Enter and View

Rose Court

February 2026

healthwatch

Contents

Introduction

2.1 Details of visit

Name of home	Rose Court
Service provider	Priory Group
Date and time	12th February 10.00-12.00
Authorised representative (s)	Patricia Lattimer, Angela Andrews Phillip Turner, Maureen Matthews, Sandra Gouldbourne

Rose Court Care Home

Rose Court is a residential care home registered to accommodate up to eleven adults with learning disabilities, including autistic people Rose Court is on a quiet residential street, close to the town centre, the service operates within a two-storey residential property, comprising eleven single bedrooms.

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 project is to understand and report on the experiences of residents in selected Luton accommodation including 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. Rose Court is a residential home for adults with learning disabilities and additional needs, 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

Healthwatch Luton carried out an Enter and View visit to Rose Court on 12 February 2026. The visit was undertaken as part of Healthwatch Luton's statutory role to listen to the experiences of people using health and social care services.

Rose Court is a residential care home providing support for adults with learning disabilities. During the visit, Healthwatch Luton gathered feedback through resident and staff questionnaires, alongside informal conversations and observations of the environment and interactions within the home.

Overall, the home presented as clean and well maintained, with a calm atmosphere observed during the visit. Residents were seen within communal areas and appeared comfortable in the presence of staff. Staff were observed interacting with residents in a respectful and supportive manner. Communication was adapted to meet residents' needs, including the use of Makaton to support engagement.

Feedback from residents and staff indicated that individuals are supported to make choices in their day-to-day lives, including what they eat and how they spend their time. Residents also reported being happy living at the home.

A range of activities was evidenced through questionnaires, including both in-home and community-based opportunities such as outings, social groups, and day trips. No significant concerns were identified during the visit. However, opportunities for development were noted, including improving the visibility of information for residents, strengthening signage within the home, and enhancing the maintenance and use of outdoor space.

In summary, the overall impression from this visit was of a calm and supportive service, with staff working to meet residents' individual needs and promote independence.

Methodology

The Enter and View visit to Rose Court took place on **12 February 2026** between **9.30-11.30am**. The visit was **partially announced**, with the provider informed in advance that a visit would take place, although the specific date and time were not disclosed. This approach was used to balance transparency with the opportunity to observe normal day-to-day operations.

The visit was conducted by Authorised Representatives Patricia Lattimer, Angela Andrews, Philip Turner, Maureen Matthews, Sandra Gouldbourne from Healthwatch Luton.

On arrival, the team introduced themselves and explained the purpose of the visit. The person in charge was present on the day and facilitated access to the home and supported the visiting team.

Authorised Representatives were given access to communal areas 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 communal spaces.. A structured observation checklist was used to record environmental factors, accessibility, signage, cleanliness and overall atmosphere.

Feedback was gathered through written questionnaires and informal conversations. Questionnaires were completed by both residents and staff.

Demographics and Participation:

- **Two residents** participated in providing feedback.
- **Four members of staff** provided feedback.
- **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

Rose Court is a residential care home providing accommodation and support for adults with learning disabilities. The service is located in a residential area of Luton, with access to local amenities and community facilities.

The home provides accommodation across a number of bedrooms, with communal living spaces including lounge and dining areas. The service also benefits from outdoor space, supporting residents' access to fresh air and leisure opportunities.

On the day of the visit, the service was operating as usual. Residents were observed within communal areas, engaging in day-to-day routines. The overall atmosphere appeared calm and structured.

Staff were present throughout the visit and were observed supporting residents in a responsive and attentive manner. Feedback from staff indicated that the service focuses on supporting residents' independence and daily living skills.

Based on observations and feedback gathered during the visit, Rose Court appeared to provide a structured environment where residents are supported in their day-to-day routines.

6.2 Premises

The external condition of Rose Court was described as adequate. The property is located within a residential area. Parking was available; however, the layout appeared complex and may present challenges for visitors navigating the space.

Internally, the environment was clean, light and well organised. No unpleasant odours or visible hazards were identified during the visit. Communal areas were spacious and included a range of seating options. Signage within the home was limited, with no clear signage observed on some internal doors, including toilet facilities. The home includes communal lounge and dining areas, as well as private bedrooms.

The outdoor area includes a large garden space. While part of the garden was accessible and usable, sections appeared overgrown and not in active use at

the time of the visit. A trampoline and barbecue were present, providing potential for outdoor activities and social use during warmer weather.

Overall, the premises presented as a clean and safe environment, with areas for further development in navigation, signage, and use of outdoor space.

6.3 Staff interaction and quality of care

During the visit, staff were present and observed interacting with residents in a calm and supportive manner. Interactions appeared respectful, with staff responding to residents' needs and providing reassurance where required.

Residents were observed within communal areas and appeared comfortable in the presence of staff. Feedback from residents, where provided, indicated that they were happy living at the home. Although direct engagement was limited, observations suggested a level of familiarity between staff and residents.

Communication was observed to be adapted to meet residents' needs. Makaton was used with some residents, supporting communication and engagement. Feedback from staff indicated that care is delivered in a way that supports residents' individual needs and daily routines. Promoting independence was described as part of the approach to care.

A positive working environment was reported, with reference to teamwork and support from colleagues. Training was described as being up to date. Residents were reported to be supported to attend healthcare appointments, including GP and other services where required.

Overall, observations and feedback suggest that residents are supported in a consistent and responsive manner. However, this was primarily evidenced through staff accounts due to limited resident engagement during the visit.

6.4 Social engagement and activities

Feedback from questionnaires indicated that residents take part in a range of activities both within the home and in the community. Activities mentioned included bowling, cinema visits, attending '21 club', coffee mornings, day trips to London, walks in the Stopsley area, and food shopping. Residents also described

taking part in activities such as puzzles, games, baking, and visiting Tring Museum.

During the visit, residents were observed within communal areas, with refreshments available in the lounge. Table-based activities were also present, with items set out in front of residents.

It was noted during the visit that residents have access to a sensory room at another care home, providing an additional opportunity for sensory-based activity. Staff described supporting residents to engage in activities based on their individual needs and preferences, both within the home and in the community.

There were no visible activity schedules or individualised plans displayed within the home at the time of the visit. While a range of activities was evidenced through questionnaires and observation, the visiting team were not able to gather detailed information regarding the structure or frequency of activities during the visit.

6.5 Dining Experience

The dining area was observed to be clean and appropriately arranged. Feedback from residents indicated that they are able to choose what they would like to eat. Staff also reported that residents are supported to make choices about what they eat and where they choose to eat.

Refreshments were observed to be available within the lounge area during the visit. No menus or dietary information were observed to be displayed within the home. There was also no visible information relating to residents' preferences or cultural or religious dietary needs at the time of the visit.

As a mealtime was not observed, the visiting team were not able to comment on the presentation of food, the overall mealtime environment, or the level of support provided during meals.

6.6 Choice

Feedback from questionnaires indicated that residents are supported to make choices in their day-to-day lives. This included decisions about meals and how they spend their time within the home. Residents were observed within communal areas during the visit, with opportunities to remain in shared spaces or spend time in other areas of the home.

Staff responses indicated that independence is promoted, with residents supported to take part in daily routines where possible. Residents were reported to maintain regular contact with family and friends, with visits taking place during the week and at weekends. There was no visible information within the home relating to residents' rights, health promotion, or how to make a complaint.

Information provided by staff suggested that feedback from residents is gathered informally. However, formal systems to evidence how feedback is captured and used were not clearly demonstrated during the visit.

Overall, questionnaire responses and observations suggest that residents are supported to make everyday choices within the home.

Recommendations

Overall, Rose Court was observed to be a clean and calm environment, with staff supporting residents in a respectful and responsive manner. Feedback from residents and staff was generally positive. The following recommendations reflect opportunities for further development identified during the visit and are intended to support continued improvement.

1. Improve visibility of information for residents

There was no visible information within the home relating to residents' rights, health promotion, or how to make a complaint. Making this information accessible and visible would support residents' understanding and independence.

Timescale: Within **3 months**

2. Introduce or display structured activity planning

While a range of activities was evidenced through questionnaires, no activity schedules or individualised plans were displayed within the home. Providing visible activity information would support residents to understand and engage with available opportunities.

Timescale: Within **3 months**

3. Improve signage within the home

Signage was limited, with no clear signs on some internal doors, including toilet facilities. Improved signage would support accessibility and orientation for residents.

Timescale: Within **3 months**

4. Review and maintain outdoor space

The garden provides a large outdoor area; however, parts were observed to be overgrown and not fully usable. Maintaining all areas of the garden would maximise opportunities for outdoor activity and wellbeing.

Timescale: Within **3 months**

7.1 Examples of Best Practice

During the visit, several examples of positive practice were identified.

Residents were supported to access a wide range of activities both within the home and in the community. Questionnaire feedback highlighted activities such as bowling, cinema visits, coffee mornings, day trips to London, walks in the local area, food shopping, baking, puzzles and visits to local attractions. This variety supports social engagement and individual interests.

Residents were also able to access additional resources outside of the home, including the use of a sensory room at another care setting. This demonstrates a flexible approach to meeting residents' needs.

Communication was observed to be adapted to support residents, including the use of Makaton. This supports inclusion and enables residents to express their needs and preferences effectively.

Residents were supported to make choices in their day-to-day lives, including what they eat and how they spend their time. Feedback indicated that residents are able to choose meals and maintain routines that suit their preferences.

Positive interactions between staff and residents were observed throughout the visit. Staff engaged with residents in a calm and respectful manner, contributing to a supportive and familiar environment.

Residents were also supported to maintain contact with family and friends, with regular visits reported. This supports wellbeing and helps maintain important relationships.

Service provider response

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