

## **Enter and View – Visit Report**

Name of establishment: Oakleigh House  
110 Oakleigh Road North

Staff met During Visit: Mr Augustine Tutu – Registered Manager  
Ms Sia Juanah - House Manager  
Support Workers

Date of visit: 18 March 2015

Healthwatch Authorised Representatives involved: Stewart Block (Team Leader), Maureen Lobatto

### **Introduction and Methodology**

This is an announced Enter and View (E&V) visit undertaken by Healthwatch Barnet's E&V Volunteers, as part of a planned strategy to look at a range of care and nursing homes within the London Borough of Barnet to obtain a better idea of the quality of care provided. Healthwatch E&V representatives have statutory powers to enter Health and Social Care premises, announced or unannounced, to observe and assess the nature and quality of services and obtain the views of the people using those services. The aim is to report the service that is observed, to consider how services may be improved and how good practice can be disseminated.

The team of trained volunteers visit the service and record their observations along with the feedback from residents, relatives, carers and staff. Questionnaires are sent to relatives about their experience of the service also. The team compile a report reflecting all of this these, and making some recommendations. The Report is sent to the Manager of the facility visited for validation/correction of facts, and for their response to the recommendations. The final version is then sent to interested parties, including the Head Office of the managing organisation, the Health Overview and Scrutiny Committee/Adults and Safeguarding Committee, CQC, Barnet Council and the public via the Healthwatch

## Enter and View – Visit Report

website.

**DISCLAIMER: *This report relates only to the service viewed on the date of the visit, and is representative of the views of the staff, visitors and residents who met members of the Enter and View team on that date, and those who completed and returned questionnaires relating to the visit.***

### General Information

Oakleigh House provides residential care for 5 service users each in an en-suite double room, one of which has a sitting room attached. Oakleigh House has only recently come under the ownership of Mr and Mrs Tutu and opened as a care home in September 2013. They also own Woodfield House in West Hendon which offers a similar care environment. We note that there is not yet an up to date web site nor is there an alarm call system in the residents' rooms. Residents suffer from mental health conditions like dementia, obsessive-compulsive disorder, depression; in addition some have physical conditions like cancer. The aim of Oakleigh House is to work with the residents to prepare them gradually for independent living. To this end the residents are involved as much as possible in the organisation and running of their daily lives. There is a regular monthly residents meeting which is chaired by a resident with another taking the minutes. We were told that no member of staff is present at these meetings. We reviewed the agenda and minutes of these meetings and the follow-up actions noted.

The House is in a residential area within walking distance of shops, bus routes and other amenities. There is no sign announcing "Oakleigh House" only the street number "110". We were told that the residents wanted to live in an ordinary house with just a number and vetoed a house name sign.

Smokers can go into the garden though there is no shelter, there is only one smoker at present. If they wish, smokers are helped to give up smoking. The notice advertising our visit was on display in the entrance hall. Prior to our visit the Manager had contacted Healthwatch Barnet to say that because some relatives and carers lived some way away it might not be possible for them to attend on the day of our visit. It was agreed that the Manager would send the

## **Enter and View – Visit Report**

relatives questionnaire to the relatives who could respond by e-mail directly to Healthwatch Barnet if they wished to comment. One written comment was received.

There is Wifi in the house, and residents have supervised internet access. It was noted by staff that by its very nature there is no control over use or content of mobile telephones.

Residents are encouraged to think of their rooms as their homes and to bring in additional furnishings and decorations as appropriate, including televisions. There is also a television in the communal lounge.

The Registered Manager attends IQICH events.

### **Care Planning**

Before new residents are accepted at Oakleigh House, they have a pre-assessment by the manager/senior staff at their present accommodation. The manager will assess their need and give them information about the home and the process of admission. After the visit, the person will be given the opportunity to visit the home for a Guest-Day, where they will spend the whole day at Oakleigh House. During this visit, the person will have the opportunity to meet the staff team and other residents. The person will be encouraged to be accompanied by their social worker, relative or friends. They will be given the opportunity to ask questions and see the available rooms. The purpose of the guest day is to assess the person away from their environment and for them to decide whether they like the home and if we can meet their needs.

Discharge from hospital to Oakleigh House has, so far, not given rise to any particular issues, and the process is managed by the referring hospital. Each resident has a designated key worker within the staff team who works with the resident and other staff to prepare the initial Care Plan. We reviewed a number of individual Care Plans noting that residents had signed their individual Care Plan.

The Care Plans are reviewed monthly or more often as required. They are accessible to all staff, to residents upon application and to family and carers

## **Enter and View – Visit Report**

with resident's consent. It might be helpful if it were explained to residents, family and carers that residents' consent is required before family and carers can see a Care Plan

Though the staff have had training in assessing mental capacity we were told that any required assessment would be carried out by third party specialist.

We were also told that no application for DOLS (Deprivation of Liberty Safeguards) had been made for any resident.

There was thorough, up to date documentation on each resident.

### **Management of Residents' Health and Wellbeing**

GP services are provided by one local practice for continuity of care. For out-of-hours service 111 is used, and no particular issues were reported to us.

Residents' requirements for dental and optical care and chiropody is assessed and determined during the get-to-know-you month. Residents are weighed every month and we were told that the services of a dietician would be used if necessary. General health is monitored in particular the side effects of any drugs.

There is no incidence of pressure sores. Complimentary therapies are not offered.

### **Staff**

There are two support staff plus a manager on an 8 hour shift, however between 12pm and 4pm there are three support staff of whom one will attend activities with residents. Depending on type of activity, sometimes the overlap could be in the evenings.

There is one staff member on site overnight and the Manager lives nearby and is on call. We were told that Bank Staff are not used, no staff have left in the last six months.

Staff said they enjoyed their work with residents and saw themselves as being part of the family atmosphere of Oakleigh House, led by the Manager.

Staff we met said that they felt comfortable if they had to report any whistle blowing events to management.

## **Enter and View – Visit Report**

### **Staff Training**

A private company conducts all mandatory training, and all staff have been trained in food hygiene, peg feeding, mental health awareness, dementia care, moving and handling, safeguarding and fire safety. Fire drills are regularly held. Training in nutrition and end-of-life care is also offered.

Boots Pharmacy provide all our Medication Management training. We also work with Learning Curve and Learning at Work which provides free access cost effective, high-quality training programmes and qualifications for staff.

To ensure that staff maintain their skills and benefit from training we were told that the manager carries out a post training check and builds lessons learnt into every day practice.

All staff are qualified to NVQ level 2 and above.

### **Activities**

Activities are managed by one of the support workers and individual activities are noted on the Care Plan. Towards the end of our visit residents were returning from an outing which they all seemed to enjoy. We spoke to a number of residents, in the absence of staff, who told us that they were generally content with activities; indeed, no particular issues were raised with us by residents. A resident spoken to alone was happy to be there and recognized improvement in their time at Oakleigh House.

Residents were very satisfied by the way the home was run, felt cared for and able to call staff if needed, but who were not over-intrusive. One resident felt in the short time there, due to the support being received, their mental health had improved significantly and they would soon be able to leave and return home.

## **Enter and View – Visit Report**

We were told by both staff and residents that staff have time for social interaction with residents. There is, at the moment, not much call for religious or spiritual needs but, we were told, it would, and has been made available as required.

### **Food**

In line with the Home's ethos of preparation for more independent living the residents are encouraged to prepare their own breakfasts under supervision in the kitchen. Lunch and dinner are prepared by staff, taking account of any dietary or religious requirements, with assistance from residents according to their abilities. There are also cookery and baking groups.

When the kitchen is locked snacks, drinks and a kettle are available in the lounge.

### **Engagement with Relatives/Residents/ Carers**

As noted above the monthly residents meeting is organised, run and reported on by the residents themselves. There are weekly meetings with key workers and meetings with relatives /careers are held with the resident present.

### **Compliments/Complaints/Incidents**

Incidents and complaints are recorded in a ring binder on a pro-forma Complaint Forms are regularly reviewed by the manager and Mr Tutu. The complaints policy and a leaflet on how to complain are available to staff and visitors.

### **Conclusions**

We found Oakleigh House to be a caring environment with staff and residents working to common agreed goals, and in which residents are involved in the life and activities of the Home.

## **Enter and View – Visit Report**

### **Recommendations**

1. We recommend that Oakleigh management consider provision of a suitable alarm call system in each resident's room. According to the philosophy at Oakleigh this proposal may be considered by the Residents Meeting Group. Of course, this involvement is welcomed, but we suggest that the final decision should be that of Management.
2. The online information should be updated and consideration given to having Oakleigh House's own web site.

*Signed:* Stewart Block  
Maureen Lobatto

Date: April 2015

Comments received from the manager at Oakleigh House:

Thank you very much for the report. I felt that it was an accurate reflection of Oakleigh House.

We will discuss these recommendation with all involved and make a decision. Thank you very much for your visit, it was lovely to meet the volunteers who were both very nice and helpful. I look forward to working with you all and hope to see you again soon.