

Applegarth Care Home

Enter and View Report 27th May 2026

healthwatch
Slough



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What is Enter and View?

Enter and View is one of a range of options available to Healthwatch Slough to enable us to gather information about health and social care services and to collect the views of service users, their carers, and their relatives.

Enter and View is an activity that all local Healthwatch organisations can carry out to contribute to their statutory functions. This means Healthwatch Slough can choose if, when, how, and where it is used, depending on our local priorities.

An Enter and View visit is where a team of appropriately trained people, known as Authorised Representatives, access a service on behalf of a local Healthwatch organisation, make observations, collect experiences and views and then produce a report.

An Enter and View visit is not an inspection – it is the Care Quality Commission (CQC), as the independent regulator of all health and social care services, that has the formal inspection responsibility. Local Healthwatch organisations aim to offer a layperson's perspective, rather than a formal inspection.

Enter and View is not a stand-alone activity, but rather it is part of a wider piece of work to collect information for a defined purpose.

Purpose of the visit

This visit was to look at what is working well with the service and what could be improved. We had a particular focus on independence and choice.

Background of the home

Applegarth Care Home is located in a residential area and has a total of twenty bedrooms. Most have ensuite toilets and wash basins, with separate shower/bathrooms.

It is run by Applegarth Care Home Ltd.

It's latest CQC inspection was in 2019 and it was rated 'Good'.

Preparation and Planning for the visit

Following discussion with the Local Authority a priority list was presented to the Healthwatch Slough Advisory Group who agreed the visit to Applegarth Care Home.

Three weeks prior to the visit, the manager was telephoned and we requested a visit on 27th May. This was confirmed with a letter. The week before the visit a member of the team dropped off posters to promote the visit, as well as printed surveys for staff and relatives, along with a post box to hold them securely. Details on the post box also included a link to both surveys, and a QR code. The post box was collected one week after we had visited.

During our time there we spoke with four residents.

Additionally we spoke to/received surveys from three relatives/friends, and three members of staff. We also spoke to the manager, the deputy manager and the activities coordinator

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.

The Enter and View team consisted of Ann Brosnan, Nick Durman, Danielle Grainger and Emily Bidwell.

Observations

Interactions with Staff

We arrived at the care home and were let in by a member of staff. We were asked to show our ID badges and to sign in.

During our time in the home we were all greeted by staff as we moved around.

Environment

As well as general observations, we used the King's Fund Dementia-Friendly tool.

Applegarth Care Home

Is Your Care Home Dementia Friendly?

1. The environment promotes meaningful interaction and purposeful activity between residents, their families and staff.

All assessment criteria met except one relating to layout and choice of seating. Is there a choice of seating e.g. settees as well as single chairs with arms, and are chairs arranged in small clusters to encourage conversation?

We only saw individual seating with arms, rather than a variety of seating. The seating was arranged in lines around the walls of the main lounge and in the next door quiet area rather than some being in clusters.



This may be due to the space available. The home may want to consider if they can introduce some alternative seating and/or if it is possible to arrange some seating in clusters. Below is an image from another care home we visited with seating options and clustered chairs.



Examples where the assessment criteria were met:

Does the approach to the care home look welcoming? Is the entrance obvious and the doorbell/entry phone easy to use?

There was a clear sign outside the care home identifying it as Applegarth care home. The approach to the care home was primarily a large flat car parking area. However, the approach looked welcoming and tidy. There were some flowers and shrubs at the front of the house and a bench.



There was a flat walkway with a handrail leading to the front door and the entry doorbell was easy to identify and easy to use.



Does the care home give a good first impression i.e. does it look clean, tidy and cared for?

The care home entrance and hallway were clean and tidy and there were no unpleasant odours. There were some fresh flowers displayed on a table along with hand sanitiser and the signing in/signing out book.



Does the environment support residents to engage in home life e.g. doing gardening?

There is a gardening club at the home that residents can be involved in. One resident likes to clean and has her own broom that she can use.

2. The environment promotes well-being.

All assessment criteria met except one relating to light switches:

Do the light switches contrast with their surrounds/the walls so that they are easy to see?

The light switches we observed in the home were the same/similar colour as the walls, particularly for people with dementia this can make it difficult for them to see the light switches.



There are various solutions to make light switches more visible, an inexpensive solution is the use of coloured switch surrounds like the examples below:



Examples where the assessment criteria were met:

Is their good natural light in bedrooms and social spaces? Are links to and views of nature maximised? e.g. by having low windows.

The home had large windows in the communal spaces. The lounge and dining room had lots of natural light. The lounge had large full length glass patio doors with views of the garden. The dining room had large low windows with views of the front of the home. We did not see all of the bedrooms, but those we did observe were light and have views outside.



Is the décor age appropriate, are there photographs or artworks of a size that can be easily seen?

There were artworks on the walls in the dining room that were easy to see. There were bespoke artworks placed around the home, some of these had been created by staff/residents.



Some of the homes we have visited in the past have had large murals on the walls that create a focal point and point of interest. They are particularly good for residents with dementia. Below examples may be of interest to Applegarth care home for any future decoration of their home.



Is there independent and easy to locate access to a pleasant, sociable, safe and secure outside space e.g. garden, courtyard, or terrace with sheltered seating areas?

There is easy to locate access to the patio and garden area via large patio doors from the lounge. The garden is well kept and tidy. There is a flat patio area, and the rest of the garden is laid to lawn. There are shrubs and some flowers. There is a variety of seating some of which is covered. There was a single parasol to provide shade. The home might want to consider providing more shade in the garden for residents via the use of more parasols or other options particularly in the summer months. We were told that the home has gazebos they can erect, but these take time to erect so other options would be beneficial.



We did notice that there was a 'lip' on the threshold of the patio door leading to and from the garden. There is a potential this is a trip hazard, and the home may want to consider how to minimise that risk.



3. The environment encourages eating and drinking.

All assessment criteria met except the following which was partially met:
Do the people living in the care home and/or their relatives have constant independent access to hot and cold drinks and snacks?

We observed drinks being offered by staff and we observed two hydration tables. However, we did not see any snacks/fruit that residents/family could help themselves to. Below are examples of what we have seen at other care homes we have visited.



Examples where the assessment criteria were met:
Are large dining areas divided so as to be domestic in scale?

There were several round tables to seat between one and four, which were domestic in scale.



Is there a sufficient level of lighting so that the table settings and food can be seen easily?

The dining room had a large wide and low level windows that created a light and bright space and overlooked the front of the house. When we observed during lunchtime, the level of lighting enabled table settings and food to be easily seen.



Does the dining room provide opportunities for residents to eat in small groups or alone if they wish?

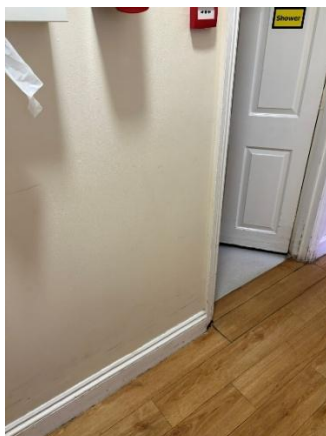
When we observed lunch, we saw residents who sat with other residents and we saw residents who preferred to sit alone. Residents could be joined by a family member if they wished, or they were able to sit in the lounge or in their bedrooms to have their lunch if they preferred.

4. The environment promotes mobility.

All assessment criteria met. As examples:

Is the flooring in a colour that contrasts with the walls and skirting.?

All of the flooring we observed throughout the home contrasted with the walls and skirting.



Is there space to walk around independently both inside and outside the home?

As the care home is an older building the corridors are quite narrow. However, the corridors, lounges, dining room are clear and uncluttered enabling residents to independently walk around the home. No photos of the lounge have been included to protect the privacy of the residents. In addition, the garden is easy to access and is laid out in a way that enables residents to independently walk around and enjoy the garden. We observed residents independently inside and outside the home.

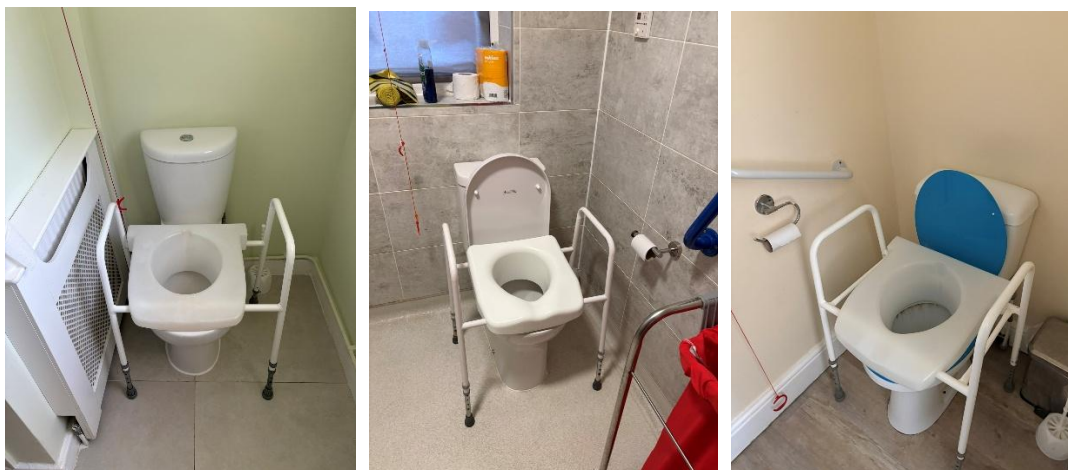


5. The environment promotes continence and personal hygiene.

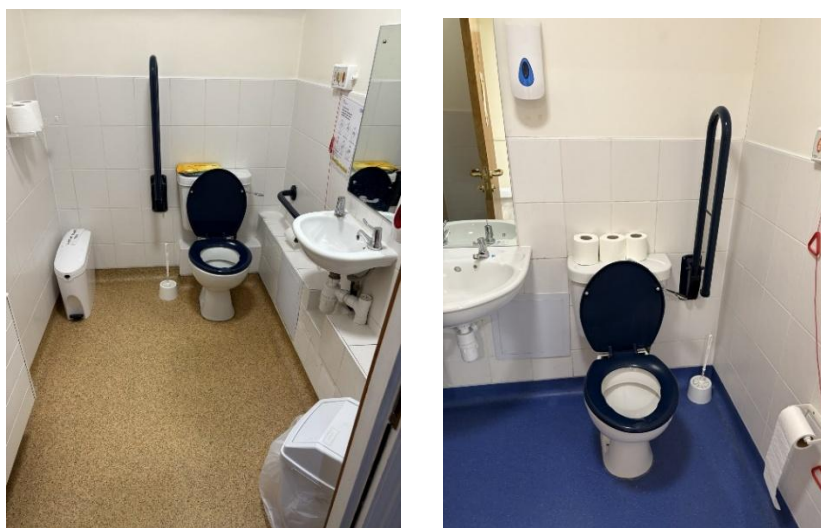
All assessment criteria met except the following which was partially met:

Are the toilet seats, flush handles and grip rails in a colour that contrasts with the toilet/bathroom walls and floor?

Some but not all of the toilet seats we observed were in a different colour to the wall/floor. There were also some grip rails that did not contrast in colour to the toilet and in at least one case there were no grip handles present.



For comparison, below are good examples of consistent contrasting toilet seats and grab rails we have found at other care homes we have visited.



Are the sink taps clearly marked as hot and cold and easy to identify as such?

The sink taps we observed did have a thin red and blue line on each tap, but this is difficult to see especially for someone who has dementia and/or sight impairment.



This is similar to other care homes we have visited, below is an example of how several care homes have tried to make the hot and cold tap easier to identify.



Examples where the assessment criteria were met:

Do all the toilet doors have the same clear signage with text and images?

All of the toilet doors we observed had the same signage which included written and pictorial symbols for the toilets.

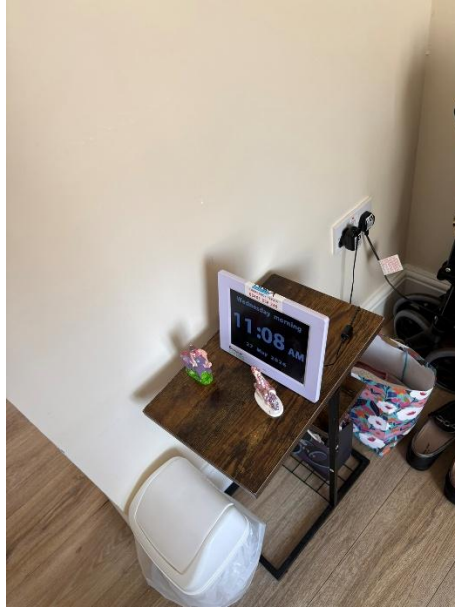


6. The environment promotes orientation.

All assessment criteria met except one relating to a large clock:

Is there a large, accurate and silent clock clearly visible in the social area and does it display the correct day and date and weather?

We observed a digital clock of medium size on a table in the lounge, which displayed the day, time and date, it did not show the weather. The clock was not large enough or placed in a position that was clear to see or easy to read for all residents.



Below are good examples of large accurate clocks with date, day, time, weather that were large enough and in a position that could be easily seen by residents.



Examples where the assessment criteria were met:

Are signs for residents placed on, not beside, doors and of a good size and of a contrasting colour to be seen easily?

We observed various signs for residents to help with wayfinding. The signs were of a size and colour to be easily visible. As examples:



Are bedrooms and bedroom doors personalised e.g. through the use of numbers, accent colours, artworks, or personal photographs?

We observed bedroom doors that had been personalised in various ways using pictures, photographs. We haven't given photographic examples in this report in order to protect individuals' privacy.

7. The environment promotes calm, safety and security.

All assessment criteria met. As examples:

Are spaces clutter free so as not to prevent easy movement in the home?

We didn't observe any cluttered areas in the corridors, social spaces and other areas of the home that could impede residents' safe movement around the home. We didn't observe any clutter in the garden that would prevent safe movement. A picture of the lounge has not been included to protect residents' privacy.





Has careful consideration been given to the placement of any mirrors or shiny surfaces in corridors and social spaces?

We didn't observe any intrusive mirrors or shiny surfaces or flooring in any of the corridors, lounge, dining rooms or other communal spaces.

Garden Observation

The day we visited the temperature was 35c and it was too hot for many residents to go in the garden. However we did get feedback from residents who liked the garden but felt it lacked natural shade. One resident commented that they would like a path that went all round the outside of the garden for walking and other residents also said they would like a small greenhouse so that they could grow fruit and vegetables.

"I think the garden is fine as it is, maybe a few more flowers would make it look better."

"I use it but I think it is a bit on the small side."

There is a gardening club and residents have been able to bring plants:



I brought my peonies and planted them in the garden when I first came.





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Quality of Care

The residents we spoke to were happy at the care home:

"I feel safe and don't have to worry about bills."

"I like the home: I moved here from another home in High Wycombe which I did not enjoy it. I feel safe here and well looked-after."

"I'm very happy in the care home, the staff and manager are great, there is a lovely garden, the food is good."

"I feel very lucky to be here."

All of them said they were able to get up and go to bed at a time that suits them:

"Yes. I get up at 8.30am and go to bed at midnight."

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"I get up whenever I want, I don't always get up at the same time everyday."

Relatives all felt that their loved ones looked presentable when they visited and had a choice about what to wear.

Relatives also felt that their loved ones are encouraged to be as independent as they can be and are able to get up and go to bed at a time that suits them.

"Currently washing independently Staff encourage and want her to remain independent as much as possible."

Activities and Daily Life

We spoke to the activities lead who had an extensive range of activities to use. She also is a qualified hairdresser so does the hair of some of the residents.

Each morning she assesses the residents to find out what activity will best suit them on the day. As a trained carer (although this is not her role) she finds it useful in her role as it helps her understand the needs of the residents.

There are morning exercise sessions which can be done in their chairs as well as dancing and singing. The activities lead will work individually with residents to encourage them to stand and use their legs. She will assist them and also encourage those who have walking frames to use these to help them stand up and move more.

Quizzes are popular and themes include 'Who am I and where am I?' Often quizzes take place alongside another activity such as artwork (while we were there we saw residents colouring and playing cards)

There is a lot of time for reminiscing and talking about past lives as well as standard board games such as scrabble, snakes and ladders. Bingo is also popular.

The activities lead also spends time with those who are either confined to their rooms or choose to stay there. One of the other care homes in the Greensleeves group produces 'The Daily Sparkle' and shares this with the activities lead.

Residents can either read this themselves or the activities lead will read it with them or for them.



There is a folder full of black and white photos of film stars that residents like to look at and talk about.

Every other week flowers are purchased and the residents help arrange them

Outings to places such as Dorney Lake and garden centres are also popular. A boat trip to Windsor is being booked. Some residents are restricted in their ability to go out due to mobility issues.

There is a gardening club and, when the weather permits, activities are moved out into the garden. The activities lead is also planning to set up a choir and understands the benefits of singing and keeping the brain active with puzzles and crosswords as well as movement.

There is a wishing tree and the activities lead aims to fulfil as many of those wishes as possible.

Residents' comments

The residents were seen enjoying playing cards and colouring activities during our visit.

One comment that was made by the residents we spoke to was that they would like to have a greenhouse so that they can grow fruit and vegetables. We saw a

small greenhouse at one of our other Enter and View visits which was well used by the residents:



Relatives were positive about the garden and felt there could be opportunities to improve it further:

"Very well laid out and excellent outside space. Always looks neat and tidy."

"Its homely. Shady in areas Option to plant flowers there is ample bedding room."

"Would like a cold frame so more gardening could be done."

"Grow more things such as food."

The manager also appreciated the need for more shade in the garden.

One of the residents used to be a cleaner and the home had bought her a broom to use. The deputy manager was able to show us a video of the resident using the broom, which gave her a sense of purpose, kept her moving and also helped to keep her happy.

When we asked the residents about the activities, we were told the following:

"Previous care home didn't have activities. I like it here as there are card games and I can colour in pictures which is nice."

"It's a bit limiting as getting exercise is a drawback as it is hard to walk on uneven pavements which have potholes. The home is on a main road. I need more stimulation and movement as it is limited to chair exercises."

The residents we spoke with all enjoyed going out and would like to go out more often::

"I can go out occasionally if I want to but it is limited as I would need a carer and taxi if I wanted to go to the pub for the quiz and there would be costs involved. I'm not a fan of games as the ones in the home seem to be more for kids"

"I can go on trips, but not on my own. I enjoy garden centres."

"I can go into the garden whenever I want. The care home arranged a trip recently and I'd like there to be more trips to different places."

Some felt there were limited opportunities to move around:

"Chair exercises on the whole and not real movement."

"There are games like bowling which I like."



We can move around whenever we want and I like to move around as much as I can and go for a walk in the garden



Relatives' comments

The relatives we spoke to had all been asked about their loved ones hobbies and felt that they were encouraged to take part in activities:

"The first day she got there she went straight to the activity ,she joined in and appeared to enjoy this."

Relatives were aware of other options if their loved one did not want to join in with an activity:

"Music – she likes Queen!"

"They can spend time in the garden. Books and puzzles are available. Option of music and TV."

Those residents who are mobile were encouraged to move around and use the outside space according to their relatives.

"Mum is chair bound and has had a referral to physio to see if that can help."

Staff

The staff were overall positive about the activities on offer:

"The residents enjoy the activities such as listening to music, puzzles etc."

"It would be nice if there was more variety in activities for those who wanted them."

When we asked staff what they did if a resident wanted a different activity from those on offer they responded as follows:

"We would use the library or staff would order it"

"I will look into getting what they would like and keep the resident informed about this and when we can get it for them."

Staff made the following comments about the garden and its use by residents:

"We have a couple of residents who smoke. I also take them out into the garden to do activities. Only the weather would prevent us using the garden."

"A member of staff will have to let them out if they need assistance, we can't leave the doors open as we have people that wander who are unsteady on their feet or their sight is failing them."

Food and Drink

Lunch Observation

We undertook an observation in the lounge where most of the residents ate (the dining room is located next to the kitchen and is quite small).

There were five people sat on one table, others were sat in their chairs. One resident was sitting in a separate part of the living room on her own, she initially refused her lunch and it was brought to her about twenty minutes later and she accepted it. A carer came in and sat with her when she got agitated, cut up her food and encouraged her to eat, chatted away and helped her to be more positive.

The activities person was working on a tablet and sat next to a resident and reassured her that lunch was being served soon.

Lunch started to be served from midday. Those requiring individual assistance were served after everyone else in order that there were staff available to help them.

Tables had cloths and napkins on them and some residents had bibs. There were no flowers or menus on the table.

The staff wore aprons. One member of staff was cleaning the unoccupied chairs in the living room and the walking frames.

Food was brought in on plates with covers over them plus another member of staff had a plate of Yorkshire puddings and asked residents if they would like one.

One resident refused lunch saying they were not hungry so this was taken away and the staff took it to the kitchen to keep it warm so it could be offered again later.

Fruit squash was given to residents; it was a very hot day and there was a fan in the living room to help keep it a bit cooler.

A resident who usually eats in the dining room asked to eat in the lounge and was accommodated.

There was music playing in the background. A member of staff knocked over a glass of water and immediately started to clean it up, got a hazard sign out and then asked the cleaner to take over so she could assist a resident to eat.

Those assisting residents wore aprons and chatted away to them and encouraged them to eat. One staff member also assisted the resident sitting next to the one she was helping, by cutting up his food and putting a fork in his hand. He then began to eat his food.

All staff made sure that residents were kept clean and mouths wiped as needed.

Two residents started to have a disagreement and a member of staff came over and calmed the situation down.

Dessert was served which included ice cream to help cool down the residents.

Resident feedback

The residents we spoke to made the following comments about the food:

"The menu is changed frequently. Staff ask residents what they would like. I would like to see some oriental food on the menu."

"Food is alright. It is hot and I get enough."

"You get a good choice of food at all meal times and if there is something from the choices you don't really want then the staff will make you something else. On the whole I like the food and the options they have. They ask us for ideas on what meals they offer. We have a roast twice a week which is good" (There was a roast for lunch on the day of our visit)

We were informed by the deputy manager that there are regular discussions with residents about the menu and suggestions are taken into consideration and acted upon as much as possible.

Relatives

The relatives all appeared to be happy with the food. All felt there was enough food, and help with eating and drinking. They also felt the home provided food from different cultures as relevant.

"We came on one weekend. The food was amazing They have ample choice."

"At her previous home we were not allowed to join her for a meal. It is such a pleasure to be able to do so now."

"Very accommodating: they always offer me food and drink when I visit."

Staff Feedback

The feedback from staff was positive:

"The menu was researched by our manager who had a conversation with the residents about likes and dislikes it is their menu."

"The residents' opinions are always valued and listened to , changes can be made."

Hydration and nutritional needs

All the staff we heard from understood the need to keep the residents hydrated and we saw them regularly offer drinks and encourage the residents to drink as it was such a hot day.

"They are given drinks throughout the day."

"We offer drinks hot and cold throughout the day , fresh fruit and snacks available all day."

Dignity and Respect

The residents we spoke to felt they were treated with respect and, those that needed assistance were helped and those who were independent knew they could also ask for help if needed:

"I can do a lot of things for myself but if I need any help I'll ask the care staff."

Relatives felt that their loved ones were treated well and there were not negative responses from those that we spoke to or completed a survey. They all felt welcome at the home.

"Nothing but positive Caring warm and welcoming Home form home."

Staff

Resident feedback

The residents we spoke with were very positive about the staff

"All of the staff and the managers are really good, I don't have any complaints, they are kind, caring and funny."

"Generally the staff are really good. Management would listen if I had any concerns."

"They are helpful. If there is any problem they will help."

Residents felt that staff are quick to respond:

"I always get what I need, the staff are very busy so they can't always help you straight away but you don't have to wait long."

Residents also felt that staff had time to spend with them:

"Yes. They are friendly."

"The staff are always chatting to the residents, checking how you are, asking if you need anything, a drink or anything else."

Relatives' feedback

All the relatives/friends we spoke to felt that the staff are caring and kind. They felt listened to by the staff and managers. All knew who to speak to if they had any concerns, are encouraged to visit the home and are kept informed of any changes to their relatives' health and felt involved in the decisions made.

"I can visit anytime I want to and am called when there are any concerns with mum's health. I would like her to have a bigger room but am happy with this one for now."

"Respectful and person-centred We had over five years of poor care and poor communication from the previous home. Applegarth has restored our faith. Excellent support from the Management."

Staff Feedback

Staff at Applegarth had more time to spend with residents than in other care homes we have visited:

"Yes. It is not planned into my day but I do sit with residents."

"Yes, I will make time and try to use a personal approach. I like to get to know them as individuals."

"Most Definitely, communication is a vital part of life, you can learn a lot about how people are feeling and how we can help them."

Manager feedback

We heard from the manager whose greatest challenge was around DoLs. Some are pending from years ago and this is a concern as residents lack the required documentation. (Since our visit there has been a change in DoLs and how it is assessed, which may change the way it is implemented and who requires it).

Hospital discharge is not an issue as the home has excellent support from their GP. At the practice there is a dedicated liaison person who is excellent. The deputy manager felt that transport can be an issue as it can take time to organise.

There is a local pharmacy which provides excellent support and comes in to give 'flu vaccinations as well as delivering medications. They are very good and know the residents.

Dentistry is a challenge as it is difficult to get an NHS dentist, so residents have to pay and not all are able to do so. It is difficult to get an NHS dental appointment and the cost of an NHS dentist can also be beyond the means of some residents.

Optical Care provide training and support the residents with eye tests. If a resident refuses to be seen they will return on another day and try again to carry out the eye tests.

There is a new podiatrist at the home who is dementia friendly and makes the service more personal for the residents.

The activities lead provides hairdressing and any money from this goes into the activities fund.

The manager felt supported by the owner and the other managers in the two sister homes. The current refurbishment being undertaken is also helping to improve the home.

When we spoke to the deputy manager he mentioned that some residents had mental health issues caused by their dementia (such as thinking someone is in their room) that were challenging to deal with and help around this would be useful. The deputy manager also felt that trips outside of the home made a positive difference for many of the residents.

Staff: training and support

The feedback from staff was that they felt supported and had good access to training:

"Supported by manager and deputy."

"Yes well trained , courses available all the time when needed."

"Yes, training is very good; manual handling, nutrition, first aid, fire safety, dementia, COSH and oral hygiene."

"Training is often available, all lines of care and how to improve our skills within the home."

Communication was also good:

"Staff meeting each month and handover morning and afternoon."

"Staff share information during handover and communicate throughout the day and have monthly staff meetings."

"Daily in beginning of shift hand overs and monthly staff meetings, Jayne Humphreys door is always open."

Staff were also supportive of each other:

"We support each other when we have a bereavement. The management will listen and support us if we need help."

"We are a good team who supports each other, if you need help you ask for it from any team member if a Senior isn't available."

When we asked the staff what was the hardest part of their job we received the following responses:

"When resident passes away and this gives me anxiety. I am well supported and everyone helps me."

"Sometimes being pulled in lots of directions and feeling that you may fail."

Connections with other services

Residents were able to get appointments with other services:

"Yes I get my hair cut when needed, someone comes and cuts toe nails."

"Hairdressing is available. We have to pay for the chiropodist."

Residents were happy with the healthcare they receive:

"Anytime I have needed health care the staff always arrange it."

"I have regular appointments for my health – had a hospital visit yesterday."

The relatives we heard from felt that there was good access to healthcare and other services. Dentistry was the one area of concern:

"Dental services at the home are hard to come by. Optician came last week and the chiropodist comes regularly. A friend does my mum's hair and I do her manicures."

Recommendations with response from manager

Overall the feedback from residents was positive and they were happy with the care home and the staff. Relatives were also complimentary and happy with the home. There was a positive atmosphere and the manager was keen to receive the report and see how the home can improve further. We would like to make the following recommendations:

- Use contrasting colours in all bathrooms and toilets for things such as toilet seats and grab rails and make 'hot' and 'cold' taps more clearly visible

Response from Manager: We have already looked into how we can identify the hot and cold taps more clearly. We also plan to work towards using contrasting colours in all our bathrooms and toilets to support our residents.

- Purchase a cold frame or small greenhouse for the garden for residents to grow fruit and vegetables.

Response from Manager: We have spoken to the residents regarding which vegetables and fruits they would like to plant. We will have a cold frame placed in the garden and will use larger plant pots where possible.

- Consider creating more natural shade for the garden or perhaps an awning in front of the patio doors so that curtains can be kept open on sunny days.

Response from Manager: We have provided three gazebo's in the garden to provide shade during the sunny months and will be looking into alternative options to allow the home to have natural light through.

- Look at addressing the potential trip hazard of the door onto the patio.
- **Response from Manager: There is a ramp provided which covers both indoors and outdoors. We will work closely with our maintenance team to find a permanent solution**

- Consider creating more clustered seating if a suitable area can be found

Response from Manager: We have spoken to the residents regarding clustering the chairs. They would prefer the main lounge to remain with the same layout for activities and are happy for the smaller lounge to have the chairs as clusters to encourage conversation.

- Make snacks more accessible for residents and relatives.

Response from Manager: We have already implemented two small trolleys. One for snacks including fruit and the other for drinks. These can go around the communal lounge and the residents are able to choose from the options.

- Improve visibility of light switches.

Response from Manager: We have discussed this and will place a contrasting colour around each light switch to make them stand out more.

- Introduce larger clocks, with date, time and weather on them to make them more visible.

Response from Manager: We have looked into different options of clocks and orientation boards and will put this into place.

- Consider repainting the front door to make it look smarter and more welcoming.

Response from Manager: Since the Healthwatch visit we have already changed both our front door and inner door to make the home feel more welcoming. We have also changed the door mat which was in place to make the reception feel more welcoming.



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