

Date of visit: 17th August 2016

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 90 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 Desiree Jooste is a Regional Manager for Care UK and the Acting Manager, responsible for the services provided currently. At the time of the visit Laurel Dene was registered with the Care Quality Commission (CQC) as a nursing home for up to 90 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 Desiree Jooste, 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 local government following the health and social care reforms 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 Laurel Dene 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.

Laurel Dene was a home that Healthwatch Richmond had never undertaken an Enter & View Visit to before and it was not scheduled to have visits from the CQC in the near future but it had had recent visits from the London Borough of Richmond. The previous CQC report for Laurel Dene, published 29/05/2015, had given the home an overall rating of 'Good' but the rating for 'Is the service safe' was 'Requires Improvement', on the basis that some residents and their families thought that areas such as staffing and the laundry could be improved.

The Visit

An announced visit was arranged with the care home manager, Ms Desiree Jooste, to commence on the 17th of August 2016. The visit was conducted by a team of four volunteers and one member of Healthwatch Richmond staff between 11:30 and 14:30.

A description of the visit is given within the Methodology (below) and undertaken using the Residential Care Enter and View tool.

Methodology

Enter and View representatives were 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 Ms Desiree Jooste to provide the following information:

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

Laurel Dene supplied Healthwatch Richmond with all the information requested.

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

All 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 what areas of interest they would like to focus on during the visit. 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.

The areas for focus were:

- Residents' views on life at Laurel Dene
- The views of their families and friends
- Staff views on working at Laurel Dene
- Management arrangements
- Staffing Levels
- Laundry Services
- Mealtimes

Limitations

This report relates only to the specific visit by Healthwatch Richmond on the 17th of August 2016 and the report is not representative of all the service users - only those who contributed within the restricted time available.

Findings

During the visit the Healthwatch Richmond volunteers spoke to 23 residents individually, plus an activity group and 21 members of staff including the Manager and 4 relatives.

General

Laurel Dene is a fully equipped nursing and residential home and looks after residents with both physical and mental health needs, including dementia. There are currently 82 residents at the home, 36 of whom require nursing care, 34 require dementia care and 22 are in residential care, 2 residents were in hospital.

On arrival we were asked to sign the Visitor Book in the reception area and there was visitor information on display. There were notices in the reception area advertising the Healthwatch Richmond visit and on their display board was Healthwatch Richmond publicity for the Enter & View Visit and there were posters advertising timetables for meetings in the home and morning and afternoon activities. There was a display board of photographs identifying staff in the reception.

We were warmly welcomed by the Manager, Ms Jooste and there was a welcoming atmosphere throughout the home. The staff and Manager were friendly and helpful and the residents spoken to were generally happy and content with life at Laurel Dene. The residents we met were interested to talk to us about the home and themselves and their comments are included throughout this report.

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. It is entered down a driveway, with new housing being built near the main road and a landscaped area in front of the home itself. 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 home is arranged into six suites, 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. The sitting areas were varied and not too large and they were situated throughout each floor, allowing for views of different aspects of the garden. The décor and furnishings varied and the rooms had differing amounts of sun and shade. The cinema room was well equipped with table top games. There are en-suite facilities for all residents.

There is capacity for 36 nursing care beds (currently 10 vacancies), 37 dementia care beds (currently 3 vacancies) and 26 residential care beds.

The home is pleasant with a calm and welcoming atmosphere and smelt of the fresh flowers that were arranged in vases throughout the building. The décor was clean, there was good lighting, a variety of paintings hung on the walls and ornaments were seen throughout, all the corridors are carpeted. The signs to denote private patients' rooms were in some cases in need of replacement and some repair work was needed on a section of wallpaper on the ground floor.

The toilets and bathrooms looked clean and all were free from smells, including those in the residents' rooms that were visited.

Laurel Dene has a very well maintained, large garden to the rear of the property with ample sitting areas. The garden could be accessed from the reception area, one of the dining rooms and the lounges on the ground floor. It appeared to be well used and we were told that residents were encouraged to help in the garden if they were interested. This was evidenced through their support of a resident to grow vegetables (see below in Nursing Care Page 7).

Fire exit signage was good and there were ample, well placed, rescue blankets fixed around the building. Following Healthwatch Richmond's visit to Laurel Dene we consulted the Fire Safety Regulation Team for Richmond to discuss their most recent inspection of Laurel Dene and we were informed that Laurel Dene Care Home had been inspected in July 2016 and was broadly compliant.

Access

There is level access to the building from outside and automatic doors allowing visitors into a lobby, the 'Night Bell' is positioned outside the entrance and easy to see however the 'Day Bell' in the lobby is difficult to locate and we observed two visitors being confused by this. Access for safeguarding purposes requires all visitors to ring the bell so that the front door is opened under supervision. A door code is required to exit the building.

Residents

The residents were mainly in their 80s and 90s, all seemed well cared for and those we engaged with generally seemed happy to be there and appreciated the staff, as evidenced by their comments (see Care Management Page 7). A number of the residents needed help with their mobility and some had complex physical needs and we observed that great care and attention was given to support these residents.

Staff

On the day of the visit the Manager, Activities Co-ordinator and Administrator were all present and we met a range of the nursing, care and domestic staff, twenty in total out of the 93 staff that work at Laurel Dene. The staff were very friendly and welcoming and engaged very positively with the Healthwatch Richmond Volunteers, often introducing themselves to us, and they were happy to explain their roles and how they worked with the residents, whom they seemed to know well. In general the staff told us that they enjoyed working there, their comments included:

"It's really lovely here"

"I have worked in other places but am so happy to be here now"

"I can work the hours I want"

Staff Training

The staff spoken to by the Healthwatch Richmond team said that they received training and were happy with what they had been offered. A number of staff members told us that their induction was long but detailed and valuable and that they were on probation until induction was completed.

The manager told us that staff can apply to undertake NVQ qualification training, they have Adult Funded Education available and there is a Care UK apprenticeship scheme. Training is undertaken by the Manager and by a trainer who comes to the home.

Care Management

Care UK has a contract with the London Borough of Richmond for the majority of its beds; this includes all the 36 nursing floor beds, contracted to the London Borough of Richmond. There are 37 dementia care beds and 26 residential beds, on the first and ground floors respectively, with 12 contracted privately on each of these floors.

The manager informed us that Richmond consult with Care UK and they have regular contract and quality meetings, however Richmond are not always using their full capacity on the nursing unit and Laurel Dene do have plenty of enquiries for dementia nursing places. The residential and dementia units are usually full with high demand. When Richmond place a resident the process usually has a very quick turnaround time. However we understand that negotiations around contracting can take longer.

The Healthwatch Richmond team divided themselves between the three floors to observe the care and engage with residents, their families and staff.

Nursing Care

The nursing care floor provides care for residents with a range of medical and physical needs and the overall impression given to the Healthwatch Richmond volunteers was that residents and relatives were very satisfied with the facilities, the care and the staff attitudes. Healthwatch Richmond spoke with five residents and they said that their experience of the care at Laurel Dene was very good and they spoke highly of the staff. Residents' comments included that they:

“found everything was satisfactory”

“have been well looked after and totally happy”

“couldn't think of anything wrong with being here and anything that could make them happier”

Two family members were spoken to and they said that their experience of the care at Laurel Dene was very good and they spoke highly of the staff and the management, the new manager had made an “outstanding” difference since she came into post, she “welcomes suggestions and an exchange of ideas”.

They gave examples of this in the introduction of fresh fruit at break times and the opportunity for their parent to pursue their gardening interests by creating a raised bed in the garden, making it accessible to use.

The volunteers observed that when residents need help the call system flashes the room number accompanied by a bleeping sound, this is located high on the wall in the corridor,

which is quite long. On one occasion when this occurred during the visit it was not noticed or staff were not able to attend as they were busy with helping residents get ready for lunch. Healthwatch Richmond would like re-assurance that this is not something that occurs often and whether the call display could be better located.

The rooms visited (occupied and unoccupied bedrooms, bathroom, the Reflect Room, activity room, dining and sitting rooms) were all of a high standard and spotlessly clean.

Dementia Care

Healthwatch Richmond volunteers spoke with eleven dementia care residents, some of whom were more able than others to hold a conversation but all were happy to talk to us. These residents all appeared to be settled and happy with their care and with the staff. They described them as “kind”, “good”, “friendly”, “caring” and “attentive” and they commented that they liked the food and the garden. Two residents did say they wanted to go home and another two that their houses had been sold and that they had to stay at Laurel Dene; however the latter two residents did show signs of confusion.

Two relatives told us that there had been recent improvements in the health care provided and one said that she could not fault the continuous care that was offered. They had been concerned about the care until more recently but this had improved.

We observed that the care workers engaged the residents in conversation and seemed to know them very well. However we observed that some of the demands of the residents were not always met immediately because of time pressures.

One resident was noted to need some attention to their feet and toenails.

This floor was adapted to help people with dementia move around more easily by painting the hand rails a contrasting colour to the wall. However pictorial signage was not in use and this would benefit residents in helping to identify the toilets and bathroom in particular. There were Memory Boxes fixed to the wall outside each resident’s room as a tool to help build up a picture of the resident’s life for the benefit of both themselves and the staff caring for them. The Healthwatch Richmond volunteer queried whether these would be better inside the room, particularly for the resident. All the rooms we saw looked clean and tidy and had plenty of photographs and cards on display.

Residential Care

The ground floor residential areas were generally well maintained and pleasant, there were two dining rooms and two lounges and there was good access to the large garden at the rear. One resident showed us her room; this was pleasant and overlooked the garden with a fully accessible bathroom of a good size. All areas and rooms looked clean and well kept.

A group of residents were coming to the end of an activity session in one of the lounges and all appeared to be enjoying themselves and the activity. Seven other residents were spoken to individually and they were generally happy with the care and the staff at Laurel Dene, their comments included:

“enjoyed being here, very good can’t fault it”
“staff first class can’t complain”
“it is ok”

“get used to it, alright, looked after”
“wonderful”
“rooms are very nice”

Respite Care

Respite care is only available if Laurel Dene have availability, they do not hold beds for this.

Laundry

There had been concerns about the laundry service at the last CQC inspection and the manager told us that ‘missing’ items of clothing had been a concern when she took up post. Most of the items are not missing but have lost their name labels and she has addressed this by introducing a new labelling machine and a new system for helping to manage clothing items. We observed that the laundry was well organised and the clothes being washed, dried and ironed appropriately. A room had been turned into a ‘shop’ to display ‘missing’ items of clothing and relatives and residents were being encouraged to claim them.

Management

The current manager is a regional employee who has been at Laurel Dene for seven months, she took up the post after the previous long term manager retired and the new appointee was unable to start work due to ill health. Care UK are currently recruiting for a new manger to take over permanently, but it was unclear how long this process may take. It was the Healthwatch Richmond team’s view that the new appointee should continue the good work put in place by the current manager. We would also like to know if the current manager will provide future guidance for whoever takes up the post. Healthwatch Richmond would consider re-visiting Laurel Dene when the new manager has taken up their post to ensure this is the case.

A copy of the Management and Staffing Structure was provided for Healthwatch Richmond prior to the visit. A new structure for staff with two senior team leaders managing the team leaders had been introduced over the last year and a senior member of staff commented that this had been well received and led to more continuity of care and better working together for staff. Each floor is divided into two units with a team leader on each unit and this has helped ensure the staff and residents knew each other. Staff commented to us that they liked working in smaller teams.

There had been a high percentage of agency staff (90%) employed by Laurel Dene before the current manager took up the post and she has made considerable efforts to redress this and employ more permanent staff and improve staff retention. We were informed that now only 10% of staff hours are provided by agency staff.

There were regular weekly staff meetings held for day and night staff to enable staff to attend on a monthly basis, we were told they were well attended and we were shown a detailed annual plan for the meetings and the record of the outcomes. Senior Team Leaders had a weekly meeting.

A member of staff spoke to us of how she learnt so much from these meetings and they have been of great help. All staff spoken to by one of the team said they felt sure they could take any issue to management and that they would be listened to. This example reflects the value the manager places on her staff.

Residents' and Relatives' Involvement and Satisfaction

There are monthly meetings held for the residents attended by the Manager and some relatives attend these to facilitate their relative's input. Relatives' meetings are held every three months.

Compliments and Complaints

There was no obvious information about comments and complaints easily visible in the reception area. On enquiry we were shown the complaints notice that was displayed on the wall in the reception area and told they were also on each floor. However the positioning of the notice and its relatively small print meant it was not easily seen and this should be addressed.

Activities

The Activities Co-ordinator met with us during our initial meeting with the manager and described the programme they offered in both the mornings and the afternoons, there is a monthly activity sheet produced which is on display. Activities included: arts & crafts, bingo, painting, "spa treatments", musical entertainment, quizzes, film shows and gardening and we were told that outings were arranged to local venues. There are two full time and two part time staff, who have a range of backgrounds including journalism and art, a significant development that has happened under the current manager. A number of residents are also involved e.g. one who is a pianist plays for the other residents and there is input from outside organisations e.g. a local church holds a monthly service at the home. There are also special events and an open day held.

Three of the Activity Co-ordinators were observed giving their sessions and all appeared good at communicating with their residents and some of the residents commented to the Healthwatch Richmond team that they joined in the activities and were positive about them.

Mealtimes

There are two dining rooms on each floor and the level of support for residents at mealtimes varies with the level of need. All the dining rooms were well appointed, they had tables set with cloths and napkins and there were glasses and flowers on the tables and background music. There was choice on the menus and residents could have other options if they wanted something different, plus special diets were available.

On the residential floor people sat on tables of 2, 3 and 4 residents and were served from a hot trolley. There appeared to be sufficient staff in the dining room helping residents where necessary, including an Activities Co-ordinator. Comments on the food ranged from very good to good and ok, one said: "food very good, choice". However a few residents were not as keen on the food as others.

On the nursing floor there was a high level of need for help with eating and we observed the staff expertly assisting residents in a skilful, caring and patient manner. There were specially adapted utensils to help residents feed themselves as much as possible. One of the new domestic staff who was serving confidently explained the procedures they used for serving residents.

Residents on the dementia care floor had a range of needs for help with eating but we observed that individual needs appeared to be known and appropriate help was being given.

On the whole the care assistants moved between the tables and came to help when a problem arose. One to one care was also needed by some residents and given as required. We saw evidence of staff managing eating and behavioural problems that arose efficiently and with the minimum of fuss.

Continuity of Care

Laurel Dene residents are able to choose their own GP and the nursing care is provided by the home in conjunction with GPs and local services.

Hospital Visits, Admissions & Discharges

Laurel Dene has a clear, defined procedure in place for residents being admitted to or discharged from hospital, which they detailed to one of our volunteers. On the whole they said they had no real problems with the process, although problems do happen occasionally. The ambulance crews in their view were good and considerate with residents who have dementia.

Conclusions

Good Practice

We observed that Laurel Dene is a well run care home with good systems in place to care for the residents and they worked to a high standard. We observed good practice throughout our visit to Laurel Dene and there was a welcoming atmosphere. The interactions between the staff and residents and their families were very good.

Outcomes

1. Healthwatch Richmond will follow up with Adult Social Care in Richmond, on the progress being made on ensuring that places on the nursing care floor do not remain vacant for very long. Since our visit Adult Social Care has now placed a number of people on the nursing floor during the last month. Laurel Dene confirmed that they are committed to continuously working with Adult Social Care to ensure places on the nursing floor do not remain vacant for very long.
2. Facilities Management at Laurel Dene are going to change the 'Day Bell' position by the end of October.
3. Laurel Dene are now displaying their Complaints Procedure and Policy more prominently in the reception area and in all areas of the building.
4. A new Suggestions, Comments & Complaints Box has been purchased and is now in the reception area.
5. Healthwatch Richmond will visit Laurel Dene again once the newly appointed manager has settled into their role, to seek assurance that the good progress currently achieved is maintained. We have agreed with Laurel Dene that this would be after six months in post.
6. Laurel Dene has informed Healthwatch Richmond that the new manager will take up their post by the end of October. They will also inform Healthwatch Richmond when the current manager will be leaving.

7. Laurel Dene has provided assurance that procedures for ensuring good foot care for the residents is in place. They are working with the Community Chiropody Service and a private Chiropodist to achieve this for all their residents. Some residents do refuse to have their foot care done at times but if this occurs they are re-booked in for the next chiropody session.