

Enter and View – Visit Report

Name of Establishment:	Sonesta Nursing Home Ltd; 797 Finchley Road Golders Green, London, NW11 8DP Telephone: 020 8458 3459
Staff Met During Visit:	Owner/Manager: Mrs. Farzana Chowdhry; Activities Organiser/Administrator; Deputy; two nurses.
Date of Visit:	Wednesday 26 th March 2014
Healthwatch Authorised Representatives Involved:	Janice Tausig: Tina Stanton
Introduction and Methodology:	<p>This was an unannounced Enter and View (E&V) visit undertaken by HealthwatchBarnet’s E&V Volunteers, as part of a planned strategy to look at a range of care and nursing homes within the London Borough of Barnet to obtain a better idea of the quality of care provided. Healthwatch E&V representatives have statutory powers to enter Health and Social Care premises to observe and assess the nature and quality of services and obtain the views of the people using those services.</p> <p>The aim is to report the service that is observed, to consider how services may be improved and how good practice can be disseminated.</p> <p>The team of trained volunteers visit the service and record their observations along with the feedback from residents, relatives, carers and staff. They compile a report reflecting these, and making some recommendations. The Report is sent to the Manager of the facility visited for validation/correction of facts, and for their response to the recommendations. The final version is then sent to interested parties, including the Head Office of the managing organisation, the Adults and Safeguarding Committee, CQC, Barnet Council and the public via the Healthwatch website.</p>

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	<p>DISCLAIMER:</p> <p><i>This report relates only to the service viewed on the date of the visit, and is representative of the views of the staff, visitors and residents who met members of the Enter and View team on that date.</i></p>
<p>General Information:</p>	<p>This was a follow up visit to the full announced E&V visit that took place on 28th September 2013 to review the actions that had been taken following the recommendations & comments made in that report. The team did not carry out a full review of the service but concentrated on areas of potential concern raised in the previous report.</p>
<p>Initial Report Recommendations:</p>	<p><i>R1) Brighter lighting to be made available in the downstairs lounge and corridors to lighten the atmosphere and allow reading in places other than by the window. When it is possible to repaint the lounge and corridors, a brighter or at least lighter colour is recommended for similar reasons.</i></p> <p>Despite the very dull day the lounge was adequately illuminated. Lighting for reading, unless one was sat by the window, could still be improved. However, a quiet lounge on the floor above was very bright with natural light and easy chairs next to the window. Stairs and corridors were also illuminated well and in addition to our recommendations, we were told that the doors to the garden had been improved to allow wheelchair access for residents.</p> <p>Repainting of the lounge and reception areas due to start the day we arrived but had been deferred as the workmen arrived with the wrong tools.</p> <p>We were told residents would decide on the paint colour.</p> <p><i>R2) All residents to have their names on their room door or/and a symbol illustrating</i></p>

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	<p><i>something important to them, so personalising their space.</i></p> <p>Most of the doors were now personalised with the residents' names.</p> <p><i>R3) A wider range of regular activities for residents to provide greater stimulation.</i></p> <p>A notice board by the front door alerts visitors to the daily activities which remain the same each week. We were told the range of activities was fuller than the list on the board. They included Bingo; outside entertainers with music and singing twice a week with one group also incorporating mobility exercises; separate armchair exercises provided by Sonesta; aromatherapy; hand massage; nail treatments; celebrations on anniversaries or festivals. Magnetic darts is being planned and we were told that each day the Activities Organiser spends 1:1 time with residents finding out what they like to do - this may include writing letters for them, reading to them; bringing them up to date with the news.</p> <p>Visits to places outside were an option but remained infrequent. Sometimes people were taken to their local church but shopping seemed to be done by two of the staff for the residents rather than the residents being accompanied to go themselves. The bad weather had been suggested as a cause for this, but we were told that they were planning some visits out, once the weather improved.</p> <p><i>R4) Individual activity sheets to be placed in residents' rooms so that friends, staff and relatives could see what they had been doing.</i></p> <p>These sheets, started in January 2014, are kept in a separate activities file. They are prefaced by a brief profile for each resident, allowing any staff member to see at a glance what Residents liked to</p>
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	<p>do without recourse to Care Plans. Each Resident had a section with regular comments, noted meticulously by the Activities Co-ordinator, who had shown a keen interest to do the very best for the residents. Whilst the sheets were not in their rooms there had clearly been considerable effort to improve this area.</p> <p>In addition, the Activities Co-ordinator expressed real enthusiasm for any support which would allow her to extend this provision. It would be helpful for her to join the network of activities co-ordinators that is being set up by IQICH (Integrated Quality in Care Homes Team at Barnet Council) to exchange ideas and work together.</p> <p>R5) Staff to wear aprons whilst serving food and at mealtimes.</p> <p>We were not able to view a meal but were informed by both a Nurse and Mrs. Chowdhry that aprons were worn by all staff serving food.</p> <p>R6) To consider leaving doors to bedridden Residents' rooms open unless specifically asked by the Residents to close them, to avoid a feeling of isolation.</p> <p>Some doors were open and others shut, but we were assured by both the Activities Co-ordinator and Mrs. Chowdhry that if Residents made a special request to keep their doors open this would happen, after a risk assessment. We were also told that residents, who rarely left their rooms, were checked up on by the Activities Co-ordinator.</p> <p>The possibility of specialist door openings enabling doors to remain open but close automatically when a fire alarm goes off, was mentioned to Mrs. Chowdhry for future use.</p>
	<p>R7) To ensure training is kept up to date in line with best practice.</p>

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	<p>Most training remains in house. When we asked one person how training had affected their work, the staff member was able to explain clearly how it had impacted on daily routines. Other staff were less confident about training they had received and were therefore unable to explain how it had affected their work with Residents.</p> <p>Two staff had been chosen to go on Gold Standards Framework Training provided by the North London Hospice for End of Life Care. This was so successful that other staff were already using it to care for residents at the end of their lives. Staff attending this training were formally cascading it to other staff members, ensuring a positive impact all round. There was enthusiasm by some staff to join the next round of training and Mrs. Chowdhry was full of praise for the way it was working in her Home.</p> <p>R8) Contact to be made with Barnet’s Integrated Quality in Care Homes (IQICH) initiative to increase Borough contacts and share expertise.</p> <p>This is in progress. Mrs. Chowdhry has met with a member of the IQICH Team.</p> <p>R9) Consider recruiting some volunteers to assist with activities.</p> <p>There are no volunteers assisting at present.</p> <p>R10) Separate uniforms which are easily differentiated to be available for and used by all staff if they change their role.</p> <p>This is still unclear. It would be helpful for residents and relatives to have a clear record of the colour of uniform each category of staff wear.</p>
<p>Conclusions:</p>	<p>The home seems keen to develop its support for residents. We were particularly impressed with the diligence shown on the activities sheets and look</p>

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	<p>forward to the implementation of specific activities for Residents with Dementia and further support in this area for the Activities Co-ordinator.</p> <p>It was unclear, other than having a meeting, how people were chosen for training and whilst one member of staff told us that if they asked to go on a course they could go, it was clear that not all staff were aware of what was on offer. We were pleased that initial contact had been made with IQICH and would encourage this to be carried further. It involves Staff meeting others from outside the Home where they can exchange ideas. It has worked extremely well for the Gold Standards Framework and we would encourage this approach to become part of the Home's normal routine. In this way Residents will have the opportunity to receive top class care.</p>
<p>Recommendations:</p>	<ol style="list-style-type: none"> 1. Complete renovations in the lounge, corridors and reception as soon as possible, having first presented the colour choices to Residents. 2. Increase the number of opportunities Residents have to visit places outside the Home. 3. Discuss with IQICH options about self-closing doors on Residents' rooms. 4. Ensure in-house training is being put into practice and staff can understand how the training has improved their daily routines. 6. Continue to encourage staff to cascade down training in the way that the Gold Standards Framework has been shared. 7. Work with IQICH through the Activities Co-ordinator to exchange ideas with other Homes and develop the programme. 8. Designate uniforms and roles clearly.
<p>Signed:</p>	<p>Janice Tausig; Tina Stanton</p>

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Date:	29.03.14
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Comments received from the Manager at Sonesta in response to the follow-up report:

Thank you for your feedback.

The renovations in the lounge have been completed, with a very good outcome. The service users participated in all choices.

Outings have been arranged and service users encouraged and supported to go out. Some service users have gone out. The choice and preference is always of the service user & family.

In house training updated and evaluated through staff supervision, service user and staff.

Feed-back and meetings to ensure good understanding and benefit of putting this into practise.

All staff have uniforms provided by the Home as per Homes policy. Spare uniforms kept at the Home in case of any emergency in which the staff may require a change of uniform.