



Penerley Lodge Enter & View Report

October 2021

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Introduction

What is Healthwatch Lewisham?

Healthwatch Lewisham is one of 152 local Healthwatch organisations that were established throughout England in 2013, under the provisions of the Health and Social Care Act 2012. The dual role of local Healthwatch is to champion the rights of users of health and social care services and to hold the system to account for how well it engages with the public.

The remit of Healthwatch Lewisham as an independent health and social care watchdog is to be the voice of local people and ensure that health and social care services are safe, effective and designed to meet the needs of patients, social care users and carers.

Healthwatch Lewisham gives children, young people and adults in Lewisham a stronger voice to influence and challenge how health and social care services are purchased, provided and reviewed within the borough.

Our Key Functions

- 1. Gathering the views and experiences of service users, carers, and the wider community,
- 2. Making people's views known,
- 3. Involving locals in the commissioning process for health and social care services, and process for their continual scruting,
- 4. Referring providers of concern to Healthwatch England, or the CQC, to investigate,
- 5. Providing information about which services are available to access and signposting,
- 6. Collecting views and experiences and communicating them to Healthwatch England,
- 7. Working with the Health and Wellbeing board in Lewisham on the Joint Strategic Needs Assessment and Joint Health and Wellbeing strategy (which will influence the commissioning process).

Strategic Drivers

Our role is to support the voices and views of the local community and to ensure their opinions are taken into account when services are commissioned. The Health and Social Care Act 2012 gives local Healthwatch the statutory power to carry out Enter and View visits to publicly funded health and social care services to hear the views of service users, their families and carers.

Our reports are published on our website and shared with the South East London Clinical Commissioning Group, the Council's Scrutiny Committee, the Care Quality Commission (CQC) and the Health and Wellbeing Board.

This report presents the findings from an in-person Enter and View visit to Penerley Lodge Care Centre 36-40 Penerley Road, Catford, London, SE6 2LQ. The care centre is run by Premiere Care (Southern) Limited. The Manager is Ugochukwu Ifediora Ezinwa and the nominated individual is Shaun Cole.

During our visit, 27 people were living in the care home. The building was adapted from neighbouring properties, with accommodation over two floors and a large garden.

The purpose of our visit to Penerley Lodge was multifaceted. We decided to carry out an in-person visit to a care home in Lewisham to better understand the experiences of residents, staff and family members during lockdown. The service had also received a 'Requires Improvement' rating during their last CQC inspection with recommendations linked to the 'leadership' and 'safety domains'.



Methodology

During the height of the COVID-19 pandemic, local care home providers stopped allowing visitors into care homes as an infection prevention measure. In response, we introduced a new digital approach to delivering our Enter and View Programme. However, we have chosen to transition back to the delivery of physical Enter & View visits since the lifting of lockdown on July 19.

A key important element of our visits is to be able to visually observe the daily activity within a service. This type of observation was limited by virtual visits. Penerley Lodge Care Centre had been notified of the visit and gave their consent. They were also given posters in advance to distribute to residents, staff and family members about the visit and to provide further information about Healthwatch Lewisham.

Our visit to Penerley Lodge Care Centre was themed around the following aspects of care provision:

- Impact of COVID-19
- · Provision of care for residents with dementia
- Infection control measures
- · Communication between residents and family members
- Activities

Limitations

We recognise the increased pressures the COVID-19 pandemic has put on local services. However, we would like to thank the Manager for being so accommodating. They were quick to respond to all our queries, and inform us of their COVID-19 regulations to ensure we carried out a safe visit.

Family members were not present at the Enter & View visit. The Manager collated a list of contact details for people that were happy to speak to us about their experience. We successfully carried out interviews over the telephone the week after the in-person visit.

Disclaimer: This report relates only to the service viewed on the date(s) of the in-person visit, as well as the follow up telephone calls with family members, and is representative of the views of the family, residents and staff who kindly contributed to the report.

Key findings

The following information has been gathered through observations whilst carrying out an in-person visit and conversations our team had with the Manager and care centre staff.

Entrance

There is easy access for visitors as Penerley Lodge Care Centre is on a residential street. The traffic is minimal and free parking is available on the road.

At the time of our visit, the Information was out of date on the front door (Appendix: Photo 5); it explained that visitors were not allowed inside which was not the current policy. It is also not immediately obvious that the building is a care home, or which door is the main entrance.

There isn't a reception area when you first enter the building. A comments box can be found in the entrance way, however it could be easily missed and staff would need to point it out to visitors.

Infection control

An infection control system has been implemented for people entering the service. Lateral flow tests must be carried out by people either before a visit or on arrival before entering the home. Staff are required to wear a mask when on duty.

The Manager informed us that a significant number of staff have contracted COVID-19 over the previous 16 months. The pandemic has been emotionally and physically challenging for everyone. However, there was positivity amongst the staff now that the restrictions had lifted and family members were able to visit residents.

During our visit, 1 staff member and 1 resident had not yet received their vaccination. Staff said that there has always been enough PPE equipment available and they were consistently updated on the latest news and changes with COVID-19 by the Manager.

There did not appear to be any information outlining COVID-19 safety measures evident inside the building, for example guidance and reminders around washing hands or wearing face masks. All staff were wearing appropriate PPE and identification.

Communal space

Penerley Lodge has one main lounge and one dining room. They are both extremely spacious. However, the furnishings were quite dated during our visit. Most of the armchairs used by residents looked tired and the walls were discoloured in various places.

Within the care home, the walls contrasted to the skirting boards and floors to ensure a dementia-friendly environment. However, we noticed that the majority of light switches and switch boards on the ground floor are almost the same colour as the wall i.e white or off-white.

The armchairs have been grouped together in the main lounge, which enables residents to talk to each other. There isn't a designated 'quiet' space, but residents can choose to stay in their bedrooms if they would prefer. There are two visiting rooms, that have been set up adjacent to the dining area and these provide suitable space and privacy for family members and residents.

There is a TV in the lounge area which was on in the background during the visit for residents who didn't want to necessarily engage with the daily activities. Books, cds and board games were located in the dining area but appear worn with age (Appendix: Photo 2). We also couldn't see any newspapers available and there is no access to the internet in the communal areas.

There were nice personal touches throughout the care centre, for example the dining room had photos of residents' friends framed on the wall.

Residents are able to smoke out on the sizeable outdoor decking, which is situated outside the dining room and provides plenty of seating for residents to congregate. There is also safe access for residents to go to the garden. The garden is large with plenty of space for residents to move around, however it appeared plain and could be better utilised. (Appendix: Photo 3 and 4).

Wheelchairs are available for resident use. The layout of the building does mean that it can be cramped in and between certain rooms, for example the hairdressers, which could make it difficult for wheelchairs to access. However, the main corridors are wide and suitable.

Bedrooms

Bedrooms vary in size but they are light and spacious. Rooms are typically furnished by the individual tastes of the residents. We noticed some general wear and tear in the

bedrooms, including two partially broken curtain rails that were in need of repair.

En suite bathrooms are available for each room and also equally spacious. There are also two toilets available in the communal areas. In one of the toilets, the Emergency call button was placed too high for most residents to access.

Penerley Lodge has a policy of allowing all residents' bedrooms to be left open. This arrangement can reduce privacy and could potentially be a safety risk as residents can freely wander into other people's private space. We noticed that some residents were sleeping on the day of our visit and their doors remained open.

Food

Summer and winter menus are provided for the residents. Staff discuss menu options in monthly meetings held with residents and food options can change when requested. They have recently experienced food shortages with some of their regular supplies. However, they are proud to have a good relationship with a local butcher.

A food menu is provided on each table in the dining room with an Easy Read format. There is a choice of different food for residents with dietary requirements. Residents can also pour their own water from a machine.

We were given a tour of the kitchen, which was recently refurbished, and were told that measures had been taken to ensure food is safely stored. We noticed that the kitchen is quite a distance from the dining room, which could make it difficult for residents to make their own drinks or snacks.

Activities

A life review is carried out when residents first move into the care centre. This involves a family member or close friend giving a synopsis of the resident's life and interests. Each assessment is then shared with staff so that everyone is aware of the resident's individual needs, i.e. religion, dietary, lifestyle, and health.

An activity board is on display in the dining area (Appendix: Photo 1). During our visit, the board indicated that several activities were taking place on the day, which we later found out were not happening. For example, it said that a hairdresser was visiting but this hadn't been arranged on the day.

An activities white board is located in the lounge room and staff announce activities to residents every day. Memory games are the most popular, such as Bingo and quizzes, which took place during our visit.

The Activities Coordinator was friendly and enthusiastic, which created a vibrant atmosphere during the quiz with residents shouting out answers to the questions. There were varying levels of participation from the residents.

We noticed that the lounge was slightly more subdued when activities were not being carried out. It is evident though that there is a close relationship between staff and residents. Staff spoke to residents appropriately and on a first name basis. They supported residents whilst eating in a calm and friendly manner. They also take into consideration the importance of sensory activities for residents with dementia. Now that lockdown measures have lifted, they plan to invite musicians to assist with music activities, including karaoke. This was popular pre-COVID-19.

Communication between residents and family members

Now that lockdown has been lifted, family members and friends can organise visits inperson again. According to Penerley Lodge's protocol at the time of our visit, visitors had to ring the home and book a time slot for visiting on a daily basis. The care home do not restrict the numbers visiting the home at present, but family members and friends can only visit outside meal times.

The care home has private rooms to facilitate visits. These include soft furnishings, windows for natural light and fresh air, as well as enough room to comply with social distancing safety measures. It is also possible to sit in the garden or take residents out for the day.

During lockdown, window visits were available and daily phone or Zoom calls were organised by the manager allowing family members to keep in touch.

Signage

Penerley Lodge has clear signage outside each room, either with the resident's name or the purpose of the room, with an image alongside. However, there is limited signage on the walls throughout the home. We also noticed that all clocks are not dementia friendly.

Staff

The Manager informed us that Head Office stepped in to support recruitment during the COVID-19 pandemic. They have also updated their staff files to ensure information is recorded for each staff member for the past 20 years.

The service provides a variety of online courses for staff, including dementia support, safeguarding, and first aid training. Infection prevention protocol training was adapted in order for the care home to respond to the pandemic.

Health & Safety

Whilst visiting Penerley Lodge, we observed that surgical gloves and other health related materials were being mixed with household waste. These items should be separated when disposing of waste.

We noticed that an Automated External Defibrillator (AED) was not available onsite. Although this is not currently a legal requirement, it is strongly recommended by the CQC. The Manager explained that plans have been made to obtain one and staff had received the necessary training to use an AED.

The care home has a number of fire extinguishers on their premise. However, the fire emergency procedure was not displayed alongside them, in most places, throughout the building.

External doors to the care home are kept locked and can only be opened with a fob. A QR code is also available for night staff to record that they have visited residents.

There is no lift within the building. One of the staircases has a stair lift. It took up a lot of space and could be a potential safety hazard if residents on the top floor, or anyone on the staircase accidentally tripped over it. Not all of the staircases in the care home are accessible for people that might have mobility issues.

During our visit, renovations were also ongoing throughout the care home with wiring being visible.

Feedback and complaints

The care home has a comments box in the entrance. However, from our observation, it is unclear where residents can share anonymous feedback. Every month, Penerley Lodge organises a meeting with residents where they can raise concerns. Residents can also visit the Manager's office if they wish to speak in private.

Interviews

In addition to our observations, we carried out interviews with residents, staff and family members as part of the Enter and View process. We were unable to speak to any family members on the day but carried out phone interviews the following week.

Staff

- The home has 31 staff members; 5 contract, and 26 full-time. Structure of the team: Manager, Head of Care, Administrator, Team leaders, Care assistance, Kitchen supervisor, General staff, Kitchen Assistant and chefs.
- We spoke to 4 staff members during our visit. 1 staff member had been with the care home for 12+ years, 1 for 2+ years and 2 for less than 6 months. Everyone spoke fondly about the care home and thought they were well supported by colleagues and senior management.
- Staff felt safe during the pandemic and believe the care home implemented effective infection control measures to prevent the spreading of COVID-19. A staff member commented that Penerley Lodge was closed to visitors at least 2 weeks before most care homes when COVID-19 started and they praised the manager's organisation which they said was 'lifesaving'.
- Staff have good relationships with the residents. Monthly residents meetings are co-ordinated. Although not all staff were aware of the meetings. Staff are good at adapting in order to meet the residents' requirements. They expressed the importance of listening to people, doing their best to support them and making everyone's experience at Penerley Lodge easier.
- Staff said that activities not only help the residents but help everyone's mental health as they create a positive atmosphere. Pre-COVID-19, sing alongs and parties were very popular with residents. However, these type of activities had to stop during the height of the pandemic.

"I feel listened to by management and my feedback is always taken on board. They really trying to improve the care home."

- Staff member

"Although staff have come and gone, it feels like we are a well-connected team." - Staff member

Family Members

- We spoke to 7 family members, over the telephone, after our in-person visit at Penerley Lodge. The feedback received was positive. People felt the staff had done a great job supporting their loved ones since the outbreak of COVID-19. They commented on being kept well informed by staff and that they always update them about any changes relating to their loved one and the care home.
- The service was praised for its infection control measures and how it has successfully kept staff and residents safe and well during the pandemic. One family member initially expressed concern regarding a staff member not having the COVID-19 vaccine. However, they were informed that all staff are double vaccinated and this came as a relief.
- The care home's Assistant Manager was singled out for praise. Family members
 found her to be an excellent communicator who is personable yet professional. They
 valued the weekly WhatsApp calls with their loved ones which were facilitated by the
 Assistant Manager.
- During the height of lockdown, family members could see their relatives through window visits. Family members were disappointed by the limited face-to-face opportunities at the height of the pandemic but recognised they were necessary. To try and make it easier for everyone, the care home organised video and telephone calls to ensure regular communication was available for loved ones.
- Several family members said communication from the management team has been excellent over the past 18 months and they praised the work done by the manager.
 Family members were very satisfied with how the care centre has dealt with any concerns they have raised.
- One family member raised a minor issue relating to signage. They said that there are several doors at the entrance of the care centre and it can be confusing to know which one to use. They felt it would be beneficial to have a clear sign for visitors so they know where to enter.

"I feel very happy with the standard of care at Penerley. They are a great bunch and can't do enough for you" - Family member

"I'm really impressed... the way they run things is very slick. They are fantastic." - Family member

Residents

- At the time of the visit, the home had 27 residents. 18 of the residents had a diagnosis of Dementia. All of the residents were considered to have additional longterm conditions.
- We spoke to 8 residents whilst carrying out the in-person visit. Seven residents said they were happy living at Penerley Lodge Care Centre. One resident said that if they had a choice they would prefer living on their own or with family.
- The care centre offers a range of activities on a daily basis. We received multiple responses regarding people's involvement. Several residents commented on enjoying the quiz and it being a good way of occupying your mind. A couple of residents explained that they prefer to do their 'own thing' rather than get involved with all the activities available.
- 3 residents would like to have more television options available. For example, Penerley Lodge Care Centre currently doesn't have a Sky TV account and the residents felt this would be beneficial as they love sports programmes.
- 6 residents said the menu options are good. 1 resident said they love the pie and mash options and occasionally will request steak for dinner. 2 residents said that a wider variety of food would be appreciated.
- The residents said that they felt safe in the home. Staff are consistently on the premises to support them. One resident commented that they would prefer a little more privacy.
- The residents felt cared for and well listened to by the care centre's staff. They commented on staff always being available for a chat, very supportive and friendly.
- The majority of residents have regular contact with family members, via telephone and video calls. They have received regular visits from friends and family since the restrictions were lifted in July.

"It's a happy environment where we can joke around." - Resident

"I have a lot of respect for the staff." - Resident

"I'm quite happy with the set up as it allows me to always be able to do whatever I want." - Resident

Conclusion

Overall, Healthwatch Lewisham staff and Enter and View Authorised Representatives (AR) were impressed with the service provided at Penerley Lodge Care Centre. Residents and family members spoke highly about the service provided. Staff felt well supported by their peers and seemed to have good relationships with the residents.

The CQC inspection (2020) received positive feedback about the home from everyone they spoke with and our Enter & View visit mirrors this. The home is welcoming, with a calm atmosphere, and we identified staff and residents communicate well with one another. The staff we engaged with said they enjoy their work and feel supported by their colleagues and management. We felt the Manager and care centre staff promoted a positive culture at Penerley Lodge. Staff have also received extensive training and clearly understood their roles and responsibilities.

Family members left positive feedback about how the home handled the pandemic and looked after residents. Video and telephone communication were key during lockdown and the home was supportive in facilitating conversations between residents and family members.

The care home told us they had received excellent support from the local authority and SEL Clinical Commissioning Group during the pandemic. They explained that their last CQC inspection report was beneficial and were grateful for the help received from the local authority in order to make changes.

Through observation and interviews, our organisation felt some small changes could be made to better improve the care centre for residents, family members and staff. This includes information being more easily accessible, clear signage and implementing additional safety measures.

The last CQC inspection identified that food had not been stored safely on the premises. During our visit, we were informed that staff took immediate action to resolve this issue. We were able to view the kitchen and were told that it had recently been refurbished.

The service recently installed new bathroom cladding and has plans for further refurbishment. The Manager has requested funding for lino floors throughout the building and further training for staff. 12 staff recently carried out in-person First Aid training.

According to the CQC inspection, staff had not always been safely recruited, Full preemployment checks had not been completed. The Manager said that Head Office had stepped in and supported recruitment during the COVID-19 pandemic. They explained that it was challenging but they have updated their files to ensure information on each staff member is recorded for the past 20 years.

Penerley Lodge was found to be clean during our visit, but the building is dated throughout. In the communal spaces, furniture looks tired, books and games have been used regularly and look worn. We also noticed general wear and tear in the bedrooms, including two broken curtain rails which could be potential hazards.

Another area, which we identified during our visit, is signage around the care centre. we We couldn't easily identify COVID-19 safety measures inside the building. It's important to ensure infection control measures are clear for visitors. For example, the information on the front door is out of date and signage could be improved in communal areas and on corridor walls.

Health & safety is another area that should be considered. Fire extinguishers are available and easily accessible. However, the CQC inspection identified potential fire safety issues, which weren't addressed in the care centre's fire and evacuation procedures. It was recommended that the provider review their procedures.

We noticed that the care home has a policy of allowing all residents' bedrooms to be left open. During our visit, we raised this with the Manager because of a resident's right to privacy as well as the potential for other people to have unmonitored access into rooms and the subsequent risks.

We had concerns about the stair lift being rather clunky and a potential trip hazard for anyone using the stairs. The lack of a lift also means that residents whose mobility worsens have to be relocated from their second floor bedrooms.

In response we have developed a set of recommendations to help address areas at the care centre where there is room for improvement.

Recommendations

Information & Signage

- 1. Update information on the outside of the building to include current visiting protocols and additional signage directing visitors to the entrance of the care centre upon arrival.
- 2. The activities board in the dining room could be reviewed to ensure that the list of weekly activities is clearly outlined and available to residents, family members and staff. The board could also present and an opportunity for residents to share suggestions.
- 3. Further promotion and visibility of an anonymous feedback box within the care home for residents, family members and staff to share positives, concerns and suggestions for the care home.
- 4. Additional information for residents and family members would be beneficial when entering the property. For example, information could fall into three categories:
- Internal information and services available at Penerley Lodge Care Centre
- · Community events and groups
- Health information

Activities

- 1. The care home has a large garden which we felt could be better utilised. There is a lot of untapped potential and interested residents could get involved with gardening activities to help develop the area when the weather is suitable. Dependent on interest, we would suggest making this an addition to the activities programme and asking residents if they have any further suggestions regarding developments to the garden.
- 2. Several residents also commented on having more TV programmes available and gave live football as an example. A TV subscription sports package could be a good investment if there remains interest from residents.
- 3. To review and potentially refresh the cds, reading materials and games would enable residents to have a wider range of resources available to them.

Health & Safety

- 1. We recommend the service reviews its risk assessments and procedures regarding residents' bedroom doors being open with focus on the privacy and safety of residents.
- 2. Fire procedure information and clear consistent signage to nearest exits should be available throughout the care home
- 3. Use of hazard warning tape to increase awareness of the stair lift in order to reduce the risk of accidents.
- 4. Repairs should be made to the two curtain rails identified in the bedrooms in order to avoid a potential hazard.
- 5. Ensuring the covering of loose wires as well as any holes that are a health & safety concern.

COVID-19

- 1.COVID-19 safety measures should be clearly signposted throughout the care home
- 2. Availability of additional hand sanitisation stations which are easily accessible to residents, staff and visitors.
- 3.COVID 19 has had a significant emotional impact on staff, residents, family members and the wider community. When appropriate and safe to do so, the care centre should explore opportunities for external and internal events for residents, family members and staff.

Acknowledgements

Enter and View Authorised Representatives:

Charlotte Bradford, Clare Young, Manika Joshi, Mathew Shaw, Michael Frempong and Michael Kerin

Healthwatch Lewisham would like to thank Ugo Ezinwa, the Manager, for helping to facilitate the visit to Penerley Lodge and the residents, staff and family members who were interviewed and provided valuable feedback.

Appendix

Photo 1: Activities Board



Photo 2: Books and board games in the dining area



Photo 3 & 4: Garden furniture





Photo 5: Main Entrance







Waldram Place, Forest Hill London SE23 2LB 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	Ugo Ezinwa, Man	ager		
Date sent	13/01/2021			
Report title	Penerley Lodge E	Inter	t View Report	
	Response (If there is a nil r statutory 20 days	espor 5)	se, please provide an explanation fo	or this within the
Date of response provided	14/02/2022			
1. Please outline your general response to the report and what you are currently doing to address some of the issues identified.	First of all we want to thank you for your visit to Penerley Lodge. We do understand the strategic driver were to help your team understand the experiences of care home residents and staff now that the lockdown is lifted. The general report is fair and we are happy to improve the system to enable a well improved care our residents deserve. Following your findings and few recommendations, we have drafted an action plan to effectively achieve what has been highlighted in your report within a measurable time. The action plan put in place was approved by the operations manager.			
Please outline what actions you	Categories		Corrective Action Needed	Time Frame
will undertake as a result of the	General area	•	To put up a sign Board to identify	1st April 2022
report's findings and recommendations			To have a sign post that clearly shows the main entrance. To replace the tired and worn out chairs in the lounge with a range of design led product. Considering installing a dementia	1st March 2022 1st April 2022 for all chairs to be replaced 1st March 2022
			friendly switch light covering.	13° March 2022

	To increase the amount of directional signage in the home.	28 th February 2022
Activities	The care home has a large garden which we felt could be better utilised. There is a lot of untapped potential and interested residents could get involved with gardening activities to help develop the area when the weather is suitable.	As soon as possible
	Several residents also commented on having more TV programmes available and gave live football as an example. A TV subscription sports package could be a good investment if there	1 st April 2022
	 remains interest from residents. To review and potentially refresh the cds, reading materials and games would enable residents to have a wider range of resources available to them. 	21st February 2022
Health and safety	We will continue to install curtains and poles in resident's room after consultation with residents on their preference.	On-going
	 Look to replace wall clocks with dementia friendly clocks 	28 th February 2022
	To buy an Automated External Defibrillator for the home.	Date to be confirmed
	The fire emergency procedure to be displayed alongside the fire extinguisher.	21st February 2022

Signed Name Position

Ugo Ezinwa

Registered Home Manager