



Healthwatch Central West London

Dignity Champions Visit Ellesmere House

November/December 2018,
February 2019

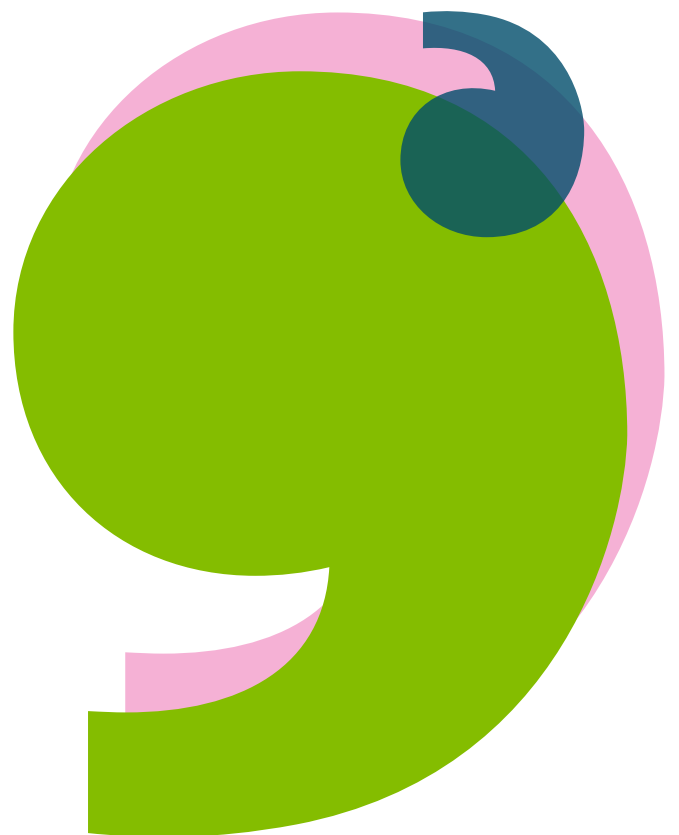


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1 Introduction

1.1 Details of visit

Details of visit:	
Service Address	Ellesmere House, 9 Nightingale Pl, Chelsea, London SW10 9TN
Service Provider	Care UK
Date and Time	22 nd November, 2018, 3PM-4PM 28 th November, 2018, 11.30AM - 13.30PM 7 th December, 2018, 9AM-11AM 23 rd February, 2019, 2PM - 4PM
Authorised Representatives	Zivile Adulcikaite, Aliko Myrianidi, Christine Vigars, Tania Kerno, Anne Heath, Nicola Castelov, Sheeba Mukadam, Jacky Ferguson, Rahini Mylvaganam, Gaenor Holland William
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1.2 Acknowledgements

Healthwatch Central West London would like to thank the Ellesmere House residents, relatives and staff members for their contribution toward the Enter and View programme.

1.3 Disclaimer

Please note that this report relates to findings observed on the specific dates and times indicated above. The Enter and View report is not a representative portrayal of the experiences of all service users and staff. It is only an account of what was observed and contributed through interviews at the restricted time of Healthwatch Central West London representatives' visits.



2 Executive Summary

Healthwatch Central West London (Healthwatch CWL) champions better standards of care in health and social care services. Its team of Dignity Champions are volunteers recruited from the local community who work to improve standards of dignity in health and social care services. This report presents the findings of the Dignity Champions' Enter and View visit to Ellesmere House, Care Home. The Care Home is situated in the Royal Borough of Kensington and Chelsea and is run by a private provider Care UK Community Partnerships Ltd.

This is the first time Healthwatch CWL has visited Ellesmere House. A recent CQC inspection rated the home as “requires improvement”.

The Enter and View visit to Ellesmere House was conducted as part of Healthwatch CWL's ongoing work on access to, and provision of, health and social care services in West London.



3 What is Enter and View?

Healthwatch Central West London (Healthwatch CWL) works to ensure local people's voices count when it comes to shaping and improving local health and care services across the London Borough of Hammersmith and Fulham, the Royal Borough of Kensington and Chelsea and the City of Westminster.

Under Section 186 of the Health and Social Care Act 2012 Healthwatch has a statutory power to 'Enter and View' places that provide publicly funded Health and Social Care services¹. This may be unannounced or through prior arrangement to view and assess a service.

Enter and View visits can be a way for people to tell Healthwatch CWL if there is a problem with a service or equally if the services have a good reputation. The Dignity Champions learn about and hear examples of what service does from the perspective of people who experience the service first hand.

Enter and View visits can be carried out if one or more of the below reasons are identified by Healthwatch CWL:

1. As a contribution to a Healthwatch CWL programme work;
2. As a consequence of service user or public feedback;
3. As a strategy to explore good practice;
4. As a method for checking the responses of a service following an earlier Enter and View visit;
5. As a response to a request or recommendation by a professional from the health or social care service, who has involvement in the commissioning, contracting or regulation of that service.

The Healthwatch CWL authorised representatives who carry out Enter and View visits are a group of volunteers referred to as 'Dignity Champions'. They receive training on the Care Act 2014 as well as the duties and implications in the provision of care around respect, dignity safeguarding vulnerable adults, and health and safety. All the Dignity Champions have a current enhanced Disclosure and Barring Service (DBS) certificate.

When carrying out Enter and View visits, the Dignity Champions follow the 10 standards set out in the Department of Health's 'Dignity Challenge':

1. Services to have a zero tolerance of all forms of abuse
2. Support people with the same respect you would want for yourself or a member of your family
3. Treat each person as an individual by offering a personalised service

¹ Apart from Children's Social Services

4. Enable people to maintain the maximum possible level of independence, choice and control
5. Listen and support people to express their needs and wants
6. Respect people's right to privacy
7. Ensure people feel able to complain without fear of retribution
8. Engage with family members and carers as care partners
9. Assist people to maintain confidence and positive self-esteem
10. Act to alleviate people's loneliness and isolation

Moreover, when visiting care homes, the Healthwatch Representatives check whether the assessed place delivers the service in accordance to the Independent Age 8 Care Home Quality Indicators²:

1. Have strong, visible management
2. Have staff with time and skills to do their jobs
3. Have good knowledge of each individual resident and how their needs may be changing
4. Offer a varied programme of activities
5. Offer quality, choice and flexibility around food and mealtimes
6. Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists
7. Accommodate residents' personal, cultural and lifestyle needs
8. Be an open environment where feedback is actively sought and used

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch safeguarding policies.

3.1 Purpose of Visit

All Enter and View visits must have a clear purpose identified by Healthwatch CWL to ensure effective evidence gathering and reporting. The purpose of this visit was to assess the quality of the residents' experience against the Department of Health's Dignity Standards.

3.2 Strategic drivers

The last CQC inspection of Ellesmere House took place on June 2018. The overall rating for services was "requires improvement"³. In detail, Caring, Responsive, Effective and Safe were all rated "good", well-led was rated "required improvements".

Healthwatch Central West London (HWCWL) delivers an enhanced Enter and View programme every year. Several care homes have been selected to be visited as part of this programme in accordance with information received from the local public, service users, carers and monitoring authorities.

²<https://www.independentage.org/policy-and-research/our-8-care-home-quality-indicators>



This visit was the first visit to Ellesmere House and it was part of several Enter & View visits to collect the views of people whilst they are directly using services. This will then contribute to helping ensure that the views and feedback from patients and carers are an integral part of local commissioning across health and social care.

3.3 Methodology

The team of Healthwatch CWL Dignity Champions collected data using the following methods:

- The announced visits were set up to be carried out on Thursday, the 22nd November 2018, Wednesday, the 28th November 2018, Friday, the 7th December, and Saturday, the 23rd February 2019.
- An introductory letter was sent to the Care Home manager.
- A meeting was arranged with the Care Home manager.
- During the meeting a member of Healthwatch staff and the manager discussed the Enter and View visits.
- An observation check-list was devised to help the Dignity Champions to record their observations of the environment of the Dementia Resource Centre.
- Three different questionnaires were developed for (1) people using the service, (2) visitors to the service and (3) the clinical team.
- The Healthwatch CWL representatives talked to people using the service and the Ward staff who were willing to share their opinion. It was made clear that they could end the interview at any time.
- The majority of people using the service could not let the Dignity Champions know what they thought about Ellesmere House because they were unable to clearly verbally communicate.
- In total Healthwatch CWL representatives spoke to:
 - 7 residents
 - 8 relatives
 - 10 members of staff

3.4 Summary of findings

During the Enter and View visit the Dignity Champions observed members of staff providing a good standard of care in relation to dignity and respect. The staff team demonstrated evidence of delivering person-centered care and having regard for residents' independence and choice.

However, there were areas of improvement and we also found safeguarding concerns.

During our visits we found the environment generally nice and welcoming but not dementia friendly. There were a few issues, such as signage did not have any pictorial representation and the flooring was carpet, which is not recommended for people with Dementia for many reasons. In terms of Health and Safety our findings show



that Ellesmere House is in a good condition with a few required improvements. The quality of food looked good and people seemed to enjoy it.

Although members of staff were caring and kind we found some issues with care. All people had risk management plans in place for falls, mobility and pressure ulcers. However, Dignity Champions saw bruises on few peoples and relatives reported neglect in one instance. Dignity Champions found that the place requires improvements in some aspects of care. Also, some relatives had concerns about safety.



4 Results of visit

4.1 Background

Ellesmere House is a 70-bed residential home providing nursing or personal care for people aged over 65. It is owned by Care UK. Ellesmere House provides both residential care and dementia care. Residents live on 4 floors; the lower ground floor provides care for people with Dementia; the ground floor provides care for people that require nursing care. The second and third floor provide care for both residents with or without Dementia. The second and third floor are private while lower ground and ground floor are for people funded by the social care package of RBKC. Our visit was to the 2 lower floors.

4.2 Environment

During the Enter and View visit at Ellesmere House Healthwatch CWL Dignity Champions recorded observations regarding the environment of the Care Home. Some points were raised and discussed with the manager:

- The Dignity Champions thought that the exterior of Ellesmere House was attractive.
- The entrance was clean. There were some seats in the waiting area. The Dignity Champions liked the resident wish tree in the waiting area.
- At the time of the second visit the Business Manager showed the Dignity Champions around. She was rushing as she needed to cover for the receptionist who had a medical appointment on the day. A maintenance worker was looking after the reception.
- At the time of the third visit, the Regional Manager greeted the Dignity Champions. On the fourth visit the Deputy Manager greeted us. Generally, the Dignity Champions did not feel welcomed on the first, second and fourth visits, however, on the third visit the atmosphere was better compared to the other times. This can be attributed to the presence of the Area Manager who was covering during management shortage.
- The Dignity Champions thought that the Care Home was cozy and did not look institutional. It was nicely decorated throughout all floors. However, it was not dementia friendly and some redecoration work was needed particularly on the lower ground floor.
- The Dignity Champions thought that the main lounge on the ground floor was homely.



- The furnishing across the care home was in a very good condition. There was lots of seating across the care home that seemed to be comfortable.
- The flooring was non-slippery, non-shining and well maintained.
- The care home had good lighting, except for the lower ground floor. The lower ground floor did not have much the daylight; it was quite gloomy as the lower ground floor, which is for people with Dementia, had no windows.
- Except for the lower ground floor, the Dignity Champions did not notice any odour. The lower ground floor has a very strong smell of urine. The manager mentioned that it was very difficult to keep the carpets clean on that floor as most of the residents lived with advanced Dementia and also had continence problems. The Manager hopes to remove all the carpets in order to make floorings easier to clean and maintain.
- Ellesmere House residents can access backyard garden areas that were very well maintained, had seating areas, railings and some sensory activity boards.
- In most of the common areas light music was played in the background.
- Except for the lower ground floor, all other floors were nicely decorated and painted in warm colors. However, the color contrast between handrails and wall wasn't very dementia friendly. Also, some corners in the lower ground floor needed a touch of fresh paint.
- There were a lot of home plants around Ellesmere House that were looked after.
- The Care Home was decorated with pictures from residents' activities.
- All the communal spaces were clutter free and notices kept to a minimum to avoid distraction and confusion.
- At the time of the second and third visit soft music was playing in the communal areas.
- The temperature differed throughout the Care Home. On some floors the temperature was 27 Celsius degrees, whilst it was chilly on the ground floor.
- The Dignity Champions noticed that some of the bathrooms were used as a storage rooms.
- There was a lovely spa room on the ground floor that had an accessible jacuzzi and hoist.
- There was also a beautiful cinema hall on the ground floor
- The lower ground floor had a lovely seating bay with red walls.

4.3 Health and Safety

- Throughout all four Enter and View visits, the Healthwatch Representatives looked at whether the service followed good health and safety practices:
- The Dignity Champions had no concerns about hygiene and cleanliness of the Care Home. At the time of all four visits, all common areas and bathrooms were spotless.
- During the second visit, there was an incident involving a resident that arose because an office had been left unlocked and therefore accessible. At the



time of the third visit, the Dignity Champions checked what measures were taken to prevent this from happening again. The Regional Manager informed us that the room is currently out of use and is being kept locked until they install a keypad. During the third visit, the Dignity Champions checked and the room was kept locked.

- At the time of the third visit, members of the staff team were doing medicine round. They were wearing a red bib that had a clear sign not to be disturbed on it.
- There was a strong odour of urine on the lower ground floor during all four visits. The manager explained that it was really hard to maintain the carpets and that she intended to get them removed. Care UK is currently putting in place an Action Plan that will have to be approved by RBKC.
- The in-house kitchen was neat and in good order.
- At the time of the second visit, the Boots medicine bags were left in the corridor on the first and second floors, which was a trip hazard.
- At the time of the second visit, the door to the storage room was left open even though the sign said, “keep closed at all times.”
- Care plans were left on the nursing station on the ground floor, where anyone could look at them.

4.4 Signage and Information

The Healthwatch representatives assessed whether the signage and information through the Care Home made the environment supportive and enabling for the patients and visitors:

- The Dignity Champions thought that the activities schedule was in a small print and difficult to see. The Activities Coordinator explained that every resident receives an activity schedule and their relatives are e-mailed a copy. Moreover, she walks around the Care Home every day, to remind the residents about activities taking place.
- At the time of the second and third visits, the Dignity Champions noticed that some information posters were out of date.
- The Healthwatch team thought that there was no consistency in the indoor signage. Some people had names and numbers on the doors, some people had just the numbers.
- The Dignity Champions liked that there were signs with the date and weather forecast on.
- The signs on the lower ground floor were not dementia friendly as they did not have pictorial representation.
- There was a, “You said - We did” board on the ground floor.



4.5 Care

- As part of the Enter and View visits, the Dignity Champions paid attention to signs which show whether people were receiving person centered care and whether the service was promoting residents' dignity and choice:
- The Dignity Champions observed the Ellesmere House team treating residents in a kind and caring manner. They spoke slowly and clearly to residents.
- At the time of all four visits, all staff members seemed to be very friendly, compassionate and caring. They took time to listen to residents and stop to have a small chat while passing the residents in the corridor.
- The Dignity Champions observed staff being extremely busy and Dignity Champions wondered how much time they have available to spend with residents each day.
- All residents had their own en-suite rooms. The residents were allowed and encouraged to have personal belongings in the rooms.
- People living in the Care Home told the Dignity Champions that their rooms were cleaned daily.
- Some people had a mattress next to their beds to protect them in case of falls during the nights.
- At the time of the third visit, one resident left his room wearing just an incontinence pad because he did not want to take a shower. The Healthcare Assistant was looking for some support from her team members to calm the resident down.
- The residents could choose what to wear. If they wanted to stay in a dressing gown, that was fine.
- The Dignity Champions noticed that the Care Team was actively seeking people's opinion on whether they were happy with the music volume, TV programme, food option, or where they wanted to go.
- A hairdresser comes to the Care Home every two weeks.
- During our visits we observed a couple of possible safeguarding issues. These were reported to the Care Home Manager and to RBKC Safeguarding Team. These are being followed up through the appropriate channels.

4.6 Activities and Leisure Time

- The Dignity Champions took note of the activities that were available to the residents and what else was available during their leisure time:
- There is a good range of activities organised at the Care Home. Each day, two different activities are run by an Activities Coordinator. The Activities Coordinator told the Dignity Champions that it was extremely hard to organise activities for the entire Care Home without additional support. The other team members would give her a hand when they could spare some time.



- Outings were particularly difficult to arrange. If none of the other members of staff can join the Activities Coordinator, she is able to take only four residents with her.
- There are posters on each floor on a number of notice boards advertising the events. But the writing on the posters is small and it may be difficult for residents to access this. However, the Activities Co-ordinator visits each resident every morning to advertise the activities taking place on the day and leaves the posters in each room. There are also other posters advertising individual events. She tries to find out what each resident likes and during the activities she checks who are missing and goes to their room to get them. She also emails the relations with the activities so that they can tell the residents.
- The Activities Co-ordinator also works one to one with the residents and Dignity Champions observed her working with a resident with Dementia. She was very patient, kind and ensured that she had the attention of the resident and asked questions to get the resident to remember items. She also encouraged the resident to take part in the activity which was to hang decorations on the Christmas tree.
- The Dignity Champions thought that most residents were lonely and isolated. At the time of second and third visits, the Healthwatch team noticed that most residents spent their time in their room or sat on their own. The staff team did try to chat with residents now and then, however, after a small chat they had to move on to look after other residents.
- The Dignity Champions liked the idea of a “wish tree”. Residents hanged their wishes on the tree. Each month the Activities Co-ordinator would pick one wish and fulfill it. There was a “fulfilled wishes” board in the waiting area on the ground floor that had pictures with residents whose wishes were fulfilled (e.g. trip to the zoo, dinner with a family member, etc.)
- The Dignity Champions asked the Area Manager how people communicate with their relatives. Whenever a Healthwatch Representative tried to call the Care Home, it was very difficult to get through the main reception line. The Area Manager acknowledged that there was a problem with how their phone system worked and explained that currently Care UK are looking into how to change this. However, people can have BT lines installed in their rooms, keep their mobile phones or use Ellesmere House tablets to skype their relatives.
- Some residents mentioned to the Dignity Champions that they used to have better activities before. Currently the Care Home has only one Activities Co-ordinator and is looking into recruiting a second, who could support her in delivering the Activities programme.
- At the time of the second visit, a Coffee Morning was supposed to take place. But the Activities Co-ordinator was out buying Christmas presents and decorations.



- People in the Care Home could access WiFi. Upon a request they could use tablets and laptops.
- The Dignity champions noticed some hostility between some residents.
- One individual said they were not sure who to ask about the activities. Also, they wished they could go outside more and have more outing trips.
- At the time of the second and third visits, a lot of residents were alone in their rooms.
- At the time of the third visit, the Dignity Champions saw a member of the staff team bringing newspapers to residents. “I always have a newspaper”
- “You can take part if you want to, but I prefer to be left alone. As you get older you don’t want to mix with other people.
- Two residents said that they would like to go out more often.
- There were various board games available for the residents.
- One resident mentioned that she enjoyed celebrating her birthday organised by the Activities Co-ordinator - she blew out candles and cut the cake.

4.7 Food

- During the first visit lunch was served to the residents and the Healthwatch team had a chance to see nutritional care provided in the care home:
- At the time of the second visit, the Dignity Champions observed lunch being served. The Healthwatch representatives noticed that on some floors residents had choices, however on some floor they there were no choices and people had to eat what was given.
- At the time of the second visit, a member of staff helped some people to cut the meat.
- Although the main food appeared to be hot enough, one of the residents complaint that their side vegetables were cold.
- People were given a lot of time to finish meals.
- At the time of the third visit, the residents were still having their breakfast. People could choose to have cooked English breakfast, porridge or cereal. The Dignity Champions thought that residents were enjoying their food. When asked about the food at the Care Home, the residents said that they liked the food offered. One resident mentioned that food quality was worse when agency staff cook it.
- Residents could choose where they wanted to eat. They could eat in the dining area, their own room or a communal area. At the time of the third visit, one resident was brought from the second floor to the ground floor to have his breakfast as he wanted to change the space.
- The menus were displayed on the tables. The Dignity Champions thought that they were printed in a really small format.
- The menu had couple of options to choose from. The staff mentioned that the needs of people who have different dietary requirements are met.



- The Dignity Champions noticed a bowl of fresh fruit in the lounge area on the ground floor. There was an easy to use coffee machine and a squash machine available for resident to use on the ground floor.
- The dining room tables were laid with proper cutlery and paper napkins. The Dignity Champions had some concerns about safety as they observed one resident trying to cut the shaker and putting a knife in his mouth whilst his eyes were closed.
- The Care Home had a Hostess working from Monday to Friday that tried to ensure the meal time was as enjoyable as possible. The Hostess told the Dignity Champion that during the day she made rounds around the Care Home asking whether people wanted a drink or a snack.
- At the time of the second and third visit the Dignity Champions noticed that residents chose to sit in the same places. Some residents chatted to each other while having their meals.
- One resident mentioned that she thought the food gets boring. “It is the same all the time, but you can ask for something else.” The resident sometimes asks the kitchen staff to make her plantain.
- The Healthwatch team observed staff helping residents to cut their food and gently encouraging them to eat while chatting with them. Some residents needed feeding and it was done in a considerate manner.
- There was a coffee machine in lounge on the ground floor and a selection of diary and non-diary milk in the fridge.

4.8 What did Residents Say

To learn about residents’ experiences of the Care Home, the Dignity Champions spoke to seven residents:

General comments

- A majority of the people living in Ellesmere House told the Dignity Champions that they liked the Care Home. “It is very well organised”, “this is a happy place”
- Residents spoke highly about the care team: “very happy here”, “they look after us individually”, “I couldn’t speak more highly of it here. They are very easy and help people”.

Levels of care

- Residents mentioned that the staff team was always changing in the Care Home.
- One resident mentioned that she felt upset as she did not receive enough attention from staff as she was seen as more abled than the others. Although she would have preferred to wear different clothes, she remained in a dressing gown as she was not offered the support to change.
- Another resident said: “They help people who are less able than I am”



- The only thing one individual did not like about the Care Home was that other residents would walk in their rooms during the night and wake them up.

Relationships with staff and other residents

- One resident mentioned that they wished they could have more conversation with other residents.
- One resident said they felt that staff were not always listening to what they had to say.
- Dignity Champions noted that residents can stay on their own without mixing with other residents due to the number of communal areas.

Giving feedback or making a complaint

- One resident said they did not feel comfortable saying to the staff members if they felt unhappy about something.
- One resident did not know how to make a complaint or whether there was a feedback box.

Activities

- Residents said that there were enough things to do but a couple of them chose not to do activities as they were not interested.
- One resident said that she felt lonely and bored as she said most of the residents had Dementia.
- This resident also mentioned that she was taken out the previous day to the opera.

4.9 What Did Relatives Say

At the time of the first visit a Healthwatch Representative attended a quarterly meeting for residents' family members. 11 family members attended the meeting. The Dignity Champion spoke with three relatives about what they thought worked well and not so well at Ellesmere House. At the time of the second and third visits, the Healthwatch team chatted with three relatives visiting Ellesmere House and at the time of the fourth visit we spoke to two relatives:

- All family members agreed that Ellesmere House was one of the best places they have seen or visited.
- Family members said that the care team was very caring and kind. "I feel my ma is treated a person with her own personality".
- "My mother came here for respite care and we liked the ambience of the room and so did so decided to make the move permanently".
- Two relatives said that when they felt comfortable making a complaint and that in the past the management dealt with efficiently.



- Relatives were happy that there is not any visiting restrictions and they can stay as long as they want, including nights.

However, there were quite a few areas where improvement would be welcome.

Personal care standards

Dental care:

- Some family members mentioned that their relatives are not supported in maintaining a good mouth hygiene.
- One relative mentioned that the dentist told that a resident started having dental issues because their teeth were not being cleaned.
- Another relative said that he did an experiment and kept on leaving a toothpaste on the relative's toothbrush and every time he came in the morning the paste would be still on the toothbrush.

Personal care:

- One relative mentioned that although his family member was not happy about the male staff doing personal care, and they requested a female staff to do so, their request was not listened to.

Levels of care

- The relatives were worried about the low levels of staff in the Care Home.
- One relative was not informed about a fall and what was happening next; they expressed concern about safety.

Care during times of illness

- A family member mentioned a time when a resident was not helped when they felt sick. By the time the Healthcare Assistant responded and brought a sick bowl it was too late, and the person was left in an embarrassing position.

Support for families and their involvement in their relative's care

- The relatives mentioned that they did not receive enough information from the management in regards to their family members. People have to actively seek the information from the staff members. One relative said that she felt involved in her family member's care.
- A couple of family members mentioned they did not feel involved in their relatives care and had to ask to be involved.
- One relative said they felt sometimes involved.
- Relatives also mentioned that there is no support for wives who have husbands with Dementia. Wives feel that they left alone during that difficult time.



Staffing levels

- One relative mentioned that he was asked to stay longer with his relative so that a Healthcare Assistant could complete her tasks with another resident.
- Some relatives were concerned that activities were not actually taking place particularly during weekends.
- The relatives said that weekends had a completely different atmosphere as more agency staff were used on the weekends.

Maintenance

- One of the relatives complained that the maintenance jobs were not done although reported.

4.10 What Works Well and What Could Be Improved

Dignity Champions asked residents what they thought worked very well at the care home and what could improve their experience at Ellesmere House.

- Among the main things that worked well the interviewees mentioned:
 - Activities are run daily
 - Staff are friendly
 - Food is good.
- Among the main areas for improvement the interviewees mentioned:
 - Residents would like to be listened to more
 - Relatives would like to be listened more
 - Make the place more dementia friendly
 - Give more support to relatives
 - Safety
 - Safeguarding-care

5 Additional findings

Healthwatch representatives talked to ten members of the Ellesmere House team to find out what they thought about the services they were delivering:

Staffing levels



- The Area Manager and the Home Manager mentioned that the biggest challenge was recruiting and maintaining the team.
- The team mentioned that they wished there were more people in their team so that the Care Home did not need to rely so heavily on agency staff. The Dignity Champions noticed that on the staff book a day before the second visit, the care home had 8 agency staff covering the shift.
- One staff member said that in the last 3 years the staffing levels fell. The team feels more under pressure.

Training

- The team said that they received some training arranged by Care UK.

Management

- Some of the staff members said that it was very difficult to get hold of the Manager if there was a problem.
- All staff that we spoke to mentioned that turn over in management made the job very difficult.

Relationships with residents

- Members of staff mentioned that they were moved across floors and that made it difficult to develop relationship with residents. Difficult to work in a new team as each floor has different routines.



6 Recommendations

6.1 Comparisons with previous Healthwatch visit(s)

This is our first visit at Ellesmere House and therefore no other prior report was made to compare it with this.

6.2 Healthwatch CWL Recommendations

By listening to people and recording their experiences, Healthwatch CWL has formulated some recommendations designed to help the management to improve residents experience.

Based on the Enter and View visit to Ellesmere House, Healthwatch CWL has the following recommendations / clarifications:

Environment

- Service provider to consider removing all carpets in Dementia or mixed floors. We would recommend a matt- non-slip flooring, contrast well with wall surface and handrail to help those with dementia.
- Service provider to consider redecorating the Dementia and mixed floors and make it more Dementia friendly.
- Service provider to consider adding handrails to some wall sections where there are no handrails.
- Service provider to consider having consistency in the indoor signage.
- Service provider to consider changing the signs in the lower ground floor and make it more Dementia friendly. We would recommend an appropriate combination of text and image be displayed in signs.

Staffing Levels

- Service provider should review staffing levels

Support Services

- The management to consider setting up a support group for relatives and spouses.



Training

- Healthwatch CWL would like to clarify if all the staff had Dementia and safeguarding training.

Menu

- Service provider to consider changing the text of the menu and make the font bigger.

Care

- Due to safety and safeguarding concerns Healthwatch CWL would like a response from the service provider along with an action plan of things that will be done to avoid similar situation in the future.

Relatives Residents

- Service provider to consider how they are taking relatives views into consideration, there is currently a quarterly meeting, but relatives reported that very little happens, and views are not heard.

6.3 Provider response

A copy of this report was sent to Care UK to offer an opportunity to respond to the report and our recommendations. We received no response.

This report was discussed at the 2nd July 2019 Adult Social Care and Health Scrutiny Committee in Kensington and Chelsea.

