Enter and View

St Brendan's

May 2026

healthwatch

Contents

Introduction

2.1 Details of visit

Name of home	St Brendan's Care Home
Service provider	St Brendans Residential Home
Date and time	26th May 2026 9.15 - 10.30AM
Authorised representative (s)	Patricia Lattimer, Phillip Turner, Maureen Matthews, Angela Andrews

St Brendan's Care Home is a three-storey residential care home in Luton providing care and support for older people, including those living with dementia, mental health conditions, physical disabilities and sensory impairments. The home also provides respite care.

Accommodation comprises 20 single bedrooms and three shared bedrooms across three floors, with access via stairs or a passenger lift. Communal facilities include three lounges, a dining room, kitchen and laundry facilities. The home also has an enclosed rear garden with a patio area, raised flowerbeds and garden furniture for residents to enjoy.

St Brendan's Care Home is situated on a bus route and is within easy reach of local shops, a post office and places of worship.

2.2 Acknowledgements

Healthwatch Luton would like to thank the service provider, staff, service users and their families for contributing to this Enter and View visit, notably for their helpfulness, hospitality, and courtesy.

2.3 How we gathered the data

This report is based on our observations and the experiences of the residents, relatives and staff we spoke to on the day of the visit.

What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families, and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists, and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service, but, equally, they can occur when services have a good reputation – so we can learn about and share examples of what they do well from the perspective of people who experience the service first-hand.

Healthwatch Enter and Views are not intended to identify safeguarding issues specifically. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about, they need to inform their lead, who will inform the service manager, ending the visit.

In addition, if any staff member wishes to raise a safeguarding issue about their employer, they will be directed to the Care Quality Commission, where they are protected by legislation if they raise a concern.

3.1 Purpose of visit

The aim of the Enter and View visit is to support a wider project exploring the experiences of people using selected services in Luton, including supported living, residential homes, nursing homes and day centres. The project also considers the views of relatives, supporters and staff.

3.2 Strategic drivers

This visit formed part of Healthwatch Luton's wider programme of work to hear the views and experiences of people using community-based care and support services, particularly those whose voices are less often heard.

The visit aimed to gather feedback from residents, staff and management to understand people's experiences of care, identify examples of good practice, and highlight any areas for improvement. Findings from this visit will contribute to Healthwatch Luton's ongoing work to inform service development and promote person-centred, accessible care.

Overall summary

Healthwatch Luton carried out an Enter and View visit to **St Brendan's Care Home** as part of its statutory role to gather feedback from people using health and social care services.

St Brendan's Care Home provides residential care for older people, including those living with dementia, mental health conditions, physical disabilities and sensory impairments. The home also offers respite care. It is situated in a residential area in the south of Luton and provides accommodation across three floors, with communal lounges, dining facilities and an enclosed rear garden. On the day of the visit, the lounge doors were open, allowing residents access to the garden and outdoor seating area.

Healthwatch representatives spoke with three residents, the deputy manager and three members of staff, and observed the environment and interactions throughout the home. The registered manager post was vacant at the time of the visit, with the deputy manager overseeing the service.

Representatives were welcomed by staff, and the atmosphere throughout the home was generally calm. Most residents were in the downstairs lounge, while others remained in their bedrooms receiving support with their personal care.

Residents' feedback was generally positive. One resident commented, ***"Good, the staff are good at talking to people."*** Another resident highlighted the impact of noise levels in the communal lounge, explaining that they found it difficult to relax because of the television and another resident making repetitive noise.

Overall, the visit found St Brendan's Care Home to be a welcoming service where residents appeared comfortable and staff interacted with them in a respectful and supportive manner. Residents spoke positively about the care they received, while also identifying the effect that noise within one communal area could have on their comfort and enjoyment of the environment.

Methodology

The visit to St Brenden's was **partially announced**: the service provider was informed that an Enter and View visit would occur during the month, but no specific date or time was given in advance. This approach was used to balance transparency with the opportunity to observe normal day-to-day operations.

The visit took place on **26th May 2026**, from **9.15 to 10.30am**.the **Authorised Representatives attending: included,** Patricia Lattimer, Philip Turner, Maureen Matthews, Angela Andrews.

Upon arrival, the team introduced themselves to the deputy manager. The purpose and scope of the visit were briefly reiterated, and staff were asked whether any residents should not be approached or were unable to give informed consent. The deputy manager introduced the team to staff and residents in the lounge area.

The team was given access to all communal parts of the home and were able to observe the environment, interactions, and general atmosphere. The ARs used a **semi-structured conversation approach**, primarily engaging with residents in the lounge. Conversations were guided by Healthwatch Luton's standard themes for care home visits, and additional insight was gathered through informal observation.

Notes were taken throughout the visit by hand. Feedback was later collated and analysed alongside observational findings to produce this report.

Demographics and Participation:

- **Three residents** were spoken to in detail during the visit, **one male, and two females, aged around 65 plus.**
- **Four members of staff** also took part, the home deputy manager and 2 support workers providing insight into their roles, the care provided, and their views on the service.
- **No family members** were present or available during the visit.

Residents were informed that participation was voluntary, and it was made clear that they could withdraw from the conversation at any time. Staff and residents appeared relaxed and open during interactions.

Summary of findings

6.1 Overview

St Brendan's Care Home is registered to provide accommodation and care for up to 26 residents, including older people living with dementia, mental health conditions, physical disabilities and sensory impairments. The service also provides respite care. At the time of the visit, the home was fully occupied. The registered manager post was vacant, and the deputy manager, who has worked at the home for seven years, was overseeing the service.

The home is located on Ashburnham Road in Luton and comprises two connected houses. Accommodation includes 20 single bedrooms and three shared bedrooms, communal lounges, a dining area, lift access between floors and an enclosed garden for residents' use. Limited on-site parking is available, with additional parking nearby.

During the visit, the service was operating as usual. Most residents were observed in the communal lounge, while others remained in their bedrooms receiving support with personal care. Residents appeared relaxed and comfortable in their surroundings.

The environment was observed to be clean, well maintained and organised. Information, including safeguarding guidance and health promotion material, was displayed throughout the home.

Residents were encouraged to speak openly with the visiting team. Based on observations and the feedback received, St Brendan's Care Home appeared to provide a welcoming environment that supported residents' wellbeing, choice and day-to-day needs.

6.2 Premises

The external areas of St Brendan's Care Home were well maintained and in good condition. The property includes a small driveway with parking for approximately three vehicles and an enclosed rear garden with seating areas, providing residents with access to outdoor space directly from the communal lounge.

Internally, the home was clean, bright and well organised, with no unpleasant odours or obvious environmental hazards identified during the visit. Accommodation is arranged across three floors within two connected houses.

Communal areas included a spacious lounge and dining area on the ground floor and an additional lounge on the first floor. During the visit, most residents were using the communal lounge, while others remained in their bedrooms receiving support with personal care.

The home appeared accessible to meet residents' needs, with lift access between floors. Signage throughout the building was clear, and key information, including safeguarding guidance, was displayed. Fire exits were clearly marked.

Overall, the premises presented as a clean, safe and welcoming environment that supported both communal living and residents' privacy.

6.3 Staff interaction and quality of care

Residents described staff as friendly, approachable and supportive. Feedback about the care provided was generally positive. One resident commented, ***"Good, the staff are good at talking to people."*** Another resident expressed concern about the noise levels in the communal lounge, explaining that this sometimes affected their comfort.

Residents told Healthwatch they felt safe living at the home, and no safeguarding concerns were raised during the visit.

During the visit, staff were primarily engaged in providing personal care in residents' bedrooms and supporting medication administration. As a result, there were limited opportunities to observe prolonged interactions between staff and residents in the communal areas. However, residents appeared comfortable in their surroundings and staff responded appropriately when support was required.

Residents confirmed they had access to GP services. Two residents said they had not seen a dentist for some time, although staff explained that residents were supported to access GP, hospital, dental, optical, chiropody and district nursing services when required. Staff described regular GP visits and multidisciplinary team meetings to support residents' healthcare needs.

Staff spoke positively about working at St Brendan's Care Home and described a supportive team environment. One member of staff said, *"It is good working here… there is good teamwork and good morale within the home."* The deputy manager explained that the home promoted person-centred care and independence and reported that staff retention was good.

Staff confirmed that regular meetings, supervision and mandatory training supported their development. They demonstrated an understanding of

safeguarding procedures and were confident in reporting concerns in line with the home's policies and local safeguarding arrangements.

When asked about complaints, staff explained that concerns would be reported to the deputy manager and managed in accordance with the home's complaints procedure. The deputy manager also described opportunities for residents and relatives to provide feedback through meetings and a suggestion box.

Overall, the evidence gathered during the visit suggested that residents felt safe and supported, and that staff were committed to providing person-centred care while working within a positive and supportive team environment.

6.4 Social engagement and activities

During the visit, residents were observed spending time in the ground-floor communal lounge, which appeared to be the main shared area in use. The television was on throughout the visit; however, the seating arrangement meant that some residents were unable to view it comfortably, and several residents did not appear to be engaged with the programme.

Residents provided mixed feedback about opportunities for social engagement. One resident said, *"I have been at the home since Christmas; during that time I have not seen any activities happening."* Another resident commented, *"There are no activities, just the television on,"* while also explaining that the noise levels in the lounge could make the environment uncomfortable. A third resident said they *"sometimes go out for a walk with a small group of people."*

No organised activities were observed during the visit. The deputy manager explained that a daily programme of activities was available, with a minimum of two hours of organised activities each day. They also advised that volunteers visited the home every two weeks to provide singing sessions, family members regularly visited and, where appropriate, supported residents to go out. A local church also visited on Saturdays to offer communion to residents who wished to participate.

Overall, residents' experiences of social engagement varied. While the home described a programme of activities and community involvement, these were not observed during the visit, and some residents felt there were limited opportunities for meaningful activity and engagement.

6.5 Dining Experience

Residents who provided feedback were generally positive about the food at St Brendan's Care Home, although some identified areas for improvement. One resident commented, *"Not too bad. I would like a slightly bigger portion. There is a choice of cereal for breakfast, but no choice at dinner time. You can have a sandwich if you do not like what is for dinner, and there is a choice of sandwiches for tea."* Another resident said, *"I am happy with the food provided and with the range."* A third resident explained, *"There is a choice of cereal, I always have Weetabix, and a choice of sandwiches. I do not like the dinners. I have a small appetite and usually have a sandwich instead. I also only have one tooth, so some meals are hard to eat."*

Residents did not comment on where they chose to eat their meals. During the visit, the home had a dining room, a dining table within the communal lounge and additional small tables for residents' use. Drinks were available between mealtimes, and the dining areas appeared clean and well maintained.

Overall, resident feedback suggested that meals were generally satisfactory. While some residents would have welcomed greater choice or meals better suited to their individual preferences, no significant concerns were raised regarding the overall dining experience.

6.6 Choice

Feedback gathered during the visit indicated that residents at St Brendan's Care Home were supported to make choices about aspects of their daily lives. One resident said, *"I sometimes go out for a walk with a small group of people,"* demonstrating that opportunities were available to access the local community.

Residents described staff as friendly and said they listened to them and provided support when required. Feedback also indicated that residents were involved in aspects of their care and day-to-day routines.

Residents also spoke positively about maintaining contact with family and friends. One resident commented, *"My sister lives in Wales. She visits when she can, and I speak with her on the office phone."*

Residents described having some choice in relation to meals, including breakfast options and alternatives if they did not wish to have the main meal. Resident feedback on the range of meal choices is reflected elsewhere in the findings.

Overall, observations and feedback indicated that residents were supported to exercise choice in their daily routines, maintain family relationships and make decisions about aspects of their day-to-day lives.

Recommendations

1. **Review opportunities for meaningful activities and engagement**

Residents provided mixed feedback about opportunities for activities, and no organised activities were observed during the visit. Healthwatch Luton recommends that the home reviews how meaningful activities are planned, promoted and delivered throughout the day to ensure residents have regular opportunities for engagement in line with their interests and preferences. Consideration could also be given to displaying activity schedules more prominently within communal areas.

Timescale: Within two months of receiving this report.

2. **Review mealtime choice and communication**

While residents were generally positive about the quality of the food, some reported limited choice of main meal at lunchtime and said they often chose a sandwich as an alternative. Healthwatch Luton recommends reviewing the range of meal options available, particularly for residents who do not wish to have the main meal, to ensure individual preferences and nutritional needs continue to be met. The home may also wish to review how daily menus are displayed and communicated to residents to support informed choice.

Timescale: Within two months of receiving this report.

3. **Review the layout and environment of the communal lounge**

During the visit, some residents reported that noise levels within the communal lounge affected their comfort. It was also observed that the positioning of seating meant not all residents could comfortably view the television. Healthwatch Luton recommends reviewing the layout of the communal lounge and considering whether changes to seating arrangements, environmental stimulation or the use of communal space could further enhance residents' comfort, engagement and wellbeing.

Timescale: Within two months of receiving this report.

7.1 Examples of Best Practice

Welcoming Environment

Healthwatch Luton representatives were welcomed by staff throughout the visit. The home appeared clean, well maintained and comfortable, contributing to a welcoming environment for residents and visitors.

Positive Staff–Resident Relationships

Residents spoke positively about the support they received from staff, describing them as approachable and willing to listen. One resident commented, ***"Good, the staff are good at talking to people."*** Residents also said they felt safe living at the home.

Supporting Family Connections

Residents described maintaining regular contact with family and friends. One resident said, ***"My sister lives in Wales. She visits when she can, and I speak with her on the office phone."*** Feedback indicated that residents were supported to maintain important relationships with those close to them.

Service provider response

The Service provider was given the opportunity to review and comment on this report. However, no response had been received by time of publication.