

The Mill House

Enter and View Report

Contents

Background.....	2
Details of the visit to the Mill House	3
Summary.....	3
• Positive feedback.....	5
• Recommended areas for improvement.....	5
About this visit.....	6
Findings.....	7
• Environment.....	7
• Accommodation	9
• Cleanliness and hygiene	10
Quality of life.....	11
• General happiness	11
• Food and drink.....	12
• Activities.....	14
• Social contact.....	16
Quality of care	17
Health checks.....	20
Raising concerns and issues.....	22
Staff	23
Overall rating	25
Acknowledgements.....	25

Background

What is Healthwatch?

Healthwatch North Yorkshire is the independent champion for people using local health and care services. We listen to what people like about services, and to what could be improved. We share these views with the people who have the power to make a difference.

What is Enter and View?

Part of the local Healthwatch programme is to undertake Enter and View visits. Our team of authorised representatives conduct Enter and View visits to local health and social care services to find out how services are being run and make recommendations where there are areas for improvement. Healthwatch Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch safeguarding policies.



healthwatch
North Yorkshire



The Mill House

Phone number: **01423 788128**
Website: **<https://www.healthwatchnorthyorkshire.co.uk/>**
Email address: **hello@hwny.co.uk**
Freepost **HEALTHWATCHNORTHYORKSHIRE**

Details of the visit to the Mill House

Service address	Sackville Street, Skipton, BD23 2PR
Service provider	Anchor Hanover Group
Date	22 August 2023
CQC rating as at the previous address, Thornton Hill Care Home	Overall Good Well-led requires improvement
Care home manager	Sharleen Polley
Contact number	01756 537774

Summary

Purpose of the report

In this report, we summarise the findings gathered during the visit on 22 August 2023, as well as feedback shared through survey responses gathered before and after the visit.

Purpose of the visit

- To visit and gather views of the residents and their relatives and the experiences of the services provided.
- To observe the ongoing care being provided for the residents and their interaction with staff and their surroundings.

During the visit

Our authorised Enter and View representatives visited the home and spoke with residents, residents' relatives and friends, and care home staff, as well as conducted a planned observation.

We heard from:

- **17** residents,
- **21** residents' friends or family members,
- **22** members of staff,

whose feedback forms the basis of this report and our rating of the Mill House.

General Information

The Mill House officially opened its doors in July 2023. It is a new luxury care home designed to meet the specific needs of residents, with 86 en-suite rooms and eight independent living apartments, It is set up to offer first-class residential and dementia care.

The home is built on the site of an old mill, overlooking the Leeds and Liverpool Canal, and offers facilities including restaurants and cafes, a village shop, beauty salon and private landscaped gardens.

Our authorised representatives observed The Mill House building, which delivers care across three floors: the Craven Suite and the Mill Lodge on the ground floor, the Chester Suite on the first floor, and the Thornton Suite on the second floor. The independent living apartments were not occupied at the time of the visit.

Key findings

We found that, at the time of our visit, The Mill House was operating at a high standard. The care home building is a completely new, the staff are friendly and helpful, and the residents are well-cared for. These findings are based on our observations, as well as feedback received by Healthwatch from residents, their families and friends, and staff members. They reflect the general happiness and overall environment of the home.

However, there were a few issues highlighted by the visit. The main findings were: a need to make some adaptations to encourage a more dementia friendly environment. This includes general improvements to signage as well as training and support of the staff team.



Positive feedback

- The Mill House offers a **luxury environment**.
- Staff members are **friendly and helpful**.
- The move from Thorton Hill was well organised and executed.
- The food is fresh, **well-balanced and nutritious**.
- Staff members **interact effectively** with residents.
- The care home is **well-maintained**, with a comfortable and welcoming environment for residents and visitors.
- Residents have **access to a range of amenities** including a café area, daily activities and a pleasant garden area.
- Residents on the whole feel **safe and well cared for**.
- Staff members report **high job satisfaction** with a majority feeling they have access to adequate training.

Recommended areas for improvement

- **Dementia-friendly environment:** enhance the clarity of signage including contrasting colour schemes throughout the care home to improve navigation and reduce confusion.
- **Mealtime improvements:** ensure consistency in meal schedules and provide clear descriptions of dishes to prevent confusion amongst residents. Address menu changes to better accommodate preferences and dietary needs.
- **Dementia-specific and other training:** Provide dementia-specific training for staff especially for toileting situations.
- Offer training in distressed communication and end-of-life care, with a focus on face-to-face sessions.
- **Personalisation:** enhance room signage for better recognition and accessibility. Consider adding local-themed decorations to connect residents to their surroundings.
- **Information sharing and communication:** ensure that staff members are well-informed about resident's preferences, needs, and health conditions.
- Actively involve families in the individual care planning and review processes.
- **Improve awareness of health checks:** make sure residents are aware of the availability of these checks and facilitate transportation as needed.
- **Review staffing levels:** Assess staffing levels, particularly during nighttime, to ensure residents' needs are fully met. Aim to minimise the reliance on agency staff or ensure consistency of staff as much as possible.
- **Enhance social activities:** Encourage residents to participate in activities and regularly invite them to join in, and ensure residents are aware of all the resources on offer to them including the library and visits from North Yorkshire library service.

About this visit

The Mill House is run by Anchor Hanover Group, England's largest not-for-profit provider of housing and care for people in later life.

The home can support up to 86 people in single en-suite rooms, with 27 rooms designated for dementia care and 59 for residential purposes, along with eight independent living apartments.

At the time of the visit, **40** people resided there. There were larger number of females residing in the home - 34, compared to six male residents.

Most residents had moved from the Thornton Hill Care Home at the end of July (a month before the Enter & View visit), while others were transferred from other care settings managed by the Anchor Hanover Group or were new residents. Anchor advised the authorised representatives that the number of residents would be gradually increased going forward to minimise the impact on existing residents.

This was an announced Enter and View visit, arranged with the care home manager at the time. The current manager has been in post since March 2019.

The Mill House currently has more than 50 members of staff in caring roles, and this represents the totality of **91** staff available in the home, with 8 vacancies available.

The purpose of this visit was to capture the experience of life and care within a care home environment, identify examples of positive working practices and potential areas for improvement. We did this by observing the residents engaging with staff and their surroundings and by speaking with the residents to understand their experience. We asked relatives and staff members to provide their experience and views of the care home by completing a survey.

Prior to our visit, we provided information about the Enter and View visit which was made available for people to read in the reception area in the home, as well as on the noticeboards, included surveys for staff and relatives to complete. The survey was available also after our visit.

On the day, four of our authorised representatives conducted observations. We spoke with **17** residents, who shared their thoughts and experiences of living at

The Mill House, as well as some thoughts compared to Thornton Hill. During our insight gathering, we used a survey to help our discussions which focused on quality of life and care in the home.

21 family members and friends responded with their experience and views of the care home, and we heard from **22** members of staff who work in the home. Most of the staff respondents had worked in the same team for more than three years, and the most experienced member of the team worked for more than 16 years, while some new members of staff had a few weeks of experience.

Of these respondents, not all of them were able to provide an answer to every question and some respondents preferred not to answer some questions.

Findings

This section presents a summary of the feedback received during the evaluation encompassing various aspects of the home environment, including communal living areas, dining spaces, and residents' bedrooms. The purpose of this evaluation is to identify strengths and areas where improvements or adjustments that may be considered to enhance the overall quality of care provided.

Environment

In the initial observation of the care home, our authorised representatives found the building to be in exceptional condition which was to be expected given it is new. Despite being well-decorated, some feedback suggested that certain areas may benefit from improvements.

There was no signage at the main entrance, which was confusing because the front of the building appeared uniform without an obvious indication of where the entrance was situated.

There was a large temporarily signpost for deliveries in the far corner of the building, which supported the logistics of deliveries. There was no clear signage for the reception area.





On entering the home there is a prominently branded entrance/waiting room with an effectively operating digital sign-in system.

Access to the main building (reception) requires authorisation but was managed in a timely manner.

There was an attractive reception area with a small café opposite, as well as complimentary snacks for residents and an 'honesty box' for visitors, although the reception faces away from the entrance.

There was a noticeable lack of visitor information such as leaflets, and noticeboards for events and activities, and it was mentioned that this was still a work in progress.

Toilets were suitable and adapted but not effectively visible from communal spaces, and they lacked contrast seats and grab rails, which would be best practice for people with dementia.

The signage system in the Mill House is designed to create an elegant, luxury hotel feel. It looks incredibly attractive as part of the décor, but it fails to sufficiently assist the independence of the residents, especially those with dementia.

It lacked corridor-mounted signs for toilets and featured relatively small designer-style pictures/symbols on doors, which were positioned quite high, limiting their visibility and effectiveness. However, communal rooms had better signage.



The overall design is initially disorienting regarding what was located along each corridor, as it is too uniform across the building and lacks sufficient identifying landmarks to encourage independent and confident movement around the building.

The ground level had a large garden, with landscaping. There are also sheltered patio terraces overlooking the canal from the first and second floor. These areas are very well designed and maintained.

On the morning of the visit, it was drizzling weather. As the day brightened up, more residents appeared in the garden area, often with their family and friends.

Accommodation

The Mill House has three floors. The ground floor includes the Craven Suite and the Mill Lodge, which consists of eight independent living apartments. The Chester Suite is on the first floor, and the Thornton Suite on the second floor. The 15 residents with dementia care needs were located on the second floor. The 25 general residents were accommodated on the ground and first floors.

The Mill House offers a variety of sitting rooms, including quiet spaces, spacious and secure balconies, dining rooms. Additionally, there is an on-site hairdressing and beauty salon, and a well-equipped café bar with scenic garden views.

Every bedroom at the Mill House is luxuriously designed, spacious, self-contained, and well-maintained, all with en-suite wet room facilities. The beds are of a good size and appear comfortable.



It is like a 5-star hotel!



There was good room for movement around the bed and chairs to allow visitors to sit down in the bedrooms. The storage was adequate and stylish.

Several residents expressed contentment and satisfaction with their rooms.

However, some staff commented that there are practicality issues due to a significant amount of furniture that can create obstacles.

Some of our representatives expressed concerns about having a hotel-like atmosphere and a lack of personalisation opportunities for residents and whether the decor is adapted to meet residents' needs, particularly for those with dementia.

Seating areas provide for a range of residents' needs, including chairs of different heights and sizes in communal living areas. However, the dining room features uniform tables and chairs, and the outdoor furniture on the balcony is also consistent in style. It is best practice to offer a diverse range of seating options, ensuring that residents with different preferences and needs can find suitable arrangements.

However, the individual marking of residents' rooms was inconsistent, with most having very small and difficult-to-read name labels on their doors, while one room had larger, more accessible text and a personally chosen image for recognition. Memory boxes with contents related to individual residents were

present outside of some rooms but again were in a uniform style making it difficult to distinguish between them.

The corridors have a minimalist colour scheme and the handrails, which are white, blend into the light-coloured walls, while the corridors are very wide, and nicely decorated.

The lifts were a good size, with the capacity to accommodate a wheelchair, while also being suitable for use with walking frames.

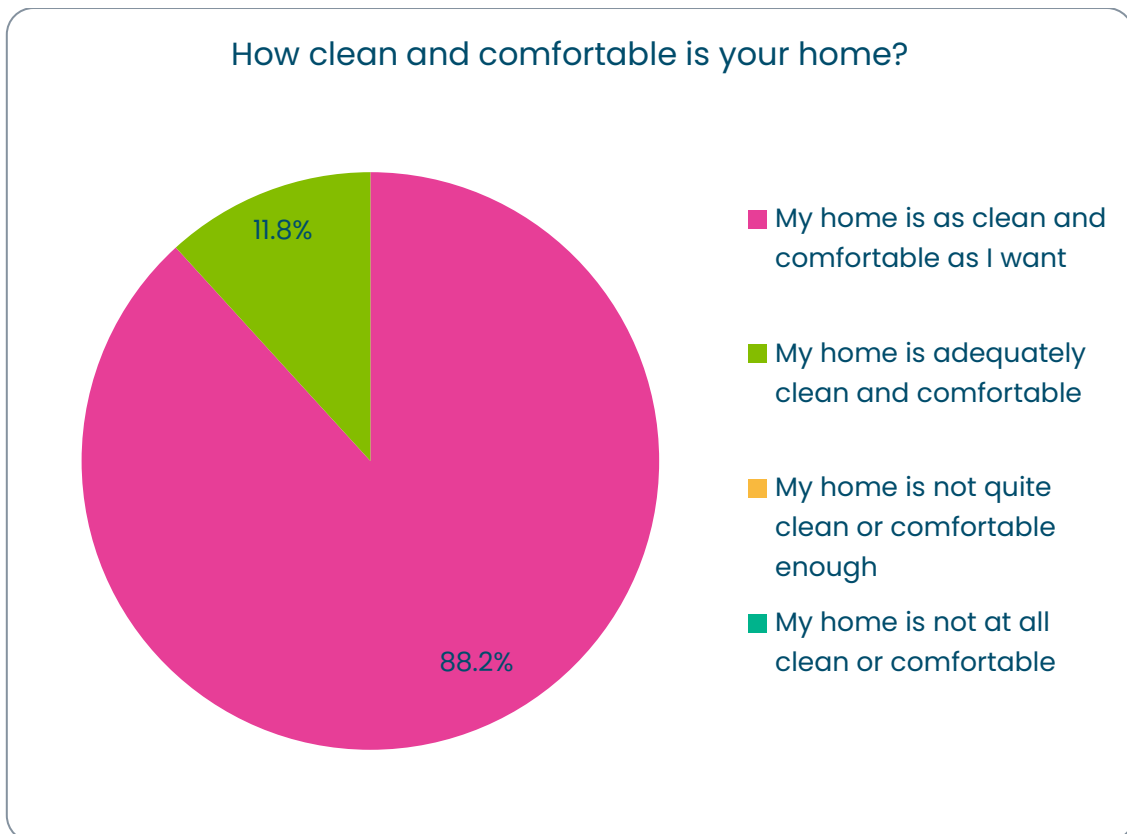
There is no oriental clock present that tells residents the day and time. It is beneficial to have this available for residents with dementia.

The Mill House had a comfortable feel but, lacked a sense of its local surroundings – Skipton, Craven, Yorkshire Dales – (apart from just one picture with four small postcards of Skipton), Residents would benefit from incorporating some references to the local area allowing residents to maintain a connection to their locality and make them feel at home.

Cleanliness and hygiene

Our representatives noted that overall, the care home was exceptionally clean, with no unpleasant smells.

We asked residents about the cleanliness of the home.



Out of the 17 residents our representatives spoke to, all felt that the home was clean or adequately clean. One resident commented that they feel a bit nervous when staff are cleaning the room, but it was unclear why.



Bedroom is cleaned every day.



All relatives said that felt that the home was clean and comfortable, with positive comments indicating excellent standards and cleanliness, as well as comparisons to high standards typically found in hotels.

Quality of life

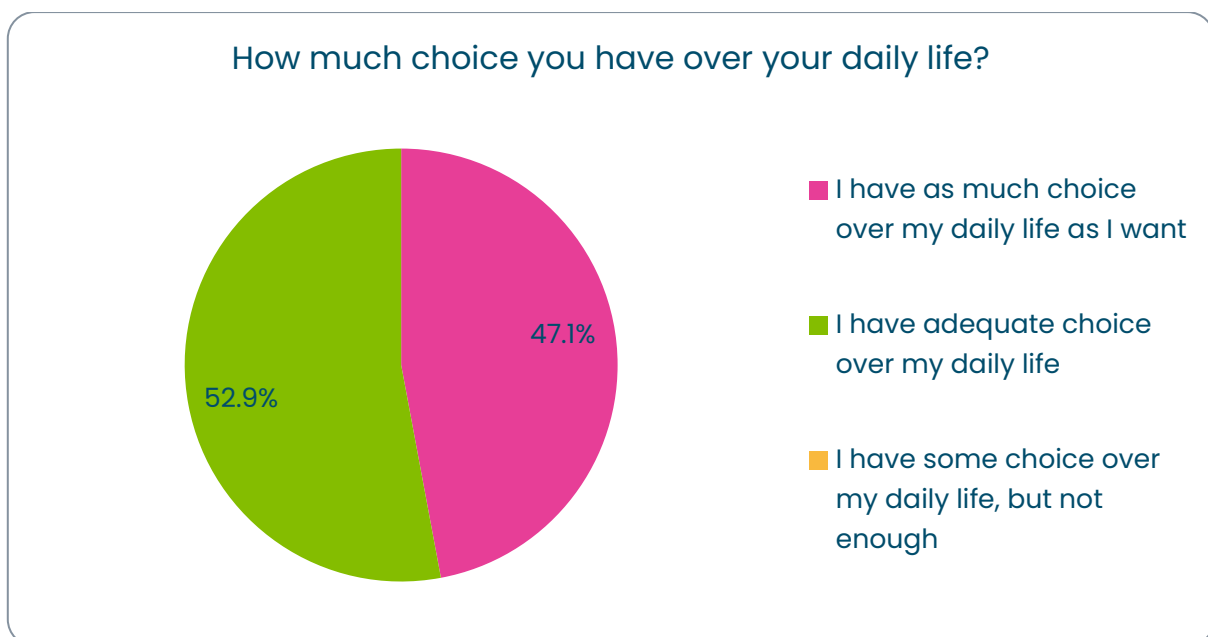
General happiness

Residents were asked whether they were happy living in the care home and how much choice they had over their daily life. (By choice we meant could they get up/go to bed when they want, can they go where they like in the home, do they choose what to wear each day etc).

All 17 residents we spoke with said they were happy at the home.

8 residents said they have as much choice as they want over their daily life, with 9 saying they have adequate choice.

The residents feel that the home is highly proactive in offering choices to residents.



The comments also recognised that residents have good access to TV and other individual activities.

Most respondents indicated that their loved ones are happy living in the home, with comments highlighting improved quality of life, attentive staff, and overall contentment. One relative noted that the transition from Thornton Hill to Mill Hill was significant, and their loved one is still settling, but they highlighted that the presence of familiar staff has been beneficial.



Very kind and caring staff around her lovely environment.



Food and drink

Residents and relatives were asked to share their views on the food and drink. Our representatives observed a mealtime in the home.

The food and drink look appetising, and residents appear healthy and well-nourished. However, some residents noted an issue with being unfamiliar with some menu items which resulted in the other options running out. It may help to incorporate feedback into menu planning.

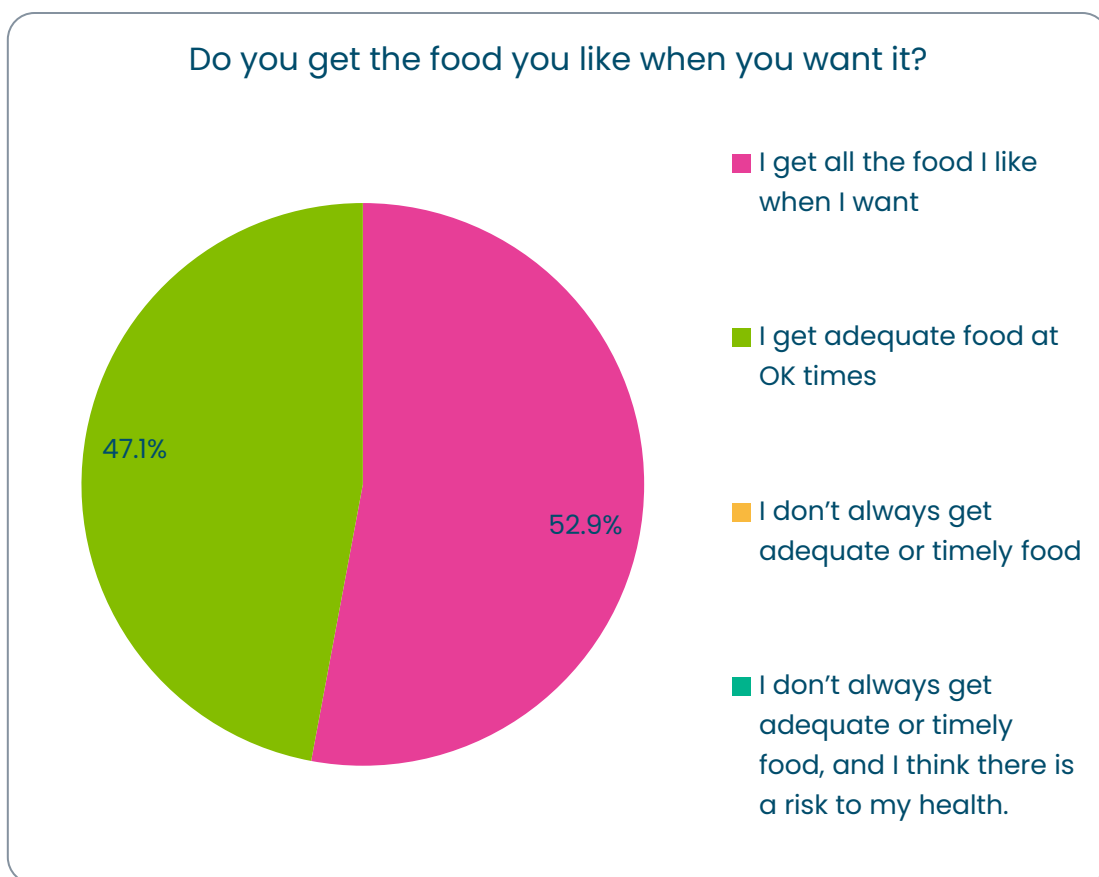
Some changes in meal timings, even in 30 minutes, compared to routines at the previous home, have caused confusion for some residents, and there also have been significant menu changes that not all residents appreciate.

Residents are offered a choice of food and served according to their individual dietary requirements. Specific requests and dietary needs are taken into consideration.

Most of the residents are seen eating together, and they appear to be enjoying their food and drinks. Representatives noted some interaction amongst some residents during lunch time.

Two residents have been noted to decline certain food items, and this was accommodated and recorded. Two residents have been noted to decline certain food items, and this was accommodated and recorded. Concerningly, one resident was observed eating cold soup nearly an hour after the start of lunchtime without evident encouragement to continue or progressing to a main course or dessert.

Drinks are readily available, and residents can reach their drinks with assistance from staff. Staff members made efforts to serve food according to residents' choices, although there were some significant issues with availability of most popular (known) food dish.



Out of 17 residents who shared their views on food and drinks, eight said that they received adequate food and drink at OK times, and 9 said that they get all the food they like when they want.



Quality of food is excellent.



Residents also were happy that the drinks were readily available and said that they can reach drinks when they want.

Out of the 21 family members who commented, 17 said that their loved ones receive all the food they like when they want it, and four mentioned that their loved ones receive adequate food at acceptable times.



Mother never complains about meals and from my observations when I see her in the dining room, the food provided always looks appetising.



At the same family members commented on the individual choice:



It is not always what they would really like e.g., he always had brown toast at home, but it is good enough.



Almost all family members confirmed that drinks are readily available, with some indicated that drinks service require reminders and encouragement.



Would like additional drink visits to room to encourage drinking water. Think this is now being implemented but not had feedback yet as recent.



Activities

On the day of the visit, various activities were available for observation: a Zest (online exercise to music), session was delivered across the floors, and the residents seemed to enjoy the session.

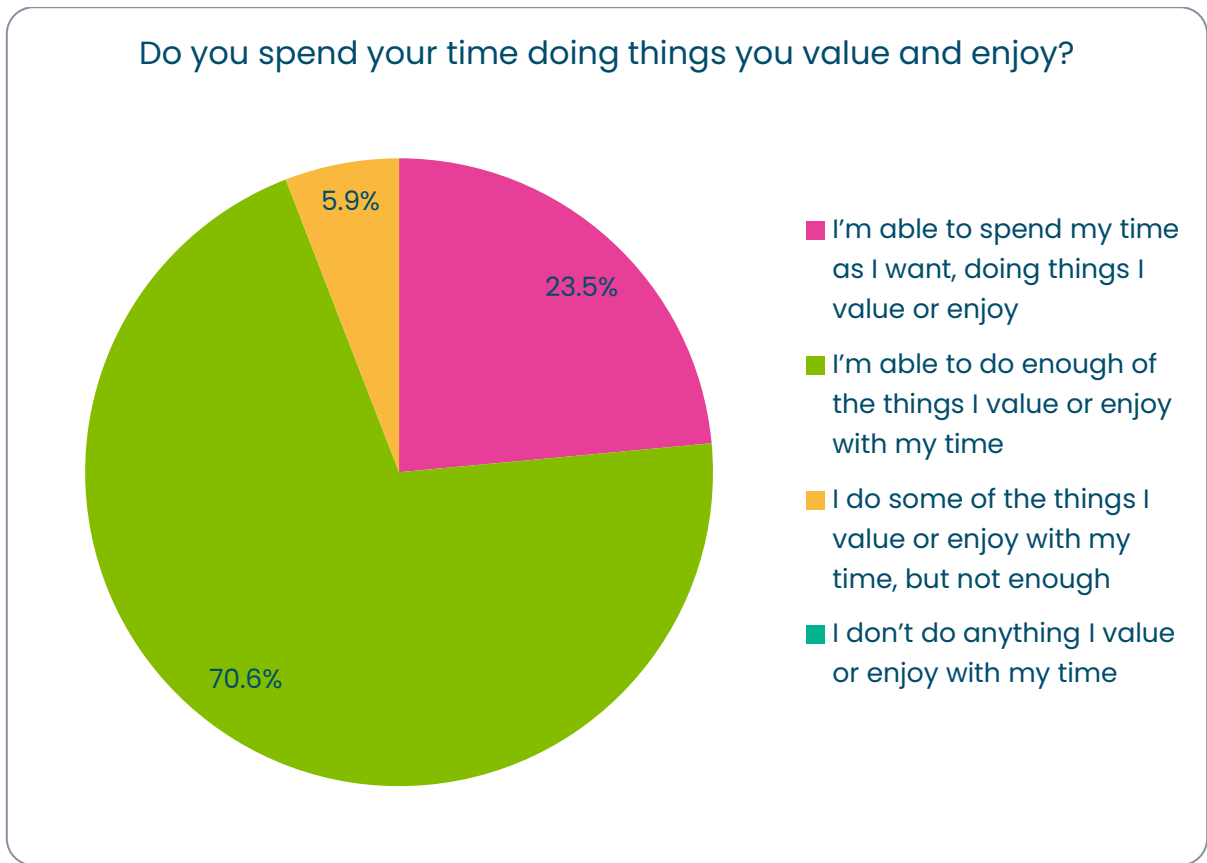
Additionally, jigsaw puzzles were available, mostly for individual use. Televisions were present in the rooms and communal areas, and they were used for group movie watching and listening to songs.

Residents were asked if they spend their time doing things they value and enjoy. Relatives and staff were asked if residents have regular access to activities in the home.

The opinions of the residents (out of 17) are shared between:

- Four residents said they could spend their time as they wanted,
- 12 said they can do enough of the things they enjoy,
- 1 said they can do some things they enjoy, but not enough.

Several residents mentioned that they enjoyed reading books, but they were unaware that there is a library in the Mill House and that the North Yorkshire Library Service visits the home.



Some feedback we received suggested that the canal boat trip was enjoyable and appreciated by the residents and their relatives.

Some relatives prized increased accessibility in the Mill House, compared to a previous building. An example being one resident who could access the local newspaper via the TV.

Almost all relatives we heard from said that there is a good variety of regular activities offered in the home, like Bingo, Quizzes, Talks, Scrabble. However, some highlighted that access to activities varies based on mobility or health conditions.



Due to mothers' condition, I think her participation is somewhat limited.



I did not think she would ever participate in activities she had become extremely isolated cutting herself off from many of her friends and socialising.



Two thirds (14) of family members out of 21 reflected positively on the question if they are received an invitation to participate in activities, some said:



Yes, but I would like them to be encouraged and reminded to join in.

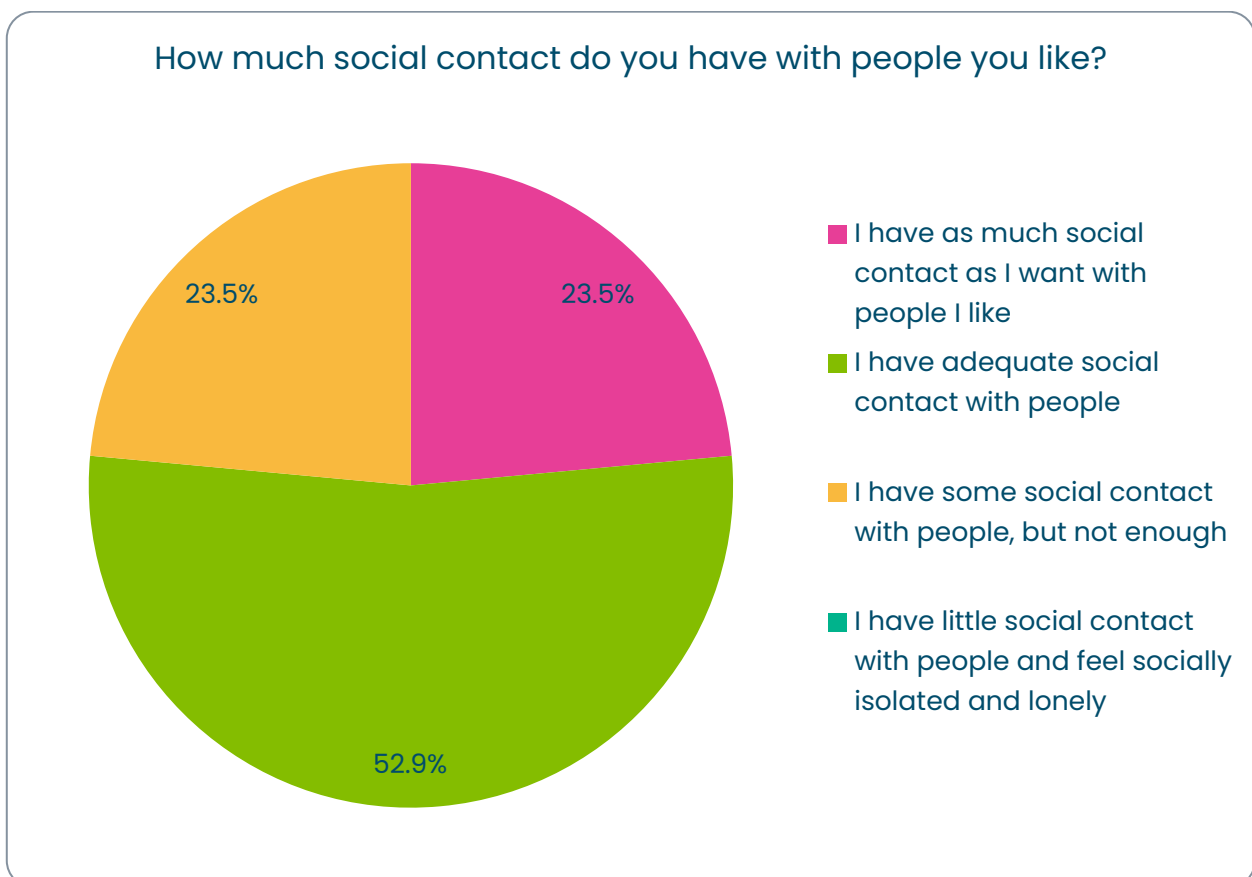


Staff mentioned a variety of activities and outings are offered to residents, including boat trips on the canal, live music, singalongs, animal therapy, painting, Zest fitness, gardening, knitting, readings, film nights, ball games, chair exercises, and more.

They said that activities are tailored to residents' preferences, with a focus on music and singing for those with dementia, as well as sensory activities and animal therapy. The activities coordinator plays a key role in planning and executing these activities, ensuring meaningful engagement for all residents.

Social contact

Residents and their relatives were asked about their social contact and our representatives observed interactions between residents, relatives, and staff.



Most residents enjoy socialising with others or have adequate social contact, some frequently go out for tea with friends. Also, the feedback reflected positive interaction between residents and staff.

There were 5 positive comments provided by residents with various good remarks about their social interactions, and enjoyment of getting out in Skipton.

All 21 family members and friends indicated that the care home allows them to visit their friend/relative as much as they want. One added positive feedback about staff being accommodating.

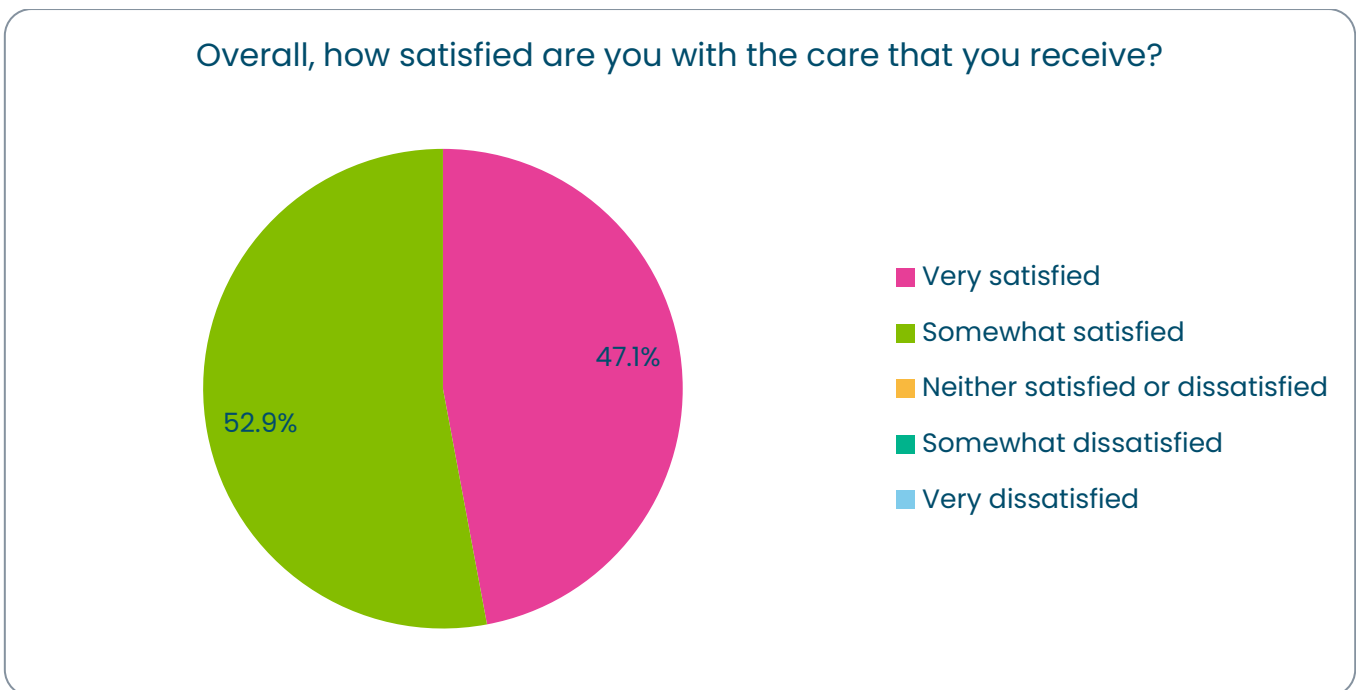
Quality of care

Residents and relatives

They were asked whether they felt they/their relative was well cared for. We also observed whether residents looked well cared for during our visit.

All 17 residents reported feeling clean and able to present themselves the way they like. This indicates that their personal hygiene needs are being met. Everyone we spoke to felt clean and presentable in appearance.

Our representatives observed residents properly dressed and well-groomed. However, one the day of the visit one of our representatives witnessed a residents bathroom needs not being met promptly which caused significant distress. This was raised with the care home manager on the day and adequately reflected,



Almost every resident we spoke with commented on being either very satisfied or somewhat satisfied with the care they receive. Positive feedback was given for the consistent care provided.



There is always staff assistance when I shower, which is understandable, so I don't fall.



All family members and friends feel that there is a good level of care provided to their loved ones, reflecting that the nurses, carers and staff are always kind, considerate and helpful.



Both my sister and I live 300 miles away from our mother and all the staff we are in contact with have been amazing at supporting us as well as our mother.



At the same time, a few family members provided their views on how care could be improved:



More mental stimulation, cognitive and emotional help would be beneficial. Even relaxation techniques and 1-1.



We also wanted to know whether residents feel like they need additional help with anything, such as help to eat or drink, and if they receive enough help.

10 out of 17 residents said that they required additional help, with seven residents saying that they get enough help with their needs.

Among those who needed additional help nine stated that they do get enough help with these tasks.

Relatives and friends were asked if they contribute to individual care plans.

Most respondents (12 out of 17) were involved in contributing to the care plan of their loved ones. Some family members mentioned that they were engaged once but not involved in the process of review.



Were surprised about medication being given and that staff didn't seem to be aware of previous illnesses. Unaware of referral processes and of how input into the care plan is managed post initial meeting on entry into the care home.



Overall, it appears that there is room for improvement in involving families in the individual care planning/review processes.

Staff

We also wanted to know how well informed the staff are about the residents they look after in terms of their individual likes and dislikes, food/drink requirements, hobbies/interests.

21 of the staff (out of 22) respondents said they feel very informed or somewhat informed about the residents' needs and likes, with one feeling very uninformed.



Nobody is informed of these things as you learn about the resident as you go along with their care. By talking to the residents on a regular basis, we can learn about their likes and dislikes.



Safety and staff levels

Residents, relatives, and staff were asked whether they feel there are enough staff, and we asked the residents if they felt safe in the home.

All residents said they feel as safe as they want (13) or adequately safe (4). Some residents felt that more staff are required during the nighttime. 12 out of 17 residents feel staffing is adequate, five feel it's insufficient, reflecting to a waiting time for getting care.



Most of the time there are enough but not always. Agency staff are a problem because they do not know the residents well.



Out of the 21 relatives who completed our survey, 17 stated that there are enough staff, while four mentioned that there aren't enough. Additionally, some relatives commented that the current staffing level is sufficient because the home is not at full capacity yet.



There seemed to be more staff at Mill House than there had been at the previous home.



18 staff respondents said they felt there were enough staff. Eight felt that there are gaps in staffing. Those mentioned gaps on records or tasks, or shared a concern about being stretched once the home is at capacity.

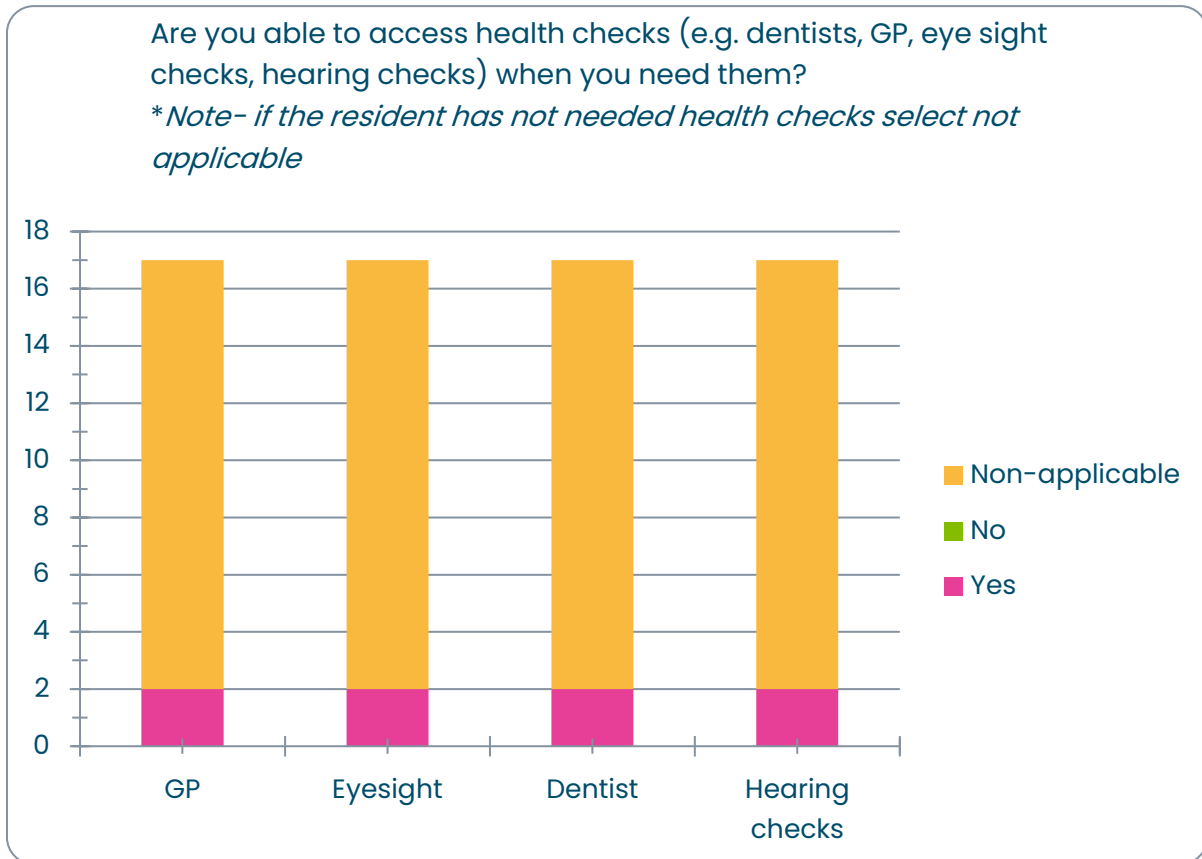


There isn't enough night staff which impacts the days as things aren't getting done.



Health checks

We asked residents and friends/ family if they had been able to access relevant health checks, e.g., dentists, GP, eyesight checks, hearing checks.



Regarding the accessibility of health checks, the survey responses from 17 residents split between categories:

GP visits

Two residents indicated that they could access GP visits when necessary, suggesting satisfaction with this aspect of healthcare. 15 respondents said that they did not need GP visits, possibly indicating their current health status or the care they receive.

Eyesight checks

Two residents stated that they were able to access eyesight checks when needed. 15 residents said that they did not require eyesight checks, possibly due to their existing eye health or care.

Dentist appointments

Two residents mentioned they could access dentist appointments as required. 15 residents believed did not need dentist appointments, possibly reflecting their dental health or care status.

Hearing checks

Two residents reported being able to access hearing checks, indicating that this aspect of healthcare was available to them.

15 residents did not require hearing checks, possibly due to their hearing health or care situation.

The results of responses indicate that a significant portion of the residents did not feel the need to access various health checks such as GP visits, eyesight checks, dentist appointments, and hearing checks. It would be beneficial for the home to encourage residents to consider these needs to help mitigate longer term health impacts. Family and friends mentioned that they sometimes accompany residents to appointments, and also that the care team offers transport and assistance when needed. Some residents have specific healthcare needs, such as macular degeneration and hearing issues, but there may be limited specialist care available.

At the same time, staff said that residents' sensory health needs are included in their care plans and these records are reviewed on a regular basis.

This includes details of whether residents have their own teeth, their choice of toothpaste, and toothbrush, and how often they see the dentist.

Staff also mentioned that they keep records about the level of dependency of the residents, and the daily help and relevant maintenance required for each resident.

This also includes anything about communication or language needs. If some residents have difficulties with communication, staff record their capacity, and how to meet their needs.



What their ethnicity needs/requirements are, any cultural or religious needs are. If they need any communication aids or things which would aid their understanding, this could mean different formats such as Braille.



Raising concerns and issues

Residents, family, and friends

We wanted to know if they had any concerns about the service, would they know what to do.

Almost every resident said they knew how to raise concerns, but 1 said that they were not sure.

Some residents would talk directly to the staff and the manager and others raise concerns via family members.

Family members suggested a variety of channels through which concerns about their loved ones can be addressed, including direct communication with management, staff, as well as involvement of external authorities.

We also asked if they had been happy with how the concern had been dealt with in the past.

Six respondents said they were happy with how issues were dealt with. Comments also included that some residents did not have any concerns.

Majority of the family members also commented positively:



I have raised queries and shared feedback with staff and management, I have not had any concerns to share. I have found the responses to be prompt and positive, and acted on where necessary, and I have the impression that feedback is welcomed whether positive or negative.



Our representatives also commented on the raising concerns section.

While we always welcome advice from the management, this time we met a limitation on the visit on the floors dedicated to caring for people with dementia and early onset. The management insisted that there are no, or very few, individuals with the capacity to engage in conversation. Healthwatch North Yorkshire communicated to the management that everyone still has some capacity to communicate, even if they have an illness such as dementia. We would like to ensure that all individuals are cared for have an appropriate access to communication and feedback, even via gestures etc., and the staff receiving a relevant training.

Staff

How do they feel?

We asked staff about working in the care home.

All staff members responded said they enjoyed working at The Mill House, valuing the cleanliness and tidiness, and enjoying the interactive and teamworking aspects of their role. They found Anchor to be a good care company to work for.

Almost all staff responded also said they would recommend the home to family or friends.

We wanted to know whether the staff feel well informed about changes to services in the home.

Of the respondents to this question, 16 said they were fully informed, six said they were not, and mentioned if some staff have been off for a period of time changes may not be fully communicated on their return.

We asked is there anything staff think the home could put in place to improve staff working environment, conditions or offer more support?



The staff member doesn't have a working space, although can use of office space if it is available. The member of staff prefers being with the residents.



Comments also identified some areas the home could improve to support the staff working environment:

- More opportunities for progress, such as career advancement,
- Air conditioning,
- Allow time off the floor, when working on further education/qualifications,
- More in depth dementia training especially when it comes to aggressive and challenging behaviour,
- Training in distressed communication, end of life - have optional ones online but feel that face to face mandatory would benefit staff and residents more.

They also shared some ideas:



I think having management in on a weekend is a very good idea, this is making people accountable and stopping members of staff present more on shift instead of taking advantage of no management being in



And praised the teamwork:



I feel the staff are truly caring and advocate for the residents, like they would for their own family. Of course, there is always room for growth and improvement.



Overall rating

We asked residents, family and friends of residents, and care home staff how they would rate the home out of 5 (with 5 being the best).

Residents: (4.3/5)



Friends and family: (4.9/5)



Care home staff: (4.6/5)



Acknowledgements

The Healthwatch North Yorkshire Enter and View team would like to thank the manager, staff, friends and families of residents, and residents for the support of the Enter and View Visit conducted at The Mill House, and for sharing their views with us. Thanks also to our dedicated volunteers who helped support this Enter and View visit.

Disclaimer

This report is not a representative portrayal of the experiences of all patients, relatives, and care home staff, but an account of what was observed on the day of the visit and shared with us by those who completed our survey. Note: Some of the residents we spoke with have cognitive impairment which can impact their ability to answer the questions.



Committed to quality

We are committed to the quality of our information. Every three years we perform an in-depth audit so that we can be certain of this.

[Learn more.](#)

healthwatch

North Yorkshire

Healthwatch North Yorkshire
55 Grove Road
Harrogate
HG1 5EP
www.healthwatchnorthyorkshire.co.uk

t: 01423 788 128
e: hello@hwny.co.uk

 [@HealthwatchNY](https://twitter.com/HealthwatchNY)

 [Healthwatch North Yorkshire](https://www.facebook.com/HealthwatchNorthYorkshire)

 [Instagram.com/HealthwatchNY](https://www.instagram.com/HealthwatchNY)

 [Healthwatch North Yorkshire](https://www.linkedin.com/company/HealthwatchNorthYorkshire)