



Enter and View

The Vine House

January 2026

healthwatch

Contents

Contents 1

Introduction2

What is Enter and View?2

Overall summary4

Methodology.....5

Recommendations..... 10

Service provider response.....11

Introduction

2.1 Details of visit

Name of home	The Vine House
Service provider	P & P Community Services Ltd
Date and time	27th January 2026 9.30-11.00am
Authorised representative (s)	Patricia Lattimer, Philip Turner, Maureen Matthews, Angela Andrews

The Vine House is a supported living service registered to accommodate up to two adults under 65 with learning disabilities. The service operates within a two-storey residential property, comprising three single bedrooms.

The Vine House is managed by P&P Community Services a provider specialising in residential care for people with learning disabilities. Within the home the small team promote independent living. There is close access to local shops and a wide range of leisure activities.

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 allow 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 visit is to understand and report on the experiences of residents in selected Luton living in supported living, residential and nursing homes and day centres, their relatives, supporters and staff.

3.2 Strategic drivers

This visit was part of Healthwatch Luton's wider work to hear from underrepresented groups using community-based care and support services. The Vine House is supported living accommodation for adults with learning disabilities, and the visit was designed to gather insight directly from service users, staff and management about their experience of care and support.

Healthwatch Luton is gathering feedback from people in inpatient and residential settings, in addition to daytime provision for people with learning disabilities. Given the ongoing need for more inclusive, personalised and accessible services, including in non-residential settings, this visit offered valuable insight into how well current provision meets people's needs.

This visit also supports our commitment to ensuring that people whose voices are less often heard, including those with learning disabilities, are given the opportunity to share their views and help shape services.

Overall summary

The Enter and View visit to The Vine House took place on **27 January 2026** and provided valuable insight into the experience of residents and staff at the service. The home is a supported living environment for up to two adults with learning disabilities. On the day of the visit, two residents were living at the property. One resident had lived at the property for over 10 years and the other for over 20 years.

The atmosphere throughout the home was calm, welcoming and homely. The accommodation included a lounge and kitchen-diner, which were clean, well-furnished and actively used by residents. Informal observations and conversations suggested that residents feel safe, respected and supported in maintaining their independence and preferences.

Staff were described as kind and caring, with good communication skills. Interactions between staff and residents were positive and supportive, and residents expressed confidence in the support they received. The manager was welcoming, open and engaged in the Enter and View process. Staff also reported that working there is *“wonderful”*.

Residents expressed satisfaction with the food. There were also many activities and opportunities for engagement within the community. Numerous photographs showed recent visits to the cinema, Christmas outings and horse riding. The service appeared to take a responsive, individualised approach suited to the current resident group.

No major concerns were raised during the visit. However, opportunities for development were identified, including introducing regular resident feedback mechanisms and ensuring that cultural or religious dietary needs are clearly documented and reviewed.

Overall, The Vine House appeared to provide a positive, person-centred environment, with caring staff and a strong focus on maintaining residents' dignity, autonomy and wellbeing, and promoting engagement in the community.

Methodology

The visit to The Vine House was partially announced. The service provider was informed that an Enter and View visit would take place during January 2026; however, no specific date or time was given in advance. This approach balanced transparency with the opportunity to observe normal day-to-day operations.

The visit took place on **27 January 2026 from 9:30 to 11:00am**. Four Authorised Representatives attended: **Patricia Lattimer, Philip Turner, Maureen Matthews and Angela Andrews**.

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

The team was given access to all communal areas of the home and observed the environment, interactions and general atmosphere. A semi-structured conversation approach was used to engage with residents. 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 and later collated and analysed alongside observational findings to produce this report.

Demographics and Participation

Two residents were spoken to in detail during the visit. Both were male, aged approximately 40 years, and both had learning disabilities. One resident had limited communication skills.

Two members of staff also participated: the home manager and a support worker, who provided insight into their roles, the care delivered and their views of the service.

No family members were present during the visit.

Residents were informed that participation was voluntary and that they could withdraw from conversations at any time. Staff and residents appeared relaxed and open during interactions.

Summary of findings

6.1 Overview

The Vine House is a supported living service registered for a maximum of two adults with learning disabilities. On the day of the visit, two residents were present. The home is operated by P&P Community Services and is located in a residential area in Luton.

The building is a converted two-storey house and contains three single bedrooms, including a bedroom for a member of staff to sleep over. The home has a homely and welcoming appearance, both externally and internally. The layout includes communal spaces such as a lounge and kitchen-dining area, with clear signage and personal touches contributing to a comfortable atmosphere. The premises were clean, well maintained, well decorated and free from strong odours.

The home manager was present and actively engaged during the visit. The manager has been employed at the home for 22 years. Staff were observed to be friendly, approachable and attentive to residents' needs. Based on resident and staff feedback, there was a strong sense of familiarity and community within the setting, with positive views expressed about both the environment and the care provided.

6.2 Premises

The home is a converted two-storey property with three single bedrooms, offering supported living for two adults with learning disabilities, with a member of staff sleeping over when required.

The internal layout appeared homely, clean and well maintained. Staff and residents reported, and observations confirmed, that the environment felt calm, familiar and welcoming.

The communal lounge was clean and comfortably furnished. Clear signage was visible, reflecting a focus on accessibility. A dining area was observed within the kitchen-diner, where residents stated they usually had their meals. Both the lounge and kitchen-diner were spacious and well arranged. Photographs of

residents at different times in their lives were displayed around the lounge, contributing to a personalised and homely atmosphere.

There were no visible hazards, and the environment appeared comfortable in terms of temperature and layout. Residents were mobile and were observed walking freely around the home.

Residents reported that they could access outdoor areas nearby, including the front garden and local walks, and that they sometimes sat outside when the weather allowed. Visitors were made welcome, and the environment supported both communal activity and quiet time. There was a pleasant aroma throughout the home.

Overall, the home gave a strong impression of being personalised and well cared for, with attention paid to residents' comfort and dignity.

6.3 Staff interaction and quality of care

Staff were consistently described as kind and caring. Observations during the visit supported this, with staff engaging naturally and warmly with residents.

Residents stated that they felt safe and supported in the home. One resident said: ***"I am completely happy here."*** Another commented: ***"I feel listened to,"*** and added that staff were helpful when support was needed. Residents also stated that they were treated with dignity and that their independence was promoted.

Staff appeared to know residents well, and there was a clear sense of familiarity and rapport. Interactions observed during the visit were calm, respectful and unhurried. Staff also spoke positively about their roles within the home. One support worker stated: ***"We work well together, providing a homely environment."*** Another commented that the team was small but supportive and that communication was good. Staff described regular meetings and handovers, along with the use of a communication book to share important information.

Staff reported that they felt valued and supported by the wider organisation. Training records were maintained, and staff stated that they were encouraged to undertake training and request additional learning where required.

Overall, interactions between staff and residents contributed positively to the atmosphere of the home and reinforced a sense that residents felt safe, respected and supported.

6.4 Social engagement and activities

Residents reported feeling free to choose how they spent their time. On arrival, residents were listening to music in the lounge and preparing to go out for a visit to the jacuzzi.

Residents described a wide range of activities tailored to their preferences. These included weekly horse riding, cinema visits and regular community outings. One resident spoke about celebrating their 40th birthday at home with family and going out for dinner and drinks.

The manager shared photographs of recent Christmas activities and outings, which demonstrated ongoing engagement within the community. Both residents spoke about television programmes they enjoyed watching.

Families were reported to visit regularly, particularly at weekends. Residents were also able to contact family members via the office telephone. Families were encouraged to remain involved in residents' lives.

Staff described the home as relaxed and responsive to residents' preferences, enabling access to local community activities that residents enjoy. The flexible approach appeared to meet the needs and interests of the current residents.

6.5 Dining Experience

The dining environment appeared clean, relaxed and well organised. Residents stated that they sometimes ate in the garden during the summer months, reflecting a flexible and informal approach to mealtimes.

Residents commented positively on the food provided. One resident stated: ***"The food here is nice; it is lovely food."*** Another resident confirmed that they were happy with the meals and choice available. Both residents expressed satisfaction with the dining arrangements.

Staff reported that residents' preferences and dietary needs are taken into account. One member of staff explained that, with two residents, it is manageable to tailor meals to individual tastes and requirements. Menus were discussed with residents, although no printed menus were observed during the visit.

There was no opportunity to observe a full mealtime; however, the dining setup and availability of snacks between meals suggested a supportive and domestic-style approach. Residents appeared confident accessing drinks and light refreshments independently.

Staff also described growing a variety of vegetables and fruit in the garden, which contributes to meal preparation and promotes involvement in everyday household routines.

6.6 Choice

Residents at The Vine House demonstrated a good level of autonomy in their day-to-day lives. Feedback from both staff and residents indicated that individuals were able to make decisions about their routines, including when to get up, when and where to eat, and how they spent their time.

One resident stated: *"I can communicate my needs and I feel listened to. I am able to discuss what I want to do with the staff and go out when I want to."* This comment reflects a perception of being heard and involved in decision-making.

Staff described the home as resident-led and reported adapting communication to meet individual needs. They explained that they speak clearly and take time to listen to ensure residents are able to express preferences and make informed choices. Residents confirmed that staff respected their wishes regarding outings, leisure activities and contact with family members.

Feedback identified residents were able to personalise their bedrooms and have their own furniture if they wished. Bedrooms included television and telephone points, allowing residents to maintain independence and privacy. During the visit, music was playing in the lounge, and residents appeared relaxed and engaged in their preferred activities.

Residents accessed GP services at Castle Street and attended a dental practice specialising in treatment for people with learning disabilities, as well as a local optician. Residents were accompanied by staff to appointments. A communication book was used to record appointments and share information.

Overall, the atmosphere supported individual choice and comfort, with residents appearing confident and engaged in their daily routines.

Recommendations

The Vine House presented as a welcoming and person-centred supported living service. The following recommendations are offered to support continued development and enhancement of existing good practice.

1. Consider establishing regular opportunities for structured resident and relative feedback.

While residents reported feeling heard through informal conversations, introducing a more structured approach to gathering and responding to feedback – such as periodic resident meetings or accessible feedback methods, may further strengthen resident voice and support continuous improvement.

Suggested review: within 6 months.

2. Continue to strengthen documentation and awareness of cultural, religious and dietary requirements.

Although residents indicated that their needs were met, ensuring that cultural and religious dietary requirements are consistently recorded and reviewed may support ongoing person-centred care and future planning.

Suggested review: within 6 months.

7.1 Examples of Best Practice

Person-centred support and flexibility:

Staff demonstrated a consistent commitment to respecting residents' individual preferences, enabling them to maintain control over daily routines. A range of age-appropriate activities and community engagement opportunities were evident.

Positive staff-resident relationships:

Interactions between staff and residents were warm and respectful. Residents described staff as approachable and stated that they felt listened to.

Open and welcoming environment:

The home had a relaxed and homely atmosphere. Visitors were welcomed, and residents were able to move freely and comfortably throughout the property.

Service provider response

The service provider was given the opportunity to review and comment on this report, however no response has been received.

