

Enter & View Report

Sundridge Court Nursing Home, 30th January 2025



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Visit Details	
Service Visited	Sundridge Court Nursing Home
Registered Manager	Theresa Afodume
Date & Time of Visit	Thursday 30 th January 2025, 11:00 – 15:00
Status of Visit	Announced
Authorised Representatives	Takudzwa Chifamba, Orla Penruddocke, Margaret Kalu
Lead Representative	Graham Powell

1. Visit Background

1.1. What is Enter & View?

Part of the local Healthwatch programme is to undertake and report on 'Enter & View' (E&V) visits.

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

E&V visits can happen if people tell us there is a problem with a service but can also be made 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 gain 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 is working well, and makes recommendations on what could work better. Service providers are asked to respond to our recommendations and their responses are added to the reports before publication. All reports are available to view on our website.

1.1.2 Safeguarding

E&V visits are not intended to identify specific safeguarding issues. If safeguarding concerns arise during a visit they are reported in accordance with safeguarding policies. If at any time an AR observes anything about which they feel uncomfortable they inform their lead, who will inform the service manager, ending the visit.

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 during this specific visit. It is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed on the day.

1.3 Acknowledgements

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

2. Information About the Service

2. Sundridge Court Nursing Home

Sundridge Court Nursing Home offers residential, nursing, and dementia care for up to 30 elderly residents. Previously run by Caring Homes Healthcare Group Ltd, it is now owned by Aria Care.

The home provides a range of services, including trial stays, short-term respite care, convalescent support, and long-term care for individuals and couples.

2.2 Ratings

The CQC is the independent regulator of health and adult social care in England. It aims to ensure that health and social care services provide people with safe, effective, compassionate, high-quality care and encourages services to improve.

At its latest inspection in July 2023, the CQC rated Sundridge Court Nursing Home overall as “Good”.

2.3 Residents

The home is CQC registered to care for adults over 65 years. During our visit, 26 residents were living in the home, with two in hospital. The majority of residents are living with Long Term Conditions and 18 are diagnosed with dementia.

2.4 Staff

The home employs 34 staff members, of whom 32 are permanent full-time and two are part-time bank staff*. The home occasionally employs agency staff.

*A bank contract with a care home is a zero-hours contract that allows a healthcare professional to work there when they are available. Bank staff, also known as agency staff, are skilled professionals who provide short-term coverage when needed.

3. Summary of Findings

The E&V visit was carried out on Thursday 30th January 2025; four E&V ARs were present. It was announced and planned in partnership with the home. In preparation, we shared with the manager a poster, announcing the E&V, to display in communal areas, and questionnaires explaining the purpose of the visit in further detail and seeking feedback.

3.1 Entry and General Accessibility

Notes

The home is situated away from the main road, resulting in minimal traffic noise. The outdoor area includes visitors parking.

The building features a single main entrance, a double door leading to a reception area. A lift is available, designed to accommodate a wheelchair user and one additional person.

What works well?

- Parking space for visitors
- Visitors sign in and out
- Wheelchair friendly lift available
- Induction loop

- Easy access by public transport
- Clear signage outside the home
- Reception area to welcome visitors.

What could be improved?

- No designated ambulance bay.

3.2 General Environment

Notes

The home provides a warm and inviting atmosphere, with gentle lighting that creates a calming environment. The interior features green carpet and neutral-coloured walls, contributing to the tranquil setting.

The corridors are spacious, allowing ample room for wheelchair movement. They are decorated with framed pictures, and white handrails line the walls for added support. The doors, including those for lifts, residents' rooms and storage, are clearly distinguishable from the surrounding walls.

The lounge area is spacious and inviting, furnished with comfortable armchairs arranged around the room, encouraging social interaction. There is also a conservatory that serves as a versatile space for activities and special occasions, such as birthday celebrations.

The home includes a well-lit and spacious dining area, thoughtfully arranged with tables of various sizes to create a comfortable and inviting space where residents can dine and socialise.

At the back of the building, a patio with tables, chairs, and a gazebo overlook a large, partially lawned garden. Paved walkways surround the garden which features perennial plants, creating a pleasant outdoor space for residents to enjoy.

Residents' rooms vary in size. Some rooms come with ensuite bathrooms; others are equipped with a wash basin.

Residents are encouraged to bring their own furniture, allowing them to personalise their rooms and create a space reflective of their individual tastes.

What works well?

- The bedrooms are appropriately equipped and appeared well maintained
- Each bedroom is equipped with an alarm button located by the bed side
- The lounge seating is positioned for residents to face each other, fostering a warm and inviting environment to promote social engagement.

What could be improved?

- More dementia friendly clocks and calendars in communal areas
- The fabric roof of the gazebo has deteriorated and needs replacement
- A bathroom on the first floor was being used as storage facilities during the E&V.

3.3 Safety and visiting

Notes

At the time of our visit there were no visiting restrictions. We observed clear fire exit signs throughout the home, an evacuation plan, and a visible fire alarm zone layout in the corridors.

The home has no restrictions on visiting times for relatives, encouraging them to visit their loved ones at a time that suits them. Relatives are notified if a resident's health deteriorates and are welcome to stay overnight if needed. They are also informed that the front door is locked after 20:30 in accordance with the home's health and safety policy.

What works well?

- Clear fire exit signs
- Fire extinguishers are visible
- Fire emergency procedure displayed
- Hand sanitisers available throughout the home
- Staff wear ID badges.

What could be improved?

- Some paving in the garden is uneven

- No security cameras in the building.

3.4 Activities and Personal Involvement

Notes

During our visit, some residents were gathered in the main lounge socialising or spending time with visitors, while others preferred to stay in their bedrooms. Some residents were taking part in a quiz in the activity room.

The manager emphasised the team's dedication to offering person-centred activities, acknowledging that the varied needs of residents mean some activities may not be suitable for everyone.

We spoke with the wellbeing coordinator during our visit – they showed us the daily, weekly and monthly activity calendar. Activities vary daily and include chair exercises, arts and crafts, puzzles, bingo, gardening, sing along, dancing, baking and day trips.

Aria Care is currently looking into providing a minibus as the home's previous one broke down. Their driver also had a career change and did not wish to continue this service.

What works well?

- Range of activities to engage residents and keep them active
- Weekly activity schedule posted on a board.

What could be improved?

- We have found no areas for improvement.

3.5 Diet and Cultural Practices

Notes

A menu is placed on each table in the dining room, allowing residents to select their preferred meals.

The home provides a variety of meals customised to meet the specific dietary needs of residents, with preferences and requirements determined during the admission process.

Residents at increased risk of dehydration, whether due to infection or reluctance to drink, are monitored using fluid charts on Person Centred Software (PCS) which tracks their intake and indicates the additional fluids required.

The Church of England and a Reverend Father (priest) are in attendance twice a week and for communion.

What works well?

- Residents can choose what they would like to eat from the menu
- A variety of food is offered (e.g. beef stew, roasted salmon fillet, chicken curry, jacket potatoes served with prawns/tuna mayonnaise, Cumberland sausages with cabbage etc.)

The home can modify meal options to suit each resident's dietary needs.

What could be improved?

- We found no areas for improvement.

*PCS is a comprehensive residential care planning software to record, evidence and manage care in care homes.

3.6 Feedback and Complaints

Notes

Management has an open-door policy. Residents, friends and family are welcome anytime to discuss concerns. Feedback from friends and family is collected through emails, feedback forms, and the home's Facebook page. A poster on the main notice board features a QR code encouraging people to leave a review of the home.

What works well?

- A poster with a QR code posted on the notice board, encouraging residents or residents' family to share their reviews on the home.

What could be improved?

- There was no comment box seen in the home.

4. Residents' and Families' Feedback

Feedback was gathered from seven residents and three family members, focusing on satisfaction levels, diet, activities, personal development, access to healthcare, socialisation, safety, and communication with the home. Two family members expressed a high level of satisfaction with the services at Sundridge Court. They also expressed confidence in the quality of personal care provided, such as assistance with washing, hairdressing, and chiropody.

Six family members stated that they are kept well-informed about any concerns regarding their loved ones, including falls, health issues, and future care plans. When asked about resident safety, particularly regarding visitor ID checks and clear evacuation procedures, all relatives responded positively in the questionnaire.

One family member expressed a level of dissatisfaction with the services at the home, noting that their relative does not have enough food and liquids and isn't warm enough. They felt unsure if their relative is safe here and if they are clear of evacuation plans in an emergency. When asked if they felt that they were kept informed regarding concerns about their relative e.g. falls, ill-health and future care plans, they said sometimes. They are unsure if they are satisfied with the level of support their relative receives from local health and care services, nor if they have any say of the type of activities, choice of a TV channel etc.

Residents shared that they feel supported and encouraged to make their own decisions regarding mealtimes and social activities, promoting a sense of independence. Many also noted that they feel warm, safe, and comfortable in their surroundings. All residents who completed the questionnaire agreed that they are treated with dignity and respect, and that their concerns and questions are acknowledged and addressed.

What works well?

- Residents feel supported in making their own choices, fostering independence.
- Most family members feel well-informed and confident about personal care and safety measures.
- Residents feel treated with dignity and respect, with concerns acknowledged.

What could be improved:

- Concerns from one family member about food and hydration, with uncertainty over assistance with eating and drinking.
- Concerns from one family member regarding communication with the home
- Uncertainty from one family member around evacuation procedures, emergency arrangements, and input in daily activities.

Family and Friends' Selected Comments

"Made very welcome."

"We are happy with the care home, visiting times are flexible."

"My brother is well cared for but is an antisocial man."

Residents' Selected Comments

"Sundridge offers good care, and my privacy is well kept."

"Staff are good to talk to and they always make me feel listened to."

"I feel very happy with all the staff; they are always willing to help and listen to my concern."

"Staff respect all my choices, and my privacy is well kept."

5. Staff & Management Feedback

We received feedback forms from 17 staff members and one from management. During our observation, we noted that all staff were interacting with the residents in a kind and respectful manner.

5.1 Staffing

Notes

Of the seventeen staff members with whom we spoke, 11 have been there for 4+ years, four for 1-3 years, and one for less than 12 months.

Training

All staff must complete mandatory training in person-centred care, moving and handling, safeguarding, fire safety, health and safety, infection control, General Data Protection Regulation (GDPR), equality and diversity, food hygiene, and first aid.

All staff who completed the questionnaire were asked about their interest in additional training opportunities. Ten staff members indicated there were no further training programmes they wished to pursue; three expressed an interest in a National Vocational Qualification (NVQ) and ongoing training, and four were unsure about any additional training they might need.

Breaks

All staff members stated that they receive adequate breaks during their shifts and are satisfied with the management of handovers. They also appreciated the opportunities to support residents.

Management

Staff members share a strong, positive relationship with management, all those with whom we spoke during the visit indicated that they feel their concerns and questions are acknowledged.

What works well?

- Staff and management cultivate a strong and collaborative relationship.

What could be improved:

- Three staff members said they would be interested in further training and four were unsure if there were any additional training they would like.

5.2 Selected Comments from Staff

"My moving and handling training was very helpful in my service."

"Residents are treated with dignity and respect."

"Residents are ???relatives are happy with care provided at Sundridge."

"Sundridge provides good quality care to all residents"

5.3 Management

Notes

The manager is pleased with the quality of service provided to the residents.

Diet

Each resident's needs are evaluated upon admission and reassessed as needed. Management is confident that the home satisfies residents' dietary requirements, offering a wide range of food choices from the menu.

Quality of care

The home ensures a comfortable temperature, with care staff monitoring residents at night and supplying additional blankets when required. Laundry services are handled on-site.

Safety

The manager informed us that all staff members wear a uniform. We noted that all staff wear identification (ID) badges.

All staff are knowledgeable about the evacuation plan, including the steps for assisting residents who may require help during an evacuation.

Activities

Residents are actively encouraged to interact and connect with each other. Along with a range of activities within the home, they also take part in regular outings. Examples of outings include:

- The Lavander Café
- The Crown Pub for lunches
- Sundridge Park Golf Club

The home is still awaiting further advice from Head Office about having a mini so they can arrange better travel options for residents.

There are no residents who speak English as an additional language (EAL). The home is supportive of gender and sexual diversity (GSD).

The home celebrates a variety of events, including Valentine's Day, birthdays, and Shrove Tuesday (Pancake Day).

Community Services

The Salvation Army band has visited and performed for the residents, and the Mayor attended a party at the home last year.

Management is satisfied with the level of support residents receive from other local health and care services. The GP comes every week, and when needed.

Staffing

Management expressed that they are currently pleased with the staffing levels in the home.

6. Recommendations

Healthwatch Bromley would like to thank Sundridge Court for their support in arranging our E&V visit. Based on the analysis of feedback obtained, we have made the following recommendations which prioritise safety and wellbeing.

6.1 Entry and general accessibility

6.1.1. No designated ambulance bay.

We recommend designating a specific area for ambulance access to allow for quick and efficient entry and exit for emergency services, improving safety and accessibility in urgent situations.

6.2 General Environment

6.2.1. More dementia friendly clocks and calendars in communal areas.

We recommend installing easy read dementia-friendly clocks and calendars throughout the home to help residents better manage time and daily activities, using large fonts, clear visuals, and contrasting colours to enhance readability.

6.2.2. The fabric roof of the gazebo has deteriorated and needs replacement.

We recommend that the fabric roof of the gazebo be replaced to ensure it remains functional and safe for use.

6.2.2. A bathroom on the first floor was being used as storage facilities.

We recommend that the bathroom on the first floor should be restored to its intended purpose for residents' use, and alternative storage solutions should be implemented.

6.3 Safety and visiting

6.3.1. Some paving in the garden is uneven.

We recommend that the uneven paving in the garden be repaired to remove potential safety hazards for residents and visitors.

6.3.2. No security cameras in the building.

We recommend that the installation of security cameras in the building should be considered to enhance safety and provide increased security for residents and staff.

6.4 Staff

6.4.1. Three staff members said they would be interested in further training, and four were unsure about any additional training they might need.

We recommend offering staff members the opportunity to explore further training options more regularly, to enhance their skills and confidence. A survey could help identify areas of interest for additional training, supporting all staff in their professional development.

6.5 Friends and family

6.5.1. Concerns from one family member about food and hydration, with uncertainty over assistance with eating and drinking.

We recommend conducting regular assessments to ensure residents receive adequate food and hydration. Staff should proactively assist anyone needing help with eating and drinking and use the existing software to document food and fluid intake for better monitoring.

6.5.2 Concerns from one family member regarding communication with the home.

We recommend establishing clearer, more consistent communication channels to update families on health concerns, care plans, and emergency arrangements. Regular meetings or digital updates could help address uncertainties.

6.5.3 Uncertainty from one family member around evacuation procedures, emergency arrangements, and input in daily activities.

We recommend providing clear guidance to residents and families on evacuation procedures and emergency protocols. Offer refresher sessions or printed guides to enable everyone to understand safety measures and be clear how residents can choose and be involved in daily activities.

6.6 Feedback and complaints

6.6.1. There was no comment box seen in the home.

We recommend installing a clearly visible comment box within the home to encourage residents, family members and staff to share feedback anonymously. Regularly review and address suggestions to enhance communication and service improvements.

8. Glossary of Terms

AR	Authorised Representative
CQC	Care Quality Commission
EAL	English as Additional Language
E&V	Enter and View
GDPR	General Data Protection Regulation
GSD	Gender and Sexual Diversity
ID	Identification
NVQ	National Vocational Qualification
PCS	Person Centred Software

Front cover photo by Cottonbro Studio

9. Distribution and Comment

This report is available to the public and 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 of health and care services, please contact us.

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Telephone: 020 388 60752

Email: info@healthwatchbromley.co.uk

Website: www.healthwatchbromley.co.uk



Report & Recommendation Response Form

Report sent to	Theresa Afodume - Home Manager
Date sent	28/04/2025
Report title	Response for questions.

Response

(If there is a nil response please provide an explanation for this within the statutory 20 days)

Date of response provided	
Please outline your general response to the report including <u>what you are currently doing to address</u> some of the issues identified.	

Please outline what **actions** and/or improvements you will undertake **as a result of the report's findings and recommendations**. If not applicable, please state this and provide a brief explanation of the reasons.

<p>Recommendation 1 6.1.1. No designated ambulance bay. <i>We recommend designating a specific area for ambulance access to allow for quick and efficient entry and exit for emergency services, improving safety and accessibility in urgent situations.</i></p>	<p>An ambulance bay has now been provided and outlined at the front of the building on the driveway and is clearly marked.</p>
<p>6.2.1. More dementia friendly clocks and calendars in communal areas.</p>	<p>This has been noted and requested from our head office.</p>

We recommend installing easy read dementia-friendly clocks and calendars throughout the home to help residents better manage time and daily activities, using large fonts, clear visuals, and contrasting colours to enhance readability.

6.2.2. The fabric roof of the gazebo has deteriorated and needs replacement.

We recommend that the fabric roof of the gazebo be replaced to ensure it remains functional and safe for use.

New Gazebo roof has been replaced and is safe

6.2.2. A bathroom on the first floor was being used as storage facilities.

We recommend that the bathroom on the first floor should be restored to its intended purpose for residents' use, and alternative storage solutions should be implemented.

Health and safety team attended Sundridge Court and have made arrangements to ensure bathrooms are not used as a storage room for the hoists as a designated place has now been appointed. This frees up a lot more space.

6.3.1. Some paving in the garden is uneven.

We recommend that the uneven paving in the garden be repaired to remove potential safety hazards for residents and visitors.

This has been noted to our head office who are currently sourcing a contractor to come and establish the works to be carried out to ensure safety.

6.3.2. No security cameras in the building.

Informed Line manager and our head office for the recommendation of security cameras. Head office have informed me they will look in to the possibility of security cameras being installed.

We recommend that the installation of security cameras in the building should be considered to enhance safety and provide increased security for residents and staff.

6.4.1. Three staff members said they would be interested in further training, and four were unsure about any additional training they might need.

We recommend offering staff members the opportunity to explore further training options more regularly, to enhance their skills and confidence. A survey could help identify areas of interest for additional training, supporting all staff in their professional development.

6.5.1. Concerns from one family member about food and hydration, with uncertainty over assistance with eating and drinking.


We recommend conducting regular assessments to ensure residents receive adequate food and hydration. Staff should proactively assist anyone needing help with eating and drinking and use the existing software to document food and fluid intake for better monitoring.

6.5.2 Concerns from one family member regarding communication with the home.

We are currently carrying out a survey to the staff for what we can provide for them, we currently have 4 members of staff doing their NVQ Level 2, 3 and 5. Currently our Administrator is completing Business Administration Level 3.

Our residents are offered a wide variety of food and drink to maintain their nutrition and hydration, and all staff are trained for assisting with meal times and offering fluids.

We offer surgery hours every Wednesday at 15:00pm and the managers always happy to communicate with relatives regarding any concerns that they have with their family

<p><i>We recommend establishing clearer, more consistent communication channels to update families on health concerns, care plans, and emergency arrangements. Regular meetings or digital updates could help address uncertainties.</i></p>	<p>members and the phone lines and email are always open to receive any concerns</p>
<p>6.5.3 Uncertainty from one family member around evacuation procedures, emergency arrangements, and input in daily activities.</p> <p><i>We recommend providing clear guidance to residents and families on evacuation procedures and emergency protocols. Offer refresher sessions or printed guides to enable everyone to understand safety measures and be clear how residents can choose and be involved in daily activities.</i></p>	<p>We have a business continuity plan which is available for all relatives to see, and this will allow them to understand all emergency arrangements if ever needed, Evacuation procedures are carried out unannounced for staff to understand the correct procedure. We have fire drill every week to ensure every staff has a clear understanding in the event of a Fire. There are multiple weekly and daily planners for activities around the home where relatives have clear access to see what is happening on a day-to-day basis, when there are upcoming events the wellbeing co-ordinator sends out email invitations and reminders to allow all relatives the chance to come to Sundridge Court to join in with the events.</p>
<p>6.6.1. There was no comment box seen in the home.</p> <p><i>We recommend installing a clearly visible comment box within the home to encourage residents, family members and staff to share feedback anonymously. Regularly review and address suggestions to enhance communication and service improvements.</i></p>	<p>In the reception area there is a comment book next to the sign in book for visitors, which allows all visitors to be able to express any gratitude or concerns and this is checked daily.</p>
<p>Signed</p>	
<p>Name</p>	<p>Theresa Afodume</p>
<p>Position</p>	<p>Sundridge Court Home Manager</p>