

# Enter & View Visit Report

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**Dukeminster Court Care Home**  
**10<sup>th</sup> March 2026**

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## Details of visit

<b>Service address:</b>	<b>Dukeminster Court, Dukeminster Road, Dunstable, LU5 4FF</b>
<b>Service Provider:</b>	<b>Quantum Care</b>
<b>Date and Time:</b>	<b>Wednesday 10<sup>th</sup> March 2026, 10am-1pm</b>
<b>Authorised Representatives:</b>	<b>Victoria Davies, Joanna Harvey, Gill Hiscox, Alan Jackson</b>
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## Acknowledgements

Healthwatch Central Bedfordshire (HWCB) would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View visit.

## Disclaimer

Please note that this report relates to findings observed on the specific date set out above.

Our report is not a representative portrayal of the experiences of all residents and staff, only an account of what was observed and contributed at the time.

## 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 managed and make recommendations where there are areas for improvement. The Health and Social Care Act 2012 allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and care workers 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 specifically identify safeguarding issues however if concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies.

## Purpose of the visit

- To engage with residents of the care home and understand how dignity is respected and how person-centred care is delivered within the environment.
- Identify examples of good working practice.
- Observe residents and relatives engaging with staff and their surroundings.
- Consult with residents and relatives about their experiences of the environment within the care home and how care is delivered.
- Engage with the care home staff and management team to gather insight into resource, working culture and staff experience.

## Strategic drivers

- The visit was scheduled following a request from Central Bedfordshire Council to review and gain insight into the services provided at Dukeminster Court.
- Care Quality Commission latest assessment dated December 2023 issued an overall rating of **'requires improvement'**  
<https://www.cqc.org.uk/location/1-2021485147>
- To ensure continuing healthcare needs are consistently met, with Dukeminster prioritising and addressing the specific areas for improvement identified in the CQC report.
- Care homes are a Local Healthwatch priority.
- To engage with residents of care homes and their relatives to understand how dignity is being respected.
- To ensure the care provided meets the expected standards.

## Methodology

**This was an announced Enter and View visit**, requested by Central Bedfordshire Council (CBC) to gather feedback on service delivery and care, from residents, families, and staff. No immediate concerns had been raised prior to the visit. As an independent organisation, Healthwatch Central Bedfordshire (HWCB) conducted the visit, speaking with residents, relatives, staff, and members of the management team. The home was notified in advance, with posters displayed and a feedback box provided to enable residents and families to submit views ahead of the visit.

On arrival, Healthwatch Central Bedfordshire (HWCB) representatives were welcomed by the Home Manager and Regional Support Manager. They completed the sign-in process and were provided with access to the cinema room to use as a base for the visit. Management were given an overview of the Enter and View process, along with an explanation of HWCB's role and the purpose of the visit.

A guided tour of the home was provided by the Manager, who introduced staff and answered questions openly. Observations of the environment and interactions between staff and residents were recorded throughout. The Manager demonstrated a positive rapport with residents, who appeared comfortable and engaged. During post-visit reflection, it was noted that an opportunity for a one-to-one discussion with the Manager did not arise, as the Regional Support Manager was present throughout; however, all questions were addressed openly during the visit.

Interviews were conducted with a total of nine staff and management members, three residents, and three relatives. In addition, seven questionnaires were completed by residents (with support from staff), alongside eight responses received from relatives, resulting in a combined total of 27 responses. Those interviewed represented a range of roles within the service, including the Manager, Unit Team Leaders, Care Assistants, HR Manager, Chef, and Activities Coordinator.

At the start of the visit (10:00am), representatives observed an on-site café, 'Best Friends Café', which provided a welcoming and accessible space for both residents and visitors. The home is arranged across three floors and five units, structured according to residents' individual needs. Each unit includes a communal lounge area and a kitchenette, allowing staff to prepare light meals and refreshments, while the main kitchen supports the provision of more substantial meals.

Residents were observed having breakfast, with some choosing to return to their rooms afterwards. While opportunities for social interaction are encouraged, residents are supported to make individual choices about how and where they spend their time. As the morning progressed, communal lounge areas became increasingly occupied, indicating a gradual uptake in social engagement and use of shared spaces.

An organised flower arranging activity took place during the visit, with several residents actively participating. A varied programme of activities was promoted throughout the home, including opportunities that involve relatives, such as Sunday roasts, seasonal celebrations, and summer barbecues.

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## **Summary of findings**

Dukeminster Court Care Home is part of the Quantum Care group, which operates services across Bedfordshire, Hertfordshire and Essex. This visit was requested by Central Bedfordshire Council (CBC) to gather feedback on service delivery and care; no immediate concerns had been identified.

The home provides residential, dementia and respite care across three floors, with capacity for 75 residents. At the time of the visit, 72 residents were living at the home, aged between 69 and 100. All bedrooms are single occupancy with ensuite facilities, with additional communal bathrooms and toilets available. The building is accessible via lifts and stairs.

The management structure includes a Home Manager, Housekeeping Manager and Chef Manager, supported by Deputy Managers. The wider team includes Unit Managers/Senior Carers, care staff, domestic staff, catering assistants, Receptionists, maintenance and administrative staff. Day shifts are supported by 16 staff including management, with six staff and one Manager on night shifts.

Bedrooms were observed to be modern, clean, well-furnished and personalised. Each room 'door' is designed to resemble a domestic front door and is uniquely coloured to support resident recognition.



Rooms were bright and well-equipped, featuring appropriate furniture and décor that supported comfort and accessibility. Each room was of a consistent size and layout, contributing to a uniform living environment throughout the home, and appeared to meet expected space standards for residential care settings. Rooms also benefited from good natural light, creating a welcoming and airy atmosphere for residents

Memory boxes are positioned outside residents' rooms, allowing families to display personal items such as mementos and keepsakes. These boxes serve as a valuable tool for staff, helping them to learn about each resident's personal history, preferences, and interests, and supporting the development of meaningful relationships. They also assist new staff members in getting to know residents quickly and can instigate conversations, providing natural opportunities for engagement. Additionally, memory boxes enhance person-centred care and create a sense of familiarity and comfort for residents, particularly those living with memory loss or dementia.

Communal areas throughout the home were clean, well-maintained and comfortably furnished, with no unpleasant odours noted. Each unit has its own lounge, dining area and kitchenette, allowing staff to prepare drinks and light meals. Lounges were themed to create a homely environment, with seating, tables and entertainment such as televisions or music.

Additional quiet seating areas were available for residents and visitors, providing spaces for relaxation, reflection, or private conversations. These areas allow residents to choose personal time outside of their bedrooms, supporting their independence and offering options for quiet, comfortable spaces to unwind, read, or socialise at their own pace.

Dining areas were well-presented, with appropriately laid tables. Breakfast service was observed, with residents supported according to their individual needs. Staff demonstrated awareness of dignity and choice, including the use of appropriate drinking aids.

In the dementia unit, relatives are welcome to join mealtimes where this benefits the resident, offering extra social, practical and emotional support. In other units, mealtimes are kept protected to prioritise resident-to-resident interaction, fostering relationships and maintaining a focused, resident centred dining environment.

Meals are freshly prepared on-site in the main kitchen, located on the top floor of the building, and distributed to each unit using heated trolleys. Residents are offered a varied and impressive selection of cooked meals, with lighter alternatives available throughout the day. Breakfast options include both cooked and continental styles, followed by hot meals for lunch and dinner. Additional snacks, such as fruit, sausage rolls, and tea cakes, are also provided.

The kitchen team comprises of a Kitchen Manager, Deputy Manager, and two Catering Assistants, all of whom demonstrated awareness of residents' dietary requirements. The Home Manager highlighted the importance placed on meeting individual needs, including sourcing halal meat from a specialist butcher for a specific resident when required. The home ensures that all religious, cultural, and personal dietary choices are fully respected. All feedback received from residents and relatives regarding food quality was positive.

HWCB representatives did not observe the lunchtime service; however, observations during breakfast indicated that residents receive appropriate support. Care was tailored to individual needs, with some residents wearing dining aprons to maintain dignity, and drinking vessels selected to suit each resident, including coffee mugs, beakers, or cups with straws.

The laundry room was clean, following a systematic approach. It was noted that residents' clothes were labelled and stored appropriately either on hangers, or in drawers, to ensure items were kept safe and well-managed during laundering.

Additional facilities include a cinema room, hair salon, café and an on-site shop selling everyday items. A weekly activity planner is displayed across the home, with activities such as wellness sessions, quizzes, games and exercise. Activities take place across different areas of the home and are clearly communicated.

The garden area was well-maintained and accessible, with seating, shaded areas and a greenhouse. The home received recognition in the 'Dunstable in Bloom 2025' competition.

The home is located close to the town centre, with access to local amenities and transport links. Taxis are currently used for external appointments and activities, with ongoing fundraising for a dedicated minibus. Until recently, one resident retained use of his car and the ability to go out independently.

A general observation of the premises was conducted, including communal areas, corridors, the kitchen, laundry facilities, and a sample bedroom. The environment was assessed in relation to cleanliness, safety, maintenance, accessibility, and overall suitability for residents' needs. All areas reviewed were found to be well-maintained and of a high standard, contributing to a safe, comfortable, and supportive living environment for residents.



## Results of Visit

### Environment, Facilities, and Overall Living Experience



Dukeminster Court Care Home is a large building situated in a residential area on Dukeminster Road, close to Dunstable town centre.

The home has two car parks: a smaller disabled parking area with approximately eight spaces, and a main car park with capacity for around 30 vehicles for staff and visitors, located a short walk from the entrance. Upon arrival, the main car park and disabled spaces were almost full to capacity by 9.30am.

Signage for the home and parking areas is clear, and the surrounding grounds are well-maintained, with paving and shrubbery leading to the main entrance.

The entrance is welcoming and well-presented, with seating and decorative features, complemented by hotel-style music playing softly in the background. Access is controlled via a buzzer system, leading into a spacious reception area. The reception desk is positioned to the left, with the Home Manager's office behind it and an additional administration office to the right.

The reception area was observed to be clean, organised and staffed by a warm and friendly receptionist. Visitors sign in electronically using an iPad at the entrance. Healthwatch Central Bedfordshire 'Enter and View' information, including a poster and feedback box, was clearly displayed, alongside seasonal decorations promoting an Easter raffle.



On arrival, HWCB Representatives were welcomed by the home Manager and Regional Support Manager, and after completing the sign in process, were provided with the cinema room as a base to introduce Healthwatch, and to organise the visit schedule with the home Manager, ensuring minimal disruption to residents and staff.

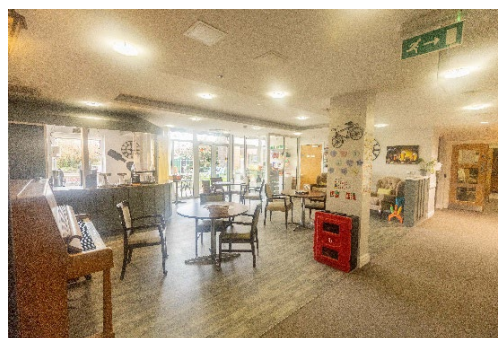
A guided tour of the home was conducted, during which representatives viewed key areas including all units, communal lounges and dining areas, the kitchen, communal bathrooms, corridors, the cinema room, and a selection of residents' bedrooms. Occupied rooms were observed respectfully from doorways, alongside access to an unoccupied room.



At the time of the visit, the home was supporting 72 residents, with capacity for 75.

The communal lounges, dining areas, and surrounding corridors were freshly decorated, clean, tidy, comfortable, and homely. The cleanliness

of the home was recognised by all HWCB Representatives throughout their visit. However, it was noted that some corridor handrails could benefit with a refresh, to align with the quality of décor throughout the rest of the home. Overall, the environment was observed to be clean, accessible, well-maintained, and supportive of residents' comfort, safety and wellbeing.



The 'Best Friends Café' provided an inviting focal point on entry, situated just ahead of reception, offering tea, coffee and cakes. Additional options such as berry lemonade and lemon and lime water were displayed on specials boards. The café was clean and comfortably furnished with tables, chairs, armchairs and a piano;

however, it was noted that the piano did not have a stool for use.

Each unit within the home had a distinct theme, two featuring sports photographs and one reflecting a music theme. This approach contributed to giving each unit its own unique identity.



Ample staffing levels were observed across each unit, with staff members engaging with residents in lounge areas, as well as providing support at dining tables and within kitchenettes. Staff interactions appeared attentive and responsive to residents' needs.

All meals are prepared on-site, with the main kitchen providing breakfast, lunch, and dinner, including desserts. A cooked breakfast is routinely available, alongside a choice of main meals at lunch and dinner, supporting residents' nutritional needs and preferences.

In addition, care staff are able to prepare lighter options, such as cereal, toast, or soup, within unit kitchenettes, which residents can request at any time. Some residents also reported that, where appropriate, they are supported to independently prepare drinks and light snacks, promoting autonomy and choice.

Feedback regarding whether relatives can join residents at mealtimes was mixed, with arrangements appearing to vary between units. However, staff advised that families are generally encouraged to dine with residents in the 'Best Friends Café', which provides a more flexible and sociable environment for shared meals.

Overall, resident feedback on the quality and variety of food was positive. Residents reported a good range of options, with snacks including fruit, crisps, biscuits, teacakes and savoury items. One resident described the food as **'plentiful,'** with **'plenty of alternatives offered.'**

Residents were observed in dining areas shortly after the breakfast service had concluded. While the cooked breakfast offering was no longer available at that time, residents continued to have access to lighter options, such as toast and cereal, which were prepared in the unit kitchenettes with support from care staff.

One resident commented to a HWCB Representative that they had **'just had a couple of slices of toast with marmalade, and it was lovely,'** reflecting a positive experience.

Food was not sampled by HWCB Representatives during the visit; therefore, no assessment of taste or quality could be made.

Staff were observed to be attentive and readily available to support residents' needs. Dining tables were well-presented, contributing to a restaurant-style environment, and residents' dignity was maintained throughout.

During the visit, HWCB Representatives conducted interviews with a range of staff, including the Manager, Regional Support Manager, Unit Team Leaders, Activities Coordinator, Administrator and care staff. These discussions provided insight into daily operations, staff roles and the overall workplace culture.

All staff members demonstrated a strong commitment to their roles and genuine care and respect for the home and its residents. They had a good relationship with the home Manager and commented on her 'open door' policy. The Manager noted that staff members **'pop in regularly'** to see her in the office.

Several staff members had worked at the home for a number of years, demonstrating continuity and experience, and it was evident that residents and their individual needs are placed at the centre of care

Staff emphasised pride in their duties, a sense of teamwork, and a shared focus on maintaining a supportive and welcoming environment for its residents and their family members. One Carer commented that one of her favourite things about the job was **'making the residents laugh,'** whilst another said they **'loved it,'** when asked how they felt about working at the home.



The home offers a comprehensive weekly activities programme, delivered both within individual units and across the wider home. External visitors and volunteers also contribute, including church services, school visits and pet therapy sessions. Families are informed of activities and encouraged to attend where appropriate.

Communal areas throughout the home were observed to be spacious and accessible, supporting residents with mobility needs, including wheelchair users.

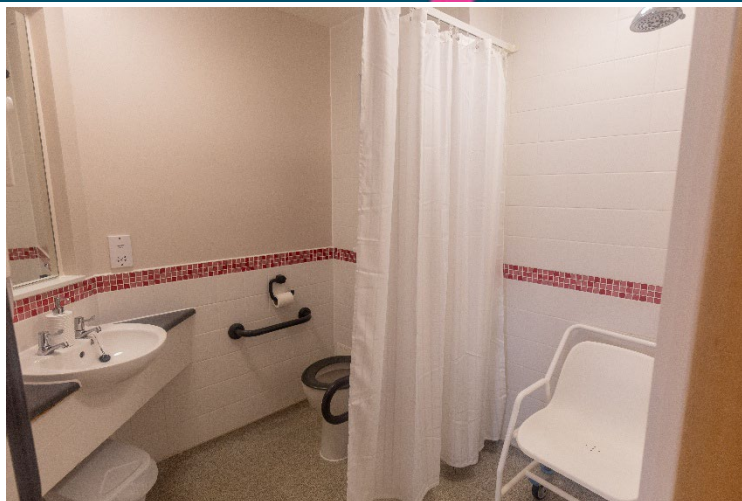
Residents' bedroom doors are designed to resemble domestic front doors, reinforcing a sense of familiarity, privacy and personal space. Each door also displays the resident's name and photograph, alongside a personalised

memory box containing meaningful items, supporting both identity and engagement.

A selection of residents' bedrooms were observed and found to be consistently spacious, well-decorated and personalised. Residents are encouraged to bring items from home, and many rooms benefit from large windows providing ample natural light.

Each room had an en-suite, with a shower and toilet, however one resident commented that their ensuite **'could be bigger, for the wheelchair.'**

Residents with reduced mobility, who spend more time in their rooms, each have access to an Alexa device and shows for entertainment. Staff conduct half-hourly checks, and the Activities Coordinator provides additional one-to-one support.



Residents reported that their privacy was respected by staff, with consistent feedback indicating that carers **'always' knocked before entering rooms'**. However, one resident shared that they **'sometimes have to wait during the night for assistance to use the toilet,'** suggesting that there may be occasional delays in response times during overnight periods.

Overall, feedback in relation to the care received was positive. Residents reported that their privacy and individual preferences were respected in the delivery of personal care. While most feedback indicated that residents were able to access bathing facilities in line with their preferences, for example, one resident stated, **'I have a bath or shower as often as I require'**— one resident expressed a preference for baths over showers, commenting, **'I would love to have a bath. I'm often offered a shower, but never a bath.'** This suggests some variation in individual experiences."

The home-provided furniture was of good quality and looked very well looked after. Staff demonstrated a strong commitment to enhancing the quality of life for residents within the home.

Feedback from residents and relatives was largely positive regarding the home environment and quality of care. One resident described the home as **'spotless,'** while another commented that **'we are very fortunate with all the staff and life here.'** A relative shared that **'my wife felt at home right away. This is a first-class home and the management is superb,'** and another noted that **'Dukeminster is a lovely, friendly place. The staff are great and I feel that Mum is well cared for and safe.'**

However, one relative raised a concern regarding staffing levels, indicating that, while overall feedback was favourable, there are areas where further reassurance may be beneficial.

Bedding is changed as required, with a routine schedule of bi-weekly, and bedrooms and communal areas are cleaned daily. HWCB Representatives observed consistently high standards of cleanliness throughout the home.

Resident bedrooms feature hard, hygienic surfaces to meet infection control standards, and no offensive odours were noted anywhere in the home.

Residents and families are encouraged to personalise rooms with familiar belongings. Alongside memory boxes outside each door, this supports residents' comfort, identity and sense of belonging. Memory boxes also act as helpful prompts for new staff to engage with residents and build relationships. Residents reported satisfaction with both the décor of their rooms and the communal areas.

## **Promotion of Privacy, Dignity and Respect**

### **Interaction between Residents and Staff**

HWCB Representatives observed that residents appeared well-groomed and appropriately dressed, reflecting a good standard of personal care and attentive, respectful support from staff.

Staff were easily identifiable through the use of name badges and colour-coded uniforms, which indicated their roles and responsibilities. Some residents reported that they knew staff members by name, while others relied on name badges to identify them. Most residents were also familiar with the Home Manager and addressed her by name. The Manager was observed engaging positively with residents, demonstrating a good rapport and clear familiarity with individuals. Residents further commented that staff addressed them by their names, or preferred names, supporting a personalised and respectful approach to care.



Throughout the home, staff interactions were observed to be warm, attentive, and engaging. Residents were regularly greeted and spoken with as staff moved around the building, providing both practical support and social interaction.

For residents who are unable to leave their rooms, it was reported that staff make regular visits to check in and offer companionship, helping to reduce social isolation and ensure needs are met while promoting a sense of inclusion. The Activities Coordinator also provides one-to-one engagement for those who are unable to participate in group activities.

Feedback from residents and relatives regarding staff responsiveness was largely very positive. Most residents indicated that support was provided promptly and described staff as **'always friendly and attentive'**. Residents also shared that they are typically **'addressed by their first names, or a name they prefer to be addressed by'**. Almost all residents reported that **'the staff speak loudly enough'**, and where this was not the case, they felt comfortable asking staff to repeat themselves.

Relatives also expressed positive views about the care provided. One relative stated they were **'happy with my residents care and daily routine,'** while another commented, **'The Manager is very approachable and has an open-door policy.'**

Additional positive feedback from relatives included:

***'First class care and home.'***

***'Lovely, friendly, caring place.'***

***'The staff are patient and caring and seem to know mum and her needs.'***

However, some relatives shared areas of concern:

***'Staffing levels are a concern.'***

***'Sometimes seems quiet [with staff] on a weekend.'***

***'Have been some concerns over personal care, but of late things have been better.'***

Residents reported positive experiences in relation to privacy, with most stating that staff knock before entering their rooms, which they valued.

The home supports residents to attend medical, dental, and hospital appointments, arranging transport where family members are unable to accompany them, thereby maintaining access to essential healthcare services. One resident told us, ***'The Practice Nurse comes weekly – I can see her,'*** while others commented, ***'I tell the senior staff – and I am taken by care staff'; 'My daughter usually takes me,'*** and ***'Liaise with the receptionist who gets me a taxi.'***

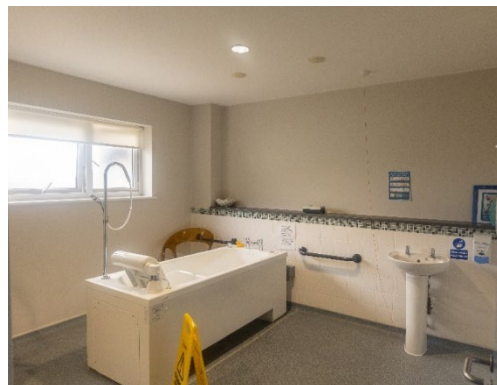
It was also noted that an optician was present on-site during the visit, who advised that ***'she visits regularly, or as and when needed, and healthcare professionals do come into the home to visit residents if needed'***.

Most residents reported that they are ***'actively involved in developing or reviewing their personal care plans'***, should they wish. Relatives similarly indicated that they are able to access care plans on request and remain involved where appropriate, with two relatives stating they participate in reviewing care plans on a 6–12 month basis.

The Home Manager further advised that individual care plans are reviewed monthly by unit managers, in collaboration with residents and their families. Care plans comprehensively record residents' needs, including health appointments and decisions such as Do Not Resuscitate (DNR) orders.

### **Personal care**

Observations during the visit indicated that residents' support needs varied considerably, reflecting a wide range of independence levels. Some residents were able to manage aspects of their personal care independently, such as brushing their teeth, while others required support with tasks including personal hygiene, dressing, and undressing. Staff appeared knowledgeable and responsive in recognising and adapting to each resident's individual and, where relevant, changing needs.



Residents were asked about their access to bathing facilities and whether they were offered choice. Responses suggested a mixed experience. Many residents reported routine arrangements, with some stating they are **'showered once a week'**. One resident shared, **'I bath once a week. I don't like showers,'** while another commented, **'I have a shower whenever.'** However, one resident expressed some dissatisfaction, stating, **'Not often enough. I would love a bath. I'm offered a shower, but never a bath.'** This indicates that, while choice is generally available, individual preferences may not always be fully met in practice.

Feedback from relatives regarding personal care was largely positive. One relative described the care provided as **'Superb,'** while another stated they **'didn't know'** enough to comment. A further relative indicated that daily personal care **'could be improved,'** suggesting some variability in perception and experience.

Most residents were aware that they could choose between a bath or a shower and reported that personal care was usually delivered by a staff member of the same gender. While many residents valued this option, a small number indicated that this was not a significant preference for them.

All residents and staff spoken to reported that bed linen is changed regularly, typically at least once per week, supporting hygiene and comfort.

Relatives were also asked about their views on the laundering and labelling of clothing. Most expressed satisfaction with this aspect of care; however, some concerns were raised:

***'It's getting better, there have been times my relative has not been wearing their own clothes.'***

***'Mum's clothes have gone missing before.'***

***'I'm largely happy but there have been times where some things have gone missing.'***

Overall, this feedback suggests that while the laundry system is effective for the majority, inconsistencies remain for some residents, which may affect confidence in how personal belongings are managed."

## **Food**

All meals at Dukeminster Court are prepared freshly on-site. The Home Manager confirmed that residents' individual dietary needs, allergies, and religious or cultural requirements are carefully accommodated.

The main kitchen provides three cooked meals daily, including desserts, alongside a wide variety of snacks:

- ❖ **Breakfast:** Breakfast always a hot cooked meal provided by the main kitchen, with lighter options, such as cereal and toast also provided within the kitchenette areas of the units.
- ❖ **Lunch:** Lunch consists of a choice between two hot meals and dessert.
- ❖ **Afternoon Snack:** Offering of fruit, biscuits, cakes or sausage rolls
- ❖ **Tea:** A choice of two hot meals and dessert, although lighter options are also available for residents choosing from the kitchenette areas of the unit.



Feedback from both residents and relatives regarding the quality and variety of food has been largely positive:

- ***'Good choices on the menu. If you don't like something, there are other options.'***
- ***'Food is tasty but sometimes not hot enough.'***
- ***'There are always lots of different snacks.'***
- ***'Plentiful with plenty of alternatives offered.'***
- ***'Enjoyable – although I have to ask for a cup of tea and a biscuit.'***
- ***'The meals are adequate – but my wife is restricted by what she can physically consume.'***
- ***'When visiting I am always offered a drink and at times sandwiches or soup.'***
- ***'We get weekly menus emailed to us. Mum's needs are well catered for, and she chooses her meal options.'***
- ***'We have access to kitchen areas on the unit and in the café area.'***
- ***'I use the foyer café. And it is free.'***
- ***'The meal plans always look good.'***
- ***'Good variety.'***

In summary, most residents and their relatives reported satisfaction with the meals at Dukeminster Court. Residents are offered choice and consulted about their preferences. The Home Manager noted that feedback regarding meals not being hot enough generally reflected individual expectations, as meals are served at a safe temperature.

Drinks were also well-received, with residents aware of available options. It was not clear whether alcohol is provided within the home.

Overall, residents and relatives expressed satisfaction with the variety, quality, and availability of meals and beverages.

### **Concerns / complaints procedure**

All staff interviewed demonstrated a clear understanding of the complaints procedure and were able to confidently explain the process. They showed strong awareness of the sensitivity involved when concerns are raised by colleagues, residents, or relatives, and described responding in an empathetic and supportive manner.

The Home Manager advised that outcomes of concerns are shared with relatives and, where appropriate, a plan is agreed to address the issue, which may include direct engagement with the resident.

Staff reported that contact details for external bodies, including the Care Quality Commission (CQC) and safeguarding teams, are readily accessible. They also stated that they feel able to raise concerns internally with the Home Manager, or escalate to the Regional Support Manager if required. For residents who may have communication difficulties, staff described using a range of approaches to support expression, including observing non-verbal cues such as body language, and the use of tools such as flash cards or communication boards.

Regular team meetings and shift handovers were reported to support effective information sharing, enabling staff to discuss observations and plan appropriate, individualised care. This reflects a consistent approach to person-centred care, with a clear focus on residents' wellbeing and overall quality of life.

Observations made during the visit, alongside feedback from staff and residents, indicated that care is attentive and tailored to individual needs, with residents placed at the centre of decision-making.

Most relatives reported that they were aware of the complaints procedure and felt that any concerns raised would be addressed in a timely manner. However, at the time of the visit, HWCB Representatives did not observe any clearly displayed information regarding the complaints procedure for residents, relatives, or staff, which may limit visibility and accessibility for some individuals.

### **Recreational activities / Social inclusion / Pastoral needs**

Dukeminster Court provides a varied and inclusive programme of activities designed to meet a wide range of interests and abilities. During the visit, residents were observed actively participating in a flower arranging session, demonstrating engagement in structured, meaningful activities.



Residents are encouraged to take part in communal activities and social interaction on a daily basis. For those who are unable or choose not to participate in group settings, Activities Coordinators and care staff provide regular one-to-one engagement. This approach supports social inclusion, helps to reduce isolation, and reflects a commitment to adapting provision to individual preferences and needs.

Spiritual and religious needs are also supported, with opportunities for residents to receive visits from clergy and attend services held within the home. These provisions help residents to maintain their sense of identity, personal beliefs, and continuity of routine.

Staff described prioritising regular, meaningful interaction with residents as part of daily care delivery. This ongoing engagement supports emotional wellbeing, enables staff to better understand residents' preferences and needs, and fosters positive, trusting relationships.

Relatives commented positively on the range of activities available and valued the opportunity to participate alongside their family members when visiting, further enhancing social connection and involvement.

## **Staff**

During the visit, HWCB Representatives spoke with a range of staff, including the home Manager, Regional Support Manager, Head of Housekeeping, Chef, Activities Coordinator, and care staff. These discussions provided insight into daily routines, individual roles, and the overall culture of the home.

Staff demonstrated dedication to their roles and genuine care for residents, consistently prioritising residents' needs and wellbeing. The Home Manager was observed engaging warmly with residents, fostering a positive and caring rapport. Staff described the environment as welcoming, safe, and supportive, with strong working relationships and an "open door" policy allowing them to raise concerns comfortably.

The workforce benefits from experienced, long-serving staff, contributing to continuity of care, stability, and institutional knowledge. Staff reported satisfaction with their roles, a strong commitment to residents, and a positive relationship with management. Clear communication and thorough handovers at the start and end of shifts ensure residents' needs are consistently met.

Overall, there was a clear shared ethos across all levels of staff: residents' interests are central to care delivery, and relationships with residents, families, and colleagues are prioritised. Staff highlighted that they enjoy working at Dukeminster Court and value their contribution to the home.

One staff member said, ***'I have worked here for 11 years and I love it'***. Another told us, ***'I have worked for Quantum Care for 20 years and Dukeminster Court for 11 years. Every day is different. We have a great team.'***

Further comments received:

***'I like making the residents laugh, we have fun all day.'***

***'I have worked here for 12 years; the staff are friendly to work with.'***

***'I really enjoy my job here.'***

***'I've been here 8 months and love it.'***

Staff training is delivered through a combination of mandatory e-learning, in-person sessions, and regular supervision. Staff confirmed they receive all essential training to perform their roles competently and feel comfortable requesting additional training to enhance skills or better support residents.

When discussing potential improvements, the home Manager highlighted a goal to fundraise for a minibus, which would enable easier transport for residents for day trips and appointments. Currently, residents participate in local activities, and taxis are provided for healthcare visits.

## Recommendations

Based on observations made during the Enter and View visit, feedback from residents, relatives and staff, and information provided by the management team, Healthwatch Central Bedfordshire makes the following recommendations for consideration by Dukeminster Court:

### Management and Leadership – Priority: High

➤ **Maintain high standards across the home**

The Home Manager should continue to uphold the current high standards of cleanliness, maintenance, and overall environment, ensuring residents consistently benefit from a safe, comfortable, and well-presented setting.

➤ **Sustain a positive and visible leadership approach**

Build on the Manager's approachable and visible leadership style, which was widely praised by residents, relatives, and staff. Continuing to foster open communication and strong relationships will help maintain a positive culture throughout the home.

## **Staffing and Workforce – Priority: High**

### ➤ **Review Staffing Levels and Coverage**

Undertake a review of staffing levels, particularly during weekends and night shifts, to ensure residents' needs are consistently met and response times (e.g. call bells) are timely.

### ➤ **Monitor Staff Deployment Across Units**

Ensure equitable distribution of staff across all units to avoid perceptions of understaffing and to maintain consistent care quality throughout the home.

## **Environment, Maintenance and Facilities – Priority: Medium**

### ➤ **Refresh Fixtures and Fittings**

Review and refresh corridor handrails to align with the otherwise high standard of décor across the home.

### ➤ **Enhance Café Facilities**

Provide appropriate seating (e.g. a piano stool) in the 'Best Friends café' to maximise use of facilities and encourage resident engagement.

### ➤ **Parking Capacity Review**

Consider options to address limited parking availability for visitors and staff, particularly during peak times

## **Food and Nutrition – Priority: Medium**

### ➤ **Monitor Food Temperature Preferences**

Continue to monitor and respond to feedback regarding food temperature, ensuring a balance between safety requirements and resident preferences.

### ➤ **Clarify Mealtime Arrangements for Visitors**

Standardise and clearly communicate the approach to family involvement in mealtimes across all units, to ensure consistency and manage expectations.

## **Personal Care and Daily Living – Priority: High**

- **Ensure Choice in Bathing Options**  
Strengthen consistency in offering residents' genuine choice between baths and showers, ensuring preferences are respected and clearly recorded in care plans.
- **Review Night-Time Support Responsiveness**  
Assess response times for residents requiring assistance during the night, particularly for toileting needs, to ensure dignity and comfort are maintained.

## **Laundry and Personal Belongings – Priority: Medium**

- **Improve Laundry Tracking Systems**  
Review and strengthen laundry processes to reduce instances of lost or misplaced clothing, including enhanced labelling and tracking systems.
- **Communication with Families on Laundry Issues**  
Ensure any issues with missing items are communicated promptly and transparently with relatives to maintain trust.

## **Person-Centred Care and Care Planning – Priority: Medium**

- **Maintain Individualised Care Approaches**  
Continue to build on strong person-centred practices, ensuring individual preferences (e.g. routines, personal care, social engagement) are consistently applied.

## **Communication and Complaints – Priority: High**

- **Maintain Activity Accessibility**  
Continue to ensure activities are inclusive for all residents, including those who remain in their rooms, through ongoing 1:1 engagement.

➤ **Develop External Engagement Opportunities**

Explore opportunities to strengthen fundraising efforts for a minibus, including working with local community groups, businesses, and external partners. This could help enhance residents' access to community activities, appointments, and outings, while also increasing the home's visibility and connection within the wider community.

**Overall Service Development – Priority: Low**

➤ **Build on Existing Strengths**

Maintain the high standards of cleanliness, décor, and homely environment, which were consistently praised by residents and relatives.

➤ **Promote Community Integration**

Continue to strengthen links with the local community, including schools, volunteers, and visiting services, to enrich residents' experiences.

Healthwatch Central Bedfordshire recognises the many strengths demonstrated at Dukeminster Court Care Home, including a caring staff team, strong leadership, and a welcoming environment. Addressing the areas identified above will further enhance the quality of care, resident experience, and confidence of relatives and stakeholders.

## **Providers Response**

Thank you for the visit on 10<sup>th</sup> March 2026 and for taking the time to provide constructive feedback.

We the team look forward to continuing to develop and strengthen the service that is delivered to our residents in line with the recommendations provided.

Kindest regards

Angela Lartey

**Home Manager**  
**Dukeminster Court**



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