



**healthwatch**

**Blackburn with Darwen**

**Higher Bank Care Home**

**Enter and View Report**

**Tuesday 19<sup>th</sup> April 2022**



**DISCLAIMER**

This report relates only to the service viewed at the time of the visit and is only representative of the views of the staff, visitors and residents who met members of the Enter and View team on that date.

#### Contact Details:

Higher Bank Care Home  
4 Higher Bank Villas  
BB2 6EU

#### Staff met during our visit:

Karen Hunter (co-Manager)  
Isobel Coughlin (co-Manager)

#### Date and time of our visit:

Tuesday 19<sup>th</sup> April 2022 at 10.30am

Healthwatch Blackburn with Darwen  
Representatives

Michele Chapman (Lead)  
Liz Butterworth (volunteer)  
Michele Livesey (volunteer)



## Introduction

This was an announced Enter and View visit undertaken by authorised representatives from Healthwatch Blackburn with Darwen who have the authority to enter health and social care premises, announced or unannounced, to observe and assess the nature and quality of services and obtain the view of those people using the services. The representatives observe and speak to residents in communal areas only.

This visit was arranged as part of Healthwatch Blackburn with Darwen's Enter and View programme. The aim is to observe services, consider how services may be improved and disseminate good practice. The team of trained Enter and View authorised representatives record their observations along with feedback from residents, staff and, where possible, residents' families or friends.

A report is sent to the manager of the facility for validation of the facts. Any response from the manager is included with the final version of the report which is published on the Healthwatch Blackburn with Darwen website at [www.healthwatchblackburnwithdarwen.co.uk](http://www.healthwatchblackburnwithdarwen.co.uk)

## Acknowledgements

Healthwatch Blackburn with Darwen would like to thank Karen and Isobel together with staff, residents, and visitors, for making us feel welcome and taking part in the visit.

## General Information

Higher Bank Care Home is privately owned by Mr Kevin Hunter with places for 22 residents. There were 4 vacancies at the time of our visit. The persons in charge are Karen Hunter and Isabel Coughlin.

Information obtained from [carehome.co.uk](http://carehome.co.uk) states that the home provides care for people of who are affected by old age

## Methodology

The Enter and View representatives made an announced visit on Tuesday 19<sup>th</sup> April 2022.

We spoke to 6 residents 3 staff and 2 relatives, where possible within the constraints of the home routine, people's willingness, and ability to engage and access to people in public areas.. Discussion was structured around four themes (Environment, Care, Nutrition and Activities) designed to gather information concerning residents overall experience of living at the home.

The team also recorded their own observations of the environment and facilities.

Our role at Healthwatch Blackburn with Darwen is to gather the views of service users, especially those that are hard to reach and seldom heard, to give them the opportunity to express how they feel about a service regardless of their perceived ability to be able to do so. It is not our role to censor feedback from respondents.

We use templates to assess the environment of a facility and gather information from respondents, to ensure that reports are compiled in a fair and comparative manner.

Observations were rated on Red, Amber, Green scale as follows:

**Green** = Based on our observations and the responses gathered we would consider the experience of this home to be good.

**Amber** = Based on our observations and the responses gathered we consider the experience of this home to be need of some improvements.

**Red** = Based on our observations and the responses gathered we would consider the experience of this home to be in need of significant improvement.

## Summary:

Higher Bank Care home is a very comfortable and pleasant care home owned and managed by a family who take a great deal of pride in their provision of quality care over a number of years. Indeed, this pride extends to the whole workforce many who are long serving.

Set in an interesting little backwater residents, staff and visitors were encouraged to use the outside space with the provision of tables and chairs covered by parasols. Representatives were equally impressed by the homely feeling to the facility particularly the conservatory which was extremely pleasant to sit in.

However, representatives felt the eclectic décor to the lounge areas may have appeared as dark. Similarly, the use of patterns may be confusing for those living with dementia (however we acknowledge Higher Bank Care Home is not a specialist dementia facility)

Feedback from respondents was almost universally positive with relatives particularly keen to praise the service “ *It’s a wonderful place and Mum is safe here.*”

Residents too spoke of the staff fondly describing them as “*wonderful*” and “*lovely*”.

The food was also highlighted as a positive of their experience *residents telling us “its excellent”* and “*the chef is fabulous.*”

The food was a key part of the many activities and celebrations such as birthdays and baking sessions for the residents. Similarly, residents were encouraged to feedback and offer opinions around informal eating and drinking activities such as “*Taboo Tuesdays.*”

The relationship between management and staff was markedly positive with mutual respect. One carer telling representatives “*Our managers are excellent and very supportive.*”

Based on the criteria, the Enter and View Representatives gave the home an overall score of:

**Green**

## Enter and View observations

### Pre-visit and location

Higher Bank Care Home is located on a private road in an historic area of Blackburn. The area is very attractive and could be described as “quaint,” but this inevitably impacts on accessibility and parking.

Likewise, representatives felt the home could be better signposted from the nearest public road (Adelaide Terrace).

The main Preston New Rd A677 is close by and provides all shops, amenities and transport however, pedestrians may find reaching the home difficult due to the steep incline. (We spoke to the manager about this later and she told us that some visitors used Dial a Ride to reach the home.)

Parking was limited to the front of the home and there was no dedicated disabled space, but there was some on- street parking on Adelaide Terrace.

Prior to our visit we looked online for information about the home. We saw a Facebook page but we could not access a website at that time.

Staff later showed us a very active and lively private Instagram account for staff, residents, friends and family.

### Green Amber

#### The external environment

The building appeared to be Georgian and was semi-detached to a much smaller Tudor property (the Manager told us that the Tudor property was owned separately and was the oldest house in Blackburn).

The front of the home presented as grand and ornate with wall mounted statues and a double fronted conservatory addition. The grounds to the front of the home were delightful with a terraced garden area to the side, (however the seating area with tables and parasols was to the immediate front.)

A peacock had taken up residence in a large tree in the garden and flew down as we arrived. Evidently, he does this all the time when people visit.

Despite being relatively close to the town the area appeared very secluded with wildlife particularly birds very much in evidence. The Manager told us that the residents enjoyed observing the wildlife from the windows. Similarly, some garden chairs had been placed right outside the main door. Indeed, representatives observed the main entrance to be very welcoming with tubs of spring planting.

The main entrance displayed the Healthwatch Blackburn with Darwen poster as requested and we saw the homes Facebook and Instagram profiles advertised alongside statutory notices. It was clear that visitors should report to the main door and we were met outside by staff. The door was open on our arrival due to

other visitors and staff taking a break in the garden area. However, access was controlled by staff at all times.

Close by there was an additional entrance to the building, which was serviced by a disabled ramp.

There was a small rear garden area visible from one of the windows to rear of the lounge. It seemed untended and could have been made more attractive.

We noticed that the home has use of a minibus parked outside

## Green

### The internal environment/reception -first impressions

The atmosphere was very welcoming both in terms of the people and the environment. The staff that came out to meet us observed all Covid-19 protocols in terms of PPE, lateral flow, vaccination passports and taking our temperature. We noted that these were recorded, and we also signed into a visitors' book. Antibacterial hand gel was able throughout the home.

The Managers were both in attendance and they were very helpful. One Manager explained that the home was a family provider and staffed business and had been for over 30 years. She explained that this was a positive attribute for residents as the providers lived at the home and were always on hand. Likewise, there was a wealth of experience and continuity of care with the maintenance and cooking also delivered by the family team.

Representatives felt that the providers had a deserved pride in the home, and this showed in the cohesive nature of the staff team. One staff member showed us the homes Instagram account where celebrations such as birthdays were recorded alongside messages to residents' friends and family.

The large conservatory area represented our introduction to the home, and this was a multi-use area containing a reception bureau, social seating, visiting area (to be pre booked), and occasional dining table use.

The conservatory was very pleasant light and warm. It was also uniquely homely with mature house plants, a large budgerigar cage and a cat making the most of attention from the residents. Comfortable chairs were around the periphery, and we saw that the staff opened the windows and closed the blinds to keep residents similarly comfortable. There was no discernible odour.

We noted a TV sited in the corner of the conservatory (turned off.) Representatives also observed books and newspapers to be available and an orientation chalkboard displaying the day, date, weather, film and activities scheduled for that day.

However, we felt the orientation board could have been more prominently sited.

At the time of our visit the conservatory was being used for a Reminiscence activity delivered by a team member. The Manager told us that there was no specific activity coordinator rather this role was shared amongst carers.

Despite this we observed the activity to be well attended (by 14 residents) and delivered to a good standard.

There was a high occupancy of chairs in the room and to make room space removed walking aids and returned them as soon as the activity had finished.

The carer delivering the activity (and her mother-in-law) had collected authentic vintage items over the years and she presented these to residents to ask them if they recognised them and remembered what they were for. Amongst the items were a ration book, old food tins and labels and a tiny lace cover with glass beads around to cover the tops of opened food stuff such as milk or jam.

The carer stood prominently at the front with the items spread in front of her encouraging interaction asking did they know what they were? and who had used them?

The session concluded with discussion about the Queens jubilee and celebrations planned. Residents were asked who would like to join in making flags for the event.

## Green

### The observation of corridors public toilets and bathrooms

There was "busy" carpeting and wallpaper throughout the home which can be difficult for residents with dementia to navigate. However, this must be taken in the context that Higher Bank Care Home is not a dementia specific facility.

The architecture of the building was of high ceilings and narrow corridors which contributed to a lack of natural light. However, the corridors were largely uncluttered and illuminated which highlighted the many items of interest and décor throughout the home.

We saw posters and noticeboards on the walls informing the residents of interesting upcoming events and a "Spring newsletter."

Likewise, a weekly entertainment schedule detailed activities such as musical movement, crafting, board games and a daily movie.

Particularly notable was "Taboo Tuesday" .... *talk to us about anything likes, dislikes, worries, anything about the home. nothing is taboo.*

Similarly, "Fizz Friday" *wine or Cava with chocolates.... baking and cake decorating."*

Representatives considered that there were sufficient number of public bathrooms to service the number of residents as 4 of the bedrooms had ensuite facilities. All the public bathrooms we observed were clean and well stocked with soap, hand

towels and toilet paper. We saw that appropriate adaptations were in place such as adapted bathing, raised toilet seats, and grab rails.

Albeit the public bathrooms we observed appeared dated, but serviceable, nonetheless.

Some dementia friendly signage was evidenced to be pictorial, written and colour contrasting. Similarly, some residents had chosen to personalise their doors with pictorial representation i.e., flowers and football club crests.

## Green

### The lounges, dining area and other public areas

There were 2 lounge areas leading directly from the conservatory. They were both comfortable and homely and painted in shades of pink and green with matching armchairs and side tables. One of the lounges had views to the rear of the building. In a nice touch we saw that some side tables had fresh flowers and fruit bowls placed on them. We also observed various beakers and mugs on these side tables indicating that residents were provided with hydration throughout the day.

The lounges had high ceilings and ornate decorative mouldings which had been similarly highlighted in pink and green. The fireplaces seemed original and were decorated with vintage figurines. There were also decorative objects such as mirrors and chandelier lighting in keeping with the age of the property.

One of the lounge areas had a large fish tank as a point of interest and a TV set in the corner showed a programme with subtitles.

However, the curtains seemed of a heavy fabric and there were some swags and tails which may have contributed to the lack of light in these areas and may have been difficult to clean (as they appeared dusty).

We observed one resident relaxing in an armchair stroking a cat, she seemed very content as did the other residents appearing well dressed clean and happy.

A further room was designated as a dining area it had similar decorative features to the rest of the home. Round tables were set to accommodate 4 residents with one sited in the conservatory (due to limited space).

The tables were very nicely set with pink tablecloths, paper napkins, floral table decorations and condiments. A white teacup and saucer were placed next to each setting, as was a beaker for water or juice.

A menu holder was placed in the centre of the table and a laminated menu informed the daily lunch and dinner.

The lunch was homemade vegetable soup with bread and butter, steak pie creamed potatoes peas and gravy or beetroot blue cheese and potato salad with dressing.

Dessert offered was crème brulee, yoghurt or fresh fruit.

The residents were very enthusiastic about the steak pie one resident telling us. *“I enjoy the food. I like eating and the food here is good.”*

### Observations of resident and staff interactions

There was a clear rapport and respect between residents and staff. Staff knew residents' names and vice versa humour was exchanged, and the familiarity extended to visitors and family.

We observed a carer take a great deal of time adjusting the cushions behind a resident until his position felt *“just right.”* Likewise, we saw another staff member waking a resident up for lunch in a very soft and caring way.

Similarly, a resident was advised and assisted clearly on how to help themselves out of the chair, the carer supported when necessary and offered lots of praise and encouragement.

There was demonstrable awareness of equality and diversity with staff talking about supporting an LGBTQ resident and hoping to enhance their knowledge of dementia and autism. Indeed, one representative recorded the staff knowledge so *“I was extremely impressed at their knowledge and understanding.”*

Likewise, we saw that there was information leaflet from the local councillor demonstrating the residents' rights, to be informed, and to be part of the neighbourhood.

We noted that the chef took a great pride in his work and appeared to be a popular figure making beautiful buffets and cake for special occasions like birthdays. (We saw these on Instagram).

This culture appeared to come “top down” from the provider and Managers who were very knowledgeable and appreciated their staff telling us that they exceeded the minimum wage and were flexible and supportive of their staff.

## Green

### The Lunchtime Experience

On this occasion, representatives chose to focus on the experience of residents during the lunchtime. We evaluated the lunchtime as a social experience, the quantity and quality of the food, the interaction between staff and residents, and the dignity afforded residents during this period.

The staff team were perceived to be well organized and methodical during the meal delivery.

Meal service was due to commence at 12noon, and prior to this staff were observed toileting residents and helping them to cleanse their hands with anti-

bacterial gel. All mobility aids were removed both to optimize space and for safety reasons. (As soon as the meal was finished residents had frames etc. returned.)

The staff began to bring the residents into the dining area at 11.35am and we noted how encouraging and caring they were in guiding the residents to the tables. Two residents were given an adult bib to help with spillages. These were made from fabric, and one appeared to have been repurposed from something else.

The meal service started at 12 noon as scheduled and we observed staff to don appropriate PPE, masks, gloves and aprons.

There were 4 tables, 3 seating 5 and 1 seating 4. (19 place settings). In addition to the place settings there was a sugar bowl salt and pepper pots and baby wipes on each table. (For spillages.) The accompanying dining chairs were fabric covered and had small castors on the legs to help with manoeuvrability on the carpet.

6 residents chose to stay in the lounge/conservatory area for lunch and small tables were brought out for them to facilitate this. Staff were observed to monitor them and assist when necessary

Staff circulated amongst the residents asking them for their menu choice. The residents were encouraged in their choices and the food was then brought out plated up from the kitchen (which was next to the dining room) The food looked and smelled appetising and portion size was good. We noted that residents were offered and encouraged to take further helpings.

The interaction between residents and staff was observed as supportive and friendly throughout the meal service, and we saw staff helping residents by cutting up food for them.

One resident (who had soup in a plastic beaker) asked to go back to the lounge. The staff responded promptly and relocated the resident comfortably. Similarly, one resident asked to use the bathroom during the mealtime, and this was also responded to promptly

We saw that consideration was given to hydration as water was put into beakers, and tea was brought round as the main course was being served.

Positive interaction by staff was maintained throughout the mealtime. As desserts were brought round one member of staff referred to the crème brulee (topped with fresh fruit) as “*a party in a dish*”. Several of the residents who had this dessert laughed and were amused when the staff member placed the dessert in front of them.

We did not see any adapted cutlery available which could have assisted one resident who was struggling with their disability whilst trying to use normal cutlery.

On one table 3 residents were still eating their main course at 12.35pm. The food was no longer at optimum temperature and several residents had already left the dining rooms having had their dessert.

Staff were visible at all times during lunch, and were clearly observing residents without being too obtrusive.

### Additional information

- The Manager explained that as she and the family lived on site and worked in the home they were always available on a 24 hour basis.
- One resident was having difficulty with badly fitting dentures. These kept falling out when talking and would probably be difficult to eat with as a result. In conversation the resident appeared conscious of this and kept apologising to the representative. This was brought to the attention of the Manager who said she would deal with it right away.
- The Manager told us that the staff team regularly consult residents about changes to their environment or to establish preferences.

## Feedback from residents

Feedback from residents was very positive and all the residents seemed happy and relaxed. However, one newer resident confided that she was having difficulty adjusting to communal living after spending time living on her own. She explained that she knew she could no longer live alone due to the amount of falls and fractures she had sustained but that she felt “*restricted*.”

Representatives wondered if the use of pressure pads in her bedroom would help with her independence.

### Environment

*“I have a nice warm room and I could have used my own furniture, but I didn’t want to.”*

*“It’s ok here - I like it”.*

*“Its fine 50/50”.*

*“It’s lovely here. I like it. I’ve got my own room with my things in. I have pictures on my walls.”*

*“I like living here. They look after me and I think it’s wonderful”.*

*“I have my own room. It is warm and comfortable, but I don’t have my own belongings here, since I had to sell my house”*

### Activities

*“Oh! there is always something going on, but we haven’t been out on the bus for a while.”*

*"Today's activity (reminiscence time) was good. I enjoyed it. It made me think and I remembered some things."*

*"I enjoyed today's activity and she was really good."*

*"There are lots of activities but sometimes it's too much with no option. We are expected to join in"*

*"It can be very noisy in the TV room and residents' bicker about what to watch and The TVs and radio on at the same time give conflicting sounds"*

*"I enjoy going out in the garden. It's lovely there and there's a peacock in the garden."*

## Care

*"I feel safe, and I trust the staff. The staff come straight away if I call them."*

*"They are lovely and help me a lot".*

*"They are so lovely. I like them and they help me and look after me well."*

*"It is very good. Staff try their best."*

*"The only thing is they get me up too early and then rush you" It's too overwhelming after being on my own for so long"*

*"I know they worry about me falling and it would be their responsibility. I have a TV in my room but am expected to sit where they can watch me"*

*"The staff are wonderful. I love it here. They are really kind".*

## Food

*"He is a good chef he is very flexible. I love egg and chips. I enjoy eating food from different cultures too. The chef is fabulous he will make anything."*

*"The food is good I love steak pie."*

*"I enjoy the food. I like eating and the food here is good."*

*"I love the food here. There's plenty to eat and my favourite is chicken with chips. The steak is good too. I've no complaints at all".*

*"I really enjoy the food here and I really look forward to meals."*

*"Oh, it's excellent. We have a choice for every meal"*

## Relatives and friends' views

### How do you feel generally about the service?

*"Its excellent here. It was by word of mouth that I found out about this home for Mum. I chose this place as two friends had relatives here and they recommended it to me. They weren't wrong. It's a wonderful place and Mum is safe here.*

*I know that Mum is being well looked after here and is safe and cared for. It's such a relief to me as Mum used to live with me for the last 3 years and it was getting really difficult. Particularly when I had to go out to work and Mum was on her own in the house. I used to worry that she would be alright. She had no one to talk to while I was out and here there are so many people, she's happy to talk to and everyone is happy to talk to her. She's a proper chatterbox too.*

*We were sat outside in the garden yesterday. It's such a lovely space to sit in in the sunshine. Its lovely here. There's a peacock that comes into the garden.*

*The staff are lovely here and Mums happy here. That's what's important."*

*"Mum is always clean, warm and comfortable."*

*"Pre covid I always fed mum but during Covid she started to feed herself. I am not sure if she does now"*

### Do you think that you are kept informed about your relative e.g., Health and future care plans?

*"Definitely I am kept informed. Mum was ill the other day and the staff contacted me and arranged for the doctor and she was treated straight away. I was happy. I have no worries".*

*"I can contact the staff at any time"*

### Do you know how to make a complaint if you need to?

*"Yes but I've not needed to."*

### Are you aware of the social activities at the service and do you feel welcomed to join in?

*"I look on Instagram and keep up to date with what's going on. Its really good. Theres's activities and the staff put up photos on Instagram. You always see things that the residents are doing. Mum made biscuits the other day. She really enjoyed it."*

*"Mum needs less activity and more care and supervision."*

### Would you recommend this service to others?

*"I would certainly recommend this home to others."*

## Staff views

We recorded very positive responses from the staff particularly in respect of support from their managers. There was very good awareness of Equality and Diversity and staff confirmed that they felt they were offered appropriate training.

In conversation the staff explained how important their team feel about individualised care and that they have been made “*more aware of LGBTQ+*”

They talked about a resident who identified of that group and making the resident feel accepted by staff and other residents.

Similarly, they discussed how residents vary, and how their own knowledge is expanding. Particularly in terms of dementia and being made aware of other issues that residents may have e.g. autism.

**Do you have enough staff when on duty to allow you to deliver person centred care?**

*“They (Managers) help with anything that is needed”*

*“Our managers are excellent and very supportive”*

**How does the organisation support you in your work?**

*“I was off sick for a while when I was fairly new so was worried about my job, but the managers were great. They kept in touch and supported me back to work”*

*“I had change in circumstances at home, but the managers helped me by changing my Rota”*

*The Managers try their best to accommodate individual circumstances and we feel valued by the managers.*

*“If we had a concern about anything we would go to one of the managers”*

*“If the concern was about a manager, they collectively felt they were support each other in best way of escalating the issue e.g. safeguarding or CQC.”*

**How do you deliver care to diverse groups such as LGBTQ +?**

*“I have been made more aware of LGBTQ+ issues.”*

**Are you aware of residents’ individual preferences? Where do you find this information?**

*“We get to know residents needs because we get to know them, and we are like one big family”*

*“We know name preferences.”*

Would you recommend this care home to a close friend or family?"

*"2 of us (pointing to colleague) have worked here around 10 years each."*

*"Yes of course"*

*"I have worked in 2 other homes before, and this is the best"*

## Response from provider

Date: 30 May 2022 at 23:58

Subject: Re Higher Bank

Dear Michelle.

We thank you for your draft regarding our Home Higher Bank and some of the lovely comments made.

We would ask, if you can also use the photo of the frontage of the building please.

We would just like to comment on some of the points that stood out to us.

The comments regarding the eclectic decor are purely personal opinion, we had a young lady in her 20s who was from Social Services that came to the home to introduce herself as a new point of contact two weeks before your visit we asked her to look in all the rooms as she was interested to see more of the home! She thought the home and decor was beautiful and she said it was nice to see that we were, decorating the home to what the client would want and the home was a credit to us.

The decor is brought up a couple of times again, saying that the decor and carpets are busy it appears like the home is not pleasantly decorated, and this could be off putting to any reader of your report again this is purely an opinion!

It is also a fact that our residents had a say in the choice of carpets, seating and decor of the home.

It was stated that there was no signage showing the way to the home, in Enter And View Observation. This is marked as green yellow

Please find enclosed picture of signage for the direction of guest to the home one situated on Preston new Rd two on Dukes brow directing on to Adelaide Terrace and one at the bottom of the homes Lane.

In the text it states that someone walking may find it difficult due to the hill at Dukes Brow and Adelaide terrace, the bus stops on Preston new road next to the junction, of Adelaide Terrace from the other side of the terrace, and a Walker can access the home from there which is not a long steep hill.

It is granted that parking is somewhat restricted to the home at the front but this has never been an issue in 36 years that the home and us has been operating so we do not think this is or should be a negative!

The bathrooms have been tiled in the era of the home which are in fashion.

In the report it mentions that you did not see any adapted cutlery to which one resident could have used that was in your words "struggling." It would seem presumed that this resident would have not been offered this.

I have attached picture of the homes adapted cutlery as proof that we have these to hand, the resident in question although has been offered to use these, does not wish to and wants to use standard cutlery, as we are a home that the residents wishes come first we have to respect this as it is freedom of choice. You must realise that some people do not want to be labelled as disabled and want to be just like everyone else.

Also it is mentioned about three residents that are slower eaters than the other, we are unsure why this was commented on and this seems to be mentioned in a negative way and possibly like the home should intervene.

One could say they are eating their food correctly so to digest properly.

These ladies have refused help in the past with eating and are happy to eat at their own pace which is there right to do so, we do not rush them and they have in the past refused to have their food reheated if this was required. They are happy to do their own thing and it's not ours or anyone else's prerogative to say they are wrong in their way.

I'm sure that if you went out for a meal this experience can take some two hours with waiting and letting meal digest between courses no one considers that strange.

We will never rush or make our clients feel like they are wrong, if you would have mentioned this we would have shown you the adapted plates and cutlery and explained regarding these three ladies as this is normal for them so it is normal for us.

I would have thought this would have been a positive as we do not rush our clients and allow them to enjoy there dinning experience.

Kindest regards,

karen, Isabel, residents and all the family at Higher Bank.

## **Response from Healthwatch Blackburn with Darwen 6/06/2022**

Thank you for taking the time to respond to our Enter and View report of Tuesday 19<sup>th</sup> April 2022.

We will publish your response and photographs within our report in line with our process and our obligation to transparency.

I have broken down the points you have raised and addressed them individually as bullet points.

- We would ask ,if you can also use the photo of the frontage of the building please.

Thank you for this suggestion. The images were taken on the day and are representative of the residents experience of the home.

- The comments regarding the eclectic decor are purely personal opinion, we had a young lady in are 20s who was from Social Services that came to the home to introduce herself as a new point of contact two weeks before your visit we asked her to look in all the rooms as she was interested to see More of the home! She thought the home and decor was beautiful and she said it was nice to see that we were, decorating the home to what the client would want and the home was a credit to us.  
The decor is brought up a couple of time again, saying that the decor and carpets are busy it appear like the home is not pleasantly decorated, and this could be off putting to any reader of your report again this is purely an opinion!  
It is also a fact that our residents had a say in the choice of carpets, seating and decor of the home.

The comments regarding décor are in relation to the NHS” dementia friendly” model “HOW TO MAKE YOUR HOME DEMENTIA FRIENDLY”\_We use a template to assess this and the same criteria is applied to each care home we visit

- It was stated that there was no signage showing the way to the home, in Enter And View Observation. This is marked as green yellow. Please find enclosed picture of signage for the direction of guest to the home one situated on Preston new Rd two on Dukes brow directing on to Adelaide Terrace and one at the bottom of the homes Lane.

The Enter and View report stated “*representatives felt the home could be better signposted from the nearest public road (Adelaide Terrace).*”

There is only one sign at the bottom of the private road that Higher Bank is situated on. It is only visible from the Dukes Brow approach.

- In the text it states that someone walking may find it difficult due to the hill at Dukes Brow and Adelaide terrace, the bus stops on Preston new road next to the junction, of Adelaide Terrace from the other side of the terrace, and a Walker can access the home from there which is not a long steep hill.

The comments regarding accessibility are based on a visitor who may find walking difficult and use public transport. We use a template to assess this and the same criteria is applied to each care home

- It is granted that parking is somewhat restricted to the home at the front but this has never been an issue in 36 years that the home and us has been operating so we do not think this is or should be a negative!

During our visit we were obliged to park on Adelaide Terrace (which is limited) We observed another visitor to the home also parking on Adelaide Terrace.

Unfortunately the limits of the private road serving Higher Bank may also make it difficult for vehicles to turn round.

- The bathrooms have been tiled in the era of the home which are in fashion.

Thank you for this information

- In the report it mentions that you did not see any adapted cutlery to which one resident could have used that was in your words “struggling.” It would seem presumed that this resident would have not been offered this. I have attached picture of the homes adapted cutlery as proof that we have these to hand, the resident in question although has been offered to use these, does not wish to and wants to use standard cutlery, as we are a home that the residents wishes come first we have to respect this as it is freedom of choice. You must realise that some people do not want to be labelled as disabled and want to be just like everyone else.

Thank you for clarifying this. We are obliged to examine our observations on the day and this led us to believe that a resident would have benefitted from the use of adapted cutlery.

- Also it is mentioned about three residents that are slower eaters than the other, we are unsure why this was commented on and this seems to be mentioned in a negative way and possibly like the home should intervene. One could say they are eating their food correctly so to digest properly. These ladies have refused help in the past with eating and are happy to eat at their own pace which is their right to do so, we do not rush them and they have in the past refused to have their food reheated if this was required.  
They are happy to do their own thing and it's not ours or anyone else's prerogative to say they are wrong in their way.  
I'm sure that if you went out for a meal this experience can take some two hours with waiting and letting meal digest between courses no one considers that strange. We will never rush or make our clients feel like they are wrong, if you would have mentioned this we would have shown you the adapted plates and cutlery and explained regarding these three ladies as this is normal for them so it is normal for us. I would have thought this would have been a positive as we do not rush our clients and allow them to enjoy there dining experience

I am sorry if you have felt that the report referred to the speed at which residents finished their meal.

Rather it referred to the meal being at optimum temperature whilst residents were eating it, and the lack of opportunity for it to be reheated. The report stated “*.On one table 3 residents were still eating their main course at 12.35pm. The food was no longer at optimum temperature and several residents had already left the dining rooms having had their dessert.*”

We are obliged to examine our observations on the day and this led us to believe that several residents would have benefitted from their food being at optimum temperature.



**Healthwatch Blackburn with Darwen**

**Unit 19, Eanam Wharf, Blackburn BB1 5BL**

**Telephone 07538 540237 or 01254 480002**

Website: [Healthwatchblackburnwithdarwen.co.uk](http://Healthwatchblackburnwithdarwen.co.uk)