

# Enter and View Report

9 Old Oak Road, September 2<sup>nd</sup> 2025



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Visit Details	
<b>Service Visited</b>	9 Old Oak Road
<b>Manager</b>	Tom Bilonda
<b>Date &amp; Time of Visit</b>	11:00 AM September 2 <sup>nd</sup> 2025
<b>Status of Visit</b>	Announced
<b>Authorised Representatives</b>	David Crawley, Charmaine Goodridge
<b>Lead Representative</b>	David Crawley

## 1. Visit Background

### 1.1. What is Enter & View?

Part of the local Healthwatch programme is to undertake 'Enter & View' (E&V) visits.

Mandated by the Health and Social Care Act 2012, the visits enable trained Authorised Representatives (ARs) to visit health and care services – such as hospitals, care homes, GP practices, dental surgeries, and pharmacies.

E&V visits can happen if people tell us there is a problem with a service but can also be made when services have a good reputation.

During the visits we observe service delivery and talk with service users, their families, and carers. We also engage with management and staff. The aim is to gain an impartial view of how the service is operated and experienced.

Following the visits, our official 'Enter & View Report', shared with the service provider, local commissioners and regulators, outlines what has worked well, and makes recommendations on what could work better. All reports are available to view on our website.

### **1.1.2 Safeguarding**

E&V visits are not intended specifically to identify safeguarding issues. If safeguarding concerns arise during a visit, they are reported in accordance with the safeguarding policies. If at any time an authorised representative (AR) observes anything they feel uncomfortable about, they will inform their lead who will inform the service manager, ending the visit.

If any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the Care Quality Commission (CQC) where they are protected by legislation if they raise concerns.

### **1.2 Disclaimer**

Please note that this report relates to findings observed on this specific visit. It is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed on this date.

### **1.3 Acknowledgements**

Healthwatch Ealing would like to thank the service provider, service users and staff for their contribution and hospitality in enabling this E&V project to take place. We would also like to thank our ARs, who assisted us in conducting the visit and putting together this report.

## **2. About the Visit**

### **2.1 9 Old Oak Road, Hestia Housing and Support.**

On September 2<sup>nd</sup> 2025, we visited Old Oak Road 9 located in Acton on the border with Hammersmith and Fulham.

Old Oak Road is a mental health living facility with the purpose of housing and rehabilitating residents who struggle with mental illness. This home is a 9-5 step-down service run by Hestia Housing and Support.

Drugs are forbidden.

The home may accommodate up to 6 residents, and 5 were in residence at the time of the visit. This is an all-male facility.

The home has a staffing complement of 3 and is led by an area manager

## **2.2 Online Feedback**

There is no recent online feedback for this provider.

## **2.3 Purpose of the Visit**

Enter and View visits enable Healthwatch Ealing to form an impartial view of how the home is operated and how it is experienced by residents, and to produce a report. We are examining services that are not regulated by the CQC to allow the community to better understand how these services work. This hostel visit is also a part of our mental health work.

# **3. Executive Summary**

This section of the report details the key findings from our observations and the resident and staff feedback collected during our visit.

## **Observations**

### **What has worked well?**

- The garden is very well maintained.
- The home was clean and bright when we were visiting.
- A resident told us that the home recently added artwork to the lounge and chairs to the conservatory.
- Stairwells are kept unobstructed and clear for use.
- The sign in book is anonymised, this allows for visitors information to be kept private for anyone looking at it other than the home

### **What could be improved?**

- There is need for further refurbishments in the home, including painting the walls to be a consistent colour in the stairway, the windows of the conservatory cleaned, etc.

## Resident Feedback

### What has worked well?

- One resident told us that the staff were lovely, without a hint of discrimination whenever you spoke with them.

### What could be improved?

- Residents told us that they felt that communication with members of staff could be better. Due to this ongoing issue, they feel their complaints aren't followed up on as speedily as they could.

## Staff Feedback

### What has worked well?

- When a resident comes in and they have a disorder that the staff are unfamiliar with, Hestia offers specialised training, so they are set up for success.
- Staff feel supported by their co-workers and management in most cases.

### What could be improved?

- Support from management early on in cases.

## 4. Full Findings

During the visit we collected responses from 3 residents, 2 members of staff, and the 1 manager (6 people in total).

This report is based on their collective feedback, plus notes and observations made at the visit.

We would like to thank the staff and management for their time, and for their warm welcome and cooperation.

### 4.1 Observations

During our visit, our team of Authorised Representatives made observations on Entry and General Accessibility, General Environment, Safety and Visiting, Personal Care and Activities, and Staffing and Management. We have highlighted both good practice and areas for improvement.

## Entry and General Accessibility

### Notes

- There is step free access into the home.
- Visitors need to sign in.
- The home is served by several bus stops, the closest being on Uxbridge Road a short walk from the home.
- There is a narrow staircase

### What has worked well?

- Stairwells are kept unobstructed and clear for use.
- The sign in book is anonymised; this allows for visitors' information to be kept private for anyone looking at it other than the home.
- Information about the home is signposted in the entryway.

### What could be improved?

- No area for improvement



The Lounge

## General Environment



## Notes

- Old Oak Road is a converted home.
- The home has 5 with 3 living there at the time.
- Fire exits are signposted properly.
- All of the rooms are studio flats, except for one, which is one bedroom.
- Residents have their own kitchenette, ensuite facilities, etc.
- Two of the rooms were undergoing refurbishments during our visit, as two residents had recently moved on.
- The home is operated by Hestia Housing and Support, but it is owned by Notting Hill Genesis, which acts as the landlord. Any renovations and maintenance

## What has worked well?

- The garden is very well maintained.
- The home was clean and bright when we were visiting.
- A resident told us that the home recently added artwork to the lounge and chairs to the conservatory.

## What could be improved?

- There is need for further refurbishments in the home, including painting the walls to be a consistent colour in the stairway, the windows of the conservatory cleaned, etc.



The Garden at Old Oak Road.

## Safety and Visiting

### Notes

- Fire alarms are tested weekly, whereas full fire drills are conducted once a month.
- All staff are trained in safeguarding alerts.
- A resident told us of an issue they had with a resident in the past, but the home addressed it, and that the resident that caused the issue no longer resides at the home.

### What has worked well?

- Staff and Residents all told us that they felt safe at Old Oak Road.
- Residents did not report any issues with visiting arrangements.
- There have been no recent safeguarding alerts.

### What could be improved?

- We found no potential areas for improvement.



The communal kitchen.

## Personal Care, Diet, and Activities

### Notes

- The home facilitates activities for the residents including but not limited to, film club, board games, badminton and outings.
- Residents are supported in making their own breakfast, lunches and dinner. There is a communal kitchen on the ground floor of the hostel.
- 9 Old Oak Road is not a CQC service. Due to this, staff cannot make residents take their medicine, nor do they monitor residents taking their medicine as they are trusted to do so independently. Medicine is counted once a week to ensure it is being taken.

#### **What has worked well?**

- Residents have expressed satisfaction with the variety of activities that are offered at the hostel.
- Residents at Old Oak Road are able to take part in activities at their own home, other homes in the Hestia portfolio, and virtually.
- Old Oak Road has gotten board games for a resident who requested them.

#### **What could be improved?**

- No room for improvement

## **4.2. Resident Feedback**

At the visit, we collected feedback from 3 residents. Their stays ranged from 1 to 4 years. .

#### **Staff**

- Residents had mixed things to say about the staff, with some having high praise, and others saying they had difficulty communicating with them.

#### **Environment**

- Residents had mixed things to say about the environment of the home. They told us that they did not feel happy in the home due to other residents' behaviour.
- Residents told us that they felt safe in the home.

#### **Food**

- Residents cook their own food independently. They are supported by staff if they need it.
- Residents purchase their own food.

## Improvements

- A resident told us that they thought the landlord of the home [for the record, not Hestia] is slow to do needed refurbishments

## Feedback and Complaints

- Residents told us that they felt that communication with members of staff could be better. Due to this ongoing issue, they feel their complaints aren't followed up on as speedily as they could.

### Selected Comments

#### Thoughts on the Environment:

*"I think it is lovely, they recently added artwork to the lounge and added chairs to the conservatory."*

#### Thoughts on Staff

*"I find it difficult to communicate with some staff. I feel like policies and procedures are not as concrete as they should be."*

*"The staff are lovely. I feel like there is no hint at all at any discrimination in them towards you when they speak to you."*

## 4.3. Staff Interviews

During the visit, we received feedback from 3 staff members.  
Length of service ranges from 9 to 18 months.

- The home has a staff complement of 3, supported by an area manager. Two members of staff on the day shift Monday to Wednesday and one member of staff on Thursday and Friday. If support is needed outside of working hours, there are other homes in the Hestia portfolio nearby that have staff that can help.

## General Feelings

- Staff enjoy their work at Old Oak Road and feel supported by their colleagues and management in most instances.

### **Training**

- Trainings staff have undertaken but are not limited to include: Safeguarding,
- When a resident comes in and they have a disorder that the staff are unfamiliar with, Hestia offers specialised training, so they are set up for success.

### **Accessing community health and social care services**

- Relationships with Ealing RISE and local GPs are good.
- There have been no reports of residents having difficulty getting appointments.

### **Communicating with patients and their family**

- Some days are easier than others when it comes to communicating, but we always try.
- Key working sessions are especially rewarding.

### **What could be improved?**

- One member of staff noted that it is hard getting support or understanding from management when facing challenges until a situation escalates.

## **4.4 Management Feedback**

We also spoke with the area manager of Old Oak Road about a variety of topics.

### **In Summary**

#### **Helping residents to become independent**

- We hold activities that help residents learn to become more independent. As a step-down service, they are most of the way there, they just need some final pushes.

#### **Raising Safety Concerns**

- All staff are trained on safeguarding methods.
- We have had safeguarding alerts in the past, but none recently.

#### **Challenging Aspects?**

- One of the challenging aspects is being allowed to get residents move on. We have residents who are ready to be independent, but are unable to get housing from the council based on how they are classified.

### Improvements

- We have been pushing for renovations from the landlord for a while. We need the work done. Notting Hill Genesis is the landlord.

## 5. Recommendations

Healthwatch Ealing would like to thank the service for the support in arranging our E&V visit.

Based on the analysis of all feedback obtained, we would like to make the following recommendations.

### Recommendations

#### Observations

- There were several examples of needed maintenance and renovation in the home.
- A resident told us that needed refurbishments are not done in a timely manner.

*5.1: We understand that the management of the home is working with the landlord to ensure that renovations are done in a timely manner. However, we recommend that they continue their communication to ensure that maintenance is done.*

**Response: Staff have raised concerns with NHG on multiple occasions regarding when cyclical works will be carried out at the service; however, NHG has not provided a response to staff enquiries.**

**Hestia, as the managing agent, is responsible for internal room-related works, including decorating bedrooms and flats, and the replacement of items such as bed frames, mattresses, and curtains. NHG, as the landlord, is responsible.**



**for major works and repairs, including the renovation and upkeep of communal areas.**

**Cyclical works are now required to renovate the entire communal area, including hallways. Staff will continue to challenge and escalate this issue to ensure that the communal areas are redecorated. Service management will follow up directly with NHG regarding the scheduling and completion of the required cyclical works.**

**Refurbishment of flats is completed when a flat becomes vacant. This process is managed jointly by the landlord (NHG) and the managing agent (Hestia), in line with agreed responsibilities.**

**Where an occupied flat requires minor works—such as replacement of a bed, mattress, curtains, or repainting—these are identified and addressed in a timely manner. The service completes weekly and monthly accommodation checks to ensure flats are maintained in good condition. In addition, daily, weekly, and monthly health and safety checks are carried out to promptly identify any repair or maintenance needs.**

**Residents are actively encouraged to report emergency repairs outside of normal working hours. Staff are on site Monday to Thursday from 9:00am to 5:30pm and until 4:30pm on Fridays. As emergencies may occur during evenings or weekends, residents are provided with clear guidance on how to report these issues directly. Staff then follow up on the next working day to ensure appropriate action has been taken.**

**There may be occasional delays in completing repairs due to the availability of specific items or contractor scheduling. In such cases, residents are kept informed of progress, expected timescales, and confirmed appointment dates and times.**

**Access issues can also affect repair timescales where residents are unavailable. To mitigate delays, written consent is requested where appropriate to allow contractors to enter flats and complete works safely and efficiently.**

**Overall, the service maintains robust systems for identifying, reporting, and monitoring repairs and maintenance, ensuring accommodation remains safe, well-maintained, and suitable for residents.**

**Some maintenance issues are classified as non-emergency. In these cases, contractor attendance is arranged in line with their appointment availability. Hestia does not directly manage contractor bookings or appointment scheduling; however, we work collaboratively with the landlord to ensure that**

**all required works are completed within reasonable and appropriate timescales**

### **Resident Improvements**

- Residents told us that they can find it difficult communicating with staff.
- Residents told us that they felt that policies and procedures could be made clearer by staff.

*5.2: We recommend that Hestia reviews its complaints procedure in order to ensure that it is being followed properly. We also recommend that staff continue their best efforts to be communicative with residents on all matters.*

**Response: Staff are available and approachable to support residents, and the service aims to promote open communication at all times. While residents may occasionally express dissatisfaction, particularly in relation to housing-related matters that fall outside the service's remit, staff continue to offer guidance, signposting, and support where possible.**

**Service users are provided with house rules, which outline expectations and responsibilities within the service. While formal policies and procedures are not routinely issued in full to residents, relevant information is shared in an accessible and appropriate format to support understanding and compliance.**

**Hestia operates a formal complaints policy, which all staff are required to follow. Complaints are managed in a timely and transparent manner in line with policy guidance. Although residents may not always agree with the outcome, each complaint is taken seriously, investigated appropriately, and responded to within agreed timescales.**

### **Staff Improvements**

- When a resident comes in and they have a disorder that the staff are unfamiliar with, Hestia offers specialised training, so they are set up for success



5.3: *This is an excellent example of good practice, and we recommend that this continue in the future. If this practice is done in all homes in the Hestia portfolio, then that is very promising.*

**Response:**

**Hestia has a robust learning and development framework in place.**

**All staff are required to complete mandatory and ongoing training, covering a wide range of topics including autism and neurodiversity, epilepsy, suicide awareness, personality disorders, safeguarding, and other relevant areas. This ensures staff are appropriately skilled, informed, and able to meet the diverse needs of residents.**

- One member of staff noted that it is hard getting support or understanding from management when facing challenges until a situation escalates.

5.4: *We recommend that management review their policies and procedures when it comes to an employee reporting an issue to deem whether the current protocol is appropriate. We understand that in a facility such as this, that a lot of things are on a case-by-case basis. However, employees should always feel supported by management.*

**Response: The service recognises the importance of providing consistent support to staff and promoting an open and supportive working culture. All staff are actively supported by management, and formal line management supervision is carried out every six weeks. These supervision sessions provide structured opportunities for staff to discuss challenges, workload, wellbeing, and any support needs.**

**In addition, internal clinical supervision is also provided every six weeks, offering staff a further opportunity to reflect on practice, manage complex situations, and receive professional guidance. All staff receive appropriate training to ensure they are competent and confident in their roles.**

**We acknowledge that certain tasks or situations can at times become challenging or overwhelming. For this reason, clear support systems are in place to enable staff to raise concerns, seek guidance, and discuss difficulties at an early stage. Staff are encouraged to use supervision, team meetings, and management support proactively. It is also the responsibility of staff to communicate openly with management, particularly if they are unclear about tasks, experiencing difficulties, or feel unable to cope with specific duties—**

**especially when lone working. Early communication allows appropriate support, guidance, or adjustments to be put in place before issues escalate. Overall, the service remains committed to maintaining a supportive environment where staff feel able to raise concerns and access support promptly.**

## 6. Glossary of Terms

AR	Authorised Representative
CQC	Care Quality Commission
Enter & View	E&V

## 7. Distribution and Comment

This report is available to the general public, and is shared with our statutory and community partners. Accessible formats are available.

If you have any comments on this report or wish to share your views and experiences, please contact us.

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