

Enter and View Report

Location of visit	Linson Court Care Home Dark Lane, Batley, West Yorkshire, WF17 5RU
Service provider	Constantia care
Date and time	Thursday 30 th October 2025, 9.30-12.30pm
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Acknowledgements

Thank you to all the residents, staff, relatives and visitors at Linson court Care Home, who took the time to speak with us and share their experiences. Thank you also to the manager, Renata for helping us arrange our visit and spending time with us on the day.

Disclaimer–This report relates only to the visit carried out on the specified date and is not a representative portrayal of all service users, visitors and staff, only those who spoke with us during the visit or completed our online surveys.

What is Enter and View?

Enter and View is a visit to a health or social care setting by Authorised Representatives of Healthwatch Kirklees and Healthwatch Calderdale as a means of gathering evidence of people's experiences. Enter and View is one of the many tools used by Healthwatch to gather opinion. The visits are not a formal inspection or part of an investigation.

Healthwatch Kirklees and Healthwatch Calderdale have a right to carry out Enter & View visits under the Health and Social Care Act 2012.

Enter and View visits give service users, visitors, carers and staff the opportunity to speak to an independent organisation about their experiences of health and social care services. They may talk to us about things which they feel could be improved, but we also want to find examples of good practice so that we can recognise and promote things that are working well. The visits may focus on a single issue across multiple settings, respond to local intelligence about a particular setting, explore an area we haven't visited before, or be carried out at the request of a service to better understand how it operates.

Contents

Contents	3
The service	4
Why did we visit	4
Staffing and resident numbers.....	4
What we did.....	4
Overall impressions	5
Health and Safety	8
Independence, choice and dignity.....	9
Socialisation, activities and entertainment.....	11
Food and drink	13
Visitors to the home	15
Staff at Linson Court Care Home	16
Health professionals supporting the home.....	21
Conclusion	21
Recommendations	23

The service

Linson Court Care home is a purpose-built, three-storey residential home in, Batley. It provides residential, nursing and dementia care for up to 40 people. Respite can be provided if a room is available, for a minimum of 2 weeks stay, this is due to the amount of paperwork needed. Rooms for respite can only be booked 1- 2 weeks in advance.

Resident bedrooms are situated on the ground and first floor with each floor having its own separate lounge and dining room. The ground floor has access to a secure garden, and there is a car park to the side of the building with a sweeping driveway. The lower ground floor accommodates the manager's office, laundry, staff and meeting rooms.

Why did we visit

This was a planned, supportive visit as part of our ongoing programme of work in adult social care settings. We aimed to gather feedback from residents, staff, and visitors to better understand life at the home and highlight what is working well and what could be improved.

Staffing and resident numbers

At the time of our visit, the home had 36 residents. Staffing levels included 12 staff members, Care home manager, 1 team leader, 5 care staff, 1 Nurse, 1 administrator, 1 Maintenance staff, 1 Chef, 1 Kitchen assistant.

What we did

We carried out a prearranged visit which took 3.5 hours. We toured the two resident floors, communal spaces, and spoke with residents, visitors and staff. The visit was informal, and we had conversations about safety, independence, choice, dignity, food, dining and activities. We also invited feedback via our feedback box positioned at the entrance, and a survey, for people who were unable to speak to us on the day, and this was made available for one week following our visit.

We spent our time speaking to individuals in lounges and communal areas, speaking to residents in their rooms if requested. We also used our senses to note our impressions of the home (the '5 senses' approach). Both residential areas visited were pre-lunch.

Overall impressions

When we arrived at the home, the door was answered promptly by a staff member. Prior to entering the main door, (vestibule) there was a noticeboard with information for visitors, including a poster for Healthwatch Wakefield (who don't cover the local Kirklees area, but take feedback for Pinderfields hospital which is a service Kirklees residents may use). We were welcomed and asked to sign in using the electronic system. Other displays in the main foyer included 'Employee of the Month' for September and information about protected mealtimes.

The home felt warm and welcoming, with tasteful décor and Halloween decorations adding a fun seasonal touch. We met the manager in her office on the lower ground floor, who provided some background information before showing us around. It was interesting to hear and see how the home operates.

Each resident floor has the same layout, except the ground floor, which opens onto a secure rear garden. A community noticeboard in this area included signposting information for Touchstone Advocacy, though this appeared to be out of date. We updated the manager, via email that Cloverleaf now provided the advocacy service. There was also a poster advertising exercise sessions held every Friday.

A centrally located lift and staircase provide access to all floors, with key-coded doors on either side. We didn't use the lift during our visit. A Healthwatch poster about Enter and View visits was displayed on the stairwell, but we didn't see our visit poster with the survey link in the areas we explored.

Near the entrance, there's a light and busy seating area where residents can watch people coming and going. It's a popular space for "people-watching" and has plenty of seating.

Throughout our visit, the home felt comfortably warm, clean, and tidy, with no unpleasant smells. The ground floor lounge was bright and well-lit, with the TV volume set at a reasonable level (with subtitles on). Not all residents were watching, but most appeared happy and relaxed. A few were more neutral about their experience, and one person wasn't quite sure how they felt about the home.

The lounge had a good range of seating to meet different needs, including armchairs arranged both around the room and in small groups facing each other. Small tables were placed beside most chairs for drinks and personal items. The atmosphere was calm, though later in the visit, as more visitors arrived, it became quite busy, and some visitors struggled to find seats near their friend or relative without blocking others' views of the TV. Upstairs, the lounge was quieter and sometimes empty during our visit. We were told that many residents on this floor are less mobile and spend time in their bedrooms. This lounge had fewer chairs, perhaps to leave more room for wheelchairs and walking aids.

Both dining rooms have beautiful views from the windows. Two members of our visiting team commented that they'd enjoy eating while looking out at that lovely scenery – "we know where we'd try to sit!" The dining areas are well laid out, with chairs that have armrests and raised tables for wheelchair users. There's plenty of space between tables, allowing residents to move around freely. In the lower dining room, the radio was playing softly in the background. Menu boards were displayed in both dining rooms, but there was no up-to-date information about the day's meal choices. Mealtimes were displayed alongside a clock, which is a helpful visual cue. We didn't notice any dementia-friendly clocks in the communal areas.

We observed staff working areas on each floor, including an office, a team leader's room, and a compact nurse's room without windows.

During our visit, staff were very task focused, with no care staff visible in the lounges. We noticed all were busy supporting and attending to residents in their rooms, completing paperwork, and administering medication. Domestic and kitchen staff were either taking meal orders, making drinks, or managing laundry. Staff smiled and greeted residents warmly as they passed, often calling them by name and sharing friendly banter and laughter.

The call bell sounded several times during our visit. It was quite loud and shrill, echoing along the corridors and reception, contributing to a hectic feel when not answered quickly. It sometimes took staff a few minutes to respond. Staff held a “huddle” at 11am, though we were unsure how many staff remained on the floor during this time or whether residents are informed about staff availability.

Several residents mentioned the call bell, saying it wasn’t always answered straight away and often had to wait. One resident told us staff were *“sometimes quick, but sometimes they weren’t.”* As the visit progressed and the home became busier, there were also slight delays in answering the main door for visitors. This doorbell added to the overall noise, making the environment feel less calm.

We were told that, while pets can’t live at the home permanently, families are encouraged to bring them for visits. We were pleased to see a visiting dog during our time there.

When asked what they liked about living at the home and if there was anything they would change, residents shared a mix of views. Some said they *“liked it”* or *“loved it”* at the home, with one resident adding that they felt listened to, though staff didn’t always have time to sit and chat. They said that more time with them, or more visitors, would be nice. Others described their bedrooms as *“nice.”*

A few residents said they couldn’t think of anything they’d change, while others mentioned that more staff would be helpful or that they’d enjoy having more music around the home. Another resident told us they weren’t happy at first at the home, and not happy, really now, but getting used to it as they settle in. One resident said, *“there’s not much to see in the garden,”*

though they weren't sure what they'd like added. Another spoke about the big changes involved in moving there and said they were not feeling overly content with the available activities.

Resident comments.

- *"Staff are so friendly"*
- *It's okay(here), very good actually"*
- *'Staff chat to me when they can, which helps to pass the time of day"*
- *"Not as good as being home but happy enough"*
- *"I have company here which I missed when I was living alone at home"*
- *"Its quiet most of the time, apart from the buzzers"*
- *"Less staff means waiting times are longer"*

A visitor we spoke to, rated the home ***"four stars out of five."***

Staff told us they felt the home was a nice place where residents were happy and comfortable, and that it was welcoming for visitors. One staff member said that everyone gets on. Many staff described the team as friendly and supportive, saying they try their best and always answer buzzers as soon as possible. They appreciated the homely atmosphere and the fact that they could laugh together. A new team member was highlighted who provides physiotherapy and exercise sessions for residents, one staff member describing this as *"good – in fact, much better."* When asked what could be improved, staff suggested increasing staffing levels, reducing agency use, and ensuring consistent training and competency levels across the team.

Health and Safety

All the residents we spoke to told us they felt safe living at Linson Court Care Home. Visitors and staff also agreed that the home felt safe, with one Staff member describing it as *okay*.

When we arrived, our ID wasn't checked, although we were wearing clearly visible Healthwatch-branded clothing and lanyards, and the team were expected at the home that day.

At the start of our visit, the manager confirmed there was no planned fire alarm test that day and explained the fire evacuation procedure, including exit routes and the meeting point outside. All exits were clearly signposted, and while each floor has key-coded doors for security, we were told these would automatically unlock in the event of a fire. Residents do not have access to the exit codes.

Throughout our visit, the alert alarm continued to sound at times for long periods. On two separate occasions, one of our team members timed the call bell ringing for over five minutes before staff responded to two different rooms.

All floors were free from trip hazards, and there was plenty of space in communal areas to manoeuvre wheelchairs and walking aids. We saw antibacterial hand gel dispensers on the resident room corridors, but none in the main reception area or outside communal rooms.

Independence, choice and dignity

A weekly residents' meeting called '**Our Home, Our Hour**' takes place every Friday. During these meetings, residents can share their views about activities, food, and anything else they wish to raise. Updates are given by the home about repairs, staffing changes, and any suggestions. A couple of residents mentioned these meetings and said the manager regularly asks for their opinions and feedback. We need to remember *"They're our bosses' they tell us what they want"* a staff member explained (about residents) that this was important.

A Staff member told us they work hard to meet residents' individual needs. Other staff said they catered for residents *"well"* or *"very well,"* and others agreed that person-centred care was a clear focus.

Bedrooms can be personalised, and the home offers a lovely idea where residents can have a canvas made of the view from their previous home to help them feel more settled. Televisions in residents' bedrooms are provided by families, although the home had previously received a few donated sets which have now all been distributed. New residents are welcomed through a checklist process and receive a welcome pack and residents' guide that explains services like laundry and TV arrangements. Each resident also has a person-centred care plan.

One resident told us they had given their own TV to another resident, saying that they didn't watch TV much, and the other person likes to. They added that they sometimes watch TV together. Two residents weren't sure if they could personalise their rooms as the furniture was already provided, but both said their rooms were nice and that they were happy with them.

A few residents commented positively on the laundry system. One explained, *"you put your number on your clothes [room number], and they come back washed."* It was agreed this worked well.

We visited during the morning, before lunchtime, and noticed that one resident was still having breakfast, showing that mealtimes are flexible, not just at set times. One resident explained they could go out when they wanted to, saying, *"I let staff know the day before so everything's ready for me. Then in the morning I have breakfast and say, 'I'm off,' and tell them what time I'll be back."* However, another resident said they couldn't go out unless their family took them, and one explained they were supported to be independent but have to ask to go outside.

One resident said they missed going to the pub and that having a bar at the home would make things better. They explained they could keep alcohol in their room, but it was the social aspect and atmosphere of a pub that they missed most. Another resident said the Wi-Fi connection at the home was good and they were able to use their mobile phone easily.

A resident told us that sometimes staff responded quickly to the call bell, but other times said it takes a while. Another said that staff help by moving drinks within reach when mobility is an issue but added that having a small side table would be useful so drinks could always be kept close at hand.

One resident shared an upsetting experience, saying they had pressed the call bell in the morning, but no one had arrived in time, resulting in an accident that affected their dignity. They told us, *"It felt degrading,"* and added that they didn't think there were enough staff to meet everyone's needs. They believed there were fewer staff now since the home had changed ownership. Another resident told us they felt listened to and treated with dignity and respect, saying, *"they are all very nice."* (about the staff team)

A couple of residents became emotional when talking about their mobility and changing health needs. With their permission, we raised these concerns with the manager, who said she would speak to the individuals directly. One bedbound resident said staff sometimes popped in for a chat, which they appreciated.

We noticed some doors had clear signs with pictures or symbols (for example, the garden and medicine cupboard), but the toilets were not signposted, which could make them harder to locate.

The manager told us the garden isn't used much in winter as it's cold and the leaves can make the paths slippery. Residents are always accompanied by staff when outside, and risk-assessed for falls. Smokers are taken outside by staff to the designated smoking shelter. Residents don't have the code to access the key-coded door leading outside. One resident said the garden was *"tended well, but cold out,"* so they hadn't been out recently.

Socialisation, activities and entertainment

The manager explained that the home does not currently have an activities co-ordinator but is in the process of recruiting one. She acknowledged that some of the feedback we gathered may reflect this gap.

A hairdresser visits the home every two weeks and provides treatments in residents' bedrooms. The manager told us that, in the past, the home had run pet therapy sessions with a range of animals — including a donkey —

and that chair-based exercise classes take place on alternate weeks. The access bus is booked weekly so residents can visit Batley Library. The home also benefits from a volunteer who visits regularly to support Asian residents and help bridge cultural and language barriers.

Residents told us about the activities available at the home, including:

- Keep-fit classes (“encouraged to do what we can”)
- Singalongs and games
- Bingo
- Visits from a podiatrist
- A summer garden party
- “Play Your Cards Right” sessions

A few residents spoke positively about the regular hairdresser, saying it was easy to book appointments. Several mentioned the Halloween party, which included a singer and decorations, and said it was enjoyable. A couple of residents mentioned the chair exercises on a Tuesday, one saying they were *“okay, but not for long enough.”*

Some residents said they would like more things to do but couldn’t think of specific activities to suggest. Another resident said there was nothing to do, *“it’s boring sat here all day, I can’t go out for a walk, there are codes to get out”*. One resident said they were out all the time when they lived at home, *“if I could go for a walk and breath of fresh air, that would improve it.”* (at the home)

Many residents said they spent time watching TV in either the lounge or their bedrooms. One resident said they appreciated having control of the remote because they can decide what to watch. Another explained that watching TV was one of the few available activities, as a lot of the other residents have dementia, so it’s difficult to talk to them, but they had made one friend. One resident said they spent much of the day waiting for meals or visitors. Most residents agreed that they would like to see more activities on offer, though one resident said they preferred watching others take part rather than joining in.

Resident comments.

- *“Staff worked hard getting this decoration up – I think they will stay until after Bonfire – they look good, don’t they?”*
- *“I’d like more outings, on a bus”*
- *“When keep fit class is on, I go shopping”*
- *“Watching TV in my bedroom or sit and people watch”*

As we were leaving, we observed a music session being set up with instruments for a group activity. However, during our visit, we didn’t see any activities taking place, and aside from the bookcases in the lounge, we didn’t notice other activity materials such as puzzles, art supplies, or games in the communal areas.

A visitor told us they had noticed a change in the number of activities provided, saying, *“it used to be brilliant.”* They explained that the previous activities co-ordinator did lots of things and that there needs to be more now. They said they are invited to join in activities when visiting, if any provided, which they enjoy, and remembered that there used to be trips out to the RAFA Club and other outings.

Staff also recognised the need for more activities. One staff member rated the activities as *“poor,”* while another described them as *“good.”* A staff member said that it was hard providing activities – planning, recording, and organising things for over 30 people, all wanting different things. They didn’t realise how much there was to it until the activities co-ordinator left.

Another staff member said everyone got involved in the Halloween party, both upstairs and downstairs. One added, *“More support on activities, more hours to do activities,”* and said they’d be willing to increase their hours to help.

Food and drink

We were told that all meals at Linson Court Care Home are cooked in-house using fresh produce. Two chefs share the kitchen duties across the

week and work together on Fridays to strengthen teamwork and consistency.

The main meal of the day is served at lunchtime, with two options available daily, plus jacket potatoes. Vegetarian and vegan choices are offered, and there is a two-week rolling Halal menu. Meals for residents on soft diets are shaped into distinct scoops to make different food types easy to identify. The manager told us they are exploring the option of outsourcing level 4 meals – those with a thick, smooth puréed consistency that requires no chewing – from Appetitio.

Staff told us that the food at Linson Court is good, although one said they wished residents could have homemade apple pie. Meals are usually eaten in the dining rooms, but residents can choose to dine in their rooms if they prefer. We saw a staff member taking meal orders for lunch during the morning, chatting to residents and asking what they would like for dinner and tea.

Residents spoke very positively about the food. They told us they enjoyed their meals and felt there was plenty of choice. They appreciated being able to choose whether to eat in the dining room or their own room and said they could eat earlier if they wanted to.

Residents described a variety of dishes, such as “*chicken casserole*” and “*toad in the hole with Yorkshire puddings*,” and said the food was “*good with lots of choice*.” One mentioned having “*porridge in a morning*,” and another said, “*On a weekend, bacon, sausage, egg, tomatoes and beans – all in a sandwich*.” One resident said they liked eating in the dining room because of the lovely view, which our visiting team agreed was lovely.

A visitor said, “*You can’t fault the food – they get bacon, sausages*”. *At Christmas, family can come and have a meal should they wish. I’ve been invited to stay and eat also. Food’s lovely.*”

Resident comments.

- “*It’s excellent*”
- “*I can choose what I want*”

- *"I can suggest foods"*
- *"Portions are big but not too big"*
- *"Food is good – made to my requirements"*
- *"My family sometimes bring me food"*
- *"Good choice of meals, I've never gone hungry"*
- *"First class is food"*

Visitors to the home

Visitors are welcome at any time but are asked to avoid protected mealtimes. The manager explained that families are encouraged to visit *"as if it was the resident's home"* and can come after work or in the evening.

Visitors we spoke to said they felt welcomed when they arrived. One visitor mentioned the protected mealtimes but added that if their visit happened to fall during a meal, they were invited to stay and eat or wait in the lounge or their relative's room – they said they never felt pressured to leave.

We asked the manager how families are supported when their loved one first moves in, given the big emotional and practical changes this can bring. She explained that families are shown around the home and given her direct email address for any questions. She also told us that there are plans to offer dementia training for families to help them better understand the condition and how to support their relatives.

The home operates an open-door policy, and visitors are encouraged to speak with Renata whenever they need to. We asked how accessible this was given that the manager's office is on the lower ground floor. The manager explained that if visitors ask any staff member to speak with her, they will contact her straight away, and she will either come to meet them or invite them to her office. She also makes daily walkarounds to speak directly with residents.

Several residents mentioned the manager by name, saying that she checks in with them regularly. Visitors also confirmed this, telling us they

can come and go as they please and have no complaints about the visiting process.

One visitor said they didn't see much of the staff during visits but could find someone quickly if they needed help, and staff would sort things out. We did notice, however, that a couple of visitors looking for a staff member when staff were busy

Visitors must wait at the front door for someone to answer. On two occasions, one of our visiting team members alerted staff to someone waiting to come in. This created another bell ringing alongside the alert bell.

Staff at Linson Court Care Home

Many of the staff we spoke to had worked at the home for several years. One person said their long service was a testament to the home and how much they enjoyed working there.

We observed staff interactions with residents and found them to be polite, respectful, and kind. Staff addressed residents by name, and one staff member took care to make sure an individual's clothing was straight and their dignity was respected. Most conversations were short and friendly, though often focused on tasks, as staff were busy helping residents get ready for the day and meeting their needs.

The manager, Renata told us she has worked at Linson Court for many years in a variety of roles. She said this experience helps her understand the different challenges across the team. She was welcoming, approachable, and enthusiastic, and seemed genuinely open to new ideas for improving the home. During our walkaround, she greeted residents by name, and it was clear that she knew them well.

Staff told us that both the manager and deputy offer good support and are approachable if concerns arise. One staff member said the support was okay, while others said they felt listened to and appreciated.

Some staff talked about being able to change or progress in their roles depending on what suited their stage of life. One staff member said they used to work as a carer and still step in if needed, even though their role has since changed.

Staff record their carer tasks on work mobile phones in real time, logging tasks as they complete them. One staff member said this can sometimes look to visitors like they are using their phones for personal reasons. They suggested that using tablets might look more professional, but carrying them around would be impractical. The manager noted that a central recording station might create queues and slow down updates.

When asked whether they would be happy for a relative to live at Linson Court most staff said yes. One explained, *“staff care a lot,”* and another said they knew their family member would be looked after well but were a little unsure. One person said yes, but only if they were mobile and independent, while two said no they didn’t think so.

Most staff said they liked, loved, or enjoyed working at the home but agreed that more staff would make a big difference. They said extra support was particularly needed during medication rounds and for residents who are less mobile or spend most of their time in bedrooms. One staff member said,

“We have to be the voice of people who don’t have one,” and explained that they always try to answer buzzers as quickly as possible.

Several staff mentioned that there is only one nurse responsible for medication across the building, which houses over 30 residents. They recognised that this can be challenging if an emergency occurs. Another staff member said they would like more staff to support the nurse with healthcare management.

Staff also spoke about the large amount of paperwork required and the fact that team leaders are included in staffing ratios, even though they often have heavy workloads.

Training was described in mixed ways: one staff member said there was *“lots of it, sometimes too much,”* while another said it was offered but *“never followed through.”* Others said their training was up to date.

One staff member raised concerns about communication challenges when agency staff from different backgrounds join the team. They said that occasionally outdated language is used by some residents and that this can lead to difficult conversations, which they then need to address.

Some staff mentioned challenges with external healthcare services. One example involved the district nursing team, who provide certain treatments such as dressings or insulin injections for residents who don't require full-time nursing. Staff felt that it would make more sense if the home could deliver these services directly, with the associated funding. One staff member said there had been occasions when district nurses had not attended as scheduled – including one weekend when medication was missed. Nursing staff ensured the resident was safe and received their medication, but staff felt the system *“seems set up wrong – all to do with funding.”* A staff member mentioned that there had sometimes been a delay with syringe drivers. We raised this with the manager, and they said they were not aware of any syringe driver delays at the home.

When asked whether staff have enough time to talk with residents, staff gave mixed responses. Some said they can chat as needed, while others said they don't have time, or only sometimes do, usually while supporting residents with care needs. One staff member described how sad it feels when residents pass away, saying, *“you get to know them well.”* (residents) They said they knew how to cope emotionally but were sure that support would be available for staff if needed.

Several staff felt that having more time and less pressure would improve their experience at work. They also said residents would benefit from more stimulation and activities. One staff member said there used to be a service called *Find a Friend*, where volunteers visited the home. They said, *“It's a shame something can't be found in its place – that worked well for residents.”*

Staff comments about support at work.

- *"Staff and management good"*
- *"Renata – jumps in and helps in every way"*
- *"I can go direct to manager if a problem – I have a voice and give my opinion"*
- *"Renata knows all the roles – can go to her if needed"*

Many residents described staff as good, friendly but busy. One resident explained that if they have a problem, the staff will see to it. Another told us, at a point we were looking for a staff member *"The staff are doing this 11 am thing – all staff"* (the staff huddle).

A different resident commented,

"Staff have a lot of work to do but are lovely,"

while another said that staff take them out to have a cigarette as needed. One resident told us they could talk to staff whenever they wanted and that *"they are nice people."* A visitor agreed, saying they knew the staff well.

Resident comments

- *"Staff okay, they are good"*
- *"Most staff are good; you can't like them all"*
- *"They are good lasses; I know them well"*
- *"Staff have time to talk, occasionally, mainly as passing by"*
- *"I like it here, staff are lovely"*

Staff feedback about working at Linson Court Care Home

★ **3.5/5**
Average Rating



Staff rated the overall service
for residents living at the home
as **3.5 out of 5**

Staff told us how they felt the home involved the residents and their
relatives in decision-making

**"Very well, staff and
management
are very good at
supporting others"**



"Well informed"

There were many positive comments from staff about
the support from the manager and the senior team!



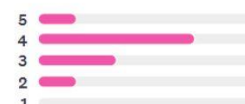
Staff comments

**"Renata gives good support; she will
bend over backwards to help. Eve is
also supportive and will address any
problems. I'm happy to go to either."**

**"The Manager is good, but we never
see anyone from Constantia. We used
to see people from the other
organisation before; they were more
visible. It would be good to know who
they are in case we ever need
support."**

**"Need more time, more staff, more
support. Head office to give us more
staff, more support "**

★ **3.6/5**
Average Rating



Staff rated working at
Linson Court care home
3.6 out of 5



Health professionals supporting the home

Linson Court Care Home is supported by the GP practice Wellington House, and the manager told us this partnership works well. She described the relationship as positive and said the GP provides a weekly in-person walkaround on a Tuesday or Wednesday. During these visits, the home identifies which residents need to be seen or reviewed. Contact with the GP is made via the switchboard or email, and the manager said this system works better.

Other healthcare professionals who support the home include:

- **Chiropodist:** visits every six weeks
- **Dentist:** referrals are made to the Local Dental Service. Staff said referrals are acknowledged quickly but there is no timescale for treatment, and it can take a long time. We provided signposting to Huddersfield Dental Care Centre.
- **Optician and hearing services:** provided by Eyecare, who call monthly to check for new residents and usually visit within a day or two.

The manager explained that the home no longer takes college or university students for work placements because there is no qualified assessor available within the team. Work experience placements also have been put on hold as students have to be supervised at all times and only provide activities in communal areas, due to insurance requirements.

We also spoke to a healthcare professional visiting from the Heart Failure Team, who visits the home every few weeks. They told us, *"Staff are friendly – seems nice here."*

Conclusion

Linson Court Care Home appeared clean, tidy, and well maintained during our visit. The atmosphere throughout the building was warm and welcoming, and both staff and residents seemed comfortable and familiar with one another. The property itself is well designed and offers residents

beautiful views from the upper floors. The dining rooms, in particular, benefit from these views, which make mealtimes a pleasant experience.

We observed staff being friendly and caring, and residents told us they felt safe and well looked after. Many residents and visitors praised the quality of the food, describing it as enjoyable and varied.

The manager appeared approachable, knowledgeable, and committed to the home. She was open to feedback and new ideas for improvement. Staff spoke highly of her and said they felt supported. However, it was clear that staff are very busy and that the call bell system, while effective in alerting staff, contributes to a noisy and sometimes hectic atmosphere when not answered quickly. Some residents told us they must wait a while for assistance, which can impact their dignity and comfort.

There was also a clear gap in activities at the time of our visit, with residents and staff agreeing that more stimulation and engagement would improve life at the home. The manager acknowledged this and is recruiting a new activities co-ordinator.

We felt it was a shame that the garden isn't used on mild days. The outdoor space could be made more accessible during the colder months, as even small improvements – such as seasonal plants, tidying, or features of interest for residents whose bedrooms face the garden. The outside summer house area could still be enjoyed safely if winter stored furniture found a new home and paths regularly assessed for slip hazards. This would make a difference to residents who enjoy looking outside or sitting in the garden when possible. The sheltered smoking area, where some residents and staff sit, could also be improved to make it more comfortable and inviting.

Overall, Linson Court Care Home provides a caring and homely environment, with a positive and friendly team who clearly want the best for residents.

Recommendations

Recommendations	Managers comments
We recommend increasing meaningful activities and stimulation: Recruit an activities co-ordinator as soon as possible to provide a wider range of entertainment and opportunities for residents to socialise and stay active.	I have one wellbeing person in place and waiting for the DBS to come back for the 2nd wellbeing person so that they can start this will have a positive impact on the residents at Linson Court
We recommend a review of the call bell system: Consider ways to reduce the noise level and still ensure that calls are answered promptly. This would help create a calmer environment and protect residents' dignity.	As a company we are looking into replacing the call system we have where the call bell will activate on the nourish device to staff this will create a calmer environment for the residents.
We suggest reviewing staffing levels: Residents and staff both mentioned that more staff would help reduce waiting times and improve overall care and wellbeing.	Staff levels were reviewed and they have now increased and we are currently working above the recommended staffing levels that are indicated by the dependency tool we use at Linson Court
We recommend improving the use of the outdoor and summer house areas: Regularly assess for trip hazards such as leaves and conkers and make small seasonal improvements to ensure the garden can still be used safely on mild days or for longer periods in the year.	The garden is cleaned on a regular basis but due to the amount of tress we have increased our gardener visits to every other week to maintain the area, Once both wellbeing teams members are full on board

Recommendations	Managers comments
	we will then be making plans for the summer house and how we can achieve to use this in the cold weather
We suggest considering the accessibility of the manager's office: As the office is located on the lower ground floor, explore whether a more open or visible space could make it easier for visitors to approach staff and raise any questions or concerns.	The Managers office always has an open door policy and I am always available for anyone that would like to see me, I am visible on the floor when needed too.