

# ‘Enter and View’ Report

## Threen House Nursing Home

*29 Mattock Lane, Ealing W5 5BH*



Healthwatch Ealing

30<sup>th</sup> October 2017

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# Introduction

## Details of Visit

Details of Visit:	
Service Visited	Threen House Nursing Home
Service Address	29 Mattock Lane, Ealing W5 5BH
Service Provider	Alan Hannon
Care Home Manager	Paraskevi Beletsioti
CQC Rating	Inadequate
Date of CQC Report	12 October 2017
Status of Enter & View Visit	Announced
Date and Time	Friday 30 <sup>th</sup> October 2017, 10am to 2pm
Authorised Representatives	Oyinkan Adesiyan, Thais Curia
Lead Authorised Representative	Oyinkan Adesiyan
Contact Details	Healthwatch Ealing, Martin House, 1 Swift Road, Southall, UB2 4RP Tel: 0203 8860 830 Email: <a href="mailto:info@healthwatchealing.org.uk">info@healthwatchealing.org.uk</a>

## Acknowledgments

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

## Disclaimer

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

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# What is Enter and View?

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

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

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

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

## **Purpose of Visit**

- To engage with service users of care homes at the point of service provision
- To assess care homes against Healthwatch England's quality indicators of a good care home

- Observe residents and relatives engaging with the staff and their surroundings
- Capture the experience of residents and relatives and any ideas they may have for change

## Strategic Drivers

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

## Methodology

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

Authorised representatives conducted short interviews with two residents, one visitor two members of staff, the care home manager, and owner at the care home. The interviews centred around Healthwatch England's indicators of a good care home<sup>1</sup>;

1. Have strong, visible management
2. Have staff with time and skills to do their jobs
3. Have good knowledge of each resident and how their needs may be changing
4. Offer a varied programme of activities
5. Offer quality, choice and flexibility around food and mealtimes
6. Ensure residents can see health professionals such as GPs and dentists regularly
7. Accommodate residents' personal, cultural and lifestyle needs

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<sup>1</sup> Healthwatch England (2017) [What's it like to live in a care home](#)

8. Be an open environment where feedback is actively sought and used

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

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

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## Summary of Results

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### Summary of findings

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

### Background

We were informed that Threen House has accommodation for 20 residents and they have 12 residents at present. Threen House is a nursing home, and we were informed by the manager, owner and other staff members that staffing consists of:

- Morning: 3 care staff, 1 trained nurse and the manager
- Afternoon: 2 care staff, 1 trained nurse and 1 floating care staff

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

- Night: 2 care staff, 1 trained nurse

According to CQC guidelines, there should be “*sufficient numbers of suitably qualified, competent, skilled and experienced staff to meet the needs of the people using the service at all times*”.<sup>3</sup> There is no specific ratio highlighted in the guidelines. In this case, there is 1 care worker for every 4-6 residents, and 1 nurse for 12 residents. In addition, there is a ‘floating’ carer who is available to lend an extra hand throughout the home as needed in the afternoons. We were informed that the owner, a trained carer, is also available throughout the day.

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## Detailed Results

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### General Observations

The visit commenced with a tour of the care home. This section details the direct observations made by the HWE authorised representatives.

#### Reception Area

The reception area was clean, tidy and secure. There was no reception desk, however to access the home, one had to ring a doorbell. A staff member responded, and we were let in to the home. We were met immediately by the manager in the reception area who welcomed us to Threen House, and asked us to sign the sign-in book and use the hand sanitiser.

#### Information displayed

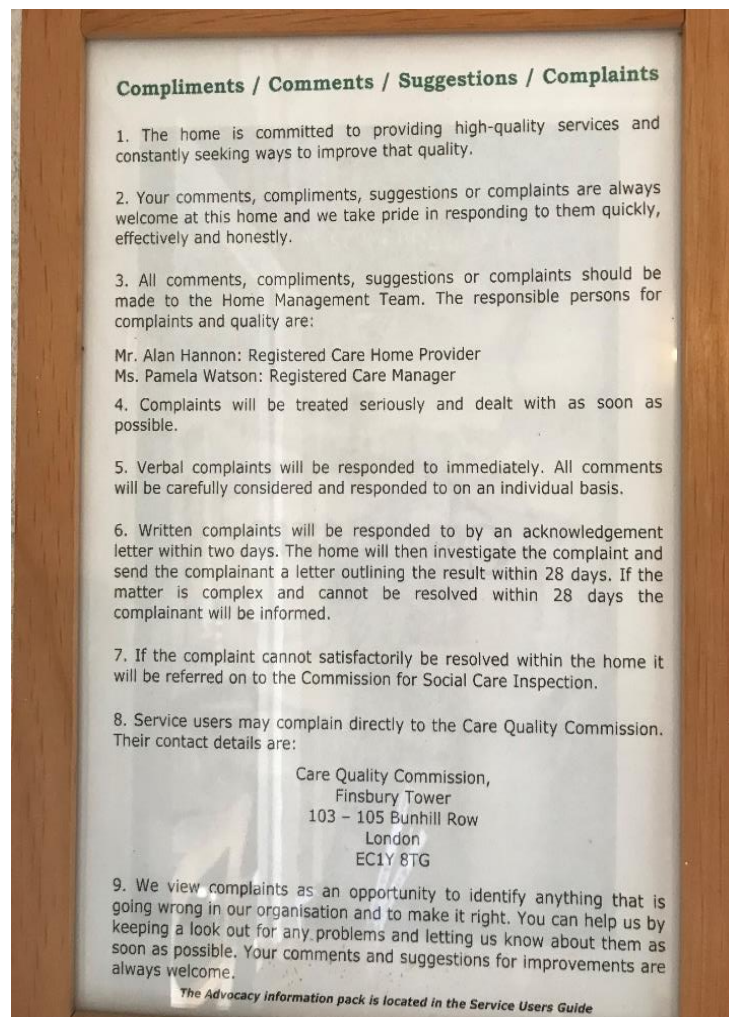
The CQC certificate of registration and the home’s last rated CQC inspection were displayed clearly on the wall in the reception area. Also displayed were the ‘Post Falls Protocol’ and the ‘Choking Risk Assessment’ for staff. The Healthwatch Ealing Enter and View poster sent ahead of the visit was also displayed in the reception area. We observed an activity board, a ‘Compliments/Comments/Suggestions/Complaints’ form, a poster for an upcoming music event and an events calendar displayed in the reception

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<sup>3</sup>CQC (2017) [CQC Regulation 18: Staffing](#)



area and lounge. The compliments form was out of date, as the wrong registered manager was named on it.



### Complaints Procedure

## Environment

The environment was clean and clutter free. There was no odour present throughout the care home. The home was warm, and the conservatory area was bright and airy.

The ground floor had two bedrooms, one of which was occupied, and all communal areas were located here. In the lounge area, there was a television, and there was music playing. In the lounge, we saw a small eating area where residents could have food if they chose to. We were told that residents can also eat in their rooms, in their



chairs in the lounges, and in the conservatory. We saw residents having cups of tea in the conservatory.

On the first floor, there were five bedrooms and two shared bathrooms - one shower room and one bathroom with a hoist. The second floor contained four bedrooms and one bathroom. We were informed that none of the bedrooms are ensuite, but residents have a sink in their rooms. There is one lift in the home, which is not coded for entry. We were told that the doors to the staircases are kept locked always and residents do not have access to them. The below-ground floor contained two bedrooms and a bathroom, the manager's office, staff room, hairdressing salon, and storage spaces. All areas of the home were well lit, clean and clutter free.

### **Staff**

Staff were recognisable with distinct uniforms. The manager and owner did not wear uniforms. We were told that there is no agency staff at Threen House. We were told that there are currently 19 members of staff and 2 work experience volunteers. The manager informed us that all staff and volunteers are DBS checked prior to commencing work at Threen House.

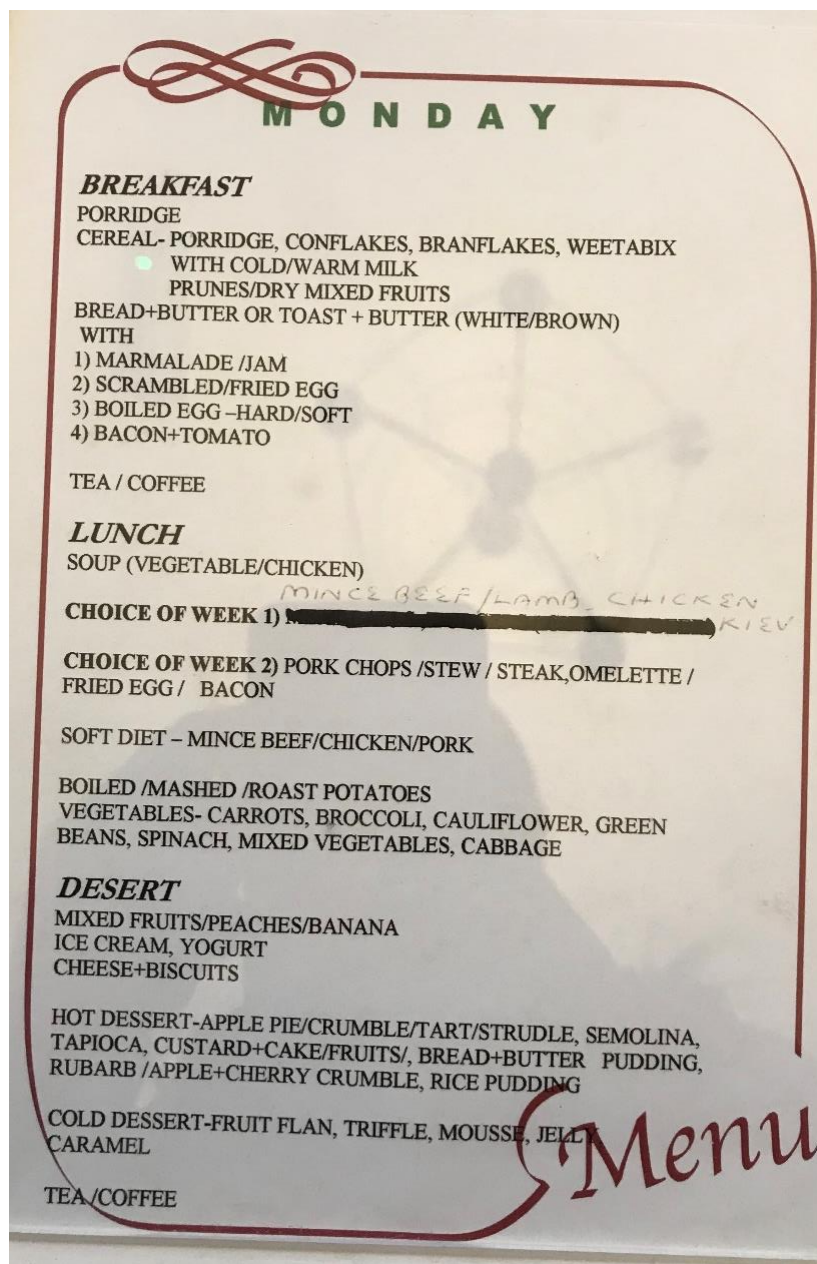
### **Relationship of staff members with residents**

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

### **Food**

Hot food is prepared daily in the kitchen on the ground floor then transferred to the dining lounge. Residents are given a daily menu which consists of approximately 2-3 choices per meal per day. We were shown the daily menu. While the menu contained a variety of options, there was no specific reference made to dietary requirements;

vegetarian, vegan. The owner and manager informed the Authorised Representatives that there were currently no residents who require halal food. We were told that the menu is planned two weeks in advance and that residents' dietary requirements are taken into account. We were also informed that fluid intake is monitored daily for residents who are recognised as having low fluid intake. We were told that there were seasonal menus which considered dieticians recommendations i.e. foods with high fluid content during the summer to minimise risk of urinary tract infections.



Daily Menu

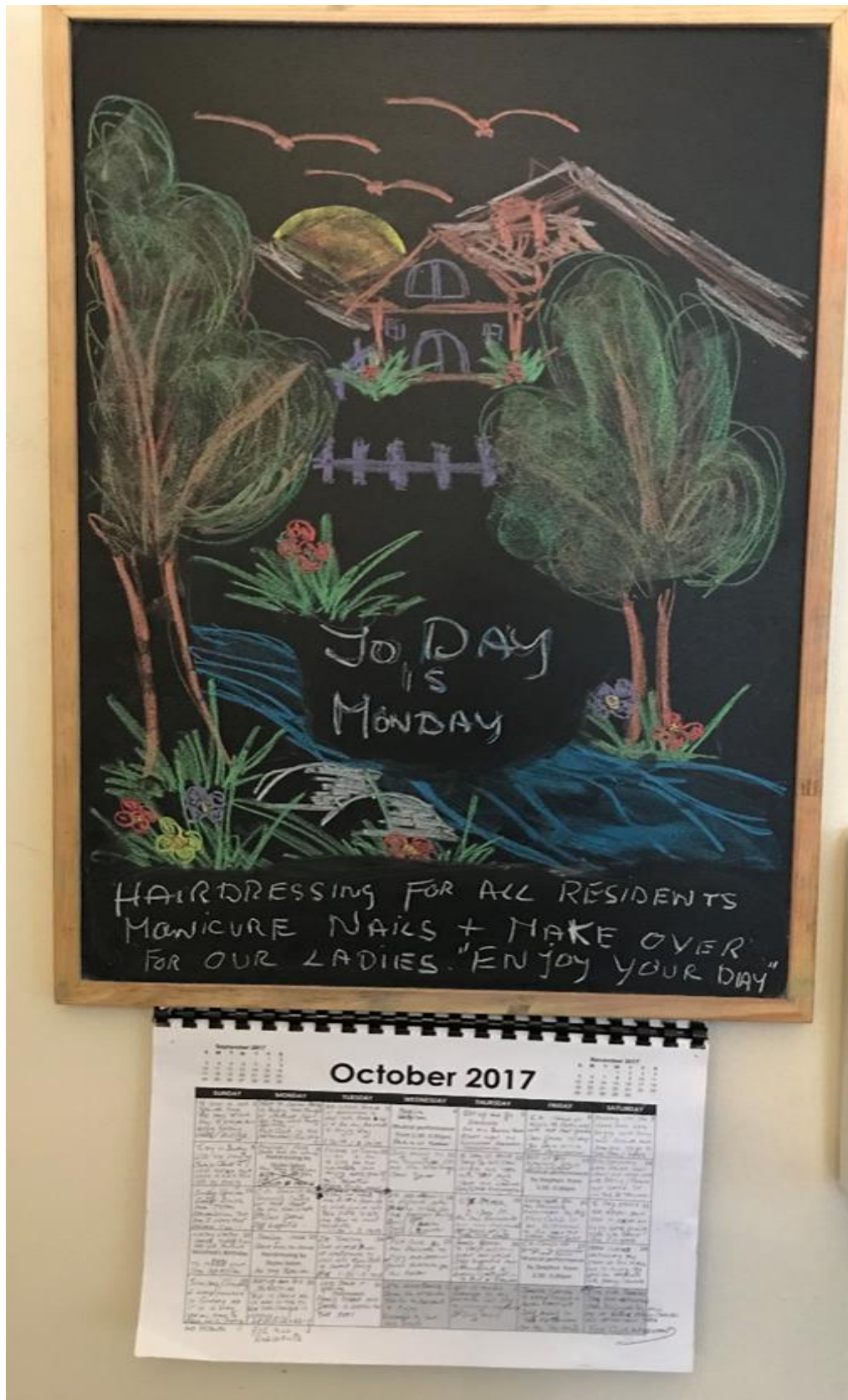
## Activities

There is a no employed activity coordinator for the home. We were told that the daily activities are planned and carried out by the owner, who is assisted by other members of staff. There are daily activities available at the home, which we saw on the daily activity board. Below the daily activity board was an activity calendar which showed the activity plan for the month. We were told that the activity calendar is updated monthly by the owner. We were informed that there are regular activities - visits by entertainers, regular outings to places like Kew Gardens, and in-house parties for birthdays and other occasions.

While the activity drawing was very well done, the Healthwatch Ealing Enter and View Authorised Representatives felt that a larger calendar of upcoming activities would be a good addition. The current format was easy to overlook, and when noticed, difficult to read. A more accessible format would make residents and relatives aware of upcoming daily and weekly activities.

## Medication and Health

We were told that all residents are registered with the local surgery. There are weekly GP visits, and if additional appointments are necessary, the care home staff would request a home visit. We were informed that there is a chiropodist who visits the home every 8-9 weeks. There are also visits by opticians who maintain their own list and visit the home as required and the hairdresser every 2 weeks. We were informed by the staff that the services are well utilised.



Activity Display and Activity Calendar (Below)

## Interviews

Healthwatch Ealing’s Enter and View Authorised Representatives Oyinkan Adesiyan and Thais Curia interviewed 2 residents, 1 relative and 4 staff members. All interviews were carried out in quiet areas of the home where the conversation could not be overheard easily by others.

## Residents

Healthwatch Ealing Authorised Representative Oyinkan Adesiyan spoke with two residents.

<p>General Questions</p>	<p>Both residents reported that they enjoy living at Threen House. Residents stated that the food and staff were things they liked about the home. One resident told us that the staff treat them very kindly are very friendly. We were also told that the home is kept consistently clean. Residents told us that the information they were given before moving in was detailed and easy to understand. They could ask questions and felt satisfied that the home met their expectations.</p>
<p>Food and Mealtimes</p>	<p>Both residents stated that the food on offer at Threen House was to a very high standard. They said the menu was very good, and they were given a lot of choice. Good feedback was received about the portion sizes, warmth of food, and offers of drinks. Both residents told us that they had not requested food or snacks outside of set mealtimes but were aware of others doing so, and food/snacks were provided in those instances. Residents we spoke to were unaware of a specific time where they are offered a range of drinks but assured us that they could get different drinks from the staff members.</p>



<p>Personal Care</p>	<p>Residents gave positive feedback regarding personal care. They told us that their privacy is respected, and they are encouraged to do as much as they can for themselves. There is a hairdressing service - every 2 weeks - and ‘makeovers’ are done on hairdressing days by the owner. Residents told us that the makeovers are very enjoyable. They told us that they are able to request GP appointments if they need them and are supported to attend other healthcare appointments - physiotherapy, audiology, podiatry, ophthalmology.</p>
<p>Activities and Interests</p>	<p>Both residents said that they are offered a range of activities. They enjoy the activities. The activities they told us they enjoy the most are - visits by the entertainers, musical sing-a-longs and tea parties. They told us they can give feedback about activities directly to the staff and owner, and that, in their view, the staff and owner are very receptive to feedback. They are also asked their input when a new activity is being planned.</p>
<p>Staff Behaviour and Attitudes</p>	<p>Both residents were very positive about the staff. They felt very supported by staff, who they described as being friendly, nice and caring. They told us that staff members talk to them about their lives, try to get to know them, and remember details about them.</p>

## Visitors

Healthwatch Ealing Authorised Representative Oyinkan Adesiyen spoke with one visitor at Threen House.

General Questions	The visitor reported that they found Threen House a suitable place for their relative to live. We were told that the home was very accommodating of their relative's needs, and supported them adequately.
Activities and Interests	The visitor felt that their relatives enjoyed the activities and outings. We were informed that the birthday and special occasion parties are very entertaining, and that the owner put a lot of effort into planning and organising the events for the residents.
Staff Behaviour and Attitudes	The visitor was very happy with the staff and told us that the staff were very dedicated and caring towards their relative. They were happy with the amount of time the staff spend with their relative, and felt there was a positive relationship between the staff and their relative.

## Managerial Staff

HWE Enter and View Authorised Representatives Oyinkan Adesiyen and Thais Curia spoke with the manager. She has been a member of staff at Threen House for two months, joining in late August 2017.

Audits and Checks	We were told that the manager has implemented a range of internal audits since starting at Threen House. A plan for audits and checks was devised based on the findings of the CQC inspection in August 2017. The plan for audits and checks includes daily, weekly and monthly medication checks by the staff
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	<p>nurses and manager, monthly falls, skin integrity, infection control and health and safety audits. We were informed that she has also implemented health records audits. All residents have monthly weight checks, a procedure which we were told was in place before the new manager came into post. External audits for the fire alarm system, nurse call system, emergency lights and equipment are also carried out routinely. We were also told that a weekly clinical review meeting to discuss all aspects of the residents' care has been implemented.</p>
<p>Feedback</p>	<p>The manager told us that resident feedback was gathered through an annual questionnaire, completed by residents and (in most instances) relatives. We were told that findings of the questionnaire are shared with staff at the staff meetings, and shared in the 'Friends of Threen House' mailing list which relatives can sign up to receive updates. We were informed that all complaints - verbal and written - are investigated by management (or an external agency, depending on the complaint received), following the complaints policy. Feedback is given to the individual, and an action plan is developed to deal with the complaint.</p>
<p>Staff</p>	<p>The manager explained that each new member of staff must complete one month of induction which includes shadowing for a minimum two shifts and is dependent on previous experience. Each new start is assigned a mentor. New starts must complete all mandatory online training within two months of their</p>

	start date. Feedback on performance is received from the mentor and the new staff member and the induction process continues as required.
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### Staff Members

HWE Enter and View Authorised Representatives Oyinkan Adesiyon and Thais Curia spoke with two staff members and the owner.

Positive Aspects of the role	Staff members said that they enjoyed their roles and felt that they had developed positive relationships with the residents.
Induction process	All staff stated that they received training and are now completing a new mandatory training schedule as implemented by the new manager. Training mentioned included manual handling, nutrition, dementia care, infection control, and falls prevention.
Safeguarding Procedure	All staff members we spoke to stated they were aware of safeguarding procedures. Staff informed HWE that they have recently completed safeguarding procedure trainings as part of the new mandatory training schedule. We were told that the safeguarding training included a detailed look at the protocols and policy, understanding of how to report a safeguarding issue, documentation, and incident report writing and filing.
Supervision and appraisal	Staff members stated staff supervision occurs every 3 months, and appraisal takes place annually. HWE was told that supervision could also take place at other times, if requested by a staff member or deemed necessary by management. A staff member told us that they enjoy the supervisions and appraisal as it

	<p>makes them feel supported by management - they are asked areas in which they want to improve, and what their professional goals are.</p>
Staff meetings	<p>Staff said that meetings happen monthly, and they also have the weekly clinical review meeting which the new manager implemented. Discussed at the clinical review meetings are the daily and weekly medication audits.</p>
Handover Procedure	<p>Staff told us that handover occurs at the end of each shift.</p>
Involvement of family members	<p>Staff said that families and carers are very involved. They are kept informed of any changes with the residents immediately and visit their loved ones regularly.</p>
GP Access/Physiotherapy/Hairdressers etc.	<p>We were told that the GP visits the home weekly. The staff told that if they identify an issue with a resident, then a request for a home visit is made to the GP.</p> <p>All staff said that residents have access to various services;</p> <ul style="list-style-type: none"> <li>• Hairdresser - every week</li> <li>• Chiropodist - every 8-9 weeks</li> <li>• Physiotherapist - as required</li> </ul> <p>We were informed by staff that the owner does nails and makeovers for residents during their 'relaxation time'.</p>
Staffing Levels	<p>All staff agreed that the staffing levels are reasonable. No concerns were raised by staff. Staff felt that the current staff levels are good,</p>

	particularly as there are currently only 12 residents at Threen House.
Support from Management	All staff reported that they felt very supported by management. Staff told HWE that management is approachable and accessible. Staff told us that they are happy with the changes the manager is implementing and they feel happier in their roles. They felt that if they had any problems, they would be able to talk to the manager, and received any necessary help. Staff told us that they feel that the manager’s nursing background helps her to relate to them better and they work together well as a result.

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## Conclusions and Recommendations

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Overall, positive feedback was received from the residents, visitor and staff members at Threen House. Staff commented that they receive adequate support from management, and residents felt that staff are friendly and pleasant. Based on our visit, we would conclude that Threen House meets Healthwatch England’s quality indicators of a good care home (see methodology). This report highlights good practice and provides a few recommendations for Threen House.

- All visitors to the care home should be asked for identification upon entry. This ensures the safety of both residents and staff members.
- All information displayed in the reception area should be checked at regular intervals to ensure it is up to date.
- Menu options should be clearly outlined for those with dietary requirements e.g. vegetarian foods should be marked distinctly so vegetarian residents are made aware of what their food options are. The current menu makes it difficult to determine what the options are and residents who have dietary requirements may not feel sufficiently catered for.

- Review the need for a dedicated activity coordinator with recognised qualifications and whose time is ring-fenced i.e. is not providing care to residents.
- Development of a ‘whole home approach’ towards activities in the home. All staff should be appropriately trained in how to support the activity coordinator to deliver activities.
- Activity planning should be integrated into care planning for residents. Care plans should include individual activity plans which are reviewed regularly through feedback from residents.
- Printed activity calendar should be displayed more prominently and in a more accessible format to make residents aware of upcoming activities.
- Drinks should be offered more consistently throughout the day, to ensure residents are kept well hydrated. A ‘protected drinks time’ where all residents are offered a varied menu of hot and cold drinks should be implemented. The iHydrate report<sup>4</sup> showed that the introduction of a protected drinks time increased the amount of drinks per resident, the percentage of residents getting drinks and the amount of fluid consumed per resident. This would reduce residents’ risk of dehydration which is linked to urinary tract infections, falls, and unnecessary hospital admissions.
- Review feedback mechanisms to ensure all residents, carers and relatives have opportunities to have their voices heard, for example, around activity provision.
- Feedback should be shared with residents, as well as relatives and staff members. A regular residents’ meeting could be implemented as this would be an appropriate medium of sharing feedback, and any proposed changes within Threen House.
- There is no specific guideline on how long shadowing should take place for. However, in the view of Healthwatch Ealing, two shifts is not a sufficient length of time for a new start to fully understand their role. We recommend that

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<sup>4</sup> University of West London, CWHHE Clinical Commissioning Group Collaborative, and NIHR CLAHRC (no date) The I-Hydrate project Optimising hydration of elderly residents in nursing homes.

Threen House extend their shadowing period to a week minimum (from observations at other care homes, two weeks seems to be a common length of time) to allow for full training of new staff members.

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## Report

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The report will be published on the Healthwatch Ealing website - [www.healthwatchealing.org.uk](http://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 Threen House for their courtesy, patience and openness during our visit.

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## Threen House Response

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Healthwatch Ealing sent a draft of the report to Threen House to check for factual accuracy. The following responses to the report were received from the manager;

- Staffing levels: There is also one cook from 8am to 8pm and one domestic staff from 8am to 2pm.
- Food: Currently, there are no vegetarian or vegan residents. There are also no residents with religious or cultural requirements.
- Supervision and Appraisal: Staff supervision takes place every two months.

The following responses to the recommendations given were received from the manager;

- Activities: All upcoming events are on display well in advance in all the communal areas.
- Drinks: There is a 'protected drinks time' around 11am, 3pm, 5pm and 8pm. All residents are offered tea or coffee. There are also jugs with fresh water and

juice in the lounge area and all residents are offered these drinks on an hourly basis.

- Feedback: Friends of Threen House is a charity that arranges social events for the residents of the care home in conjunction with the Care Provider/Manager including monthly entertainment from professional musicians. At the “Friends of Threen House Relatives meeting” everyone is informed of the activities, and gives opinion. The meetings are regular with a specific agenda as well. At the monthly staff meeting there is a specific agenda as well. Everyone is informed of all clinical and non-clinical issues of the previous month, incidents etc and minutes are circulated for those not present. Healthwatch Ealing was sent a copy of the minutes of the last ‘Friends of Threen House’ meeting which took place on the 17<sup>th</sup> of October 2017.
- Shadowing: I would like to clarify about shadowing. Shadowing means the member of staff is supernumerary and is observing senior members of staff. During induction, the new members of staff are in the numbers but work always in pairs with another member of staff and mostly with their mentor.



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# Appendix One - Observation Guide

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## Observations about home in general

<b>Name of Home:</b>	<b>Threen House</b>
<b>Date and time of visit:</b>	<b>30<sup>th</sup> October 2017 (10am – 2pm)</b>

### 1. Reception Area

Observations:

### 2. Information Displayed

Observations:

### 3. Dining Area

Observations:

4. Odour and Environment

Observations:

5. Choice of food and refreshments

Observations:

6. Dignity and Appearance of Residents

Observations:

7. Relationship of staff members with residents

Observations:

8. Appropriateness of activities

Observations:

9. Other Observations