

Sea Bank House Care Home

Thursday September 4, 2025
11am-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

27-31 The Esplanade
Knott End On Sea
Poulton Le Fylde
FY6 0AD

Registered Manager:

Joanne Cato

Date and Time of our visit:

04 September 2025

11am-2pm

Healthwatch Lancashire Authorised Representatives:

Sue Edwards (Senior Engagement Officer)

Louise Dewhurst (Engagement Officer)



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

Sea Bank House Care Home has capacity for 23 residents; at the time of the visit there were 18 people residing at the home.

Needs catered for are predominantly older residents with dementia/Alzheimer's. Respite and end-of-life care is also provided at Sea Bank House

Services include round-the-clock care, meals and nutritional support, laundry services and various activities.

Acknowledgements

Healthwatch Lancashire would like to thank residents, 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 Sea Bank House Care Home on Thursday September 04, 2025, and received feedback from:



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 the different areas of the home 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

Conversations with residents were structured around four themes (Environment, Care, Food and Activities).

Discussions with members of staff

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

Observations

The Enter and View team also recorded their own observations on the environment and staff-member interactions. To retain confidentiality and anonymity of respondents, names, pronouns and any identifiable details have been removed from quotes.

Summary



An announced visit was carried out at Sea Bank House Care Home, Knott End-On-Sea, on Thursday September 4, 2025, 11:00am-2:00pm. Healthwatch Lancashire representatives spoke with seven residents, and three members of staff provided written feedback.

The care home has the capacity for 23 residents. At the time of the visit there were 18 people residing at the home.

Sea Bank House Care Home is located in Knott End-On-Sea, in the borough of Wyre. The home is situated in three converted terraced houses, with good road access and local parking.

The care home caters for older people needing day-to-day support, many of whom have dementia/Alzheimer's. The care home also offers end-of-life and respite care.

At the time of the visit the care home was in the midst of redecorating of communal spaces. Healthwatch Lancashire viewed the property in its current form, with a plan to return for a revisit once all decorating work has been completed in order to be able to provide a fair reflection of the environment.

Throughout the visit the majority of the residents were seated in the lounge and dining areas. It was felt by the Healthwatch Lancashire representatives that there was a subdued atmosphere, and that further activities would encourage cognitive stimulation and social interaction.

Several of the residents spoken with were deemed not to have capacity to understand what was being asked or be able to recall their day due to having dementia/Alzheimer's. However, those who were able to provide feedback were positive of their care and were praising of the staff and food and liked their rooms.

Staff spoken with felt able to provide person-centred care, feel well supported by management and sufficiently trained in order to carry out their roles. Two staff members stated that more entertainment would be good, and one felt that the new phone system detracts from time spent with residents. All staff stated that they would recommend the care home to a close relative.

Observations showed good staff and patient interactions, with staff appearing to know the residents well.

Service Overview

Location and public access



Sea Bank House Care Home is located in the village of Knott End-On-Sea, in the Fylde borough. Knott End is a rural, coastal village and is separated from its neighbouring town of Fleetwood by the River Wyre Estuary.

There is good road access to/from Fleetwood, Blackpool, Preston and Lancaster, although travelling to Fleetwood requires an approximate half hour drive in order to cross the River Wyre via Shard Bridge.

A pedestrian ferry runs twice daily between Knott End-On-Sea and Fleetwood. However, this is weather and tidal dependant so may necessitate travel by alternative methods in adverse weather conditions.

There is a bus stop close to the care home and there are regular buses running from the neighbouring towns and cities, although these can be infrequent dependant on where they are travelling to/from due to the location of Knott End.

Street parking is available close to the care home, and there are two public car parks within walking distance.

Background of the home

Sea Bank House is owned and managed by Apex Healthcare who are based in West Sussex. Apex Healthcare also manage three other care homes, with one in Bolton and two in the south of England.

Sea Bank House was originally several terraced residential dwellings which have been converted into a care home.

Services available

Sea Bank House Care Home has capacity for 23 residents. At the time of the visit there were 18 people residing at the care home. The majority of the current residents have dementia or Alzheimer's, with all being 65+, although the care home is able to take younger residents should there be a need.

Services offered include residency, respite and end-of-life care.

Bedrooms include a sink, and where appropriate/required a commode, with all other residents using communal toilets. All residents use communal bathrooms for bathing.

Services at Sea Bank House include meals, with nutritional advice and support, laundry services, activities and entertainment. Other services such as hairdressing

are also available from external professionals who visit the home on a regular basis.



Enter and View observations

External Environment

Sea Bank House Care Home is easy to find with good roadside signage.

The care home is situated in a four storey building which was formerly several private residences. The care home has maintained some visual aspects of the original houses, including the external appearance which continues to appear as three separate dwellings. This does not detract from first impressions and ensures that the home sits comfortably within its environment. Overall the building appears pleasant and homely.

The building is set higher than the footpath and there is a ramp leading to the main entrance. Steps which appear old and worn have been closed off by use of railings ensuring that residents and visitors are kept safe when accessing the building.

There is single door entry into the care home which is kept secure, and visitors are required to ring the doorbell in order for staff to open the door. A small vestibule allows for visitors to be able to shelter from adverse weather whilst waiting for staff to let them in.

The front of the care home is paved and has some seating. There is also access to the basement of the care home, which is secured by railings and a locked gate.

Sea Bank House is located along the sea front and has pleasant views towards Barrow-in-Furness and the Lake District (weather permitting), it also means that the care home can be quite exposed to poor weather conditions during the winter months.



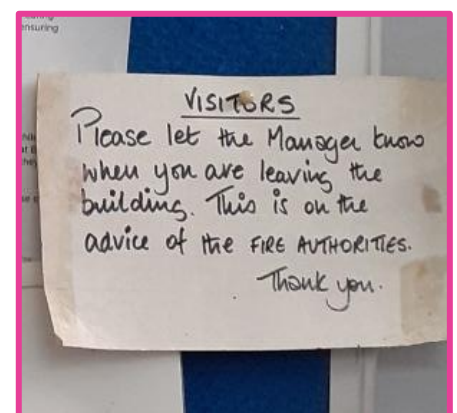
Internal Environment – first impressions

Entrance into the care home is via the front door which leads into a central hallway. The Healthwatch Lancashire representatives were asked to sign-in as visitors on arrival, evidencing good safeguarding and security measures.

General information is on display in the hallway including Apex Healthcare information, and the CQC (Care Quality Commission) registration and inspection report.

There is a small handwritten sign close to the visitors book asking visitors to notify the manager when leaving. The Healthwatch Lancashire representatives felt that this was easy to miss and could be phrased better as it is a genuine safeguarding practice request. It was also felt that the signing-in desk could be more prominent for visitors (Recommendation 1).

All areas in the care home lead off from the central hallway including the stairs and lift to the other floors, lounge and seating areas, kitchen and dining areas, resident bedrooms and offices.



Observation of corridors, public toilets and bathrooms

Due to the nature of the building extensions and adaptations have been made over time, with space utilised as necessary/appropriate. This means that floor levels are staggered resulting in various stairs throughout the care home. Layout was seen to be confusing in places but the care home manager assured the Healthwatch Lancashire representatives that residents are fully supported when moving about.

The care home manager informed the Healthwatch Lancashire representatives that they are currently undergoing redecorating work in the communal areas of the home. This meant that some areas of the care home looked sparse, and with some areas being used as temporary storage for furniture etc. It would be unfair to make recommendations around aspects of appearance in these areas. However, it was noted that care had been taken to minimise the impact on resident experience whilst work was being carried out. Healthwatch Lancashire proposed a potential revisit once the work is completed to supplement this report, and this was welcomed by the manager.



Residents have access to communal bathrooms which are wet rooms with showers. There is a bath available for any resident preferring a bath to a shower. The care home manager stated that currently all residents prefer to shower, and the Healthwatch Lancashire representatives did not observe the bathroom with a bath. The communal bathroom observed was seen to be clean and with suitable accessibility equipment.

Resident rooms are numbered and with the residents name on display. There is also a QR code on each resident door which is linked to the individuals electronic care plan. This allows for staff to quickly access resident information in the event of an emergency. The Healthwatch Lancashire representatives felt that the doors to the individual resident bedrooms could be more personalised by way of colour or artwork which may help residents identify their room more easily (Recommendation 2). The care home manager affirmed that residents are able to add personal touches such as memory boxes if they so choose.

A lift is available for residents to move between floors, and residents are supported by staff when using this. Lift doors to different floors are decorated differently helping residents identify more quickly if they are on the correct level for them.

At the time of the visit the care home had received several deliveries of supplies which were placed close to the entrance, and care home staff were in the process of moving these to the relevant storage areas. The care home manager assured the Healthwatch Lancashire representatives that it was unusual to have stock from different suppliers arrive simultaneously. It was observed that boxes had been placed out of the way of residents, and staff were seen to be dealing with this quickly.



Lounges, dining and other public areas



ground level.

The care home has various communal spaces, with two lounge areas directly to the left on entering the home, and a dining room and kitchen to the right. End-of-life resident rooms, a library/quiet space and offices are also located on the

The two lounge areas are located to the front of the building. These have recently been redecorated and are well lit and spacious. Seating of varying types and heights was placed in a way to encourage social interaction, with ample seating allowing for good resident choice. Window seats are also located around the front bay windows offering pleasant views of the coast and an alternative to chairs.



TVs are in each lounge area and during the visit one was on and one was off; this allows for residents to choose whether they'd like to watch TV or have social or quiet time.

The dining room is also located to the front of the building offering pleasant views for residents at mealtimes. Chairs and tables are set up in a way which encourages social interaction, and residents were observed sitting at the tables chatting throughout the visit. A large kitchen leads directly into the dining room allowing for meals to be served quickly and efficiently.

Healthwatch Lancashire representatives enquired around the displaying of menus in order to support resident mealtime choices and were assured by the care home manager that the dining room is newly decorated and that there are new menu display boards on order.



Hydration Stations were seen to be located in both the lounge areas and dining room where residents are able to access water and cold drinks without the need to ask. However, it was noted that during the visit that whilst these were well stocked with mini milk cartons, sugar etc there was only one bottle of water available (in the dining room). The Healthwatch Lancashire representatives felt that residents would be less likely to access these should there be sporadic supplies. It should also be noted that that screw-cap water bottles, as well as mini milk cartons etc. could pose a challenge for anyone with limited hand dexterity. It is therefore recommended that these stations are monitored and kept stocked throughout the day, and a review carried out to identify how those with limited dexterity can access water, milk etc. easily (Recommendation 3). However, it must be noted that this is a good initiative which should be continued.



To the rear of the building there is a large outdoor space which has been paved. The care home manager explained to the Healthwatch Lancashire representatives that they are looking to enhance and utilise this space by way of seating and planting. It was explained that one resident had expressed an interest in gardening so they had purchased a mini greenhouse to trial gardening as an activity. A small decked area and ramp leads from the rear door into the outdoor space and there was discussion around the safety of using decking which can be slippery when wet or icy. The care home manager informed the Healthwatch Lancashire representatives that there are plans to replace this with a more suitable surfacing in the foreseeable future.

Staff and resident Interactions



The care home appeared sufficiently staffed. Staff were observed interacting with residents well and clearly knew individual resident needs and preferences. Throughout the visit residents were seen approaching the care home team for a chat indicating that residents feel comfortable with staff.

The Healthwatch Lancashire representatives observed a lunchtime meal during the visit. Residents received their meal quickly and staff were seen to be supporting residents as required.

Staff were seen to be distributing medications whilst wearing a tabard asking not to be disturbed which is seen to be good practice. However, it was noticed that that staff were carrying out other duties in between dispensing medication whilst continuing to wear the tabard. This could confuse residents with mixed messages as to when they can interact with staff. It is recommended that this is reviewed to ensure that residents are clear on when they can interact with staff at any given time (Recommendation 4).

Resident feedback

Healthwatch Representatives spoke with seven residents during the visit.

Several of the residents spoken with had advancing dementia/Alzheimer's and therefore had limited capacity to discuss their care; conversations with these residents were kept brief to reduce any potential distress or confusion.

Tell us what you think about the home

All residents who were able to provide feedback were positive about the care home.

“Very, very good here”

“I love it here”

“It's lovely”

Two residents spoke about liking their rooms. One resident talked about residing on the top floor and using the lift which they need support with but that **“sometimes there is no nurse to come up with me ..”** (Recommendation 5).

What activities are on offer and do you join in?

At the time of the visit the majority of residents were seated in the lounge and dining areas. It was felt by the Healthwatch Lancashire representatives that there was a subdued atmosphere and that more armchair activities could be carried out to encourage cognitive stimulation and social interaction. It is therefore recommended that the care home team carry out some discussions with both residents and relatives to ascertain what interests the residents may have and see how these can be supported through activities (Recommendation 6).

The care home has been seen to support a resident who expressed an interest in gardening which demonstrates good practice.

The care home manager stated that they carry out regular activities, such as a singer who visits the home on a regular basis, and that relatives can and do participate in activities with their loved one. Residents are also supported to access the local community.

Due to the current decorating work being carried out there was no information around activities on display at the time of the visit so it was difficult to gain a full perspective on activities on offer. The care home manager assured the Healthwatch Lancashire representatives that an activities board will be reinstated once work is complete.

All of the residents spoken with struggled to recall activities at the care home due to having dementia/Alzheimer's.

Two residents stated that they like to get out and about, although one said that they find this difficult due to their poor mobility, and one added that the care home needs more staff to support with this **"...just like going out but they need more staff"**.

One resident stated that they liked some of the quizzes but that it would get boring if they did them all the time.

One resident stated that there have been activities in the past but nothing currently, although they also stated that they don't like groups and prefer their own company.

How do you find the care you receive?

Overall feedback from residents around the quality of their care was good. Some residents were less able to vocalise their views but smiled and nodded in response to this question.

"They are friendly, couldn't wish for a better place"

"All fun girls, brilliant"

How do you find the food provided?

Healthwatch Lancashire representatives joined residents in the dining room and observed a mealtime. One resident was seen to support staff preparing for lunch by folding napkins which they appeared to enjoy.

Residents were seated in a way that encouraged social interaction and some chatting was observed. Meals were served efficiently and residents were able to eat at their own pace, with staff taking a hands-off approach which clearly worked well with the residents.

All of the residents who were able to provide feedback were positive about the quality of the food at the home. The care home manager explained how there is a set daily menu but that alternatives can be provided for any resident not wishing to eat what was on offer that day. Staff were heard asking residents what they would like for their lunch and tea prior to the lunchtime meal.

Some residents appeared unclear as to what the daily menu was at the time of the visit, and several residents were uncertain on what the desert that they were eating was, although this could be attributed to their health condition. There were no menus on display at the time of the visit, however the manager explained that this was due to the fact that the dining room is newly decorated and a menu board was on order.

“It’s a very happy place”

Relative feedback



Healthwatch Lancashire was unable to gather any relative feedback either during or following the visit. It is recommended that the care home carry out some discussions with relatives to identify where improvements could be made as well as highlighting good practice (Recommendation 7).

Staff feedback



Healthwatch received feedback from three staff members during the visit.

Do you have enough staff when on duty?

All three staff members felt that the care home was sufficiently staffed, other than cover for sick leave.

“Yes, however if someone rings in sick it can be difficult to cover”

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

All three staff members felt that they are supported to carry out person-centred care. Working as a team was mentioned by two members of staff.

“Yes because we work as a team”

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

Staff felt sufficiently trained in order to carry out their duties and are able to ask for further training if they feel it would be beneficial.

One staff member talked about having to carry out their training in their own personal time. It would be unreasonable to recommend that all training is carried out during work hours, and it is therefore recommended that there is a discussion with staff to identify where any compromises could be made (Recommendation 8).

What measures are in place for people with additional communication needs?

Discussion with the manager identified that the care home would not be able to support someone who uses BSL (British Sign Language) or be able to provide an interpreter service for those for whom English is a second language. This is considered acceptable given that the care home caters for a low number of residents and it would therefore not be cost effective.

As the home caters mainly for older people living with dementia/Alzheimer's communication methods are tailored for this demographic. Staff discussed the use of flash cards, wipe boards and music as ways to communicate.

Observations showed staff communicating clearly and professionally and were seen to know individual levels of comprehension and communicate accordingly.

What is your experience of working here?

All three members of staff were positive about working at Sea Bank House Care Home.

“I've been here a very long time”

One member of staff talked about general issues within the care home sector *“I do think that staff cope well despite low pay and difficult times like when we had Covid”*

All three staff members stated that they would recommend the care home to a close relative or friend.

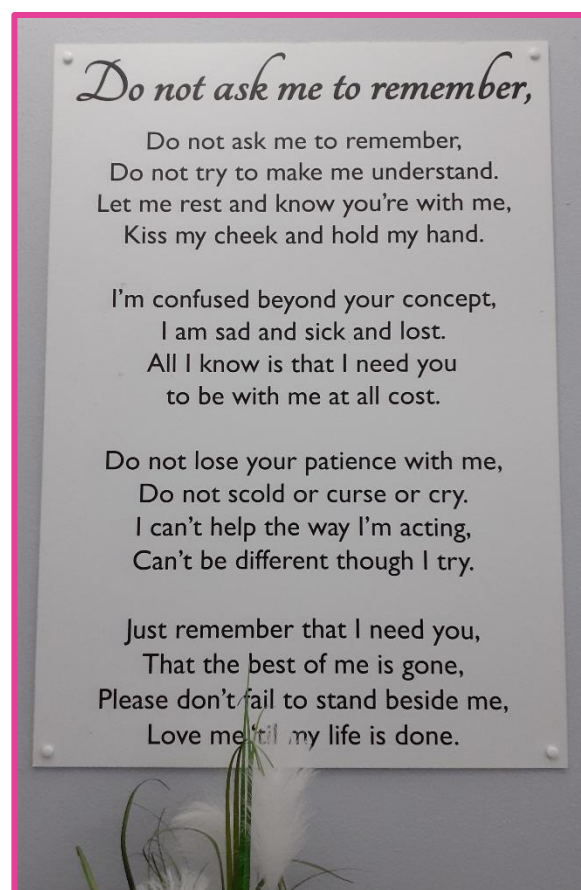
"I would recommend this service..."

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

Two members of staff stated that more entertainment would be good *"more entertainment (singers)"* (Recommendation 6).

Two staff members spoke about how more flash cards and wipe boards would be beneficial.

One staff member fed back to Healthwatch Lancashire that they feel that the new phone system (electronic care plans etc) detracts from their time spent with residents *"...the new phones we use. I feel like it's taken time off the residents as we are always on them"* (Recommendation 9).



Recommendations

The following recommendations have been formulated based on observations of the environment and feedback gathered from residents, relatives and staff.

1. Replace the small sign asking visitors to notify the manager when leaving, this could be by poster or similar. Visitor sign ins/outs helps towards safeguarding as well as fire safety
2. Consult with residents and relatives around personalising individual bedroom doors in order to support residents in identifying their room
3. Review the Hydration Stations and make sure that they are continually stocked and accessible
4. Review the duties of staff when giving out medications in order to ensure residents are clear on when staff should not be approached
5. Ensure that there is a staff member available to support residents in using the lift so that they are able to move between their bedrooms and communal areas as they so wish/need. This could be included in daily staff rotas
6. Investigate further activities which will encourage cognitive stimulation and social inclusion. This should involve resident and relative discussion to ensure activities on offer appeal to the residents. An activities coordinator would help with this
7. Carry out discussions with relatives to gather suggestions for improvement as well as highlighting good practice
8. Discuss current training practices with staff to identify where staff feel compromises could be made re work vs personal time
9. Review how the new phone system is being used to minimise impact on resident experience

Provider response

Recommendation	Action from provider	Timeframe	Comments
Accessibility: Review the Hydration Stations and make sure that they are continually stocked and accessible	The senior on shift will ensure hydration station is stocked each morning, we also have a jug of milk on each station for those who struggle with cartons.	completed	
Inclusion: Carry out discussions with relatives to gather suggestions for improvement as well as highlighting good practice	We send out a quality assurance to our residents and families regular already	completed	
Activities: Investigate further activities which will encourage cognitive stimulation and social inclusion. This should involve resident and relative discussion to ensure activities on offer appeal to the residents.	We have a singer that comes into the home every Friday, our staff are designated for one carer to follow our activity table daily around 2pm. But will happily look into an activity coordinator	completed	
Environment: Consult with residents and relatives around personalising individual bedroom doors in order to support residents in identifying their room	Spoke with residents and families and the most they wanted was some colour added to doors, so I have made the same framed name plaques but added their favourite colour and things they like. I.e: one lady loves owls and her favourite colour is purple so made individually for all	completed	
Health & Safety: Replace the small sign asking visitors to notify the manager when leaving, this could be by poster or similar	Now in situ on the front door	Completed	

Review the duties of staff when giving out medications in order to ensure residents are clear on when staff should not be approached	Spoke with seniors to ensure they only wear the tabard when dealing with medications so not to cause confusion.	Completed	
Resident experience: Review how the new phone system is being used to minimise impact on resident experience	The system is a live tracker and should be used at the time of event to live track, I have explained and demonstrated again how the staff can use the speaker on the phone so instead of typing this all in they can say what is done and this records this for you which is less time consuming. We have only been on pcs a year and one or two of the staff do not like technology and prefer pen and paper whereas the majority of staff find this much quicker than the pen and paper old version.	completed	
Person-centred care: Ensure that there is a staff member available to support residents in using the lift so that they are able to move between their bedrooms and communal areas as they so wish/need.	to be honest I am unsure where this has come from as staff are always on hand and no one goes in the lift independently.	completed	
Staff: Discuss current training practices with staff to identify where staff feel compromises could be made re work vs personal time	Will discuss this with staff on our next staff meeting	5 th December 2025	



healthwatch

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