

Onkar House Enter & View Report

15th July 2026



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1. Visit Background

1.1 What is Enter & View

Part of the local Healthwatch programme is to undertake 'Enter and View' visits.

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

Enter and View visits can happen if people tell us there is a problem with a service, but equally, they can occur 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 get an impartial view of how the service is operated and experienced.

Following the visits, our official 'Enter and 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.

2.1 Safeguarding

Enter and View visits are not intended to specifically identify safeguarding issues.

However, if safeguarding concerns arise during a visit, they are reported in accordance with safeguarding policies. If at any time an Authorised Representative observes anything that they feel uncomfortable about, they need to inform their lead, who will inform the service manager, ending the visit.

In addition, 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.

3.1 Disclaimer

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

4.1 Acknowledgements

Healthwatch Ealing would like to thank the staff and customers at Onkar House for their contribution and hospitality in enabling this Enter and View visit to take place. We would also like to thank our Authorised Representatives, who assisted us in conducting the visit and putting together this report.

The Authorised Representatives spoke to patients and staff. Suggestions have been made on how to improve the service and good practice has been highlighted.

2. Visit Details

Visit Details

Service Visited	14 Waxlow Crescent, Southall, UB1 2ST
Registered Manager	Ryan Burke
Date & Time of Visit	15 th July 2026 2–5pm
Status of Visit	Announced
Authorised Representatives	David Crawley, Sadie Edmondson, Khatija Shah
Lead Representative	David Crawley

On 15th July 2026, we visited Onkar House in Southall in the borough of Ealing.

Community Housing and Therapy (CHT) provides support for adults with mental health conditions, autism, learning disabilities, substance use challenges, and brain injuries. The accommodation in Southall has 6 ensuite bedrooms available for residents with 1 room for sleeping night staff, but only 4 were occupied on the day of our visit.

From their website: “Onkar House is a mixed-gender community located in Southall, close to the large green space of Jubilee Park. It is staffed around the clock, and sleeping live-in support is available at night if needed. Onkar House operates as a Psychologically Informed Environment (PIE), offering a 24/7 safe, supportive environment for adults living with severe, complex mental health conditions, dual diagnosis, and who may have experienced multiple placement breakdowns.”

The home has 4 staff members in total. Two members of staff are available on-site Monday–Friday 9am–5pm with 1 member of staff sleeping 9pm–9am Monday–Sunday.

2.1 Online Feedback

The accommodation currently has no online feedback.

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2.2 Purpose of the Visit

Onkar House accommodation is not regulated 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 home is tidy and common areas are recently refurbished. There is a fully equipped kitchen and a small sitting area with a sofa, table and chairs.
- There is a dedicated room for group activities, such as group therapy, community meetings, reflective spaces and activities. This is considered a safe space for residents.
- There is a large back garden with seating and a small vegetable patch.



What has not worked so well

- One resident's room was in a dirty state with fire hazards present.

Patient Feedback

What has worked well

- All residents rated Helpfulness of Staff, Support from Care Staff Regarding Your Health and Visiting Arrangements as 'Very Satisfied' or 'Satisfied'.
- All residents we spoke with reported feeling safe and happy in the home.
- A resident reported that "it's pretty cool here".

What has not worked so well

- It was mentioned that there could be grass in the backyard.
- 2 out of 3 residents told us they felt neutral about cleanliness.
- It was mentioned by staff that there have been issues with residents stealing food from other residents.

Staff Feedback

What has worked well

- Overall, the staff members we spoke to were very happy with their experience of working at the home.
- They feel supported and have received training in fire safety and life support.
- The staff members agreed that they are able to foster as much communication with the residents and their families as they would wish. One staff member mentioned that this can be difficult when residents are not in contact with their families.

What has not worked so well

- Staff mentioned that they would prefer more engaging training that was more hands-on and practical.
- Staff also mentioned there is a long-running issue with cockroaches and they hope to fumigate the house soon.

4. Full Findings

This section of the report presents detailed information on our observations and resident and staff feedback collected during our visit.

During the visit, we collected responses from 3 residents and 3 staff members. We would like to thank the staff and management for their time, their warm welcome and cooperation.

Observations

During our visit, our team of Authorised Representatives (ARs) made observations on Outside Area and Entrance, General Environment and Communal Spaces, Safety, and Information Displayed.

Outside Area and Entrance

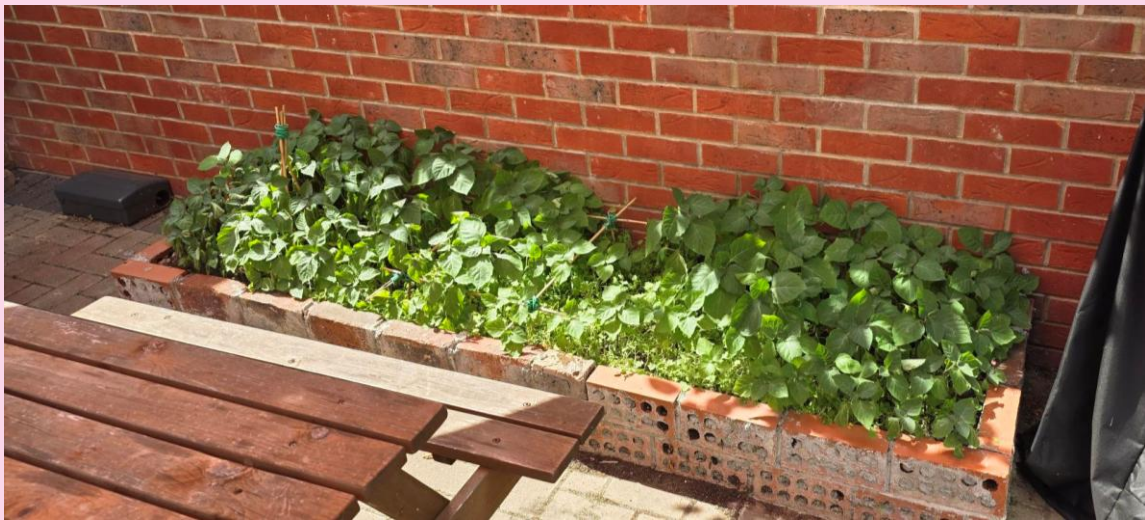
- The accommodation is on a residential street and not signposted. There is nothing to indicate that it is supported accommodation.
- Door was locked; residents have their own keys.

General Environment and Communal Space

- The home has recently had communal areas refurbished, is well decorated and has basic facilities.



- There is a dedicated room for group activities, such as group therapy, individual therapy, community meetings and activities.
- There is a communal area next to the kitchen with a fish tank and board games.
- The kitchen has basic cooking facilities; there is also a fridge freezer, washing machine and tumble dryer.
- There are individual cupboards for residents, with locks. The fridge is communal.
- There is a small garden accessible from the kitchen.



- The staff office is on the ground floor, next to the kitchen.
- There are two resident bedrooms on the ground floor, four resident bedrooms on the first floor and a staff bedroom on the second floor.

Safety

- There is a visitor book in the group room where visitors sign in and out. All authorised representatives were asked to sign in and out.
- All the residents and staff we spoke with told us that they found Onkar House safe.

Information Displayed

- There is a noticeboard in the group room with information about upcoming events.
- The phone numbers of managers were also displayed on the noticeboard for residents to raise complaints.

Patient Feedback

We spoke with 3 residents during our visit. Their lengths of stay were from 5 months to 3.5 years, with an average stay of 1.6 years.

This section of the report contains a summary of the feedback received.

General

- All residents said that they were very satisfied or satisfied with 'Helpfulness of Staff', 'Support from Care Staff regarding your health' and 'Visiting Arrangements'.
- 2 residents rated their satisfaction with the cleanliness as Neutral.
- All residents we spoke with reported feeling safe and happy in the home.
- All residents told us they had been given an orientation of the home when they first arrived and were given information on their mental health rights.

Staff

- The residents repeatedly had positive comments about the staff saying they are 'fantastic' and 'not enough words to describe how brilliant they are'.
- One resident in particular noted that they enjoyed being able to get different opinions about how to approach issues from different staff members.

Activities

- The residents mentioned that the home has a variety of activities including pool, chess, games and a weekly lunch where all residents eat together.
- However, it was also mentioned that more outdoor activities could be offered.

General Questions about the Therapeutic recovery Community

- The residents are happy with the environment at the home. The communal areas were recently refurbished with new carpets and walls repainted.
- The resident rooms are fitted with basic furniture including a bed, desk, chair and wardrobe. Each room had a small ensuite.
- The residents are required to provide their own food as the accommodation does not provide meals. Once a week residents and staff have a weekly lunch where they cook and eat together.
- When asked what improvements the residents would like, they suggested a grass area in the backyard or more decorations on the walls. Staff mentioned that residents would be able to vote on what decorations they wanted to be displayed.

Feedback and Complaints

- All residents agreed that they felt comfortable communicating with staff to ask questions and to make requests and complaints.
- All residents were aware of the procedure on how to make complaints and this information was clearly displayed on noticeboards in the accommodation.

Staff Feedback

We spoke with three staff members, the Team Leader, Senior Therapeutic Practitioner and a Support Worker who were present on the day of our visit.

This section of the report contains a summary of the feedback received.

Experience, Culture and Dynamics

- Onkar House follows a clinical model of recovery with a psychodynamic approach. There is an emphasis put on the mental wellbeing of residents and multiple avenues for group therapy, one to one session, etc. one staff member mentioned that there is 'no restrictive angle' and recovery is self-lead.

- Overall, the staff members are happy with their experience of working at the home.
- Staff said they enjoy taking care of people and feel supported by their colleagues.
- The staff sometimes find it difficult when the residents are not in a good mood and exhibit difficult behavior.
- One member of staff noted that the role can sometimes be 'emotionally challenging'.

Training, Development and Support

- Staff told us they generally feel okay after every shift, as they are used to their work.
- They feel supported and have received training such as fire safety and life support training.
- Staff told us they feel safe during work, because of their colleagues and that they work as a supportive team.
- One staff member noted that they would like more health and safety training as they found recent fire safety training helpful.
- All staff members are aware of how to raise a safeguarding alert.

Communication with Residents

- Staff members agreed that they are able to foster as much communication with the residents and their families as they would wish. One staff member stated that this can be difficult when residents are not in contact with their family.
- They reported that sometimes it can be difficult to navigate 'challenging dynamics that may have an emotional impact.'

Management Feedback

We spoke with Team Leader who was present at the accommodation during our visit about the culture and recovery process at Onkar House.

- Onkar House residents often have complex needs, some with drug and alcohol addiction. Residents are referred to by local authorities.
- Recovery plans are co-produced with residents and there is a focus on self-lead recovery with no restrictive angles for recovery.
- Residents pay a service charge and manage their own funds and food. Previous residents had appointeeship to help manage their funds if they have had issues with spending.
- The house has good links with local GP practice, there are sometimes delays with communication, but this is within the usual GP experience and not due to resident's circumstances.

5. Recommendations

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

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

Resident Improvements

When asked what improvements the residents would like, residents suggested a grass area in the backyard, quicker WIFI and new décor in the common areas of the home. One residents room was very dirty and contained cigarette butts and other fire hazards.

Recommendation 1: We recommend continuing to develop the back garden area and expanding the vegetable patch or consider installing a section of artificial grass over part of the existing paved area to create a safe, low-maintenance outdoor green space for residents, so that there is a grassy area for residents.

Response: We acknowledge the suggestion regarding the development of a grassed area within the garden. This is something we will consider further when reviewing the use and development of the outdoor space. Since the report, we have continued to develop the garden, including planting flowers in planters. The previous vegetable patch has also had to be removed, and we are planning to purchase new vegetables and re-establish the vegetable growing area. We will continue to review how the garden can best be used to provide residents with an enjoyable and meaningful outdoor space.

Recommendation 2: We recommend exploring possibilities of a new or improved WIFI network so residents can access the internet more quickly.

Response: We acknowledge the feedback regarding the speed of the WIFI and recognise the importance of reliable internet access for residents. We will continue to explore options for improving the WIFI provision at the end of our contract renewal and will consider this as part of our ongoing review of the home's facilities.

Recommendation 3: We recommend working with residents to decide on what decorations can go into the home that would please them and help with their mental well-being.

Response: We acknowledge the recommendation regarding resident involvement in decisions about decorations within the home. Residents are consulted regarding changes to the environment and decor, with their views and preferences taken into consideration. We review the decor and presentation of the home with residents annually, while also considering any suggestions or requests raised throughout the year. We are actively reviewing our annual budget which covers redecorations and replacements of items, in a way that will reflect the needs of the communities, as well as affordability of the service, to allow residents to have the means to contribute to creating an environment that feels comfortable and appropriate for them.

Recommendation 4: Consider implementing a cleaning schedule to encourage residents to clean their rooms. This could be supported by staff when appropriate. Room inspections could also be introduced to identify potential fire hazards so they can be disposed of promptly.

Response: A daily cleaning group has been implemented as part of the therapeutic programme to support residents in developing independence and maintaining the home environment. In addition, daily allocated room checks are undertaken for each resident. Since the report, where there are residents who are requiring additional support with maintaining their rooms, tailored cleaning plans have been developed and staff provide appropriate support. Staff are also working with residents to build awareness of fire risks and ways to reduce these risks within their rooms. Residents are actively being prompted to smoke in the garden when found to be smoking in room. to reduce smoking related fire risks within the home.

Activities

It was also mentioned by residents that there could be more outdoor activities, such as outdoor activities like tennis or badminton, or going to the cinema.

Recommendation 5: Consider arranging some outdoor activities, such as trips to a leisure centre or park. Activities could be suggested by staff but organized and voted on by residents to ensure that they are resident led.

Response: Since the report, residents have engaged in outdoor activities including playing tennis at Jubilee Gardens, as the available space within the home's garden can make activities such as tennis difficult. A community frisbee has also been purchased for use in the garden and has been incorporated into bonding groups, as well as being taken to Jubilee Gardens. We are also working on developing residents' relationships and confidence with accessing the wider community, including using community lunch opportunities to visit local restaurants together. Further outdoor activities are being discussed and reviewed in relation to available budgets.

Feedback and Complaints

All residents told us they felt comfortable with staff responding to their questions, requests and complaints.

Recommendation 6: Ensure residents' requests and complaints are followed up promptly. Continuing this good practice. If the manager is not able to pick up their call straight away, they should call back as soon as possible.

Response: All residents are aware of the home's formal complaints and feedback process and a copy of the relevant document is displayed within the home. Staff continue to encourage residents to raise concerns and provide feedback through regular community meetings. Within the "community life" section of these meetings, residents are encouraged to discuss any challenges, difficulties or concerns they may be experiencing. This provides an additional opportunity for concerns to be identified and addressed at an early stage.

Recommendation 7: Continue to offer residents several avenues to discuss their concerns or complaints, starting with a meeting with a staff member before it can be escalated if necessary.

Staff improvements

Staff mentioned they would prefer more practical, hands-on training and more training focused on health and safety.

Recommendation 7: Continue to offer training opportunities for staff development, focus on offering engaging training about health and safety to ensure staff are up to date on procedures.

Response: We are already currently reviewing and booking upcoming training opportunities relevant to health, safety and the home environment. Training and workshops already scheduled, including a suicide awareness workshop on 25 August 2026 and practical ligature training and awareness on 8 September 2026. We will continue to identify relevant training opportunities to support staff development and maintain staff awareness of health and safety procedures. Residents are also due to attend a fundraising workshop on 23 September 2026, which will explore additional ways of funding activities and bringing residents together through fundraising opportunities.

AR – Authorised Representative

CQC– Care Quality Commission

E&V– Enter and View

Distribution and Comment

This report is available to the 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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