

Enter and View – Visit Report

Name of establishment: Tulsi House
Church Gardens, Wembley HA0 2RA
Tel. 0300 373 3000 (Network Homes)
Tel. 0208 908 4650
Email: adenike.otubusin@networkhomes.org.uk

Staff employed: Manager: Adenike Otubusin [Network Homes]
Care Provider: Westminster Home Care: Tina Hurn [Operational
Manager Brent] tina.hurin@whc.uk.com

Date of visit: 15th February 2019

Healthwatch authorised representatives: Ibrahim Ali [Volunteers & Projects Officer
Healthwatch Brent]
Mary Evans, Margaret Oyemade, & Nisha Gohil
[Healthwatch Brent Volunteers]

Introduction and Methodology

This was an announced Enter and View (E&V) visit undertaken by Healthwatch Brent Volunteers & Enter & View Volunteers, as part of a planned strategy to look at a range of health and social care services within the London Borough of Brent 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, announced or unannounced, to observe and assess the nature and quality of services and obtain the views of the people using those services. The aim is to report the service that is observed, to consider how services may be improved and how good practice can be disseminated.

The Healthwatch Brent team visit the service and record their observations along with the feedback from residents, relatives, carers and staff. They compile a report based on observations and interviews with residents, relatives, carers, and staff and making some recommendations. The Report is sent to the registered Manager for comments or corrections and response to the recommendations. The final version is then sent to interested parties, including the Head Office of the managing organisation, the Health Overview and Scrutiny Committee, Adults and Safeguarding Committee, CQC, Brent Council and the public via the Healthwatch website.

DISCLAIMER: 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, and those who completed and returned questionnaires relating to the visit.

General Information

Network Homes owns and manages over 30 older people's schemes in and around London and Hertfordshire. It was formed in 1974 as Brent People's Housing Association. In 1988 they changed their name to Network Housing Group. Over time, the increased range and types of homes provided across the whole housing market resulted in restructuring in 2016, bringing all four main housing associations and the group parent together to become a single organisation, Network Homes.

Tulsi House is described online [<http://www.housingcare.org>] as follows:

36 flats. Built in 2003. Sizes 1 bedroom, 2 bedroom

Extra Care scheme with 24 hours / 7 days),

Visiting management staff (Regional Manager and Team Leader),

Non-resident management staff and Careline alarm service with lift, lounge, laundry, guest facilities, garden, hobby room, activities room, hairdressing salon, with assisted bathing facility.

Background

The main goal of sheltered housing is often to support the residents, especially in the rehabilitation process; preventing unnecessary admissions to hospital or mental health institutions. The Enter & View visit aims to cover various aspects of life in the sheltered home, such as, psychological & social well-being, care planning, complaints, and staff/workforce.

The residents interviewed at Tulsi House were from a range of backgrounds. The Home was observed to be sensitive to the diverse cultural needs of the residents.

Care Planning

Since 3rd September 2018, Westminster Homecare provides the individual care to residents at Tulsi House. Residents mentioned the shortage of Staff and the need for Staff to have more training. One Relative said, "The Care Staff are brilliant, but the care package does not meet the needs of the client." The relative believed this was because the needs of the clients have changed over the years, with a higher number of individuals having very high needs. A Relative stated that due to the shortage of Staff and gaps in the care package, she has to take her relative to the GP. "They give personal care but care plans do not say they need accompanying to the GP," said one relative.

Relatives and Staff felt that if the care package matched the needs of the client, it would lessen the pressure on family members. "A GP visiting every 10 days would help many of the residents and it would reduce stress on family members," said one relative.

Another relative said, "I am involved with care plan, but it needs updating, it's a mess - I have done a lot of corrections to it."

One relative requested help in finding a local dentist that had wheel-chair access. She said that she had approach several dentists and none had the appropriate access - "I have checked all dentists on internet and he can't get out, he needs a dentist that can accommodate because head needs to goes back during treatment," said a relative.

One resident who did not speak English was requested a Gujarati speaking carer.

The Manager stated that there has been previous issues when residents are discharged from hospital such as one resident being returned to the Home in a stretcher without a wheel chair being provided by the hospital. The Manager asked them to return with a wheelchair because they cannot travel in the lift otherwise.

Emergency cords, found in all the rooms and bathrooms, are available and are connected to the Managers office. An out of hour's emergency helpline system is in place. If emergency help is required, a mobile warden can be available within 20 minutes.

Manager and Staff

The Scheme Manager, Adenike Otubusin, gave a very comprehensive account of how the Home was managed and functioned. Residents with a Care Package of 14 hours or more qualify to come to the Home.

Staff supervisions [Network Homes] is undertaken every 6 weeks with one to one sessions. Appraisals happen every April and October.

Westminster Homecare staff have supervisions every 3 months and appraisals once a year.

Since 3rd September 2018, Westminster Home Care has provided the individual care to residents at Tulsi House. Residents mentioned the shortage of staff and the need for staff to have more training. A relative stated that due to the shortage of staff and gaps in the care package, she had to help her relative which caused her stress.

Some Relatives felt that if the Care Package matched the needs of the client, it would lessen the pressure on family members.

Westminster Home Care appeared to be short staffed because some were on annual leave; however, no agency staff are currently used. We were informed that an estimated 5 Staff cover afternoons, 7 staff in mornings, and 1 at night. The type of Resident is said to have changed over the years, with current tenants have higher needs than previous. However, on further investigation we were told, "That instead of 7 staff in the morning there was 4 staff; and that Westminster Home Care is never fully staffed."

One Staff member said, "We are not organised properly, never fully staffed, that why staff are leaving....Brent Council should come and look more because we are overwhelmed."

One person said, "I can't remember when Westminster Home Care was every fully staffed. This is why things are going wrong. This was an issue mentions by several individuals who were interviewed.

One relative said, "The place is great but the Care Staff [Westminster] need training, they are not experienced enough and need more training from top to bottom, they are still learning. Management is not experienced enough and there aren't enough Care Staff."

One Resident informed HWB that she was not happy with the Care Staff: "They are horrible carers, and they upset me every day."

Another Residents stated, "They [Care Staff] are loud and I am not happy with them."

One Residents said, "Staff from Westminster Home Care did not attend a meeting because they say they are too busy."

A Family member also stated, "Westminster Homecare did not attend a residents meeting."

A Staff member when asked if they get enough support to do their job answered: "I need much more support."

Psychological Well-being

Network Homes provides a wide range of activities at Tulsi House. Activities include Games, Bingo, Music Night, Choir Practice, and days out. Travel is subsidised by 50% - normally residents will only have to pay £5 for travel to local activities. Tulsi House had a detailed weekly activities timetable displayed with the following information:

Every Monday = Gardening Club; Tuesdays = Games/Quiz; Wednesdays = Arts & Crafts workshop; Every 1st Wednesday = Church Service; Fridays = Armchair Exercise and Fish & Chips

The positive aspects of living in sheltered accommodation found on this inspection agreed with the review literature (Roos, et al. 2016) [1]: residents appreciated privacy, independence, participating in decision, being in a safe & secure environment, and being able to maintain links with family and friends. Tulsi House has a regular schedule of activities for residents. The Scheme Manager and the Activity Coordinator are responsible for managing these activities which are very well organised to a high standard.

Engagement with Relatives/Residents/ Carers

Each flat has a Care Line alarm services and a pendant alarm which is linked to Barnet Assist. Nearly all of the residents have high care needs. New residents undergo a risk assessment, which was described as more tenancy related; while the Care Provider undertake a separate risk assessment for new tenants nominated by Brent Council. The Care Provider has 24 hours to do an assessment and inform Network Homes. If the new potential tenant wishes to take the flat, Network Homes will do an assessment which takes around 1.5 hour. Social workers help the new tenant settle in or floating support workers from Elders Voice help settle them in. Network Homes provides an induction / introduction to the facilities at the Home for the new tenant.

The residents are encouraged by the Scheme Manager Adenike Otubusin [Network Homes] to approach her as a point of contact for all housing and tenancy related issues and the care agency Westminster are approached for all care/support related issue.

Network Homes undertakes resident surveys which are sent directly to the tenant or they are phoned directly. The Manager [Adenike Otubusin] was very proactive and friendly, and was held in high esteem by many residents. The Manager informed us that they liaise with Westminster Home Care every two week.

Westminster Homecare also have Management Staff on site which comprises of a Team Leader and a well-being coordinator.

Compliments/Complaints/Incidents

Several Residents and Staff members described the staffing problems faced by Westminster Homecare. A very frequent comment recorded by the HWB Team was that staffing was the biggest problems at Tulsi House. Residents stated that they enjoyed the Home and felt safe and secure; but the main issue mentioned was staffing shortages and the need for more staff training.

Recommendations

Recommendations for Network Homes

- Tenants said they were extremely happy living in the Scheme. Tenants praised the Network Homes Manager [Adenike Otubusin] - the Heathwatch Brent Team were highly impressed with the Network Homes Manager.

Responses from Network Homes

- Thanks for coming down with your team the other day, to take the views of our tenants. I am sure they appreciate and feel valued that other people outside the scheme listen to them other than we staff at the scheme. I do appreciate your comment about me

Recommendations for Westminster Home Care

- Review staff levels in light of comments by residents and relatives.
- Review and increase staff training in light of comments by residents and relatives.
- Review the format of the Care Plans to ensure they are fit for purpose.

Response from Westminster Home Care

- WHC has been in post since 3rd September 2018 and since then have retrained all the staff (including the bank staff at the basic induction level. They have completed their care certificate booklet, in addition to having a 6 & 12 week development appraisal. We inherited carers who typed over with no training records, so to get everyone trained to the level we have has been a good result. If it is recognised that staff require additional specialist training then that will be delivered in the coming periods
- We have put 8 new replacement staff within the scheme. In a crisis we have the back up of our community staff and from other schemes
- We do not believe we are understaffed, we have delivered the care to a very good standard
- Management will attend some of the meeting with care workers and service users

- If we find we are short due to sickness the allocation of care can be shared within the team. The TUPE staff still seem to be struggling to understand that they are not paid to hang around in the staff room they are paid to work a full roster and with 30 min break.
- Shifts are more structured and allocations are done to ensure continuity at all time.
- TUPE care workers went through a 5 day induction training with WHC
- Should staff feel they need additional training which wasn't covered in their 5 days induction training – this will be discussed through ongoing supervision.
- Staff have been fully inducted , with ongoing spot checks to ensure they are competent in their roles
- The Staffing numbers are set according to the total number of care hours that are commissioned and is delivered by the staff employed by the company
- With respect to accompanying residents to GP surgeries – we are only providing the hours provided by Brent, if extra hours are requested we will email Brent to authorise and if Brent decline the service user will have to arrange for the additional hours to be paid privately for escorting to appointments, etc.

References

1. **Jenny & Imogen Blood, Support Housing for Older People in the UK, Josph Rowntree Foundation, December 2012.** Roos, et al.