

# Enter & View Report

Florence Nursing Home, 21 June 2023



# Contents

	Page
1.Visit Background	3
2.Information About the Service	4
3.Summary of Findings	5
4.Residents' and Families' Feedback	10
5.Staff and Management Feedback	12
6.Recommendations	16
7.Glossary of Terms	18
8.Distribution and Comment	18

Visit Details	
<b>Service Visited</b>	Florence Nursing Home 47 Park Avenue Bromley BR1 4EG
<b>Manager</b>	Subha Jangiti
<b>Date &amp; Time of Visit</b>	Thursday 21st June 2023, 11:00 – 14:30
<b>Status of Visit</b>	Announced
<b>Authorised Representatives</b>	Matthew Adrien, Shreya Mandal, Beekengsa Ngu
<b>Lead Representative</b>	Julia Eke

# 1. Visit Background

## 1.1. What is Enter & View?

Part of the local Healthwatch programme is to undertake and report on ‘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, General Practitioner (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 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 safeguarding policies. If at any time an 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 during 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 Bromley 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. Information About the Service**

### **2.1 Florence Nursing Home**

Florence Nursing Home is a 30 bed, privately run home situated in the London Borough of Bromley and is provided and run by [Lorven Housing Ltd](#). The nursing home cares for younger and elderly adults including people with mental health conditions. Additionally, the home is able to support people with dementia and physical disabilities.

### **2.2 Ratings**

The CQC (Care Quality Commission) is the independent regulator of health and adult social care in England. It ensures that health and social care services provide people with safe, effective, compassionate, high-quality care and encourages services to improve.

The CQC has given Florence Nursing Home an overall rating of 'Good'. During the last [inspection](#), February 2022, the provider had made improvements to address all the issues identified at the previous inspection – particularly around the monitoring of the quality and safety of the service. According to the CQC, the staff members were positive about the home's management, and the level of support provided by the registered manager, during the February inspection.

The carehome.co.uk [review page](#) contains mostly positive reviews with an average 'Overall Experience' of 4.4 out of 5.

## 2.3 Residents

At the time of our visit, there were 25 residents, 21 with a diagnosis of dementia; all have a long-term condition. Florence Nursing Home typically receives 20 to 30 referrals per month, these are actioned subject to bed availability. Most residents are referred by the South East London Integrated Care Board (SEL ICB).

## 2.4 Staff

During our visit, the nursing home had one nurse, one clinical lead, five care staff, one chef and one assistant along with five other staff members; a total of 14 staff present on the day of the visit. Staff come from a variety of different countries, including Jamaica, Malaysia, Nigeria, and India.

# 3. Summary of Findings

The E&V visit was carried out on Thursday 21<sup>st</sup> June 2023. The visit was announced and planned in partnership with the home. In preparation, we shared with the home a poster to display in communal areas announcing the E&V, and copies of questionnaires explaining the purpose of E&V in more detail.

During this visit, four E&V ARs were present. The registered manager was friendly and welcoming upon arrival. The atmosphere felt peaceful, and the home appeared tidy.

## Entry and General Accessibility

### Notes

The home is designed to accommodate individuals using wheelchairs, featuring convenient access to a garden and the dining area and lounge. The overall space is welcoming and clean. The building is equipped with a lift providing

access to all levels. The home has dedicated parking space and ample on-road parking. The closest stations are Sundridge Park and Bromley North.

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

- Location in a quiet, residential area
- Close to public transport
- Clear signage indicating the care home entrance
- Front parking space with a designated ambulance space
- Back garden
- Secure side gate
- Hand sanitisers available at the entrance
- Visitor sign in book
- Lift available
- Accessible to wheelchairs
- An infection control board with a guideline on handwashing, and correct use of Personal Protective Equipment (PPE), visible at the entrance.

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

- The entry and reception area could be confusing for visitors due to its layout. As you enter the building, there is a tiny foyer with a corridor that leads to bedrooms and other communal areas. Also, there is a stair that leads to the manager's office upstairs and other rooms. We found that without clear direction, it was easy to get lost. Signs would be beneficial.

## **General Environment**

### **Notes**

There is a cosy ambiance, with uncluttered, minimalist décor. The walls are painted in a light colour, which makes an effective contrast to the wooden doors and flooring.

Most of the residents live with dementia and we found good, appropriate use of door signage, with prominently sized graphics to assist residents in navigating their surroundings effectively.

Only two of the 28 rooms provide ensuite facilities. The shared bathrooms are well-maintained and clean. Rooms are a generous size and equipped with a television. Residents can bring their own furniture to personalise their space.

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

- Dementia-friendly signs throughout the building
- The lower ground floor is a secure space for people affected by dementia
- Residents' artwork displayed on the walls
- Bright and simple décor
- Indoor plants around the home
- Contrasting colours between doors, floors, and walls
- Good size bedrooms, two with ensuite bathrooms
- Safety gates in front of the stairs
- Some of the bedrooms had a resident's photo and their name on their door.

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

- We were unable to identify dementia-friendly clocks throughout the home
- Mirrors could be of concern for patients living with dementia
- Light switches did not appear to contrast with the colour of the walls
- No rails were present in the home; these could assist mobility and help prevent falls.

## **Safety, COVID-19 and Visiting**

### **Notes**

Visiting times are 11:30 – 18:00 daily, evening visits can be arranged on request.

The nursing home has had 3-5 cases of COVID-19 infections. Both staff and family members were and continue to be satisfied with the COVID-19 precautions and arrangements made to protect residents.

The nursing home enforces a smoke-free policy, requiring individuals who wish to smoke in the garden to comply with regulations.

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

- Hand sanitiser throughout the home
- Posters detailing how to reduce the risk of COVID-19 infection and stop its spread
- Fire equipment and a fire alarm zone layout map are well displayed
- Clearly sign-posted fire exits
- Some doors include keypad locks to keep residents from entering areas that contain potentially hazardous items
- Lifts are key code operated
- Unrestricted visiting after 11:30 am

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

- We found no potential areas for improvement.

## **Activities and Personal Involvement**

### **Notes**

During the visit, we observed residents playing bingo with the activity coordinator; those not taking part were having one to one engagement with other staff members or receiving care in their rooms.

Activities take place every day in the morning and afternoon and include:

- Bingo
- Gentle chair exercises
- Music therapy
- Movie night
- Baking
- Colouring
- One to one outdoor walk
- Manicure and pedicure

The manager informed us of the team's effort to provide person-centered activities for residents. They recognise that not all activities are appropriate for everyone, given that most residents live with dementia and other long term health conditions.

For residents who are bedbound, the activity coordinator goes to their room, gives them a manicure, helps with online shopping, and brings books from the library.

During the summer the home organises weekly BBQs for the residents and twice a year they organise BBQs with family members.

During the Christmas season, the nursing home arranges a festive celebration, a Christmas party for staff, family members, and residents. Additionally, special dinners are hosted on the 24th, 25th, and 26th of December, and for the New Year.

Other activities include celebrating Shrove Tuesday (Pancake Day), Easter Sunday, and birthdays; families can join in.

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

- Person-centred activities for residents

- Evidence of artwork activities
- Residents' satisfaction with the programme

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

- One family member shared that their relative spends most of their time in bed.

## **Diet and Cultural Practices**

### **Notes**

Florence Nursing Home has a food hygiene rating of 5. The designated time for a mid-morning snack or tea is 11:00, and 12:00 – 13:30 is allocated for lunch.

The catering team accommodates residents with specific dietary requirements, offering a wide range of food options.

The menu is rotated weekly to guarantee a variety of meals; seasonal ingredients are used whenever possible. Residents have some choice on the day; a staff member visits each resident in the morning with the day's menu to ask what they wish to eat.

Meal information is well displayed in the reception and dining area. For residents with dementia, menus are provided with images.

All meals are cooked on the premises. An example of a daily meal is:

- Couscous with chicken (sliced or blended) with mixed vegetables
- Steamed fish with peas, mixed vegetables and fried cassava
- Couscous with minced lamb, sweet potato and mixed vegetables
- Chicken curry and rice

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

- During the lunch period, we noticed staff supporting residents to eat their meals
- The menu is displayed on the wall and a dementia-friendly menu is also available
- Residents can choose every day what they would like to eat from a menu

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

- We found no potential areas for improvement

## Feedback and Complaints

### Notes

A residents meeting takes place every six months, and one annually that includes family members. Residents can share their feedback and raise any concerns.

### What has worked well?

- Complaint forms and leaflets are available in the home, and a review can be left on carehome.co.uk
- We were told that communication is good between family members and management

### What could be improved?

- During our visit we identified a safeguarding issue. This issue was raised by Healthwatch with the Manager. Please see page 11 for more information, under the 'Diet' feedback

## 4. Residents' and Families' Feedback

We received feedback from three family members and nine residents.

Overall, residents and family members were very satisfied with the care provided.

We asked questions related to mealtimes, emergency arrangements, access to healthcare, social life, and communication with the care home. Some residents were unable to answer some of the questions fully due to cognitive impairment.

### Diet

All the family members we spoke to were happy with the meals provided. They are confident that their relatives have enough food and liquids and that they are receiving help with feeding when needed.

A resident told us that the kitchen is happy to accommodate her requests with no problems. She told us that she cannot have spicy food or curries and is allergic to fish - therefore the chef prepares ham or sausage pie for her instead.

### General Environment

Family members expressed satisfaction with the level of personal care provided to their loved ones. No family members appeared to be concerned about the residents'

use of community health services, e.g. GPs and dentists, despite remarks made by staff and management on the absence of home visits from the GP.

We spoke with a resident whose mother is cared for in the same home. She expressed a high level of satisfaction with the treatment they both receive at the home.

### **Activities and Personal Involvement**

One family member said their relative spends most of their time in bed.

Residents that we spoke to expressed their satisfaction with the activities programme and said they were able to influence the range of activities available. When we asked about the available activities, one resident told us they can spend time in the garden and go out with visitors if they wish.

Residents enjoy spending their Christmas in the care home - they mentioned that the chef is "fantastic", and they "love the Christmas pudding". One resident told us they were pleased to receive flowers from staff on their birthday.

### **Safety**

In terms of safety, all family members are confident that Florence Nursing Home is safe. Some are aware of the evacuation plans and other emergency arrangements. Only one family member was not sure what arrangements were in their relative's care plan.

One of the residents told us that they would like to have an alarm in the bathroom, as on one occasion they had a nosebleed there, and could not ring the alarm, which is in their bedroom.

During our visit, we identified a potential safeguarding issue which was investigated. We received a response from the Penge and Beckenham Locality Team, Adult Services who concluded that it was not a safeguarding concern and a Social Worker also spoke with the resident.

### **COVID-19 infection prevention measures**

All family members we spoke with said that they are satisfied with the infection prevention measures in the home.

### **Family and Friends' Selected Comments**

*"The staff are willing to listen and provide advice and support when I call or visit."*

*"The service provided for my brother is very reassuring and satisfactory."*

*"Never seen him out of bed but they told me he does go to his chair."*

### Residents' Selected Comments

*"I have been here for two years, it has been lovely, they look after me well."*

*"Everything here is fantastic, and they also look after mum well."*

*"Staff are very nice; they help me with washing my hair."*

*"Yes, they treat me with dignity and respect."*

*"I would like more fresh vegetables and fruit because of my size."*

*"Very good care home".*

## 5. Staff & Management Feedback

We received feedback from 15 staff members, including kitchen personnel. During our observation, we noted that the entire staff was actively involved in interacting with the residents.

### Staffing

#### Notes

Of the 15 staff members we spoke to, six have been working in the nursing home for less than 12 months, two have been there for over a year, and seven for more than four years.

The process of staff induction typically involves a two-week training period followed by a six-week period of working alongside more experienced personnel.

Most respondents who were asked about their interest in additional training opportunities expressed none. Only one member of staff commented that they would prefer to have additional training tailored to carers, however they did not specify what training they would like to receive.

The following training courses were mentioned:

- Revalidation
- End-of-life care
- Dementia
- First Aid
- Health and safety

Staff mentioned that refresher training is provided every few years.

Most staff have two fifteen-minute breaks and one 30-minute lunch break every day. One staff member commented that they received only fifteen minutes lunch break on a six-hour shift, however they did not specify how often.

Staff are satisfied with how handovers are organised and added that they have a WhatsApp group to notify each other of any issues.

Staff said that the dentist comes every six months and the podiatrist every six to eight weeks. They also mentioned that there is an ongoing problem accessing GPs and that 111 is not very helpful, so they have been calling 999.

Staff told us they refresh activities every six months and that the home has live music every Tuesday. They also added that independent residents can go outside for a walk or to the shops.

Some of the staff encourage residents who are mostly bed bound to come to the lounge area when they can, to engage in activities.

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

- Staff said that the manager is a good listener
- All staff are confident that residents are treated with dignity and respect
- All staff that gave us feedback said that they are aware of how to raise a safeguarding issue
- All staff have been offered a COVID-19 vaccination
- Staff are pleased with the provision of PPE and arrangements made to protect them from COVID-19

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

- Some staff believe that there is lack of experienced personnel
- Staff mentioned there is an ongoing issue of residents' access to the GP
- Tailored training

## Selected Comments from Staff

*"I feel that all the services provided here for the residents are appropriate and satisfy their needs. They are treated with dignity and respect."*

*"Residents are treated with dignity and respect all the time. Residents are assisted and supported to maintain all aspects of care."*

*"The manager is a good listener."*

*"Very helpful. Refresher training provided. Recently had dementia training."*

*"More training for carers."*

*"Recent issues with GP not attending – manager has been made aware."*

## Management

### Notes

The care home manager has been working at Florence Nursing Home since 2016. We were told that the three to five cases of COVID-19 were dealt with effectively by management.

The registered manager is pleased with the quality of service provided to the residents overall. There are some problems accessing health services, e.g. seeing a GP or getting responses from social workers, and the manager is actively working to make health services more accessible for all residents.

### Diet and Cultural Practices

Dietary requirements are gathered through a questionnaire, and the menu is designed according to the residents' wishes. If a resident is unhappy with the options, adjustments are made. Alternatively, residents can also order takeaway meals if they wish or have family bring food into the home.

The menu changes weekly, with further alterations to accommodate seasonal variations. Residents with diabetes get a lot of salad and fresh fruits throughout the day. Breakfast is varied based on residents' wants and needs. Other special food is offered e.g. Nigerian dishes made by a carer who has completed their food safety training.

**Safety**

The manager informed us that some recently recruited staff do not yet wear identification (ID) badges, but new ID cards are being prepared. There is a clock-in system. Everyone knows the evacuation plans, but some residents would need help in an evacuation. The manager informed us that staff have the knowledge and skills necessary to address safeguarding concerns, and a yearly training is delivered.

**Activities and Personal Involvement**

Residents can propose activities and a trip to the beach has been scheduled in response to a resident's request. Residents are encouraged to get to know each other and sit with their friends. Several enjoy one another's company and there are few communication issues. A variety of activities is organised; residents enjoy singing and playing music with the entertainer.

**Community Services**

The manager told us of the difficulties in residents accessing the GP. Multiple follow-up attempts have been made but there has been an absence of visits for several months.

The home has no issues with access to other healthcare services with dentist, chiropodist and optician visiting regularly.

**What has worked well?**

- Evidence that services have been tailored to meet residents' dietary needs
- Evidence of the manager's awareness of current issues and her attempt to tackle them

**What could be improved?**

- The issue of GP access needs to be resolved

## 6. Recommendations

Healthwatch Bromley would like to thank Florence Nursing Home 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.

### 6.1 Entry and General Accessibility

6.1.1 The entry and reception area could be confusing for visitors due to its layout.

*We advise the care home to install signage at reception to help visitors identify the communal area, staff offices and other rooms.*

### 6.2 General Environment

6.2.1. We were unable to identify dementia-friendly clocks throughout the home.

*As most of the residents live with dementia, swapping a traditional clock with a dementia clock, which states the day, month, year and whether it is morning or evening, can assist the residents in everyday tasks.*

6.2.2 Mirrors could be of concern for patients living with dementia.

*As some residents living with dementia may not recognise their reflection and therefore become frustrated, we recommend the management team remove mirrors from corridors, and keep them in residents' rooms if requested.*

6.2.3 Light switch colours do not contrast with the walls.

*We advise changing the light switch colours to a give greater contrast with the walls, to help residents with poor vision.*

6.2.4 No rails were present through the premises.

*We advise the management to consider installing handrails in areas where they could be beneficial for residents, to aid mobility and minimise risks of falling.*

### 6.3 Diet and Cultural Practice

6.3.1. One resident mentioned that they would like to eat more fresh vegetables and fruit.

*We advise the nursing home increases the intake of fresh vegetables and fruit for residents requesting this, and keep records of having done so.*

### 6.4 Activities and Personal Involvement

6.4.1. One family member shared that their relative spends most of their time in bed.

*We understand that the nursing home already has a person-centred activity programme, which caters to the diverse needs of its residents. However, family members will benefit from clear communication regarding alternative activities and a designated timetable. One potential approach to reassure families is implementing a photo documentation system to monitor and record the activities of particular residents.*

### 6.5 Staffing

6.5.1. One staff member said they would like to receive more training.

*We advise the management team to assess their current training programme and identify opportunities for staff to do refresher courses and further develop their skill set.*

6.5.1. Some staff believe that there is lack of experienced personnel.

*We advise the management team to assess their staff team and identify any gaps where experienced personnel would be of benefit to support both residents and staff.*

6.5.1. Staff mentioned there is an ongoing issue of residents' access to the GP  
*We recommend that the home discusses this further with Bromleag Care Practice to secure the GP service to which its residents are entitled.*

## 7. Glossary of Terms

AR	Authorised Representative
CQC	Care Quality Commission
DA	Dementia Advisor
E&V	Enter and View
GP	General Practitioner
HCA	Healthcare Assistant
LBB	London Borough of Bromley
PPE	Personal Protective Equipment
SEL ICB	South East London Integrated Care Board

## 8. 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.

Healthwatch Bromley

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**healthwatch**  
Bromley

Healthwatch was established in 2013 in accordance with the Health and Social Care Act 2012.

Within this legislation [Arrangements to be made by relevant bodies in respect of local Healthwatch Organisations Directions 2013] Healthwatch has a right to a reply within 20 working days to Reports and Recommendations submitted by Local Healthwatch to a service provider.

## Report & Recommendation Response Form

Report sent to	Charlotte Bradford
Date sent	4/9/23
Report title	Response Form

Response

(If there is a nil response please provide an explanation for this within the statutory 20 days)

Date of response provided	
Please outline your general response to the report including <b><u>what you are currently doing to address</u></b> some of the issues identified.	

Please outline what **actions** and/or improvements you will undertake **as a result of the report's findings and recommendations**. If not applicable, please state this and provide a brief explanation of the reasons.

Recommendation 1	<i>The entry and reception area could be confusing for visitors due to its layout</i>  Currently all the areas got signages
Recommendation 2	<i>We were unable to identify dementia-friendly clocks throughout the home</i>  We will implement this recommendation
Recommendation 3	<i>Light switch colours do not contrast with the walls.</i>  We will implement this idea
Recommendation 4	<i>No rails were present through the premises.</i>  I will get advise on this

Add recommendations if there are more than 4.	
Signed	Subha Jangiti
Name	Mrs. Subha Jangiti
Position	Home Manager