

Mossdale Residence Care Home

Enter and View Report 2025

June 2025

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Background

What is Healthwatch?

Healthwatch York is the independent champion for people using local health and care services. We listen to what people like about services and what could be improved. We share these views with the people who have the power to make a difference.

What is Enter and View?

Part of the local Healthwatch programme is to undertake Enter and View visits. Our team of authorised representatives carry out visits to local health and social care services to find out how services are being run and make recommendations for improvement if needed. Healthwatch 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 Healthwatch safeguarding policies.

Mossdale Residence Care Home



Details of the visit to Mossdale Residence care home

Service address	Mossdale Avenue, Burnholme, York YO31 0AF
Service provider	HC-One
Date	28 April 2025
CQC rating	Good (5 August 2022)
Care home manager	Julie Banks
Contact number	01904 293061

Summary

Purpose of the report

In this report, we summarise the findings from our visit of 28 April 2025. We also summarise the feedback shared through survey responses collected before and after the visit.

Purpose of the visit

- To visit and gather views of the residents, their relatives and friends and staff about the services and care provided.
- To observe the care being provided for the residents and their interaction with staff and their surroundings.

General information

Mossdale Residence care home is part of HC-One, a national care home provider. It offers residential and nursing care services for older people, including people with dementia. Mossdale Residence care home has three floors of accommodation with space for 80 residents. There were 55 residents at the time of our visit.

Mossdale Residence has been subject to safeguarding concerns and complaints from family and friends of residents in the past. These issues were reported to and investigated by City of York Council social services, the Care Quality Commission (CQC) and the police. These issues were acknowledged by the care home manager in conversation as part of the visit. Many changes have taken place. Our observations and comments from residents, family and friends

of residents and staff that make up this report demonstrate that significant progress has been made by the home in addressing previous issues.

Key findings

At the time of our visit, we found that Mossdale Residence care home was operating to a good standard. These findings were based on our observations and reflect the general happiness of residents, family and friends of residents and staff members. It was interesting to note that staff travelled considerable distances to work at Mossdale Residence. Staff live in Castleford, Hull, Leeds and Wakefield as well as closer to York. A number of staff had been sponsored to work in the UK by HC-One. There are two other HC-One care homes in York and sometimes staff work between the homes. HC-One only uses qualified nursing agency staff when necessary. It was interesting to note that staff retention, previously raised as an issue, has significantly improved. This has resulted in better relations between staff and residents and between staff which is reflected in the feedback we received.



Positive feedback

- The building is very well maintained. It is clean with good wide, uncluttered corridors and a variety of options for different places to sit.
- Reception staff welcomed us quickly. We saw plenty of staff round, many interacting positively with the residents.
- Displays on all three floors showing the week's activities. Two activities coordinators are employed and activities were going on in the home during our visit.
- A monthly newsletter is displayed alongside the weekly activities programme on a lectern on each floor.
- There is a regular weekly visit from healthcare professionals from a local GP practice.
- There was a bar on the ground floor offering a range of drinks and a hairdressing salon on the ground floor.
- There were fresh flowers in the communal lounges and dining areas.
- We were impressed with the staff we saw. There was excellent feedback from residents and family members about the staff.



Recommended areas for improvement

We did not have many recommendations for improvement. We were all happy by what we saw in the care home and its staff when we visited. This is reflected in the feedback from residents and their family members. Our recommendations are:

- When redecorating, provide more differentiation (e.g. colour contrast and signage) for the different floors, so residents are aware which floor they are on.
- Consider painting doors different colours to help residents personalise/identify their own rooms.
- Develop a system for daily updates on reality boards (day, date, month) and update 'Meet the Team' details.

- Consider other age-appropriate daily activities.
- Consider trips out to local places of interest using the minibus.

About this visit

This was an announced Enter and View visit arranged in advance with the care home manager. The purpose of this visit was to capture the experience of life and care within a care home environment and to observe the standards of working practice. We did this by observing the interactions between staff and residents, observing their surroundings and speaking to residents to understand their experiences. We asked relatives and friends and staff members to provide their experience and views of the care home through a survey. Copies of the survey were available in the care home before and after our visit, Mossdale Residence staff sent links to staff and families/friends and posters with a link/QR code were displayed in the home.

On the day, four Healthwatch York authorised representatives made observations and talked to residents, their family and friends and staff members. We spoke to 11 Mossdale Residence residents, who shared their thoughts and experiences using a survey focused on quality of life and care in the home to guide the conversations. We also heard from six family members who completed questionnaires.

In addition, five members of staff who work in the home responded to our survey.

Not all respondents provided answers to every question and some respondents preferred not to answer all questions.

Findings

Environment

On the initial observation of the care home, our authorised representatives found the building to be in an excellent state of repair. It has a large central courtyard garden, which is well maintained, with a good range of garden furniture. Residents mentioned that they could go out into the garden and enjoyed sitting in the sun. A number of ground floor residents had patio doors in their rooms, so can go outside when they choose. The first and second floors had enclosed outdoor areas and the building had grassed flat roofs. We were informed of a leak causing three rooms to be out of use on the first floor and residents had been moved as needed.

The home was relatively easy to find. There is a bus stop outside the home. It has a reasonably sized car park which had some free spaces when we visited. There is bicycle parking nearby.

The reception area was accessed by a locked front door. The receptionist has a clearly marked office and desk area close to the front door and opened it quickly. There is a bell in case there is no-one at reception. The receptionist was extremely welcoming.

From the reception area, there is a lounge sitting area and dining room and you can see into the garden courtyard through large patio doors. The ground floor entrance area is spacious. There is a public toilet in this area. Either end of the entrance area leads to the resident rooms and lift. The lifts need a code to enter which staff arrange. Access to the lift on other floors also requires a code to use them. The lift provides spoken announcements. There are also staircases to all floors.

Accommodation

Residential care is provided on three floors for up to 80 residents in total. The ground floor and first floor are residential with some residents with dementia mostly on the first floor. The second floor is for nursing care and dementia care. The layout of the home is based on a square building with a central courtyard.

The décor on all three floors is similar and is well maintained. However, it is not easy to distinguish the floor you are on as the decoration is similar, with similar door colours on each floor. There are a number of themed photographs/pictures along each long but clutter-free corridor. Each resident's room has an external sign, some showing the name of the resident with numbers on the door. Finding your way around may be an issue for some residents. We understand that those residents on the ground floor generally remain on the ground floor and those on the first and second floors stay on their floor. However, residents can move around the home and sometimes there are activities or events on other floors that all residents can attend.

Each floor has large and small lounges and dining areas. There is a bar, a hairdressing salon and outdoor seating areas on the ground floor. Coffee tables and chairs provided opportunity for shared conversations. Clocks were positioned around the home and most showed the correct time. One clock in the first floor dining area had stopped. This was reported to the manager who said they will address them.

The lounges have a range of seating and seating is positioned to encourage conversation. Some of the seats were fairly low but plenty had arms and there were also sofas.

Residents' rooms are generally the same size and shape. All rooms are a good size and all are ensuite with a toilet and level entry shower. Each room is provided with a television and an electric bed which rises and lowers in accordance with each resident's needs. Residents can bring their own furniture and belongings. Many residents had photos and other personal belongings, including one person who had their own computer in their room.

The home has underfloor heating throughout and therefore there are no radiators. Residents can control their room heating through individual thermostats but this can take considerable time to adjust. There is publicly accessible WiFi available throughout the home.

Cleanliness and hygiene

Our representatives noted that overall, the care home was very clean, with no unpleasant smells. We observed corridor carpets being cleaned with a carpet shampooer.

Quality of life

General happiness

We asked residents and family/friends what they liked about living at Mossdale Residence. They said:

- 'I like the food – it's clean.'
- 'It's very nice.'
- 'I like it here. Having company is good, it's nice to have company.'
- 'It's ok, if you can't be at home.'
- 'I like living here very much.'
- 'I'm very happy – there's no other option.'

All six family members completing the survey said Mossdale Residence was clean and comfortable. Comments included 'You always get a warm welcome from the receptionist' and 'nearly all the staff are friendly'.

We noted that reality boards were displayed which were meant to show the correct day, date and month. Two boards we saw in lounge areas were showing incorrect

details. This can be very confusing especially for people with dementia or memory issues. We also saw a 'Meet the Team' board which did not record any names of staff on duty.



Food and drink

Residents and relatives were asked to share their views on food and drink at Mossdale Residence. Our representatives also observed a mealtime in the home.

All the food is prepared from fresh ingredients on site. There is one head chef who coordinates the menus and food preparation and two kitchen assistants focus on meal preparation and making cakes, etc. Menus are based on a six-week rota and changed twice a year. We were told breakfasts consisted of toast, cereal and cooked items. Drinks and snacks are served mid-morning and afternoon. The main meal is at lunchtime with a choice of two starters and soup and a choice of two main meals plus a hot pudding. At teatime sandwiches and soup are available. For supper, sandwiches are available as well as biscuits.

Most residents ate lunch in the communal areas, with dining rooms on each of the three floors. However, we were told residents can choose to eat in their own room or another place if they prefer. Snacks and drinks are readily available in the morning and afternoon.

Residents and family members said:

- 'The food is quite alright.'
- 'Not bad overall – I choose my main meal at the table.'
- 'I can eat meals in my room or in the dining areas.'
- 'I have no complaints about the food, I eat anything.'
- 'I can get snacks when I want but it's easier to have my own.'
- 'It varies.'
- 'It seems to be a set meal.'
- 'Could be a lot worse.'
- 'It's very good, no complaints.'

- 'I can have snacks and drinks when I want, and they're free.'
- 'When I'm in the lounge the staff come round and I ask for coffee.'

All family members surveyed were complimentary about the meals with comments such as 'the food is varied and plentiful (often too much); there's lots of snacks with variety of fruit. They also commented about the snacks saying there's always tea, coffee and juice and relatives can help themselves too.

We wanted to know whether residents feel like they need additional help with anything, such as help to eat or drink, and if they receive enough help.

We noticed staff helping some residents at lunch time. All the residents we spoke to said they do not need help, but said that if someone did, the staff are always there to help.

Activities

Residents were asked if they spend their time doing things they value and enjoy. Relatives and staff were asked if residents have regular access to activities in the home.

The home has two activities coordinators who provide activities in the home for residents on all three floors. Residents can take part in activities on any of the floors if they wish.

We learned about a lot of activities by looking at the information sheets, talking to residents and their family and friends and from our staff survey. Residents can learn about activities via the regularly updated information sheets available on each floor. There are occasional celebration events including International Jazz Day, Christmas carol singing by local school children and the home organises a Summer Fayre during Care Home week in June. The local MND (Motor Neurone Disease) society uses the home for meetings. Suggestions for activities are welcomed by the staff. There is a monthly service in the home arranged via a local church. The home has access to a minibus which was shared with the two other HC-One homes in York. Unfortunately, residents we spoke to weren't aware of this and couldn't remember having any trips out.

Activities include some specifically for women and some for men. Those advertised included:

- Bingo
- Skittles
- Chair exercises and exercise to music
- Catch and throw
- Balloon basketball
- Tin can knock down
- Ping pong puff
- Card and board games
- Word search
- Arts and crafts
- Jigsaws
- Colour to music
- Knit and natter

We asked the residents about doing things they enjoy and activities at the home. They said:

- 'I enjoy the floor skittles.'
- 'I enjoy the bingo.'
- 'I play bingo and do the quizzes.'
- 'I enjoy the art.'
- 'I enjoy knitting.'
- 'I enjoy walking around the garden.'
- 'I go to the local library every day.'
- 'I like doing keep fit.'
- 'They do exercise classes and bingo on a Tuesday.'
- 'I'm quite happy watching soaps on the TV.'
- 'I sit in the garden.'
- 'I'm very into electronics.'
- 'There's a notice taking in a whole range of things.'

Some residents felt that there weren't opportunities to go outside the home and these comments included:

- 'I've not been on any trips lately.'
- 'I hoped to go on a trip to Strensall but it got cancelled as short staffed.'
- 'Can't go out unescorted.'
- 'They used to have a minibus.'

Staff also commented about activities complimenting the activity coordinators but two commented 'Activities could be improved as some are not age appropriate'. Two

different staff members indicated they were not aware of residents having outings. Most of the visitors said they are able to take part in activities too.

Contact with friends and family

Residents and their relatives were asked about their contact.

All the residents we spoke to said they can stay in touch with relatives and friends and they can visit at any time and go into the residents' rooms or meet them in one of the lounges.

Residents said:

- 'My family and friend visit regularly.'
- 'Family visit from time to time.'
- 'My family take me out for a pint.'
- 'I have my own mobile phone to contact family.'
- 'I don't go anywhere really but my family visit.'
- 'I have a mobile – my friends still ring.'
- 'My son comes most days.'



Quality of care

We observed whether residents looked well cared for during our visit and asked residents if they were able to get up and go to bed when they wanted and if they were able to bath or shower with help, if needed.

Throughout our visit, all the residents we saw and met looked very well cared for and well dressed. Those we spoke to said they could have a shower or bath when they wanted – and help is given if needed. Residents said they can choose the clothes they wear and there is a good laundry system.



"My laundry gets delivered during the day; they're good at washing things, they're back by the morning. It's a very efficient laundry service".



Staff

We asked what residents thought of staff, observed interactions between residents and staff and asked staff how well informed they are about the residents they look after.

All the residents and family members we spoke to were very complementary about the staff. One of our volunteers was particularly impressed by the deputy manager who they said is 'brilliant'.

- 'They are friendly and kind.'
- 'Very good, they're very kind and caring.'
- 'Staff are friendly and happy. They are well treated here.'
- Staff understand me and I understand them.'
- Staff help to explain what's going on.'
- 'I'm not rushed.'
- 'One staff member can be rude. 99% of staff are nice and kind.'
- Yes, we know them all.'
- Oh, yes, we talk on the same level.'
- 'Staff are respectful.'
- 'Staff are really nice.'
- '101% wonderful.'



All staff are very, very good!



All six family members confirmed they were very satisfied with the care given and had contributed in some way to their relative's care plan.

We asked staff how well informed they are about residents' likes and dislikes and what information is included in residents' care plans. The staff members we heard from said they were either well informed or somewhat informed and one staff member felt they were somewhat uninformed through handovers and care plans.



We asked if information about residents' oral health, sight and hearing needs are included in their care plans. All five staff respondents said this information is included in detail.

The manager mentioned to us that the care planning system, which is currently handwritten, will be moving to an electronic system later this year.

Safety and staff levels

Residents, relatives, and staff were asked whether they feel there are enough staff, and we asked the residents if they felt safe in the home.

All the residents we spoke to said they feel safe living at Mossdale Residence. Most residents said they feel there are enough staff and our representatives felt there were enough staff when we visited. The majority of residents said they were very satisfied with the overall quality of care and the remainder said they were quite satisfied. Nobody was dissatisfied.

 'I couldn't wish for anything else'
I'm extremely satisfied living here' 

We also asked staff members about staffing levels. All five respondents felt there weren't enough staff at times although we were told the numbers were in line with quotas for the number of residents and their dependency levels. They commented that the shape of the home meant it was difficult to meet everyone's needs at the same time especially when a resident needed two carers. There was also a feeling amongst staff that the work was very physically demanding due to the size and shape of the building with some staff saying they had to take time off work (sometimes unpaid) because of physical injury (bad backs).

Staff mentioned the home manager is 'very supportive in developing the staff'.

One issue raised by a resident to our volunteers indicated they had experienced a situation which was considered a serious safeguarding issue. We discussed this with the manager and deputy manager who were aware of the allegation. We were told that, when this had been initially raised by the resident, an immediate investigation was conducted. The CQC, adult safeguarding and the police were informed, as were HC-One senior management and Human Resources. A thorough investigation was

conducted and no evidence came to light that the alleged incident actually took place. We were confident the manager had taken all appropriate action.

Health Checks

We asked residents if they are able to access relevant health checks.

Healthcare professionals including the doctor from the local surgery (Unity Health) visit on a weekly basis.

Residents have to travel outside the home to visit the optician and dentist. Relatives will take residents to the dentist or to outpatient appointments, but if that is not possible, staff will accompany them.

- 'I can see the doctor when I need to.'
- 'The staff would get help if I felt poorly.'
- 'The GP comes regularly; medical care is good.'
- 'I go out of the home for opticians and dentist.'
- 'I go into York when I need to see my optician.'
- 'Optician came here and I got a new pair (of glasses).'

Residents' medication is obtained from Boots Pharmacy and is based on their E-Mar system, an electronic prescription process which we were told is very good. The GP practice is also very responsive. Staff use the early warning NEWS-2 scoring assessment process to assist in identifying particular health issues for residents.

Raising concerns and issues

Residents, family, and friends

We wanted to know if they had any concerns about the service, would they know what to do.

Initially if residents needed immediate help, those we spoke to said they would use the buzzer in their room or shout for help. In terms of raising concerns some would talk to family and some would talk directly to staff. We also noted suggestion boxes located on each floor with paper and pen.



'I can talk to any of the staff if I had problems.'
'Yes, I could find someone to talk to.'
'I go straight to whoever is in charge; they see me coming.'
'I'd try the manager.'



Other comments

We gave residents and family/friends the opportunity to add any other comments.

Residents said:

- 'Thank you for taking notice.'
- 'I take things as I find them and they are usually good.'
- 'I couldn't wish for anything else.'
- 'I'm extremely satisfied living here.'

The care home assessors also summarised their impression of Mossdale Residence:

- 'Mossdale is clean and smart. The staff I spoke to and met were polite and seemed happy in their work.'
- 'Aesthetically the building it is easy on the eye. It's rather like a hotel in communal areas.'
- 'I felt the staff were kind and respectful to residents. They create a serene atmosphere and seem gentle in their interactions.'
- 'There are no raised voices. I feel that residents appeared happy enough with what is provided for them.'
- Judging from the opinions of the residents who said they were satisfied then I felt this was a huge positive.'

Staff feedback

How do they feel?

We asked staff about working in the care home.

It was disappointing that only five staff members completed the survey. Of the respondents, all said they enjoy working at the home. We then asked what could improve the working experience and/or the person's experience at work. Comments included:



'Love the residents – it's very rewarding.'
'Enjoy working as part of a team, making a difference to people's lives.'
'Nice homely environment.'
'It's enjoyable when there's enough staff.'
'The manager is very supportive in developing the staff.'



We asked a range of other questions of staff. Feedback included:

- 'We need more staff.'
- 'We need more training.'
- 'We need more local staff who speak a level of English the residents can understand.'
- 'We need protected mealtimes for residents (i.e. no visiting during mealtimes as this can be disruptive).'
- 'It would be good if we could have an 'away day' for staff training.'

Overall rating

We asked residents and family and friends of residents how they would rate the home out of 5 (with 5 being the best).

Residents: (4.6/5)



Friends and family: (4.6/5)



Acknowledgements

The Healthwatch York Enter and View team would like to thank the manager, staff, friends and families of residents, and residents for letting us access the care home, and for sharing their views with us. Thanks also to our dedicated volunteers who helped support this Enter and View visit.



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