

Brandon Lodge

Enter and View Report

Tuesday 17th February



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 residents who met members of the Enter and View team on that date.

Visit information



Service address:

Commercial Street,
Brandon,
Durham
DH7 8PH



Service provider

Lotus Care Brandon Lodge Limited



Service manager

Cheryl Rushforth



Date of visit

Tuesday 17th February 2026
9.00 am - 12.00 pm



CQC rating

Requires improvement. February 2025



Healthwatch County Durham Enter and View Officer

Claire Sisterson



Authorised representatives

Jean Ross
Anne Glynn

Introduction

Our role at Healthwatch County Durham is to gather people's views and experiences, especially those that are seldom heard, to give them the opportunity to express how they feel about a service. The aim of an Enter and View visit is to gather views and experiences of residents, relatives and staff of a service and observe the environment to assess the quality of the service.

This was an announced Enter and View visit undertaken by authorised representatives who have the authority to enter health and social care premises, announced or unannounced. The team collate feedback gathered and observations made to compile a report. The report identifies aspects of good practice as well as possible areas for improvement. Healthwatch County Durham is an independent organisation, therefore 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 manager for their opportunity to respond before being published on the Healthwatch County Durham website at www.healthwatchcountydurham.co.uk.

Where appropriate, Healthwatch County Durham may arrange a revisit to check the progress of improvements. The report is available to the Care Quality Commission, Healthwatch England and any other relevant organisations.

Acknowledgements

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



General Information

Brandon Lodge Care Home is a residential care home for older adults with and without dementia. There are 38 bedrooms, at the time of the report 32 were occupied. Brandon Lodge is built over two floors, with lounge and dining areas across both floors. The kitchen and laundry are located on the ground floor. The care home employs 46 members of staff, including an activities coordinator, handyman and kitchen staff.

CQC inspected the property in February 2025 and it was rated as 'requires improvement'.

Methodology

The Enter and View representatives made an announced visit on Tuesday 17th February 2026. We received feedback from 19 residents, and 12 staff members from a variety of roles.

Two weeks prior to the Enter and View visit, we publicised our visit by leaving a display about Healthwatch County Durham and details of our visit. In order to capture as many residents and their families as possible, we left surveys and a 'post box' to be completed and left for our return. We didn't receive any responses in writing.

We spoke extensively with the manager to ensure we could best meet the needs of the residents and enable them to share their experiences. We asked residents about 4 areas of their care; communication, environment, social preferences and the staff and service. We created an easy read version of the survey and also used visual prompts and emoji faces to gain insight into specific areas of the service. The team also recorded their own observations on the environment and staff member interactions. Interviews were conducted one to one, and where necessary, staff assisted with communication. All responses were recorded anonymously.

To retain confidentiality and anonymity of respondents, any identifiable details have been removed from quotes.

Of the residents we spoke with, seven were female and twelve were male. Staff respondents included support workers/care staff, maintenance person, and admin staff.

Summary

Overall, feedback from residents and staff paints a largely positive picture of the home, with strong relationships, a homely environment, and a clear commitment to person-centred care. Residents generally feel comfortable speaking with staff, feel listened to, and appreciate the support they receive. Communication is open and regular, though there is room to improve updates for families to ensure greater transparency.

The environment is widely described as clean, calm, and “home from home,” with residents valuing both private and communal spaces. Personalisation is encouraged, although some residents would like more opportunities to display personal items or spend time in shared areas.

Social wellbeing is more mixed. While activities are available and optional, some residents experience isolation, limited outings, or reduced confidence in joining in due to health or support needs. There is a clear appetite for more trips outside the home, especially with better transport options. Mealtimes are generally enjoyed, though some residents would welcome more variety and a more relaxed pace.

Staff are consistently described as kind, approachable, and dedicated, contributing to a warm, family-like atmosphere. However, workload pressures can impact the time available for meaningful interactions and occasionally affect staff morale.

Encouragingly, new initiatives – particularly around activities and personalisation – are helping to make the home more responsive to residents’ preferences. Going forward, key areas for improvement include increasing opportunities for outings, reducing social isolation, ensuring all residents can safely access support (e.g. call bells), and supporting staff capacity to maintain high-quality, person-centred interactions.

Findings

Service Users

Communication

Communication between residents and staff was largely viewed positively, with many residents feeling able to speak openly with staff and raise concerns if needed. Residents suggested that they generally feel listened to and supported. Some residents also highlighted that they are informed about aspects of the home through communication boards and meetings.

Family contact was another important part of communication and wellbeing, with residents noting visits from relatives and the reassurance these provide, with one specifically mentioning how calm he is when his wife visits. While communication was mostly positive, a representative suggested that clearer updates for families could improve transparency.

"I'm happy to complain but there are no issues to complain about"

"I can talk to the staff"

"Communication is not too bad, I do take part in meetings when I feel like it"

Environment

Residents generally described the environment as comfortable, clean and homely, with many expressing satisfaction with both their private rooms and shared spaces. Several comments highlighted the calm atmosphere of the home. Residents appreciated having their personal space and belongings around them, others valued the communal areas for socialising. Access to facilities such as televisions, toilets in rooms, and the garden also contributed to comfort and independence.

However, some residents expressed wishes for small improvements or more personalisation, such as displaying family photographs or spending more time in communal areas. One resident said she missed company and there was no one available to take her out.



One resident informed us they have a call bell in their room, but don't know how to use it, which could be a concern for their safety if there was a need to call for a member of staff.

"I have a nice room but I would like to go down to the lounge more and I would like pictures of my family, any pictures would be nice."

"I find it home from home but I can't go out as there is no one to take me"

"I have a call bell but I don't know how to use it"

Social Preferences...

A key theme within residents' social preferences is the presence of several veterans, for whom military service remains an important part of their identity. Residents often referenced their past roles and experiences of being in the armed forces. These comments show that residents value opportunities to share their history, suggesting that further recognition or veteran-focused activities could help strengthen connection and shared identity among residents.

"I was in the National Air Force in the Lancaster bombers."

"I like the food, my favourite is fish and chips"

Food and mealtimes were frequently discussed as part of daily life and social routine, with many positive remarks, though some residents felt that more variety or a slower pace during meals could improve the experience.



Social isolation was also evident in some responses, particularly where residents have limited family contact or opportunities to leave the home. Some residents also felt restricted by limited opportunities to go out, noting there wasn't enough or the right staff to take them out. However, the home provides communal spaces and optional activities that encourage social interaction, and residents noted that they did not feel pressured to take part, suggesting that their choice and independence are respected. Overall, residents enjoyed the activities available, though they felt an activities board outlining what was on offer would be helpful. They also expressed a desire for additional activities to be scheduled in the evenings.

"I don't have any family so don't really get visitors."

"You don't feel like you have to join in, it's all voluntary,"

Residents also noted that their health, safety, and level of independence influenced how much they took part in activities. Some were worried about needing staff support, which affected their confidence in joining in socially. One resident explained that they were afraid to drink too much because it would mean needing the toilet more often and they did not want to feel like a burden. Another described feeling limited in their personal care routines, saying that at home they would bathe regularly, but in the care setting they were only supported to have a bath once every ten days. These reflections emphasise the need to uphold dignity and provide reliable support so residents can participate fully.

"I'm scared to drink too much as I would need the toilet more and I don't want to be a burden."

Finally, there was a clear desire for outings and external activities, which residents felt would provide enjoyment and something to look forward to. Residents expressed interest in trips outside the home, such as the beach or a farm, but also just a cafe. These comments indicate that increasing opportunities for outings could help reduce isolation and provide residents with positive experiences and anticipation.

"It would be lovely to have trips out"

"I'd love to go out on trips especially because my wife is here I'd love to go with her."



Staff/Service

Feedback about staff and the service provided was largely positive, with many residents describing staff as kind, supportive and responsive to their needs. Residents frequently commented that staff were approachable and attentive.

“The staff are good and I feel well treated,”

“They are friendly right from the cleaners to the carers.”

Residents reported that staff generally respond quickly when assistance is needed, and many valued that their independence and personal routines are respected, including having choice over daily activities such as when to go to bed or eat. However, some feedback indicated that staff workload pressures can occasionally impact interactions, with suggestions that staff can appear less cheerful at times despite remaining helpful. A small number of residents also highlighted challenges within the home environment, such as noise or disruptive behaviour from others, which can affect their wellbeing and may require additional support or management. Overall, residents felt supported and well cared for by the staff team.

“The staff come when they are called and if not I use a bell and they attend quickly.”

“Some of the staff could be more cheerful but the staff are helpful and they are under pressure.”



Staff feedback

Communication

A recently appointed Activities Coordinator has begun introducing new ideas to help make the home feel more personalised and responsive to residents' individual preferences. They are actively engaging with residents to understand what matters to them, including organising trips to the coast, planning gardening outings, placing residents' names on their doors, and gathering photos of residents' pets to display. This approach reflects a growing emphasis on creating a more homely and meaningful environment shaped by residents' voices.

Communication within the home is frequent, flows in all directions, and is part of everyday practice. Staff describe a mix of formal and informal ways of keeping in touch, such as daily "flash meetings," regular walkarounds, and continuous conversations between staff, residents, and managers. There is a strong focus on listening to residents, responding quickly to any concerns, and welcoming and engaging with new residents soon after they arrive.

Staff are also aware of the need to adapt the way they communicate, especially when supporting people living with dementia. They acknowledge that this can be more difficult during busy times. Communication between different teams, such as care, maintenance, domestic staff, and management is well established, helping ensure care is well coordinated.

However, time pressures, particularly during mornings and mealtimes, can make it harder to have deeper, more meaningful conversations. This highlights an ongoing tension between completing essential tasks and having quality interactions with residents.

"We are good with vulnerable patients. We have a lady who was very confused through her Alzheimer's"

"If [I'm] entering the residents room to carry out maintenance I always say "good morning" especially when I'm passing the rooms I listen to their thoughts and advise the senior managers if need be"



Environment

The home is consistently described as warm, welcoming, and truly homely. It feels like a lived-in space rather than a care home. Residents are encouraged to make their rooms their own by adding personal belongings, photographs, and familiar furniture, which helps create comfort and a sense of identity.

Shared areas, including a dining room that looks out over the garden, add to the pleasant atmosphere. Having easy access to outdoor space is also a real benefit. The home is equipped with suitable resources and the facilities are generally well maintained. One member of staff felt additional equipment would be beneficial such as a 'mo-lift' to aid moving of residents safely and efficiently.

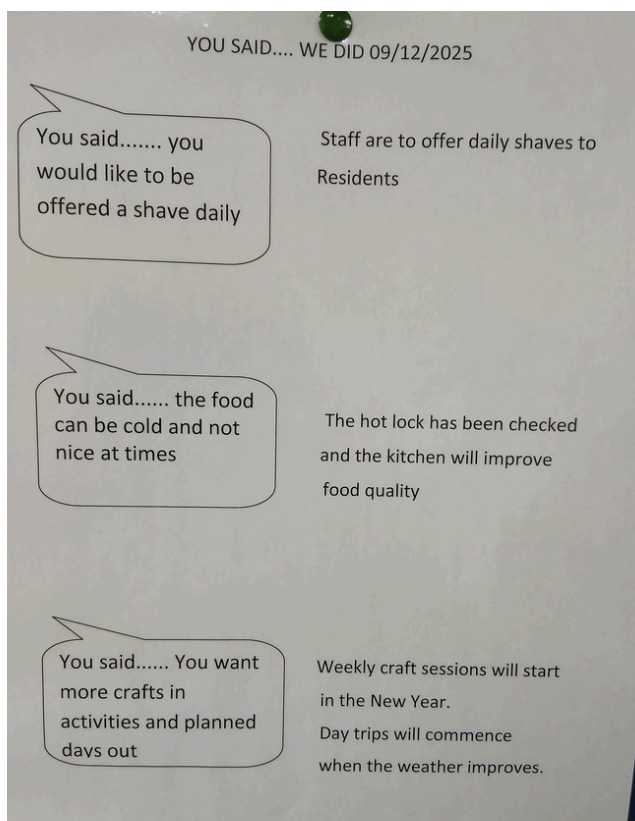
However, there are some limitations when it comes to activities outside the home. Without transport, such as a minibus, it is difficult to organise regular outings, which reduces opportunities for residents to explore or stay connected with the wider community. While the indoor environment is highly valued, the lack of reliable transport means residents cannot always enjoy experiences beyond the home.

"We have a homely and warm atmosphere here, all staff are like family"

"We work in their home, that is our ethos"

"We don't get to take people out as we don't have a minibus"

Social Preferences



There is strong evidence that the home takes time to understand each resident's social preferences and include them in their care plans. Tools like the "All About Me" profiles and regular reviews help staff learn about residents' life histories, interests, and daily routines. Activities are flexible and tailored to individual needs, with options for both group sessions and one-to-one support.

Staff show good awareness of what residents enjoy, such as favourite music, and they support a range of social and cultural opportunities, including religious services and seasonal celebrations. Mealtimes are also handled in a person-centred way, with staff adapting to individual routines and preferences.

There are some challenges, particularly when supporting residents with complex behaviours that can affect the wider social atmosphere. In addition, staff and residents would benefit from more varied outings and chances to connect with the community, which would help further improve quality of life.

“We have an ‘All About Me’ on file which is information about families, people’s jobs, their schooling, things like that”

“By getting to know a resident I sit and have a long talk and they love to tell their stories of their younger days”

Staff/Service

Staff are consistently described as caring, dedicated, and supportive, contributing to a strong team spirit that creates a warm, “family-like” atmosphere in the home. Relationships between residents and staff are positive, with trust and familiarity clearly evident. Management is seen as approachable and encouraging, and initiatives such as “Employee of the Month” help boost staff morale.

Despite the physically and emotionally demanding nature of their work, staff remain committed. There is good teamwork across the home, and staffing processes – including bringing in agency staff when required – help maintain continuity of care. However, ongoing pressures such as heavy workloads, busy periods with limited staff, and concerns about pay highlight areas where staff wellbeing and retention could be further improved.

A strong theme running throughout the home is its commitment to person-centred care. This is reflected in the way staff talk about the home as a family environment, their knowledge of residents’ backgrounds, and their efforts to tailor care and routines to individual needs. Staff show empathy and flexibility, especially when supporting people living with dementia or those with complex needs. Although this ethos is clearly embedded, practical pressures can sometimes make it harder to consistently deliver care in the way staff aspire to.

“It is hard work and its long hours and demanding but very rewarding”

“I was actually awarded Employee of the Month which was lovely”

Recommendations

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

1. Veteran-focused support and inclusion

There is a clear presence of residents with a military background who value this aspect of their identity.

- Introduce veteran awareness training for staff to better understand the needs, experiences, and potential trauma associated with military service.
- Develop veteran-specific social activities, such as reminiscence groups, themed events, or partnerships with local veteran organisations.
- Encourage opportunities for residents to share their stories, strengthening identity and peer connection.

2. Call bell accessibility and alternatives

Concerns were raised about some residents not knowing how to use their call bell.

- Ensure all residents are regularly shown how to use the call system, with checks to confirm understanding.
- Assess whether call bells are physically and cognitively accessible for all residents.
- Provide alternative methods of calling for help (e.g. wearable devices, motion sensors, or increased staff checks) for those unable to use standard systems.

3. Promoting dignity and reducing feelings of burden

Some residents are restricting fluid intake due to concerns about “bothering” staff.

- Reinforce a culture where residents feel safe and encouraged to ask for help.
- Educate staff to proactively reassure residents that their needs are a priority.
- Monitor hydration levels and introduce regular prompting and support with toileting to reduce anxiety.
- Embed dignity-focused practices within staff training and supervision.

4. Personal care and bathing routines

Feedback indicates dissatisfaction with bathing frequency.

- Review and ensure personal care plans reflect individual preferences, including bathing frequency.
- Monitor delivery to ensure residents are bathed regularly and in line with their wishes.
- Engage residents in discussions about their preferences to promote comfort, dignity, and autonomy.

5. Enhancing communication with relatives

While internal communication is strong, relatives would benefit from more structured updates.

- Introduce a monthly newsletter to share updates, activities, and key information.
- Consider digital communication options or regular family updates to improve transparency and reassurance.

6. Increasing social engagement and reducing isolation

Although activities are available, some residents experience loneliness or limited engagement.

- Provide a clear and accessible activities schedule/board, including evening options.
- Increase one-to-one engagement for residents at risk of isolation.
- Support residents to personalise their rooms (e.g. displaying family photos).
- Continue developing meaningful, person-centred activities.

7. Improving access to outings and community engagement

Residents expressed a strong desire for trips outside the home.

- Explore options to secure transport (e.g. minibus, partnerships, community volunteers).
- Develop a regular outings programme (e.g. cafés, seaside, local attractions).
- Enable more residents to maintain connections with the wider community.

8. Supporting staff capacity and wellbeing

Staff are caring and committed, but workload pressures impact delivery at times.

- Review staffing levels during peak periods (mornings and mealtimes).
- Promote staff wellbeing initiatives and ensure adequate support.
- Continue recognising staff contributions to maintain morale and retention.

9. Mealtime experience improvements

Food quality is well regarded, but experience can be enhanced.

- Review meal pacing to ensure residents do not feel rushed.
- Introduce greater variety and choice where possible.
- Promote mealtimes as a social and enjoyable experience.

Provider response

Following recommendations, we have implemented veteran-focused activities on a one-to-one basis and a group basis to provide support and inclusion for everyone.

We have spoken to every resident individually, to ensure correct use of the call bell system and other sensor equipment that may be appropriate to meet their individual needs. All staff members are to answer call bells in a timely manner and reassure the resident that their needs are a priority.

All care plans have been reviewed to reflect residents' individual preferences regarding bathing and showering.

One to one engagement has been increased daily to prevent isolation. The summer outing program is ongoing. Residents have asked to visit Palace Green in Durham which will be our first summer trip. Monthly newsletters are available throughout the home and displayed on our activity board.

Activity and kitchen staff have worked together to create taster days, to get a better understanding of the foods that the residents enjoy.

After careful review, we have concluded that our staffing levels meet our occupancy and dependency of all residents.

Cheryl Rushforth
Home Manager

healthwatch

County Durham

Healthwatch County Durham

Unit 3, Crook Business Centre

New Road

Crook

DL15 8QX

www.healthwatchcountydurham.co.uk


t: 0300 180 0025


e: info@healthwatchcountydurham.co.uk

www.healthwatchcountydurham.co.uk

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