



# Enter & View Report

## Ellesmere House Care Home

September 2024

This report relates only to the service viewed at the time of the visit and is only representative of the views of the staff, visitors, and patients who met members of the Enter & View Team on that date.

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# Care Home Details

## Contact details:

Ellesmere House Care Home,  
9 Nightingale Pl,  
London  
SW10 9NG  
Tel: 020 3504 6841

## Care Home Manager:

Chad Bain (2025)  
Margaret Kimathi (2024)

## Completion Date of Enter & View Visit:

19 September 2024 and 12 December 2025

## Healthwatch Kensington & Chelsea Authorised Representatives:

Ruth Daniel (Volunteer Management Coordinator)  
Charlotte Williams (Healthwatch RBKC Manager)  
Jacqueline Ferguson (Healthwatch Volunteer)

## For revisit:

Gina Aston (Healthwatch Service Manager, RBKC)  
Minna Korjonen (Healthwatch Advisory Board Chair, RBKC)

# Introduction

At Healthwatch Kensington & Chelsea, our mission is to gather the perspectives and experiences of individuals and provide them with a platform to share their views about NHS and social care services.

The purpose of an Enter and View visit is to collect feedback and insights from both residents and staff, while also assessing the overall quality of the environment.

We visited Ellesmere Care Home initially in September 2024 and returned in December 2025 to update on our findings. The purpose of these visits was to assess the effectiveness of safeguarding measures in protecting residents, identify any challenges residents may face regarding their care and sense of safety, and review the complaints procedures to ensure they enable residents to raise concerns confidently and have them addressed appropriately.

Particular attention was given to residents who may be more vulnerable—such as those living with dementia or disabilities—which can affect their understanding of what constitutes abuse and their confidence in reporting concerns.

All Enter and View visits were carried out by authorised representatives, who have the authority to visit health and social care facilities, whether announced or unannounced.

As an independent organisation, Healthwatch Kensington & Chelsea does not make judgments or express personal opinions. Instead, we base our reports on the feedback received and our objective observations.

# General Information

Ellesmere House Care Home, located at 9 Nightingale Place, Chelsea, London SW10 9NG. The home is a purpose-built facility spanning four floors and accommodates up to 70 residents, each in individual en-suite rooms.

The home is rated 'Good' in all domains in the most recent published report by the Care Quality Commission (CQC), dated 20 September 2020.

Although the home is operated by Care UK and accepts self-funders, local authority funded placements, NHS Continuing Healthcare funded patients as well as providing respite care and step-down beds from acute care.

As part of our role at Healthwatch Kensington & Chelsea, we focus on capturing the voices and experiences of service users of NHS commissioned and publicly funded care and support services.

## Engagement & Methodology

During the announced Enter and View visit to Ellesmere House, Healthwatch Kensington & Chelsea representatives engaged with more than ten residents and ten members of staff overall to gather feedback about their experiences of care and safeguarding within the home.

Residents were encouraged to share their thoughts on the standard of care and how safe and supported they felt in the home. They could offer suggestions for improving their experience of life within the home, feedback on safeguarding procedures, staff training, communication, and the overall home environment.

Staff questionnaires were distributed to gather insights from care staff about service provision, safeguarding training, staffing levels, and management support. Staff were also invited to comment on training opportunities, team communication, and any challenges they face in maintaining a safe and caring environment for residents.

In addition to collecting feedback, Healthwatch representatives conducted direct observations of both the internal and external environments of the care home. Observations focused on identifying any potential safeguarding concerns, barriers to accessibility, and assessing the friendliness, approachability, and communication skills of staff when interacting with residents.

# Summary of Management Feedback

During the Enter & View visit, Healthwatch Kensington & Chelsea gathered feedback from the management of Ellesmere House regarding safeguarding policies, procedures, and practices. The Registered Manager, Margaret Kimathi, provided detailed responses that reflect the home's commitment to resident safety and wellbeing. In our revisit in December 2025, Chad Bain, the current Registered Manager, responded comprehensively to all our queries and was able to demonstrate a wholehearted commitment to ensuring resident and staff safety and wellbeing.

## **Safeguarding Policies and Procedures**

- Ellesmere House has a written safeguarding policy, reviewed every two years or sooner, if required. Staff are made aware of the policy through meetings and training sessions.

- All staff members receive safeguarding training annually, covering definitions of abuse, forms of abuse, how to raise concerns, whistleblowing procedures, and relevant contacts.
- Residents and their families are informed about safeguarding policies and reporting mechanisms, ensuring they understand how to raise concerns, if needed.

## **Reporting and Management of Safeguarding Concerns**

- The home has a clear procedure for reporting safeguarding concerns: staff identify an issue, report it to the floor manager or Deputy Manager, and investigations are conducted with any learning reviewed in team meetings.
- The designated safeguarding lead is the Home Manager, whose role and responsibilities are communicated to staff, residents, and families.
- Families are kept informed of safeguarding incidents through regular meetings and updates.

## **Implementation of Safeguarding Practices**

- Risks for individual residents are assessed and monitored through regular meetings, with measures put in place to mitigate any identified risks.
- Safeguarding incidents are documented, reported, and followed up appropriately. Lessons learned are discussed in staff meetings to improve practice.
- Staff supervision includes regular safeguarding discussions.
- A tracker is maintained to monitor safeguarding concerns.

## **Resident and Family Engagement**

- We observed positive relationships between staff and residents on each occasion that we visited. We were reassured, in conversations with residents, that they felt able to mention any concerns to them. During our visit in December 2025, a resident told us how she had a favourite carer who was very thoughtful in the care delivered so we felt that it was likely that any concerns would be raised without hesitation. This echoes the feedback from residents interviewed in the 2024 visit.
- Families are actively involved by the home management and staff in safeguarding discussions and decisions.



## Continuous Improvement

- Suggestions from residents and families are discussed and incorporated into action plans.
- The home continuously monitors practices and aims to improve safeguarding through regular review and staff engagement.

## Conclusion

- Ellesmere House demonstrates a good safeguarding framework, with clear policies, trained staff, and active involvement of residents and families.

## Visit Summary

### When we arrived at Ellesmere house

During our visit to Ellesmere House Care Home in September 2024, we were warmly welcomed by the Registered Manager, Margaret Kimathi, and shown around the facility. We were able to speak privately with residents who wanted to share their views.

In December 2025, when we called at Ellesmere House, we were admitted and welcomed without delay. We provided ID and signed in. We were offered a drink and taken to a meeting room to meet with the home manager. We found Chad to be welcoming and professional. He clarified our reasons for re visiting and we were permitted to tour each floor and speak to residents and staff freely.

### Resident Wellbeing and Care

All of the residents we saw appeared happy, engaged, and well cared for. Staff-resident relationships seemed genuinely positive, with interactions observed to be respectful and warm. Efforts were made to accommodate residents' cultural and dietary preferences. The rooms and general environment were clean, fresh, and well maintained.

Communal spaces are homely and well decorated. During our December 2025 visit, we were impressed at how clean and well maintained the home is. It does not feel at all institutional and we felt that we should commend staff on achieving this in a care setting.



Resident's room are personalised and each room has a memory box at the entrance to remind staff and visitors about the resident's individual personality and preferences. We were encouraged to see that staff are mindful of ensuring that everyone can feel seen and included in the life of the home. We observed that inclusive mindset in action in how staff engaged with residents and how residents responded.

We were made aware, during our visit in December 2025, that there had been an issue with the central heating and hot water supply to the home, which started on 10 December 10. When we visited on 12 December, staff reported that several out of hours maintenance visits had taken place to ensure prompt restoration of service. The Home Manager and staff had worked long into the night to ensure that all residents were kept warm and well cared for. Each room had a portable heater in a safety cage to maintain the temperature, and we observed the risk assessments promptly completed around the incident. We felt that staff had responded effectively to the problem and it was resolved as quickly as possible to keep residents safe and well.

## **Conclusion**

Ellesmere House provides a caring and supportive environment, with strong staff-resident relationships and attention to cultural and personal preferences. The Home Manager and staff respond quickly to issues to ensure the safety and wellbeing of residents. We felt that the timely and comprehensive response to the heating problem demonstrated real commitment to providing a high standard of quality in care.

# Enter & View Observations

## Location and External Environment

Ellesmere House Care Home is situated close to Chelsea and Westminster Hospital, providing convenient access to medical services. The home is set in a residential area with proximity to local shops, cafés and parks.

The location also offers easy access to public transport links, including nearby bus routes and underground stations, making it straightforward for visitors, staff, and relatives to reach the home.

The setting supports the home's focus on promoting wellbeing, independence, and inclusion for older adults, including those living with dementia or physical disabilities, by combining a comfortable living environment with access to wider community resources.

## Internal Environment and Waiting Area

Upon entering Ellesmere House Care Home, visitors are welcomed into a bright and open reception area. The space is designed to be accessible and easy to navigate for visitors, including those using mobility aids. The reception desk is open, with no physical barriers such as screens or glass partitions between staff and visitors, creating an inviting and approachable atmosphere.

The reception area is clean, well-maintained, and neatly organised, giving a positive first impression of the home. Noticeboards and tables display helpful information about upcoming activities, safeguarding, residents' rights, and local community support services. Staff at the desk are friendly, approachable, and ready to assist, contributing to an overall welcoming, professional, and supportive environment for residents, visitors, and staff alike.

## Resident Involvement

The engagement between residents and staff was observed to be warm, respectful, and supportive. Staff interacted with residents in a calm and friendly manner, taking time to converse, offer reassurance, and respond to individual needs. Residents appeared comfortable and at ease, suggesting positive relationships built on familiarity and trust.

It was clear that staff knew the residents well — addressing them by name, showing patience, and adapting their communication to suit each resident's abilities and preferences. While most interactions were attentive and unhurried, there were occasions where residents required additional support, which staff promptly provided. The atmosphere throughout the home felt inclusive and person-centred, with staff encouraging participation in activities and promoting independence wherever possible.

# Patient feedback

## Do you know how to report abuse or harm?

As part of the visit, residents were asked the question, **“Do you know how to report abuse or harm?”** Out of the eight residents interviewed, five stated that they knew how to report a problem or concern. These residents were aware that they could speak to a senior member of staff, the manager, or a trusted carer if they had any worries about their safety or wellbeing. Three residents, however, were unsure of the formal reporting process. We must note, however, that many residents have cognitive or sensory impairment issues, we felt that they might have felt hesitant to respond during the time of the visit or may have struggled to retain the information previously explained to them.

All residents said they would feel comfortable reporting any issues to the manager or a senior carer, describing the staff as approachable, trustworthy, and responsive. Three residents were less certain about the exact process for reporting abuse but expressed confidence that staff would handle any concerns appropriately if raised.

Regarding feelings of isolation, residents highlighted the social activities and the efforts of staff to engage with them throughout the day. Several residents spoke

positively about the friendly and inclusive atmosphere. However, two residents noted that they sometimes feel lonely during quieter periods or when activities are limited, particularly on weekends, suggesting that additional group interactions could be beneficial.

Residents expressed confidence that staff treat everyone respectfully and respond promptly to any issues or disagreements that arise.

During our December 2025 visit, we spoke to a resident who had lived at Ellesmere House for seven months. She allowed us to visit her in her room and to look at her ensuite bathroom. She told us that she had limited mobility, severe hearing loss and experienced widespread pain. Moving to a cared for environment had not been an easy choice for her but she was pleased and reassured by the standard of care she received at Ellesmere and spoke very emphatically about her regular carer whom she had bonded with and relied upon to make this difficult transition. We heard that there was great consistency and continuity of care at Ellesmere and this was borne out in our interviews with staff.

The alarm cord in the ensuite bathroom was not working when we visited but Chad, the Home Manager, had already reported the issue and escalated it to ensure a prompt response. The resident herself needed constant supervision when in the bathroom so we felt that she would not be at greater risk during the time the cord was out of action and felt confident that the matter was being addressed effectively.

Residents offered several suggestions for improvement in the general running of the home, including more varied and stimulating activities, particularly for those with limited mobility. Additional opportunities for outdoor excursions were mentioned. Some residents also suggested clearer communication regarding daily schedules and menu options.

Overall, residents expressed satisfaction with the care they receive and appreciation for the dedication, attentiveness, and kindness of the staff team, reflecting a supportive and person-centred environment.

# Staff feedback

Healthwatch Kensington & Chelsea provided a safeguarding questionnaire to four staff members at Ellesmere House Care Home. These staff were observed interacting with residents briefly and demonstrated confidence in their roles while maintaining a friendly and professional demeanour. Their responses provide insight into safeguarding practices, training, and staff confidence within the service.

During the December 2025 revisit, we spoke to five staff including the deputy manager.

## **Do you feel your training adequately prepared you to deal with safeguarding concerns?**

Staff members reported that their safeguarding training had adequately prepared them to recognise and respond to safeguarding concerns. They highlighted that the training covered key topics such as identifying signs of abuse, reporting procedures, whistleblowing, and maintaining professional boundaries. Staff also appreciated the practical examples and scenario-based discussions during training, which reinforced their confidence in responding effectively to real-life situations.

In conversation with staff in 2025, we learned how comprehensively the home deals with infection control to keep residents safe, prevent serious illness and reduce the likelihood of hospital admission.

## **Are you confident that management would act appropriately if a safeguarding concern was raised?**

Staff expressed complete confidence in the management team's ability to respond appropriately to safeguarding concerns. They described management as approachable and proactive in investigating issues. Staff said they would not hesitate to report a concern, knowing it would be addressed confidentially, professionally, and in line with the home's safeguarding policies.

## **Are there enough staff on duty in every shift to keep residents safe?**

In general, staff members felt that staffing levels were sufficient to maintain residents' safety and ensure high-quality care. One staff member noted that, sometimes there are unexpected absences that staff need to cover. During our December 2025 visit, the

Deputy Manager explained that Ellesmere House did not need to employ agency staff and this meant that there were higher standards of consistency and continuity of care to keep residents safe and offer them great reassurance.

### How often do you have safeguarding training?

All staff members confirmed that safeguarding training is provided annually, with additional refresher sessions or updates arranged when required, for instance following policy changes or incidents highlighting learning needs. Staff also mentioned that safeguarding topics are routinely discussed during supervisions and team meetings to maintain awareness and reinforce good practice.

### Are there any areas where you feel safeguarding could be improved?

Staff felt that safeguarding is a clear priority at Ellesmere House, with a strong culture of openness, accountability, and proactive engagement. As well as in annual training, safeguarding is regularly discussed at team meetings and in individual staff supervision which gives staff members the knowledge and confidence they need to act appropriately to safeguard residents when the need arises.

# Summary and Recommendations

Based on observations of the environment and questionnaire feedback from residents, managers and care staff, the following recommendations have been developed for Ellesmere Care Home:

### Key Strengths

- **Positive staff-resident relationships:** Observations during both visits indicated genuine, respectful engagement between staff and residents, fostering trust and wellbeing.

- **Consistency and Continuity of Care :** When we visited in December 2025, we discovered that Ellesmere House was staffed entirely by regular staff with no need for agency employees. The Manager seeks to ensure that residents are cared for by the same staff as much as possible. This is very beneficial in creating the sort of calm, well organised home environment that is so striking at Ellesmere House.
- **Resident and family engagement:** Residents and families are informed about safeguarding rights and procedures through meetings, noticeboards, and verbal updates. Residents who are able are actively involved in discussions about their safety.
- **Well-maintained environment:** The home appeared exceptionally clean, well maintained and staff have created an environment that is homely and calm.
- **Comprehensive safeguarding policy:** The home has a written safeguarding policy that is reviewed regularly and updated when needed, ensuring alignment with current legislation and best practice.
- **Strong culture of safeguarding:** Staff reported confidence in recognising and reporting safeguarding concerns. Management is viewed as approachable and proactive in responding to incidents.
- **Regular safeguarding training:** Staff receive annual safeguarding training covering abuse types, reporting procedures, whistleblowing, mental capacity, and consent. Additional refresher sessions are provided, as needed.
- **Clear reporting and escalation procedures:** There is a structured process in place for identifying, reporting, and investigating safeguarding concerns, with lessons learned shared through staff meetings.
- **Culturally sensitive care:** Efforts are made to accommodate residents' dietary preferences, including culturally specific meals.

## Areas for Improvement

- **Enhanced communication about daily activities:** Some residents mentioned a desire for clearer information about schedules, mealtimes, and more varied activity options.

## Summary

Ellesmere House demonstrates a strong safeguarding culture, with well-trained staff, positive resident engagement, and a very supportive and safe environment for residents.



# Acknowledgements

Healthwatch Kensington and Chelsea would like to thank management, staff and patients for taking the time to speak to us during the visit.

## Provider response

We spoke to Chad Bain, Home Manager at Ellesmere House following our revisit in December 2025. Chad was very pleased that Healthwatch RBKC recognised the hard work and dedication of all the staff. Staff at Ellesmere House take pride in their work and that is evidenced by the positive report produced by Healthwatch.



The Stowe Centre  
258 Harrow Road  
London  
W2 5ES

[www.healthwatchrbkc.org.uk/](http://www.healthwatchrbkc.org.uk/)

t: 0208 968 7049

e: [info@healthwatchRBKC.org.uk](mailto:info@healthwatchRBKC.org.uk)



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