

Enter and View Report

Georgian House Nursing Home January 16th 2024.



A report by Healthwatch Ealing

“[The staff] are always there for me. They are why I enjoy being here

- Resident

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Visit Details	
Service Visited	Georgian House Nursing Home, 20 Lyncroft Gardens, Ealing, London, W13 9PU
Manager	Cecile Bauzon
Date & Time of Visit	11:00 am January 16 th 2024
Status of Visit	Announced
Authorised Representatives	David Crawley, Yee Phyo, Dillon Gill
Lead Representative	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 being experienced.

Following the visit, 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 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 a concern.

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 visit 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 Georgian House Nursing Home

On January 16th 2024, we visited Georgian House Nursing Home which is located in Ealing.

The service is operated by Mr & Mrs M Hopley

The home has 21 bedrooms which may accommodate up to 26 residents, there is double accommodation available in 4 rooms. Due to residents wanting single occupancy, 21 people were in the residence at the time of the visit.

The home has a staffing complement of 22.

2.2 CQC Rating

The CQC is the independent regulator of health and adult social care in England. They make sure health and social care services provide people with safe, effective, compassionate, high-quality care and encourage care services to improve.

Georgian House was last inspected by the CQC in October of 2022. The inspection [report](#) gave a rating of 'Requires Improvement' overall, with individual ratings of 'Requires Improvement' for being Safe, Effective, Responsive, and Well-led, and 'Good' for being Caring.

2.3 Online Feedback

There is no recent online feedback for this service.

2.4 Purpose of the Visit

Enter and View visits enable Healthwatch Ealing to form an impartial view of how the home is operated, how it is experienced by residents, and to produce a report highlighting areas of good practice as well as scope for improvement.

This visit is part of a series of E&Vs to care homes that are rated as 'Requires Improvement' by the CQC.

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 has a ramp, making it accessible for residents who have mobility issues.
- Rooms have a picture of the resident, their name, and facts about them promoting a sense of individuality and a thoughtful approach to residents with cognitive needs.
- The home uses dementia-friendly signage very well, including arrows underneath signs to help residents find where rooms are located.
- There is a dementia-friendly activity board.

What could be improved?

- The food menu we saw posted on the wall is not designed to be dementia-friendly.
- The refuse area signage in the garden has been damaged by weather and is hard to read.
- Staff told us that they would like to have a dedicated activity coordinator role.

Resident Feedback

What has worked well?

- Residents expressed positive reviews of staff, describing them as helpful, kind, good, and lovely.
- The environment was described by residents and family as quiet, calm, stress-free, and cozy.
- Some residents noted that the care home service felt very much like home.

What could be improved?

- Some residents conveyed that there were not a lot of activities that they found personally enjoyable or that they could join in due to physical barriers.

Staff Feedback

What has worked well?

- Staff took food hygiene very seriously and wore appropriate disposable PPE when serving food to residents.
- All staff reported that they were sufficiently trained in safeguarding procedures.
- The provision of apprenticeships and employee recognition programs, including employee of the month/year, shows a commitment to staff development.

What could be improved?

- The staff expressed a desire to increase the frequency of outings for residents, especially during the summer months.

4. Full Findings

During the visit, we collected responses from 8 residents, 15 members of staff, the provider, and the service manager (25 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, their warm welcome and their cooperation.

4.1 Observations

During our visit, our team of Authorised Representatives conducted assessments in areas such as Entry and General Accessibility, General Environment, Safety and Visiting, Personal Care and Activities, and Staffing and Management. We have identified commendable practices as well as areas that could benefit from improvement.

Notes

- A limited number of parking spots, around 3-4, are available in front of the home, supplemented by street parking.
- The South Ealing underground station is conveniently situated at a short distance from the home.
- Visitors are required to sign in upon their arrival at the facility.
- Information about the home, including safeguarding procedures, is clearly signposted on the walls.

What has worked well?

- A code lock on the front door improves security, requiring a staff member to enter the code for entry or exit.
- The main lobby prominently displays the names and pictures of all staff members and management.
- Effective use of dementia-friendly signage, complete with arrows beneath signs, facilitates residents' navigation.
- The dementia-friendly activity board is visually appealing and signifies dedicated efforts to provide a home environment conducive to dementia-friendly care.

What could be improved?

- The menu displayed was not deemed dementia-friendly. Consider revising and adapting it to better meet the needs of residents.



General Environment

Notes

- The facility is a converted home laid out over two floors, with residents residing on both levels.
- Not every room has ensuite facilities, due to this there are communal bathrooms.
- A spacious garden is accessible to residents, providing an enjoyable space, particularly during warmer months.
- There is a lift for residents to use, it should be noted that the lift was undergoing renovations during our visit.
- Rooms are generously sized, with some on the first floor having access to balconies. Balcony access is restricted when residents are unaccompanied.
- A dedicated quiet room, adjacent to the main lounge, has been designated for residents experiencing sensory-related issues.
- There is a book and board game library available.

What has worked well?

- Individual rooms feature pictures of residents, along with their name and personal facts, posted on or near the door. This personal touch improves the sense of identity and familiarity.
- Residents and their families are afforded the freedom to decorate their rooms with personal belongings, fostering a more personalised and homely atmosphere.
- The main lounge is equipped with large, comfortable chairs, providing a cozy and inviting space for residents to use.



What could be improved?

- The refuse area signage in the garden has been damaged by weather and is hard to read.

Safety and Visiting

Notes

- Fire safety tests are done quarterly, or when a new person is hired as a part of their induction training.
- Access to the home requires assistance from a staff member.
- There are number pad locks throughout the home.
- Storage in the back garden is locked via padlocks.
- The garden is secured by locks, so residents cannot wander off.

What has worked well?

- The home demonstrates a strong commitment to security, verifying the identification badges of each Authorised representative during the Enter and View process.
- The home maintains a flexible approach to visiting hours, accommodating families of residents with the freedom to visit at their convenience, provided they notify in advance.
- Family members of patients undergoing end-of-life care are able to spend the night when the resident is near passing.

What could be improved?

- We found no areas for improvement in this category.

Personal Care, Diet, and Activities

Notes

- Menus are crafted based on information gathered during the intake process for new residents.
- Residents are offered meal choices to cater to individual preferences.
- Activity planning responsibilities are shared among the deputy manager and two other staff members.
- Activities are displayed within the home in a dementia-friendly manner.
- The range of activities encompasses manicures, singing, dancing, trivia, board games, and TV time.
- Staff members highlighted challenges faced by residents in securing NHS Dentist appointments and issues with the ambulance service for transportation to appointments. It's important to note that these challenges

are not specific to the home but are experienced nationwide at the time of this report.

What has worked well?

- Authorised Representatives (ARs) observed staff engaging residents in a game of catch, while another staff member played board games with residents.
- The home arranges for live entertainment, with a scheduled singer present on the day of the ARs' visit.
- A monthly oral hygiene check is conducted to identify any dental issues that may require attention from a dentist.
- Residents interviewed expressed a high level of satisfaction with the food provided.
- The kitchen received a 5-hygiene rating, and the food storage areas were noted for their cleanliness and organization.

What could be improved?

- Staff told us that they would like to have a dedicated activity coordinator role.
- There has been an observed shortage of NHS dentist appointments.

Staffing and Management

Notes

- The home maintains a staffing complement of 22.
- Residents at the home communicate in various languages, including Polish, Romanian, Hindi, Punjabi, Malayalam, and Filipino.
- Staff members wear uniforms and prominently display name tags, while management opts for business casual attire with accompanying name tags.
- Staff training covers a range of topics, including but not limited to manual handling, policies and procedures, personal care, feeding, whistleblowing, safeguarding, and medicine administration.

What has worked well?

- There is a positive rapport between staff and residents within the home.
- During an observed incident where a resident became distressed, a staff member promptly intervened, effectively calming the resident.
- Stringent food hygiene practices are followed, with staff using appropriate disposable PPE when serving food to residents.
- All staff members confirmed they have received training on safeguarding measures.

- The home offers apprenticeship opportunities to support the skill development of its staff members.
- Employee recognition programs, including initiatives for employee of the month/year, are implemented to acknowledge and appreciate the exceptional contributions made by the staff.

What could be improved?

- We found no areas for improvement in this category.

4.2. Resident Feedback

During the visit, feedback was gathered from 7 residents and 1 family member. It's important to highlight that the residents in this home are in advanced stages of dementia, which impacted the completion of all surveys.

Staff:

- Residents provided highly positive remarks about the staff, using words like helpful, kind, good, and lovely.
- Residents expressed feeling consistently welcomed and supported by the staff.

Environment:

- Both residents and the family members described the environment as quiet, calm, stress-free, and cozy.
- Some residents noted that the atmosphere felt very much like home to them.

Food:

- The majority of residents expressed enjoyment of the food, describing it as delicious and of good quality.

Improvements:

- Residents highlighted that there weren't many activities accessible to them due to physical barriers or personal preferences.

Feedback and Complaints:

- None of the residents indicated having raised significant complaints.
- They emphasized feeling listened to and understood, affirming their confidence in the staff's availability and support whenever needed.

Selected Comments

Thoughts on Staff

"The nursing staffs are very caring. My [relative] could not have been in a better place. They were a difficult person; they would get agitated and anxious sometimes. The staffs managed to cope with [the resident's] behaviours well. They are the good team of staff who really works together."

Environment

"It's very nice and home-like, although obviously, I would like it better at my own home."

"The environment of the home is very nice. I like the arrangement of rooms. The common room is very warm space. You can see the residents are enjoying being here."

Diet and Nutrition

"Very good, I am quite fond of the fish and chips"

4.3. Staff Interviews

During the visit, feedback was obtained from 11 staff members representing various roles, with lengths of service spanning from one month to 9 years. Most staff members have served for over 1 year.

General Feelings:

- Responding staff members conveyed a strong sense of job satisfaction.
- Staff highlighted the supportive nature of the head manager, emphasizing her hands-on approach and willingness to actively engage in challenging situations with the team.

Selected Comments

"I do feel tired at the end of the day, that is the nature of the job, but when I reflect on how many thank yous I get, it makes it all worth it"

Training:

- Training encompasses various topics, including but not limited to manual handling, policies and procedures, personal care, feeding, whistleblowing, safeguarding, and medicine administration.
- Online training resources are available for staff development.

Break and Handover Time:

- Most staff members reported receiving adequate break and handover time. However, it was noted that some staff members forego breaks on busy days.

Accessing Community Health and Social Care Services:

- Staff members mentioned challenges in securing NHS dentist appointments and issues with the ambulance service for transporting patients to appointments.
- A GP conducts rounds every Thursday, either through face-to-face appointments or over the phone.

Communicating with Patients and Their Families:

- Staff members conveyed that families of residents are actively involved in their family members' care.
- Regular family visits were witnessed during the visit, with some family members visiting weekly.

Staff Recommendations:

- Staff members recommended increasing trips for residents, particularly during the summer.
- There was a suggestion for the establishment of a dedicated activity coordinator.

Selected Comments

“When residents come here, we want them to treat it like their home. We want to have a “home to home” transition for them. Keeping to their own routine as best as possible”

4.4 Management Feedback

We also spoke with the provider of head manager of Georgian House, Cecile Bauzon, about a variety of topics.

In Summary

Identifying Healthcare Needs

- All healthcare needs are determined by a pre-assessment that is filled out by the resident’s GP, family, and the home.
- We make sure to closely monitor the health of our residents. We do this through various assessments. One thing we do that we take very seriously is a monthly oral health check. We want to stay on top of any dental issues, especially with the delays in NHS dentistry.

Supporting Cultural and Religious Needs

- Most of the residents of the home are Christian, but we take each denomination of Christianity very seriously. We have local priests visit during major Christian holidays.
- A local Imam comes to help a Muslim resident worship.

Raising Safety Concerns

- All staff are trained on how to raise a safeguarding issue.
- These are reported as and when they occur.

Challenging Aspects?

- We have had great difficulty when it comes to the changes in palliative care priorities in Ealing. We have seen people refused hospice care in the past. We would prefer things go back to the way they were prior to any changes.

Improvements

- We are currently trialling different records keeping software. We want to be streamlining our record keeping for residents as well as reducing our impact on the environment.

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

Entry and General Accessibility

- The food menu we saw posted is not designed to be dementia-friendly.

5.1: Consider revising the menu format and content to make it more accessible and understandable for residents with dementia. Use clear visuals, simple language, and organised layouts to improve the menu. This adjustment can contribute to a calming dining experience for residents with cognitive challenges.

Response: We will provide a good sized menu board with image of menu cards. An Album of food menu will also be used to help our residents make their choice. The above points will help to encourage not just good nutritional intake but it is designed to help our residents with memory loss, cognitive loss, or impaired vision with their choice of food.

We are purchasing this menu board from dementia friendly website as advised. Photo album of menu will be done by the Manager / Deputy Manager.

General Environment

- The refuse area signage in the garden has been damaged by weather and is difficult to read.

5.2: Consider repairing or replacing the damaged signage to ensure clear legible communication. This will improve the overall safety and functionality of the refuse area.

Response: This was renewed and put in place without delay.

- Staff told us that they would like to have a dedicated activity coordinator role.

5.3: We recommend having a dedicated Activity Coordinator as a part- or full-time role where budget allows. This can improve the variety and engagement of activities to the preferences and well-being of the residents. Additionally, this staff member can help facilitate days out by building up partnerships with local attractions, museums, parks, and recreational facilities.

Response: We have 3 dedicated activity staff who coordinates activities on a weekly basis. These staff have 'Champion lead' role to facilitate and coordinate activities for Residents. All 3 had a special activity training provided too. We are a member of daily sparkle and has a wide range of activities instructions. This is active and in practice on a day to day by staff.

We advertised a part time role for Activities coordinator which is now live at the gov.uk site for part time role as staff are engaged in activity provision.

- Some residents conveyed that there were not a lot of activities that they found personally enjoyable or that they could join in due to physical barriers.

5.4: Gather resident input during the planning process of creating activity timetables to ensure inclusivity and purposefulness of activities. Gather weekly feedback from residents on the activity timetable. Use this information to continuously improve the enjoyment and diversity of the activities offered.

Response: Each and new incoming residents are assessed with 'My Profile' that states their lifestyle background, likes and dislikes and an assessment of the past interests vs their present interest and capability to help understand their needs and the suitability of planned activities. On a day to day, our challenge is planned activities for some residents are not followed as either they change their minds, not feeling well or wants to do something else. We have monthly assessments and audit of residents participation on activities. Some does not want to engage at all as they have their own schedule specially one of our residents that does not want to socialise with other residents but has number of friends visiting and keep in touch with other friends over the phone.

Survey and questionnaire for residents for February 2024 will be on range activities they want to consider addressing our residents wish and what is enjoyable for them as part of their activities.

- There has been an observed shortage of NHS dentist appointments.

5.5: Recognising the nationwide shortage of NHS dentist appointments, we acknowledge the importance of addressing this issue. Although monthly oral hygiene visits are currently implemented, we propose collaborating with NWL ICS colleagues to identify effective solutions. It is crucial to ensure that the oral health responsibilities for care home residents are fully addressed through cooperative efforts.

Response: Due to known National problem of shortage of dentist. Georgian House continue as part of our practice to risk assess oral hygiene on a regular basis to prevent any oral problem complication. For any serious problem pertaining to dental and oral care, a referral is made via GP as this can be referred to Hospital for immediate and urgent attention. Emailed Ealing partners, NWL ICS to assist / help us with this concern as this was a challenge.

- The staff expressed a desire to increase the frequency of outings for residents, especially during the summer months.

5.6: Plan a variety of potential trips throughout the year at a hybrid meeting involving staff, residents, trained volunteers, and family member(s). This collaborative approach should allow for more cost-effective ideas and the capacity for more frequent outings. Consider a flexible schedule to accommodate varying energy levels and preferences among residents. Some residents may wish to attend a full-day outing while others may prefer a picnic in the park.

Response: This is acknowledged from a staff perception and would welcome, where appropriate, facilitating trips out for residents. This will be incorporated in our summer planned activity.

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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“Everything is good here for my [relative]. I am happy they are here.”

- Family Member of Resident.