

Enter and View – Follow-up Report

Littleton Lodge

Tuesday 5th of August 2025



Healthwatch Staffordshire

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Report on Enter and View Visit Undertaken by Healthwatch Staffordshire on 5th August 2025

Service Visited:

Littleton Lodge Care Home

Bishop Street, Hednesford, Cannock WS12 4RY

Telephone Number > 01543 399 640

Authorised Representatives undertaking the visit:

Christine Sherwood, Jackie Owen and Val Emery

The Service:

Littleton Lodge is a contemporary care home with 66 beds, situated near Hednesford. It opened in 2021 and is close to a local primary school. The home is surrounded by both new and historic housing, making it easy for residents and their families to visit. It is named after the nearby Littleton Colliery, reflecting the area's industrial past.

Ideal Care Homes originally opened and managed Littleton Lodge, but it joined the HC-One family in October 2023. HC-One operates over 270 care homes nationwide and delivers compassionate care to more than 14,000 residents.

Littleton Lodge is known as a "luxury care home." It creates a warm and welcoming atmosphere for residents. The home provides 24-hour residential and dementia care, with dedicated staff focused on improving each resident's quality of life. Residents receive personalised care plans and can engage in various activities, emphasising both physical and emotional well-being.

The facility is near Hednesford and Cannock, set among a new housing estate. It has a welcoming entrance, plenty of parking for visitors, and opportunities for gardening. The building features a reception area, three spacious floors with personalised rooms, and dining areas that offer a variety of meals.

Amenities include a pub room, a tearoom, a library, a film room, and a garden room that leads to an enclosed garden. The home also has a hairdresser and spa baths, which are located on each floor. Littleton Lodge promotes a "lifestyle home" approach, which includes an all-inclusive fee that covers hair appointments, chiropody, transport for medical visits, and daily activities led by a Lifestyle Manager.

Purpose of the Visit.

The purpose of the visit was arranged as a follow-up to our previous visit on the 18th August 2024. It was to look at what the Senior Homes Manager had implemented, to look at what changes had been made and to see if our recommendations had been upheld and led to any changes.

Methodology.

Before our visit, we contacted the manager of the home to inform her that we would be assessing any changes and improvements to services. This allowed her to prepare and present evidence to the Healthwatch team. During our visit, we also planned to speak with the staff and residents to gather their feedback.

Updated Introduction to the Service.

During our visit, we were welcomed at the reception by the new manager. During the final feedback stage, we also met the Area Manager from our previous visit last year. The home currently accommodates fifty-five residents, an increase from forty-seven during our last visit. It was noted that the number of residents had risen to sixty-three during the winter months. Most residents are self-funding, with only a few receiving subsidies from the local authority due to qualifying for financial assistance.

The home maintains a strong connection with the local school, facilitating regular activities where children visit and engage with the residents. Additionally, following a recommendation from a local Police Community Support Officer (PCSO), plans are underway to involve two more local schools in these activities.

The home still offers a comprehensive activity program, featuring at least one scheduled activity every weekday, with some days having two activities. These include outings to local pubs, day trips, and specific events related to the Staffordshire regiment. On the day of our

visit, the home was hosting an afternoon tea for the families of residents. The home primarily serves residents who have lived and worked in the community.

Monthly staff and resident meetings continue, with relatives invited to attend the residents' meetings.

Staffing.

Since our visit last year, the home has expanded its daytime staff from nine to eleven, covering three floors. Additionally, the night staff has increased from five to six members. Shift hours remain as 12-hour shifts, with shorter options available from 7:00 am to 2:30 pm and from 2:30 pm to 10:00 pm, allowing for greater flexibility. The use of agency staff has been minimised, as internal staff are now able to cover shifts as needed.

The company has implemented a system called Flex-Force, which recruits staff to work across multiple homes within designated local areas. Staff members can choose how many contractual hours they wish to work over a specified period, and they are then allocated their location and hours. This system provides staff with more flexibility and control over their schedules, enhancing their work-life balance while also offering residents and in-house staff greater continuity and support.

Staff contracted through Flex-Force receive the same training, benefits, and perks as other employees of HC-One. They are also governed by the same work policies, company values, and ethical standards, which help management maintain stability and involvement.

The management team uses a new grid system that allows them to monitor the number of residents in the establishment, determine the core hours needed to manage resident safety, and assess the staffing required for those areas. This tool enables managers to effectively evaluate staffing needs and make necessary adjustments.

The induction at HC-One is carried out by trainers employed by the company. As part of HC-One, they have a team of trainers who deliver the inductions (Learning and development team). Staff members are required to complete a five-day face-to-face induction with the learning and development team, and they must demonstrate

competence before overseeing residents. Some e-learning components are still included in this process.

Since our last visit, the home has established designated communities on each floor: the top floor is now reserved for residential care, the middle floor for residential/dementia care, and the ground floor for earlier stages of dementia or residential care. Staff members are assigned to specific floors and are only moved between them in cases of significant staff shortages. This arrangement fosters better continuity and rapport among staff, residents, and family members. Handovers occur among all staff, including those from the Flex-Force program, to ensure effective communication and uphold a person-centred approach.

Incentives for staff include an "Employee of the Month" program, where staff, residents, or family members can nominate a staff member. HC-One also holds an award ceremony to acknowledge staff achievements. The company offers various discounts at stores, rewards for kindness in care, and long service awards. Last year, staff received a £25 Christmas voucher as a token of appreciation.

Findings.

Below outlines the recommendations made on our last visit and what improvements have been made:

"The only recommendation at this stage is that management keep staff and residents informed of their efforts to recruit permanent residents' staff so that they feel that the situation is taken seriously and feel informed about the action being taken to address this".

Below outlines the recommendations made during this visit and the responses from the management Team:

The response we noted during our visit shows significant progress in addressing the recommendations made. There is clear evidence of plans to enhance services, including improvements to staff schedules. While agency staff are still being used, they are now sourced through an internal agency operated by HC-One (Flex-Force), which aims to provide greater stability and continuity for residents, families, and staff. Furthermore, there has been a noticeable decline in dependence on agency staffing. (Healthwatch had the privilege to see evidence of improvements in rotas and some decline in agency staffing)

Feedback from Residents.

The Healthwatch team visited all three floors and spoke with residents about their experiences to capture any changes in feedback since the last visit. We interviewed five residents, all of whom expressed gratitude for living in the home and mentioned that they had made friendships, which helped reduce feelings of isolation that can occur when living alone in the community.

However, a couple of residents raised concerns about what they perceived as insufficient staff on duty and suggested that having more staff would be beneficial. In contrast, the majority of residents expressed appreciation for the staff, stating that they couldn't do enough for them. One resident commented, *"that a particular staff member was like the daughter she never had and felt comfortable opening up to her about any concerns"*.

Most residents we spoke with felt that the food could be improved; they noted that it didn't always look appetising. A few residents mentioned that they were brought to the dining table too early, making them sit there for what felt like a long time unnecessarily. A couple of residents also pointed out that when residents change their meal choices at the table, it creates a backlog in service.

Residents expressed a desire for a way to provide feedback anonymously and at a time that suits them. They felt that not everyone speaks up during meetings, leading to the same voices being heard repeatedly, which could create feelings of animosity among residents and staff. When we asked why they felt this way, they indicated that some residents worry that speaking up publicly might have repercussions on their lives or care. This feedback is common for Healthwatch and is often encountered outside of care homes as well, reflecting a broader sentiment within the general public. This highlights the importance of our visits, as we operate completely independently and without bias.

One resident noted that the sing-along did not take place during our visit because not enough residents wanted to participate, so they ended up just listening to music. Colleagues from Healthwatch observed entertainment on another floor and witnessed staff, including a domestic worker, trying to encourage resident involvement.

Overall, the residents we spoke with were content but expressed a desire for small tweaks and changes, as described above, and this was feedback to the management team at the end of the visit.

Feedback from Staff.

We spoke with eight staff members. Out of this number, seven staff members started as agency workers and are now either fully employed at the home or in the onboarding process. This indicates that staff enjoy working in this environment.

Staff reported that the training they receive is good and that the manager is supportive. However, they expressed a view that the pressure of their roles could be reduced if there were more staff on duty but that this had been reduced from four to three. They believe that additional personnel would allow them to spend more quality time with the residents and do so much more with them. There was a belief from staff that in the mornings, with three staff on shift, one of those staff prepares the breakfast leaving only two to get twenty residents up and dressed. This was discussed with the manager who clarified that there was also a senior on duty on each floor and that they also get involved in delivering care. It can also be a challenge when you are trying to carry out an activity and at the same time respond to call bells, change pads, provide refreshment and take breaks.

Our observations showed staff wholly engaged with residents, trying to involve them in the activity being undertaken. Even the cleaner is ready to step in and help when staff are on their break and they are short-handed on the floor. We were told, however, that there are two cleaners covering the home and if one of them is off, there is no back cover which means that one cleaner must cover the whole home alone. The manager responded to this saying that the ancillary hours are under review with the wider company.

Summary

Healthwatch would like to commend the manager for her efforts and the work she has accomplished during her first 12 months. She is dedicated to getting the home and its residents on track and is actively collaborating with HC-One to address any staffing issues raised. We believe that the recommendations we made last year have been implemented effectively, and the improvement of the Flex-Force scheme appears to be working very well.

Residents express a strong preference for living in the home and appreciate the constant support from caring staff.

When we highlighted concerns about anonymous feedback, the management team took these comments seriously. Ideas are already being developed in partnership with Healthwatch on how to gather feedback effectively. We suggested using a locked box and postcards for residents to leave their feedback. The management team proposed conducting surveys and perhaps enhancing the "You said, we did" board to showcase the improvements made.

This approach could also be beneficial for staff, allowing them to express their views anonymously and feel heard. If the policy is to maintain a ratio of one staff member to five residents, it's important for staff to understand the rationale behind this guideline.

We provided feedback on the food and supplies, and management is considering new ideas to align with the HC-One standards to enhance these aspects. We hope this can be discussed in the upcoming resident and family meeting, ensuring everyone is aware of the concerns raised and the steps being taken to address them, along with a timeline for full implementation.

Overall, we believe this has been a very positive feedback session that will contribute to making the home an exceptional place to live & work.

Feedback from the Home Manager or the Company

We are delighted to provide feedback on the recent health watch visit to Littleton Lodge Care Home. The visit was an incredibly positive and constructive experience for our entire team and our residents.

From the outset, you all demonstrated an exceptional level of professionalism and a genuinely supportive attitude. The approach was not merely about observation but about collaborative improvement. You all engaged with our residents and staff with remarkable empathy and respect, creating an environment where everyone felt comfortable sharing their honest thoughts and experiences.

A particularly valuable aspect of the visit was the way Healthwatch team translated the feedback gathered into actionable, practical ideas. They listened attentively to the voices of our residents and staff rather than simply pointing out areas of improvement, they worked alongside us to brainstorm innovative and realistic solutions. This collaborative spirit has provided us with a clear roadmap for enhancing our services, particularly in

areas such as gathering resident feedback in a way where residents can speak up without fear.

We are confident that the feedback and ideas shared will enable us to make meaningful improvements that will further enrich the lives of our residents. We extend our sincere thanks to the Healthwatch team for their invaluable partnership and for conducting a visit that was both thorough and genuinely supportive.

Kind regards,

Melissa Hunter

Senior Home Manager

Littleton Lodge Care Home

Healthwatch Staffordshire is thankful to the management, staff, residents, and families for the warmth and hospitality shown to us during our visit.

Next Step

The report will now be published on our website for the general public to read and copies will be forwarded to Littleton Lodge and shared with Staffordshire County Council & Care Quality Commission (CQC), it will also be added to the next Healthwatch E-Bulletin.

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 residents, relatives and staff, only an account of what was observed and contributed at the time of this visit.