

# healthwatch

Cheshire East



**Enter and View Report**

**Priesty Fields Care Home**

**Congleton**

**6<sup>th</sup> May 2025**

## Contents

Report Details	Page 3
What is Enter and View	Page 4
Methodology	Page 5
Findings	Page 7
Recommendations and what's working well	Page 26/27
Service Provider Response	Page 27

## Report Details

<b>Address</b>	Priesty Fields Congleton CW12 4AQ
<b>Service Provider</b>	Sandstone Care Group
<b>Date of Visit</b>	6 <sup>th</sup> May 20025
<b>Type of Visit</b>	Prior notice
<b>Representatives</b>	Jodie Hamilton Jem Davies
<b>Date of previous visits by Healthwatch Cheshire East</b>	First visit

This report relates to findings gathered during a visit to the premises on specific dates as set out above. The report is not suggested to be a fully representative portrayal of the experiences of all the residents, friends and family members or staff, but does provide an account of what was observed by Healthwatch Cheshire Authorised Representatives (ARs) at the time of the visits.

## What is Enter and View?

Healthwatch Cheshire is the local independent consumer champion for health and care services, forming part of the national network of local Healthwatch across England.

Under the Local Government and Public Involvement in Health Act 2007, local Healthwatch have the power to carry out Enter and View visits as part of their scrutiny function. This legislation places a duty on health and social care providers to allow Authorised Representatives of Healthwatch to carry out an Enter and View visit on premises where health and social care is publicly funded and delivered. This includes:

- Health or care services which are contracted by local authorities or the NHS, such as adult social care homes and day-care centres.
- NHS Trusts
- NHS Foundation Trusts
- Local authorities
- Primary medical services, such as GPs
- Primary dental services, such as dentists
- Primary Ophthalmic services, such as opticians
- Pharmaceutical services, such as community pharmacists.

The list of service providers who have a duty to allow entry is set out in section 225 of the Local Government and Public Involvement in Health Act 2007 and supplemented by Regulation 14 of the 2013 Local Authorities regulations.

At Healthwatch Cheshire, the Enter and View programme is conducted by a small team of staff and volunteers, who are trained as Authorised Representatives to carry out visits to health and care premises.

Following an Enter and View visit, a formal report is published where findings of good practice and recommendations to improve the service are made. These reports are circulated to the service provider, commissioner, the CQC and relevant partner organisations. They are also made publicly available on the Healthwatch Cheshire websites:

- [www.healthwatchcheshireeast.org.uk/what-we-do/enter-and-view](http://www.healthwatchcheshireeast.org.uk/what-we-do/enter-and-view)
- [www.healthwatchcwac.org.uk/what-we-do/enter-and-view](http://www.healthwatchcwac.org.uk/what-we-do/enter-and-view).

## Purpose of the Visit

- To engage with residents, friends and relatives of the named services and understand their experiences
- To capture these experiences and any ideas they may have for change
- To observe residents, friends and relatives interacting with the staff and their surroundings
- To make recommendations based on Healthwatch Authorised Representatives' observations and feedback from residents, friends and relatives

## Methodology

### **This Enter & View visit was carried out with 'Prior Notice'.**

A visit with 'Prior Notice' is when the setting is aware that we will be conducting an Enter & View visit. On this occasion, an exact time and date were not given.

Prior to the Enter and View visit, the service was asked to display both the letter announcing our visit and a Healthwatch Cheshire poster in a public area. The service was also asked to share surveys amongst residents, friends and relatives. Members of the Healthwatch team visited the service prior to the Enter and View visit to deliver paper copies of the surveys.

To enable us to check that there are no health outbreaks at the premises that would prevent the visit taking place for infection control reasons, this Care Home was made aware that we would be coming on the morning of the visit.

## Preparation

In preparation for an Enter and View visit the Authorised Representatives who will be carrying out the visit conduct research that involves reviewing:

- The latest CQC report from a routine inspection of the service

- Any previous Healthwatch Cheshire Enter and View reports
- The Care Home's information held on the Carehome.co.uk website
- Entries on social media platforms
- Comments held on Healthwatch Cheshire's feedback centre
- Information received by Healthwatch Cheshire as a result of undertaking surveys.

On the day of the visit, the Authorised Representatives hold a briefing to discuss findings from their individual preparation, and decide as a team how they will carry out the visit, and any specific areas of focus based on this prior knowledge.

## **Priesty Fields**

Priesty Fields Care Home is a modern, purpose-built care facility located in Congleton, Cheshire. It provides residential, nursing, and specialist dementia care for older adults. The home is part of the Sandstone Care group.

## **Residents and Relatives' Feedback**

Prior to the visit, residents, family members, and friends were invited to complete surveys to share their experiences of Priesty Fields Care Home. This feedback was used to help inform the focus of our visit and to provide a broader insight into the day-to-day life at the home. We received 5 completed Resident surveys and 4 completed Relatives and Friends surveys.

At the time of our visit, there was no permanent Registered Manager in post, following the recent resignation of the previous manager. The home is currently being supported by regional and senior staff from the wider organisation. A Regional Support Manager was present during our visit and explained that she supports the home on Mondays and Tuesdays, while another Support Manager was on site from Wednesday to Friday. In addition, the home has a Deputy Manager and a Clinical Lead in place to help oversee day-to-day operations.

During our Enter and View visit, Healthwatch Cheshire representatives spoke with residents and staff to gain a further understanding of the quality of care, staff interaction, and the overall environment of the home. In addition, the Regional Manager was asked a series of questions relating to residents' experiences and the delivery of care to help build a comprehensive picture of life at Priesty Fields.

## Findings

### Arriving at the care home

The Regional Support Manager, who has experience in the care sector and has previously managed a care home, had been supporting Priesty Fields for several weeks at the time of our visit. Healthwatch was given a tour of the care home by the Deputy Manager; both managers were very warm and welcoming.

The Regional Manager described the home environment as friendly, welcoming, and clean, with a strong emphasis on ensuring that residents are well cared for. They explained it was expected that some activities would be taking place during the visit to support resident engagement and wellbeing.

### Environment

Priesty Fields Care Home was easy to locate using a satellite navigation system. As we approached the building, it was clearly signposted with a large, visible sign identifying the home.

The external condition of the building and the surrounding grounds appeared to be very well maintained. The premises looked clean, tidy, and well cared for, with outdoor seating available for residents and visitors to enjoy.

A large car park is situated on site, providing ample parking for staff and visitors. The entrance to the home was secure, and we were welcomed by



a friendly receptionist upon arrival. The receptionist notified the Regional Manager of our presence, and we were asked to sign into the visitors' book.

The visitors' book includes privacy paper to ensure the protection of personal information, in line with data protection practices. Overall, the initial impression of the environment was positive, reflecting a safe, welcoming, and well-maintained setting.

Healthwatch Cheshire noted that the reception area noticeboard displayed a range of useful information for visitors and residents. This included a poster promoting the Healthwatch survey, an activities planner, details outlining staff roles identified by uniform colour, information on upcoming celebration events, and notices regarding fire alarm testing.



In addition, a table in the reception area featured further printed copies of the Healthwatch survey, carehome.co.uk review cards, and enquiry information for Priestly Fields. The home's most recent Care Quality Commission (CQC) inspection rating was also clearly visible.





## Treatment and care

### Quality of care

The Regional Support Manager informed Healthwatch representatives that residents at Priesty Fields had the option to remain registered with their own GP practice upon admission to the home. Most residents are currently registered with Readesmoor Medical Centre, which conducts weekly ward rounds at the home. A smaller number of residents are registered with other local practices, including Lawton House and Meadowside. The home reported maintaining positive working relationships with all linked GP surgeries.

When residents become unwell, the Regional Manager told us, staff aim to support them within the home where possible, provided it is safe and appropriate to do so. The home benefits from having trained nursing staff and experienced senior carers on site, which enables them to manage a range of health needs. Any decisions regarding hospital admission are made in consultation with residents, their families, and healthcare professionals. Healthwatch asked what the home's experience was with hospital discharges and at the time of our visit, the manager was not aware of any recent negative experiences related to hospital admissions or discharge processes.

The Regional Manager explained that structures are in place at the home to help prevent unnecessary hospital admissions. Individualised care plans are developed with residents and/or their families in advance.

The home does not currently have designated discharge beds.

A variety of external healthcare professionals regularly visit Priesty Fields, including a Speech and Language Therapist (SALT), Occupational Therapist (OT), physiotherapist, Tissue Viability Nurse, district nurses, a phlebotomist, and a dietician. The home also has an established relationship with a local pharmacy, Inspire.

Dental care is available to residents as required, although the specific dental provider was not confirmed during the visit. A visiting chiropodist attends the home every six weeks. If residents are not eligible for NHS-funded podiatry (e.g., non-diabetic residents), a private fee applies.

In terms of personal care, the home has its own on-site salon. A hairdresser visits weekly, and a barber attends every six weeks.

Optical care is also available through a linked optician, maintaining access to routine eye care for residents.



## Privacy, dignity and respect

During our visit, Healthwatch asked the Regional Manager how the care home promoted privacy, respect and dignity and they shared,

*“Fundamentally it’s about having the right staff who understand this and how important it is. Eg. Knocking on doors, placing towels to ensure dignity and privacy when bathing. Listening to residents about what is important to them.”*

In terms of accessible communication and information, Management told us that the home used large print and pictorial menus to support residents with visual or cognitive needs. Staff are prepared to adapt materials and communication methods to meet individual requirements, ensuring that residents are fully included in their care and daily choices. Healthwatch didn’t see any large print or pictorial menus during our visit on display.

Healthwatch asked in the Residents surveys if the residents felt cared for, safe, respected, had their dignity maintained and provided with privacy; overall the feedback from the residents’ survey was positive:

- Cared for: All residents felt that they were cared for or at least sometimes well cared for, with the majority responding "Yes".
- Safe: Every resident felt that they were safe in the care home.

- Respected: Most residents answered "Yes", indicating that they believed that they were treated with respect. One resident noted this only occurred "sometimes".
- Dignity Maintained: Most residents agreed that their dignity was maintained, although two noted it occurred only "sometimes".
- Privacy: While most residents felt they had privacy, two responses indicated this was not always the case, including one resident who answered "No".

Healthwatch also received responses from visitors to Priestly Fields Care Home regarding their thoughts of the care and environment experienced by their loved ones. Respondents were asked whether they felt the person they were visiting was cared for, safe, respected, had their dignity maintained and provided with privacy

Feedback was consistently positive across all responses.

- All respondents indicated that their loved one was cared for, safe, respected, and that their dignity and privacy were maintained.
- No respondents indicated any negative experiences in these core areas of care.

One respondent did provide additional feedback, highlighting a challenge with communication when agency staff are on duty, noting that requests are sometimes misunderstood.

## Understanding residents care plans

Healthwatch representatives were informed by management that all residents at Priestly Fields have an individualised care plan in place. These care plans are reviewed and updated whenever there is a change in the resident's condition or needs, and as a minimum, they are reviewed on a monthly basis.

The home operates a 'Resident of the Day' system, during which the resident's care plan is given a focused review to ensure it remains accurate and person-centred.

Where residents have the capacity to do so, they are actively involved in shaping and reviewing their own care plans. Where this is not possible,

family members are consulted and involved to ensure the care provided reflects the resident's preferences, routines, and personal history. Families are recognised as offering valuable insight, particularly regarding the likes, dislikes, and individual needs of their loved ones.

## Relationships

The management described the relationship between staff and residents as *"warm and friendly."* Staff are encouraged to spend quality time with residents and to get to know them well; supporting a person-centred approach to care.

The atmosphere throughout the home was calm, friendly, and welcoming. Staff were seen engaging positively with residents, demonstrating respectful and supportive interactions. Residents appeared relaxed and comfortable, and several commented positively on the care they received and the kindness of the staff.

As part of our engagement with residents during our visit, Healthwatch asked via the survey if they felt they had a good relationship with the staff.

*Several residents shared additional comments:*

*"I do yes! I think the staff are fantastic! It would be unbearable life. We have fun."*

*"I think so."*

*"Staff are ever so good. Nothing is too much trouble. The staff really care about you."*

Healthwatch asked visitors whether they felt their loved ones had a good relationship with the staff at Priestly Fields Care Home.

All respondents answered "Yes", indicating that they believe their loved one has a positive relationship with staff.

Additional comments provided by visitors

*"Excellent staff but sometimes daily processes are NOT consistent!"*

*"All the team work really well and there is a good friendly atmosphere."*

## **Interaction with staff**

During the lunchtime period, staff were observed checking with residents whether they were ready for their meal and offering a choice of dining rooms, reflecting a respectful and person-centred approach to care. When staff were seen passing residents, they would stop to speak with residents, asking if they were ok and having short conversations, and assisting residents where needed.

Management shared that the relationships with residents' family members and friends were also described as positive. Staff aim to build trust with relatives and maintain open lines of communication to ensure families feel involved and reassured about their loved one's care.

All staff wore name badges and uniforms appropriate to their roles, which helps residents and visitors easily identify staff members.

To maintain appropriate staffing levels, the home uses agency staff when required. This is managed through a platform called *Care Hire*. All agency staff receive an induction upon arrival at the home, during which key information and staff contacts are shared.

## **Connection with friends and family**

The home promotes ongoing communication between residents and their friends and family through a variety of means. Relatives and friends are welcome to visit the home in person, and residents also have access to telephone and video calls, such as FaceTime. Staff are available to assist with reading letters or cards for residents who may have difficulty doing so independently. Some residents also enjoy outings with their relatives.

There are no set visiting times at Priestly Fields, offering flexibility for families and friends. Visits can take place in residents' rooms or in the communal areas of the home. For special occasions, there are designated rooms that can be booked in advance to celebrate in a more private setting. During our visit Healthwatch did not see any visitors.

While the home has not experienced a recent infection outbreak, staff explained that if restrictions were required due to necessary control measures, they would ensure loved ones could stay connected. This may include the use of PPE for visits or encouraging contact via telephone or video call, depending on the situation and personal preference.

The Regional Manager shared that the complaints and feedback policy is clearly displayed in the reception area, and the home encourages open communication. Regular residents' and relatives' meetings are held, at a minimum, every three months, to gather feedback and discuss any concerns or suggestions.

Healthwatch asked visitors in the survey whether they knew how to raise comments, concerns, or complaints about the care or services provided at Priestly Fields Care Home. The majority of respondents indicated that they were aware of how to provide feedback

One visitor commented that the *"current manager operates an 'open door' policy which allows relatives to feedback."*

Others stated they would speak with *"a senior staff member on duty or the manager,"* or simply *"let one of the team know."*

One visitor added, *"I am able to speak to any of the staff from the Manager down to all the other staff."*

Only one respondent indicated they were unsure of how to provide feedback.

## Wider Local Community

Priesty Fields Care Home has links with the wider community to help promote social engagement and intergenerational connection for residents.

The manager shared that the home received regular visits from two local nurseries, as well as a nearby primary school, providing residents with opportunities to interact with children of different ages. A local 'Knit and Natter' group also visits the home, offering a chance for residents to take part in social and creative activities with community members.

One resident spoke warmly about enjoying visits from the local nursery children, while another expressed enthusiasm for the upcoming trip to the Town Hall.

In addition, the local church visits the home once a month to hold a service for those residents who wish to take part, supporting residents' spiritual wellbeing and sense of connection to their faith and community.

## Everyday Life at the Care Home

### Activities

During our visit to Priesty Fields, Healthwatch representatives observed an activity session taking place, delivered by an external provider called Rise. This organisation offers movement-based sessions and regularly visits care homes across Cheshire to promote physical activity and wellbeing among residents.

The manager shared that the home employed three Activity Coordinators who work a combined total of 63 hours per week, ensuring that activities are available seven days a week. A weekly activities planner is displayed throughout the home, and each resident receives a personal copy in their room. However, staff noted that the schedule remained flexible and can be adapted on a daily basis in response to residents' preferences and needs. Healthwatch noted that there were activity



planners on the notice boards throughout the home and paper copies at reception. Residents shared that some had copies of the planner, and that staff would tell them what activity is taking place.

The Management explained that there was a variety of activities on offer, including baking, knitting, arts and crafts, gardening, and afternoon teas. Entertainment is often geared towards encouraging physical movement. The home follows national and seasonal calendar events, and at the time of our visit, residents had been invited to attend a VE Day fish and chip supper hosted by the Town Mayor at Congleton Town Hall. There was evidence of VE Day celebration to take place via a poster on the noticeboard. Healthwatch has since noticed that the care home has shared images of this celebration on Facebook.

We spoke to a resident who told us they were looking forward to going to the VE Day event at the town hall, and they were seen in the Facebook posts enjoying the celebrations.

Priesty Fields also features an on-site pub, which opens onto the patio area and is especially popular during warmer months. This space offers an additional setting for social interaction and themed events. The deputy manager shared that the care home will provide non alcoholic drinks in the pub for residents to enjoy.

Among the more unique activities management shared, the home runs 'Armchair Travel' sessions, where residents choose a country to explore. These sessions include themed discussions and cuisine from the selected country, supported by the kitchen staff to provide an immersive and engaging experience.

The home also has a link with a local rickshaw service operating in Congleton. Every Friday, residents have the opportunity to book a rickshaw tour of the town and the local park. Information about this service was clearly displayed on noticeboards throughout the home, helping to promote awareness and participation.



## Person Centred Experience

During the visit to Priestly Fields, Healthwatch representatives had the opportunity to observe and speak with residents and management to gain a better understanding of person-centred experiences.

The manager expressed that person-centred care at the home was tailored to each individual's needs, preferences, and values. As part of the pre-admission process, staff take time to speak with the prospective resident and their family or friends to understand what is important to them. It was acknowledged that these needs and preferences may evolve over time, and care plans are updated accordingly to reflect any changes.

The home operates a 'Resident of the Day' initiative, during which each resident receives focused attention from all departments. On this day, their care plan is reviewed, their room undergoes a deep clean, and staff from various teams – including kitchen, maintenance, and domestic services – check in with the resident to ensure all aspects of their wellbeing are being supported.

Residents are encouraged to give feedback and raise any concerns in a number of ways. They can speak directly to staff, complete surveys, or participate in regular residents' meetings, where their views can be shared in a group setting. Healthwatch noted that on notice boards, there were future residents' meeting organized.

Residents were asked in the survey whether they knew how to raise comments, concerns, or complaints about their care or the running of the home. Responses were mixed. Some residents indicated that they were aware of how to raise issues, with one stating they would speak to "*the boss, the manager,*" and another explaining they would speak with staff or that their daughter would do so on their behalf.

However, two residents reported that they had not been told how to give feedback or make a complaint. This suggests that not all residents are fully informed about the process.

Spiritual needs are also supported at Priestly Fields. A local church visits the home once a month to deliver a service for those who wish to attend, and

the home is willing to support residents in accessing any other spiritual or religious practices they follow.

While the home does not currently have any live-in pets, it does allow animals to visit, which can provide enjoyment and comfort to residents.

Residents shared what were the best things about living in the care home in the surveys:

*"It's less worries than I had in real life, I can have things done for me what I can't do or struggle with."*

*"The home is safe."*

*"Everything you want is provided."*

*"Truly, it is daft. The staff are all here for you and when they offer help, they truly mean it. The food is improving."*

When residents were asked in the survey if there was anything they would change about the care home, we received the following comments:

*"Better utilised and more staff. I feel everyone is rushed off their feet. Not enough individual time. "*

*"No thoughts"*

*"More staff sometimes. I want someone and they are gone. Wake up a lot to be turned." (Patient needs to be turned due to pressure sores.)*

*"No. Really happy with everything."*

The atmosphere throughout the home was calm, friendly, and welcoming. Staff were seen engaging positively with residents, demonstrating respectful and supportive interactions.

Those who were able to communicate shared that they felt well looked after and appreciated the range of activities on offer.

Relatives shared the best things about life in the care home for their loved one:

*"Clean, safe environment. Friendly staff."*

*"Safety and controlled medication."*

*"The care and friendly staff."*

*"The appearance and atmosphere in general, along with very helpful staff."*

*"The attitude of the staff to residents and visitors. Very good mostly."*

When asked by survey if there was anything relatives would change about the care home we received the following comments:

*"There appears to be issues with managerial staff and staff turnover at the home level which impacts the day to day running. This however does seem to have improved with the current manager."*

*"Quality of food and add fruit."*

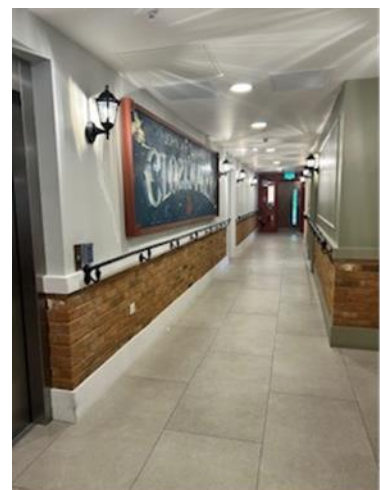
*"Better quality food and nourishing homemade meals."*

*"Only the food really."*

*"More regular staff and less agency carers, although some of the agency staff are very good."*

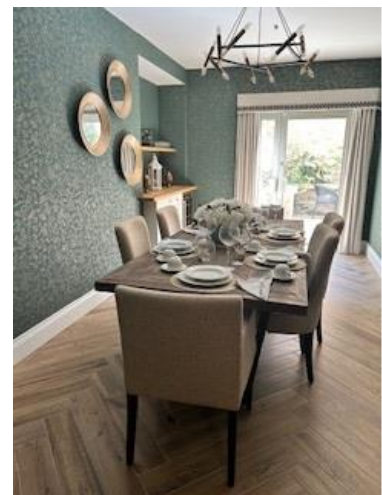
## Communal Areas

Priestly Fields Care Home is a modern and thoughtfully designed environment with a high standard of décor throughout. The building benefits from large windows allowing plenty of natural light, creating a bright and welcoming atmosphere. The home is well-ventilated and maintained at a comfortable temperature. During the visit, it was calm and quiet, with no unpleasant odours noted. Corridors are wide and accessible, with handrails and seating areas strategically



placed to support residents with mobility needs or those using mobility aids. The home was well signposted to direct residents and visitors to communal areas throughout the home. Furniture across the home is well-matched to the décor, in good condition, and suitable for the comfort and needs of the residents.

Each floor includes communal dining and seating areas, along with additional shared spaces such as a cinema room, a pub-style area, and a private dining room for special occasions. While no murals or themed displays were observed at the time of the visit, the deputy manager highlighted that communal areas are welcoming for all residents, friends, and family to use.



A notable feature is the spa bathroom, which includes a light-up ceiling to enhance relaxation. All bathing and toilet facilities observed were clean and well-maintained. Communal toilets are available on each floor.



## Residents' bedrooms



The home has a total of 66 bedrooms, with 51 currently in use at the time of the visit. All bedrooms are en suite.

Healthwatch representatives were informed by management that

residents were encouraged to personalise their rooms with their own belongings, such as photographs, furniture, and other meaningful items. During the visit, this was evident as many bedrooms displayed a range of personal touches – including family photos, favourite chairs, ornaments, and keepsakes. Some residents had chosen to have small personal fridges in their rooms.

All bedrooms benefit from a good level of natural light. Rooms on the ground floor have patio doors that open directly onto the garden and surrounding grounds, offering a pleasant outlook and easy access to outdoor spaces. On the upper floors, patio doors are also present and can be opened but are fitted with secure barriers to ensure residents' safety.

While there were no couples living at the home at the time of the visit, the Regional Manager confirmed that couples could be accommodated in the same room if required, subject to availability and individual care needs.

Residents were asked in the survey whether they felt able to make their rooms feel like their own, such as by adding personal furniture or decorations.

All residents confirmed that they could personalise their space, and several shared specific examples. One resident commented, *"Most definitely. I've chosen to bring my own shelves, chair."* Another noted they had *"pictures on the wall,"* while a third explained, *"I could, but I haven't put anything up like pictures etc."*



While the ability to personalise rooms was generally seen as positive, one resident raised a concern about the comfort of their bed, stating, *"Bed is not good in my room. My mattress is too hard. It hurts me. I have told the staff, but it doesn't change."* Healthwatch did feed this comment made by the resident back to the Regional Manager while we were at the care home and the manager made note of this and did explain it may be because they were on a profile bed and because they required a certain mattress, but that this would be looked into.

## Outdoor areas

Priesty Fields Care Home offers well-maintained and accessible outdoor spaces.

To the rear of the home, there is a secure garden area that can be accessed directly from some of the ground floor bedrooms. Residents whose rooms open onto this garden are able to enter the space independently, where appropriate. The garden is equipped with plenty of seating, allowing residents to enjoy the fresh air and spend time outdoors in a safe and pleasant setting.



At the front of the home, there is an attractively landscaped entrance garden featuring a variety of trees and flowers. This space also includes seating areas for both residents and visitors, creating a calm and welcoming atmosphere. On the day of the visit, the front garden appeared to be a particularly inviting and peaceful place for relaxation and social interaction.



## Food and drink

Healthwatch representatives were able to observe aspects of mealtime provision during the visit and spoke with the Regional Manager about the food and drink arrangements at Priestly Fields.

The Regional Manager shared that the home has its own dedicated catering staff, and all meals are freshly prepared on-site. Residents are asked to choose their meals the day before, with two main options typically available at each sitting. In addition to these, lighter alternatives such as jacket potatoes and omelettes are also offered, allowing for flexibility and choice.

The management shared that the catering staff are able to meet a range of dietary requirements. There are residents who require modified or specialised diets, including soft food, gluten-free options, and meals suitable for individuals living with diabetes. Staff are trained to ensure these needs are appropriately supported. Healthwatch noted that there was a soft option meal that had been moulded into the shape of food items that had been pureed to make the meal inclusive and more appealing.

During the visit, Healthwatch representatives saw that the daily menu was clearly displayed in the dining rooms. Lunch options that day included roast butternut squash soup and sandwiches or tuna salad, followed by sponge cake and ice cream. Healthwatch noted that the advertised lunch included a soft option available for residents requiring a pureed meal.



The evening meal offered a choice between a burger with triple-cooked chips and sweetcorn, or a ham and cheese toastie, followed by fruit salad. However, no pictorial menus were on display, which may be something for the home to consider introducing to better support residents with communication or cognitive difficulties.

Residents can choose where they would like to eat their meals. While many choose to dine in their rooms, staff do encourage the use of the dining rooms to promote social interaction. Staff were observed checking with residents whether they were ready for lunch and offering them the choice of dining room.

Snacks and drinks, including tea, coffee, soft drinks, fruit, biscuits, and cake, are available throughout the day. The home also welcomes relatives to join residents at mealtimes, particularly when residents choose to eat in their own rooms.

Healthwatch noted that there were snacks available; we saw bananas and crisps available to residents. One resident expressed that they would like to have more options for smaller meals, like cheese on toast and strawberries; they love strawberries, but they don't have them at the home.

However, mealtimes have recently been a subject of scrutiny. Some residents and family members have shared concerns, particularly around the timing of the evening meal, which some feel is served too early. Family mentioned that *"on busier days, mid-morning and mid-afternoon drinks are sometimes missed."* Additionally, residents expressed a desire for *"more fresh fruit, wholemeal pasta, and brown rice to be offered"*. One resident specifically requested *"more reduced sugar food options, such as low-sugar baked beans"*, to help manage their diabetes.

Despite these concerns, residents also reported that improvements have been made in recent weeks. Feedback indicated that food quality is improving and that the management team is determined to continue making positive changes to the menu.

Good food hygiene practices were observed by Healthwatch during the visit. Staff wore appropriate PPE while serving meals, and plates were covered when transported to residents in other areas of the home. In one instance, when a staff member was asked by Healthwatch to assist with



using the lift, they were seen removing a food-serving glove before operating the keypad, demonstrating good awareness of cross-contamination risks and appropriate infection control procedures.

**Biggest challenges...** The Regional Manager shared, “We are currently looking to stabilise the management of the home – a recruitment process is currently underway, which will offer consistency to residents and staff.”

**Biggest success to date...** The Regional Manager shared, “The home and the organisation are committed to providing support for residents and staff, we are working through the current challenges to do this.”

## Care Home Best Practice Initiatives

During Enter and View visits, Healthwatch observe which NHS care initiatives have been adopted at the care home. The three we focus on are:

<b>MUST</b> (Malnutrition Universal Screening Tool)	A tool used to identify adults who are malnourished, at risk of malnutrition(undernutrition), or obesity. It also includes management guidelines which can be used to develop a care plan.
<b>Restore2</b> (Recognise Early Soft-signs, Take Observations, Respond, Escalate)	A tool designed to help staff recognise when a resident may be deteriorating or at risk of physical deterioration and act appropriately according to their care plan to protect and manage the resident.
<b>RITA</b> (Reminiscence /Rehabilitation & Interactive Therapy Activities)	A digital reminiscence therapy with user-friendly interactive screens and tablets to blend entertainment with therapy. It assists patients (particularly with memory impairments) in recalling and sharing events from their past through listening to music, watching news reports of significant historical events, listening to war-

	time speeches, playing games and karaoke and watching films.
--	--

Priesty Fields uses the Malnutrition Universal Screening Tool (MUST), RESTORE2, To support mental stimulation and wellbeing, the home uses OOMPH!, a digital interactive program similar in concept to tools like RITA or the Magic Table. The home maintains a working relationship with the End of Life Partnership, which they described as supportive and responsive.

## Recommendations

- To address concerns about the timing of evening meals and the provision of drinks. It is suggested that the home reviews mealtimes to ensure they are more aligned with residents' individual needs and preferences. Adjusted mealtimes could be introduced to cater for residents who may prefer later evening meals.
- A system should be implemented to ensure that mid-morning and mid-afternoon drinks are consistently provided, even during busier times.
- To continue the positive progress regarding food quality. It is recommended that the kitchen team works more closely with residents and their families to refine meal options based on specific dietary preferences and health requirements. This could involve introducing fresher, nourishing, homemade meals with a reduction in processed foods. Additionally, incorporating more wholemeal options, brown rice, and fresh fruit could better cater to residents' dietary needs. Regular taste testing or feedback sessions with residents and families could be held to ensure satisfaction and provide an opportunity for residents to voice their food preferences directly.
- A food improvement committee made up of staff, residents, and family members could ensure that residents' dietary needs are being met in a more personalised way.

- Display pictorial food menus throughout the care home for residents to freely view. There are many benefits, particularly for residents living with dementia or cognitive difficulties. They improve food choices, enhance mealtime experiences and contribute to better nutritional outcomes.

### What's working well?

- Many residents and their families expressed satisfaction with the staff's care and attitude. The staff were described as caring, attentive, and always willing to help. Several residents stated that they felt well cared for and appreciated the personal connections with staff.
- A variety of activities are offered, and many residents enjoy the options available, such as trips out, group activities, and individual time with staff. Staff are seen as working hard to keep residents engaged, and many appreciated being informed about upcoming events.
- Residents are allowed to personalise their rooms which many appreciate as it makes them feel more at home.
- The maintenance and housekeeping standards at the care home are excellent, Healthwatch noted that the home was clean, tidy, and well-maintained.

## Service Provider Response

We received the following feedback from the Manager on 1/08/2025

### **Recommendation 1**

To address concerns about the timing of evening meals and the provision of drinks. It is suggested that the home reviews mealtimes to ensure they are more aligned with residents' individual needs and preferences. Adjusted mealtimes could be introduced to cater for residents who may prefer later evening meals.

### **Service provider's response.**

The home has recognised the need to improve the food and has been working closing with the residents and a regional chef to develop a

menu plan with range of snacks and drinks to support the resident's preferences.

### **Action**

There has been a food committee introduced with the residents taking the lead in planning menus, giving feedback on different food options. The food options on the daily menu also have a range of optional foods to increase choice and a description of foods pureed and low sugar for alternative meal plans.

One lady has changed her breakfast time by 2 hours to support her earlier morning wake up time.

A selection of drinks requested by residents has been shared with the chef.

The Activity team are changing their hours to facilitate the pub opening two evening a week to support residents who would like to visit for drinks and snacks with relatives and friends.

### **Recommendation 2**

A system should be implemented to ensure that mid-morning and mid-afternoon drinks are consistently provided, even during busier times.

### **Service provider's response.**

The numbers in the home have reduced and care staff are presently providing drinks mid-morning and mid-afternoon.

### **Action**

At present the staff are providing a drinks trolley mid-morning and mid-afternoon, with a selection of cakes and snacks from the kitchen for afternoon.

During busier times Activity staff are supporting to ensure that people are offered a selection of drinks and in warmer weather have been supporting with a mocktail trolley for special tropical drinks, selection of iced lollies and ice creams.

**Recommendation 3**

To continue the positive progress regarding food quality. It is recommended that the kitchen team collaborates more closely with residents and their families to refine meal options based on specific dietary preferences and health requirements. This could involve introducing fresher, nourishing, homemade meals with a reduction in processed foods. Additionally, incorporating more wholemeal options, brown rice, and fresh fruit could better cater to residents' dietary needs. Regular taste testing or feedback sessions with residents and families could be held to ensure satisfaction and provide an opportunity for residents to voice their food preferences directly.

**Service provider's response.**

The food committee will continue to monitor the food and give feedback.

**Action**

2 monthly meeting with the food committee, this is lead by residents and attended by the chef to gather feedback and make requested changes to the menu.

There are options for brown rice or white rice been offered.

The chef visits residents who have poor appetite, return from hospital, have wounds, or would like a visit to plan specific meals and gather feedback on a range of meals including modified meal plans.

Individual selections of fresh fruits are taken around the home to support healthy eating and nutrition.

Homemade cakes are now available; shortbread biscuits have been requested by residents and shared with the chef.

There are two new chefs in the process of on-boarding strengthening the kitchen team and new menus have homemade options which have been requested by residents.

**Recommendation 4**

A food improvement committee made up of staff, residents, and family members could ensure that residents' dietary needs are being met in a more personalised way.

**Service provider's response.**

The food committee commenced in June and is led by residents interested in improving the food and open to relatives' participation, there were two relatives participated in June and residents who have an interest in menu planning and gathering feedback on people's experience. There were residents attending from different modified meal plans to enable a range of different experiences to be shared.

**Action**

Two monthly food committee, chaired by one of the residents meeting to share experiences of changing menus and suggestions for meal planning.

Quality of Food Survey to gather feedback from everyone planned for August.

**Recommendation 5**

Display pictorial food menus throughout the care home for residents to freely view. There are many benefits, particularly for residents living with dementia or cognitive difficulties. They improve food choices, enhance mealtime experiences, and contribute to better nutritional outcomes.

**Service provider's response.**

Blue pictorial food folders have been created for dining areas on Harecastle and Westlow.

**Action**

Staff supporting residents with choices of meals to improve the mealtime experience for individuals living with dementia, staff

supporting with recognition of foods through visual and memory recall and supporting independence and enjoyment of meals.

### **Any other feedback from the Service Provider**

The home has an improvement plan in place focused on quality improvement, enhanced collaboration with other professionals and regulatory agencies. The whole team at Priestly Fields is committed to continuous improvement, empowering residents to take the lead and get involved, sharing of information and feedback to create a positive culture within the home. The home is open and transparent in what we need to do, focusing on the issues that arise and listening to feedback, reviewing the effectiveness of clinical and operational governance.

We acknowledge that residents, families, external professionals, and staff are all central to improvements, securing their involvement and keeping them informed of progress is key.