

# Enter and View Report

Plean Dene  
May 27<sup>th</sup> 2025



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## Acknowledgements

Healthwatch Isle of Wight would like to thank the service provider, people who live at the home and staff for their contribution to the Enter and View programme.

# Details of the service

|                             |                                  |
|-----------------------------|----------------------------------|
| Details of visit            | Plean Dene Residential Home      |
| Service address:            | Luccombe Road, Shanklin PO37 6RQ |
| Date:                       | 27 <sup>th</sup> May 2025        |
| Time of visit               | 3.25pm                           |
| Length of visit:            | 3 hours                          |
| Authorised Representatives: | Pam Gerrard and Joanna Smith     |

## Description of home taken from the latest Care Quality Commission inspection report:

'Plean Dene is a residential care home registered to provide accommodation and personal care for up to 13 people with a learning disability or autism. Plean Dene provides all single bedrooms, two with ensuite facilities, a range of suitable communal rooms and access to a rear garden..'

### Disclaimer

Please note that this report relates to findings observed on the specific date set out above.

Our report is not a representative portrayal of the experiences of all service users and staff.

It is only an account of what was observed and contributed at the time.



## Purpose of the visit:

This visit was arranged as part of an ongoing workplan, looking at the experiences of people living in residential care homes for adults with a learning disability. Four local care homes were visited as part of this work to enable us:

- To observe how the facility operates and provides its services.
- To collect views from people, volunteers and staff on services.
- To identify 'Best Practice' and highlight any areas of concern.
- To report what we see and hear to improve the quality of health and care services..

# What is Enter and View?



Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to people, their families and carers in premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists 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 – so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

## **Methadology**

This visit was planned, but not announced. The home was made aware (via email) that Healthwatch Isle of Wight would undertake visits related to their learning disability residential care home work plan and was given a 2 week window but was not informed exactly when the visits would occur.

They were informed that two Healthwatch authorised representatives would be visiting the home and would wish to speak to people living at the home, visitors and staff if appropriate. They were informed that the authorised representatives may also wish to observe a meal time, but this would be confirmed with the person in charge at the time of the visit.

A follow up telephone call was made to the home two weeks prior to the start of the visit timetable, to enable the manager to ask any questions and to confirm arrangements.

The focus areas of the visit were as follows:

- Quality of care
- Food and drink
- Provision of activities
- Visiting arrangements

# What we found

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## Quality of care



We were informed that there were 10 people living at the home on the day of our visit and the home has 2 vacant rooms. The age range of people living at the home was from **44** years to **79** years.

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We were able to speak to 2 people living at the home (some of those present lacked the capacity to be able to understand our questions). Both people we spoke to said the staff are “nice” and one person said she enjoyed going out with her keyworker. She told us that she is able to get up and go to bed when she chooses. Another person said he also enjoyed living at the home and he likes the food. He confirmed that the best thing about living at the home is his friend there.

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## Provision of activities

We were informed that an activity coordinator had recently been employed by the provider and worked at the home on Mondays and Wednesdays. The manager and deputy showed us photos of people undertaking activities both in the home and within the local community. They told us that people enjoy going to the learning disability club at the Methodist church in Ryde every Tuesday and if there are enough drivers on duty, then all people at the home are supported to go. People at the home are currently preparing to enter the councils Gardens in Bloom competition and have been planting flowers and strawberries in the newly raised flower beds. Pots and soil were brought indoors to enable everyone to contribute.

People visited the Gouldings last week to celebrate VE day together and they also visited Quarr Abbey this week. Visits have been arranged to the beach and the esplanade and people enjoy going shopping and out for a meal with staff. One person at the home enjoys riding a pushbike around the Island and enjoys swimming in the sea and shopping across the Island. by himself

# What we found

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## Provision of activities

The manager informed us that they were currently making arrangements for one person to go on holiday in July with her family at Red Barn, Rookley.

One person we spoke to wanted to tell us about her weekly schedule and confirmed that she had been to the Pantomime at Christmas and had visited the Donkey Sanctuary and other community venues. She confirmed that there is nothing she would like to do that she hasn't done already.

Staff informed us that she has lots of puzzles and DVD's in her bedroom. They discussed a visit from Towrags bike and trike club at Easter. The bikers had delivered Easter Eggs to people at the home and this person had been able to sit on a trike with one of the riders.

She described baking a chocolate and banana cake the day before, and staff confirmed that she enjoys baking regularly at the home.

She showed staff the paint on her hands and they discussed her activities that day at Haylands Farm. She told us that she enjoys going to Care in the Garden on Fridays and likes seeing her friends there.

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Later on in the afternoon, we observed two people in the conservatory colouring in some pictures. One person showed us some wooden garden ornaments that he had made at Haylands Farm.

Staff told us that people at the home enjoyed visiting Rylstone Gardens which is situated very close to the home. Staff support them to enjoy the musical entertainment at the Bandstand on Sunday afternoons and this is particularly enjoyed by one person who has sight loss.

Staff also mentioned that they often take people in the home out in the local community: They enjoy lunch at Appley Manor or garden centres and they recently supported people to visit Nettlecombe Farm to help feed the lambs.

They go sailing with Wetwheels twice a year and have also visited the zoo and donkey sanctuary.

The home has its own transport including a car and a van which is able to take one wheelchair.

Staff confirmed that they support people to follow their religious beliefs and support several people to go to church on Sunday.



# What we found

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## Food and drink

People we spoke to said they were happy with the quality of food at the home and one person told us that her favourite meal was fish in parsley sauce, but she also enjoys curry and chilli.

The kitchen was clean and tidy and a list of people's birthdays was found on a cupboard door to remind kitchen staff to make their favourite cake on their special day.

Staff told us that the kitchen is kept locked when not attended by staff, but some people can go in to make themselves drinks or light snacks when they wish, with staff support.

There was a menu on the inside of a kitchen cupboard door with meal options including a variety of soups, jacket potatoes, full English breakfast, pate on toast etc. Staff informed us that one person had a soft food diet and another person had dietary requirements which necessitated staff cutting their food in to small pieces. Another poster indicated people's food likes and dislikes along with their allergies.

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We observed people eating their evening meal which was served at 5.00pm. Staff supported people into the dining room from the hallway and lounge. One person was seated in the lounge. A staff member stood in front of him and gently explained what he was going to do, then tried to pull him out of the chair by his hands. After several unsuccessful attempts, the staff member asked a colleague for assistance and they both stood beside the person, put their arms under his arms to support him to stand and then supported him into the wheelchair. This was not a safe or effective way of supporting the person to move.

We were informed that people are encouraged to eat in the dining room but can have their meals in the lounge or their own room. Three people had their meal at a table in the conservatory which was located adjacent to the dining room.

Some of the dining tables were covered with a blue linen tablecloth.

Just before serving the main meal, staff brought through 2 jugs of squash and this was offered to people before, during and after the meal. One person required thickened drinks. Staff prepared her drinks in the kitchen where the liquid thickener was securely stored, ensuring that the drink was prepared safely and in accordance with the instructions.

Pureed food was prepared and served separately, to enable the person to identify the different food types.

Staff supported people to put on plastic aprons prior to their meal to protect their clothing. We were informed that everyone had their own personal fabric apron, but they were using plastic aprons to minimise washing, due to the broken tumble drier. We observed staff using hand gel prior to serving food.

Food was prepared in the kitchen and brought through to the dining room, the plates were uncovered. Some people had chosen chicken casserole with vegetables and potato, others had fish in parsley sauce with potato with

# What we found

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## Food and drink

vegetables and another had shepherds pie. We noted that all meals were covered in gravy prior to being served. Salt and pepper were not available or offered during the meal.

One person repeatedly pushed her meal away, staff asked if she wanted it, then left for a few moment, before trying again to encourage her to eat. At the end of the meal, the person had not touched her meal so staff then offered her cheese on toast, which the person began to eat, with staff encouragement.

People did not have to wait for support, staff were very attentive and responsive to people's needs. They sat down next to people when providing support to eat, asking people what support they required and encouraging people to eat and drink.

One person has sight loss. Staff sat next to him and discretely told him what was on his plate, giving him his cutlery and encouraging him eat his meal without rushing.

After the meal, people were offered tea or coffee and were able to drink this in the dining room, conservatory or lounge.

Staff were busy during our visit and one member of staff went into the kitchen to prepare the evening meal as the chef was unavailable for their shift.

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## Visiting arrangements

We were informed that people can have visitors at any time and there are no restrictions, although visitors are encouraged to avoid the early morning, when some people may still be in their nightclothes.

One person's family visits from the mainland and is able to stay for lunch.

Another person told us that a relative visits them regularly and brings their dog along.



# What we found

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## Staff feedback

We spoke to 4 members of staff during the visit.

One staff member informed us that staff receive monthly supervisions and another mentioned that they complete “plenty” of training, some of which is online based. They mentioned that they are able to access training online, to save them from travelling.

We spoke to 4 members of staff and they all felt that the quality of care provided at the home is good. One member of staff confirmed that people are able to get up and go to bed when they want, and for those people who lack capacity, staff know people well and are able to recognise when they are tired and wish to go to bed. Staff were busy during our visit and one member of staff went into the kitchen to prepare the evening meal as the chef was off work. Staff informed us that they will cover domestic or kitchen chores if the chef or domestic staff are not available.

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Staff seemed to know people well and communicated effectively with them using a variety of methods.

One member of staff commented that the best thing about working at the home was:

**“Making a difference in their lives, helping them to feel a valued member of the community.”**

There were 4 members of staff on duty during our visit, in addition to the deputy manager and manager (who left, part way through our visit).

We were informed that 4 members of staff were rostered on to work the following morning .

There are 2 waking staff at night.

# What we found

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## General observations

When we arrived, we did not have to wait long for the front door bell to be answered, although the member of staff who let us in, was not aware of our visit. We waited in the foyer and were asked to sign the visitors book, while the staff member of staff went to get the deputy manager.

There was a post box for visitors survey forms, but no surveys available. A folder was seen with the latest CQC inspection report and another with the homes asbestos survey. A hand gel dispenser was located in the foyer.

The front door and door frame needed painting.

The deputy manager welcomed us to the home and we were then taken upstairs to meet the manager.

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We saw that the carpet/flooring outside the managers office needed replacing. We discussed the format of our visit and confirmed that we would be speaking to staff and people living at the home and would be observing a meal time.

The main lounge was bright and the television was on. There were four sofas and four armchairs, some pictures on the wall and a number of DVD's on a bookcase.

The skirting boards and door need repainting

The front hallway was spacious and contained a comfortable sofa. Pictures of staff and people living at the home were displayed on the wall.

Bedrooms we observed were spacious and personalised with people's belongings, including rugs, cushions and pictures.

The deputy manager showed us around the home.

The dining room was situated at the end of the front hallway and contained several tables and chairs. The paintwork and skirting board need re painting.

There were large prints on the wall depicting the Mental Capacity Act principles and the 6 safeguarding principles.

The back lounge (through the dining room) had patio doors with direct access to the patio and garden outside. There were some armchairs and a table and chairs. Underwear was drying on the radiator and a kylie sheet and towels were hanging off the back of the chairs. There was also washing drying on the furniture in the dining room. Staff told us that their tumble drier had broken and due to the rain, they had been unable to dry the washing outside.

There was a large garden surrounding the home with an accessible patio area with garden tables and chairs. Flowers, shrubs and trees surrounded a grassed area. A large summerhouse could be accessed across the patio.

The medication room was situated just off the back lounge and was secured with a keypad lock.

There was an accessible bath in the downstairs bathroom, the pipes behind the toilet were flaking paint and needed repainting.

## Recomendations

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| <b>1</b> | Ensure that all people at the home with mobility issues, are regularly assessed with regards to their need for moving and positioning equipment and staff are supported in their use.  |
| <b>2</b> | Ensure that there is a programme of redecoration for the home, to include paintwork and doors in communal areas. (The manager informed us that Southern Housing own the building and are responsible for maintenance of the home). |
| <b>3</b> | Ensure that the tumble drier is repaired or replaced without delay.  |
| <b>4</b> | Avoid using plastic aprons where possible, when protecting people's clothing.  |
| <b>5</b> | Staff to ensure that meals are covered when transporting them.   |
| <b>6</b> | Staff to serve gravy separately and offer salt, pepper and sauces at mealtimes..   |
| <b>7</b> | Ensure there are sufficient staff on duty at all times.  |

## Response to recommendations



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