

# **Sister Winifred Laver Centre Enter and View Follow-Up Report**

Examining Outcomes from the Recommendations  
of the Original Report (June 2025)

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# Overview

Healthwatch Gateshead produced a report in June 2025 following on from two announced Enter and View visits on the morning of Thursday 20th February 2025 and Friday 21<sup>st</sup> March 2025.

During the visits three Authorised Representatives collected feedback in total from 15 service users, two visitors, and 12 staff members. Survey questions were designed to be open and balanced also split into subcategories including, overall experience, change, communication, choice, and care. Healthwatch Gateshead collected written feedback and verbal feedback.

As a part of the visit Authorised Representatives made visual observations. These observations focussed on looking at the external environment, the internal environment, and staff interaction with service users. All feedback and observations were used to inform the nine recommendations put forward by the Authorised Representatives.

During the planning stages of the first Enter and View visit, the Care Quality Commission carried out an inspection which rated the service as inadequate.

Healthwatch Gateshead's Enter and View officer followed up with Sister Winifred Laver Centre management on 17<sup>th</sup> October 2025 to discuss the previous recommendations and to find out what changes had been made since the previous visit.

Sister Winifred Laver Centre management informed Healthwatch Gateshead that since the last CQC visit and the Enter and View visit, many changes have taken place. This report re-examines the recommendations and outcomes from the June 2025 Enter and View report.

## Recommendation:

**More support and reflective supervision for staff from the management team.**

## Outcome:

Management advised that this area had changed significantly since the Enter and View visit. Increased supervision for all staff has now been implemented, and routine knowledge checks are carried out to identify any gaps in learning. If any gaps are identified staff have specific development sessions on these topic areas, such as safeguarding.

Overall, more training has been implemented for all staff at Sister Winifred Laver Centre. Staff now receive extensive medication training, behaviour training, and care plan training.

## Recommendation:

**To have clear communication pathways which reflect policies and procedures for both service users and staff.**

## Outcome:

Each new service user is now allocated a key worker. The name of that key worker is displayed on a board in the bedroom and name given on arrival when the service user receives a welcome pack.

The key worker works with the service user on arrival and contributes to the care plan by gathering information such as the service users likes and dislikes. Management explained that this system is beneficial as it also means all staff understand which staff member to speak to regarding specific service users.

In addition, there is a focus on collecting more feedback from service users and families to continually improve the service. The exit survey service users receive has

been changed, and the survey that is now given to families has been extended and includes more focussed questions and a QR code for digital accessibility.

Alongside these changes a suggestion box has been placed in reception:



## Recommendation:

**The management team to develop an empowering culture that improves the working environment.**

## Outcome:

Changes to the staff team meetings have been implemented since the last visit. Workshops to improve the culture and working environment have been introduced with team meetings being held monthly. There are now also joint meetings between local authority staff and NHS staff. All staff now have daily huddles at 11.30 each day.

The purpose of the huddle is to improve daily communication and give staff the opportunity to discuss the service user's development and discharge plans.



## Recommendation:

**Improved security system during sign in at reception.**

## Outcome:

The position of the intercom buttons have been moved externally so they are more visible to reception. In addition, staff, visitors, and contractors have separate sign in sheets.

The sign in sheets are now confidential sheets so those who sign in are unable to see previous names of visitors who are signed in; the names are only visible to staff who are responsible for monitoring the book. In addition, the registered manager works from the office next to reception, so they are at hand and more visible to staff and visitors.

## Recommendation:

**Efficient buzzer system.**

## Outcome:

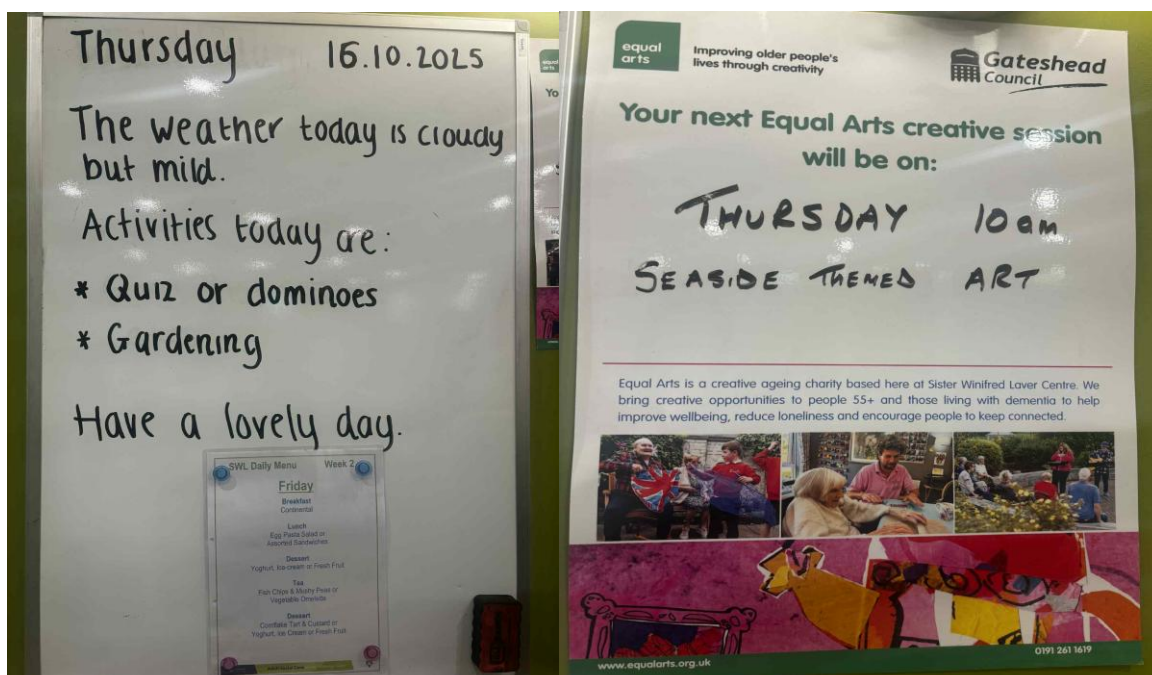
Since the Enter and View visit was carried out, the system has been updated to carry out random system checks to ensure the buzzers are continuing to work efficiently. The system is also able to detect how long the response time is for staff to attend to service users once they have pressed the buzzer. A Call Bell audit is carried out monthly, this includes live checks, where the manager activates a call bell and assesses the actions undertaken by care staff. The outcome of the audit and call bell analysis is discussed at monthly team meetings. Manager completes random spot checks of staff to ensure they carry call bell handsets.

## Recommendation:

**To provide a structured and advertised activities program.**

## Outcome:

Activities are planned with more structure now. Every day an activities board is displayed at reception which highlights the activity of the day.





## Recommendation:

**Improved internal décor.**

## Outcome:

The standard décor throughout the building remains the same as it was when the Enter and View visit was initially carried out. The management advise us that all the corridors are painted in a different block colour following research advice on orientation for people with cognitive impairments. Also, local artist pictures have been put up on walls showing the local area i.e. Tyne Bridge etc.

In the original report the management stated that the standard décor was because there is more of an emphasis on decorating the building during themed events such as Christmas and Halloween. During the follow up meeting in October 2025 the service users were in the process of creating Halloween decorations.



## **Recommendation:**

**To ensure service users are informed on policies and outdoor space available to them**

## **Outcome:**

Management have stated that on arrival service users are informed on what space is available to them and in the new welcome pack, that is given to each service user upon admission it states "There is a no smoking policy within Gateshead council which prohibits smoking on council property which also includes e-cigarettes and vapes, but we do have designated areas for service users who smoke". This is also mirrored in the residency agreement that service users and families/representatives sign. Upon admission service users are orientated to the building and shown the smoking area if needed. Since the visit there has been no mention of anything additional being put in place to reintegrate the policies regarding outdoor space.

## **Recommendation:**

**Efficient staff handover.**

## **Outcome:**

Another significant change since the Enter and View visit is that paper communication books have been introduced for each service user. This allows the day and night staff to go beyond verbal communication during handover.

The books are rolling documents with focus on providing more person-centred care. They contain any relevant information relating to medication, any incidents, how the person is feeling, what has been done, and any other needs or wants. The purpose is to improve staff handover and communication.

## **Conclusion**

Healthwatch Gateshead are pleased to confirm that Sister Winifred Laver Centre management team have acted upon the Enter and View report. As a result, most of the recommendations have been met within the 6-month timeframe, which is set to follow up with providers after undertaken an Enter and View visit.



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