

Enter & View Report

Nettlestead Care Home, 28th November 2024



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Visit Details	
Service Visited	Nettlestead Care Home
Registered Manager	Lily Keegan
Date & Time of Visit	Thursday 28 th November 2024, 11:00 – 15:00
Status of Visit	Announced
Authorised Representatives	Takudzwa Chifamba
Lead Representative	Reedinah Johnson

1. Visit Background

1.1. What is Enter & View?

Part of the local Healthwatch programme is to undertake and report on ‘Enter & View’ (E&V) visits.

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

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

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

Following the visits, our official ‘Enter & View Report’, shared with the service provider, local commissioners and regulators, outlines what is working well, and makes recommendations on what could work better. Service providers are asked to respond to our recommendations and their responses are added to the reports before publication. All reports are available to view on our website.

1.1.2 Safeguarding

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

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

1.2 Disclaimer

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

1.3 Acknowledgements

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

2. Information About the Service

2.1 Nettlestead

Nettlestead is a family-owned care home situated on Sundridge Avenue in Bromley. It is run by Nightingale Retirement Care Limited, which has thirty years' experience and provides long term residential, respite and transitional care at two sites including Nettlestead, and a wider homecare service across south-east London, Kent and Croydon.

2.2 Ratings

The CQC is the independent regulator of health and adult social care in England. It aims to ensure that health and social care services provide people with safe, effective, compassionate, high-quality care and encourages services to improve.

At its latest inspection in June 2023, the CQC rated Nettlestead “Good”.

2.3 Residents

The home is CQC registered to care for adults over 65 years. During our visit, 20 residents were living at the home. Current residents are aged between 78 – 103 years; six have a long-term condition (LTC) and 11 have dementia. There are six residents on the ground floor, nine on the first floor and five on the second floor.

2.4 Staff

The home has 35 staff members, including 29 carers (three part-time), two housekeepers, two activities coordinators and a general manager. The home occasionally employs agency staff when needed.

3. Summary of Findings

The E&V visit was carried out on Thursday 28th November 2024; two E&V ARs were present. It was announced and planned in partnership with the home. In preparation, we shared with the manager a poster announcing the E&V, to display in communal areas, and questionnaires explaining the purpose of the visit in further detail and seeking feedback.

3.1 Entry and General Accessibility

Notes

The home is positioned away from the main street and traffic noise is minimal. We observed a well-kept outdoor space with parking space for visitors.

The building has two entry doors - a main entrance and a side entrance with a built-in ramp. Visitors must ring the bell and a staff member will open the door.

There is one lift that can accommodate a person in a wheelchair and one other person.

What works well?

- Parking space for visitors
- Ramp access into the building
- Visitors sign in and out
- Wheelchair friendly lift available

- Induction loop
- Easy access by public transport
- Clear signage outside the home
- There is seating available for visitors by the entrance.

What could be improved?

- No designated ambulance bay
- The steps leading to the main entrance are uneven.

3.2 General Environment

Notes

The home offers a warm and inviting atmosphere, featuring soft lighting that creates a soothing and comforting ambience. There is brown patterned carpeting throughout and neutral magnolia walls.

The corridors are wide, giving enough space for wheelchairs to circulate. They feature large, framed pictures, and wooden handrails run along the walls, offering support. Doors, such as those for the lifts, residents' rooms and storage, are easily distinguishable from the walls.

The communal area is spacious and inviting, furnished with comfortable armchairs arranged around the room, all facing a large wall-mounted TV above a cosy fireplace. During our visit, the lounge was beautifully decorated with a large Christmas tree. Two additional armchairs are positioned by the bay windows, offering a quiet spot to relax and enjoy the view.

Additionally, the home offers a bright and spacious dining room, furnished with five large tables, providing a welcoming and comfortable space for residents to gather and enjoy their meals.

There is a conservatory furnished with tables and chairs, often used for small events such as birthday celebrations. During our visit, the space was temporarily used for storing Christmas decorations.

At the rear of the building, a patio furnished with tables, chairs, and parasols overlooks a spacious garden. A paved pathway winds around the lawn, bordered by vibrant perennial plants and flowers. The garden also includes a charming summer house, typically used during warmer weather for activities and refreshments. During our visit, it was being used to store outdoor furniture.

Residents' rooms are located across the ground, first and second floors. Varying in size, each bedroom is fitted with its own wash basin. Some bedrooms are equipped with their own bathroom. Each bedroom door is numbered in sequential order.

Residents are encouraged to bring their own furniture, enabling them and their families to personalise their rooms and create a space that reflects their tastes and preferences.

What works well?

- Corridors are wide enough for wheelchair access
- The lounge seats are arranged to face each other, encouraging social interaction
- A room register with residents' names is visible in the main corridor
- Each dining table has a bowl of fresh fruit in the centre.

What could be improved?

- There are no dementia friendly clocks or calendars
- The events noticeboard near the main entrance is challenging to read due to the small font size
- The flooring by the corridor from the main entrance towards the dining room is uneven
- Some slabs in the garden are uneven and loose
- A bench is placed on a slope in the garden

3.3 Safety and visiting

Notes

At the time of our visit there were no visiting restrictions in place. We observed clear fire exit signs throughout the home, an evacuation sledge in corridors at the top of the staircase, and a visible fire alarm zone layout in the corridors.

Each bedroom is equipped with an alarm button located by the bed side, and reachable from the toilet seats.

There are security cameras inside and outside the premises and in the garden.

The manager informed us that the home is undergoing renovations. The fire doors have just been replaced; their frames still need painting. The single glazed windows will be replaced by double-glazed in summer 2025.

What works well?

- Fire alarms tested weekly
- Call bell rope reachable from bed and in bathroom
- Indoor communal areas are hazard-free
- Fire extinguishers are provided throughout the home
- There are stairgates on top of the staircase in on the second floor.

What could be improved?

- Some windows do not have safety latches
- Not all staff wear ID badges
- There is branch debris on the patio and scattered around the garden
- Hand sanitiser is not available at the main entrance.

3.4 Activities and Personal Involvement

Notes

During our visit, some residents were socialising in the main lounge or enjoying the company of visiting family, while most were in their bedrooms.

The manager emphasised the team's dedication to offering person-centred activities for residents, acknowledging that not all activities are suitable for everyone due to their diverse needs.

Activities vary daily and include:

- Arts and crafts
- Quiz
- Live music
- Bingo
- Gardening

- Word search
- Flower arranging
- Days out.

The home has its own bus, which can accommodate up to seven people, taking residents on outings to places for shopping trips, garden centres, and coffee shops.

A local priest comes on Thursdays to give communion, and another priest twice a month to conduct a service.

What works well?

- A varied range of activities to engage residents and keep them active
- There is a notice board by the entrance listing the home's current events
- The home has five wheelchairs available
- A monthly newsletter is distributed to residents with an activity schedule for the month.

What could be improved?

- A weekly activity board, using larger font, could be displayed within the home.

3.5 Diet and Cultural Practices

Notes

During our visit, we observed staff assisting residents during mealtimes. Residents are given a meal choice every morning.

The home caters to residents with specific dietary needs, offering a variety of food options. Initial information is gathered about needs and preferences on a resident's arrival at the home. The manager informed us that they are currently in the middle of putting together a new menu.

Residents' fluids are documented daily, and an alert will show on managements accounts on Care Vision if a resident is low on fluids on that day, if this does not happen then a weekly audit is carried out to ensure all residents are receiving correct fluid intake.

What works well?

- Residents can choose what they would like to eat from the changing menu
- A variety of food is offered (e.g. roast lamb, fish and chips, Mexican chicken, smoked haddock in cheese sauce, spaghetti meatballs, beef stir fry, lamb hotpot, and omelette)
- Food textures are tailored to meet individual needs
- There is a small board in the dining room with the menu of the day.

What could be improved?

- The daily food choices could be displayed in a larger font on a bigger board for better visibility.

3.6 Feedback and Complaints

Notes

The home conducts a monthly residents' representatives and relatives meeting about different topics such as food choice, activities and care received.

What works well?

- There is a suggestion/comment box by reception.

What could be improved?

- A comment box in a central location could be added to encourage feedback from residents and families.

4. Residents' and Families' Feedback

Due to their complex needs, five residents are unable to communicate clearly.

We received feedback from eight residents and 13 family members. We sought feedback on satisfaction levels, diet, activities, personal development, access to healthcare, socialisation, safety, and communication with the home. Residents and family members expressed high levels of satisfaction with the services provided by Nettlestead.

Residents shared that they feel supported and empowered to make their own choices about mealtimes and social activities, highlighting a sense of independence. They also consistently mentioned feeling warm and safe in their environment. Every resident who completed the questionnaire agreed that they are treated with dignity and respect and feel their concerns or questions are listened to and addressed.

Family members shared their satisfaction with the support their relatives and friends receive from local health and care services, including GPs, dentists, and pharmacies. They also expressed confidence in the quality of personal care provided, such as assistance with washing, hairdressing, and chiropody.

Most family members stated that they are kept well-informed about concerns related to their loved ones, such as falls, health issues, or future care plans. When asked if they felt residents were safe in the home—particularly regarding visitor ID checks and clear evacuation plans—all relatives responded "yes" on the questionnaire.

Family and Friends' Selected Comments

"We love it here and it feels like home for us and to mum."

"Our whole family love it at Nettlestead, couldn't pick a better home for nan."

"Any concern I have ever had has been dealt with in a respectful and quick manner."

Residents' Selected Comments

"They treat me with dignity and always listen if I have any questions or concerns."

"Food here is very good."

"The staff are very nice. The place is lovely and clean."

5. Staff & Management Feedback

We received feedback forms from seven staff members and one from management. During our observation, we noted that all staff were interacting with the residents in a kind and respectful manner.

5.1 Staffing

Notes

Of the ten staff members we spoke to, one has been there for 4+ years, four have been there 1-3 years, and five have been there for less than 12 months.

Training

Staff undergo two full days of manual training, complete 12 online modules covering topics such as health and safety, infection prevention and food safety, among others. They must pass an assessment and participate in four shadow shifts, with the option for extension if necessary. Additionally, staff participate in a rolling training programme that not only ensures they possess the relevant knowledge but also keeps it current and aligned with best practices.

All staff who completed the questionnaire were asked about their interest in additional training opportunities. Six staff members indicated there were no further training programmes they wished to pursue; one expressed interest in receiving extra training in first aid, and three were unsure about any additional training they might need.

Breaks

All staff reported receiving sufficient breaks during their shifts and expressed satisfaction with the management of handovers. They also valued the opportunities provided to support residents effectively.

Management

Staff members appear to have a strong and positive relationship with management, with everyone we spoke to during the visit stating that they feel heard when raising concerns or questions.

What works well?

- Staff and management maintain a positive and collaborative relationship.

What could be improved:

- One staff member said they would be interested in further training such as first aid training, three were unsure if there are other additional training they would like.

5.2 Selected Comments from Staff

"We do our best to accommodate to all residents' needs."

"Management are very quick in dealing with any matters that arise."

"Residents are treated with dignity and respect."

"We like to make the home as homely as possible for residents."

5.3 Management**Notes**

The manager is satisfied with the quality of service provided to the residents.

Diet

Each resident's needs are assessed on admission and adjusted as necessary. There are always two meal options available for residents to choose from at breakfast, lunch, and dinner.

Quality of care

The home is kept at a comfortable temperature, with care staff checking on residents at night and offering blankets and portable heaters to those who need them. The manager told us that they ensure heaters are always on a flat and non-flammable surface and are kept away from any flammable materials or objects that could knock them over. Doors will never be left shut with a heater on, and staff check them every 30 minutes. Co2 alarms and fire alarms are placed adequately around the home, and heaters are also checked daily for any wear & tear.

Laundry services are done within the home.

Safety

The manager informed us that staff members have the option to wear either their own clothes or uniforms. We noted that not all staff were wearing identification (ID) badges.

All staff are familiar with the evacuation plan, including procedures for assisting residents who may need help during an evacuation.

Activities

Residents are encouraged to socialise and interact with each other. In addition to range of activities within the home, they enjoy outings on the home's bus.

There are no residents with English as an additional language (EAL), and there has not yet been a need to support residents with diverse sexual identities. However, the manager assured us that such support would be provided if necessary. Families of residents with diverse cultural backgrounds will be invited to offer guidance on lifestyle and dietary preferences.

Community Services

The deputy manager is satisfied with the level of support residents receive from other local health and care services. The GP comes twice a month, or when needed, to give all residents a check-up. A hairdresser comes in every Wednesday and a chiropodist every six weeks.

Staff

The manager is currently satisfied with the level of staffing.

6. Recommendations

Healthwatch Bromley would like to thank Nettlestead Care Home for their support in arranging our E&V visit. Based on the analysis of feedback obtained, we have made recommendations which prioritise safety and wellbeing.

6.1 Entry and general accessibility

6.1.1. No designated ambulance bay.

We recommend designating a specific area for ambulance access to allow for quick and efficient entry and exit for emergency services, improving safety and accessibility in urgent situations.

6.1.2. The steps leading to the main entrance are uneven.

To improve safety and accessibility, the steps leading to the main entrance should be repaired and levelled. Installing handrails could also provide additional support for residents and visitors with mobility challenges.

6.2 General Environment

6.2.1. There are no dementia friendly clocks and calendars.

We recommend installing easy read dementia-friendly clocks and calendars throughout the home to help residents better manage time and daily activities, using large fonts, clear visuals, and contrasting colours to enhance readability.

6.2.2. The events notice near the main entrance is challenging to read.

To improve readability, the font size on the events noticeboard near the main entrance should be enlarged, and a larger board could be considered for better visibility.

6.2.3. The flooring by the corridor from the main entrance towards the dining room is uneven

The uneven flooring along the corridor from the main entrance to the dining room entrance should be repaired to reduce the risk of trips and falls, improving safety and accessibility for all residents and visitors.

6.2.4 Some slabs in the garden are uneven and loose.

It is recommended to repair or replace the uneven and loose slabs in the garden to prevent accidents and ensure a safer walking surface for residents and visitors.

6.2.5. A bench is placed on a slope in the garden.

To improve comfort and safety, the bench placed on a slope in the garden should be relocated to a more level area, providing better stability and accessibility for residents.

6.3 Safety and visiting

6.3.1. Some windows do not have safety latches.

We recommend installing safety latches on all windows to reduce any potential risk and improve the safety of residents, especially those with mobility challenges.

6.3.2. Not all staff wear ID badges.

We recommend a policy requiring all staff to always wear ID badges while on duty, with regular reminders to ensure compliance and enhance security for residents and visitors.

6.3.4. There is branch debris on the patio and scattered around the garden.

We recommend regular maintenance and clearing of branch debris from the patio and garden which would improve the appearance and safety of outdoor areas, removing potential trip hazards.

6.3.5. Hand sanitisers could be available at home entrance.

Installing hand sanitiser stations at the entrance would promote hygiene and provide visitors and staff with an easy way to sanitise their hands upon arrival.

6.4 Activities and Personal Involvement

6.4.1. A weekly activity board could be displayed within the home.

Displaying a weekly activity board within the home would help residents and families stay informed about upcoming events and activities, promoting engagement and participation.

6.5 Diet and Cultural Practice

6.5.1. The daily food choices could be displayed in a larger font on a bigger board for better visibility.

The daily food choices should be displayed in a larger font on a bigger board to improve visibility, making it easier for residents to see their meal options clearly.

6.6 Staff

6.6.1. One staff member said they would be interested in further training such as first aid training, three were unsure if there are other additional training they would like.

We recommend-offering staff members the opportunity to explore further training options, including first aid, to enhance their skills and confidence. A survey could help identify other areas of interest for additional training, supporting all staff in their professional development. This could be part of a training plan created for the whole organisation.

6.7 Feedback and complaints

6.7.1. A comment box in a central location could be added to encourage feedback from residents and families.

Introducing a comment box in a central location within the home would provide residents and their families with an opportunity to share feedback and suggestions, helping to improve overall satisfaction and care.

8. Glossary of Terms

AR	Authorised Representative
CQC	Care Quality Commission
EAL	English as Additional Language
E&V	Enter and View
ID	Identification
LTC	Long-Term Condition

9. Distribution and Comment

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

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

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healthwatch
Bromley

Healthwatch was established in 2013 in accordance with the Health and Social Care Act 2012.

Within this legislation [Arrangements to be made by relevant bodies in respect of local Healthwatch Organisations Directions 2013] Healthwatch has a right to a reply within 20 working days to Reports and Recommendations submitted by Local Healthwatch to a service provider.

Report & Recommendation Response Form

Report sent to	
Date sent	
Report title	

Response

(If there is a nil response please provide an explanation for this within the statutory 20 days)

Date of response provided

Please outline your general response to the report including **what you are currently doing to address** some of the issues identified.

All recommendations have been reviewed and are either already implemented or actively being worked on. For instance, regarding name badges, all staff will now wear their badges at all times. For any staff who currently do not have a badge for any reason, replacements are being ordered.


Dementia-friendly clocks and calendars have also been purchased and will be placed within the home shortly.

Additionally, I would like to clarify that we very rarely require the use of agency staff. When we do, we rely on the same trusted agency we have used for years, ensuring continuity of care by working with the same three staff members from that agency.

Please outline what **actions** and/or improvements you will undertake **as a result of the report's findings and recommendations**. If not applicable, please state this and provide a brief explanation of the reasons.

Recommendation 1

We are currently in discussions with the directors to explore options for repairing the outdoor steps and pathway. We have a designated ambulance bay in front of the back entrance.

Recommendation 2	Dementia friendly clocks and calenders will now be visible in the home for all residents to view. All notice boards are being made larger with larger font for all residents to clearly see.
Recommendation 3	All debris and sticks have been removed from the garden and will be done every 2 weeks by our gardener. Including the bench that was placed on the slope, this has now been located to a safer place.
Recommendation 4	All notice boards are being made larger with larger font for all residents to clearly see.
Add recommendations if there are more than 4.	All staff are required to wear ID badges and this is now in place. Hand sanitizer will be present at the entrance to promote hygiene.
Signed	
Name	Lily Keegan
Position	Manager