



**Enter and View Report**



**Hartford Hey Residential Home**

**Parkgate**

**24<sup>th</sup> March 2026**

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## Report Details

<b>Address</b>	Manorial Road South Parkgate South Wirral CH64 6US
<b>Service Provider</b>	Hartford Hey Ltd
<b>Date of Visit</b>	24th March 2026
<b>Type of Visit</b>	Enter and View
<b>Representatives</b>	Lex Stockton Tricia Cooper Peter Folwell (volunteer)
<b>Date of previous visits by Healthwatch Cheshire West</b>	5th November 2018

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.

## Hartford Hey Residential Home

Hartford Hey is a privately owned residential home which is registered for 28 residents, although in practice the providers restrict intake to 25, as three designated double rooms are mainly used as larger single rooms. At the time of the visit 15 rooms were occupied. The home comprises two former semi-detached, four-storey Victorian houses which have been converted into a single residence. Residents are a mixture of Cheshire and Wirral funded and self-funded individuals.

The home is located in a quiet, secluded residential street, close to the Dee estuary and within easy walking distance of local facilities.

Healthwatch received nine friends/relatives' surveys and nine residents' surveys on the day of the visit, which are referred to within this report.

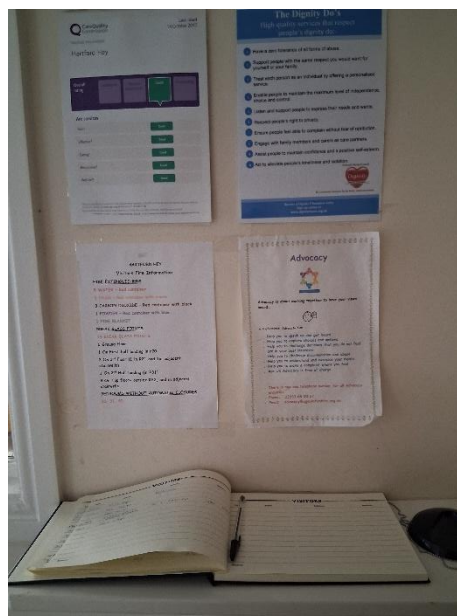
# Findings

## Arriving at the care home

### Environment

The home was easy to locate using Satnav with ample parking in the car park or on the adjacent road. The front grounds were well maintained and the sign for the home was visible from the road.

The original entrance is no longer used and there is signage to take you to the current entrance which is located in an extension of the property. The doorbell was answered promptly, and we were welcomed into a narrow corridor where a range of posters and information were displayed. We were asked to sanitise our hands using the dispenser provided; although it was initially empty, it had been refilled by the time we had completed the signing-in process, allowing us to use it before beginning our visit.



The visitors' sign-in book did not include a space for recording sign-in and sign-out times.

## Treatment and care

### Quality of care

Management informed Healthwatch that historically residents could stay registered with their own GP; however, this changed when the GPs from the three local surgeries, two in Neston and one in Willaston, agreed to provide care on a shared basis, with each surgery taking responsibility for two care

homes. This decision means that residents are now supported by the designated GP practices rather than their original doctors.

The home uses Neston Medical Centre with whose staff they have a “marvellous” relationship. The GP carries out health checks once a month, and a paramedic and nurse practitioner visit whenever the home has a concern about a resident’s health. They will then talk to the GP if they think treatment is needed or if they have any concerns.

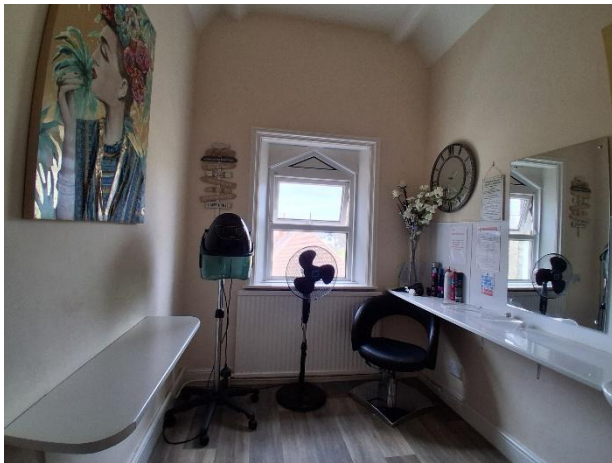
When considering whether a resident, who becomes unwell and needs additional care, can remain at the home or would normally require hospital admission, management explained that they have full support from the community nursing team, who are able to visit daily when necessary. They reported that district nurses provide further input by managing a range of health needs, including skin care, severe constipation, and the administration of blood-thinning injections. Management referred to the home as having good clinical support that they can call upon.

When exploring the recent experience of hospital admissions and hospital discharge at Hartford Hey, management explained that long waiting times in hospital corridors have contributed to the current approach: *“We find there’s a reluctance from the GP to send residents to the hospital because of long waits in the corridor. If Hospital at Home has got availability they will come and treat residents here. We also respect the wishes of residents and will have a conversation with family regarding the best course of action for their loved one. Eg, to go to hospital for the shortest time possible, to receive medication.”*

Hartford Hey primarily uses Arrowse Park Hospital. In considering whether anything could reduce hospital admissions and improve discharge, staff reported that improvements are needed in the consistency of paperwork provided on discharge. They highlighted that discharge forms and DNR documentation are not always returned with residents, and that important documents, such as MARS (medical administration records) handed to paramedics, have previously been misplaced by the hospital.

With regards to obtaining sufficient dental care for residents when needed, staff explained that they have access to an emergency dental line that can be contacted if a resident has an urgent issue. They noted that they have not yet needed to use this service; however, they highlighted that *“Most dental issues are urgent with residents who are in their 90s. It affects their drinking and eating, and their ability to take oral medication.”* Staff also reported that some residents have dentures which require resizing, and in these cases, family members usually arrange this for them.

The home confirmed that a hairdresser visits regularly, attending once a week on a Wednesday to provide hairdressing services for residents. The



home has a permanent salon which is very nicely decorated. Staff also reported that a podiatrist visits every five to six weeks to support residents' foot care needs. Both hairdressing and podiatry are at additional cost to the resident. In relation to opticians, the home has an established relationship with

Specsavers, who visit the home and are described as very good, with several residents using them regularly. The home is linked to Galen Pharmacy in Neston for medication supply. In addition to these services, staff explained that practice nurses carry out annual reviews for each resident, including checks on blood pressure and weight to ensure medications are not having negative effects. District nurses and community physiotherapists also attend when required, particularly to support residents who have been discharged from hospital and may have reduced mobility as a result.

During the visit Healthwatch observed residents using the smaller communal lounge and dining room. They appeared clean, well-presented and dressed appropriately for the season.

## Privacy, dignity and respect

Management described how privacy, dignity and respect are promoted within the home. They explained that every new team member completes shadow shifts, during which they are shown the expected standards of respectful practice, including always knocking on residents' doors and waiting for a reply before entering. Staff delivering personal care take time to understand each resident's individual preferences, ensuring support is delivered in the way that person wishes. It was noted that some women do not wish to receive personal care from male staff, and this preference is respected. As a manager stated, *"The choices are the residents."*

A comment from a relative/friend, *"The resident can go to their room anytime. There is a call bell in the lounge if anyone needs assistance. There are pressure mats in the bedrooms where necessary and staff respond to these promptly."* Another noted, *"The staff always knock on my mum's door before entering. They are lovely when they deliver personal care and talk to mum throughout."*

Residents and friends/relatives reported 100% agreement with the following questions relating to quality of care:

Do you feel ...	Yes	No	Sometimes	Don't know
cared for	100%	0%	0%	0%
safe	100%	0%	0%	0%
respected	100%	0%	0%	0%
your dignity is maintained	100%	0%	0%	0%
you have privacy	100%	0%	0%	0%

The home also outlined the support available to ensure residents have access to alternative communication systems and accessible information. Hartford Hey accommodates a number of visually impaired residents and provides aids such as magnifying glasses, larger print menus and other enlarged documentation. In addition, hearing aid support is available through Neston Clinic for those who require it.

During the visit Healthwatch representatives noted that staff spoke respectfully to residents and interacted in a very friendly, caring manner.

### Understanding residents' care plans

The management explained that residents' care plans are currently paper-based and are reviewed every three to four months, with immediate updates made if any changes occur. They reported that although digital care plan systems have been explored previously, the timing had not been right to progress. However, they shared that a demonstration of a digital system is planned for later this year, with the intention of moving towards a digital approach.

The home described how residents are involved in shaping their own care plans. As part of the admission process, *"When a resident arrives here, they sign consent forms and have a support assessment plan. A care plan is then written in first person, which the resident will read and have the opportunity to amend. We want to get it right for the person."* (HR Manager)

Staff also confirmed that relatives are involved in their loved one's care plan where appropriate.

## Relationships

### Interaction with staff

Relationships between staff and residents were described by managers as very positive with friendly and humorous interactions in a home that operates very much like a family due to being a small independent service. They reported an easy-going atmosphere in which everyone gets along well.

Management also explained that relationships between staff and residents' friends and families are equally strong, with open communication and familiarity developed over time. Friends and relatives are able to contact the home at any time of the day or night if they have concerns, including situations where their loved one may, for example, be reluctant to take medication.

*A relative commented, "The staff are lovely. Having looked around a few this one has a nice atmosphere, lovely staff and the food is lovely. Staff constantly check on my relative and I have observed they are very attentive. As a visitor I am always welcomed and offered a drink when I arrive."*

Staff confirmed that name badges are not worn within the home, as all residents know the staff by name.

In discussing the use of agency staff, the home stated, "We have had to use agency staff at times but currently we do not need to". When agency workers are required, Hartford Hey requests the same individuals to ensure continuity for residents.

To maintain training standards among agency staff, the agency provides detailed staff profiles, including completed training courses. Healthwatch was shown an example of an 'Employee Profile' provided by Nurseplus.

During the visit Healthwatch representatives spoke with a carer as she was serving lunch to residents in the dining room. She described the home as very friendly and caring and said she enjoyed working there.

An example of positive teamwork between staff was observed during the visit when a manager, who was speaking to Healthwatch representatives, needed to step away to administer Parkinson's medication. The acting manager immediately stepped in to continue answering our questions which ensured the resident was prioritised.

One of the managers who showed Healthwatch representatives round the home, knew residents and visitors very well and was very personable and caring in her interactions.

### Connection with friends and family

Friends and relatives are able to keep in touch with residents in a variety of ways. Some residents have their own mobile phones, and a couple use iPads. In addition, the home provides a cordless office phone that can be taken to residents when needed. Friends and family visit regularly, and visiting was observed during our visit.

Hartford Hey operates a very flexible visiting policy. Visiting can take place anywhere within the home and at any time that suits the relative, with no requirement to book in advance.

If friends or relatives wish to raise a complaint, concern or provide feedback, a manager explained that they will usually approach a member of the team directly. *"We'll look into any issues and try to fix them straight away. Sometimes a resident will be too shy to raise something and they will talk to a family member who would discuss it with us. We're very approachable."*

The home does not hold formal friends and relatives' meetings. Management explained that they speak with families frequently and feel this ongoing communication removes the need for large group meetings. Social activities also provide opportunities for relatives to chat informally with staff.

Healthwatch noted that the home has a Complaints Procedure displayed in several corridors. A visitor commented that they would speak to staff if they had any issues but were unsure what the next stage would be to raise concerns further if they felt they were not adequately addressed by the home.



### Wider Local Community

Management shared that many of the residents are from the local area and the community has been very supportive donating raffle prizes and gifting items at Easter and Christmas. A local ukulele band visits three or four times a year, and local primary schools visit at Christmas to sing with residents. The manager explained, "A fabulous one man band comes in to sing 50s, 60s and 70s hits that the residents know."

## Everyday Life at the Care Home

### Activities

The home explained that they do not currently have an activities coordinator and do not operate an activities timetable. Management described how they "share the role of stand-in entertainers so residents don't just sit and watch television, but will have some fun with an activity." Hartford Hey is in the process of recruiting a member of the domestic team to take on the activity coordinator role, with the expectation that they will begin in the coming weeks.

A range of activities are offered within the home, including themed bingo, chair skittles, soft ball catch, and Punch and Judy. Residents also enjoy armchair exercises. Staff shared that residents typically have a rest after lunch before taking part in an afternoon activity.

Management reported that residents will let staff know when they like or dislike an activity and are vocal about this. They commented, *"Some of the residents love listening to Abba."*

Residents' and friends/relatives' surveys showed the following when asked 'Are you/is the person you're visiting involved in choosing what activities take place?':

Answer Choices	Responses Residents	Responses Friends/relatives
Yes	45%	50%
No	33%	13%
Don't know	22%	38%

For residents who do not leave their rooms, 1-to-1 activities are provided. Care staff offer hand massages and nail care for both male and female residents, with many of the ladies particularly enjoying having their nails painted. Staff, including members of the domestic team, the handyman and carers, take time to chat with residents individually, knocking on doors and engaging in conversation. One example shared was that *"They might not want to mix but will always have company. One lady was too poorly to leave her room at Christmas and school children came to sing hymns in her room which she really enjoyed."*

The home celebrates key events throughout the year, including Christmas, Easter and birthdays, and holds garden parties during the summer months.

A comment from a friend/relative highlighted, *"The home could probably develop the amount of activities residents are offered on a weekly basis. There are always celebrations at Easter, Christmas etc. but it would be good to have more frequent activities for mental stimulation that are more suited to residents' interests."*

Management also described how some residents are supported to take part in local trips out when weather conditions allow. Groups of two or three may be taken to Parkgate for ice cream or a hot drink, although outings depend on residents' tolerance to colder or breezy conditions. However, a relative shared with us on the day of our visit that their loved one is taken out by family but not by the home, *"(they) haven't been on any local day trips or any further afield, but (they) would have liked to if offered."*

Hartford Hey does not have its own transport. Staff explained that this is not required, as very few residents are able to get in and out of a vehicle due to their age.

### Person Centred Experience

The home described how residents' experiences are ensured to be person centred from the moment they arrive at Hartford Hey. Management explained that *"Everything about the residents is person centred from the day they arrive. Their wishes, likes, dislikes, their rooms, what they wear, bedtime and getting up time are all discussed and centred around them."*

The home does not operate a 'Resident of the Day' system, as they felt this could cause difficulties or ill feeling among residents. Instead, they explained that they *"treat all residents as if they are special."*

When residents wish to raise a complaint, concern or provide feedback, the first point of contact is usually their key worker. Any issues are then passed on to management, who will follow up with the resident directly.

Residents' meetings are held monthly, and Healthwatch was shown the 'Meeting Minutes Book', which contained written notes from previous

meetings. Staff also shared that if a resident does not attend a meeting, a member of the team will visit them in their room to ensure they still have the opportunity to contribute their views.

Provision is also made for residents' religious and spiritual needs. As one staff member explained, *"A staff member is married to the layman of a local church who will visit the home. If we notice a resident is not themselves, we will ask if they would like to speak to the church and arrange for someone to come in. We have relationships with the local churches."*

The home also allows pets to visit. The Manager has two dogs who come into the home daily, although they do not wander freely due to age and recent health issues.

### Communal Areas

The home has several communal spaces available to residents, including two lounges, a conservatory and a dining room.



The larger lounge, located at the rear of the building and leading into a conservatory overlooking the smaller of the two gardens, was not in use during our visit as the gas fire had recently been deemed unsafe during a gas inspection. They are

currently exploring replacement options. There were a number of homely features noted such as a budgerigar in a cage, a fish tank, and a good selection of books and DVDs accessible for residents.



Televisions are available in both lounges; however, these were not in use during our visit. Instead, music was playing in the lower lounge, where three residents were enjoying singing along to Abba. The smaller lounge is situated at the front of the building which was lovely and warm, and the dining room is positioned off the same corridor.

The general décor of the home is in keeping with the age of the property, benefiting from large windows that allow ample natural light. Some areas of the corridors appeared quite dull particularly where natural light was limited, as the lighting was not switched on. The building can be difficult to navigate for first-time visitors due to narrow corridors in some parts and with there being four floors. Senior staff explained that current residents do not mobilise independently around the home, and an eight-person lift is available to support movement between floors.

Furniture throughout the communal areas was found to be in reasonable condition and appropriate for residents' needs. There were no malodours noted, and the temperature in most areas was ambient.

Bathroom facilities include three bathrooms and one shower room, and communal toilets, all of which were signed clearly, were very clean and equipped with suitable seating and lifting aids to support safe use by residents.



### Residents' bedrooms

The home has 25 bedrooms, of which 8 or 9 are not ensuite. Three bedrooms are registered as doubles, meaning couples can share a room if required, although none were being used in this way during our visit. Bedrooms vary in size, with most having an ensuite toilet and washbasin,

and every room benefits from natural light, although some have larger windows than others. Each bedroom has a locked medical cabinet containing the resident's individual medications, and a thermometer is displayed to help ensure that room temperatures remain within a comfortable and appropriate range.



Residents are able to personalise their rooms with photographs and personal items, and most choose to use the furniture provided by the home. While all rooms were clearly numbered, personalised nameplates were not displayed outside the doors. Many of the bedrooms offer attractive views, overlooking the Dee Estuary, the neighbouring cricket grounds, or the home's gardens.

### Outdoor areas

The outside space comprises a large, well-kept lawned garden, offering attractive views from several bedrooms, and a smaller adjoining garden,



which can be accessed from the main area through a connecting gate and via the conservatory at the other side of the building. The lawns, patio and pathways were tidy and in good condition, providing a clean and pleasant environment. Pathways were level and accessible, supporting safe movement for residents who use mobility aids or wheelchairs.

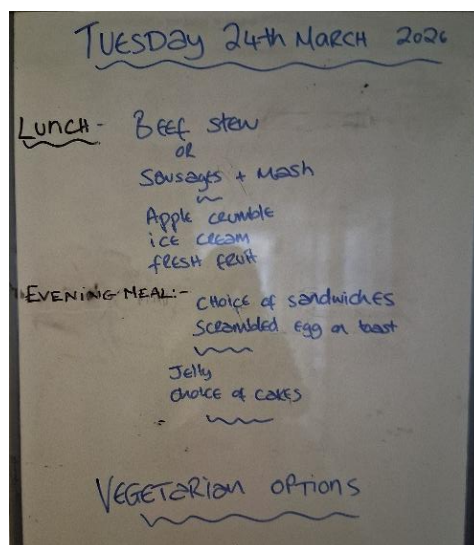
The gardens were in the process of being prepared for residents to enjoy once the weather becomes warmer. Staff explained that the area is used more frequently during spring and summer, and preparations were underway to ensure it is ready for increased use.

## Food and drink

The home confirmed that all meals are cooked fresh on site. Deliveries from the butcher, greengrocer and dairy arrive daily, ensuring that ingredients are fresh and readily available for meal preparation.

Residents choose their meals the day before, when staff take printed menus around individually. If a resident does not

want either of the options available, an alternative meal can be provided. The main meal is served at lunchtime and typically includes two choices, with further flexibility offered based on residents' preferences.



The surveys carried out with residents asked:

How happy are you with the ...	Very happy	Happy	Satisfied	Dissatisfied	Very dissatisfied	Don't know
quality of food	44.5%	33.3%	22.2%	0%	0%	0%
taste of food	55.5%	44.5%	0%	0%	0%	0%
choice of food	44.5%	44.4%	11.1%	0%	0%	0%
quantity of food	66.7%	22.2%	0.00%	11.1%	0%	0%
availability of snacks	66.7%	33.3%	0.00%	0.00%	0.0%	0%
availability of drinks	77.8%	22.2%	0%	0%	0%	0%

A resident commented, *"Food's nice and if I don't fancy a meal an alternative is always offered and cook(ed) specially for me,"* and a friend/relative noted, *"More fresh fruit would be appreciated."*

Relatives are welcome to join residents for meals, including on special occasions such as Christmas dinner. However, when speaking to a visitor they commented that the home prefers not to have visitors during mealtimes. Daily menus are displayed on a whiteboard, handwritten and updated each day to reflect current meal options.

Residents are able to eat their meals wherever they feel most comfortable. During the visit, several residents were observed eating in the bright and welcoming dining room, which benefits from large windows and natural light. Some residents prefer to eat in their bedrooms, while others enjoy eating in the quiet lounge with visiting relatives. Staff also explained that in warmer weather residents may have tea and cake in the garden. Visitors occasionally bring food, such as fish and chips, to share with their loved ones.

Management reported that the home caters for a range of dietary needs. Two residents have diabetes, one managed by diet alone and the other by diet alongside medication. The home has experience supporting residents with lactose-free diets and currently provides meals suitable for a resident with coeliac disease. Staff noted that *"the cook has learnt to make a number of gluten-free dishes."* A relative commented: *"My mum has special dietary needs - the home manages these needs very well."*

Snacks and refreshments are routinely available. Mid-morning, staff take a trolley around offering a selection of biscuits, homemade cake and a range of hot and cold drinks. A similar round takes place in the afternoon with an expanded selection. Additional items, such as drinks, fresh fruit and crisps, are available in residents' rooms. Although snacks were not observed being offered during the visit itself, two visitors confirmed that they are always offered a drink when they come in, and that residents are also regularly provided with refreshments.

## Biggest challenges

Management described how filling available rooms is challenging due to the complexity of needs presented in some referrals. They explained that information received from social care does not always provide a full picture of the support an individual may require. As Hartford Hey is not registered to provide nursing care, the home is unable to accept people who are EMI (elderly mentally infirm) or those who require 24-hour nursing support.

Management also highlighted that individuals with more advanced dementia may present behaviours that could compromise the wellbeing of others, and therefore careful consideration is given to ensure the safety, stability and comfort of current residents. The home's approach reflects a commitment to maintaining a calm, supportive environment where residents' needs can be met appropriately.

## Biggest success to date

When the previous Manager (now Acting Manager) joined the home, they identified opportunities to modernise systems and strengthen the quality of documentation, which has since supported improvements in the overall running of the service.

The Manager at that time introduced significant improvements to procedures, helping to strengthen the quality of care and further embed a person-centred approach in which residents were recognised and supported as individuals. *"Our residents have taught me a huge amount since I have been here. We've learnt how to work together as a team with the service users."* (Acting Manager)

## 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.

Hartford Hey uses MUST. Healthwatch saw a MUST score chart for March 2026.

The home does not use Restore 2, however management explained they follow this process on a daily basis. The home does not utilise digital reminiscence therapy.

## Recommendations

- Consider introducing a Resident of the Day, where one resident is given dedicated focus for the day, allowing staff to review their care, preferences and environment to ensure their individual needs are fully met, further enhancing person-centred care. With mixed responses from surveys about involvement in choices of activities this approach will provide more regular opportunities for resident input about their personal choice.
- Further develop links with the local community to provide residents with a wider range of activities and interactions. For example, consider contacting The Neston Community Youth Centre and also arranging more regular contact between the home and local schools.
- Ensure that information displayed throughout the home is current, relevant, and presented in central, well-organised locations to make it easier for visitors and residents to find what they need. In addition, updating the home's website would help promote the service more effectively and support efforts to attract prospective residents.
- Ensure that the visitors' signing-in book includes spaces for 'time of arrival' and 'time of departure', as this helps the home keep an accurate record of who is on the premises and supports safety and monitoring in the event of a fire or other emergency.
- Consider ways to ensure corridors are well lit to increase safety.

## What's working well?

- Hartford Hey felt like a genuinely homely environment, where residents appeared relaxed, comfortable and at ease within their surroundings.
- The warm atmosphere, familiar décor and positive interactions between staff and residents contributed to a setting that felt welcoming and supportive, reflecting a place where individuals can feel secure and well cared for.
- There is good access to the community nursing team and district nurses, who can provide daily visits when required. Their support enables residents to remain in the home during periods of ill health, where appropriate, rather than requiring hospital admission.
- The use of individual, locked medicine cupboards for each resident demonstrates safe medication management, while helping to ensure residents' medicines are stored securely. Each bedroom also has a thermometer to keep rooms at an appropriate temperature.

## Service Provider Response

**\*\* to be completed by the Care home manager and returned via email\*\***

### **Recommendation 1**

Consider introducing a Resident of the Day, where one resident is given dedicated focus for the day, allowing staff to review their care, preferences and environment to ensure their individual needs are fully met, further enhancing person-centred care. With mixed responses from surveys about involvement in choices of activities this approach will provide more regular opportunities for resident input about their personal choice.

**Service provider’s response**

Mixed responses from the survey regarding involvement in choices of activities were mostly answered with ticking the yes, no boxes. I am aware that there was a comments box which was mostly left blank by the residents.

Residents who ticked no in the box, failed to make a comment such as “I am informed of the activities”, but “I choose not to join in with the activities”, as I prefer to stay in my own room and not socialise with others.

Responses in the comments box may have given a clearer picture to each residents preferences.

We have 10 empty beds, previous residents thoroughly enjoyed joining in with activities however, at the moment the majority of our residents are elderly and frail, who often don’t feel well enough to join in activities. 4 out of the 15 residents that we do have receive 24 hour bed care. All residents do receive individualised one to one input specified to each personal preferences.

**Action**

introducing a resident of the day – will be discussed at the next residents meeting and I will receive feedback as to how they would like this to proceed.

**Recommendation 2**

Further develop links with the local community to provide residents with a wider range of activities and interactions. For example, consider contacting The Neston Community Youth Centre and also arranging more regular contact between the home and local schools.

**Service provider’s response**

Each summer the local school children are invited to attend our garden party. Until recently, the granddaughter (of a resident who has recently passed away) arranged for her brownie group to visit Hartford Hey and take part in craft club with our residents.

The local church is involved with Hartford Hey and will often call and visit residents with communion or religious prayers.

**Action**

Local activity groups will be researched and contacted

**Recommendation 3**

Ensure that information displayed throughout the home is current, relevant, and presented in central, well-organised locations to make it easier for visitors and residents to find what they need. In addition, updating the home’s website would help promote the service more effectively and support efforts to attract prospective residents.

**Service provider’s response**

As explained during the visit by the manager, the website provider has retired, and we are communicating with other website builders to design a new one for Hartford Hey

**Action**

Information displayed and location will be reviewed and replaced/ relocated if necessary.

**Recommendation 4**

Ensure that the visitors’ signing-in book includes spaces for ‘time of arrival’ and ‘time of departure’, as this helps the home keep an accurate record of who is on the premises and supports safety and monitoring in the event of a fire or other emergency.

**Service provider’s response**

Although there is not a sign in & sign out column in our current visitors signing in book. All visitors do document the time of arrival and leaving- historically that’s what they have always done and continue doing –

Service Provider provided Healthwatch with a photo of a page of the current visitor’s sign in book, showing visitors had recorded time of arrival and departure.

**Action**

New visitors signing in book has been ordered and includes time in and out.

**Recommendation 5**

Consider ways to ensure corridors are well lit to increase safety.

**Service provider's response**

Corridors have LED bulbs fitted, also skylight windows.

**Action**

LED wattage will be checked and replaced with higher Watt bulb if possible.

**Any other feedback from the Service Provider**