

Enter & View Report

The Sloane Nursing Home, Tuesday 1st July 2025



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Visit Details	
Service Visited	The Sloane Nursing Home
Registered Manager	Ladan Nayebi
Date & Time of Visit	Tuesday 1 st July 2025, 11:00 – 14:30
Status of Visit	Announced
Authorised Representatives	Tina Fitcher-Smith, Margaret Kalu, Anna Pattenden
Lead Representative	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 The Sloane Nursing Home

The Sloane Nursing Home is situated in Southend Road, Beckenham. It is one of five homes operated by Mills Family Limited, which is part of the Mills Care Group. The home provides nursing and palliative care.

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.

An inspection was announced and carried out in April 2019. The service was inspected but rated 'good' overall. CQC carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of their regulatory functions.

2.3 Residents

The Sloane Nursing Home is a 36-bed nursing home split across three floors. At the time of our visit, Sloane Nursing Home had 34 residents. All residents have long term health conditions, and 13 have been diagnosed with dementia.

2.4 Staff

The home employs 53 staff members, which includes the physiotherapy team, maintenance staff, and activity co-ordinators. Of these, 30 are on full-time contracts, seven on bank contracts, and the remainder work part-time.

3. Summary of Findings

The E&V visit was carried out on Tuesday 1st July; 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 building is positioned on a main road and limited parking is available on site.

What works well?

- Easily accessible by public transport
- Ramp access
- Logbook for visitors to sign in and out
- Hand sanitiser available at the entrance
- Wheelchair friendly and lifts available
- Healthwatch Bromley Enter & View poster displayed
- Doorbell with camera
- Keypad.

What could be improved?

- No designated ambulance parking.

3.2 General Environment

Notes

The main entrance is equipped with a keypad and a doorbell, with a button available to ring for access. The home has no specific visiting time and visitors can come anytime that they wish to. The most recent Care Quality Commission (CQC) inspection details are displayed at the entrance for visitor information.

Upon entering, visitors will find a suggestion box near the main reception. The exit from the building is controlled by an additional keypad, with an emergency door release key available for safety purposes.

The reception area is warm and inviting, furnished with a sofa and armchairs, and decorated with fresh flowers on the central table. A side table displays the visitor logbook, face masks, hand sanitiser, the weekly menu, and the home's 2025 brochure. Posters are clearly displayed, including the complaints policy, Healthwatch Bromley Enter and View details, the current Employee of the Month, and information about upcoming events such as the "Live Sing-Along" and the "Sloane Annual Summer Party."

The home is decorated in neutral cream tones with grey panelling and white railings throughout. Doors are painted white with silver handles, creating a pleasant contrast against the walls. Brown wooden flooring is used in the main corridors and communal areas, contributing to a warm and homely atmosphere.

The conservatory is spacious and bright, featuring brown carpeting and a mix of tables with comfortable chairs as well as armchairs. Plants adorn the windowsills, adding to the warm ambiance. Each table displays the weekly menu, and a side table holds newspapers and magazines. A selection of books, puzzles and board games is available for residents and visitors to enjoy.

The home benefits from a large, accessible garden with ramp access. The area is well maintained, featuring grass lawns, comfortable chairs with tables and

parasols, as well as benches for residents and visitors. A wooden arbour with seating adds a gentle touch. A notable and thoughtful feature is a wind chime engraved with the names of residents who have passed away. Staff mentioned that a Memory Day is held annually in November, welcoming family and friends to come together in remembrance of loved ones who died during the previous year.

Each resident's room has a QR code linked to the Care Vision system, allowing carers to scan and instantly access personalised care information. Signs are displayed in each room with the name of the resident's designated carer and nurse. Individual care needs are clearly visible, either within the room or on the door, such as specific routines (e.g. getting up at 07:00 daily, not to be disturbed between 22:00 – 06:00).

Rooms are spacious, individually decorated and personalised to reflect each resident's preferences. All rooms are equipped with a toilet. Some rooms include additional en-suite facilities with wet rooms and hoists. All rooms feature laminate flooring, single beds with adjustable height and railings, and safety latches on the windows. Several rooms offer garden views. Residents are encouraged to bring small items of their own furniture, although the home provides ample furnishings. Televisions are provided in each room. Bathrooms and toilets are fitted with alarms for added safety, and the shower rooms include wall-mounted seats.

The bathrooms are tidy and in good condition, featuring toilet seats and light switches in contrasting colours to aid visibility. Each is fitted with a hoist to assist residents with limited mobility, and emergency alarm buttons are conveniently placed near the toilet to enhance safety.

What works well?

- Easily accessible, suitably adapted toilets equipped with emergency buttons
- Suggestion box available near main entrance
- Corridors are wide enough for wheelchair access.

What could be improved?

- No dementia friendly calendar and clocks in communal areas
- Air conditioner only in conservatory – we visited during hot weather and, even though residents had fans in their rooms, the home was uncomfortably hot.

3.3 Safety and visiting

Notes

Visiting hours are Monday to Friday, 09:00 – 17:00. We observed clear fire exit signs, fire extinguishers and fire security documents in corridors. Emergency evacuation sledges are available at the top of all stairs.

What works well?

- Fire alarms tested weekly
- Fire security documents available in corridors
- Security latches on all windows
- Emergency alarm buttons reachable from beds and toilets
- Medicine cupboards securely locked
- Clean and well organised kitchen
- Hand sanitiser and gloves available in corridors.

What could be improved?

- Fire door in laundry room left open and unattended; this was brought to management's attention on the day
- Kitchen staff did not wear gloves and hats
- Hose left on the ground in the garden.

3.4 Activities and Personal Involvement

Notes

Management highlighted the team's dedication to delivering person-centred activities adapted to each resident's individual needs. They recognised that certain activities may not be suitable for all residents, especially those living with dementia or long-term health conditions. Activity co-ordinators carry out one-to-one room visits to engage residents who are not mobile in personalised activities.

Activities vary daily and include:

- Arts and crafts
- Gardening
- Hairdressing
- Outings
- Prayer and worship service
- Puzzles
- Quiz
- Room visits
- Scrabble
- Singalong
- Sensory time.

The home is planning to organise weekly local outings to parks, restaurants, pubs, and garden centres, as well as seaside trips during the summer. The home has a van that can accommodate one wheelchair and a carer for local appointments. Pupils from local schools come to read with residents, and local nurseries also comes in for activities. Relatives can bring pets during visits. Residents' birthdays are celebrated at the home with cake and decorations.

What works well?

- A range of activities to engage residents and keep them active
- Residents' artworks displayed in the home
- Variety of board games, magazines, and puzzles available
- Activity programme available on the table in the conservatory
- Range of books and magazines available in communal area
- Bookcase with variety of books in the lounge
- Planner for the week printed and distributed to residents' rooms
- Printed list of residents' birthdays on the kitchen fridge.

What could be improved?

- Activity programme displayed on the board is printed in small format and difficult to see.

3.5 Diet and Cultural Practices

Notes

The menu is designed to reflect residents' preferences and dietary requirements, with the catering team providing a diverse range of meal options. Management confirmed that all meals are freshly prepared on site.

The menu changes weekly, with residents selecting their meal choices each evening, though they are free to change their selection on the day if they wish. Jugs of water and squash are readily available throughout the day in both the dining areas and residents' rooms. During hot weather, ice lollies and ice cream are offered throughout the day to help residents stay cool and hydrated.

The home actively encourages residents to eat in the communal dining room to support social interaction, though they are welcome to go to their own rooms if preferred. Residents also can contribute to menu planning during regular residents' meetings, ensuring their preferences and suggestions are considered.

A weekly menu is displayed by the main reception as well as on each table in the dining room and conservatory. Mealtimes are scheduled as follows: breakfast from 08:00, tea and biscuits at 10:30, lunch at 12:30, tea and cake at 15:00, supper at 17:00 and last tea and snack at 21:00. Residents who miss a mealtime are still able to receive their meal choice from the kitchen staff.

What works well?

- Residents can choose what they would like to eat every day
- Weekly menu is available in communal areas
- Variety of food on menu (e.g. sausage & mash, leek and potato soup, roast dinner, meat or vegetable curry, steak & ale pie)
- Hydration posters around the home.

What could be improved?

- Menu of the day not on display.

3.6 Feedback and Complaints

Notes

The home promotes open communication and encourages residents, their families, and staff to approach management with any concerns or suggestions. There is a suggestion box by the main reception, and the home encourages families to post reviews on www.carehome.co.uk. The home holds residents' meetings every three months, covering a range of topics including activities, meal preferences, and the quality of care provided.

What works well?

- Comment box by the main reception
- Residents' meetings every three months.

What could be improved?

- We found no potential areas for improvement.

4. Residents' and Families' Feedback

We received feedback from 11 residents and seven family members. We inquired about several aspects of their experience, including the quality of care, meal choices, activities and personal growth, access to healthcare services, social opportunities, feelings of safety, and how well the home communicates with them.

Overall, feedback was positive, with both residents and family members expressing satisfaction with the care provided at The Sloane Nursing Home.

Residents shared that they feel safe and well cared for, and value having a say in the planning of activities. Support is available for those who require help with eating or drinking.

Family members shared positive feedback about the support their loved ones receive from local health and care services, including GPs, dentists, and pharmacies. Most felt confident that their relative or friend is receiving good personal care, such as assistance with washing, hairdressing, and chiropody, though one family member thinks their relative is not receiving satisfactory personal care.

All family members stated that they are regularly updated about any concerns involving their loved ones, including incidents such as falls, changes in health, or changing care plans. Three family members said they do not know what the arrangements are for their relatives in an emergency.

When asked if they felt residents were safe in the home—for instance, whether visitor identification is checked and evacuation procedures are clearly established—all respondents answered "yes" on the questionnaire.

What works well?

- Residents stated that they feel secure and well looked after

What could be improved?

- One family member thinks their relative is not receiving satisfactory personal care.
- Three family members said they do not know what the arrangements are for their relatives in an emergency.

Family and Friends' Selected Comments

"Generally, we are happy with how mum is treated, and she is happy and settled."

"Happy with overall care and kindness."

"I feel the previous management was lacking but hopefully the new management will be better."

"Staff are very kind and caring."

Residents' Selected Comments

"I am happy here - it is now my home."

"They keep an eye on me."

"I am very satisfied, carers are very kind, and I like my room."

"Very good home."

5. Staff & Management Feedback

We received completed feedback forms from 11 staff members and two members of the management team.

Throughout our visit, we observed staff engaging with residents in a warm, respectful, and compassionate manner.

5.1 Staffing

Notes

Of the 11 staff members we spoke to, one has been there for under 12 months, three between 1 – 3 years, seven have been working at the home over four years. Long standing members of staff have been there for 24 and 18 years.

The staff room features comfortable seating, a table, a microwave, a fridge, and individual lockers for personal belongings.

Day shifts run from 07:30 to 20:30, night shifts from 20:15 to 07:30. Staff also have the option to work a half shift from 07:30 to 14:30. Each shift includes a one-hour break, divided into a 30-minute lunch and two 15-minute breaks.

Training

All staff complete 30 hours of online training prior to starting their role, followed by a one-day, face-to-face training session. This is then reinforced with four days of on-the-floor training, where they shadow an experienced team member.

Annual refresher courses, including topics like manual handling and first aid, are compulsory to ensure staff maintain essential skills. Additional training is available based on staff interests and requests, promoting ongoing professional development.

All staff completing the questionnaire were asked about their interest in additional training opportunities; three would like to receive additional training (clinically related), two said they were unsure.

Breaks

Two staff reported that they are not given sufficient breaks during their shifts. All staff expressed satisfaction with the way handovers are managed and felt that they have the necessary opportunities and resources to support residents effectively.

One staff member said that they had previously raised a concern with management and were satisfied with how this was dealt with.

Lunch is provided by the home for staff members working a full shift. They must put their name down on the board outside the kitchen before 10:30. Agency staff are not entitled to lunch cooked by the home's kitchen.

Management

Staff appear to have a good rapport with the manager; with everyone we spoke to during our visit expressing that they feel listened to and supported when voicing concerns or seeking guidance.

What works well?

- Lunch is provided for staff who are working long shifts
- Shower is available in staff bathrooms

What could be improved?

- Three staff members would like to receive additional training (clinically related), two said they were unsure
- Two staff reported that they are not given sufficient breaks during their shifts

5.2 Selected Comments from Staff

"Overall, very good service."

"Residents are happy."

"All residents are treated with dignity and respect."

"All satisfactory."

5.3 Management

Notes

The registered manager has been with the home for two months and is confident in the level of care and support offered to residents.

Diet

Each resident receives a personalised needs assessment upon admission, with individual adjustments made as necessary. The home caters for specific dietary requirements, including vegetarian and lactose intolerant diets.

A fixed weekly menu is offered, but alternative options are available at mealtimes to accommodate individual preferences. Residents select their meals the evening before but have the flexibility to change their choice on the day if they wish.

Menus are regularly reviewed and discussed during residents' meetings. Residents are free to choose where they prefer to eat, and care staff are on hand to support them, whether they opt to dine in the communal dining area or in their own rooms.

Overall provision of liquids is monitored and reviewed weekly. All residents' fluid intake is documented and residents who are at risk are put on fluid watch.

Quality of care

We visited the home during hot weather. An air conditioner is available in the conservatory and all residents' rooms are equipped with a fan. During cold weather extra blankets are provided. All rooms have a temperature display.

Laundry services are done within the home. In the laundry room, each resident has a box labelled with their name. Hairdressing and chiropody services can be arranged at the home at an additional cost.

Safety

The manager explained that all staff wear uniforms with their names embroidered on them. They are fully trained in evacuation procedures and understand the specific support needed for residents who may require assistance in an emergency.

The manager said that staff, residents, and visitors are well-informed and equipped to recognise and respond to safeguarding concerns. Everyone is aware of the process for making a complaint.

Activities

Residents are encouraged to engage and socialise through a range of activities. Currently, there are no residents at the home who speak English as an Additional Language (EAL), and there has not yet been a need to support individuals with diverse cultural or sexual identities. However, the home emphasised its inclusive approach and confirmed that appropriate arrangements would be made to accommodate any cultural or identity-related needs should they arise.

Residents can contact religious support if they wish. Once a month on a Sunday, a local church, St. George's, holds a service at the home.

Community Services

The manager said they are satisfied with the level of support residents receive from other local health and care services. A GP visits the home fortnightly and additionally when required. Residents' medications are supplied by a local pharmacy, with daily and monthly delivery. Urgent medication is sent to the pharmacy for immediate collection.

COVID-19 infection prevention measures

The manager noted that general infection control measures remain in place. Visitors are asked to wash and sanitise their hands upon entry, and hand sanitiser and gloves are readily available throughout the home.

Staff

All staff have supervision meetings, and they can request additional training. Online training sessions with St Christopher's Hospice are held every second Wednesday of the month, covering topics such as end-of-life care, syringe driver use, and related subjects.

The manager stated that the home is currently working to reduce reliance on agency staff. However, when agency staff are required, they consistently use the same individuals to maintain continuity of care.

6. Recommendations

Healthwatch Bromley would like to thank The Sloane Nursing 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 accessibility

6.1.1. There was no designated ambulance area.

We recommend establishing a clearly marked ambulance zone to provide easy and efficient access for emergency vehicles.

6.1 General Environment

6.2.1. No dementia friendly calendar and clocks in communal areas

We recommend installing dementia-friendly calendars and clocks in communal spaces to support orientation and independence for residents living with dementia.

6.2.2. Air conditioner only available in conservatory – we visited during hot weather, and even though there were fans in communal rooms, the home was uncomfortably hot.

We recommend installing additional air conditioning or alternative cooling solutions in other communal areas to maintain a comfortable environment for residents, particularly during warmer months.

6.3 Safety and visiting

6.3.1. Fire door in laundry room left open and unattended; this was brought to management's attention on the day.

We recommend ensuring all fire doors remain closed and secured at all times to maintain safety and comply with fire regulations.

6.3.2. Kitchen staff did not wear gloves and hats

We recommend reinforcing strict adherence to food hygiene protocols, including the use of gloves and hair coverings, to ensure food safety.

6.3.3. A hose was left lying on the ground in the garden.

We recommend that garden equipment such as hose, is stored safely and securely when not in use to prevent trips and falls and maintain a safe outdoor environment for residents and visitors.

6.4 Activities and personal involvement

6.4.1. The activity programme displayed on the board was printed in a small format, making it difficult to read.

We recommend using larger, clear print for the activity schedule to improve visibility and accessibility for all residents.

6.5 Diet and cultural practices

6.5.1. The menu of the day was not displayed.

We recommend prominently displaying the daily menu in communal areas to keep residents informed and support their meal choices.

6.6 Residents and Family

6.6.1. One family member expressed concerns that their relative is not receiving satisfactory personal care.

We recommend reviewing personal care plans regularly and improving communication with family members to address any concerns promptly when raised.

6.6.2. Three family members reported uncertainty about the emergency arrangements for their relatives.

We recommend providing clear information to families regarding emergency procedures to ensure they are well informed and reassured.

6.7 Staff

6.7.1. Three staff members expressed a desire for additional clinical training, while two were unsure about pursuing further training.

We recommend offering more opportunities for clinical training and providing clear guidance about available professional development options to support staff confidence and skills.

6.7.2. Two staff members reported not receiving sufficient breaks during their shifts.

We recommend reviewing staff break schedules to ensure all team members have adequate rest periods in line with workplace regulations and best practice.

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

Cover photo by Cotton Bro

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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Report & Recommendation Response Form

Report sent to	Ladan Nayebi, Home Manager
Date sent	31 July 2025
Report title	Enter & View Report: The Sloane Nursing Home

Date of response provided	01/09/25
Please outline your general response to the report including <u>what you are currently doing to address</u> some of the issues identified.	

6.1.1. There was no designated ambulance area.	The Sloane ambulance bay is by the Ramp and at the entrance of the home. Marking is discussed with the directors for the decision to be made.
Recommendation 6.2.1 - No dementia friendly calendar and clocks in communal areas	The Sloane is not a dementia home and those who are diagnosed with dementia, as part of their Past medical history/ recently diagnosed, we will be purchasing calendars for the residents' rooms. all communal areas have a big wall mounted clock I believe on the time of the visit 2 was removed to be replaced with a new one.
6.2.2. installing additional air conditioning or alternative cooling solutions in other communal areas	All rooms are provided with a Fan for the warmer months, and all the residents are encouraged and assisted to be in the lounge, dining and conservatory area which is equipped with the air-condition and remains cool. There are no other communal areas.
6.3.1. Fire door in laundry room left open and unattended.	All fire doors including the laundry door is a fire door which will shut in case of any smoke or fire. We will disconnect the door from the power supply so that the door closes automatically when staff go in and out.

6.3.2. Kitchen staff did not wear gloves and hats	The company provides kitchen staff with hairnets and gloves to be used when preparing food and will continue to supervise all kitchen staff for following the policy and procedures. The home on that day had agency staff working.
6.4.1. The activity programme displayed on the board was printed in a small format, making it difficult to read.	The activity programme on the board is in normal font for the visitors however, the residents will receive a bigger font if they require in their bedrooms .in addition, activity coordinators will also visit the residents in their room on daily basis to confirm remind them of the planned activity of the day and if they would like to participate.
Recommendation 6.5.1. - The menu of the day was not displayed.	Menus are always available in the communal area on each dining table front desk by the signing book and it will be also taken by the carers when they will ask the residents the next day choice of menu for all 3 meals. In addition, the home is in process of preparing menu in larger size, A4 page for each dish, for the residents to be able to visualise the photo of their selected food. We previously displayed the menu with pictures on a daily basis which was not effective so we changed.
6.6.1. One family member expressed concerns that their relative is not receiving satisfactory personal care	Personal care plans are reviewed on monthly basis and as required. The Sloane nursing home has introduced a new role into the positions (duty care lead) to continuously observe the care delivered and provide best standard of care. We have anonymous surveys and meetings, and nobody has raised any concerns regarding personal care. We have also not received any complaints.
6.7.1. Three staff members expressed a desire for additional clinical training, while two were unsure about pursuing further training.	The staff have 21 mandatory trainings that they complete each year. We offer courses at St Christophers, Care Home Assistant Practitioner courses and NVQ's. Staff are sent anonymous surveys each month, attend regular supervisions and nobody has requested any additional training. Last month all staff were allocated to attend a malnutrition training provided by Guys hospital. This month staff are allocated to Fall management course with St Christopher hospice.
6.7.2. Two staff members reported not receiving sufficient breaks during their shifts.	The Break time for all staff is allocated in the allocation sheet to be able to have their breaks. The breaks exceed the required breaks as per the Working Time Regulations. A staff meeting was carried out last month to discuss any concerns and all staff has been advised to come to manager with any issues or concerns during the shift. Staff receive supervisions and anonymous surveys no issues have been raised regarding breaks.
Signed	Ladan Nayebi
Name	Ladan Nayebi
Position	Home manger