

Enter & View Report

St Cecilia's, 10th September 2024



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Visit Details	
Service Visited	St Cecilia's Care Home with Nursing Physical Disabilities
Registered Manager	Simon Chikumbindi
Date & Time of Visit	Tuesday 10 th September 2024, 11:00 – 15:00
Status of Visit	Announced
Authorised Representatives	Orla Penruddocke , Graham Powell, Rhys Brown-Mantle
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. 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

2.1 St Cecilia's

St Cecilia's is a care home with nursing situated on Sundridge Avenue in Bromley. Owned by the Leonard Cheshire Group, it provides specialised care and support for adults with physical disabilities and mild learning disabilities, addressing their specific, individual needs.

St Cecilia's website states "Whether it's assistance with mobility, personal care, or medication management, our team is committed to providing compassionate and individualised care to each resident."

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.

At its latest inspection in February 2022, the CQC rated St Cecilia's "Good".

2.3 Residents

The home is CQC registered for under-65s and over-65s. During our visit, 30 residents were living at the home. All are wheelchair users; the majority have a long-term condition (LTC) and two have dementia. There are 16 residents on the first floor and 14 on the ground floor. Current residents are aged between 30 -74 years old.

2.4 Staff

The home has 76 staff members, including 47 carers (14 are bank) and 11 nurses (4 are bank*). Six volunteers at the home support residents through a range of activities, including organising sing-alongs, leading gardening sessions, playing games, sewing clothing labels, taking residents on fresh-air walks, and assisting with seasonal events like Christmas and summer fetes.

*Bank staff are employees directly hired by an organisation to provide flexible, on-call support, typically offering a more cost-effective option as they are already familiar with the workplace's procedures and culture. In contrast, agency staff are contracted through external agencies to cover temporary needs.

3. Summary of Findings

The E&V visit was carried out on Tuesday 10th September 2024; 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 positioned away from the main street and traffic noise is minimal. We observed a well-kept outdoor space with parking designated for visitors and for an ambulance.

The building has two entry doors, with the main entrance being locked after 17:00. Visitors must ring the bell, and a staff member will open the door.

There are two lifts: one is large enough to accommodate two wheelchairs and features a sensor that detects when someone approaches the doors, while the other is a smaller lift designed for a single wheelchair.

What works well?

- Parking space for visitors
- Ramp access into the building
- Designated ambulance point
- Visitors sign in and out
- Hand sanitiser available at the entrance
- Wheelchair friendly lifts available
- Induction loop
- Easy access by public transport
- Clear signage outside of the home.

What could be improved?

- The car park entrance for the home is located at the corner of Hill Brow Road, but there are no visible signs from Sundridge Avenue, the home's postal address, to indicate the correct entry point to the car park.

3.2 General Environment

Notes

The home is airy and light, offering a familiar and comforting environment. The corridors are wide, giving enough space for wheelchairs to circulate.

The home features blue carpeting throughout, complemented by neutral magnolia walls and patterned curtains. The corridor features large, framed pictures, while wooden handrails run along the walls, offering both support and comfort. Doors, such as those for the lifts, residents' rooms and storage, are easily distinguishable from the walls.

The communal rooms are furnished with tables and chairs, along with comfortable armchairs and sofas. Kitchen stations in these spaces feature a sink, kettle, microwave, and provisions for tea and coffee.

There is a quiet room that opens onto a spacious terrace, offering a view of the garden.

At the rear of the building, there is a spacious garden featuring a large pond filled with koi carp and goldfish. A paved pathway encircles a well-maintained lawn, surrounded by perennial plants and flowers.

The garden features several benches, two bird baths, a bird feeder, and a table with chairs under a gazebo.

Residents' rooms are located across two floors, varying in size. Each bedroom is fitted with its own bathroom, which includes an overhead hoist for increased support and accessibility.

Each bedroom door is numbered, although the numbers are not in sequential order. The original bedroom numbering was established when the building was constructed, and critical systems such as the nurse call, fire evacuation zones, and electrical and telecommunications networks are all linked to this scheme. The manager informed us that renumbering would disrupt these integrated systems, requiring extensive reconfiguration of safety protocols and infrastructure, posing significant risks and costs. While sequential numbering may seem simpler, it would compromise the integrity of established safety and operational frameworks.

Residents are welcome to bring their own furniture, allowing them or their family to personalise rooms to reflect their individual tastes. Some residents' doors operate with the touch of a button, while others are remote controlled.

What works well?

- Suggestion/comment box is clearly visible at reception
- Corridors are wide enough for wheelchair access
- The garden is designed to give maximum access to wheelchair users
- Automated / remote controlled bedroom doors
- Manual hoists are available in corridors as back up
- Special scales are available to weigh wheelchair users in their wheelchairs.

What could be improved?

- There are no dementia friendly clocks and calendars
- Some wooden garden borders are broken
- Some slabs in the garden are loose
- One of the bird baths in the garden is unstable.

3.3 Safety and visiting

Notes

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

Each bedroom is equipped with an alarm, and there is a control screen located in the corridors. Hand sanitisers are available throughout the home.

There are security cameras inside and outside the premises and in the garden.

What works well?

- Fire alarms tested weekly
- Call bell rope reachable from shower and toilet
- Communal areas are hazard-free
- Hand sanitiser available throughout the home.

What could be improved?

- Some safety latches on bedroom windows are broken

- Not all staff wear ID badges.

3.4 Activities and Personal Involvement

Notes

During our visit, none of the residents were in their bedrooms. Some were enjoying fresh air around the garden, while others were in the activity room.

The activities timetable is displayed on a board outside the activity room and there is also a weekly activity timetable on residents' bedroom walls.

The activity room is equipped with a variety of tools and equipment tailored to meet the residents' abilities and needs. It features a TV, a basketball hoop, a large central table for arts, crafts, and other activities, an assortment of art supplies, and a workstation with an oven, cooker, microwave and toaster, supporting a weekly baking activity every Saturday.

The activities coordinator emphasised the team's commitment to providing person-centred activities for residents. They acknowledged that not all activities are suitable for everyone, particularly considering the diverse needs of residents.

Activities vary daily and include:

- Yoga
- Quiz
- Board games
- Arts and crafts
- Baking
- Singing
- Nail care
- Film afternoon
- Exploring the bible.

Every Wednesday, a volunteer comes for a one-hour sing-along session on the piano, brings songbooks to engage residents in singing. Residents are also encouraged to play if they can.

The home has its own bus, which can accommodate three residents and one staff member, and a van that can transport one resident along with a staff member.

Birthdays are posted on the notice board. When it is a resident's birthday, banners are put up, the chef bakes a cake, and cards signed by other residents are given to celebrate the occasion.

The home is equipped with its own physiotherapy room, featuring a variety of equipment including a physio bed, walking bars, and a yoga ball. Each resident follows a personalised, weekly physiotherapy programme. The home also has an onsite physiotherapist and two physiotherapy assistants to support residents' physical rehabilitation needs.

What works well?

- A varied range of activities to engage residents and keep them active
- The activity schedule on the board includes both pictures and words to make it more accessible
- The activity room is stocked with a wide variety of arts and crafts supplies, and equipment for different activities.

What could be improved?

- We found no areas in need of improvement.

3.5 Diet and Cultural Practices

Notes

Residents are given meal choice every morning. We observed staff members assisting residents during mealtimes.

The catering team accommodates residents with specific dietary needs, providing a wide range of food options. This information is collected during the resident's initial arrival at the home.

Fifteen residents require assistance with oral feeding, ten can eat independently, some require feeding through a Percutaneous Endoscopic Gastrostomy (PEG) tube. Residents' hydration is closely monitored using daily Fluid Charts, where staff record each drink offered and consumed to track intake throughout the day. Residents who don't meet their targets are placed on a "watch" list, receiving extra encouragement from assigned staff. To improve success, Fluid Charts are linked to residents' "likes and dislikes" charts, allowing staff to offer preferred drinks, such as juices or milkshakes. The home also provides specialised equipment, like easy-grip cups and hydration bottles, to support residents with physical limitations, promoting independence in drinking.

What works well?

- Residents can choose what they would like to eat
- A variety of food is offered, i.e. Homemade Fish Cakes, Chicken and Mushroom Pie, Chicken Tikka Masala, Beef Bourguignon, Beef Stew and Dumplings, Toad in The Hole, Quorn Mince Bolognese (V), Goats Cheese and Red Onion Quiche (V), Chocolate Profiteroles with Cream, Tiramisu, and Red Berry with Greek Yoghurt and Granola.
- Food textures are tailored to meet individual needs, ensuring comfort and accessibility for all residents.
- There is a board in the dining room with information on food and fluid requirements.

What could be improved?

- We found no areas in need of improvement.

3.6 Feedback and Complaints

Notes

At St. Cecilia's, feedback from relatives and friends are gathered through quality surveys conducted periodically. Additionally, a relatives' meetings on a quarterly basis to encourage open dialogue and gather valuable input.

In the past six months, the home has received two complaints from relatives regarding missing items. Following their investigations, the items were located in the laundry and promptly returned to the concerned parties.

What works well?

- There is a suggestion/comment box by reception.

What could be improved?

- We found no areas in need of improvement.

4. Residents' and Families' Feedback

Due to complex needs, only four residents are able to communicate clearly.

We received feedback from four residents and three family members. We enquired about satisfaction levels, diet, activities and personal development, access to healthcare, socialisation, safety, and communication with the home. Residents and family members expressed satisfaction with the service provided by St. Cecilia's.

The residents we spoke to said they feel supported and empowered to make their own decisions regarding mealtimes and social activities. All mentioned feeling warm and safe in their environment. Every resident who completed the questionnaire agreed that they are treated with dignity and respect and feel heard when raising any concerns or questions.

Family members expressed their satisfaction with the support their relatives or friends receive from local health and care services, including GPs, dentists, and pharmacies. They believe that satisfactory personal care, such as washing, hairdressing, and chiropody, is being provided.

Most family members reported that they are kept informed about any concerns related to their loved ones, such as falls, health issues, and future care plans. When asked whether they felt residents were safe in the home—specifically regarding visitor ID checks and clear evacuation plans—all relatives answered "yes" on the questionnaire.

Family and Friends' Selected Comments

"My brother is well cared for."

"I am impressed the staff go above and beyond."

"Management always keep family informed of any changes."

Residents' Selected Comments

"We are cared for well. The staff have been trained to a high standard. If we have a problem, we are able to raise these with management. The activities we do are inclusive, whatever our ability and we have our own rooms if we want to be alone"

"Things are good"

5. Staff & Management Feedback

We received feedback forms from seven 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 seven staff members we spoke to, two have been with the home for under 12 months and five have been there between 1-3 years.

Training

All staff undergo a Leonard Cheshire induction programme. This includes two-weeks of theory (classroom and online), and two weeks shadowing and practical work which can be extended if needed. In total training takes up to three months, with a six months' probationary period. Additional training is considered in response to staff requests.

All staff completing the questionnaire were asked about their interest in additional training opportunities; two said they would be interested in further training such as health and social care, and technical training such as feeding and catheter care.

Breaks

All staff said they receive adequate breaks during their shifts. They expressed satisfaction with the management of handovers and the opportunities available to support residents.

Management

Staff members appear to have a positive relationship with management, as everyone we spoke to during the visit said they feel heard when raising concerns or questions.

What works well?

- Staff and management have a good relationship

What could be improved:

- Two staff members said they would be interested in further training such as health and social care, and technical training such as feeding and catheter care.

5.2 Selected Comments from Staff

"The services are of high standard and due care is done at all levels"

"Website provides a lot of training"

"My manager is very supportive."

"Residents are treated as if it is their home, which of course it is and, we try to personalise everything."

"We adapt activities or go to the resident's room too".

5.3 Management

Notes

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

Diet

Each resident's needs are assessed on admission and adjusted as necessary. Residents select their meals from a menu that accommodates various dietary requirements, such as gluten-free. The majority follow a soft or puréed diet, while some are fed via a PEG tube. Residents' weights are monitored monthly; those who have or raise concerns are weighed weekly. The home collaborates with

three dietitians: one specialising in oral diets, one for PEG-fed residents, and one who provides general support for all residents.

Quality of care

The home is maintained at a comfortable temperature and fans are installed in the corridors throughout the building. Care staff check on residents' comfort at night, offering blankets and portable heaters to those who desire them.

Laundry services are done within the home. The home also has a sluice room – a closed area found in hospitals, care homes and special needs schools that allows for the safe and efficient disposal of human waste..

Safety

The deputy manager informed us that staff members have the option to wear either their own clothes or uniforms, though during our visit not all staff wore identification (ID) badges. Volunteers are provided with volunteer t-shirts.

All staff are familiar with the evacuation plan, including procedures for assisting residents who may need help during an evacuation.

Activities

Residents are encouraged to mix and socialise. In addition to various activities within the home, residents also enjoy outings using the home's bus or van.

There are no residents with English as an additional language (EAL) and there has not as yet been a need to support residents with diverse sexual identities. The deputy manager assured us that this support would be provided if needed. Families of residents with diverse cultural backgrounds provide guidance on lifestyle and dietary choices.

A religious service is held on Fridays in the onsite chapel, and some residents attend local church services on Sundays, either on their own or by taking the home's bus.

Community Services

The deputy manager said they are satisfied with the level of support residents receive from other local health and care services. They work in partnership with a wheelchair service. The GP comes every week or when needed. A hairdresser comes in once a month; this is arranged by the activity coordinator.

Staff

The deputy manager said they are currently satisfied with the level of staffing and that the home does not use agency staff.

6. Recommendations

Healthwatch Bromley would like to thank St. Cecilia's 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. The car park entrance is located on Hill Brow Road, but there are no visible signs from Sundridge Avenue indicating where to enter.

We recommend installing clear directional signs along Sundridge Avenue to indicate the car park entrance on Hill Brow Road and providing a map on St Cecilia's website to guide visitors.

6.2 General Environment

6.2.1. There are no dementia friendly clocks and calendars

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. Some wooden garden borders were broken.

We recommend repairing or replacing broken wooden garden borders to ensure safety and maintain the aesthetic appeal of the garden. Regular inspections should be scheduled to identify and address any future issues promptly.

6.2.3. Some slabs in the garden were loose.

We advise the home to secure the loose slabs in the garden to remove trip hazards and promote residents' and visitors' safety. Regular maintenance

checks should be implemented to identify and secure any loose or damaged slabs promptly.

6.2.4. One of the bird baths was unstable

We advise the home to secure the unstable bird bath to improve safety, and inspect all garden features regularly to identify and remove any potential hazards.

6.3 Safety and visiting

6.3.1. Some safety latches on bedroom windows were broken

URGENT - we recommend the home repairs or replaces these broken safety latches urgently, to improve the safety and security of residents, and conducts regular inspections of all windows to identify and address any issues promptly.

6.3.2. Not all staff wear ID badges

We recommend a policy requiring all staff to wear ID badges at all times while on duty, with regular reminders to ensure compliance and enhance security for residents and visitors.

6.4 Staff

6.4.1. Two staff members said they would be interested in further training such as health and social care, and technical training such as feeding and catheter care.

We recommend more frequent further training for staff, especially in areas such as health and social care, feeding, and catheter care. This will allow staff to refresh or gain new skills and allow access to continuous professional development. More frequent training can lead to improved care standards and staff confidence.

8. Glossary of Terms

AR	Authorised Representative
AI	Artificial Intelligence
CQC	Care Quality Commission
EAL	English as Additional Language
E&V	Enter and View
ID	Identification
PEG	Percutaneous Endoscopic Gastrostomy
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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healthwatch
Bromley

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	Bromley health watch
Date sent	05/12/2024
Report title	Quality Visits.
	Response (If there is a nil response, please provide an explanation for this within the statutory 20 days)
Date of response provided	
Response:	
1.	Thank you for your feedback regarding the car park entrance on Hill Brow Road. We understand the importance of clear signage, and we wanted to let you know that entrance signs have been ordered and are expected to be delivered on Monday, the 9th of December. Once received, we will arrange for them to be installed promptly. We appreciate your patience and understanding in the meantime.
2.	Thank you for your recommendation regarding dementia-friendly clocks and calendars. However, we would like to clarify that we currently do not have any residents living with dementia. A meeting was held with our residents, and it was collectively decided that for time management and daily activities, each room would be equipped with an iPad, which residents use to access the internet and manage their schedules. Additionally, 99% of our residents have full capacity to make their own decisions and have expressed their preferences accordingly. We appreciate your input and remain committed to supporting our residents in ways that best suit their needs.
3.	Thank you for highlighting the issue with the broken wooden garden borders. We wanted to let you know that materials are currently being sourced to repair the damaged raised beds. Once the materials arrive, the necessary repairs will be carried out promptly. Regular inspections will also be implemented to address any future issues in a timely manner. We appreciate your attention to this matter.

4.	Thank you for bringing the loose garden slabs to our attention. We are currently in the process of sourcing the necessary materials to secure and repair the affected slabs. Once the materials are available, the repairs will be carried out promptly. Moving forward, regular maintenance checks will be conducted to identify and address any similar issues to ensure the safety of residents and visitors. We appreciate your concern and recommendation.
5.	Thank you for your feedback regarding the unstable bird bath. We are pleased to inform you that the bird bath has now been safely secured. Additionally, we will continue to inspect all garden features regularly to ensure any potential hazards are promptly addressed. We appreciate your suggestion and commitment to safety.
6.	Thank you for highlighting the issue with the safety latches on bedroom windows. We are pleased to confirm that all broken safety latches have now been repaired, and all rooms are in good working order. Regular inspections will continue to be conducted to ensure that any future issues are identified and addressed promptly, maintaining the safety and security of our residents. We appreciate your attention to this matter.
7.	Thank you for your recommendation regarding staff ID badges. We would like to inform you that St. Cecilia's is currently in the process of transitioning to a new supplier, as our previous supplier is no longer under contract. We are working to resolve this matter as quickly as possible and hope to have the new name badges supplied soon. In the meantime, we appreciate your understanding and patience.
8.	Thank you for your feedback regarding further training for staff. We are pleased to inform you that all care staff have been invited to attend training sessions in areas such as health and social care, feeding, and catheter care. Additionally, a list of all available courses has been posted on staff notice boards to ensure everyone is aware of the opportunities for further professional development. We are committed to supporting our staff in gaining new skills and enhancing their confidence, which in turn will benefit the care we provide.
Signed	<i>Simon Chikumbindi</i>
Name	Simon Chikumbindi
Position	Service Manager