



# Welcome Care Home Enter & View Report

January 2022

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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 and scrutiny process for health and social care services
- 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 & 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 NHS South East London Clinical Commissioning Group (CCG), the Care Quality Commission (CQC) and Lewisham Health and Wellbeing Board (HWB).

This report presents the findings from a virtual Enter & View visit to Welcome Care Home, 26-28 Fordel Rd, London, SE6 IXP. The care home is run by Welcome Care Homes Limited. The Interim Manager is R. Elizabeth Karemi-Murphy.

At the time of our visit, 14 people were living in the care home, which is its maximum capacity. The care home is a double-fronted end of terrace house. It is located in a residential street that is a 15 minute walk from Catford Bridge railway station.

The purpose of our visit to Welcome Care Home was multifaceted. The strategic drivers were to help us understand the experiences of care home residents and the staff. We also wanted to carry out a visit due to the previous 'Requires Improvement' rating from the February 2020 CQC inspection report.

# 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 and carried out virtual visits over Zoom. We successfully delivered an in-person visit in October 2022 and planned to do the same at The Welcome Care Home in December. However, due to building work and COVID-19, we had to reschedule the visit to January and change it to a virtual format.

A key element of our visits is to be able to visually observe the daily activity within a service. Welcome Care Home had been notified of the visit and gave its consent. Management was 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 virtual visit to Welcome Care Home 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

The COVID-19 pandemic has put increased pressures on local health and care services. However, we would like to thank the Manager and their team for being accommodating when facilitating the visit. They promptly responded to all our queries, and kept us updated about any changes to internal COVID-19 regulations.

Family members were not present at the time of our Enter & View visit. However, the Manager collated a list of contact details for people that were happy to speak to us about their experience with the care home. Phone interviews were carried out in the two weeks following the virtual visit.

**Disclaimer**: This report relates only to the service viewed on the date of the virtual visit, as well as the follow-up telephone calls and is representative of the views of the family, residents and staff who contributed to the report.

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# Key findings

The following information has been gathered through observations whilst carrying out a virtual tour of the building as well as conversations with the Manager and care home staff over Zoom and telephone conversations.

#### **Entrance and corridors**

The care home consists of two houses, side by side, which has three floors. There are a couple of parking spaces available for visitors. Rubbish bins can be found outside the front of the property. A private garden can be accessed via a side entrance.

When you first enter the home, there is a security touch pad available that can be activated by staff. We noticed that the walls had a large amount of posters on them. There is also a 'Meet the team' board, which is colourful with pictures and names for every staff member. The Assistant Manager mentioned that they are currently in the process of updating the board.

We observed that the floor in the hallway is blue, which contrasts with the walls. The corridors appeared clean and uncluttered. There was a cleaning cupboard visible, with a security lock, in the corridor for staff to access. The wooden staircase to the upper floors had bannisters on both sides and we were shown the lift.

#### **Health and Safety**

Exit signs were easy to identify during our virtual visit. We noticed a fire extinguisher, when going up the stairs, and fire safety information on the wall. The care home is installing a new fire alarm system, which was evident in some of the rooms.

#### Infection control

All staff and residents have been double vaccinated. Residents have been offered a booster or flu vaccination, but not everyone has taken up the offer. Welcome Care Home experienced a COVID-19 outbreak in November, which involved three residents and one staff member who needed to isolate for 14 days. The home remained in close contact with family of residents and staff, that tested positive, and was closed to relatives during this period.

The Manager said it is important to keep an eye on staff testing, both in and out of the care home. During the pandemic, the Assistant Manager said that the care home received COVID-19 support from the London Borough of Lewisham. The home joined local forums and webinars for regular updates. We were also told that staff are aware of infection control, especially during isolation periods, and it has been very effective. During the visit, a cleaner could be seen wearing appropriate PPE equipment. Hand sanitisers and infection control signs were visible in the bathrooms.

#### **Communal space**

During our visit, several residents were seated in a sitting room enjoying snacks. The room had chairs, that appeared comfortable, with arm rests and a number of different artwork on the walls. We were unable to identify any newspapers, magazines, or board games in the room.

We were shown a room that the Manager referred to as the dining room. However, the signage on the door said it was the 'Common Room' (Appendix, 2), which could be misleading. We noticed that this space felt quite disorganised and less welcoming for residents than the sitting room. The medication storage fridge was positioned on top of two side tables. There was a large amount of informational flyers and documents in plastic wallets attached to numerous boards for staff (Appendix, 3 & 4). From an external point of view, the information could be seen as overwhelming and not easy to locate.

The managers said that the dining room is mostly used by staff. However, there was at least one resident in the room during our visit. This space could be less cluttered if residents regularly eat in here.

#### Conservatory

There is a conservatory with comfortable looking blue chairs that have arm rests. It has a number of tables and the walls are painted red. We could also see a selection of artwork on the walls. The care home has a TV available in both the conservatory and the sitting room, that were not being used during our visit.

#### Garden

You can access the garden via the conservatory. There are several storage sheds, where PPE and cleaning materials are kept. All the sheds have locks for security purposes.

One of the sheds has been converted into an outdoor visiting pod. This shed was used regularly during the height of the pandemic. Hand sanitiser and a range of furniture

are provided. During the winter months, this has become an additional storage space as it too cold to be outside.

We noticed that there was very little grass and greenery. There were tables available as well as blue wooden benches and matching chairs. A commemorative bench was donated by the family of a resident.

#### **Bedrooms**

All bedrooms are en-suite and have the necessary support equipment for those with disabilities. The home informed us that personal furnishings are welcome. We were shown around one bedroom, which has a TV, a comfortable chair next to the bed, and a desk. There was also a wardrobe and a large window that let in plenty of natural light.

There is a controlled heating system in the home and all the radiators have thermostatic valves. We were told by the Assistant Manager that radiators normally have covers. The one in the bedroom we viewed had lost its cover and was in the process of being repaired.

#### **Bathrooms**

The Assistant Manager informed us that they are currently planning to have the communal bathrooms updated. Management would like to transform the downstairs shower room into a wet room and the upstairs bathroom to include a walk-in bath. They hope that these changes will increase residents' choice of facilities.

During our visit, we identified toilets available on the ground floor. The care home had large signs posted with pictures demonstrating the type of facility. There is a bathroom downstairs fitted with a bathtub. However, the sign had a picture of a toilet only. This could lead to some confusion for staff, residents and visitors. The bathroom was being developed with a new, blue laminate floor being put in. The service was waiting for a bath hoist to be installed. This meant the bathroom was out of service, but we could not see any relevant signage. There is an emergency pull lead over the toilet and suitable equipment to support those that are less able. We could also see that shaving equipment was in the cupboard above the sink and clearly signposted for residents.

The first floor has a shower room with blue laminate flooring . A blue shower curtain was visible as well as a handrail and chair to support people.

#### **Kitchen**

During our visit, the care home's kitchen appeared tidy (Appendix 5). It had a notice board with an allergens list (Appendix 6). It also had a menu planner for residents, food safety information and signage on the walls (Appendix 7).

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It had one under counter fridge and a separate under counter freezer (Appendix 8). The cook, who was in the kitchen, shared the contents of the fridge which appeared clean and well organised. We were also told that residents can access this space under staff supervision. One resident is able to visit the kitchen to have alcoholic drinks. The Manager told us that they are exploring how to give residents more freedom to access the kitchen and are currently undergoing a risk assessment.

#### Food

As part of the process of a resident joining the care home, the service communicates with residents and family to understand who they are, what their needs are, and how they might change to develop a tailored, person-centred care plan. Food plans are individualised to account for dietary requirements.

The services run a seasonal four-week food plan. Residents can choose meals the day before. The home provides an overall food satisfaction survey for the residents to leave their comments. A cook speaks to each resident to confirm their choice on the day. We were able to speak to the cook who recently joined the team. They spoke passionately about the importance of providing a well-balanced diet for the residents. They also like to offer a diverse menu and strive to empower residents to make their own choices.

#### **Activities**

During our visit, we heard that Bingo would commence at 11:45am. The Manager told us that they are passionate about enabling mental and physical stimulation. The home co-ordinates a wide range of activities, which include Irish dancing and singing. They acquired an exercise bike in 2021, that has apparently been popular with residents. It comes with a virtual screen that offers a visual experience of exercising outside. We were informed that one resident is supported with a virtual bike tour after understanding more about their general interests.

#### Feedback and complaints

We were told by the managers that the home had systems in place to ensure key care requirements. This included engaging with residents to collect their feedback and make the necessary improvements. The Manager mentioned there was a plan to move the feedback box out of the dining room, which would make it more accessible. Surveys are anonymous for all staff and residents.

#### Communication between residents and family members

At the start of the pandemic, the home had some bereavements and the Manager said that this was a very challenging time for everyone. During lockdown, visits inside the care home stopped. As restrictions lifted, visitors were able to meet family in the garden's visiting shed. Communication with family and friends took place on the telephone and via Zoom.

The care home regularly uses WhatsApp to communicate with family members. Now that lockdown has been lifted, the care home welcomes residents' family and friends. They have a booking system to safeguard against infection spread. Pre-COVID - 19, it allowed visitors at any time. It now discourages visiting after 6:00pm, which is dinner time for residents.

#### **Staff and Training**

The Manager notified that the home has a diverse team with varying skills ranging from undergraduates, professionally accredited, and a new apprentice. There are 22 staff (two male and 20 female) with one Polish and 21 Black, Asian & Minority Ethnic. The average staff age is 35. The youngest staff member is under 18 and the oldest is 86 years.

Since September 2021, the home has organised online training, that is provided by Skills 4 Care. The Manager follows up training by making staff undertake a competency assessment. For food hygiene, they do practice examples to help increase staff knowledge. Staff are given time to complete training whilst they are on duty; "eighy mandatory courses need to be completed by staff by 23 March [2022] which worked out at one session a week". During our conversations with staff, they also appeared to be aware of safeguarding guidelines and said that information was easily accessible.

### Interviews

In addition to our observations, we carried out interviews with residents and staff on the day. We also spoke with family members over the telephone after the virtual visit.

#### **Management**

- The service is currently under interim management with the current manager joining in September 2021. Senior management have a long history with the service and have worked in a variety of different roles.
- A key focus for the service is the development of a robust training programme, which covers Dementia support and individual opportunities. Empowerment of staff is vital to delivery plans. A long-term project is to collect information from other care homes in the local borough, with outstanding ratings, so that the management team can get ideas and guidance to improve the service.
- Regular team meetings are carried out by the service, which are documented and shared with all staff members.
- A newsletter detailing any developments about the care home is regularly produced and shared with family members.
- The managers feel supported by the team and get on well with their colleagues.
   They also commented that the NHS South East London Clinical Commissioning Group (CCG) and the Care Quality Commission (CQC) have been extremely supportive during the pandemic.
- The management team understand the need for improvements within the care home. Plans include roof maintenance and double glazing of windows. There is ongoing work around the building, such as the creation of a downstairs wet room.
- The service wants to ensure that it creates a Dementia-friendly environment, which includes the development of a sensory garden.
- The managers told us that residents have good access to their local GP service.
  During the pandemic, there were some issues "escorting people to and from
  hospitals". One residents experienced long delays accessing physiotherapy. The
  Manager also praised the Occupational Therapy service for providing the resident
  with a recliner chair to support their mobility.
- Regarding complaints, the management's philosophy is to "not recognise them as just complaints but as an opportunity to improve". For example, they resolved a recent issue related to resident's clothing. They now label all personal items to ensure belongings don't get lost.
- Given the additional pressures on mental health from COVID-19, staff were supported by a capacity tracker, which management didn't feel was necessarily helpful. A local officer would regularly make contact to see how staff were feeling. We were told that extensive staff recruitment made it a slightly less pressured environment as they could respond to any absences or resident needs. Apparently staff are regularly encouraged to talk about living with, and after, COVID-19 and how they would cope.

- Every five weeks, they have a full staff and residents meeting. Communication is a big focus of the care home's service; "we all have a duty of candour, and if we see something that is not right, we should talk and learn from our mistakes". Staff have done a number of different training courses, including epidemic and pandemic disease awareness, safeguarding, level 7 leadership and management, food hygiene and safety. They also plan to do an apprenticeship in health and care management; "training is a big part for ourselves as well as staff".
- In terms of residents sharing feedback, the managers said that some people have more capacity than others. As part of the relative's meeting, they try to gather recommendations on residents' likes and dislikes; "especially to empower other residents who have more capacity so they are always included in the decision making". The home also provides surveys, and these are a work in progress. They commented that it is important to collect and analyse feedback within a good time frame to ensure effective improvements are made.
- The managers said that it was hard to support all the residents' needs at the height of the pandemic. Pre-COVID-19, residents participated in regular activities at The Diamond Club. During lockdown, the centre offered virtual sessions to support the home's activities programme. It was particularly hard for residents and families, especially when people couldn't visit, but they "tried to drive activities and increase that". A new motor tech system, that they are trying to implement, helps residents with Dementia as it is a more sensory experience.
- The Assistant Manager said that some residents have their own smart phones but can't use Zoom. Staff members supported them with video calls to ensure communication was frequent during lockdown. During the start of the pandemic, visiting being prohibited was hard for residents and family; "not being able to see their loved ones was very hard". It was very positive with the lifting of lockdowns. Being able to see family gave them a boost. Their whole physical and mental well-being improved with having access to family.

#### Staff

- We spoke with five staff during our virtual visit. The people we spoke to had primarily been working at the service for at least nine years, and we also heard the views of a staff member that recently joined the team.
- Everyone conveyed warm feelings towards their fellow staff members and management. The care home is very family-oriented which creates a welcoming environment for new staff.
- Staff expressed how well supported they feel within the care home. One member opened up about their long-term health condition and how the care home has supported them; "they were very helpful, as there are things I can do and can't do".
- COVID-19 has had a significant impact on the service and on staff mental health. One person admitted that some days they felt "uncomfortable and scared" since having COVID-19 as they are still recovering and fear contracting the virus again.
- The staff stated that the care home has implemented effective infection control measures to prevent the spreading of COVID-19. The Inspection Control Lead ensured us that there is a clear regiment for everyone's safety in the care home. They realise that keeping to these rules are important as "the pandemic might live with us for the rest of our lives. It's something we have to get used to", so it has become a routine. One staff member mentioned how they were supported financially and kept safe by being provided with "a taxi to bring us here and back home".
- Various staff gave detailed explanations on how they felt the service supported residents' needs, including communication, diet and religion. One staff member explained that each resident has a care plan they always abide by. They stressed the importance of their regular staff meetings to communicate updated versions of these care plans.
- A staff member commented on how they ensured the religious beliefs of residents are taken into consideration. They mentioned that "if they [residents] are only allowed to eat certain things, then we make sure to put that in place". Additionally, they spoke about residents going to Church regularly. This came to a halt as COVID-19 restrictions didn't allow access, but they still maintained religious practice in the home through playing Christian music. The staff do "whatever we can to make them [residents] happy".
- The service conducts surveys to gauge the resident's food preferences to produce a seasonal menu. The care home is attentive towards the residents' food requirements, which was evident when their chef said that they "adapt the menu to suit the dietary and health needs of the residents".
- Staff felt that the activities provided within the home are good and think that more options will become available in the near future. Due to the pandemic, the care home needed to ensure the safety of the residents and staff, so it limited the number of external visitors. Therefore, there has not been as much variety with the activities provided. For example, prior to the pandemic, residents attended the Diamond Club, a local social group where they engaged in activities two to three times a week. This has now been delivered virtually via Zoom.

- As the rules are easing up, the care home hopes to invite more external people in to engage with residents. The activities that are currently available include Bingo, dancing, or an entertainer that "comes in and dresses up, sings theme songs, does sing-alongs" for a special event, such as Valentine's Day.
- All staff said they have received training whilst working at Welcome Care Home. There have been multiple training courses they have had to undertake, such as: infection control, general health and safety, and safeguarding.
- One staff member said there's always ongoing training. Another staff member said they completed epidemic and pandemic awareness training and that they plan to do an apprenticeship in Health and Care Management.
- Staff members commented on the care home being understaffed and how it
  makes their role a lot more challenging. One staff member spoke about having few
  staff because others were isolating and described it as a "difficult" time. Another
  staff member said they they would appreciate having more staff employed as it
  would be helpful to have people cover anyone who falls ill.
- A staff member reflected on the early part of the pandemic being a really difficult time in the care home. They described residents not being able to see their loved ones as "traumatic" and how it was also very stressful for the staff. This negatively impacted their "well-being and spirit" and so residents greatly appreciated it when staff arranged for family to sit outside the home to see their family member at a safe distance. This member of staff expressed that with residents, "Just being able to see family gave them such a boost. Their whole physical and mental wellbeing improved with having access to family". This displayed a joyous time during a difficult one and demonstrated fruitful communication within Welcome Care Home.

"I love my job. I feel very supported by the management and the other staff members." – Staff member

"We support [residents] physically as well as mentally with their health issues. If there is a problem, there always is someone to go to."

– Staff member

"It is a small home and most of us have been here for a while. We support each other well with knowing each other's weaknesses and strengths."

- Staff member

#### **Family members**

- The care home's main form of communication with family members is through email and telephone. Everyone said that they have been kept well informed about COVID-19 vaccination plans. They insisted that they were able to maintain contact with their family members during lockdown through phone or video calls via WhatsApp.
- Most people consistently said that they felt the care that their family member received is very good and that that they felt reassured about the safety of their loved one at Welcome Care Home. They said that their relatives are treated with dignity and respect by the carers; "they look after her very well. I have no complaints".
- One person raised a note of concern about the lack of effective podiatry for a resident. The resident has Dementia and was unable to voice their discomfort.
   Following on from the telephone conversation, we passed it onto management, and they acknowledged and dealt with it responsibly, grateful for us raising the concern.
- Everyone that we spoke to said that they were treated politely and respectfully by staff.
- Family members feel listened to when they express their wishes and concerns. One person said with certainty that if the care home has any issues, then they are contacted first.
- When asked if they are invited to regular care home meetings, one person said that
  "they don't seem to have those" but that they believe it is a "wise" choice as they
  are being safe to avoid the spread of COVID-19. The manager had explained that a
  family and residents meeting was arranged before Christmas but had low
  attendance.
- Other family members commented that their loved ones are not aware of the COVID-19 outbreak, due to underlying health conditions. One person expressed that their loved one still seems to be "well and happy and cared for".
- Family members told us that their relatives had varying levels of involvement with activities. For example, a family member conveyed that their relative is "encouraged to join in". Whilst another family member mentioned that their relative is not capable of taking part in most activities, but they do enjoy singing. We found that most of the families answering questions spoke about their relatives not being able to participate in activities due to mobility issues or their lack of capacity. Staff members did mention to us that they sit with residents and engage through talking with them.
- It was suggested that a fortnightly newsletter could be created which contains an activities plan, so that family members are aware of what is on offer to their relatives, and can use this as a topic of conversation when speaking to them.

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"Excellent care and facilities with wonderful carers." – Family member

"I don't have any qualms about what they do. The only difficult thing is leaving." – Family member

#### **Residents**

- We attempted to speak with six residents during the virtual visit, but were only able to understand detailed experiences from two residents due to issues with internet connectivity and the capacity of some residents due to their Dementia diagnosis.
- Residents are involved with a few different activities, including drawing and painting. One resident said that they don't enjoy activities such as Bingo or drawing. However, they are hoping to resume crocheting and needlework now that they have had cataract surgery.
- Both residents said they were happy with the menu choices. One resident was
  enthusiastic about the menu and described the food as "nice". They gave a list of
  what they eat, which included "chicken, roast beef, salads". Staff members shared
  that there is a constant rotation of the menu to suit the tastes and standards of the
  residents. The comments we received indicate that the personalised food menus
  are appreciated by residents.
- We were informed that the care home allows residents to bring in furniture to use in their bedrooms for their own comfort. One resident spoke about the chairs in the care home and how they are comfortable, but they would benefit more from using an armchair.
- One resident described their life within the care home as "alright" as they are settled but are hoping to move out and "spend [their] old days doing something else".
- One resident is regularly visited by their family and friends. However, they do not speak with them on the telephone, but they do not mind.
- The residents stated that they felt safe throughout their time at the care home. One resident has been at the care home for 7.5 years and described the staff as "good and reasonable" people that treat them "nicely".

"They grant you food requests too. If you fancy something different."

- Resident

"If I have a request, they listen to me and try to get what I want." - Resident

"The staff here have been very good at helping me." – Resident

"I am settled living here." - Resident

### Conclusion

Overall, Healthwatch Lewisham staff and Enter & View Authorised Representatives were impressed with Welcome Care Home during our virtual visit. Family members spoke highly about the service provided to their relatives. Staff felt well supported by their peers and appeared to have good relationships with the residents during our tour.

The staff we engaged with said that they enjoy their roles at the home. There appeared to be a robust training programme and the managers said they strongly encourage staff development. It is a positive sign that most of the staff have worked at the home for over nine years, with some being there since it opened in 1990. The long tenure of most staff seemingly indicates that there is a close-knit working environment.

Conversations with staff indicated that management are understanding of their individual health needs and reasonable adjustments have been implemented by the home. Similarly, staff have been supported financially and kept safe with the provision of taxis to and from work in order to ensure social distancing. Staff did also mention the shortage of staff during the pandemic, which made their roles mentally and physically challenging; "We had few staff....but we managed to cope. It was difficult".

The service is person-centred with residents' preferences informing the development of the activities programme and food menu. The chef said that they "adapt the menu to suit the dietary and health needs of the residents".

Family members felt Welcome Care Home management and staff did a wonderful job taking care of their loved one during the pandemic. They felt that the service kept them well informed about anything concerning their family member, and any changes to COVID-19 restrictions.

Family members left positive feedback about communication support. Video and telephone calls were key during the height of the pandemic and the home facilitated conversations between residents and family members. When social distancing measures eased, staff members arranged for family to see their loved ones at a safe distance to ensure effective communication.

The response to the podiatry concerns shows that the care home takes complaints seriously and takes quick action to make improvements. The Manager took accountability and was very understanding when taking action to ensure this won't happen again. Their response to the situation was fast and their communication with us was effective.

Through observation and interviews, our organisation felt small changes could be made to better improve the care home for residents, family members and staff. This includes information being more easily accessible, clear signage being available to support the safety of staff, residents and visitors. There could also be a broader range of activities for residents so that they are comfortable, entertained and satisfied with their stay in the care home.

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

## Recommendations

#### Information and signage

- 1. The managers mentioned that they are currently updating the information boards within the care home. During our observation, we saw that most of the noticeboards are heavily cluttered and hard to read. We advise that out-of-date information is removed to make the necessary information more accessible.
- 2.During our virtual tour, we were unable to see any personalised information on the front of the bedrooms doors other than numbers. We recommend having residents' names and a photograph of them on the doors so that they can easily identify their bedrooms.
- 3.We advise replacing The Common Room sign with The Dining Room if staff and residents call it this, to avoid confusion.
- 4. The downstairs bathroom had been refurbished prior to our visit and was not in use whilst a new hoister had to be installed. We could not see a sign indicating this room was out of use and advise attaching information to the door so that it is clear for everyone.
- 5. The downstairs bathroom has a picture of a toilet instead of a bath, which may confuse those who are not familiar with the home. We recommend replacing the sign to indicate that the room is a bathroom.
- 6.We recommend 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.

#### **Activities**

- 1. The care home has a large garden which we felt could be better utilised. We noticed that there was very little grass and greenery. 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. 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.Two family members said that their loved one is too old or isn't capable of taking part in activities, but it wasn't discussed what they do to entertain themselves. We recommend that the care home engages with residents to understand what they would like to do if they are not engaged with current activities on offer.

#### Staff and training

- 1.During our conversations with a few members of the staff, we noticed that they appeared to be aware of safeguarding guidelines and that the information was easily accessible but it was unclear what protocols were in place. We advise doing a refresher's course to ensure that all staff are up to date with Safeguarding.
- 2. Some staff shared their concerns about contracting COVID-19. The service should continue to have conversations with staff about the safety protocols in place and make them aware of any external support. This could be effective to reassure those that feel uncomfortable or scared about the virus.

#### **Health and Safety**

1. Welcome Care Home was installing a new fire alarm system during our visit. We advise that the home carries out a fire safety drill and has the correct procedures in place for the safety of staff, family and residents.

#### Communication

- 1.We would advise that there are more regular staff, residents and family meetings. During our conversation with the manager in January, we noted that the next one wasn't scheduled until July.
- 2.A family member recommended having a fortnightly or monthly newsletter of what the planned activities are for residents. They would like to be more aware of what is offered to the residents and be able to discuss their activities when visiting a loved one.

Finally, we are grateful for Welcome Care Home helping facilitate the Enter & View visit with the provision of a virtual tour and the opportunity to interview residents and staff. However, some interviews were interrupted or cut short because of other staff or residents being invited to engage with our team. A co-ordinated schedule of interviews would have improved the structure of the visit and information captured.

Overall, the co-ordination of the Enter & View staff and residents interviews felt quite disorganised. Understandably, a lot goes on in a care home and there are multiple tasks to manage at one time. It might have been beneficial, for the sake of time, if management had delegated tasks to staff beforehand to make the virtual visit run more smoothly. We felt that the Zoom session could have been better structured, due to difficult circumstances. This is also a lesson for us too as we try to improve the delivery of our Enter & View programme, to ensure that we hear the voices of management, staff, family and residents.

#### **Acknowledgements**

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Healthwatch Lewisham would like to thank the Interim Manager, R. Elizabeth Karemi-Murphy, for helping to facilitate a virtual visit at Welcome Care Home. We would also like to thank the residents, staff and family members who were interviewed and provided valuable feedback.

# Appendix

**Cover Photo:** Welcome Care Home. *Photo courtesy Welcome Care Homes Ltd. 2022* 



Photo 2: The common room



Photo 3: Noticeboard

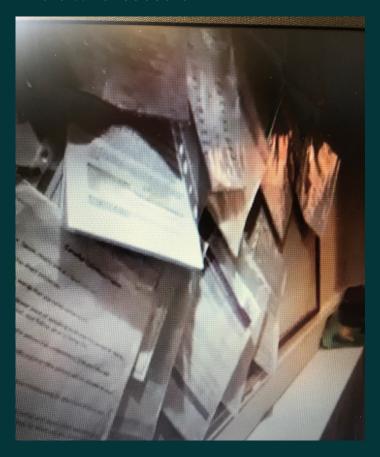


Photo 4: Noticeboard

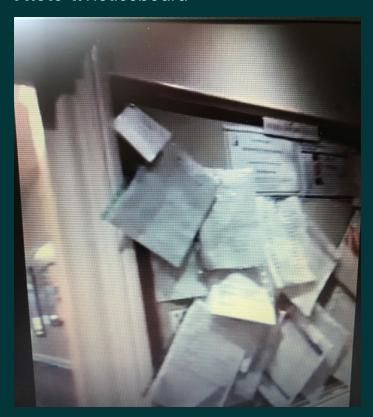
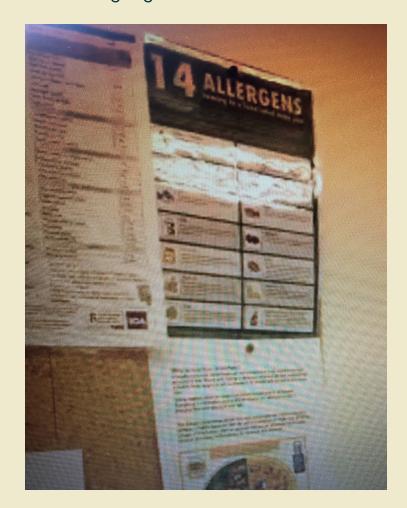


Photo 5: The kitchen



Photo 6: Signage



**Photo 7:** Signage and planners

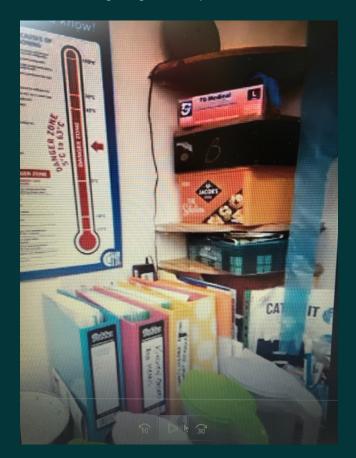


Photo 8: Fridge and freezer



