

Date of visit: 3rd May 2017

Enter and View Report: Laurel Dene Care Home

117 Hampton Road, Hampton Hill, TW12 1JQ

Laurel Dene is a purpose built, fully-equipped nursing home with a large garden in Hampton Hill, situated close to Bushy Park. It has accommodation for 97 residents.

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Introduction

Laurel Dene is an adult residential and nursing home owned by Care UK at 117 Hampton Road, Hampton Hill, TW12 1JQ. Ms Parveen Alishah is the manager, responsible for the services provided. She is currently in the process of being registered with the Care Quality Commission (CQC). At the time of the visit Laurel Dene was registered with the Care Quality Commission (CQC) as a nursing home for up to 97 adults over 65. It provides services for people with dementia, learning disabilities, mental health conditions and physical disabilities. The home is purpose built and provides accommodation for people in en-suite single rooms.

On the day of the visit the Manager, Ms Parveen Alishah, had been called away to a meeting and the Deputy Manager, Ms Suzanne Jones, was present.

The home can be contacted on (020) 8977 1553

Website: [Laurel Dene Care Home](#)

Healthwatch Richmond is a registered charity that acts as an independent voice for people in the London Borough of Richmond upon Thames. It helps to shape, challenge and improve local health and social care services. Healthwatch Richmond was set up by the Health & Social Care Act of 2012. The Act and its regulations granted Healthwatch powers to request information from health and social care providers and receive a response within 20 days, and to enter and view premises that provide health and or adult social care services.

The reports of Healthwatch Richmond's Enter & View visits can be found on our website: www.healthwatchrichmond.co.uk or are available from the Healthwatch Richmond office, please contact us on: 020 8099 5335

Rationale

In 2016 Healthwatch Richmond began a new programme of visits to residential homes. In selecting which homes to visit we analysed a range of data available to us from the CQC, the Local Authority and community sources including if the home was due to have a CQC inspection or a Local Authority visit or whether these visits had occurred recently. This enabled Healthwatch Richmond to identify which homes to visit aside from those with which there are ongoing concerns. On this basis we undertook an Enter & View Visit to Laurel Dene in August 2016 and at that time a temporary Regional Manager was in post and we agreed with Laurel Dene that we would re-visit the home when the new manager had been in post for at least six months.

The report of the August 2016 visit can be found on our website: www.healthwatchrichmond.co.uk or is available from the Healthwatch Richmond office, please contact us on: 020 8099 5335

The Visit

An announced visit was arranged with the care home manager, Ms Parveen Alishah, to commence on the 3rd May 2017. The visit was conducted by a team of 3 volunteers and one member of Healthwatch Richmond staff between 11 am and 1 pm.

A description of the visit is given within the methodology, below, and undertaken using Healthwatch Richmond's Residential Care Enter and View tool.

Methodology

Enter and View representatives are authorised via Healthwatch Richmond's Appointment of Authorised Representatives for Enter & View Policy. This includes a written application, satisfactory references, an enhanced Disclosure and Barring Service (DBS) check, training in safeguarding adults and training in how to undertake Enter and View visits. The visit was planned in accordance with Healthwatch Richmond's Enter & View Policy and undertaken in the spirit of partnership and openness.

Healthwatch Richmond requested and were supplied with the following information:

- Total numbers of staff and residents
- Management Structure
- Registration Details
- Any guidelines that Laurel Dene House had for visitors
- Complaints Policy & Procedures
- Any other information provided for residents and their families

Healthwatch Richmond visited the manager to discuss arrangements for the visit and agree a suitable date. Posters and leaflets advertising the visit to residents, staff, families and friends were provided.

The background information available on Laurel Dene was drawn together by Healthwatch Richmond and made available to the team undertaking the visit. The team met prior to the visit to plan the areas of interest to focus on during the visit. These areas included ones based on the outcomes of the previous visit, they were:

- The progress of the new manager at Laurel Dene
- The recruitment and retention of staff and staffing levels
- Resident vacancy levels
- The views of residents and relatives on life at Laurel Dene
- The views of staff working at Laurel Dene

The aim was to gather the experiences of residents, their families and staff and to observe how Laurel Dene met the needs of its residents and, if appropriate, to make recommendations about anything that may be improved.

Limitations

The report relates only to the specific visit by Healthwatch Richmond on the 3rd of May 2017 and the report is not representative of all the service users, relatives and staff, only those who contributed within the restricted time available.

Findings

General

Laurel Dene is a fully equipped nursing and residential home looking after residents with both physical and mental health needs, including dementia. There are currently 95 residents at the home, 33 of whom require nursing care, 37 require dementia care and 23 are in residential care. The London Borough of Richmond (LBRuT) has a contract with Laurel Dene for 73 places and the remaining 24 are for private care. LBRuT can also contract with the home for respite care beds if they have any vacancies. They have a number of people who come for respite care on a regular basis.

On arrival at the home we were welcomed by the reception staff and asked to sign the visitors' book. Notices advertising the Healthwatch Richmond visit were displayed in the home. The staff were friendly and helpful throughout the visit and there was a warm and welcoming atmosphere in the home. Staff and residents we met were interested to talk to us and their comments are included throughout the report.

On the day of the visit the Deputy Manager, Regional Support Manager, senior care staff members, care assistants, kitchen and domestic staff were present. The Manager arrived shortly before we left and we were able to have a short conversation with her. We were able to talk to 24 residents, 6 relatives, 2 visiting therapists and 18 staff members aside from management staff.

Accommodation

Laurel Dene is a modern, purpose built, three storey care home, set in a residential area of Hampton Hill, Middlesex, close to Bushy Park and the amenities of both Hampton Hill and Teddington. There is parking near the front entrance, level access to the building and the home has attractive gardens to the rear, accessed from inside the home. The day bell for entry is not as clearly positioned as the night time bell and Laurel Dene have informed us that this has now been re-positioned and re-signposted.

The home is arranged into six suites (units), two on each floor, the ground floor is for residential care, the first floor is dedicated to dementia care and the second floor to nursing care. Each suite has its own lounge and dining room and there are also four quiet rooms, a cinema room, a sensory room and a hairdressing salon. There were plenty of areas for seating and a new relatives' room had been created on the ground floor for residents to invite visitors to. This had a cosy atmosphere with tea and coffee making facilities, comfortable furniture and books.

The building was clean, well-furnished and well maintained and the toilets and bathrooms visited were clean, free from smells and ready for use where needed. However on the first floor there was a smell of urine present in the corridor and in one of the day rooms and we raised this with the Deputy Manager who gave us details of their cleaning routines. This smell was not evident elsewhere in the building.

The residents' rooms varied in size and layout, some with good views, they were well furnished and contained lots of personal touches and possessions.

The gardens appeared well cared for with dedicated areas for the residents to grow their own flowers and vegetables. One family member told us they were delighted with the way in which an area had been adapted for their parent's needs.

Management and Staffing

The manager, Ms Alishah, had been in post just over 6 months and was in the process of registration with the CQC we have been informed that this is now complete. At the pre-meeting with the manager and during the Enter & View Visit we were informed of the manager's plans to improve staff recruitment and retention and reduce the number of bank staff required. These plans included holding open days for potential new staff and Care UK's head office were supporting the recruitment plans. Three open days had been held and they plan to run more, the next will be on the 27th of June. Laurel Dene have informed us that the fairs have been very successful and on average they are recruiting 5 new staff members per month. They hold a weekly internal recruitment conference to review their recruitment and to date consider their initiatives have been successful. At the time of the Healthwatch Richmond visit 15 potential new staff members were awaiting DBS checks or references, DBS checks can be slow and contribute to hold ups in new recruits starting.

Laurel Dene operate their own bank staff cover but with such a large home this is not always sufficient and they work with a small group of agency companies approved by Care UK, if necessary, who aim to supply the same staff to help with continuity for residents. The home informed us that they are reducing the level of agency hours each month as more of their own staff start work.

Overall the initiatives to decrease the use of agency staff and have more permanent staff at the home appear to be successful and we would welcome updates on this progress.

The home informed us that the staffing levels for the different types of care offered were:

- Residential Care - 2 staff am and pm on each unit plus team leaders for each unit
- Dementia Care - 7/8 care staff am and pm plus team leaders on each unit
- Nursing Staff - there is 24/7 nursing cover, during the daytime there are 2 nurses and the Clinical Lead from 7 am to 7 pm.

There appeared to be sufficient staff on duty and we observed that staff responded quickly to residents' call bells and requests on the dementia and nursing care floors. Most of the residents appeared happy with the staffing levels although some commented that "there could be more", that "there weren't enough staff" and that "call bells were not always answered".

Residents & Relatives Views

Residents

The residents looked well care for, the Healthwatch Richmond Team spoke to a wide range of residents across the home and in general they were pleased with the care they were receiving at Laurel Dene and none had any serious concerns about their care. There were a number of complaints about the lack of response to requests for repairs and that there wasn't always enough to do from some of the residents and their relatives and that there could be more staff on duty.

The nursing floor was clean and well-kept with a calm atmosphere and smelt fresh. Some residents had a high level of nursing needs and were mainly in their rooms, others had been taken that morning to join in the activities on the first floor and others were in the communal spaces.

At our previous visit to the dementia care floor we observed memory boxes outside of the residents' room and these were now empty and there were no longer other personal items of importance being displayed outside these residents' rooms. We have been informed that it is the personal choice of the residents and their families as to whether they make use of these boxes. However Team Leaders and care staff are requested to encourage their use. The home is also encouraging the compilation of personal stories for each resident, with an appeal to relatives (displayed in the reception area) to contribute to their life stories.

Amongst the positive comments made by residents were:

- “the work done here is fantastic, they are making a very good job of it, they are providing the facilities”
- “they do take great care of people”
- “the staff are very nice”
- “the manager is very good”
- they “enjoyed Laurel Dene and get help when needed, no problems getting help”
- “Laurel Dene is nice and clean”
- They were “very happy” at Laurel Dene
- I “like my room and people were very friendly”
- they are “very happy here”
- they are “very happy at Laurel Dene and staff are very helpful and kind”
- they are “very happy here and feel independent, also has support from family”

The negative comments from residents mainly related to the provision of activities and the food and these are documented in the relevant sections below.

Relatives

One visitor told us that their relative had their own podiatrist visit but they would like their feet washed more regularly and to be able to have showers more often. They felt they were able to bring issues up but they didn't always want to.

Another relative said that there “had been some ups and downs” mainly related to maintenance issues. This was also mentioned by another family who had waited for a repair in their relatives' room. We raised this with the home and they gave us details of their maintenance request documentation process, which seemed thorough but it appears not to always work promptly.

Staff

The staff were friendly and very welcoming, they were all willing to talk about their roles and how they worked with residents. In general the staff were very positive about working at Laurel Dene and we observed that they engaged well with the residents. We observed staff responding to residents needs positively in a caring, patient, kind and understanding way and residents responding to them. Some staff told us more about the types of care they were

involved in providing to individual residents and the general impression was of a satisfied workforce.

Amongst the comment made by staff were:

- “things had improved in terms of use of bank staff”
- they “enjoyed working there” and was actively involved with the residents.
- “I enjoy the work, I love taking care of these elderly people”
- “We do take great care of people here”
- “I like working here and have been here 7 years”

Staff Training

All new staff are required to undertake the Care UK 12 week training programme, we looked at the Induction Training booklet and it was clearly comprehensive, with particular emphasis on safeguarding. Staff had to keep a personal training log and those we spoke to told us that it was beneficial to them. One told us that she regarded the e-learning as a new skill. There is also the opportunity to undertake an apprenticeship, this is open to people of any age.

A care assistant told us they were very pleased to be able to establish a career at Laurel Dene and another said she had received regular training and reviews and had clear working schedules. She also said that the place had undergone changes for the better but she thought that there was more that still needed doing.

The home gave Healthwatch Richmond a detailed summary of the support provided for new staff during their six month probation period and their training, which includes having a named mentor.

Activities

Residents’ views on the provision of activities varied as did their knowledge of what activities were being offered. Most residents spoken to would like more activities and some said they would like more help moving about. At the time of our visit the home did not have an Activity Co-ordinator but they had recruited one, who is now in post. They inform us that they hope to recruit two more. In addition they have a bank staff member who is working with four volunteers to introduce new activities to the residents. A member of staff who had worked there for a long time said that the residents needed more stimulation and things to do and it is hoped the new initiatives will address this.

We were informed by the Deputy Manager that they now have a mini bus (shared with the other 2 Care UK homes in Richmond) and the residents have been involved in compiling a list of local places to visit e.g. Hampton Court, Kew Garden and garden centres.

During the Healthwatch Richmond visit about 30 residents from different parts of the home were participating in a performance from a singer and musician and appeared to be enjoying the event. Others were having their hair done in the salon and a group of residents were in the small communal lounge chatting, even though the television was on quite loudly.

Healthwatch Richmond observed one nurse engaging with a group of residents in a game with hats and a large ball, she told us ‘ the residents love to play games with me’. When asked if she had been told to engage the residents in ball games, she replied that it was her initiative and she would do it whenever she could.

The communal seating arrangements in the home were observed to encourage opportunities for residents to mix and talk to each other. However we observed that in some of the public spaces the TVs had been left on, even when there was nobody present. We raised this with the home and they have informed us that care staff should be monitoring the use of TVs, some residents do like to watch them whilst others prefer the quiet or listening to the radio.

Comments from residents and relatives included:

- That they were only allowed out in the grounds
- They had not been on a visit outside the home. One resident used to go out to the High Street on her walker alone but now needed to be accompanied so she wasn't able to go
- There is a need for more activities, their relative wanted more stimulation and a bit more going on than just watching TV.
- They were "fed up with it, too boring, nothing to do, want something more interesting to do"
- Another relative thought there was a lot to do and this was backed up by another relative who said that they "were really good with exercises, they have adapted some for their father"

Food & Dining

The ground floor dining room had tables laid attractively with tablecloths, wine glasses, serviettes and vases of flowers and the dining room on the nursing floor was also clean and attractively laid out. However, on the dementia care floor some of the serving areas were sticky and some table cloths had not been cleared properly after breakfast. There were mixed views expressed by the residents about the food some very happy with it and others not so keen.

Menus & Choice of Food

A resident and her relative said that they thought the choices were not always appropriate for the age group at the home but they did think that the presentation had improved. Some food was better than others and they also thought there was a difference between the chefs on duty. Another resident liked the menu but said sometimes they had a long wait at the table before the food arrived. Amongst the other comments were:

- "good food, enjoys the food"
- "food was fair"
- "good food"
- "the food was perfect"
- "the food is very good"

The Deputy Manager informed us that there was a new initiative to improve the dining experience called 'Dining with Dignity'. This is a new training module currently being rolled out and she agreed that some of the issues we raised needed to be addressed. The company sets the menus and takes their feedback and she agreed that not all the choices are very age appropriate. We have been informed that the Head Chef and Team Leaders are continuing to monitor its progress.

Conclusion

Good Practice

We observed that Laurel Dene is a well run care home with good systems in place to care for the residents, they worked to a good standard and demonstrated a clear willingness to improve. We observed good practice by staff throughout our visit to Laurel Dene, the staff appeared interested in their work and the interactions between the staff and residents and their families were very good. There was a calm and welcoming atmosphere to the home.

The home is working hard to recruit more permanent care staff and to improve staff retention through a sustained focus on recruitment and an attractive offer to new recruits including good training and support.

Outcomes

1. Healthwatch Richmond would welcome further updates on the success of their recruitment initiatives and how this is helping with staff stability, three months from the publication of this report.
2. Healthwatch Richmond would also welcome an update on the progress of the new recruits' training and mentoring, six months from the publication of this report.
3. Healthwatch Richmond welcomes the clarification from Laurel Dene on how repairs are actioned but we would ask that they get feedback from their residents and their families on their satisfaction with this service.
4. Healthwatch Richmond would welcome an update on the recruitment of more Activity Co-ordinators and the increased provision of activities for residents, six months from the publication of this report.
5. Healthwatch Richmond would welcome an update on the implementation of 'Dining with Dignity', six months from the publication of this report.