

# Enter & View Report

Oak Lodge Care Home, 4<sup>th</sup> November 2025



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Visit Details	
<b>Service Visited</b>	Oak Lodge Care Home
<b>Registered Manager</b>	Zainab Kamara
<b>Date &amp; Time of Visit</b>	Tuesday 4 <sup>th</sup> November 2025, 11:00 – 14:30
<b>Status of Visit</b>	Announced
<b>Authorised Representatives</b>	Margaret Kalu, Graham Powell
<b>Lead Representative</b>	Reedinah Johnson

## 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. 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**

## **2.1 Oak Lodge Care home**

Oak Lodge Care home is situated in Beckenham, Bromley. With a capacity of 22 beds, the home is split across two floors and provides a range of respite care, long-term residential care and residential dementia care. It is privately owned by Mr Rajanikanth Selvanandan and run by Oak Lodge Care Home Ltd.

## **2.2 Ratings**

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

The service was registered by CQC on 17<sup>th</sup> November 2023. The CQC has not yet inspected this service. However, the ratings inherited from the last inspection (August 2022) with the previous provider have been published – with areas that require improvement or are 'inadequate'.

## **2.3 Residents**

During our visit, Oak Lodge Care Home had 18 residents, all aged 65+. Some were living with dementia, while others had dementia alongside additional health needs.

## **2.4 Staff**

The home employs 16 care staff (including two bank staff), an activities co-ordinator, an administrator, two kitchen staff, two domestic staff, and one maintenance person.

# **3. Summary of Findings**

The E&V visit was carried out on Tuesday 4<sup>th</sup> November by three E&V ARs. 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 building is set back from the main road, providing a quiet environment away from traffic noise. There is ample parking available at the front of the property, with additional free off-street parking nearby.

### **What works well?**

- Easily accessible by public transport
- On-site parking
- Off street parking
- Wheelchair friendly and lifts available
- Doorbell by the front door.

## **What could be improved?**

- There is no signage outside the building to indicate the name of the home, nor is there any designated ambulance parking.

## **3.2 General Environment**

### **Notes**

On entering the home, visitors come into a small waiting area furnished with a table and armchair. A visitor sign-in book is placed on the table along with a small calendar.

One display board presents the home's newsletter, photographs from past events, and notices about upcoming activities. It also features a section titled "You said, we did," which highlights how resident and family feedback has been acted on.

A second board provides practical information, including a floor map, the fire alarm testing schedule, and the fire evacuation procedure. A third board contains key documents and notices such as the whistle blowing policy, safeguarding information, mealtime arrangements, the Healthwatch Bromley Enter and View poster, and the complaints procedure.

A comment box is situated in the main entrance hall, offering residents and visitors a formal way to share feedback or suggestions. There are also pre-paid envelopes available for those wishing to review the home on [carehome.co.uk](http://carehome.co.uk). A donation box is also evident – the manager explained that proceeds contribute to residents' care and activities.

The walls are painted in light grey, with white doors and light brown flooring. No handrails were in place on the ground floor, although handrails were provided on the upper floor.

The home is arranged across two floors; three bedrooms are located on the ground floor and the remaining 19 on the first floor. Residents' rooms vary in size, are numbered and display each resident's name and photograph on the door. Two residents have their own bedroom key, and the home keeps a spare.

Every room contains a washbasin, two bedrooms include ensuites. Furniture is provided by the home, although residents are welcome to bring their own items if they prefer.

The home has one bathroom on each floor, both equipped with an alarm cord positioned beside the toilet. A QR code is displayed in every bedroom for care recording, and a call bell is located by the bed.

The dining room contains tables and comfortable chairs, with a television mounted above the fireplace. There is also a lounge area used for socialising and activities.

In the lounge is a small screen that shows the location of any alarm when activated. When an alarm is triggered in a bedroom or bathroom, the screen displays where it has been raised. There is a small kitchen to the side, equipped with a sink and kettle, and a trolley stocked with biscuits, saucers, water, and juice.

The home has a large garden; this was being renovated during our visit. There is a patio area, with table and chairs, which serves as the designated smoking area, and a bench for residents' use. Residents can only access the garden when accompanied by staff.

The bathrooms are tidy, featuring toilet seats and light switches in contrasting colours to the walls for visibility. Each bathroom is equipped with a bath and shower, toilet support for residents with mobility needs. Emergency alarm buttons are conveniently located near the toilets to enhance safety.

The quiet room, used for visitors and activities such as baking, is furnished with comfortable armchairs and a large table and is located in a part of the building accessible by keypad only.

### **What works well?**

- Easily accessible, suitably adapted bathrooms equipped with emergency buttons
- Clear, well positioned signage throughout the home

- Comment box available near main entrance
- Handrails available in upstairs corridor.

### **What could be improved?**

- No dementia friendly clocks or calendars displayed
- The quiet room lacks a homely, welcoming atmosphere
- During the visit, the communal dining area was very noisy, with the radio and television both on
- The television is positioned high on the wall, making it difficult for a resident to view comfortably from a nearby armchair.

## **3.3 Safety and visiting**

### **Notes**

At the time of our visit, there were no restrictions on visiting. Fire exit signs and fire extinguishers are easily visible. Emergency evacuation sledges are positioned at the top of all staircases.

Visiting times work around the home's protected mealtimes so that the residents are not disturbed during their meals.

### **What works well?**

- Fire alarms tested weekly
- Security latches on all windows
- Emergency alarm buttons reachable from beds
- Access doors secured with keypad entry systems
- Corridors and lifts wide enough for wheelchair access.

### **What could be improved?**

- No alarm in the toilet of one ensuite
- Floor lamp in the lounge – tripping hazard
- Hand dryer socket in upstairs bathroom close to the shower and sink
- Furniture placed by an emergency exit in the lounge
- No handrails in downstairs corridor
- Wardrobe in one resident's room leaning forward.

## 3.4 Activities and Personal Involvement

### Notes

The day's activity schedule is written on a notice board in the main lounge. Activities are run by an activity co-ordinator with the assistance of carers. During our visit, management said that they have printed pictures of past activities and plan to display them in the home. Pictures of a BBQ party were displayed in the main entrance hall.

Activities vary daily and include:

- Crafts
- Exercise class
- Baking
- Painting and colouring
- Reading and discussion of recent events
- TV (selected programmes)

### What works well?

- Activities schedule clearly written on a white board
- Some past event photos displayed.

### What could be improved?

- A wider range of activities would engage residents and keep them active.

## 3.5 Diet and Cultural Practices

### Notes

The menu is tailored to residents' preferences and dietary needs, with the catering team offering a variety of meal options. Management stated that dietary requirements are worked out during initial assessment, along with help of an external dietitian. Some residents, supported by the dietitian, have a monthly weight measurement by the home.

The weekly menu is displayed on the main notice board. The home has set a protected mealtime to avoid residents being disturbed during their meals. Mealtimes are scheduled as follows: breakfast 08:30 – 09:30, lunch 12:30 – 13:30, and supper 17:00 – 18:00.

Tea, coffee and a selection of juices are available throughout the day. Evening snacks and sandwiches are available on request.

Assistance is provided to residents who need support with eating and drinking.

### **What works well?**

- Residents choose what they would like to eat every day
- Picture based menu
- Daily menu displayed on each table
- Variety of food on menu (e.g. lamb stew, omelette, soup, cheese and onion pasty, chips and beans, fried rice and broccoli, corned beef, assorted sandwiches)
- Selection of drinks available throughout the day
- Drinks available in residents' rooms.

### **What could be improved?**

- We found no areas for improvement.

## **3.6 Feedback and Complaints**

### **Notes**

Management highlighted their open-door policy, which means that the home encourages residents, relatives, and staff to speak to management about any issues or suggestion before it becomes a complaint. There is a comment box, and a notice inviting people to write a review on [www.carehome.co.uk](http://www.carehome.co.uk), along with free-post envelopes. The home conducts a residents' and families' meeting every three months, discussing different topics such as activities, food choices, and care received.

### **What works well?**

- Comment box in the home
- A "Review Us" via carehome.co.uk poster at main entrance
- A poster on open-door policy by main entrance.

### **What could be improved?**

- We found no areas for improvement.

## 4. Residents' and Families' Feedback

We received feedback from 11 residents and nine family members. We asked about different parts of their experience, such as how satisfied they felt with the care provided, food on offer, activities and opportunities for personal development, access to healthcare, social opportunities available, their sense of safety, and the quality of communication with the home.

Overall, feedback was positive, with residents and family members expressing satisfaction with the care provided at Oak Lodge Care Home. Most residents said they felt safe in the home, two were unsure.

Residents were asked if they have any say on the type of activities provided. Five answered no, four answered yes and one said unsure.

Family members gave mixed feedback about the level of support their loved ones receive from local health and care services, including GPs, dentists, and pharmacies. When asked if they are satisfied with this, some answered yes, some unsure. All felt confident that their relative or friend is receiving good personal care, such as assistance with washing, hairdressing, and chiropody.

When family members were asked if they know what arrangements are for their relatives in medical emergencies, three answered yes, four no and two unsure. All family members stated that they are regularly updated about any concerns involving residents, including incidents such as falls, changes in health, or upcoming care plans.

### **What works well?**

- All family members are regularly updated about any concerns involving their loved ones
- Residents are content with the care provided.

### **What could be improved?**

- Some residents are unsure about their safety in the home
- Some residents feel they do not have a say on the type of activities provided
- Some family members do not know what the arrangements are for their relatives in medical emergencies.

## Family and Friends' Selected Comments

*"If I have any questions about dad they are happy to help."*

*"My mother is kept clean and is well looked after, all her needs are met."*

*"Overall, I'm very satisfied with the level of care mum receives, she is well taken care of, loved, and respected by the rest of the residents."*

*"I am very happy, staff are kind, calm, patient and respectful. The environment in the home is warm and friendly, and everyone appears cared for. I think the communication from the home is fantastic and I have no concern about mum's care."*

*"I am happy with how my mum is treated. I am listened to when I request anything for my mum."*

## Residents' Selected Comments

*"The services here are pretty good, they listen and if I have any worries or concern, they deal with it well and they always welcome the family into the home."*

*"I feel safe."*

## 5. Staff & Management Feedback

We received feedback forms from 14 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 14 staff members we spoke to, two had been there for over a year and 12 had been working at the home for less than 12 months.

#### Training

All new staff have an induction programme, two days induction, three days shadowing and six months' probation. All staff have supervision meetings every 6-8 weeks, and appraisal.

Training is delivered through a combination of face-to-face sessions and online modules. Mandatory annual refresher courses, such as manual handling and first aid, are required to maintain core competencies. Additional training is provided based on staff interests and identified needs, helping to promote their continued professional development.

All staff completing the questionnaire were asked about their interest in additional training opportunities; two would like to receive additional training in medication competency, and two said they were unsure about further training.

#### Breaks

Shifts are of six, eight or 12 hours. Staff reported that they are provided with adequate breaks throughout their shifts. They were satisfied with the handover process and felt they have appropriate opportunities and resources to deliver effective support to residents.

#### Management

Staff who have raised a concern with a member of management stated that they were satisfied with how the issue was dealt with. All staff confirmed that they feel heard and supported when raising concerns or asking questions.

#### What works well?

Staff are satisfied with the opportunity they have to support residents.

### **What could be improved?**

Two staff members said they would like to receive more training in medication competency; two said they were unsure about further training.

### **5.2 Selected Comments from Staff**

*"Residents are treated exceptionally good with dignity and respect. They are happy and comfortable with us."*

*"Our first priority is always to make our residents happy and healthy."*

*"Services are homely."*

*"New management working well."*

### **5.3 Management**

#### **Notes**

The registered manager expressed confidence in the quality of care and support delivered to residents. The home has been running for 18 months, and the manager observed that "it has been a learning curve".

#### **Diet**

A needs assessment is completed for each resident on admission, and any required adjustments are made individually. The home supports specific dietary requirements, including the provision of gluten free options.

A set weekly menu is in place; the daily menu is placed on each table to avoid confusion for residents. Alternative options can be provided at mealtimes. Menus are regularly reviewed and talked through during meetings with residents and their families. Residents can choose where they would like to have their meals, and care staff provide support, whether they prefer to eat in the communal dining room or in their own bedrooms.

Drinks are available in residents' room as well as in the lounge. Residents are encouraged to increase their fluid intakes during heatwaves.

## **Quality of care**

During the winter, extra blankets are provided. The home has a cooling system in the lounge for warmer weather, and fans are provided for each room.

Residents choose between shower or bath, or according to their preference in their care plan.

A hairdresser comes fortnightly, paid for by relatives and can be booked by the home or relative.

Laundry services are done within the home. In the laundry room, each resident has a box labelled with their name. Mobile hairdressing and chiropody are arranged.

## **Safety**

The manager reported that all staff members wear uniforms and identification badges. Staff are fully informed about the evacuation procedures and understand the level of support required for residents who may need assistance in an emergency.

The manager informed us that staff, residents and visitors have the knowledge and skills necessary to address safeguarding concerns. All are aware of how to raise a complaint.

## **Activities**

Residents are encouraged to mix and socialise. There are no residents with English as Additional Language (EAL) and there has not yet been a need to support a resident with diverse cultural or sexual identity.

Residents can contact religious support if they wish. A local church choir comes every Thursday, as well as a pastor. A service is streamed on Sundays.

## **Community Services**

The manager said they are satisfied with the level of support residents receive from other local health and care services. A GP from Bromleag Care Practice calls twice a month, or when needed. A private podiatrist calls every eight weeks, funded by relatives. Pharmacy prescriptions are delivered or picked up if urgent.

## **COVID-19 infection prevention measures**

The manager stated that general infection prevention protocols are still in place.

## **Staff**

All staff have supervision meetings every 6-8 weeks, and appraisal. The manager is currently satisfied with the level of staffing. Staff to resident ratios are 1:5. The home has two bank staff and does not employ agency staff.

## **6. Recommendations**

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

### **6.1 Entry and General Access**

6.1.1. There is no signage outside the building to indicate the name of the home.

*We recommend installing clear external signage to help visitors identify the home easily and give a more welcoming first impression.*

6.1.2 No designated ambulance parking.

*We recommend establishing a clearly marked ambulance parking area to support timely access for emergency responders and enhance overall safety for residents.*

### **6.2 General Environment**

6.2.1. No dementia friendly clocks and calendar around the home.

*We recommend placing dementia friendly clocks and calendars in prominent communal areas to support residents with orientation and create a more enabling environment for those with cognitive needs.*

6.2.2 The quiet room lacks a homely and welcoming atmosphere.

*We recommend enhancing the quiet room with softer furnishings, warmer décor, and personal touches to create a more comfortable and inviting space for residents and visitors.*

6.2.3 During the visit, the communal dining area was very noisy, with the radio and television both on loudly.

*We recommend managing background noise by adjusting the volume of the radio and television or scheduling quiet periods during mealtimes to create a more comfortable dining environment for residents.*

6.2.4 During the visit, the television was positioned very high, making it difficult for a resident to view comfortably from a nearby armchair.

*We recommend repositioning the television at a height suitable for seated viewers, to enable all residents to watch comfortably from the lounge and dining room seating.*

### **6.3 Safety and Visiting**

6.3.1. No alarm in the toilet of one ensuite.

*We recommend installing an alarm in the ensuite toilet to enable residents to summon assistance quickly in the event of an emergency, supporting their safety and well-being.*

6.3.2 Floor lamp in the lounge is a tripping hazard.

*We recommend repositioning or securing the floor lamp to eliminate the risk of trips and falls, making the lounge a safer environment for residents and visitors.*

6.3.4 Hand dryer socket in upstairs bathroom is close to the shower and sink.

*We recommend relocating the socket or protecting it adequately to reduce the risk of electrical hazards near water sources.*

6.3.5 Furniture placed by an emergency exit in the lounge.

*We recommend removing or repositioning the furniture to keep the emergency exit clear, providing a safe and unobstructed evacuation route for residents and staff. We brought this to management's attention at the end of our visit and were assured that the furniture would be moved straight away.*

6.3.6 No handrails in downstairs corridor.

*We recommend provision of handrails downstairs.*

6.3.7. Wardrobe in one resident's room leaning forward.

*We recommend securing or repositioning the wardrobe to prevent it from tipping, ensuring the safety of the resident and reducing the risk of accidents.*

#### **6.4 Activities and Personal Involvement**

6.4.1. A wider range of activities would engage residents and keep them active.

*We recommend expanding the range of activities available to further promote resident engagement, physical activity and social interaction throughout the home.*

#### **6.5 Residents and Families**

6.5.1. Some residents are unsure about their safety in the home.

*We recommend providing reassurance and clear information about safety measures and holding regular discussions with residents to address any concerns and enhance their sense of security.*

6.5.2. Some residents feel they do not have a say on the type of activities.

*We recommend involving residents more directly in planning and choosing activities to reflect their preferences and promote greater engagement and satisfaction.*

6.5.3 Some family members do not know what arrangements are for medical emergencies.

*We recommend providing clear information to family members about emergency medical procedures and protocols to inform and reassure them about the care and safety of their relatives.*

## 6.6 Staffing

6.6.1. One staff member said they would like to receive more training.

*We advise the management team to assess the current training programme and identify opportunities for staff to take courses to help with their career progression and further enhance the quality of care provided at the home.*

## 8. Glossary of Terms

AR	Authorised Representative
CQC	Care Quality Commission
EAL	English as Additional Language
E&V	Enter and View
ID	Identification
LA	Local Authority
LTC	Long-term condition

## 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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Cover photo by Andrea Piacquadio

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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	<b>Charlotte Bradford Operations Co-ordinator Healthwatch Bromley</b>
Date sent	07/01/2026
Report title	Enter & View Report
<b>Response</b> (If there is a nil response please provide an explanation for this within the statutory 20 days)	
Date of response provided	19/12/2025
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 <u>actions</u> and/or improvements you will undertake <u>as a result of the report's findings and recommendations</u> . If not applicable, please state this and provide a brief explanation of the reasons.
Recommendation 1	<p>We recommend installing clear external signage to help visitors identify the home easily and give a more welcoming first impression.</p> <p>I have discussed with the Operations Manager and the care provider the importance of having clear external signage at the front of the building to enable visitors to easily identify the home and to create a more welcoming first impression. This has been approved and has been included in our refurbishment plan for this year.</p>
Recommendation 2	<p>We recommend establishing a clearly marked ambulance parking area to support timely access for emergency responders and enhance overall safety for residents</p>

	<p>Oak Lodge has limited on-site parking; therefore, staff have been advised to park on the street in order to maintain adequate access for emergency response vehicles and for taxis transporting residents to hospital appointments. In addition, your recommendation has been incorporated into our annual refurbishment planner. Once the relevant dates have been confirmed, I will forward them to you via email.</p>
<p><b>Recommendation 3</b></p>	<p><b>We recommend placing dementia friendly clocks and calendars in prominent communal areas to support residents with orientation and create a more enabling environment for those with cognitive needs.</b></p> <p>That sounds like a very positive and thoughtful recommendation. Placing dementia-friendly clocks and calendars in prominent communal areas is a practical, evidence-based way to support residents with orientation. It helps reduce confusion, promotes independence, and contributes to a calmer, more enabling environment for individuals with cognitive needs. This approach demonstrates a strong commitment to person-centred care and enhancing residents' overall wellbeing. This will be in place before 28/02/2026.</p>
<p><b>Recommendation 4</b></p>	<p><b>We recommend enhancing the quiet room with softer furnishings, warmer décor, and personal touches to create a more comfortable and inviting space for residents and visitors.</b></p> <p>This is a very positive and welcome recommendation. Enhancing the quiet room with softer furnishings and warmer décor will help create a calm, homely atmosphere that supports comfort and relaxation. For example, adding upholstered seating, cushions, soft throws, warm lighting, and calming colour tones can make the space feel more inviting. Incorporating personal touches such as artwork, photographs, plants, or textured fabrics can further promote a sense of familiarity and emotional wellbeing for both residents and visitors. Overall, these changes would greatly enhance the room as a peaceful and supportive environment. We are looking at May 2026.</p>
<p><b>Recommendation 5</b></p>	<p><b>We recommend managing background noise by adjusting the volume of the radio and television or scheduling quiet periods during mealtimes to create a more comfortable dining environment for residents.</b></p> <p>Simple actions such as turning off unused screens, choosing soft background music when appropriate, and being mindful of general noise levels can significantly enhance comfort, dignity, and overall wellbeing in the dining environment. This idea is already put into action.</p>
<p><b>Recommendation 6</b></p>	<p><b>We recommend repositioning the television at a height suitable for seated viewers, to enable all residents to watch comfortably from the lounge and dining room seating.</b></p> <p>While this recommendation is appreciated, it is positive to note that residents are currently happy with the television at its present position. Feedback from service users indicates that they are able to view the screen comfortably from their seating areas and enjoy watching</p>

	<p>programmes without difficulty. Maintaining the current setup supports familiarity and continuity, which is particularly beneficial for residents' comfort and wellbeing.</p>
<p><b>Recommendation 7</b></p>	<p><b>We recommend installing an alarm in the ensuite toilet to enable residents to summon assistance quickly in the event of an emergency, supporting their safety and well-being.</b></p> <p>This recommendation is acknowledged; however, it is positive to note that an appropriate nursing call alarm system is already in place and accessible within the ensuite toilet. This existing system enables residents to summon assistance quickly in the event of an emergency and effectively supports their safety and wellbeing. The current arrangements are regularly checked to ensure they remain fully functional and responsive to residents' needs.</p>
<p><b>Recommendation 8</b></p>	<p><b>We recommend repositioning or securing the floor lamp to eliminate the risk of trips and falls, making the lounge a safer environment for residents and visitors</b></p> <p>We are pleased to confirm that the floor lamp has now been removed and relocated to another safe position, eliminating the potential risk of trips and falls. This action has helped to make the lounge a safer environment for both residents and visitors, demonstrating our ongoing commitment to safety and risk reduction.</p>
<p><b>Recommendation 9</b></p>	<p><b>We recommend relocating the socket or protecting it adequately to reduce the risk of electrical hazards near water sources.</b></p> <p>It is positive to note that the socket is already suitably protected and compliant with safety standards for use near water sources. Regular safety checks are in place to ensure it remains secure and does not pose an electrical hazard. The current arrangement has been assessed as safe, while continuing to be monitored to maintain a high standard of safety for residents and visitors.</p>
<p><b>Recommendation 10</b></p>	<p><b>We recommend removing or repositioning the furniture to keep the emergency exit clear, providing a safe and unobstructed evacuation route for residents and staff. We brought this to management's attention at the end of our visit and were assured that the furniture would be moved straight away.</b></p> <p>This recommendation has been addressed positively. The furniture has now been removed from the location, ensuring the emergency exit is clear and providing a safe, unobstructed evacuation route for residents and staff. Prompt action was taken following the issue being brought to management's attention, demonstrating a strong commitment to safety and compliance.</p>
<p><b>Recommendation 11</b></p>	<p><b>We recommend provision of handrails downstairs.</b></p> <p>This is a positive and constructive recommendation. The provision of handrails downstairs would further enhance safety by offering additional support and stability for residents, particularly those with</p>

	<p>reduced mobility. This improvement would help promote confidence, independence, and overall wellbeing while moving around the environment. May 2026.</p>
<p><b>Recommendation 12</b></p>	<p><b>We recommend securing or repositioning the wardrobe to prevent it from tipping, ensuring the safety of the resident and reducing the risk of accidents.</b></p> <p>We can confirm that the wardrobe is securely fixed to the wall, which effectively prevents the risk of tipping. This measure ensures the resident's safety and significantly reduces the likelihood of accidents, reflecting a proactive approach to maintaining a safe environment.</p>
<p><b>Recommendation 13</b></p>	<p><b>We recommend expanding the range of activities available to further promote resident engagement, physical activity and social interaction throughout the home.</b></p> <p>It is positive to note that the service already offers a wide and varied range of activities tailored to suit the interests, abilities, and preferences of our residents. These activities are designed to promote engagement, physical movement, and social interaction, and residents have responded positively to the current programme. The activities are regularly reviewed and adapted in line with residents' needs and feedback to ensure continued enjoyment and meaningful participation.</p>
<p><b>Recommendation 14</b></p>	<p><b>We recommend providing reassurance and clear information about safety measures and holding regular discussions with residents to address any concerns and enhance their sense of security.</b></p> <p>This advice is positively accepted; however, it is essential to emphasise that residents are consistently supplied with reassurance and clear information regarding safety precautions. Regular conversations take place between staff and residents to address any concerns, offer reassurance, and promote a strong sense of security. This open and supportive approach helps ensure residents feel listened to, informed, and safe within the service.</p>
<p><b>Recommendation 15</b></p>	<p><b>We recommend involving residents more directly in planning and choosing activities to reflect their preferences and promote greater engagement and satisfaction.</b></p> <p>It is encouraging to observe that residents are already actively engaged in planning and selecting activities. Their preferences, interests, and feedback are regularly sought and used to shape the activities programme, helping to promote meaningful engagement and satisfaction. This person-centred approach ensures activities remain enjoyable, inclusive, and responsive to residents' individual needs.</p>
<p><b>Recommendation 16</b></p>	<p><b>We recommend providing clear information to family members about emergency medical procedures and protocols to inform and reassure them about the care and safety of their relatives.</b></p> <p>This proposal is recognised; nonetheless, it is encouraging to notice that family members are already receiving clear information about</p>

	<p>emergency medical procedures and protocols. This information is communicated and discussed on a regular basis, keeping families informed and comforted about their relatives' care, safety, and well-being.</p>
Recommendation 17	<p>We advise the management team to assess the current training programme and identify opportunities for staff to take courses to help with their career progression and further enhance the quality of care provided at the home.</p> <p>This recommendation is welcomed and accepted. The management team will review the current training programme and identify opportunities to support staff with additional courses that aid career progression and further enhance the quality of care provided. This assessment will be completed within the next <b>three months</b>, with a plan for relevant training opportunities to be implemented on an ongoing basis thereafter.</p>
Signed	<i>Zainabkamara</i>
Name	Zainab Kamara
Position	Home Manager