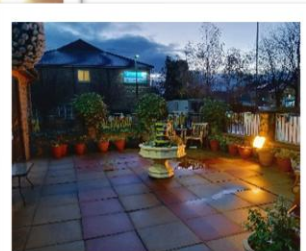


Enter and View Report

Location of visit	Aden Court Care Home Birkhouse Lane, Moldgreen, Huddersfield, HD5 8BE
Service provider	Hill care
Date and time	Tuesday 18 th November, 1-4pm
Authorised Representatives	Katherine Sharp, Andrew Hare, Lucy Worne.
Contact details	Healthwatch Kirklees, Tel: 01924 450379 Email: info@healthwatchkirklees.co.uk



Contents

Contents.....	2
The service	3
Why did we visit?	3
Staffing and resident numbers.....	3
What we did.....	3
Overall impressions	4
Health and Safety	7
Independence, choice and dignity.....	8
Socialisation, activities and entertainment.....	10
Food and drink	12
Visitors to the home	13
Staff at Aden Court Care Home.....	13
Health professionals supporting the home.....	17
Conclusion	17
Recommendations	18

The service

Aden court care home is a two-story purpose-built home in Moldgreen, Huddersfield. It provides residential, nursing, dementia, and end-of-life care, for up to 40 residents. They work closely with Kirkwood Hospice.

The home is positioned near a main road but is in an accessible area with the GP practice to the side of them, local hairdressers and small convenience stores and pub opposite the home.

Communal areas are positioned on the ground floor with residents' bedrooms on both floors. There is a small car park at the front of the building.

Why did we visit?

This was a planned, supportive visit as part of our ongoing programme of work in adult social care settings. We aimed to gather feedback from residents, staff, and visitors to better understand life at the home and highlight what is working well and what could be improved.

Staffing and resident numbers

At the time of our visit, the home had 37 residents. Staffing levels included 15 staff members, Care home manager, 1 administrator, 1 nurse, 1 senior carer, 5 carers, 1 cook, 1 kitchen assistant, 3 domestics, 1 maintenance worker.

What we did

We carried out a prearranged visit which took just over 3 hours. We visited the communal spaces, and spoke with residents, visitors and staff.

The visit was informal, and we had conversations about safety, independence, choice, dignity, food, dining and activities. We also invited feedback via our feedback box positioned at the entrance, and a survey for

individuals who were unable to speak to us on the day, and this was made available for one week following our visit.

We spent our time speaking to individuals in lounges and communal areas. Any residents wishing to speak to us in their rooms we talked to them in pairs. We also used our senses to note our impressions of the home (the '5 senses' approach). All residential areas were visited after lunch.

Overall impressions

On arrival at Aden court, we were met at the door, asked to sign in, and greeted by the manager and senior staff member. We were then introduced to residents and staff in the dining room.

As the manager had something to attend to, a staff member showed us around the building. We were told that residents in their rooms may wish to speak with us, and we were introduced to them, as well as any visitors or staff, as we moved through the home.

The home felt calm, the temperature was comfortable, and the environment was clean and free from clutter. There were no unpleasant odours. The décor was neutral and light, with a mixture of pictures and artwork displayed. A few positive quotes were visible on walls, and there were mirrors, and clocks on display. Books were available in various areas for residents to pick up and read. We were told that residents have a choice in the décor of the communal areas and can choose the pictures when redecorated. No dementia-friendly clock was observed.

Upon entering the home, there was an open seating area with chairs arranged around the perimeter. This space was bright and airy, decorated with autumnal decorations. Background music was playing; it appeared to be pop music, and we wondered whether it was chosen by staff or residents. One member of our visiting team found the volume slightly high for easy conversation. Throughout the visit, we saw residents and visitors using this space. One resident was asleep in a chair in this area, and later

a resident sat with their relative, who told us, *"We like it here, and sit often in this area."*

Staff team photographs were displayed near the entrance along with a printed newsletter for visitors to take. The manager explained that although newsletters are emailed to relatives, printed copies are available for those without internet access. A large activity board was also displayed; however, it was empty except for information about the hairdresser's visit on Tuesdays.

A staff office was positioned opposite the entrance, allowing staff to respond quickly to front-door queries. During our visit, staff working in this office were also supporting a resident and offering comfort.

All communal resident areas were located on the ground floor. The large dining room is used for communal meals, and residents were still finishing lunch when we arrived. The space appeared accessible, with plenty of room to move comfortably between tables. The main lounge was L-shaped and extended into a smaller, open-plan space, making movement between areas easy. Chairs were arranged around the room, and in the narrower section we saw that the more mobile residents seated together near the window. We wondered whether a different layout might encourage more social interaction. A variety of chair types were available, including those with armrests and space for wheelchairs. There was also a quiet lounge, called 'café at ease', for residents and visitors to use.

The flooring was a wipe-clean laminate, which offers practical benefits but slightly reduces the homely feel. Vintage-style wall and ceiling lights complemented the décor, although many lacked shades, making the lighting appear bright and stark. The bunting displayed added a friendly, vintage touch.

The activity room was not in use during our visit. It contained a wide selection of games and puzzles, as well as a small "lock up' Aden Court" shop. We were told that this will be used again once the new activities worker is in post, and that the shop usually sells various items for residents, including Christmas cards in December. A notice board in this room

displayed a certificate for 'Adopting a tiger', showing the home's contribution to conservation efforts. Dates for resident and relative meetings were also displayed here, although the font was quite small.

Another notice board near the lift on the lower ground floor displayed information about the housekeeping team. We were unsure why this information was separate from the main staff display in the foyer.

A wheelchair storage area was situated on the ground floor. In the same area, a staff appreciation board displayed the "stars of 2025", with certificates recognising staff achievements. The manager later told us that winning staff receive a prize. Another activity notice board in this area was also empty.

Residents' bedrooms were located on both floors. The first floor was accessed via a lift, which was suitable for all residents, and a staircase secured with a sliding lock resembling a wooden child gate.

The home does not have extensive outdoor space. There is a small area at the front, mainly used in summer by more mobile residents with capacity. The manager told us that residents enjoy "people watching" from here. A couple of small areas around the building are used for growing vegetables and plants, and some residents get involved. We did not view the outside area during this visit.

A resident told us they would recommend living at the home if there were more staff available to spend time chatting with them—not just responding to call bells—but added that they understand staff are busy.

A visitor shared that they initially feared their loved one might die due to their poor health on admission, but said, **"because of the level of care, she's really rallied."**

They went on to say that **"The feeding and temperature have been great, so sleeping has improved,"** and explained that staff respond quickly when the call bell is used and is accommodating with food and supporting medical requirements. Another visitor rated the home **5 out of 5 stars,**

adding, ***“I would say 5.5 or more really,”*** showing how happy they felt with the care provided.

Visitors told us their thoughts about the home

- ***“Mum likes it here”***
- ***“no-one wants to come to live in a care home, I moved my mum here – It felt nice, I had looked at others”***

Staff explained about working at the home

- ***“Never boring here, always something going on”***
- ***“It’s busy every day, assisting them (residents), but it’s a nice feeling helping, it makes me happy”***
- ***“Lovely here, but its stressful”***
- ***“It’s not just work; I want to help”***

Health and Safety

We were told that there were no areas out of use on the day of our visit due to infection control or any fire safety checks or alarms due. Antibacterial hand gel was available in wall-mounted dispensers along all corridors and outside communal areas.

A lockable gate was fitted at both the top and bottom of the stairs to reduce the risk of falls.

All residents we spoke to told us they felt safe living at Aden Court. Visitors and staff also described the home as a safe environment. Residents were well dressed and appeared well cared for. At one point during our visit, we saw a staff member adjust a resident’s clothing to protect their dignity.

The care home works closely with Kirkwood Hospice, which means they support residents requiring palliative care. The manager explained that staffing levels are adjusted to ensure the right ratio of staff to residents, particularly when additional support is needed. At times, this may mean declining new admissions even if the home is not at full capacity (40), to ensure residents with high needs receive appropriate care.

We spoke to a volunteer who told us that before starting their role, they attended an interview, provided references, and underwent a DBS check. This was reassuring and demonstrated that safety checks are applied consistently across the whole team.

Quotes from Residents.

- “Well looked after” when asked how they felt living at the home

Independence, choice and dignity

The manager explained that residents are involved in decision-making within the home, including choosing wallpaper, selecting pictures for communal areas, and helping to decide what entertainment to book. A couple of residents also take part in staff interviews and ask questions on behalf of the wider resident group. The manager highlighted the importance of this involvement, as residents need to feel comfortable with the staff who support them.

Residents and relatives’ meetings are held monthly. We noticed that the poster showing the dates and times was displayed in the activities room and printed in a small font. We shared our observations with the manager, who took this feedback on board.

All residents have a person-centred care plan, and independence is encouraged through adaptations that meet individual needs. When new residents move in, staff monitor how they are settling and adjust support accordingly. In some circumstances, families may be asked to pause visits for a couple of days if this helps a resident adjust. This is approached on a case-by-case basis.

A staff member told us that residents’ views guide decisions within the home. For example, when a solo saxophonist visited to ask if the home would be interested in booking them, the manager explained that they would first consult with residents before arranging anything. The staff member stressed that residents’ opinions are important. The manager later confirmed this approach.

Important communal rooms, such as toilets, bathrooms, the activity room, and lounges, had clear picture signage to support orientation.

It was positive to see that residents who are mobile can move independently between floors, using the lift or stairs. Although the staircase has a lock system for safety, there are no access codes to remember.

During our visit, we saw a resident in the lounge who was quite vocal. Staff did comfort them, but there was a slight delay because other residents' needs were being met at the same time. Some residents told us that delays in answering call bells can affect their dignity. A staff member also mentioned that residents have highlighted occasional delays with answering call bells at night.

There were a few other minor concerns shared by residents. One resident mentioned a problem with toenail cutting; we raised this with the manager, who said they would follow up directly with the resident. Another resident asked when their flu jab would be given. We were told that flu vaccinations are either provided at the home or across at the GP surgery.

Most residents we spoke to seemed satisfied with their independence and choice. A few residents expressed that they would prefer not to be in a care home but understood the need for 24-hour support. One resident hoped to receive physiotherapy for their mobility but was unsure whether this was available through the home. A resident told us that the way staff handle them was sometimes not as gentle as they would like but said their care felt safe; this was raised with the manager at the time of our visit and followed up appropriately afterwards. Another resident felt that some aspects of their personal care, such as washing, could be delivered more thoroughly at times.

One resident told us that although they initially did not want their hair done during the hairdresser's visit, staff encouraged them, and they felt better afterward. Residents are not required to have their hair done, even if booked in; the choice remains theirs. There is a cost for hairdressing, but the manager explained that the home helps residents who have limited funds by covering the difference.

Another resident shared concerns about laundry, saying that some clothing had been misplaced or lost after going to the wash. Their family had brought in more clothes. The resident said they felt they had *“almost nothing left to wear.”*

The home does not accept pets living on the premises. The manager explained that this is due to allergy concerns, hygiene considerations, and the responsibilities involved in caring for animals.

Quotes by residents

- *“I don't have much independence here, but I can decide when to get up and if I want to go back to bed during the day. We do get a choice of meals”*
- *“Feel clean and comfortable,*

Socialisation, activities and entertainment

The home does not currently have an activity coordinator, but someone has recently been recruited and is awaiting final paperwork before starting. In the meantime, staff have been sharing responsibility for providing activities. One staff member told us that although they are without an activities coordinator, other staff have stepped in where possible; for example, they recently organised a movie afternoon.

Other activities that take place at the home include:

- growing vegetables
- nail painting
- weekly visits from the hairdresser
- a coffee morning open to visitors, relatives, and residents
- playing dominos
- visits from local schoolchildren at Christmas to sing
- foot clinic appointments

One staff member told us that activities still take place *“sometimes,”* explaining that since the previous activity worker left, the senior carer will also provide activities when they can. Several people praised the previous

activity worker, saying they *“went over and above”* and offered a wide range of things to do. It was clear this individual will be missed.

A volunteer visits weekly for three hours to chat with residents who are bedbound or spend most of their time in their rooms. Their role has changed slightly, as they previously supported with group activities as well. There are limits to what the volunteer is able to do to support, as they are not permitted to push wheelchairs or support residents with toileting.

During our visit, the volunteer was spending time with residents upstairs. A staff member told us they felt that more social opportunities and entertainment were needed, particularly for residents on the upper floor who would benefit from mixing more. One resident on the ground floor, who spends most of their time in their room, told us they *“only see staff around every 4 hours.”* They were happy with the care they received and felt safe but wanted more social interaction.

The well-stocked activity room was not in use during our visit. Both activity notice boards were empty, apart from the word “hairstylist” on Tuesday. We were told the hairstylist had visited that day.

Many residents told us they would like more activities. They mentioned that they used to have more opportunities, including chair aerobics, crafts, and entertainment such as a singer at Christmas. These activities had been enjoyed in the past.

Residents' quotes

- *“There are no activities anymore”*
- *“Some of the residents you can't talk to, but I have made some connections with people here”*

Visitors quotes

- ***“Used to have lots of activities but now it's nothing. They need somebody to motivate them”.***

Food and drink

Food is cooked fresh at the home, and residents can choose where they prefer to eat, whether in the dining room, the lounge, or their own bedrooms. The home has protected mealtimes, although this is adapted to individual needs. Some residents eat better when family members join them, while others prefer different arrangements. The manager explained that they aim to support residents and families as much as possible, including helping with birthday celebrations or providing funeral teas. With advance notice, families can eat with residents if they wish.

A staff member told us that the chef is very diligent and ensures that residents' dietary needs are met, with all meals cooked in-house. Another staff member said that any dietary requirements or changes are communicated during handovers and safety huddles. They added, *"The chef is good at this."* Staff also told us that residents choose their meals and can request alternatives if needed, and that puddings—especially sponge pudding and ice cream—are very popular among residents. Staff we spoke to felt that the food was good, one saying they enjoyed them, especially the homemade biscuits.

Residents gave us mixed feedback about the food. Most said they were happy or indifferent about the meals served. A few residents felt things could be improved, mentioning combinations such as pasta and potatoes being served together, which they felt was *"not right,"* or explaining that their relative brings in food they prefer. A couple of residents also commented that the coffee at the home could be better. A visitor pointed out that the 'café at ease' room does not have a coffee-making facility available when used for get-togethers. Another visitor felt the vegetables had changed from fresh to frozen. When we asked the manager, they told us the vegetables were fresh. Residents confirmed that they are offered choices at each mealtime. One resident commented that, *"The food is awful here"*

A visitor told us they are sometimes invited to eat at the home and said it was, *"great food here,"* explaining there are usually two to three main choices. Another visitor whose relative struggles with eating said that their

loved one's weight is monitored closely and that they feel they are **"checked and looked after well."** They added that alternative options are offered if the standard menu choices do not suit their relative

Visitors to the home

The manager told us that the home operates an open-door policy for visitors. Many visitors will pop in and speak with the manager informally to share their thoughts or feedback. The home also tries to gather feedback through surveys, although the response rate is often low. Visitors are invited to attend the monthly relative meeting.

A staff member explained that when a resident is at the end of life, 24-hour access is offered to families to make this period as supportive as possible. The manager told us that they hold open conversations with families and provide an end-of-life box containing information about what to expect and the next steps. When a resident passes away, visitors are sent a card with flower seeds as a thoughtful gesture.

During our visit, the home appeared busy with visitors. Several were happy to tell us about their experiences. One visitor said, **"it's great here,"** explaining that they feel welcomed and that the home is a great place for the residents. They commented that they can visit at any time, saying, **"I'm always here,"** and laughed as they added that they are included in Christmas celebrations.

Staff at Aden Court Care Home

Staff interactions with residents, and with each other, were positive and respectful throughout our visit. Staff appeared friendly, smiling, and willing to speak with us. Many told us they had worked at the home for several years. Staff were visible in the downstairs lounge and dining areas, though less visible on the first floor, where residents are bedbound or tend to remain in their rooms. We did see staff occasionally entering residents' rooms to provide support, and a volunteer was spending time talking with residents on this floor. All staff wore uniforms; volunteers did not.

Staff feedback about working at Aden Court Care Home

★ **4.3**/5
Average Rating

Staff rated the overall service
for residents living at the home as
4.3 out of 5

Do staff feel they have time to sit and chat with residents?

- "Yes, two minutes, it would be nice to have more"
- "Yes, time to stop and talk, it's like spending time with your own grandparents"
- " Yes, I make the time to speak to them"
- "In the morning, no, there's not ample time as getting residents up, supporting to wash and dress. Busy part of the day, after dinner time we can talk to them."



Staff comments

"There is a harmonious relationship
between staff and management"

"Everyone is selfless"

" I know the residents well"

"We are not perfect, but we help and
give the service they(residents) need"

"I have amazing staff,"
said the manager

★ **4.3**/5
Average Rating

Staff rated working
at Aden Court care
home **4.3 out of 5**

A volunteer described why they chose to support the home: ***“I used to come back to see residents my mum had become friends with and then decided to volunteer, not straight away, it was a while afterwards.”*** It was clear the home held personal meaning for them, and they wanted to give something back.

Staff and residents appeared to have a good rapport. We observed several positive interactions, including:

- a respectful transfer of a resident from a chair to a wheelchair, with gentle handling and friendly conversation
- a staff member ensuring a resident’s clothing was straightened to maintain dignity
- a staff member checking with a resident and their visitor that the resident was ready to be supported after lunch

New staff members are supported by a link worker who stays on shift with them for the first few days, particularly during daytime shifts. This “buddying” approach helps them feel supported as they settle into the role.

The manager told us that because the care home works closely with Kirkwood Hospice and provides a significant amount of end-of-life care, they ensure staff are supported following a resident’s death. The team has open conversations about death and dying, and “wobble meetings” are held to offer emotional support. They also make sure other residents are supported and, where appropriate, are taken to funerals. A volunteer told us that it can be difficult when residents pass away, as they build strong relationships; they said they would ask for support if needed.

Staff and volunteers described the management team as approachable and supportive, saying they felt comfortable speaking with senior members of staff. One staff member mentioned that the office door is open when they need to talk. Another told us they know who to report issues or concerns to and feel confident doing so, adding that when they had raised comments in the past, they had seen actions taken. Another

staff member said they had spoken with a senior about concerns raised by residents regarding handling and night staff being a little abrupt.

We were told that the home has low staff turnover and rarely uses agency staff. Staff meetings are held, but attendance is not compulsory if staff are not on shift.

Staff commented that resident needs have increased significantly in recent years, with more requiring nursing-level support rather than mainly residential care.

When asked what works well at the home and what could be improved, staff shared the following positive points:

- there is a nice atmosphere
- the staff team is supportive
- residents and colleagues are friendly and warm
- staff feel they provide a good service
- the home is clean and free from unpleasant smells
- staff are compassionate and work well together
- residents often make staff smile, with “funny situations regularly”

Some staff felt that communication between day and night teams could be improved, and one noted that stronger teamwork across shifts would be beneficial.

Another staff member said ***“We make a difference, it’s good with the people you work with”*** commenting on their co-workers

Staff highlighted two main improvement areas:

- additional staffing to support residents’ increasing needs
- restarting activities, as these are currently limited

A resident said, ***“Most of the staff are great and attentive to my needs. I feel safe and comfortable. Some of them can be a bit abrupt but OK once you get to know them and understand their mannerisms”***

Visitors' comments about staff at the home

- *"The staff are friendly and I'm confident they are looking after her efficiently"*
- *"Staff are great and they know her, and I know them"*
- *"Lisa the manager is fantastic"*

Staff members comments

- *"Lisa is amazing manager, goes above and beyond to look after us"*
- *"Very supportive manager"*

Health professionals supporting the home

The care home works closely with The Junction GP service, located across the road. Staff told us this partnership works well. The GP completes a weekly ward round, carries out morning visits, and can easily pop across to see a resident, or residents if able can attend the surgery. The manager said the doctor *"goes above and beyond."*

Other health services supporting the home include:

- **Optical and hearing services:** Provided by Specsavers, which staff said works well.
- **Dentistry:** This is the most challenging service to access. Locala has a long waiting time, and if residents have their own dentist, they can only attend appointments if they are physically able to travel. Long waits can lead to issues, particularly if dentures no longer fit properly, which can affect residents' ability to eat. Healthwatch has passed on the details for Huddersfield Dental care centre for the home to explore whether this service could offer support.

Conclusion

Aden Court seemed like a happy and calm place to live. Residents seemed relaxed, and the staff interactions we observed were kind and

Enter and view visit to Aden Court Care Home, 18.11.25.

considerate. At times, we did notice delays in responding to residents' needs when staff were occupied with other tasks, and some residents reflected that having more staff would help them receive support more quickly.

We hope the new activities coordinator is able to start as soon as possible. While staff were doing their best to offer some activities, it was clear that residents would benefit from more structured and consistent opportunities for meaningful occupation each day.

We were pleased to see that a volunteer is offering social interaction for residents who are bedbound or who prefer to stay in their rooms. We wondered whether the home might explore involving more volunteers to extend this support.

Overall, we found the visit to Aden Court positive, and we left with a good impression of the service. The manager was open to feedback and appeared well respected by staff, who told us they feel supported in their roles.

Recommendations

Recommendations	Managers comments
We recommend the appointment of the activity's coordinator is essential, as residents need regular motivation and engagement. During periods of leave or absence, consideration could be given to allocating a specific staff member to step in and provide continuity. We also wondered whether, during this transition period, it may be helpful to keep the lounge doors open to the activity room, with activities set up and readily available on the large table to encourage use of the space.	<p>Our activity person started with us 24.11.2025, she is budding up with Longroyd pilings activity person. (sister home)</p> <p>We are looking to train member of staff up, as job 2 as an activity person to cover when on A/L</p> <p>The doors to the activity lounge are closed as families like privacy in the quiet lounge, they can be</p>

Recommendations	Managers comments
	<p>open when there no one in the lounge.</p> <p>I have spoken to our new activity person to have activity out on the table for our residents to do if they choose.</p>
It was encouraging to see the home holds a resident and relative meeting monthly. It may be useful to consider where this information is displayed, as the current poster could benefit from being placed in a more prominent location and printed in a larger font.	Going forward meeting dates and minutes will be in bigger bolder print.
We feel to increase opportunities for social interaction with staff, the home may wish to explore whether staff could occasionally sit and eat with residents on a rotational basis (for example, once a week or once a month). This could create a structured opportunity for conversation and connection. 'Staff chat and sittings session'	Good idea for staff to eat with our residents, I will too, this will be put in place in the New Year.
We recommend that the Information boards—particularly the activities board and newsletter—should be updated regularly. Given the number of different notice boards around the home, it may be worth reviewing whether all are needed or whether some could be combined to make updates more manageable.	The activity board was not up to date, with having no activity person.
Due to resident feedback about lost laundry, it may be helpful to review the	We have checked peoples clothing and all are labelled.

Recommendations	Managers comments
current laundry process. If labelling residents' clothing is encouraged, the home could consider providing families with information about durable labelling options.	