# Enter & View Report

Jansondean Nursing Home, 10th February 2022



A report by Healthwatch Bromley



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Visit Details	
Service Visited	Jansondean Nursing Home, 56 Oakwood Avenue, Beckenham, Kent, BR3 6PJ
Manager	Susan Hill
Date & Time of Visit	17 <sup>th</sup> January 2022, 14.00am - 16.00pm (virtual visit) and 10 <sup>th</sup> February 2022, 11.00am - 12.30pm (in-person)
Status of Visit	Announced
Authorised Representatives	Namrata Bansal, Julia Eke, Gerda Loosemore-Reppen, Katie Anderson
Lead Representative	Julia Eke

# 1. Visit Background

# 1.1 What is Enter & View?

Part of the local Healthwatch programme is to undertake 'Enter & View' visits.

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

Enter & View visits can happen if people tell us there is a problem with a service, but equally they can occur when services have a good reputation.

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

Following the visits, our official 'Enter & View Report', shared with the service provider, local commissioners and regulators outlines what has worked well, and gives recommendations on what could have worked better. All reports are available to view on our website.

# 1.1.1 Safeguarding

Enter & View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with safeguarding policies. If at any time an AR observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit. In addition, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the Care Quality Commission (CQC) where they are protected by legislation if they raise a concern.

# 1.2 Disclaimer

Please note that this report relates to findings observed on the specific date(s) set out. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

# 1.3 Acknowledgements

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

On this occasion, two Enter & View AR attended the visit. The AR acquired feedback from residents, relatives, and staff. Suggestions have been made on how to improve the service and good practice has been highlighted.

# 2. About this visit

# 2.1 Jansondean Nursing Home

On 17<sup>th</sup> January 2022 we conducted a 'virtual visit' of Jansondean Nursing Home, a nursing care home in Bromley.

The home provides accommodation and nursing care for up to 28 older people. At the time of the visit, 25 people were using the service.

Rooms are distributed across three floors. There are 12 on the ground floor, another 12 on the first floor, and 3 on the top floor, which was being redesigned. During the day, there are six care staff, a staff nurse, and the manager. At night, there are usually two care staff and a staff nurse.

The Sage Care Home Group owns Jansondean Nursing Home.

# 2.2 CQC Rating

The CQC is England's independent regulator of health and adult social care. It makes sure health and social care services provide people with safe, effective, compassionate, high-quality care and encourages care services to improve. The CQC last inspected Jansondean Nursing Home in January 2021. The inspection report gave an overall rating of 'Overall Good' in all criteria: safety, effectiveness, caring, responsiveness, and well-led.

In its report, the CQC states that the home had made 'enough improvements' concerning safety, staffing, and recruiting since the previous inspection. The nursing home successfully reduced the number of agency staff and provided enough full-time staff to look after their residents.

# 2.3 Online Feedback

The carehome.co.uk review <u>page</u> has only 4 feedback entries - with an average of 4.5 out of 5.

# 2.4 Focus of the Visit

Enter & View visits enable us to form an impartial view of how the home is operated and how it is experienced by residents, and to produce and publish a report.

# 3. Summary of Findings

On 17th January 2022, due to COVID-19 restriction, we conducted a virtual visit to the care home via zoom and arranged telephone calls with residents. However, due to a poor internet connection, the visit was rescheduled for 10th February 2022 in person.

On the visit, we received a warm welcome from Susan Hill, the care home manager, and then were given a tour of the outside of the building, including parking space, garden and smoking area, the entrance, communal areas, dining rooms, the manager's office, clinic room, residents' rooms and the kitchen and laundry room.

The manager was very polite and calm. The staff appear to be busy but relaxed and cheerful.

The entrance was well organised and very welcoming. The decor was bright, and the overall space appeared to be airy and clutter-free.

A sanitising station was set up at the entrance, fully stocked with gloves, aprons, masks and covid tests.

# Entry and General Accessibility

Notes

- $\cdot$   $\,$  We noted a sanitising station outside the building and another inside by the front door.
- The entrance is fully accessible with a split ramp.

- We noticed a visitor book and a neat notice board on the wall.
- Fire extinguishers, alarms and blankets were seen in various parts of the facility; the fire exits were clear of any obstructions.
- Dementia signage is displayed throughout the care home.
- All entrances are locked and require keypad entry.

#### What has worked well?

- We saw no obstructions.
- To avoid slips and falls, safety tape was placed on the floor around the house.
- Utility areas, such as the kitchen and laundry room, as well as the two clinical rooms, have keypad locks to prevent unauthorised entry.
- · Alarm buttons are located throughout passageways.
- The doors are controlled by a push-button.
- There is a lift in each floor of the building.
- Parking is always available.

#### What could be improved?

- In the basement there is a kitchenette where family, friends and staff can help themselves to teas and biscuits. We noted that there is no allergy information displayed around the kitchenette in the common area.
- Although there is good provision of parking space, there is no designated disabled parking.

Most of the residents were out of their rooms, undertaking activities in the communal area. The interaction between the activity coordinator and the residents appeared genuinely warm and the activities enjoyable.

A quiet atmosphere prevailed throughout the home, with some laughter in the background.

We were granted access to all areas of the home and the manager was able to answer all our questions.

#### COVID-19 and Visiting

## Notes

- All staff have been vaccinated; some have also received a booster jab.
- During the pandemic, visits have been restricted to four visitors per resident each day, with visitors needing to book in advance and take a lateral flow test prior to the visit.
- During the COVID-19 outbreak, the current manager was not in post, but stated that the home had had sufficient PPE.

#### What has worked well?

- At our virtual visit, all staff were observed to be wearing masks whenever outside the main office.
- Staff and families feel that infection control measures have been effective.

- $\cdot$  The manager encourages the staff to test frequently and to keep up to date with their vaccinations.
- Families say they are always treated with respect by the staff when they visit.

#### What could be improved?

We found no potential areas for improvement.

#### General Environment

#### Notes

- The residence has three floors and a basement which houses the kitchen, communal area, and utility rooms.
- In addition to bedrooms, the first floor also houses the manager's and nurses' offices, two clinical rooms and a bathroom.
- Corridors are painted a pleasant light blue; some butterflies artwork made by the residents is on display.
- The residents' bedrooms varied in size, and they all look tidy and homely with lots of sentimental items such as photographs.
- Except for two rooms where residents are bedridden, most of the bedrooms have a sink and a toilet.
- Most bedrooms have a picture and the name of the residents on the door, as well as some more personal information about them to encourage communication with staff.

#### What has worked well?

- The communal area was spacious but with cosy features.
- · An area dedicated to "memory lane" with pictures of past activities.
- Most of the residents were out of their rooms and gathered in the communal area with their activity coordinator.
- Residents in bed were seen listening to music or radio while being cared for.

#### What could be improved?

• We found no potential areas for improvement.

#### Activities and Personal Involvement

#### Notes

- From Monday to Friday, there is a designated activity coordinator who has been described as "going above and beyond" especially during the holidays.
- · Activity schedules and upcoming event information is posted in communal areas
- Residents have access to a large garden which is accessible through the side entrance of the building and from the communal area.

#### What has worked well?

- Families said the residents used to enjoy a visiting children's choir.
- The staff are always attentive and ready to accommodate any request.
- The residents are being cared for in a dignified and respectful manner, which gives the residents' families and friends their peace of mind.

## What could be improved?

- When we asked family and friends if the house had enough activities, we received a range of responses.
- Some family and friends report that there is a lot going on in the house, while others suggested that the house could promote more reading, exercise and games like cards and bingo.
- A respondent also suggested that some residents should have access to therapy dogs.

## **Diet and Cultural Practices**

#### Notes

- The nursing home provides a menu updated frequently, daily if needed.
- The kitchen staff consists of a full-time chef and two kitchen assistants, one that is part-time.
- The kitchen appeared to be spotless and well organised.
- Some of the residents consume only pureed foods.
- In the communal area there is a fridge for family and friends where they can
- access food and drinks provided by the home.
- The home at the time of the visit had one Muslim lady and one Caribbean resident
- The Muslim resident receives care only from women employees, as requested.

## What has worked well?

- We observed colourful and well-presented dishes.
- There is a big whiteboard in the kitchen for recording various dietary restrictions, food consistency, (normal, minced, moist and puree), fluids, likes and dislikes, room allocation and residents' initials.
- We noticed a level 5 Minced and Moist card along with other information on the fridge and freezer.
- The chef is excellent at adapting meals to be culturally appropriate.
- The manager and chef have a good working relationship.

## What could be improved?

• Provision of allergy information in the communal area.

#### Feedback and Complaints

#### Notes

• Most residents live with dementia, so family and friends are important in providing feedback to the care home.

#### What has worked well?

- Residents meet with the manager every two to three months to voice any concerns, but many of them said they can do so at any time.
- Families praise the staff for their challenging work and for "spoiling" the residents.

#### What could be improved?

• We found no potential areas for improvement.

# **Staffing and Training**

#### Notes

- For their first two days at Jansondean, new employees are introduced to other employees and residents, and they must read and sign all policies and procedures.
- New staff must complete mandatory online courses.
- All staff have been trained as to how to raise a safeguarding alert.
- During their first official week, they work with another staff member to understand how the home is run.

#### What has worked well?

- Staff report feeling supported during their induction and receiving "all relevant information" about their roles.
- Breaks are said to be adequate.
- The staff felt very supported and listened to. An open-door policy in the house allows the team to raise any concerns with the manager.
- There is a positive relationship between staff and the manager.
- A family member shared with us that they were relieved to see that the home had stopped relying on agency staff and had instead invested the time and effort into training new employees who will be there continuously.
- The manager informed us that she is incredibly pleased with the chef and that she had never met anyone so skilled in her 30 years of working in care homes.

#### What could be improved?

• We found no potential areas for improvement.

# 4. Residents and Families Feedback

At the time of the visit, 25 people were in residence. We were told that the majority are female and of white British background, with one Muslim lady and one of Caribbean heritage.

# 4.1 Residents

As most residents live with dementia, we were only able to interact with two of them over the phone following our virtual visit.

As dementia affects most residents in the home, we were told that staff use pictures, leaflets and writing to communicate with residents. Where residents cannot communicate in English family members are asked to translate when needed. One of the staff members is fluent in Italian.

#### Activities and personal involvement

There was a positive atmosphere throughout the house and the residents appeared to be completely at ease in the presence of staff. The general atmosphere appeared to be positive and friendly. There was laughter in the background coming from the communal area.

#### **Selected Comments**

""Everyone here is so kind, I feel spoiled"

"Everyone I've met here is nice and kind - and I feel at home here"

"I know all the people - they're charming and kind and the whole place is lovely"

"The staff are wonderful; they are always willing to help and seem to understand exactly what I need"

"The staff are really good here - as far as I can see they all do their best"

#### COVID -19 and Visiting

During the peak of the pandemic, most family/friend interactions with residents occurred via telephone. Several residents had face-calls on mobile devices.

When restrictions were lifted family and friends expressed gratitude that they could see their loved ones at least once a day while taking all the necessary precautions. According to a family member, the pandemic has left their loved one feeling isolated. Another stated that the pandemic did not have any effect on their relative who is living with dementia.

#### **Selected Comments**

"I love that I can come and visit my relative here as I was unable to do so in the previous care home"

"I feel very safe coming here as everyone is required to take an antigen test upon arrival"

"Generally, family and friends are required to make a reservation prior to their visit; however, there are some who visit the home daily that don't need to book"

"The pandemic was handled very well by the staff"

#### 4.2 Families

According to the residents' families, the staff are extremely hard working and always available. Also, kindness, effective communication, and skilled staff are the most frequently praised aspects of the service by families.

However, some family members wish there were more physical activities to participate in and others suggested more sedentary or group activities such as board games and cards.

#### Selected Comments

"Helpful and friendly staff - my mother is well cared for"

"Staff are always calm and kind when dealing with my mum - respecting her wishes"

"To the best of my knowledge mum has been treated with dignity and respect. She has not complained about anything when we are alone with her"

"Every day is planned; mum was playing dominoes today when we arrived. She has never been one to join group activities, but they have got her joining in with the sing-a-longs"

## 4.3 Diet and Nutrition

Families are extremely pleased with the meals provided. The nursing home meets residents' various dietary needs.

**Selected Comments** 

"Food is very good"

"The chef is incredible, and the food is delicious"

#### 4.4 Feedback and Complaints

The families and friends of the residents do not report any significant issues with the facility.

There were no complaints about the handling of the pandemic and, in general, families felt that they received enough information about what was happening in the home by letter and phone.

During the height of the pandemic, inability to see a GP was the most common source of discontent.

There were several comments on the lack of activities for residents and a single criticism was levelled at the garden's lack of flowers.

**Selected Comments** 

"Dining area: laminate floor is coming up, possible trip hazard"

"GP has not been coming to the care home, trying to get audiologist to come in but hasn't happened yet, not face to face"

"The GP should be able to come into the care home, face to face"

# 5. Staff Feedback

Following the initial virtual visit we collected feedback from the manager, the clinical lead, and five care workers. We were able to collect these responses via different approaches such as zoom calls, telephone calls and online surveys.

## Referral

#### Notes

One or two referrals are received each month from a hospital, privately Or of patients at the local St. Christopher's hospice.

#### Notes

- All staff have been vaccinated; some have also received a booster jab.
- Due to the Covid-19 outbreak, the home experienced a brief period of staffing shortages.
- According to staff, the inability of residents to see their loved ones during the height of the pandemic posed the greatest challenge in the home.

#### What, according to the staff, has worked well?

- Assisting residents with phone calls helped them to cope with loneliness.
- Effective infection control measures have been put in place.
- Staff say they feel safe and that the home has enough Personal Protective Equipment (PPE).
- The manager encourages employees to test frequently for covid and to stay up to date on their vaccinations.

#### What could be improved?

• We found no potential areas for improvement.

# 6. Recommendations

Based on the analysis of all feedback obtained, Healthwatch Bromley would like to make the following recommendations.

## 6.1 General Accessibility

Although there is adequate parking space, there is no designated disabled parking.

6.1.1. We recommend that the residence provide a disabled parking space to allow disabled drivers or passengers to have more room to manoeuvre around their vehicle or assemble their wheelchair or other mobility equipment.

# 6.2 Diet

We noticed that the kitchenette where visitors and staff have access to food and beverages had no information about allergens.

6.2.1 Although food allergens are already listed on the food packaging, we suggest that the home provides an allergen information sheet, easily accessible if the packaging is discarded.

## 6.3 Activities and Personal Involvement

6.3.1 The home should regularly review the range of activities offered to meet the needs of all residents. The programme should be broad enough to include individual and group activities, physical and mental stimulation and, when possible, visits from outside groups such as choirs or musicians.

## 6.4 Response to comments by families

6.4.1 We suggest that a record be kept of any safety concerns raised by family members - such as a possible trip hazard - and a note made of remedial action taken.

# 7. Glossary of Terms

CQC	Care Quality Commission
LFT	Lateral Flow Test
LGBTQ	Lesbian, Gay, Bisexual, Transgender and Queer
PPE	Personal Protective Equipment

# 8. Distribution and Comment

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

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

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Community House South Street Bromley BR1 1RH Healthwatch was established in 2013 in accordance with the Health and Social Care Act 2012.

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

# Report & Recommendation Response Form

Report sent to	
	Charlotte Bradford
Date sent	7/7/22
Report title	Jansondean nursing home
	Response (If there is a nil response, please provide an explanation for this within the statutory 20 days)
Date of response provided	20/7/22
Response: 1. Please outline your general response to the report and what you	I found the report fair
are currently doing to address some of the issues identified.	
<ol> <li>Please outline what actions you will undertake as a result of the report's findings and recommendations</li> </ol>	6.1.1. We recommend that the residence provide a disabled parking space to allow disabled drivers or passengers to have more room to manoeuvre around their vehicle or assemble their wheelchair or other mobility equipment
	It is noted and we will look into getting a disabled bay.
	1 Although food allergens are already listed on the food packaging, we suggest that the home provides an allergen information sheet, easily accessible if the packaging is discarded.
	This has been completed
	6.3.1 The home should regularly review the range of activities offered to meet the needs of all residents. The programme should be broad enough to include individual and group activities, physical and mental stimulation and, when possible, visits from outside groups such as choirs or musicians.

	It is difficult to have outside groups due to COVID, but where possible this will be completed. We review activities every month in our residents' meetings. We do group activities and 1:1 activity already 6.4.1 We suggest that a record be kept of any safety concerns raised by family members - such as a possible trip hazard - and a note made of remedial action taken. This is already done, we complete a monthly audit
<ol> <li>Please outline what actions you will undertake as a result of the report's findings and recommendations</li> </ol>	Please see above
<ol> <li>Please outline what actions you will undertake as a result of the report's findings and recommendations</li> </ol>	Please see above
Signed	S M Hill
Name	Susan Hill
Position	Manager