

Enter and View – Visit Report

Name of Establishment:	Lee Valley Care Home 20 Queenscourt, Wembley HA9 7QU
Staff Met During Visit:	Manager: Patricia Uwechue 4 staff 1 Resident
Date of Visit:	13 th Dec 2017
Healthwatch Authorised Representatives Involved:	Healthwatch Brent staff: Ibrahim Ali Healthwatch Brent Volunteers: Avni Kamani, Margaret Oyemade, Grace Johnson
Introduction and Methodology:	<p>This was an announced Enter and View (E&V) visit undertaken by Healthwatch Brent’s E&V Volunteers and staff members, as part of a planned strategy to look at a range of care and nursing homes within the London Borough of Brent to obtain a better idea of the quality of care provided, with a particular focus on Adult Safeguarding as part of the Safeguarding Adults Board work plan. 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.</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 and Healthwatch Brent visited the service and record their observations along with the feedback from residents and staff. This report has been compiled from the questionnaires, detailed notes of the visiting team, and observations of the 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 Safeguarding Adults Board, Brent Council Establishment Concerns Groups, CQC, Healthwatch England and the public via the Healthwatch</p>

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	<p>website.</p> <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>The principles of safeguarding adults</p>	<p>The Care Act 2014 defines adult safeguarding as protecting an adult’s right to live in safety, free from abuse and neglect.</p> <p>Safeguarding balances the right to be safe with the right to make informed choices, while at the same time making sure that the adult’s wellbeing is promoted. This includes taking into consideration their views, wishes, feelings and beliefs in deciding on any action. Health and social care organisations have particular responsibilities - In the Care Act 2014 ‘wellbeing’ is described as relating to:</p> <ul style="list-style-type: none"> • Personal dignity (including treating the individual with respect) • Physical and mental health and emotional wellbeing • Protection from abuse and neglect • Control by the individual over day-to-day life (including over care and support provided and the way it is provided) • Participation in work, education, training or recreation • Social and economic wellbeing • Domestic, family and personal wellbeing • Suitability of living accommodation • The individual’s contribution to society. <p>An important part of safeguarding is Informed Choice: being able to make a decision when they have been provided with all the information.</p>
<p>General Information on the home:</p>	<p>Lee Valley Care Services Limited is a Residential Care Home for service users with enduring mental health problems and Dementia. The mental illness is compounded in some by a diagnosis of dementia, COPD or some other chronic condition</p>

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	<p>as well as in some cases a significant forensic history. This is a small residential Care Home with a staff team of about 10 including the Director, Registered Manager, Support Workers, and a Cleaner.</p> <p>Currently there are seven service users. Care for adults with mental health problems at various stages of recovery but who are able to live in the community.</p> <p>The website http://www.cqc.org.uk/location/1-137525925 contains information about the home. The current unit premises is at 20 Queenscourt; while 22 Queenscourt is a new acquisition and intended to be an extension of the care home. The premises 20 Queenscourt is a semi-detached building providing accommodation for our seven service users and all other required amenities, including offices, toilets, bathrooms, lounge and kitchen.</p>
Physical environment	<p>Each resident had their own room, with bath and toilet. Most residents have personal care needs and are assisted by the staff. The rooms were observed to be clean and tidy. They were nicely decorated to the resident’s individual taste. The residents were supported in keeping their rooms tidy.</p> <p>The general appearance of the environment was clean and tidy. The cleaner was in the lobby cleaning – general decoration was reasonably. There is an outdoor garden space which residents are able to use.</p> <p>In one room we observed a sink that was covered. It was covered with cardboard which was attached to the sink with tape. We did not examine the interior of the sink, but on reflection this precaution appears very flimsy and easily removed by the resident – since the cardboard covering the sink was easily detachable. Sticky tape had been used to attach the cardboard to the sink.</p>

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	<p>The bedsheets were very clean and tidy. The cleaner said she is on duty from Mondays to Friday. It was not clear who supported the resident’s cleaning needs during the weekend. All the bedrooms were spacious and clean.</p> <p>The general level of cleanliness was good. But two members of the HW Brent team noticed an unpleasant smell – both on the ground floor and upper floor.</p>
<p>Management of Residents’ Safeguarding: practice and experience</p>	<p>The Manager stated that the safeguarding matters referred to the Brent Safeguarding Team sometimes take too long to conclude and accused members of staff may in some cases be suspended from work while such investigations continue.</p> <p>The Manager experienced this as ‘a very slow process.’</p> <p>Two alerts had been raised over the past year.</p> <p>One alert involved the case of a residents not using appropriate footwear, and another case involved a resident falling out of bed and injuring his hip. The former was explained in some detail that showed an appropriate level of care to prevent physical ill-health.</p>
<p>Identifying Needs of Residents/Family</p>	<p>The manager stated that the residents’ needs are identified initially from their referral documents at the time of their first arrival; care plans and risk assessments are then constructed by the Care Home on the basis of those identified needs.</p> <p>A member of staff stated that residents are encouraged to attend to their own personal needs as much as possible, and that they make a big effort to get to know the likes and dislikes of the residents.</p> <p>We were told by staff that Monthly meetings take place with service users. Residents have key workers, who they communicate with. The Trainer has 5 years of experience. Service users have been resident there for 3 to 4 years. At Christmas a party for residents is organised and the neighbours are invited.</p>

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	<p>The residents informed us that they were satisfied with the care and services provided. They said that people were treated with respect and they were safe. People’s care needs and potential risks to them were assessed. Staff prepared appropriate care plans to ensure that that people were well cared for. Their healthcare needs were closely monitored and attended to. Staff were caring and knowledgeable regarding the individual choices and preferences of people.</p>
<p>Methodology of Safeguarding:</p>	<p>Service users are informed of their rights to complain if they experience any conduct or treatment from any person(s) which violates their fundamental rights and make them feel abused in any way. At the time of their admission to the Care Home, each service user is given a copy of our Complaints Procedure and an extra copy is also displayed on the Noticeboard.</p> <p>The company also has a ‘Whistleblowing Policy’ which allows and protects staff members who witness any unlawful and unprofessional practice(s) such as abuse on a vulnerable adult to report such incidents anonymously.</p> <p>On asking how the Home dealt with any safeguarding alerts. The following written reply was given:</p> <p>‘At Lee Valley Care Services Limited, any incidents of abuse or suspected incidents must be:</p> <p>Reported to the Registered Manager in the first instance who will do a preliminary investigation (provided this cannot prejudice further investigations in the future either by the Police or the Local Safeguarding Team) and then decide whether the matter should be referred; and refer if she has to.’</p> <p>A staff member said they would report anything to the manager directly. If an incident was observed which was of concern, he said he would bring the resident to the manager to report any concerns directly.</p> <p>Another member of the team said that he would report any incidents or concerns directly to the manager. He had not observed anything that was a concern, and he described the</p>

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	<p>home as a warm and friendly place.</p> <p>One staff member said “Residents are happy in the environment and are easy to talk to. I would try and manage the situation myself, and if unable to manage I would speak to the manager.”</p> <p>With regards to the language needs of residents. The Manager stated that home has a diverse staff team, and there may be a staff member able to speak the mother tongue of a service user who cannot communicate in English proficiently. Alternatively the Care Home could make use of the services of professional interpreters and even seek the assistance of the Local Council in that regard.</p>
Prevention of Physical abuse	<p>The manager said they were aware that residents in the Home develop a Grade 3 pressure ulcer while they are in care, this should trigger a safeguarding alert.</p> <p>The manager stated that they have a policy for first arrivals and initial assessments which involves a complete Visual Body Check for every service user. On the basis of which they are able to tell who has or hasn’t any pressure ulcer at the time of admission. If for any reason(s) any service user develops any pressure ulcer, a Body Map is completed and reported immediately to their GP to start a treatment process. The prescription from the GP and treatment recommendations will then be included in the service users Care Plan and Medication Records.</p> <p>Describing a previous experience, a staff member said that residents can be physically abusive to staff and to other residents. Any incidents are reported to the manager.</p> <p>Staff help clean the bedrooms and also encourage residents to help clean as well. Most residents have personal care needs and are assisted by the staff.</p> <p>There were suitable arrangements for the provision of food to ensure that people’s dietary needs and cultural preferences were met. People were mostly satisfied with the meals</p>

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	<p>provided.</p>
<p>Supporting good mental wellbeing Preventing Psychological abuse</p>	<p>The staff members said they encourage the residents to spend time out of their rooms. Those with mental capacity are encouraged to decide what activities they would like to do.</p> <p>A Monthly planner was prominently displayed – very neatly presented – it showed a large number of activities, e.g., memory games, card games, church services, shopping trips, day centre visits, etc. Staff stated that activities are discussed and agreed with residents, and that activities are changed every 5 weeks. We were told that 3 people go to church on Sunday and are supported to attend church sessions. An example was also given on how a resident is supported to use another community service.</p> <p>The home had an activities programme, however, the Healthwatch team observed the need for a more varied range of activities so that people could have regular access to adequate and appropriate social and therapeutic stimulation.</p> <p>We observed a Thai Chi class with 5 residents. The instruction was calm and patient; the residents seemed to be enjoying the activity and participating willingly.</p> <p>The manager said the policy of the care home was to be respectful of the residents and to knock on the door every time they wish to enter.</p>
<p>Financial abuse</p>	<p>Residents that have capacity manage their own finances.</p> <p>Benefits are paid into residents' accounts.</p>
<p>Neglect and acts of omission:</p>	<p>The staff member said that other professionals were brought</p>

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	<p>in to help in their care – to encourage activities and social interactions. We were informed that a podiatrist also attends to see residents regularly.</p> <p>The residents appeared to be well fed, with access to 3 meals, snacks given such as fruits. The kitchen was observed while meals were being prepared.</p>
Preventing discrimination	No concerns were raised or observed?
Staffing levels	<p>At the moment there is generally a minimum of two support workers on duty at all times although numbers can rise at any time to as high as four or five - depending on the changing needs of the service users, the activities at the time of day, and the kind of activities at hand. For example: in the mornings Monday—Friday when there is a need to give service users personal care and to clean and tidy up the entire premises, there are normally 3 Support Workers, a Cleaner and the Registered Manager on duty.</p> <p>Over the past six months, they have employed five Support Workers one of whom left, while the remaining four are still currently employed. At night they have 1 sleeping and 1 waking night staff.</p>
Staff Training	<p>The Manager stated that all existing staff members have had Safeguarding Training either through Brent Council’s Continuing Professional Development (CPD) Training Service or through private Health and Social Care training providers. This training is renewable annually.</p> <p>New staff members are given ‘Safeguarding Vulnerable Adults from Abuse (SOVA)’ training as part of their induction and renewed annually. The Manager stated that annual training at the home is provided by Sandringham Oak Consultants & Training Centre Ltd., an independent training provider based in Wembley.</p> <p>The manger stated that staff have had de-escalation training and staff stated that residents are separated while they try and find the root cause.</p>

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	<p>A worker expressed a good knowledge of what safeguarding is, and understood DoLS and mental capacity. One staff member has not seen any safeguarding incidents in 4 months. He has not seen any aggression between residents, but he had a good understanding of what could trigger challenging behaviour.</p> <p>Another staff member was able to explain what safeguarding was and the procedures involved in reporting an alert. The staff member was happy with how residents were treated and explained how residents can sometimes be aggressive towards each other - “we separate them and try and find the root cause of the problem.”</p> <p>The manger explained that staff members are required to read, understand and comply with the Care Plan and Risk Assessment of every service user in their day-to-day work, and that new staff members are trained and inducted using the new Care Certificate’s 15 standards.</p> <p>Staff had been carefully recruited and provided with induction and training to enable them to care effectively for people. They had the necessary support, supervision and appraisals from their managers. The Healthwatch team felt that there were enough staff to meet the needs of residents.</p>
<p>Compliments/ Complaints Incidents</p>	
<p>Conclusions:</p>	<p>Although the activities board was excellent – there seem to be a lack of information or posters available or displayed.</p> <p>The lobby and entrance or other suitable places did not have a variety of information posters, leaflets, useful contact numbers, safeguarding leaflets/posters, etc. This would be of benefit for staff, visitors and relatives who enter the care home. However, the manager stated that the complaints procedure was displayed on the wall.</p>

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	<p>The two safeguarding alerts were discussed and detail and the manager felt that, once reported, the matter takes too long to be addressed.</p> <p>The member of staff responsible for cleaning and maintaining the laundry had not been given any induction or training. This staff member did not know who to report any concerns to.</p> <p>Although observations at the time of admission were undertaken, it would be good practice if regular observations were recorded especially when staff are attending to the resident’s hygiene needs. This would be an appropriate time when any marks or bruises could be observed and recorded by staff.</p> <p>The cardboard cover the sink in one residents room, was inadequate as a preventive measure, since it appeared to be very flimsy. Alternative measures should be put in place.</p> <p>The residents of the home were well fed and well dressed. The bedrooms were spacious, tidy and well decorated. The residents appeared to be safely cared for and the environment was pleasant. The activities were a diverse and regular. The staff and manager showed a high regard for the safety of the residents. The home appeared to have reasonable safeguarding procedures in place.</p>
<p>Recommendations:</p>	<p>Clarify if training is provided for all staff that are in contact with residents, in safeguarding and managing conflict. Arrange the training if not.</p> <p>Ensure that odours are identified, reported and eradicated as soon as possible.</p> <p>Provide posters and information leaflets about the services so that visitors, relatives, family, and staff benefit from having information made more easily accessible.</p> <p>Incidents should also be recorded as soon as possible after they occur (in addition to being reported to managers or senior staff).</p> <p>Regular staff briefings and support sessions should be in place, particularly after incidents so that staff can review the triggers,</p>

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	<p>ways these were handled, obtain support and learn from good practice.</p> <p>Ensure that staff have access to and attend regular safeguarding training and briefings, at least annually.</p>
<p>Recommendation to Brent Council</p>	<p>Please clarify if there are delays in responding to safeguarding concerns, or delays in providing feedback to referring organisations, and if so, clarify what is in place to reduce these delays.</p>
<p>Date:</p>	<p>01/02/18</p>
<p>Comments from Registered Manager, Patricia Uwechue</p>	<p>Lee Valley Care Home has always been commended for our particular attention to details in ensuring the Home is clean We have 4 incontinent service users and during the time their incontinent pad is changed there is bound to be an unpleasant smell. We are surprised because we were preparing lunch during your visit and at least three members of your team commented on the lovely aroma of food in the Home.</p> <p>In the above mentioned case, the care plan agrees with a flimsy coverage of the wash hand so if the service user is desperate to use it he can easily remove the cover, however we needed to discourage the service user as the service user sometimes defecates and urinates in the sink. The service user and his Social worker both participated in arriving at this care plan.</p> <p>We wish to explain that care plans are arrived at with input from the service user, social worker sometimes the GP and family members but most importantly the service user must be involved unless he does not have the capacity then his social worker and advocate will make appreciable input into his careplan</p> <p>The activities seen on the board vary periodically and are choices of the service users themselves. Art and Music therapy is accessed weekly from a professionally qualified therapist.</p> <p>We are not privy to resident's accounts. The service users have</p>

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	<p>appointee-ships and only spending money is sent to them by their finance officers/ placing authority</p> <p>Thanks for the above advice we will put up more posters and information on the board. However, we are trying to make Lee Valley Care Home," a home away from home" if you notice there are no signs on the front of the building we are trying not to be institutionalised.</p> <p>This is to update you on our Activities which you said are not varied enough. This was due to the weather. The weather is improving and we have added Bingo with Mary at Chalkhill on Tuesdays from 1:30pm-3:30pm. 3 service users have attended and they say they love it and will like to attend weekly. As the summer approaches and the weather gets warmer Service users are more agreeable to outdoor activities which includes trips to the Parks, barbecues in the garden, trips to places of interest like the South End on Sea and trips to Brighton which we have done in the past. We will also add new places to visit this year.</p> <p>Some of our service Users have planned Holiday.</p> <p>Thanks again for you encouragement to improving our service.</p>
Date	13/03/18