Enter and View

Luke's Place

February 2026

healthwatch

Contents

Introduction

2.1 Details of visit

Name of home	Luke's Place
Service provider	Anchusa Care Ltd
Date and time	19th February 2026 10.30-11.30
Authorised representative (s)	Pat Lattimer, Phil Turner, Sandra Gouldbourne, Mauren Matthews Angela Andrews

Luke's Place

Luke's Place is a residential care home located in the Putteridge area of Luton. The service provides accommodation and support for adults with learning disabilities and additional needs.

The home is situated within a residential setting with access to outdoor space. The service operates from a single-storey property and provides 24-hour support to residents.

Residents are supported with their day-to-day living, with care tailored to individual needs. The service aims to support residents to live as independently as possible within a safe and supportive environment.

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 is it is part pf a project to understand and report the experiences of residents in selected accommodation in Luton 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. Luke's Place 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 **Luke's Place on 19 February 2026**. 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. 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.

Luke's Place provides residential care for adults with learning disabilities and additional needs. During the visit, Healthwatch Luton spoke with one resident, the Registered Manager, the Quality and Compliance Manager, and two support workers. The team also observed the environment and interactions within the home. The person in charge was present on the day of the visit.

Overall, the home presented as clean, comfortable and well maintained. The environment appeared calm, and residents were observed to be relaxed within the setting. The home is situated in a quiet location with access to outdoor space, supporting a peaceful living environment.

Feedback from the resident was limited due to communication needs; however, the resident appeared comfortable within the home and engaged with staff. Staff were observed interacting with the resident in a calm and supportive manner.

Staff feedback reflected a supportive working environment, with staff describing positive teamwork, regular communication and access to training. Staff also described supporting residents with day-to-day activities and access to the community.

In summary, the overall impression from this visit was of a calm and supportive service, with staff demonstrating an understanding of residents' needs and providing support in a person-centred manner. The evidence gathered suggests that residents are supported within a stable environment with consistent staff input.

Methodology

The visit to Luke's Place was **partially announced**: the service provider was informed that an Enter and View visit would occur during the month of February, 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 1**19th February 2026**, **from 11.30-13.00 PM** our Authorised Representatives (ARs) attended the visit: **Patricia Lattimer, Philip Turner, Maureen Matthews, Angela Andrews and Sandra Gouldbourne.**

Upon arrival, the team introduced themselves to the person in charge and the Quality and Compliance 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 person in charge 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 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:

One resident participated in providing feedback during the visit. The resident was a 39-year-old male with a learning disability and limited communication abilities.

Authorised Representatives also spoke with the **Registered Manager**, the **Quality and Compliance Manager**, and **two support workers**, who provided insight into their roles, the care delivered, and their views on the service. Staff spoke positively about the home and described how they support residents to live fulfilling lives and ensure their views are considered.

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

Luke's Place is a residential service providing accommodation and support for adults with learning disabilities and additional needs. The home is located in the Putteridge area of Luton, within a quiet setting and with access to outdoor space. The home operates from a single-storey property and provides accommodation for a small number of residents. All rooms are large and individually decorated providing a homely environment.

The home was operating as usual during the visit. The person in charge was present, and staff were supporting residents within the home. The overall atmosphere appeared calm. The environment was observed to be clean and well maintained, and residents were observed to be comfortable within the environment.

Based on observations and feedback gathered during the visit, Luke's Place presented as a small residential service supporting residents with their day-to-day living needs.

6.2 Premises

The external condition of Luke's Place was observed to be well maintained. The property is located in a quiet area and benefits from surrounding outdoor space, including a garden. A small swimming pool was also present within the grounds.

Internally, the environment was clean, tidy and well maintained. The setting appeared homely, with communal areas available for residents to spend time together. Personalisation was evident throughout the home, including the display of photographs reflecting residents' activities and outings.

The property is arranged on a single level, supporting ease of movement throughout. Communal areas were in use during the visit, and the overall atmosphere appeared calm.

Bedrooms were observed to be spacious and individually furnished. Bathrooms were also large and equipped with a range of facilities to support residents' needs.

No unpleasant odours or visible hazards were identified during the visit, and the temperature within the home appeared appropriate. Overall, the premises presented as a clean, safe and well-maintained environment.

6.3 Staff interaction and quality of care

During the visit, staff were observed interacting with residents in a calm and supportive manner. Interactions appeared respectful, with staff responding to residents' needs and providing reassurance where required. Due to the resident's communication needs, verbal feedback was limited; however, the resident appeared comfortable within the environment and engaged positively with staff, suggesting familiarity and trust.

One resident was spending time in his room playing a computer game with his key worker. The interaction appeared relaxed, with clear communication between them. With support from his key worker, the resident indicated that he enjoyed playing computer games. His room contained a range of activities, reflecting his individual interests. Staff were observed taking time to listen and repeat information to ensure understanding. During the visit, the resident was offered the opportunity to go out to a local café with another resident and chose to do so.

In the lounge area, another resident was observed developing communication skills with staff support. Staff explained that the resident had previously been non-verbal and was receiving regular intervention to support communication, including the use of a communication board, facial expressions and eye movements. Some verbal communication was also observed. Using the communication board, the resident indicated that they enjoyed listening to rock music.

Staff demonstrated an understanding of residents' individual needs and described adapting their approach to communication accordingly. Staff also spoke positively about the working environment, referring to good teamwork and

ongoing training. Residents were supported to access healthcare services where required.

Overall, observations suggest that staff provide consistent and individualised support, with communication adapted to meet residents' needs.

6.4 Social engagement and activities

During the visit, the atmosphere within the home appeared calm. Individual activities were observed taking place at the time of the visit, with one resident developing their communication skills, another resident playing a computer game and later that resident an another resident going out to a cafe.

Staff described supporting residents to engage in activities both within the home and in the community. Activities included outings and access to local amenities, supporting residents to remain connected to the community. Staff explained that activities are tailored to individual needs and preferences, taking into account residents' abilities and communication needs.

One resident was observed spending time in his room playing a computer game with his key worker. The interaction appeared supportive, with the resident choosing his preferred activity. Staff explained that the resident can become distressed with changes to routine, and was supported in his room to engage in a familiar activity. The resident was able to interact positively with staff and selected the game he wished to play, demonstrating independence. The key worker described the resident's preferences and how they support him to spend his time. During the visit, the resident chose to go out to a local café with another resident and staff member.

Another resident was observed in the lounge participating in a communication-based activity with staff support. Staff explained that the resident had previously experienced low mood and limited communication, and was now receiving regular support using a communication board, facial expressions and verbal prompts. The activity was carried out in a relaxed manner, and the resident was able to express enjoyment and indicate that they were happy living at the home.

Bedrooms were personalised with residents' belongings, reflecting individual preferences and supporting a sense of ownership and comfort.

The home benefits from access to outdoor space, including gardens and a swimming pool, providing additional opportunities for relaxation and wellbeing.

Due to the limited duration of the visit and the communication needs of residents, the visiting team were not able to gather detailed feedback regarding the range or frequency of activities.

6.5 Dining Experience

The visiting team did not observe a main mealtime during the visit. Due to residents' communication needs, limited verbal feedback was obtained regarding the dining experience. No concerns were raised in relation to food or mealtimes.

Staff reported that residents are supported with meals and that food is provided in line with individual needs and preferences. Information relating to residents' likes, dislikes, allergies and dietary requirements was recorded.

Within the dining area, visual menu aids were in place, including picture cards showing meal options with accompanying images and descriptions. These were positioned at an accessible height for residents, including those using wheelchairs. Staff were observed supporting residents to select meals using these visual prompts. A weekly menu was also displayed with pictures and details of meals. Meals were described by staff as freshly prepared.

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

During the visit, the resident was observed within the home environment and appeared comfortable engaging with staff. Staff were seen responding to the resident and providing support where required.

Staff described supporting residents to make choices in their day-to-day lives, including decisions about activities and daily routines. Communication was adapted to meet individual needs, enabling residents to express their preferences. This was also observed during the visit, with staff taking time to listen and respond to residents.

Staff demonstrated a good understanding of residents' individual needs and preferences, supporting a person-centred approach to care. The environment

appeared relaxed and homely, with staff supporting residents in a way that reflected their routines and choices. While opportunities to observe all aspects of choice were limited during the visit, feedback and observations indicated that residents are supported to participate in daily routines and make choices about how they spend their time.

Recommendations

Based on the observations and feedback gathered during the Enter and View visit, Healthwatch Luton makes the following recommendation.

1. Continue to develop opportunities for structured activities within the home

7.1 Examples of Best Practice

During the visit, staff were observed interacting with the resident in a calm, respectful and supportive manner. Interactions indicated a person-centred approach, with staff responding to the resident's needs and providing reassurance where required.

Staff demonstrated an understanding of individual needs and described adapting communication to support residents, including responding appropriately to communication difficulties.

The home was observed to provide a clean, comfortable and well-maintained environment. The atmosphere appeared calm, and the setting supported a relaxed living space for residents.

Staff also described a supportive working environment, with good teamwork and communication between colleagues.

Service provider response

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