.
- Staff wore PPE, although restrictions did not require it.
- The residence was clean and tidy.

This report also provides a few recommendations for Sycamore Lodge:

Recommendation area 1 - Staffing

Staff highlighted shortages in staffing levels and the impact on workload and stress levels. Staff expressed a desire for increased wages.

- 1.1 We recommend reviewing staffing numbers with a view to providing additional support to manage the workload.
- 1.2 We recommend better internal communications with staff about recruitment plans and progress, and results of workload reviews and actions.
- 1.3 We recommend consideration of wage increases and or additional incentive schemes, such as 'finders fees' to support overall recruitment and retention of staff.

Recommendation area 2 – Activities

Both staff and residents highlighted issues around the variety and regularity of activities.

- 2.1 We recommend reviewing the activity calendar and implementing daily activities for residents to ensure that they are physically and mentally engaged in the residence.

Recommendation area 3 – Training and Support

None identified

Recommendation area 4 – Equipment and Supplies

None identified

Recommendation area 5 – Food

None identified

Recommendation area 6 – Safety and Hygiene

Enter & View Authorised Representatives observed the door for cleaning storage open and unattended at a point during our tour.

Enter & View Authorised Representatives observed a toilet leak and damp smell and staff highlighted further maintenance issues and a lack of response from management.

- 6.1 We recommend that maintenance and cleaning staff ensure that the cleaning storage room is closed or locked when not in use, to avoid any possible incidents involving residents.
- 6.2 We recommend that any sign of leakage should be dealt with promptly by maintenance to prevent health and safety hazards for both staff and residents.
- 6.3 We recommend management review and publish their policy and process for responding to maintenance issues. In addition, we recommend management increase communications around maintenance updates and progress to staff.

Recommendation area 7 – Other

Staff were observed not wearing name badges

- 7.1 We recommend that all staff wear name badges to help residents and family members visiting and support good relationship building.

Care Home Response

- 1.1 Staffing is continually monitored via a dependency tool and therefore staffing is adjusted in accordance to any changes within the dependency levels on each unit. Dependency levels are monitored by the home and area manager on a monthly basis and staffing adjusted accordingly where needed.
- 1.2 Recruitment is discussed during staff meetings and staff are given the opportunity to raise any comments in regards to workload during their supervisions.
- 1.3 Yearly pay reviews are carried out company wide and increments are carried out in line with national increases. The home has access to overseas recruitment where they may be struggling to recruit locally which has proven to be highly successful.
- 1.4 This has already been identified as an area of improvement and necessary action has been taken.
- 2.1 The home has begun gathering life story information for each resident to gather a better insight into likes, dislikes and past hobbies/interests. Staff have also been encouraged to participate in meaningful activity and engagement. Dementia awareness training has been arranged for care staff and activity specific training for the activity staff. Activity programmes are discussed during resident and relative meetings with the view to compose an activity timetable that suits the needs and preferences of the residents. This is under regular review and changes to the schedule are made following any feedback from residents.

6.1 This is already monitored daily by charge staff on the units as well as home and deputy manager and maintenance operator. Management team and maintenance operative carry out daily regular spot checks across the home- part of these checks is to monitor door closures such as this. Charge staff on each unit are also regularly monitoring these doors to ensure safety is maintained.

6.2 Signage is available and used where required. Signage is used where required and the home has an onsite maintenance operative to manage any urgent issues - there is also an out of hours process which staff may report any urgent issues to.

6.3 The home already has an effective procedure in place. Each unit has a maintenance log where any issues can be recorded - this is checked daily by the maintenance operative however for any urgent matter staff may contact the maintenance operative directly who is on site or use the on call system out of office hours. The management team carry out a daily hand over which is attended by staff including the maintenance operative; this gives staff the opportunity to raise and discuss any urgent matters.

7.1 Name badges have been ordered and sent to the home to cascade.

2.4. Report – Sycamore Lodge

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 Sycamore Lodge for their courtesy, patience and openness during our visit.

Enter and View Report

Chestnut Lodge

(13th September 2022)



Service visited:	Chestnut Lodge
Address:	3 Woodfield Road, London, W5 1SL
Date & Time of Visit:	13th September 2022 10 am - 2 pm
Status of Visit	Announced
Healthwatch Ealing “Enter & View” Authorised Representatives	Temitope Onasanya, Radha Reddy, Osman Yildirim, Navdeep Dhanoya
Healthwatch Ealing contact information	Healthwatch Ealing, 45 St. Mary’s Road, Ealing, W5 5RG Tel: 0203 886 0830 Email: info@healthwatchealing.org.uk
CQC Rating	Overall Requires Improvement
Date of CQC Report	20 th October 2018

3. Background of Chestnut Lodge

Introduction of Chestnut Lodge

Chestnut Lodge is one of the four Minster Ealing care homes, operated in partnership with Ealing Council. Chestnut Lodge has four floors with lift access, along with assigned en-suite bedrooms for each resident. The residence also consists of a garden. Chestnut Lodge accommodates up to 64 older people, with dementia and nursing units. The residence consists of four units, with each unit coded with street names. Each unit has its own dining room, lounge and kitchen area along with an activities room.

CQC Rating

The Care Quality Commission (CQC) are the independent regulator of health and adult social care in England. They ensure that health and social care services provide people with safe, effective, compassionate, high-quality care and encourage care services to improve. At the time of writing, Chestnut Lodge was last inspected on the 1st and 2nd of October 2018 in an unannounced visit by the CQC. The residence was rated ‘Requires Improvement’ overall, with individual ratings of ‘Good’ for caring and responsive service, and ‘Requires improvement’ for safe, effective and well-led service.

3.1 General Observations – Chestnut Lodge

Our analysis is based on the following:

- Observations from an Enter and View tour of the residence, given to our authorised representatives by the Chestnut Lodge manager.
- Interviews with on-site managers, staff and residents.

Location & Signage

- The reception area was noticeably clean and tidy. We were welcomed in by the administrator and receptionist. Masks were required around the residence, in order to prevent spreading coronavirus in the home.
- Signage was clear with directions on floors, street colour coded units, and the offices, cleaning rooms, medication storage rooms, kitchen, laundry room and accessible toilets were clearly labelled.

General Environment/Facilities

- The residence was bright and clean considering the time of our visit was warm. Each unit was assigned a large lounge for residents to relax and communicate with each other in.
- However, there was a room located near the reception that had an accumulation of chairs, this could be a safety hazard (Image 1)
- The names of each resident were displayed outside of their bedroom.
- The majority of residents' bedroom doors remained open throughout our time at the home.
- All entrances to the unit and floors were coded for entry, with the use of street names.
- Authorised representatives observed information and notice boards throughout the residence which included CQC rating and reports, Health and Safety Certificates, Fire drill information and activity schedule.
- First aid kits were displayed in each unit.
- Accessible toilets were clean and odour free on each floor.
- The residence created a pub for residents to enjoy during the pandemic.



Image 1 – Chairs in a room

Accessibility

- Each corridor on every floor has handrails to assist residents when moving around the home.
- Designated fire exits were noticed, along with fire drill information displayed around the home.
- Corridors are wide enough to accommodate residents who use wheelchairs.
- Corridors are wide enough to accommodate residents who need assistance from another staff member to walk around the home.
- The residence is located near public transport (including buses)

Staff

- Staff were recognisable with colour coded uniforms for carers and nurses.
- We observed good rapport between staff and resident management.
- We also observed good rapport between the staff (on-site managers, nurses and carers) and the residents.

- The authorised representative found staff to be accommodating and welcoming during the visit.
- Although COVID regulations did not require use of PPE, staff still wore a face mask during the visit, and authorised representatives were requested to.
- On duty staff lists were also observed in every unit, along with a first aid-kit.

Health & Wellbeing

- We observed where medication was located, and the door was locked during our visit.
- We observed a gathering of litter and food waste in the garden, the manager said that this had come from the residents who live on the top floor who throw waste out of their window.

Food

- We were informed that residents are given the option of food choices to eat from the menu.
- We observed hot drinks (tea and coffee) given to residents in between meals.

Fire Safety

- We were informed that weekly fire drills are in place, every Friday at 11am.
- Warnings to not use the lift during a fire was also posted in the home.

Notice Boards & Information Displayed

- The notice boards included information on Health and Safety, CQC certificate and report, safeguarding policy, on-duty staff lists, activity calendar, fire evacuation plan and health and safety policies.

3.2. Interviews – Chestnut Lodge

Interviews with On-Site Managers

Methodology

We engaged with **two** on-site managers in total, including the manager and deputy manager. Managers were asked questions seen below.

To uphold confidentiality responses have been grouped and randomised for each question.

Question 1. Addressing CQC and Healthwatch Ealing observations

- Managers have recently addressed the CQC recommendations but believe that the CQC are not consistent with their inspections.
- The manager mentioned that the CQC do not observe relatives and residents enough.
- Regarding the recommendations, the manager focuses on maintaining good practice and forward thinking.

Question 2. How they plan to implement the changes

- They are currently working closely with the activity co-ordinator to ensure mental health and wellbeing is addressed in the activities provided.
- Supervisors come up with ideas. If they need help and advice, the managers try to help them in any way possible.
- They plan to speak to relatives and staff, making sure they are involved and have an input. Once a change is recommended, the managers review it.

Question 3. When they expect to see the changes made

- The managers organise staff meetings, create an action plan and deadlines for each improvement. If it is about the resident's care, then it needs to be carried out on the day.
- *"We set a time frame if no changes have been made, then we intervene and give our own suggestions and advice to see the changes made."*
- The time frame set for changes depends on the need. However, if it is related to resident's health or medication use, then this is addressed as quickly as possible.

Question 4. How they plan to get staff involved in implementing these changes

- The managers plan on using training, supervision, staff meetings, 1-1 sessions, observations on the floor and improving communication with nurses and senior nurses to help support the implementation of any changes.

- A rota has also been created for staff to ensure they are involved in the specified changes.

Question 5. What they are finding difficult and what has been straightforward for them

- The manager has found CQC inspections difficult to deal with, as they believe the inspections have not been consistent.
- Management has a good relationship with their staff and believes this is beneficial when implementing changes.
- *“Staff here are easy going, pro-active so it is easy for us to make changes. We don’t have to chase them.”*

Interviews with Staff

Methodology

We engaged with **nineteen** staff members in total, including kitchen staff, laundry staff, cleaners, nurses, and carers. Staff were asked questions seen below.

To uphold confidentiality responses have been grouped and randomised for each question.

Question 1. Whether the company has the best interests in mind when making decisions

- All interviewed staff members (100%) reported that the company has their best interests in mind when making decisions.

Question 2. Whether their team helps them complete their work

- All interviewed staff members (100%) reported that their team helps them to complete their work tasks successfully.

Question 3. Their overall experience of working at the residence

- One staff member stated that their experience of working at the residence has been quite challenging, however they are part of a good team which aids with completing tasks.
- The remaining staff members expressed a positive attitude towards their overall experience of working at the residence.
- It is very nice to help people who are in need, and I am very happy to help the residents here and also the management is very supportive towards every employee.

Question 4. What they like about working at the residence

- The majority of staff members expressed positive attitudes on what they like about the residence.
- Some staff members mentioned that they like having a good team and communication within their team.

- The staff also expressed receiving sufficient help from their colleagues.

Question 5. What improvements they would like to see made

- The responses varied among staff members.
- The need for ‘proper’ equipment and supplies to improve the quality of care was expressed by a staff member.
- Two staff members expressed concerns about salary and suggested a salary increase, while one staff member showed concern towards staff shortage and believes it should be considered.

Interviews with Residents

Methodology

We engaged with **ten** residents in total. Residents were asked questions seen below.

To uphold confidentiality responses have been grouped and randomised for each question.

Question 1. Would you recommend this place of residence to family or friends?

- Majority of residents (90%) said they would recommend this place of residence to family or friends.

Question 2. Whether they feel staff worked well together to care for them?

- All residents agreed that the staff worked well together to care for them.

Question 3. Describe their overall experience of care at the residence?

- Residents overall experience of care was positive (9/10).
- *“I am happy here, even though I have not been here for long.”*
- *“I have gotten to meet new people, communicate with others and trust others.”*
- However, one resident stated, *“It is not the way I like.”*

Question 4. What they like about the residence?

- All residents expressed positive attitudes towards their stay at the residence.
- *“It’s nice to know the other residents, lots of discussions which is helpful.”*
- *“This is the best one, I get good care and support.”*

Question 5. What improvements they would like to see made in the residence?

- 90% of residents were happy with the residence and could not identify any improvements.
- However, one resident mentioned improvement around communication and understanding from the staff.
- *“Need communication and understanding as it’s important.”*

3.3. Conclusions and Recommendations – Chestnut Lodge

Overall, positive feedback was received from the staff members and residents at Chestnut Lodge. Most staff members enjoyed working at Chestnut Lodge due to good teamwork, communication and took pleasure in caring for the elderly. Organisation and solution techniques were observed among the management team. The majority of residents were satisfied and enjoyed staying at the residence, with extended appreciation for the care they received from staff.

Good practice:

- There was a friendly rapport observed between staff and residents.
- There were positive interactions observed between staff (nurses and carers) and management.
- Residents are given snacks in between their meals.
- Daily activities for residents - artwork is on display around the residence.

This report also provides a few recommendations for Chestnut Lodge:

Recommendation area 1 – Staffing

Staff highlighted shortages in staffing levels and expressed a desire for increased wages.

- 1.1 We recommend reviewing staffing numbers with a view to providing additional support to manage the workload.
- 1.2 We recommend better internal communications with staff about recruitment plans and progress, and results of workload reviews and actions.
- 1.3 We recommend consideration of wage increases and or additional incentive schemes, such as 'finders fees' to support overall recruitment and retention of staff.

Recommendation area 2 – Activities

None identified

Recommendation area 3 – Training and Support

Some residents highlighted a lack of communication and understanding from the staff.

- 3.1 We recommend the provider implement additional training/learning and development sessions for staff to support improved communication with residents.

Management highlighted concerns around the CQC process and the lack of consistency in approach experienced.

- 3.2 We recommend staff receive full training around CQC inspections and the Minster Care Group utilises CQC resources to ensure understanding within their staff teams.
- 3.3 We recommend opportunities to participate in internal 'shadow' or 'mock' CQC inspections should be considered for staff and management.
- 3.4 We recommend feedback from staff on the experience of CQC inspections and issues of consistency are fed back directly to CQC.

Recommendation area 4 – Equipment and Supplies

Some staff highlighted insufficient equipment and supplies available to support the delivery of quality care.

- 4.1 We recommend reviewing equipment and supplies in line with current residents and their care plans and putting in place an annual/6 monthly review process.
- 4.2 We recommend equipment and supplies is a set agenda item for team meetings so that any concerns can be raised and escalated where appropriate.

Recommendation area 5 – Food

None identified

Recommendation area 6 – Safety and Hygiene

One room observed had an accumulation of chairs stacked up. It was felt this could be a potential safety hazard.

- 6.1 We recommend ensuring appropriate storage space for equipment and furniture not in use and that this does not clutter up communal living space.
- 6.2 We observed litter and food waste in the garden, the manager said that this had come from the residents who live on the top floor who throw waste out of their window.
- 6.3 We recommend putting a rubbish bin nearby, or in the resident's room and that it is changed regularly.

Recommendation area 7 – Other

None identified

Care Home Response

- 1.1 Staffing is continually monitored via a dependency tool and therefore staffing is adjusted in accordance to any changes within the dependency levels on each unit. Dependency levels are monitored by the home and area manager on a monthly basis and staffing adjusted accordingly where needed.
- 1.2 N/A - Recruitment is discussed during staff meetings and staff are given the opportunity to raise any comments in regards to workload during their supervisions.
- 1.3 N/A - Yearly pay reviews are carried out company wide and increments are carried out in line with national increases. The home has access to overseas recruitment where they may be struggling to recruit locally which has proven to be highly successful.
- 3.1 Dementia awareness has been booked for all four homes in the coming weeks which will cover effective communication. Relevant training has been booked for all four homes.
- 3.2 Staff will be involved in mock inspections to give a better insight and understanding of the process. Feedback and discussion following inspections will be discussed during staff meetings and one to one supervisions.
- 3.3 As above.
- 3.4 N/A- Feedback was given to the lead inspector following the last CQC inspection which included feedback from the staff that were present on the day of inspection.

4.1 N/A- Monthly checks on equipment is carried out and replacements or additional equipment is ordered as required

4.2 N/A- This area is discussed during staff H&S meetings. Staff also have the opportunity to raise any issues/requests/queries with equipment during daily handover meetings with the management team where any urgent issues can be dealt with immediately

6.1 Space has been allocated on each unit to store equipment

6.2 Grounds are monitored by maintenance operative daily and any litter removed

6.3 Bin is now in place

3.4. Report – Chestnut Lodge

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 Chestnut Lodge for their courtesy, patience and openness during our visit.

Enter and View Report

Elm Lodge

(27th September 2022)



Service visited:	Elm Lodge
Address:	4A Marley Cl, Greenford UB6 9UG
Date & Time of Visit:	27th September 2022 10:30am – 3:00pm
Status of Visit	Announced
Healthwatch Ealing “Enter & View” Authorised Representatives	Temitope Onasanya and Radha Reddy
Healthwatch Ealing contact information	Healthwatch Ealing, 45 St. Mary’s Road, Ealing, W5 5RG Tel: 0203 886 0830 Email: info@healthwatchealing.org.uk
CQC Rating	Overall Requires Improvement
Date of CQC Report	19 th January 2022

4. Background of Elm Lodge

Introduction of Chestnut Lodge

Elm Lodge is one of the four Minster Ealing care homes, operated in partnership with Ealing Council. Elm Lodge has lift access, along with assigned en-suite bedrooms for each resident. Elm Lodge accommodates for up to 75 older people, along with dementia and nursing units. The residence consists of street-coded units with each unit having its own dining room, lounge and kitchen area along with an activities room.

CQC Rating

The Care Quality Commission (CQC) are the independent regulator of health and adult social care in England. They ensure that health and social care services provide people with safe, effective, compassionate, high-quality care and encourage care services to improve. At the time of writing, Elm Lodge was last inspected on the 8th and 9th of December 2021 in an unannounced visit by the CQC. The residence was rated ‘Requires Improvement’ overall, with individual ratings of ‘Good’ for effective, caring and responsive service, and ‘Requires improvement’ for safe and well-led service.

4.1. General Observations – Elm Lodge

Our analysis is based on the following:

- Observations from an Enter and View tour of the residence, given to our authorised representatives by the Elm Lodge manager.
- Interviews with on-site managers, staff and residents.

Location & Signage

- The reception area was noticeably clean and tidy. We were welcomed in by the manager and receptionist. Masks were required around the residence, in order to prevent spreading coronavirus in the home.
- Signage was clear with directions on floors, street colour coded units, and offices, cleaning rooms, medication storage rooms, kitchen, laundry room and accessible toilets were clearly labelled.
- Check in was available in both paper and electric forms.
- There was a considerable amount of parking spaces available outside of the residence.
- The fire evacuation plan is posted around the residence and is on display in the reception area. We were informed that the fire alarms are tested weekly, on Thursdays at 11am. As visitors, we had to sign an agreement with the fire evacuation plan, if an accident was to occur.

General Environment/Facilities

- The environment was clear of clutter and noticeably clean. There was no distinguishable odor in the residence.
- The residence was organized into units, with each named after well-known streets in London, i.e., Baker Street.
- Each unit was assigned a lounge to allow residents to watch tv and interact with one another. Also attached to the lounge was a small kitchenette, where snacks were kept and made for residents.
- Throughout the residence, we observed residents' names and pictures posted on their bedroom doors.
- We observed a quiet room, cinema room, library and therapy room for residents to use.
- Residents creative and artsy work were displayed throughout the residence, which was rewarding for them.

Staff

- We observed clear communication between members of staff, including the nurses and carers. When an issue with the lift occurred during our visit, staff clearly communicated with each other to prevent any further issues with moving the residents.
- All staff wore distinct uniforms, except for the manager and reception admin staff.
- The relationship between staff members and residents appeared positive.
- The manager was friendly towards the residents, and we observed a healthy work environment with laughter and jokes being shared between staff and residents.
- We observed staff regularly checking up on residents and offering to help them in any manner.

Health & Wellbeing

- We were told that all residents are registered with their local surgery.
- The hairdresser also visits the residents weekly.

Food

- We observed that the residence had been given a food hygiene rating of 5/5 – which is equivalent to excellent.
- The daily menu was displayed on the notice boards in each unit.
- Hot food is prepared in the kitchen on the ground floor and served to residents by the staff.

Fire Safety

- We were informed that there is a fire alarm test every Thursday at 11am (image 1).
- When visitors check in, they are required to agree and sign the Fire Evacuation Plan (image 2).



Image 1 – Fire test notice displayed at the entrance

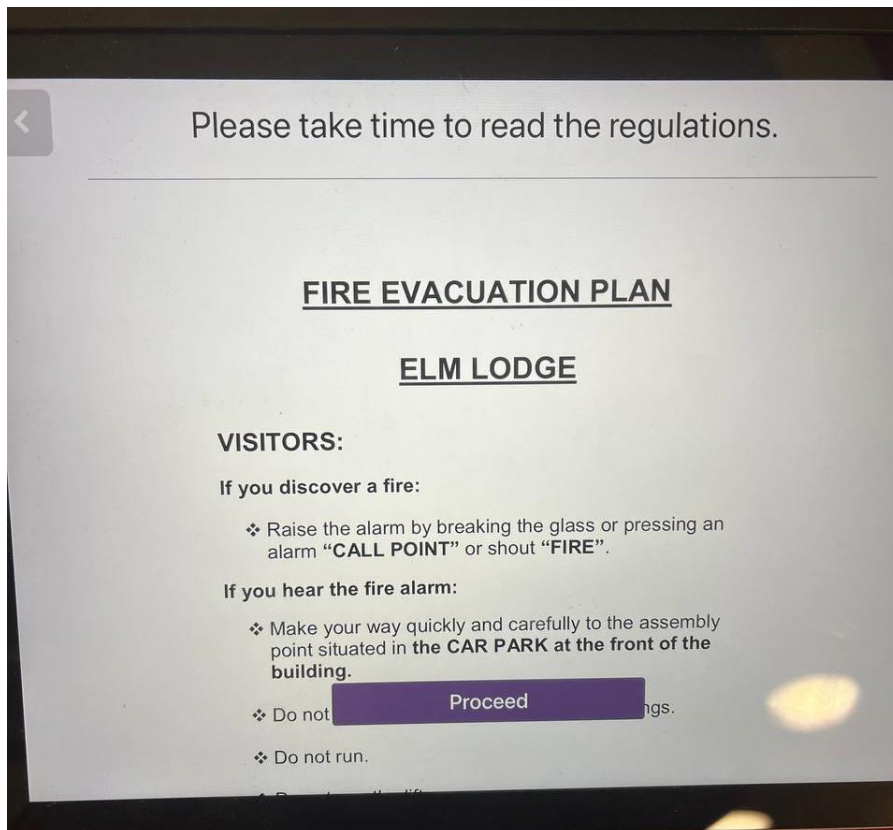


Image 2 – Digital fire evacuation plan form

Notice Boards & Information Displayed

- The activity schedule was available on the notice boards, providing clear information on the available activities throughout the week (Image 3).
- The notice board contained useful information such as the hairdresser timetable and the fire evacuation plan.
- We observed inconsistency with the dates on the notice board (Image 3). There are two different schedules for the hairdresser, one states every Tuesday while another states every Wednesday and Friday.

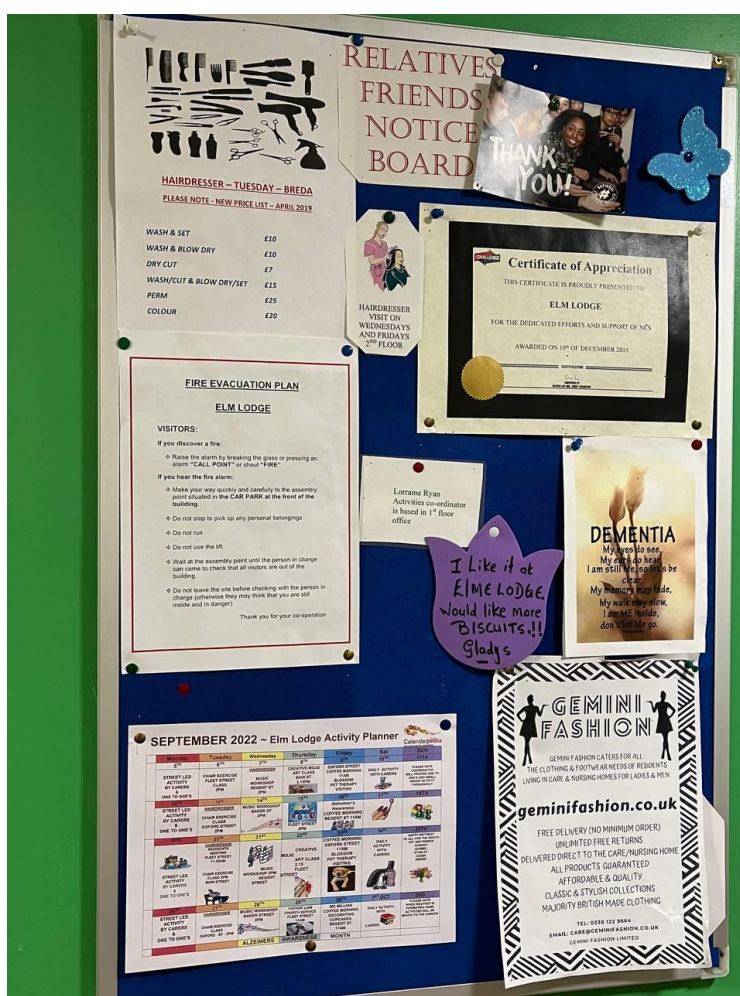


Image 3 – Notice Board with information and activity schedule

4.2. Interviews – Elm Lodge

Interviews with On-Site Managers

Methodology

We engaged with **two** on-site managers. Managers were asked questions seen below.

To uphold confidentiality responses have been grouped and randomised for each question.

Question 1. Addressing CQC and Healthwatch Ealing observations

- The manager expressed the importance of having a dementia friendly environment because it is an increasing issue for residents. However, they need funding for a modern dementia friendly unit.
- The deputy manager agreed that there needed to be a wider variety of meal options.
- *“They have soup and sandwiches which they grow bored of.”*

Question 2. How they plan to implement changes

- The manager plans to include more varied foods and be in contact with the resident manager, as well as the kitchen manager to discuss more food options.
- The manager explained that a proposal or strategy will first need to be created before implementing any change.

Question 3. When they expect to see the changes made

- Regarding widening the food options available for residents, the deputy manager said they can expect to see this made relatively soon as the chef will take it on board and can adapt quickly.
- Concerning the modern dementia friendly unit, the manager stated they can expect this to be implemented by 2023.

Question 4. How they plan to get staff involved in implementing these changes

- They plan to get the staff involved by informing them of any changes to resident’s diet plans, so that they are aware and can assess their care plan. In addition, the kitchen cupboard displays the dietary plan for staff.
- Also, the manager suggested giving staff members dementia awareness training and creating dementia champions, in order to develop them into specialists. There was also a great emphasis on the importance of regular focus groups and to discuss ideas together.

Question 5. What they are finding difficult and what has been straightforward for them

- Both managers expressed that it is not always easy, however it is manageable.

- The company have found challenges in staffing due to geographical location, however they were able to recruit staff (including nurses) from countries such as India and Ghana.
- They experienced carers being 'snatched' by the NHS due to higher pay. This caused staff to work at the residence temporarily.
- On a positive note, the managers expressed that they have a good team whom they believe in strongly.

Interviews with Staff

Methodology

We engaged with **eighteen** staff members, including kitchen staff, laundry staff, cleaners, nurses, and carers. Staff were asked questions seen below.

To uphold confidentiality responses have been grouped and randomised for each question.

Question 1. Whether the company has their best interests in mind when making business decisions

- Most staff members agreed that Elm lodge has their best interests in mind when making business decisions (94.4%).

Question 2. Whether their team helps them to complete their work successfully

- Almost all staff members (94.4%) agreed that their team helps them to complete their work successfully.

Question 3. Their overall experience of working at the residence

- Overall, staff members expressed positive attitudes towards working at the residence.
- Among these staff members was a positive expression of working for the residents.
- *"It is a very nice experience to be working with the residents. All residents are like my family now."* – Staff member

Question 4. What they like about working at the residence

- The staff listed a variety of reasons they like working at the residence.
- Some staff members shared that they like working with their team as it makes their job easier for them.
- *"I like to work with the staff, they give me lots of confidence."*
- Other staff members shared that they simply like working for the residents, as they resemble their grandparents.
- *"To take good care for them like our grandparents, this is what I like most."*

Question 5. What improvements they would like to see made

- One of the improvements suggested was around the need for more equipment and staff, as staff shortages cause them to spread additional tasks amongst themselves, impacting overall workloads.
- *“Staffing – most of the time there is a lack of staff so we have to spread the task amongst ourselves.”*
- *“We need more equipment and more staff.”*
- Another improvement was to see more appreciation towards staff for all their hard work.
- *“I would like to see benefits and more appreciation towards staff.”*
- The kitchen staff would like an improved hygienic environment as they complained about a bin in the kitchen which causes fruit flies.

Interviews with Residents

Methodology

We engaged with **nine** residents in total. Residents were asked questions seen below.

To uphold confidentiality responses have been grouped and randomised for each question.

Question 1. Would you recommend this place of residence to family or friends?

- All residents agreed that they would recommend this place of residence to family or friends.

Question 2. Whether they feel the staff worked well together to care for them?

- All residents agreed that they feel the staff worked well together to care for them.

Question 3. Describe their overall experience of care at the residence?

- The residents expressed positive attitudes towards their experience of care, with some sharing that they enjoy the available activities.
- *“Restful experience, I enjoy the activities and formed new friendships.”*

Question 4. What they like about the residence?

- There was a mix in the response from residents regarding what they liked about the residence. A resident explained that they like that they have time to themselves, which gives them independence. Other residents mentioned that they liked developing new friendships with those living in the residence.
- *“I like having time to myself and independence.”*
- *“I have made friends and developed relationships.”*

Question 5. What improvements they would like to see made in the residence?

- Most residents were happy with the residence and could not identify any improvements to be made (77.8%).
- However, two residents reported that they would like to have different meals as it is repetitive for them.

4.3. Conclusions and Recommendations – Elm Lodge

Overall, positive feedback was received from staff and residents at Elm Lodge. Most staff members enjoyed working at Elm Lodge due to good teamwork, communication and took pleasure in caring for the elderly. Residents also mentioned receiving good care from the staff, and overall, enjoy their stay at the residence.

Good practice:

- A pleasing rapport and relationship were observed between staff and residents, making the residents feel comfortable and well looked after in the home.
- There are a variety of activities available for residents. We observed a quiet room, cinema room, library and therapy room for residents to freely use.
- We observed the creative and artsy work of residents displayed throughout the residence from their activity sessions, which was very rewarding for them.

This report also provides a few recommendations for Elm Lodge:

Recommendation area 1 – Staffing

The company shared difficulties in recruiting staff and staff themselves highlighted shortages in staffing levels and concerns about workloads. Staff shared that they would like to be better appreciated for all their hard work.

- 1.1 We recommend reviewing staffing numbers with a view to providing additional support to manage the workload.
- 1.2 We recommend better internal communications with staff about recruitment plans and progress, and results of workload reviews and actions.
- 1.3 We recommend consideration of wage increases and or additional incentive schemes, such as 'finders fees' to support overall recruitment and retention of staff.

Recommendation area 2 – Activities

The notice board had contrasting information which can be confusing for residents and visitors. For example, there are two different posts of information for hairdresser visits.

- 2.1 We recommend reviewing and refreshing the posted information on notice boards on a monthly basis, ensuring all information is up-to-date.

Recommendation area 3 – Training and Support

Managers highlighted improvements around Dementia care were needed, with suggestions including delivering awareness training and creating Dementia Champions within the home.

3.1 We recommend the provider review Dementia training needs amongst staff.

Recommendation area 4 – Equipment and Supplies

Staff suggested there was a need for more equipment

Managers highlighted improvements were needed around Dementia care, including appropriate refurbishment/development of a specialist unit.

4.1 We recommend reviewing equipment and supplies in line with current residents and their care plans and putting in place an annual/6 monthly review process.

4.2 We recommend equipment and supplies is a set agenda item for team meetings so that any concerns can be raised and escalated where appropriate.

4.3 We recommend the provider review how it is catering for Dementia patients and develop a business plan and action plan complete with short and longer term actions to ensure ongoing progress can be made towards putting in place improvements, whilst any funding is secured for larger scale developments

Recommendation area 5 – Food

Staff and residents highlighted that the food can be dull and repetitive.

5.1 We recommend including a variety of meals and meal options, to ensure that residents look forward to their meals and are satisfied with them.

Recommendation area 6 – Safety and Hygiene

Kitchen staff highlighted a bin in the kitchen which causes fruit flies and is unhygienic when preparing meals.

6.1 We recommend regularly changing bins to ensure that there is no contamination when cooking residents' food.

Recommendation area 7 – Other

None identified

Care Home Response

1.1 Staffing is continually monitored via a dependency tool and therefore staffing is adjusted in accordance to any changes within the dependency levels on each unit. Dependency levels are monitored by the home and area manager on a monthly basis and staffing adjusted accordingly where needed.

1.2 Recruitment is discussed during staff meetings and staff are given the opportunity to raise any comments in regards to workload during their supervisions.

1.3 Yearly pay reviews are carried out company wide and increments are carried out in line with national increases. The home has access to overseas recruitment where they may be struggling to recruit locally which has proven to be highly successful.

2.1 This is now carried out by the home/deputy manager.

3.1 Dementia training has been arranged in the coming weeks.

4.1 N/A - Monthly checks on equipment is carried out and replacements or additional equipment is ordered as required.

4.2 N/A - This area is discussed during staff H&S meetings. Staff also have the opportunity to raise any issues/requests/queries with equipment during daily handover meetings with the management team where any urgent issues can be dealt with immediately.

4.3 Plans are in place and due to commence which include introducing a more dementia friendly environment- residents have been involved in choosing colours for the units and themes for the communal areas.

5.1 N/A - Monthly resident committee meetings are set up where food quality and variety is discussed so that menus can be adjusted as needed.

6.1 Bins were ordered and since replaced.

4.4. Report – Elm Lodge

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 Elm Lodge for their courtesy, patience and openness during our visit.

Enter and View Report

Martin House (28th September 2022)



Service visited:	Martin House
Address:	1 Swift Road, Southall UB2 4RP
Date & Time of Visit:	28th September 2022 10:00am – 3:00pm
Status of Visit	Announced
Healthwatch Ealing “Enter & View” Authorised Representatives	Temitope Onasanya, Radha Reddy, Esra Arif and Maryada Shrestha
Healthwatch Ealing contact information	Healthwatch Ealing, 45 St. Mary’s Road, Ealing, W5 5RG Tel: 0203 886 0830 Email: info@healthwatchealing.org.uk
CQC Rating	Overall Good
Date of CQC Report	1 st of October 2022

5. Background of Martin House

Introduction of Chestnut Lodge

Martin House is one of the four Minster Ealing care homes, operated in partnership with Ealing Council. Martin House has lift access, along with assigned en-suite bedrooms for each resident. The residence accommodates up to 75 older people, along with dementia and nursing units. On the day of our visit 56 residents were present. The residence consists of street-coded units with each unit having its own dining room, lounge, kitchen and activities room. Each unit meets different needs of residents requiring residential and nursing care.

CQC Rating

The Care Quality Commission (CQC) are the independent regulator of health and adult social care in England. They ensure that health and social care services provide people with safe, effective, compassionate, high-quality care and encourage care services to improve. At the time of writing, Martin House was last inspected on the 13th and 20th of September 2022 in an unannounced visit by the CQC. The residence was rated ‘Good’ overall, with individual ratings of ‘Good’ for an effective, responsive, safe and well-led service.

5.1. General Observations

Our analysis is based on the following:

- Observations from an Enter and View tour of the residence, given to our authorised representatives by Martin House manager and deputy manager.
- Interviews with on-site managers, staff and residents.

Location & Signage

- The reception was clean, odourless and tidy.
- The receptionist was welcoming and friendly.
- We were welcomed into a bright and clear meeting room next to reception and offered hot beverages.

General Environment/Facilities

- The creative work of residents was displayed in the hallways of each unit throughout the residence.
- We observed dementia friendly activities on the wall in the hallways within the dementia unit (Image 1).
- We were told that each unit has a 'break room' to maintain social distancing.
- We were told that the colour scheme in the hallway of the dementia unit is yellow, as the color has been known to be beneficial for dementia patients.



Image 1 – Dementia friendly activity in the hallway

Accessibility

- Each corridor on every floor has handrails to assist residents when moving around the home.
- Designated fire exits were noticed, along with fire drill information.
- Corridors were wide enough to accommodate residents who use wheelchairs.
- Corridors were wide enough to accommodate residents who need assistance from staff to walk around the home.
- The residence is located near public transport, including a nearby bus stop.

Staff

- We observed a positive rapport between staff members, including the managers and nurses.
- The staff were accommodating, regularly checking on residents to ensure they all had what they needed.
- We observed an irritated resident, however the nurse handled the situation in a calm manner which caused the resident to feel better.

Health & Wellbeing

- Although there was no covid in the residence at the time of our visit, we were still asked to wear protective masks.
- Also, the residence has covid precautions in place for families who visit residents.
- There is also a quiet room on every floor for residents who may be irritated, agitated, or in need of some alone time.

Food

- We observed both an English and Indian menu for the residents.
- We were told that most of the residents in Southall are Indian, therefore the menu was chosen to cater to them (Image 2).
- Hot food is prepared in the kitchen on the ground floor then transferred to each unit in hot trolleys.
- Residents are given snacks between meals which was seen to be prepared in the kitchenette attached to the units.

INDIAN SPRING MENU 2022
WEEK 2

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
	INDIAN COOKED BREAKFAST			INDIAN COOKED BREAKFAST		
LUNCH	LUNCH	LUNCH	LUNCH	LUNCH	LUNCH	LUNCH
LAMB CURRY SERVED WITH RICE	EGG CURRY SERVED WITH RICE	FISH CURRY SERVED WITH RICE	CHICKEN KORMA SERVED WITH RICE	FISH AND CHIPS	ALOO PARATHA SERVED WITH RICE AND CUCUMBER YOGHURT	CHICKEN MASALA SERVED WITH RICE
GREEN DAL SERVED WITH RICE	CAULIFLOWER CURRY SERVED WITH ROTI	YOGHURT CURRY WITH POTATO SERVED WITH RICE AND ROTI	DRY POTATO CURRY SERVED WITH ROTI	CHANNA DAL SERVED WITH RICE	TOOR DAL SERVED WITH RICE	AUBERGINE CURRY SERVED WITH ROTI
OKRA CURRY SERVED WITH ROTI	RED DAL SERVED WITH RICE		BLACK DAL SERVED WITH RICE	PANEER AND PEA CURRY SERVED WITH ROTI		BROWN DAL SERVED WITH RICE
KHICHDI			KHICHDI			KHICHDI
SUPPER	SUPPER	SUPPER	SUPPER	SUPPER	SUPPER	SUPPER
SPINACH CURRY SERVED WITH ROTI	BROWN DAL SERVED WITH ROTI	CARROT AND POTATO CURRY WITH ROTI	YELLOW DAL SERVED WITH ROTI	S BEAN CURRY SERVED WITH ROTI	COURGETTE CURRY SERVED WITH ROTI	RED DAL SERVED WITH ROTI

Image 2 – Indian food menu

Fire Safety

- Fire evacuation plans were displayed throughout the residence, including fire test notices (Image 3).
- The fire marshals in the residence were listed and displayed in the hallway, with marshals including the manager.

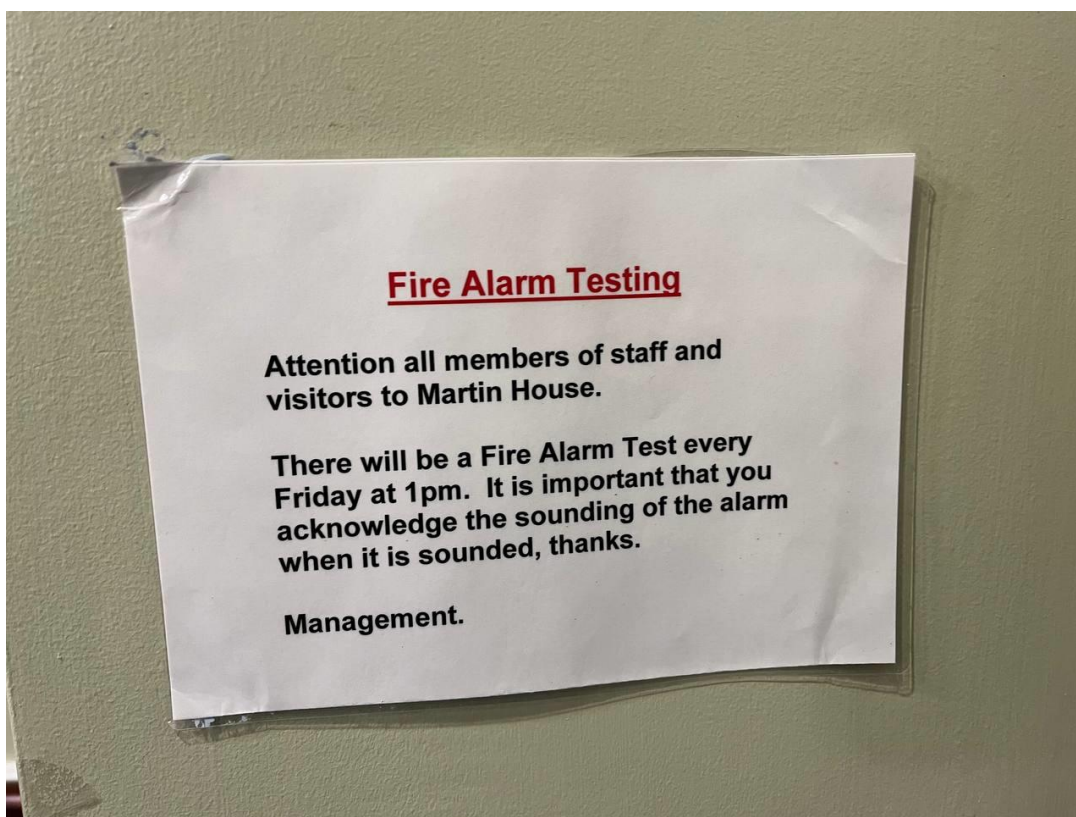


Image 3 – Fire alarm testing notice

Notice Boards & information displayed

- The notice boards contained the CQC certificate of registration which was displayed in the reception area.
- In the hallways, information on an annual staff and resident survey was displayed.
- We observed activity calendars on notice boards throughout the residence (Image 4).
- There was also information on staff champions (staff skilled in a particular area i.e dementia care), (Image 5).

MARTIN HOUSE ACTIVITY FOR SEPTEMBER 2022

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
			1 ARTS & CRAFT FROM 10:30AM w/ CLAIRE STUDIO CRESCENT ONE TO ONE ACTIVITY IN ALL THE UNITS	2 QUIZZES GAMES, SONGS, SINGING @ 11AM MARCH ROAD MANICURE HAND MASSAGE IN ALL THE UNITS	3 AFTERNOON TEA with ACTIVITY PLAN BY STAFF IN ALL THE UNITS	4 ONE TO ONE ACTIVITY IN ALL THE UNITS
5 SING A LONG w/ LAWRENCE IN THE LOUNGE & ONE TO ONE IN THE ROOMS IN ALL THE UNITS	6 GENTLE EXERCISE & MUSIC with ANTHONY @ 11AM SAMUELSON LANE ONE TO ONE ACTIVITY IN ALL THE UNITS	7 LEGION OF MARY @ 11AM STUDIO CRESCENT ONE TO ONE ACTIVITY IN ALL THE UNITS	8 ARTS & CRAFT FROM 11AM w/ CLAIRE SAMUELSON LANE ONE TO ONE ACTIVITY IN ALL THE UNITS	9 QUIZZES GAMES, SONGS, SINGING @ 11AM MARCH ROAD RESIDENTS & STAFF PARTY DAYCENTRE GROUND FLOOR	10 ONE TO ONE ACTIVITY IN ALL THE UNITS	11 ACTIVE CHAT IN ALL THE UNITS
12 BINGO FROM 11AM STUDIO CRESCENT ONE TO ONE ACTIVITY IN ALL UNITS	13 GENTLE EXERCISE & MUSIC with ANTHONY @ 11AM STUDIO CRESCENT HAND MASSAGE MANICURE IN ALL THE UNITS	14 LEGION OF MARY @ 11AM SAMUELSON LANE ONE TO ONE ACTIVITY WITH STAFF IN ALL THE UNITS	15 ARTS & CRAFT FROM 10:30AM w/ CLAIRE STUDIO CRESCENT ONE TO ONE ACTIVITY IN ALL THE UNITS	16 QUIZZES GAMES, SONGS SINGING @ 11AM MARCH ROAD LIGHT HAND MASSAGE MANICURE IN ALL THE UNITS	17 MOVIE AFTERNOON w/ POPCORN / CAKE IN ALL THE UNITS	18 ONE TO ONE ACTIVITY IN ALL THE UNITS
19 SING A LONG w/ LAWRENCE IN THE LOUNGE & ONE TO ONE IN THE ROOMS IN ALL THE UNITS	20 GENTLE EXERCISE AND MUSIC with ANTHONY @ 11AM MARCH ROAD ONE TO ONE ACTIVITY IN ALL THE UNITS	21 LEGION OF MARY @ 11AM STUDIO CRESCENT ONE TO ONE ACTIVITY WITH STAFF IN ALL THE UNITS	22 ARTS & CRAFT FROM 11AM w/ CLAIRE SAMUELSON LANE ONE TO ONE ACTIVITY IN ALL THE UNITS	23 QUIZZES GAMES, SONGS, SINGING @ 11AM MARCH ROAD MOVIE AFTERNOON FILM IN ALL THE UNITS	24 ONE TO ONE ACTIVITY IN ALL THE UNITS	25 READ ALOUD w/ STAFF ONE TO ONE OR GROUP IN ALL THE UNITS
26 BINGO FROM 11AM SAMUELSON LANE ONE TO ONE ACTIVITY IN ALL UNITS	27 GENTLE EXERCISE & MUSIC with ANTHONY @ 11AM STUDIO CRESCENT HAND MASSAGE MANICURE IN ALL THE UNITS	28 LEGION OF MARY @ 11AM SAMUELSON LANE ONE TO ONE ACTIVITY WITH STAFF IN ALL THE UNITS	29 SING A LONG w/ MORRIS FROM 11AM MARCH ROAD ONE TO ONE ACTIVITY IN ALL UNITS	30 QUIZZES GAMES, SONGS, SINGING @ 11AM MARCH ROAD AFTERNOON GENTLE EXERCISE HAND MASSAGE MANICURE/NAIL FILING IN ALL THE UNITS		

STAFF TO DISINFECT THE ACTIVITY MATERIALS BEFORE AND AFTER EACH USED.

Image 4 – Activity schedule



Image 5 – Information displayed in hallway

5.2. Interviews – Martin House

Interviews with On-Site Managers

Methodology

We engaged with **two** on-site managers, including the manager and deputy manager. Managers were asked questions seen below.

To uphold confidentiality responses have been grouped and randomised for each question.

Question 1. Addressing CQC and Healthwatch Ealing observations

- The manager expressed that when the CQC visited in May 2022, they were still in the midst of a covid pandemic which impacted the staff personally and professionally. However, in 2022 they have learnt to improve and deal with covid restrictions better.
- In addition, when the CQC came in 2021 the residence was still adjusting to a new company.
- In response to the CQC recommendations they have undergone a lot of training among staff and undertaken a recruitment drive to address the shortage of nurses – including overseas recruitment.

Question 2. How they plan to implement changes

- The managers mentioned that they continuously strive to make improvements, not just when there are breaches or emergencies.
- They plan to implement changes based on regulations, staff and resident's needs.
- They also believe that it is important to tailor the care and service for each resident as they are individuals and may require different approaches.
- The manager expressed interest in looking to introduce raised flower beds, so residents don't have to bend down when gardening.

Question 3. When they expect to see the changes made

- The managers stated that the changes are continuous and ongoing with planned training and group discussions.
- Regarding the implementation of the raised flower beds, this is expected to be done by spring 2023 in order for the residents to enjoy gardening.

Question 4. How they plan to get staff involved in implementing these changes

- The managers plan to get the staff involved by having regular staff meetings and supervisions.

- They also expressed the importance of having appraisals in the form of “**lessons learnt meetings**” for staff to improve in their quality of work and service.

Question 5. What they are finding difficult and what has been straightforward for them

- Due to difficulties in staff recruitment, the managers have had to look at alternative recruitment such as overseas nurses.
- Once overseas nurses are trained and comfortable within their job role, management reported difficulties within their own role easing.
- The managers are delighted in having a very good team who treat the residents as human beings.
- The manager also described the care home as her ‘second home’.

Interviews with Staff

Methodology

We engaged with **twenty** staff, including kitchen staff, laundry staff, cleaners, nurses, and carers. Staff were asked questions seen below.

To uphold confidentiality responses have been grouped and randomised for each question.

Question 1. Whether the company has their best interests in mind when making business decisions

- All interviewed staff members reported that they believe the company has their best interests in mind when making business decisions (100%).

Question 2. Whether their team helps them to complete their work successfully

- All interviewed staff members responded that they believe their team helps them successfully complete their work (100%)

Question 3. Their overall experience of working at the residence

- Overall, the feedback on staff members’ experience of working at the residence was complimentary and approving.
- Some staff members mentioned that they are enjoying working with residents, which is a highlight of their role.
- *“I am happy to see and work for the residents because I like talking and interacting with them and we enjoy having discussions.”*
- *“Enjoyed caring for the residents to ensure that they receive the best possible care.”*
- Although there were differences in the longevity of staff members service at the residence, there was overall positive feedback of their experience working at Martin House.

- *“I have been a nurse for 47 years now and this is my 5th year with Martin House. I have been very happy since I joined here. Staff are very helpful, and everyone knows what they are doing.”*
- *“I have been here 1.5 years. My overall experience has been very pleasant. The staff here are very understanding and teamwork here is absolutely amazing.”*

Question 4. What they like about working at the residence

- There was a common response with staff members expressing how much they enjoy working with the residents.
- *“As I believe in one thing, compassion, and my compassion helps me to assist residents with their daily tasks. Treating them with respect and dignity.”*
- *“I like to work with the elderly residents. It helps me to enable my skills in understanding their everyday needs and meeting them in a timely manner.”*
- Among some of the responses, staff members showed appreciation for having a good team and friendly work environment.
- *“Team work is really effective here and I like that.”*
- *“Environment is good, staff is friendly, we work as a team and support each other.”*

Question 5. What improvements they would like to see made

- Staff members reported that they would like to see an increase in salary and more staff members recruited, in order to decrease the workload.
- *“Yes, salary. Work is overloaded and extra staff is needed.”*
- *“I think the improvement required is more staff as we can be short staff. It’s not really to the standards.”*
- Some staff members also mentioned that including different activities would be a good improvement for the residents.
- *“I think more different activities for the residents will be good.”*
- In addition, a staff member reported that there should be more food choices available for residents.
- *“The improvement I would like the residents to be given is more choices for food.”*

Interviews with Residents

Methodology

We engaged with **sixteen** residents in total. Residents were asked questions seen below.

To uphold confidentiality responses have been grouped and randomised for each question.

Question 1. Would you recommend this place of residence to family or friends?

- All interviewed residents reported that they would recommend Martin House as a place of residence to family or friends.

Question 2. Whether they feel the staff worked well together to care for them?

- All interviewed residents said that they feel the staff members work well together to take care for them.

Question 3. Describe their overall experience of care at the residence?

- The overall experience of care at the residence varied, with a mix of positive and negative feedback.
- The positive feedback received included some residents praising the welcoming environment of the home.
- *"I have no complaints, it's excellent, they're very welcome, I enjoy living here."*
- *"It's lovely living here, lived here for a long time."*
- Regarding negative feedback, some residents complained about not being seen quickly enough.
- *"It's okay they care for me but sometimes when I need help immediately, I have to wait."*
- *"The staff say they are too busy to help."*
- Other residents reported feeling lonely and being homesick, which impacted their overall experience at the residence.
- *"I want to go home. I have two sons, it is nice to be with my family, not so nice to be here."*

Question 4. What they like about the residence?

- Most of the interviewed residents responded positively about the residence. There was a common theme in the responses including good food and staff members.
- *"The staff is kind, the staff is good, the food is good"*
- *"Staff, residents, food is good. The atmosphere is relaxed."*
- Other residents reported that they like the environment of the residence, as it is peaceful for them.
- *"Peaceful and quiet environment", "Peaceful and nice"*
- Regarding negative feedback, a few residents felt they were not receiving adequate support from the staff.
- *"18 months, they're not supporting much, feeling frightened, anxious. I said to them that I need an arm chair but still they didn't promise me."*
- *"Don't like living here. The staff is not bothered if I'm happy here or not."*

Question 5. What improvements they would like to see made in the residence?

- Nine residents were happy and could not identify any improvements to be made in the residence.
- Among those who suggested improvements, the increase in staff members and training was frequently mentioned.
- *"More staff, I need 24/7 care. I am in bed so if there is more staff it will be helpful."*
- *"The staff need to be more trained for their job to support me well."*
- A resident also commented on making improvements that will help their mental health.
- *"I don't know what changes, but they should make some changes to help my mental health."*

5.3. Conclusions and Recommendations – Martin House

Overall, positive feedback was received from the staff members and residents at Martin House. Most staff members enjoyed working at Martin House due to good teamwork, communication and took pleasure in caring for the elderly. Residents also mentioned receiving good care from the staff, and overall enjoy their stay at the residence.

Good practice:

- There was a warm relationship observed between staff and residents, making the residents feel “at home” and well looked after.
- There is an Indian food menu which accommodates many of the residents.
- There are dementia-friendly activities on the wall for mobile residents to be entertained with as they walk through the corridor.

This report also provides a few recommendations for Elm Lodge:

Recommendation area 1 – Staffing

The company shared difficulties in recruiting staff and staff themselves highlighted shortages in staffing levels and the impact on workload and stress. Staff expressed a desire for increased wages.

- 1.1 We recommend reviewing staffing numbers with a view to providing additional support to manage the workload.
- 1.2 We recommend better internal communications with staff about recruitment plans and progress, and results of workload reviews and actions.
- 1.3 We recommend consideration of wage increases and or additional incentive schemes, such as ‘finders fees’ to support overall recruitment and retention of staff.

Recommendation area 2 – Activities

Some staff highlighted a need for different and varied activities and the introduction of raised flowerbeds was specifically suggested. One resident suggested improvements should be made to help their mental health and another highlighted that they were lonely and homesick.

- 2.1 We recommend reviewing the activity calendar and implementing daily activities for residents to ensure that they are physically and mentally engaged in the residence.
- 2.2 We recommend introducing raised flower beds, to support resident interaction with gardening and the benefits of being outside.

Recommendation area 3 – Training and Support

Some residents fed back that they were not seen quickly enough, did not have enough support, experienced the impact of staff shortages and highlighted a need for more training to ensure their support needs were catered for. One resident reported feeling lonely and homesick.

- 3.1 We recommend the provider review the staff skills mix, and how it is catering for current residents and their individual support needs.
- 3.2 We recommend clarity on the support offer (and the flex within this), and how this is communicated to residents, to support better management of expectations.
- 3.3 We recommend the provider consider options for involving local charities/ befrienders etc to provide additional layers of support for its residents.

Recommendation area 4 – Equipment and Supplies

None identified

Recommendation area 5 – Food

Staff and residents highlighted that the food can be dull and repetitive.

- 5.1 We recommend including a variety of meals and meal options, to ensure that residents look forward to their meals and are satisfied with them.

Recommendation area 6 – Safety and Hygiene

None identified

Recommendation area 7 – Other

None identified

Care Home Response

- 1.1 Staffing is continually monitored via a dependency tool and therefore staffing is adjusted in accordance to any changes within the dependency levels on each unit. Dependency levels are monitored by the home and area manager on a monthly basis and staffing adjusted accordingly where needed.
- 1.2 Recruitment is discussed during staff meetings and staff are given the opportunity to raise any comments in regards to workload during their supervisions.
- 1.3 Yearly pay reviews are carried out company wide and increments are carried out in line with national increases. The home has access to overseas recruitment where they may be struggling to recruit locally which has proven to be highly successful.
- 2.1 This is discussed with residents during monthly resident committee meetings and adjustments made to the schedule as needed- external entertainers regular visit the home which include exercise sessions.
- 2.2 Raised beds are in place now and part of the activity programme.
- 3.1 Staff skill mix is continually under review and adjusted in accordance to unit dependency levels. There is a whole home approach so support roles are in place who can provide additional support as needed.
- 3.2 As above and in addition this is discussed during resident/relative meetings and any issues raised are addressed by the home manager.
- 3.3 This has been looked into previously however as a care home provider we do not meet the criteria for many of the services. We do however have regular external entertainers that visit the home.

5.1 Monthly resident committee meetings are set up where food quality and variety is discussed so that menus can be adjusted as needed.

4.4. Report – Martin House

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 Martin House for their courtesy, patience and openness during our visit.

Interview with Senior Area Manager



Closing Interview with Senior Area Manager of Minster Care Management Limited

At the completion of the four enter and view visits, an interview with the senior area manager of Minster Care Group was carried out.

Interview with Senior Manager

Methodology

We talked with the senior area manager of Minster Care Group. The senior manager was asked the following questions:

- 1) What are your thoughts on the suggested changes to be made within the residence?
- 2) How do you plan on implementing these changes?
- 3) When do you expect to see these changes made?
- 4) How do you plan to get staff involved in the implementation of these changes?
- 5) What are you finding difficult? Has anything been straightforward or easy?

Question 1. What are your thoughts on the suggested changes to be made within the residence?

- The senior manager mentioned that she is specifically happy about the green report from the CQC for Martin House, as it shows that they have addressed all improvements.
- She has read the CQC reports and recommendations for the four care homes and has monitored this. The issues identified have currently been addressed.
- The manager understands that there is always room for improvement with staff training and providing quality care to residents, so is focused on ensuring this is delivered.

Question 2. How do you plan on implementing these changes?

- The senior manager plans on improving access to training. She stated that training was put on hold due to the covid-19 pandemic, restrictions and lockdowns.
- She believes that staff receive and obtain a lot more information from face-to-face training, compared to e-learning and is planning to bring face-to-face training back.
- The senior manager also stated that she believes implementing more training will lead to a domino effect on any other changes that need to be made.

Question 3. When do you expect to see these changes made?

- The mode and delivery of training will be different as they are focused a lot more on clinical cases such as wound care and end of life care.

Question 4. How do you plan to get staff involved in the implementation of these changes?

- At management level, they have implemented monthly home manager meetings where they discuss policies, regulations and have open discussions on what is and what is not working in the home for residents.
- The senior manager is very supportive of the monthly home manager meetings as she wants the four homes to be on the same page and keep in contact with each other.

Question 5. What are you finding difficult? Has anything been straightforward or easy?

- Currently, she “has not hit any walls” and has found her role relatively straightforward.
- It has been refreshing to work with familiar staff that she has known previously and to see that the home managers truly want to improve the homes.

Summation

Minster Care Group Ealing Care Homes



Summation

Healthwatch England uses eight indicators by which we measure the performance standards of the care homes we visit. This summation offers our insight and assessment of both achievements and potential improvements.

Have strong, visible management

Acknowledging the limitations of a single, one day visit we found management to be direct and engaged. We saw the cohesive, and consistently cooperative response to our visits as symbolising a positive management approach.

Have staff with time and skills to do their jobs

Employees highlighted shortages in staffing levels and the impact on workload and stress levels. Staff expressed a desire for increased wages. We recommend reviewing staffing numbers with a view to providing additional support to manage the workload. We recommend better internal communications with staff about recruitment plans and progress, and results of workload reviews and actions. We recommend consideration of wage increases and or additional incentive schemes, such as 'finders fees' to support overall recruitment and retention of staff.

Have good knowledge of each resident and how their needs may be changing

Some residents fed back that they were not seen quickly enough, did not have enough support and highlighted a need for more training to ensure their needs were catered for. We recommend the provider review staff skills and how it's caring for current residents. We recommend the provider consider options for involving local charities/befrienders to provide additional layers of support for its residents.

Offer a varied programme of activities

Both staff and residents highlighted issues around the variety and regularity of activities. We recommend reviewing the activity calendar and implementing daily activities for residents to ensure that they are physically and mentally engaged at the residence.

Offer quality, choice and flexibility around food and mealtimes

Staff and residents highlighted that the food can be dull and repetitive. We recommend including a variety of meals and meal options, to ensure that residents look forward to their meals and are satisfied with them.

Ensure residents can see health professionals such as GPs and dentists regularly

The lack of advanced warning of impending medical appointments was highlighted by a small minority. The feeling of being rushed can be both stressful and upsetting and should

be avoided. Dissemination of appointment information may need to be tailored to the individual.

Accommodate residents' personal, cultural and lifestyle needs

Managers highlighted improvements around Dementia care were needed, with suggestions including delivering awareness training and creating Dementia Champions within the home. We recommend the provider review Dementia training needs amongst staff.

Some staff highlighted insufficient equipment and supplies available to support the delivery of quality care. We recommend reviewing equipment and supplies in line with current residents and their care plans. We recommend putting in place an annual/6 monthly review process.

Be an open environment where feedback is actively sought and used

Praise is due to staff and management for seeing our visits as an opportunity rather than a chore. No topic and no area were off limits. No one shied away from awkward questions. Everyone was available, from senior management through frontline staff - and we got serious and considered responses to all of our queries.