

Healthwatch Cumberland Enter & View Report

Gregory House

February 2025



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

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Images Sourced from:
<https://www.elysiumhealthcare.co.uk>

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Date of our visit:

20/02/2025

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About Healthwatch

Healthwatch Cumberland is the independent public voice for health and social care in Cumberland and exists to make services work for the people who use them. We believe that the best way to do this is by providing the people of Cumberland with opportunities to share their views and experiences.

Healthwatch Cumberland has statutory powers to listen, act, challenge and gather feedback to improve local services and promote excellence throughout the NHS and social care services.

To help achieve this Healthwatch have a statutory power to 'Enter and View' health and social care services that are publicly funded. The purpose of an Enter and View is to listen to people who access those services and observe service delivery.

Following the Enter and View visit a report is compiled identifying aspects of good practice within the service visited along with any recommendations for any possible areas of improvement.

As we are an independent organisation, we do not make judgements or express personal opinions but rely on feedback received and objective observations of the environment. The report is sent to the service provider providing an opportunity to respond to any recommendations and comments before being published on the Healthwatch Cumberland website at: <https://wearepeoplefirst.co.uk/healthwatch-cumberland/>

The report is available to members of the public along with the Care Quality Commission (CQC), Healthwatch England and any other relevant organisations. Where appropriate Healthwatch Cumberland may arrange a revisit to monitor the progress of improvements and celebrate any further successes.

Acknowledgements

Healthwatch Cumberland would like to thank staff and management for taking the time to speak to us during the visit.

General Information

On the 20th February 2025, Gregory House was almost at capacity with 20 service users out of a possible 21. The service has 21 beds available in total with 16 beds and 5 self-contained flats.

They provide accommodation care services to those with personal care or nursing requirements. The home is a specialist service for people with learning disabilities and mental health conditions.

Summary

Gregory House is situated in Workington on Furness Road in the Moor Close area.

The home advertises a specialist focus on providing care and accommodation those with learning disabilities and mental health conditions. Gregory House states they provide bespoke care that is person-centered, outcome-focused and enables people with high support needs in the most 'least restrictive' environment as possible.

Healthwatch Cumberland visited Gregory House following some concerns in community feedback. The home offers 16 beds and 5 self-contained flats with a fenced outdoor space available. The home is situated near local amenities and has a small car park allowing disabled access. Public transport access is limited with an estimated 6 minute walk still required from the Moor Close 'shops' stop.

Following our observations, Healthwatch Cumberland have suggested a number of recommendations to improve the services at Gregory House.

Furthermore, this document is a snapshot of the time we were present, and this should be acknowledged if being used for recommendations of one's care.



Photo Source:
<https://www.elysiumhealthcare.co.uk>

What did we do?

Healthwatch Cumberland Enter and View Representatives made an announced visit to Gregory House on **20th February 2025** and received feedback from:



0 residents
4 staff members
0 relatives

Pre-visit survey

Gregory House were provided with a pre-visit survey to complete addressing the level of needs the home caters for, size of the home and staff to resident ratio. Furthermore, a brief overview of the home (activities offered etc) and a chance to make us aware of anything before our visit.

Introductory meeting with manager

Before having a tour of the home and speaking to residents, Healthwatch Cumberland staff met with the home managers. This gave the opportunity for any current issues to be disclosed that we should be aware of and to explain what our Enter and View visit would entail.

One to one discussions with residents and their relatives

Throughout the visit, we explored the home and spoke to anyone willing to chat with us. We were also interested in the natural dynamic of the home, observing staff interactions. We also spoke to residents and their relatives to gather their opinions and thoughts about the home. In a one-to-one setting, this allowed for honest and open conversations.

Discussions with members of staff

Using the basis of our structured questions and some unstructured conversation, we asked members of staff similar questions throughout the visit.

Observations

We observed the layout and organisation of the home, being alert for areas of concern such as blocked hallways, any damaged areas, resident rooms etc. Resident and care giver interactions were also observed.

Service Overview

Location and public access

Gregory House is a registered specialist care home located on Furness Road in Workington. The provider site details visitor contact information. Visitors access the building through standard care-home arrangements, contacting the home via the main telephone line to arrange a visit.

Although it is not open to the general public in the sense of walk-in access, family members, carers, advocates, and professionals can attend by appointment.

The home is situated within the local community and is easily identifiable and straightforward to reach, supporting accessible visiting arrangements for friends, families and visiting professionals. The home is easily accessible by car however, limited car parking is available. The home can be accessed by public transport with a short walk from a bus stop where local amenities are also situated.

Background of the home

Gregory House is a community-based care home purpose built in 2015. The home accommodates adults of all gender identities who have a learning disability, autism, and who may have complex physical or mental health needs. The home offers nursing care and may support transitions from hospital into community settings. The home works to assist adults with developing their independence to progress towards supported living or independent living where applicable.

Services available

The home has a mix of en-suite bedrooms and self-contained flats which are allocated following an assessment of individual requirements.

Core Services tailored to individuals with learning disabilities, autism, and complex needs:

- Individually tailored support packages
- Person-centred care planning
- Registered nursing care
- Holistic, strengths-based approach
- Positive behaviour support and positive risk-taking

Enter & View Observations

External Environment

First Impressions

Healthwatch Cumberland staff stated the external environment was pleasant and well-maintained. They observed that there was a safe and pleasant garden area for residents to sit outside.

Access to the home was secure however, it was recorded to be somewhat unclear of where visitors should report to.



Internal Environment

First Impressions

Healthwatch Cumberland staff were made to feel welcome and observed a visitors book in use.

Staff noted that a pleasant homely environment and there was up-to-date notices and information around the home. The Healthwatch Cumberland Enter & View visit poster was displayed.

It should be noted that identification methods of staff could be improved.

Photo Source:
<https://www.elysiumhealthcare.co.uk>



Enter & View Observations

Observation of corridors, public toilets and bathrooms

Healthwatch Cumberland observed good picture signage, identifiable landmarks which made the atmosphere feel homely. Communal areas were well lit, there was appropriate flooring, sufficient space for wheelchairs and corridors were uncluttered.

There was a sufficient number of accessible communal toilets close to lounges and dining areas. Bathrooms and toilet areas appeared clean with a good supply of soap and towels.

Staff did note a lack of appropriate adaptations and signage that were dementia friendly.

Lounges, dining and other public areas

Healthwatch Cumberland staff observed sufficient staff on duty. Staff and resident interactions were observed which seemed respectful with staff knowing residents by name.

Staff were observed to respond to calls for assistance in a timely manner.

There was an activities schedule and evidence of activities taking place during our visit.

There was a lack of person-centered care observed with a lack of personalisation in rooms or communal areas. There was also no provision for residents with visual impairments or those who are deaf.



Staff feedback

Healthwatch Cumberland received feedback from **4** staff members during the visit. We were unable to speak to any residents or relatives during the visit.

Do you have enough staff when on duty?



"No."

"Being disorganised means that staff can be reactive."

"The basic needs of the service users are met but they may not be able to be taken out anywhere due to staffing ratios. They stay in a lot."

"Staff are constantly being taken from one unit and put elsewhere, regardless of ratios needed."

"I think so, I can understand why others may feel different, but we are always within safe ratios. Technically fully staffed as per policy."



Do you feel supported to carry out a person-centred experience?

"No."

"Not how I would like to, I don't think there are enough opportunities for them to learn independence, for example kitchen access and equipment. "

"There often isn't enough staff to have enough time to spend time with the service users when you are often firefighting situations and scenarios. There is barely enough time to put on your notes. This isn't helped if staff are being pulled on and off the unit, it is impossible to give a proper handover and to communicate as efficiently as possible."

Staff feedback

Do you feel you have enough training to carry out your duties well?

"I feel like the staff training is thorough and to a good standard."

"There is a 12 month review of training, we recently recruited a Trainer Lead. We also have the e-platform, as well as the support from Elysium regarding further development."



What is your experience of working here and would you recommend this service to a close relative?

"No. I wouldn't want my loved one to be a resident here, because I have seen how disorganised it is."

"I wouldn't necessarily encourage anyone to work here, it takes a certain type of person. "

"I have not been here very long but I think I would be happy giving what I have seen so far. I believe my relatives would be well looked after here however, there is always room for improvement."

Are there any changes that can be made to improve the resident experience?

"I think the units could do with a mix up, there are some residents in with incompatible service users."

The louder residents can be disruptive to the quieter ones, causing a sensory overload which consequentially can cause issues.

If there was a way to have similar service users in together, this would reduce some of that chaos."



"I think that the service users are only used to seeing the SLT when there has been an incident or when we have visitors, so they don't have that relatability with them."

"The OWA & OT's provide a good level of activity but it can be inconsistent.

I would like to see more external professionals being involved in the care and wellbeing of our service users. "

"If there were other professionals involved, there may be the potential for some of our service users to possibly move on as this home may not be the most appropriate place for some of them. However, without the care co-ordination of a social worker, nurse etc there is limited future plans and their reviews are overdue."

"With a higher level of complex referrals, there will inevitably be more compatibility issues."



Any other comments:

"The main form of communication is email and that isn't personal enough, it is also often negative. Staff go above and beyond and it is rarely recognised."

"The staff turnover and staff burnout levels are high."

"The service users don't feel listened to, an example is that they mention they would like to see different food/menu options available and nothing changes. As they don't get much exercise, this is then a health issue such as weight gain etc."

"More flats and self-contained accommodation would help massively."

"The staff cabin space is good, we need more storage/locker space as there is no where for us to lock away our belongings safely e.g. mobile phones which we can't have on us on shift."

"Most of the needs are environmental and superficial but as you have seen there are lots of improvements going on. I know we are behind on the actions plans too."

Recommendations

The following recommendations have been formulated based on observations of the environment and feedback gathered from staff.

1

Staff Recruitment

A recurrent theme throughout this Enter and View visit often related back to staffing levels. There were lots of comments suggesting more staff is required. Despite reassurance that safe ratios are always maintained, comments suggested the time for a person-centered experience is just not possible in the homes' current staffing position. Staff are being 'taken from one unit and placed elsewhere' and the residents 'stay in a lot'.

Healthwatch Cumberland suggest the following recommendation to improve both staff and resident experience.

Further staff should be recruited with a subsequent review of staff morale and resident feedback.

A short online survey may be used for anonymity among staff.



2

Person-centered Care

Feedback from staff highlighted that due to staff capacity, a person-centered experience was unable to be delivered. The home advertises being a space to build independence however, this is currently not possible. Furthermore, activities are not fit for all residents with 'loud' residents making activities less enjoyable for others.

Whilst addressing the recommendation above, action should be made to encourage staff to deliver person-centered care.

Opportunities to work on independence skills within activities need to be offered. Furthermore, personalisation of resident spaces should be encouraged and staff should assist residents with this due to varying capacity of residents to do so themselves.

Healthwatch Cumberland suggest the following recommendation to improve resident experience.

Staff Structure and capacity needs to be reviewed to allow a person-centered care experience to be offered.



3

Identification of Staff

Staff noticed on this visit that identification of staff was difficult with significant improvements required.

Staff should be easily identifiable by name badges or lanyards. It is also good practice to feature a staff board for visitors and residents especially, when there are staffing changes.

Identification methods should be updated as soon as possible and will be reviewed on a future revisit by Healthwatch Cumberland.



Provider Response

Recommendation	Timeline	Response
Staff Recruitment	12 Months	
Staffing Structure	12 Months	
Staff Identification	ASAP	

*Timeline figures are suggestive and it is recognised that some will be quicker to implement than others.

healthwatch
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