

# healthwatch

Kingston upon Hull

## Enter and View Activity

Loran House  
Care Home

Thursday 6th February 2025



## **Contents**

<b>1. Introduction to Healthwatch .....</b>	<b>3</b>
<b>What is Healthwatch? .....</b>	<b>3</b>
<b>Healthwatch Kingston Upon Hull .....</b>	<b>3</b>
<b>What is 'Enter and View'?.....</b>	<b>4</b>
<b>2. Abbreviations and Glossary .....</b>	<b>5</b>
<b>Abbreviations .....</b>	<b>5</b>
<b>Glossary .....</b>	<b>5</b>
<b>3. Disclaimer.....</b>	<b>7</b>
<b>4. Acknowledgements .....</b>	<b>7</b>
<b>5. Background.....</b>	<b>7</b>
<b>Website Description .....</b>	<b>7</b>
<b>6. Fees and Funding .....</b>	<b>8</b>
<b>7. Details of Visit.....</b>	<b>8</b>
<b>8. Methodology .....</b>	<b>9</b>
<b>9. Findings/ Observations .....</b>	<b>10</b>
<b>Service User and Relative Feedback.....</b>	<b>12</b>
<b>Staff Feedback.....</b>	<b>14</b>
<b>Manager's Questionnaire.....</b>	<b>16</b>
<b>10. Conclusion .....</b>	<b>20</b>
<b>11. Recommendations .....</b>	<b>21</b>
<b>12. Distribution .....</b>	<b>22</b>
<b>13. Service Response .....</b>	<b>22</b>

## **1. Introduction to Healthwatch**

### **What is Healthwatch?**

Healthwatch is an independent champion for people who use Health and Social Care services that exist to make sure that people are at the heart of care.

We listen to what people like about services and what could be improved, then share their views with those who have the power to make change happen. Helping people find the information they need about services in their area is another of our priorities.

### **In summary, the main aims of Healthwatch are to:**

- Help people find out about local care.
- Listen to what people think of services.
- Help improve the quality of services by letting those running services and the government know what people want from care.
- Encourage people running services to involve people in changes to care.

### **Healthwatch Kingston Upon Hull**

The Healthwatch Kingston Upon Hull Team consists of members with varying specialties and experiences; they support the core duties of Healthwatch; delivering our statutory and contractual obligations to ensure that our communities' voices are heard by those who provide and commission local services.

Each local Healthwatch is commissioned and funded by the Local Authority. In Kingston Upon Hull, the organisation who has been commissioned to ensure the effective delivery of the Healthwatch Service is Hull CVS.

## What is 'Enter and View'?

As part of the legal powers developed under the Health and Social Care Act 2012, local Healthwatch organisations have the authority to deliver Enter and View visits.

Enter and View visits are conducted by a small team of staff and trained volunteers, who are trained as authorised representatives to conduct visits to Health and Social Care premises to find out how they are being run and make recommendations where there are areas for improvement.

### **'Enter and View' is an opportunity for Healthwatch to:**

- Observe how the service is delivered, often by using a themed approach.
- Collect the views of service users (patients and residents) at the point of service delivery.
- Collect the views of carers and relatives.
- Observe the nature and quality of services.
- Collect evidence-based feedback.
- Report to providers, the Care Quality Commission (CQC), Local Authorities, Commissioners, Healthwatch England and other relevant partners.

Enter and View visits may be carried out as announced visits, where we advise in advance of the time and date of the visit; or if certain circumstances dictate as unannounced visits whereby the service does not know that a visit will be taking place.

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 services first-hand.

## 2. Abbreviations and Glossary

### Abbreviations

- E+V: Enter and View.
- CQC: Care Quality Commission.
- NHS: National Health Service.
- HWH: Healthwatch Hull.
- ASC: Adult Social Care.
- ICB: Integrated Care Board.

### Glossary

<b>Adult Social Care</b>	Adult social care aims to help people stay independent, safe and well so they can live the lives they want to. This includes people who are frail, have disabilities, are neurodiverse, or have mental health issues, as well as the people who care for them.
<b>Announced visit</b>	A visit planned by Healthwatch, and the place being visited.
<b>Anonymous</b>	Not naming people
<b>Authorised Representative</b>	An Authorised Representative is a trained staff member or volunteer with a current DBS in place who takes part in Healthwatch Kingston Upon Hull's Enter and View activities.

<b>Local authority funded</b>	If the local authority is involved in funding some of your care package, then, depending upon your income and savings, you may have to pay them a contribution towards the costs of that part of your care package.
<b>NHS funded</b>	NHS-funded nursing care is funding provided by the NHS, to cover the standard cost of care by a registered nurse in a care home or nursing home. It is only available if you're in a care home. If you've been assessed as needing nursing care in England or Wales, the NHS will pay a standard rate.
<b>Privately funded</b>	Paying for the treatment and care you receive, as your savings and financial situation may mean you are not eligible for local authority funding.
<b>Project Officer</b>	Healthwatch employee who carries out engagements and gathers experiences to create reports and produce findings for projects.
<b>Respite care</b>	Individuals staying at a care home or nursing facility for a few days or weeks to provide short term temporary care.
<b>Service user</b>	Service user describes anyone who has accessed, or is eligible to access, health or social care services.

### **3. Disclaimer**

This report relates to the findings by the Healthwatch Kingston Upon Hull Representatives during the visit to Loran House Care Home, Hull on Thursday 6<sup>th</sup> February 2025. This report is not a representative portrayal of the experiences of all service users and is only a representation of those spoken to and observations made on the day, plus feedback gained via online questionnaires.

### **4. Acknowledgements**

Healthwatch Hull would like to thank Loran House Care Home for allowing us to carry out the E+V. We appreciate the cooperation of the manager, staff, and service users who provided their experiences on the day and contributed to the E+V.

### **5. Background**

Loran House is home to 36 permanent residents currently. They are a care home specialising in looking after those who may have dementia, mental health conditions, physical disabilities etc. They are a 46-bed unit, all the bedrooms have a toilet and sink. Residents have use of 5 other bathrooms around the home for washing and bathing.

Loran House employs 19 full-time members of staff, 2 part-time members of staff and 16 other members of staff. There are 6 members of care staff during the day and 4 on a night.

The announced visit to Loran House took place on 6<sup>th</sup> February 2025, by two Authorised Representatives: Olivia Stevenson, Adult Social Care Project Officer and Ellie Whitfield Delivery Manager.

### **Website Description**

*Loran House Care Centre is a 46-bed care home, which provides accommodation for clients whose needs are age related and are living with dementia. The care centre offers all single room accommodation. Loran House has developed a reablement care service for clients who*



require support and rehabilitation prior to returning to their own home following a stay in hospital.

<https://prime-life.co.uk/property/loran-house/>

## 6. Fees and Funding

- Residents can be funded privately, through the local authority or through NHS Continuing Healthcare.

## 7. Details of Visit

Details of Visit	
<b>Service address</b>	Loran House Care Home 148-154 Albert Avenue, Hull, HU3 6QA
<b>Service Provider</b>	Prime Life Limited  <b>Registered Manager</b> Stephanie Addison  <b>Telephone</b> 01482 354776
<b>Date and Timings</b>	Thursday 6 <sup>th</sup> February 2025 9.00am – 11.30am
<b>Healthwatch Representatives</b>	Olivia Stevenson Adult Social Care Project Officer  Ellie Whitfield Delivery Manager



## 8. Methodology

Healthwatch Kingston Upon Hull notified Loran House on 24<sup>th</sup> January 2025 of an Enter and View to be carried out week commencing 3<sup>rd</sup> February 2025. A follow-up email was sent on the 31<sup>st</sup> January 2025 with the manager's questionnaire attached. Neither email was responded to, and we arrived on 6<sup>th</sup> February at 9.00am to carry out the Enter and View. Upon arrival at Loran House, we were escorted to the manager's office and had a brief meeting with the registered manager, Steph. We explained the powers of Healthwatch, what we would be doing during our visit and requested a tour of the building. As the questionnaire hadn't been completed before our visit, we asked that this be done and sent back before 13<sup>th</sup> February 2025. The questionnaire was collected from Loran House 19<sup>th</sup> February 2025. We were then shown the different areas of the building, advised that building works were underway and left to carry out the E+V.

We stayed within the communal areas to gather feedback, as all residents' doors were shut around the building and most seemed to be sat in the lounge. We spoke to residents who had just had their breakfast or who were sat in the lounge. The questions were generally kept as open and relaxed questions such as "what has your experience been of Loran House?".

Staff were extremely busy, so we briefly spoke to them as they were serving drinks, but acknowledged they didn't have the time to sit and chat. We therefore left questionnaires to be filled out. We collected the completed questionnaires along with the manager's questionnaire.

We also spoke to a couple of family members. One was able to speak there and then, the others took away questionnaires to email back.

Once we had completed gathering feedback, we had a debrief with the manager and explained that we would accept any service user feedback for up to 1 week after the E+V before writing the report.

## 9. Findings/ Observations

Upon arrival at Loran House, it was clear there were tradesmen in and out the building. The manager explained that the whole building was being redecorated so there would be excessive noise and potential mess on the way round. She told us how she has been at Loran since mid-October 2024, and she is currently organising the activities due to there being an absence of activities coordinator. We were told that the home has a 100% training certificate, meaning all staff have completed core and mandatory training. They will continue this further so staff can carry out specialist training i.e. diabetes training. We were advised that the training compliance had been poor previously.

In the main corridor there were a series of notice boards displaying menus and allergens (see figure 1), health and safety information, activity planner, meetings and then pictures of residents (see figure 2). We also noted on our way round that there were PPE stations (see figure 3) all stocked with gloves, masks, aprons and hand sanitiser.



Figure 1 – Menus.



Figure 2 – Pictures of residents



Figure 3 – PPE station



Figure 4 – Wall art

Although currently being decorated, we complimented the artwork on the walls of the corridors (see figure 4).

There were no unpleasant smells inside. However, there was a buzzer consistently sounding during our visit. We raised this with the manager, who acknowledged it and said she was aware of the resident and the resident is regularly checked. Staff were all very friendly as we walked round. We were told by the manager that we could speak to anyone that was willing.

Whilst we made our way round talking to residents, we were asked by many if they could have a drink. Some told how they had been waiting a long while and were thirsty. Upon seeing that one plastic cup was particularly dirty, we looked at others and noticed they were all stained, with some also having food debris in.

Within the dining room itself, we noticed food on the wall, the skirting boards were dirty and stains on cupboard doors.

## Service User and Relative Feedback

### General

- We obtained feedback from 10 service users and/or relatives.
- Most service users were satisfied with Loran House.
- A couple of concerns were raised.

### When we spoke to service users and relatives at Loran House, they told us things like...

*"It's brilliant here I wouldn't want to change to anywhere else."*

*"I find it very good really, I've got a large room. I've not had any problems. It varies if you get breakfast and teatime can vary."*

*"I find it pretty good. The food's quite good, you get offered alternatives if you don't like what's on the menu."*

*"All nice and helpful, brilliant."*

*"Everyone is just lovely it feels like home. I like it here, when I lived on my own all I did was watch TV, read the newspaper or read a book, but here I call them all my friends and neighbours. There is always someone to talk to and the staff are lovely. We do lots of activities and you are never on your own."*

*"So, dad had a fall last week and we think he walked into something or fell the week before and fractured his nose. The paramedics have been out on both occasions. The last time they took him to hospital to check him over. I do keep speaking with the manager and his personal care has improved. The chiropodist said his feet are the best she's seen them. They are now keeping him downstairs more so they can keep a better eye on him as he is more unsteady on his feet. I just want to question his fluid intake as a couple of times I've been, his drinks have been spilled but I don't know how much of them he had drank first. He was having a new floor laid at the beginning of the week and his room is to be decorated and new furniture provided. My daughter did get a bit of shock when she sat with him last week waiting for the ambulance as she found faeces behind his wardrobe. This has now been sorted, and his room has been rearranged although the sensor mat has a wire which stretches across the full width of his room. Manager has alerted the falls teams."*

*"Good days and bad days of living here like anywhere. I struggle to go to the toilet and have to wait for someone to take me. Staff are all ok, they are kind and helpful. More staff would be helpful and prevent long waits. It would be nice to have more activities within the home."*

## Staff Feedback

### General

- We obtained feedback from 5 staff members.
- Overall feedback was positive.
- Most said staff work well together.
- More activities were suggested as an improvement.

### **We asked... Tell us about your experience of working at the home? What do you think works well and what could be improved?**

*Staff responded...*

- *"The communication, staff and resident interaction works well. More activities would be an improvement."*
- *"Always loved working here. They are moving the laundry to a bigger room which is a big improvement."*
- *"Working here is amazing. The shift patterns and the leadership work and the service users are delighted to be here. We, the staff, want to do more to improve the quality of life of service users so we would like more staff and infrastructure to do more with the service users."*
- *"It is a great home, the staff work well together, everyone has been welcoming and friendly. The only things I can think of to improve the place are already in action, such as newer furniture which has already been ordered."*
- *"Staff work well together. Interact well with residents and their families."*

### **We asked... Is your training regularly reviewed and updated?**

*Staff responded...*

- *All staff said yes.*

**We asked... Do you feel supported in your role and get all the necessary guidance?**

*Staff responded...*

- All staff responded yes.

**We asked... Do you feel there are enough care staff on duty (days and nights)?**

*Staff responded...*

- *"Most of the time, unless people call in sick on short notice."*
- *"Yes, but my personal standard I feel more is always better."*
- *"Most of the time."*
- *"As a cleaner, I can complete my duties fine. As for staff in the building, I often see them having time for activities with the service users, so I believe they manage well."*

**We asked... If you had concerns, who would you speak to? Are you confident your concerns would be acted on?**

*Staff responded...*

- *All staff agreed they would speak with the manager or senior and that their concerns would be acted on.*

**We asked... Do you feel you have enough time to support residents to meet their needs? If not, what would help?**

*Staff responded...*

- *All staff agreed they did have enough time to support residents.*
- *One stated "Yes, but there are some service users that are more demanding than others so they would need more time and attention when required."*



## Manager's Questionnaire

- The manager's questionnaire was sent prior to the E+V to gain background knowledge but wasn't received until after our visit.

**How many beds do you have available?**

10

**How many rooms have ensuite facilities?**

46

**What do the ensuite rooms consist of?**

*Toilet, sink*

**How many additional residents' bathrooms and toilets are there?**

*Bathrooms – 5 Toilets – 4*

**How many full-time members of care staff does the home employ?**

19

**How many part time members of care staff does the home employ?**

2

**How many care staff are on shift during the day?**

6

**How many care staff are on shift during the night?**

4

**How many other staff does the home employ?**

16

**How are staff training needs identified and provided?**

Online training portal. Training is online or face to face.

**How do you manage staff absences?**

Sickness/ absence tracker. Investigation after 6 occasions. Welfare meetings.

**Do you experience any difficulties with staff recruitment and retention?**

No

**Do you feel supported in your role of manager?**

Yes

**How are safeguarding issues dealt with?**

Incident report. Notifications sent as needed. Safeguarding audit monthly.

**How often are care plans reviewed / revised or adapted?**

Monthly evaluations. Annual review, more often if needs change.

**How often are resident and relatives' meetings held?**

Bi-monthly

**Do residents have end of life plans in place?**

<i>Sometimes</i>
<b>Where residents have a ReSPECT form, are the resident and their family or friends always involved and fully informed of what this means for their loved one?</b>
<i>Yes</i>
<b>Does the home provide external trips for residents?</b>
<i>Yes</i>
<b>How do you keep resident's friends and family informed of their relative's care and activities?</b>
<i>Relative meetings. 1-1 chats when in the home</i>
<b>What measures are in place to identify loneliness or difficulties residents might have in adapting to the transition to your care home?</b>
<i>Call bells. Regular 1-1 chats. Information gathering on admission.</i>
<b>How do you cater for residents' religious / cultural needs?</b>
<i>Speak to residents/ families in admission to gain knowledge of needs, encourage needs into daily life. For example, one service user has weekly visits from a priest.</i>
<b>Is residents' food cooked and prepared on the premises?</b>
<i>Yes</i>
<b>How do you cater for different diets?</b>
<b>Are residents involved in meal choices?</b>
<i>Yes, menu based on resident meeting</i>

**What is your food hygiene rating?**

5

**Do you monitor resident's weight and fluid intake?**

*Yes, monthly or weekly weight. F+F chart where required*

**How often do residents have their hearing tested?**

*Yearly or when needed*

**How often do residents with hearing aids have them cleaned?**

*Daily and/ or when required*

**How often do residents with hearing aids have them checked?**

**How often do residents have their sight checked?**

*Yearly*

**Do you have a complaints Policy in place?**

*Yes.*

**Do you have any problems accessing any of the below services?**

*Yes. Mental Health, wheelchair services, incontinence issues, care home crisis in reach team*

**Are there any other issues you would like to make us aware of that affect your service provision?**

**Healthwatch Kingston Upon Hull (HWH) is always keen to engage with and support our local health and social care providers. Are there any areas which you think HWH might be able to help and support your service with?**

## **10. Conclusion**

In conclusion, our visit to Loran House provided valuable insights into the daily operations, staff interactions, and overall environment within the care home. The facility is currently undergoing refurbishment, which presents both challenges and opportunities for improvement. Despite the ongoing building works, the home maintained a clean environment, with friendly staff members.

Feedback from service users and their relatives was generally positive, with most expressing satisfaction with the care provided. However, concerns were raised regarding access to drinks, the condition of some dining utensils, and cleanliness in certain areas such as the dining room. Addressing these issues would enhance the residents' overall experience and wellbeing.

Staff feedback was also largely positive, highlighting strong teamwork and a supportive work environment. While training compliance has improved significantly under the new management, the absence of a dedicated activities coordinator was noted. The introduction of more structured activities was suggested as an area for further development.

The manager's questionnaire, although received after the visit, provided useful context regarding staffing, training, safeguarding procedures, and service provision.

## 11. Recommendations

Following the Enter and View, Healthwatch Hull have devised the following recommendations for Loran House, which have been produced in line with the information collected on the day and feedback received.

- **For the manager and cleaner to ensure all areas are free of food debris.** Make sure areas such as the dining room are cleaned of dropped food debris and wipe cupboard doors and skirting boards that may have been splashed.
- **For the manager and kitchen staff to enhance dining experience for service users.** Drinks cups should be cleaned and free from staining and food debris when being handed out to service users.
- **For the manager and care staff to ensure residents have improved access to drinks.** Residents complained of being thirsty and not having a drink. They should have access to fresh water/ drinks throughout the day.
- **For the manager to look into recruiting an activities coordinator and increase activities in the meantime.** This would enhance engagement of service users. Develop a plan based on service user ideas and interests. Current staff could be utilised to help coordinate activities.
- **For the manager and care staff to ensure toilet requests are being dealt with promptly.** Some service users mentioned having to wait to get to the toilet due to staff being busy, but that this caused some distress if they thought they weren't going to make it on time.
- **For the manager and cleaning staff to ensure bedrooms are checked and cleaned thoroughly.** It was mentioned that a service user had faeces behind his wardrobe, and this could cause a health hazard.

## 12. Distribution

**The report is for distribution to the following:**

- Loran House Care Home
- Hull City Council – Adult Social Care Team
- Hull Integrated Care Board (ICB)
- NHS England
- Clinical Director of Nursing – Kate Rudston
- Healthwatch England and the Healthwatch Hull Website

Published on <https://www.healthwatch.co.uk/reports-library> and  
<https://healthwatchkingstonuponhull.co.uk/>

## 13. Service Response





Healthwatch Kingston Upon Hull  
The Strand  
75 Beverley Road  
Hull, HU3 1XL

Website: [www.healthwatchkingstonuponhull.co.uk](http://www.healthwatchkingstonuponhull.co.uk)

Phone: 01482 595505

Email: [enquiries@healthwatchkingstonuponhull.co.uk](mailto:enquiries@healthwatchkingstonuponhull.co.uk)