

Ribble Valley Care Home Sawley

Monday 14th April 2025

11:30am – 2pm



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

Contact Details

Address

Ribble Valley Care Home
Sawley Old Brow
Sawley
Clitheroe
BB7 4LF

Website:

<https://townfieldandcoachhouse.co.uk/ribble-valley-care-home/>

Telephone:

01200 441205

Care Home Contact:

Gwyn (Manager)
Dawn (Manager)

Date and Time of our visit:

15th April 2025
11:30am – 2pm

Healthwatch Lancashire Authorised Representatives:

Steven Walmsley (Engagement Team Leader)
John Moore (Healthwatch Lancashire Volunteer)
Dianne Oldcorne (Healthwatch Lancashire Volunteer)

Introduction

Healthwatch Lancashire is the independent public voice for health and social care in Lancashire 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 Lancashire with opportunities to share their views and experiences.

Healthwatch Lancashire 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 Lancashire website at:

www.healthwatchlancashire.co.uk

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 Lancashire may arrange a revisit to monitor the progress of improvements and celebrate any further successes.

General Information

Ribble Valley Care Home is a residential care home which provides personal care for up to 40 people. The service provides residential care and support for residents living with dementia other conditions.

Acknowledgements

Healthwatch Lancashire would like to thank residents, relatives, staff and management, for making us feel welcome and for taking the time to speak to us during the visit.

What did we do?

Healthwatch Lancashire Enter and View Representatives made an announced visit to Haslingden Hall on 14th April 2025 and received feedback from:



Pre-visit survey

Healthwatch Lancashire emailed a pre-visit questionnaire to the care home manager. The aim of this questionnaire is to gather information about the staff structure, resident population, services offered and activities that are planned for residents to take part in. Some information from this questionnaire is included in the summary below.

Introductory meeting with manager

At the beginning of the enter and view visit, Healthwatch Lancashire met with the manager to discuss the care home and view the facilities. This involved discussing some of the activities and aspects of the daily routine, and to hear the manager's perspective on what is currently working well at the care home.

One to one discussions with residents and their relatives

Residents were asked about their experiences in the care home, including their opinions on the facilities, daily activities, food, and the care they received. They were also asked about how they were involved in the day-to-day life of the home, and whether they were included in planning activities.

Discussions with members of staff

Staff were asked about their experience working at the care home and what they thought was working well, and anything they thought could be changed to improve the experience for themselves and the residents.

Observations

Observations were made throughout the visit. We focused on resident and staff interactions, how accessible the care home was for residents, and the condition and cleanliness of the facilities.

Summary



Healthwatch Lancashire representatives made an announced visit to Ribble Valley Care Home on the 14th April 2025 and spoke with 9 residents, 8 staff members and 1 relative.

Throughout the visit observations were made of staff interactions with residents. We found that residents were generally happy with the care they received, and believed care staff to be friendly, approachable, and attentive to their individual needs.

Several residents were satisfied with the menu offered each day. Most residents appeared content with the range of daily activities available to them, although some mentioned that they would appreciate greater variety.

Discussions with staff showed that they were satisfied with their roles. They felt that staffing levels were appropriate and allowed them to provide an excellent level of care. Staff also felt that they were well trained, and that management were approachable if they had any concerns. Throughout the visit, it was clear that staff had a positive relationship with the residents and knew them well.

There were external issues raised by managers about dentistry provision as the home refer residents to local services and then have to wait for updates from providers. This is compounded as there is sparse NHS dentistry provision in the local area.



Service Overview

Location and public access

Ribble Valley Care Home is located on Sawley Old Brown in the centre of the village. There are eight parking spaces for relatives and staff to use, with no designated disabled bays. There is access to local bus services from two stops in the centre of the village, which links Sawley to nearby Pimlico, Chatburn and Clitheroe on a two hourly service.



Background of the home

Ribble Valley Care Home is situated in a converted house. It is managed by Townfield Care which operates three care homes across the Ribble Valley and Hyndburn; Ribble Valley Care Home (Sawley), Sherwood House (Rishton) and Townfield House (Great Harwood).

The home has a total capacity of forty beds across two floors, with all rooms being designed for single occupancy. Most rooms are En-suite. They are split into standard, standard en-suite and premier rooms. At the time of the visit there were 35 residents living at the home.

In 2024, a new wing was added to the home to increase capacity and improve provision for residents with Dementia. (Appendix 1) This area of the home is intended to be used by residents with more advanced care needs.

Discussions with the manager revealed that the staffing ratio is determined by the current level of residents' needs and is updated as those needs change. The home runs on a ratio of one member of staff to five residents.

Services available

The home provides a range of other services to residents such as activities and a hair dressing service that is available every week. Medication is handled through the local GP practice. In discussions with management, there were issues related to the provision of dentistry as there is no provision in local area as it is in a remote part of Lancashire.

Recreational activities take place throughout the week (see appendix). These activities include intergenerational projects, such as visits from the local nursery school. Singers and entertainers visit to provide shows, and there are regular quizzes, games, movie nights, and talking therapies sessions. There are two members of staff responsible for the planning and delivery of activities at the home.

Enter and View observations

External Environment



The outdoor area of Ribble Valley Care Home has been adapted to cater for accessibility, with drop-kerbs and ramps provided for people with mobility aids. There is a large car park to the front of the home. However, there were no designated disabled bays for relatives to use.

The outdoor areas of the home are well presented and maintained. A central courtyard is used by residents for outdoor activities and recreation which is accessible from some bedrooms and one of the dining areas.

Internal Environment – first impressions

Upon entry there is a reception with a front desk and a waiting area. Access to the main areas of the home are secured by keypads in order to maintain resident safety. At the time of the visit the staff were preparing for lunch so Healthwatch Lancashire Representatives used the bells on the desk to alert staff that we had arrived. These are for each of the two units at the home. One bell was out of use. (Recommendation 1)

Two main communal dining areas are in the centre of the home. Residents were getting ready for lunch at the start of our visit which meant that there was movement between the different areas of the home.





The main entrance area has noticeboards with information for relatives, informing them about upcoming activities at the home and other services. It was noted that the activities were presented in a simple and clear manner with the use of text and pictures.

There was also information about upcoming events that relatives could take part in with their relatives such as parties and events, along with information about local services and conditions such as Dementia.

Observation of corridors, public toilets and bathrooms

The home is split between two main areas which have similar facilities for residents to make use of. The newer side of the building is split over two levels and can be accessed by a lift. It was explained that residents are often supervised using the lift to ensure their safety.

The corridors are wide enough to allow access to residents and people using wheelchairs and mobility aids. Noticeboards along each corridor contain information about services available at the home, staff information, and other area specific information about policies and procedures. There were some examples of decoration around the corridors which created a more 'homely' atmosphere. Flooring throughout the home was observed to be dementia friendly, with a matte finish, and handrails with contrasting colours are present in all corridor areas for residents with visual impairments and limited mobility.



Lounges, dining and other public areas

Dining and communal areas are present in each of the two areas. Most of the residents use the same dining room area on a day to day basis, which facilitates a social atmosphere at mealtimes. We were informed that some residents eat in their own rooms, or other communal areas, depending on their personal preferences and care requirements.

The food menu for the day was displayed around the home (See appendix). It was neatly set out and clearly presented although it lacked images of the foods available which may present a barrier to residents choosing their preferences. It is recommended that images of foods be added to menus for residents to choose from. (Recommendation 2)

Staff and resident Interactions



Throughout the visit, Healthwatch Lancashire representatives observed interactions between staff, residents and their relatives.

Members of staff were observed attending to residents throughout the visit. We found them to be caring and attentive to the individual needs of the residents and understood their care plans.

One member of staff brought food to a resident in one of the living room areas as they had fallen asleep prior to lunch. They were checked on multiple times so as to avoid disturbing them. When they awoke they were given the option to either eat in the room they were in or to go to one of the dining rooms, but they wanted to remain in the room. Staff fulfilled this wish and made sure they were given their food and checked in on them regularly whilst they ate.

Throughout the visit there were several interactions observed where it was apparent that relatives had a positive relationship with members of staff and knew what their interests were and their routines. Staff commented on their understanding of residents' needs, particularly for those living with dementia. During the visit some residents displayed minor challenging behaviours. Staff were responsive to these instances and approached the situation in a calm respectful manner.

Resident feedback

Healthwatch Representatives spoke with **nine** residents during the visit.

Tell us what you think about the home

The five residents that Healthwatch Lancashire spoke with felt that the care delivered by staff at the home was of a good standard and that staff were attentive to their needs.



"It's nice here, I'm happy and the care is good."

They told us that staff knew them well and were able to meet their needs, especially when it came to care. One resident commented that they felt like the staff were professional and approachable when they needed something.

One resident commented that they had moved into the newly opened area of the home and found the facilities to be to their liking.

"It was always really nice, but things have got better since I moved into the newer area of the home."

"I am still getting used to the idea of being in a care home but they do a lot to look after me."

What activities are on offer and do you join in?

Seven residents complimented the varied activities on offer, explaining that they enjoyed joining in with the rest of the group. It was explained that the staff hold regular meetings with residents to find out what activities they would like to take part in.

“That singer they had in today was brilliant he was really good and you could see everyone had a good time.”

One resident commented that there was a good variety to the activities planned which they felt was a real positive aspect of their experience at the home



“There’s lots going on here, I like that. It fills the days.”

Two residents commented that although they liked the fact that there was a lot of things to do, they just wanted to do their own thing and they mentioned that staff understood their point of view but sometimes felt like they needed to join in with things.

“I like what they do don’t get me wrong but sometimes I just want to do not a lot. They always ask which is nice but I do like my own time some days.”

Three residents commented that they liked it when their relatives came to visit them and it was good that they could come whenever they wanted. One resident mentioned that they liked that they had their family visit them at lunch time once and enquired if it could be a regular thing. (recommendation 3)

How do you find the care you receive?

Seven of the residents said that they received good care from the staff. They gave examples of how staff responded to their requests and made sure their rooms were clean and tidy.

“They look after us very well. I like things that go on and how they look after us.”

Several residents complimented the management team and said that they liked the fact they were present around the home.

Two residents commented that whilst they felt there were minor frustrations that they raised with the staff that weren’t always heard.

“They come into my room when I am in there and don’t want to be disturbed. I know they are just doing their job but it’s frustrating when I want to be on my own.”

When this was unpicked it was revealed that staff came into the room to carry out observations and dispense medication.

How do you find the food provided?

Six of the residents we spoke to about food were satisfied with the range of choices available to them at mealtimes. They also complimented the quality of the food. They commented that it was consistently good.

“Lunch was really nice. I had the soup. There’s always a good variety. The evening meals are just as good.”

Two residents commented that they sometimes felt like they wanted larger portions but didn’t want to ask staff as they knew they were busy. One resident was observed being unsure what they had chosen as they thought they had asked for something else. (Recommendation 2)

Relative feedback

Healthwatch received feedback from **one** relative during the visit.

They complimented the support and care that had been provided by the staff at the home and they:

“offer really nice down to earth care. They know them (relative) really well and they listen to whatever they need and if they can give it to them they will. I can’t fault the place.”

They discussed some of the physical challenges that their loved one was living with and some of the steps that had been put in place to ensure they were still able to participate in daily activities and life at the home.

They shared examples of how the staff were friendly with them and took time to answer their questions if any issues arose. The only issue that had arisen was around personal care where they felt their relative could be better supported by having the same person as often as possible to provide assistance to them. They understood that it was not always possible, but they wanted it to be consistent if possible. (recommendation 4)

Staff feedback



Healthwatch received feedback from **eight** staff members during the visit.

Do you have enough staff when on duty?

All staff members we spoke with were happy working at the home and complimented the good team spirit shared between colleagues. All twelve staff members spoken with said that they felt there were enough staff at the home, including during busier periods, owing to the higher-than-average number of staff to residents.

“There are enough staff normally. When someone is ill or people are off on holiday, things are busier. But we all support each other, we work as a team to get things done.”

Two members of staff explained how they would sometimes assist with the rest of the team to cover any sickness which was always appreciated by the rest of the team.

One member of staff commented that they felt there were periods when there was a lot to do but there was always help available if they needed it.

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

Several members of staff said that they were able to deliver a person centred experience to the residents, but that was sometimes challenging, due to the needs of the residents with more complex conditions.



“We know our residents really well, we know what they like and don’t like but there are times when they change their mind and that can be tricky to manage.”

One member of staff explained how the home has measures in place to help people with additional communication needs using care plans and viewing residents as individuals.

“There are a wide range of needs here. Even with Dementia, the needs and abilities vary from person to person so we must treat them individually.”

Examples were given about how the staff use one to one meetings with residents and relatives to amend care plans and tailor activities to their needs. It was mentioned that this is carried out on a regular basis and that they were live documents which could be amended as required.

Two members of staff described some challenges they were facing with the provision of dental care to the residents. They are struggling with dentistry provision as they have to refer people to local service and then have it followed up by them as there is little provision in local area. Made worse by remoteness of the home.

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

All eight staff members praised the regular mandatory training processes that were in place to help them develop and improve the care they delivered. There was a mix of face to face and online provision which staff felt helped with engagement and professional development.

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

One staff member mentioned that improvements could be made in how tasks are distributed. They explained that at times, multiple tasks needed to be completed in quick succession, which made them concerned about the risk of missing something or making mistakes.

“One thing I would ask for, is that the jobs we do in the mornings are looked at so theyre better spread out. I come in early and I then get on with one job then another and another and its all a bit quick. I worry Im going to make a mistake. I want them spread a bit better through the day if we can. I know that would help.”

Any other comments

Throughout the visit, staff complimented their experiences working at the home. They commented on the management and support that was given to them to assist with their work and the way they have built up a positive relationship with residents. It was noticed that staff felt able to approach us and talk about their experience working at the home.

Recommendations

During our enter and view visit we spoke to staff, residents and relatives, and observed the care environment and facilities. Based on our observations, we have made the following recommendations:

1. Carry out regular checks of the call bell system in the Reception area to avoid visitors waiting to be seen to if no one is on the desk.
2. Add images of meals to the menu to make it more visual and accessible to residents.
3. Continue meetings with residents to hear their ideas for activities and look into planning activities with relatives.
4. Work with relatives and residents to look into preferences for daily routines to ensure residents and relatives wishes are met.

Provider response

Recommendation	Action from provider	Timeframe	Comments
Carry out regular checks of the call bell system in the Reception area to avoid visitors waiting to be seen to if no one is on the desk.	The bells have been labelled and signs put on each door. We have a small "seniors office" behind the reception area. This is also used by one of the supernumerary deputies when overseeing the standards on the floor and the activity coordinator to do paperwork. This assists with reception duties.	Actioned	
Add images of meals to the menu to make it more visual and accessible to residents.	We have already put this in place with a daily menu card with photographs of the meals available.	Actioned	
Continue meetings with residents to hear their ideas for activities and look into planning activities with relatives.	We have just had a meeting with residents and families which was very well attended. A number of actions were taken from the meeting including: Manager and deputies • to continue to review the staffing levels and rota to allow sufficient levels on Court side and House side. Achieved • to remind seniors to proactively contact families to review care plans and to include	Actioned	

	them with any updates. • review the process of answering the phones and communicate the process to all the team members so that phone calls do not go unanswered.		
Work with relatives and residents to look into preferences for daily routines to ensure residents and relatives wishes are met.	We are committed to working alongside family members to ensure that we are being inclusive. We ask for input into care plans and aim to provide many joint activities throughout the year. We also provide feedback forms for staff and relatives bi annually.	Actioned	

Any other comments?

A number of actions were taken from the meeting including:

Manager and deputies

- to continue to review the staffing levels and rota to allow sufficient levels on Court side and House side. Achieved
- to remind seniors to proactively contact families to review care plans and to include them with any updates. Achieved
- to review the process of answering the phones and communicate the process to all the team members so that phone calls do not go unanswered. Achieved
- to discuss all ideas shared regarding the outdoor space with directors and sharing outcomes to investigate the possibility of blinds being fitted or some type of screening for the sky light windows. – review by 30 June
- to remind staff to ensure all communal bathrooms are clean and tidy post use as well as the importance of handwashing and that the paper towels and toilet rolls are always available. Achieved
- to remind staff to conduct room checks at weekends as well as during the week, and if busy with other priorities to explain this to the senior on shift so that families are aware that bedrooms haven't been forgotten. Achieved
- to label the doorbells in reception Achieved
- to explore the idea/process of introducing a cleaning log for communal bathrooms Review by 30 June

- to look at the laundry procedure and consider appointing a laundry champion to support the laundry staff outside of laundry hours. Review by 30th June
- to continue with steps in resolving the matter raised by SL – Kitchen
- to assign kitchen assistant with a daily task of updating the whiteboards with menu choices for the day? Also consider if the newsletter would be the right place for up-and-coming menus. Achieved
- to give further consider the use of the Wooden Shed Achieved

Medication champion to action

- to review the medication process for taking to hospital visits as well as reviewing the current check list to see if personal items can be added on alongside mar charts etc. Review by 30th June

Activity coordinator to action

- to continue to leave out books and games for residents to access daily on House side and Courtside. Achieved
- investigate finding a space on Courtside which can be used as a reading corner – needing a bookshelf. Achieved
- look into Boccia with a ramp and continue to keep Tennis on the activity plan Achieved
- to continue with booking singers monthly to entertain residents and continue with playing background music in communal areas as well as lounge areas. Achieved
- to continue to include the record player as an activity and ask residents to choose vinyl's and or encourage residents to join in with listening/singing. Achieved

Appendix

Food Menu seen at the visit.

Week 3						
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Lunch	Lunch	Lunch	Lunch	Lunch	Lunch	Lunch
Soup and selection of sandwiches	Bacon, egg and beans with bread	Soup and selection of sandwiches	Corned beef hash with bread	Soup and selection of sandwiches	Broccoli, mushroom potato bake	Pastries with ham and cheese
OR	OR	OR	OR	OR	OR	OR
Ham, chips and peas	Cauliflower cheese with bread	Salmon steak with potatoes <i>potatoes</i>	Scampi and chips with peas	Leek and potato Bake	Hot dogs wrapped in pastry	Spanish omelette
Biscoff cheesecake	Victoria sponge	Cherry crumble and custard	Carrot cake	Chocolate muffin	Blondies with melon	cake
Fruit Yogurt, Ice Cream or Biscuits are always available for dessert						
Tea	Tea	Tea	Tea	Tea	Tea	Tea
Fish cakes with mash and veg	Meatballs with pasta and veg	Cheese and onion pie, chips and veg	Lasagne and garlic bread	Fish and chips	Meat and pot pie with mash and veg	Roast beef/ gammon/ turkey or chicken. Mash/ roast pots, vegetables, Yorkshire pudding.
OR	OR	OR	OR	OR	OR	
Sausage in onion gravy with mash and veg	Chicken and broccoli casserole	Creamy pasta <i>Chicken curry</i>	Cottage pie	Stew with dumplings	Breaded chicken with mash	
Sticky toffee pudding with custard	Ice cream with fruit	Mandarin with cream	Mango mouse	semolina	Jelly and cream	Fruit salad
Fruit Yogurt, Ice Cream or Biscuits are always available for dessert						

Appendices

1. New wing opening:

<https://caring-times.co.uk/gary-neville-opens-new-dementia-wing-at-lancashire-care-home/>

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