

Chacombe Park Care Home Enter and View

July 2026



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Introduction

Healthwatch aims to conduct regular evaluations of selected health and social care services within the community. Conducting these reviews allows us to directly support and provide valuable feedback to services that have been identified as needing focus. Our visits result in our service making recommendations for ways that service providers can continue to provide effective and satisfactory care.

The 2026–2027 Healthwatch West Northamptonshire Work Plan, created by both volunteers and staff, focuses on social care and dementia. This was facilitated by training staff and volunteers on Dementia Awareness, the Mental Health Capacity Act and Deprivation of Liberty Safeguards (DoLS) and through selecting care homes for Enter and View visits, which supported residents with Dementia within West Northamptonshire¹.

On the 21st of July, 2026, the Healthwatch team conducted an announced visit to the Chacombe Park Care Home and spent the day at the home between 9:30 am and 1:30 pm. The team was comprised of one Healthwatch West Northamptonshire Staff member and five Authorised Representative Volunteers from Healthwatch West Northamptonshire.

Chacombe Park Care Home provides residential, nursing, dementia, respite and short-stay care, alongside independent living apartments situated adjacent to the main home. The home offers 24-hour nursing care and was originally built in 2003 before being acquired by Barchester Healthcare in 2006 and refurbished in 2017.

At the time of our visit, there were 69 residents living within the home, with a capacity of 79 beds. Residents requiring respite care are expected to stay for a minimum of two weeks and are given the opportunity to transition to permanent residency should they require longer-term support. The independent living apartments are located adjacent to the care home, allowing residents to maintain a greater level of independence while still having access to support when needed. As residents' needs change over time, they can transition from the independent living accommodation into the care home, ensuring continuity of care and minimising disruption during what can often be a significant life change.

The home is supported by a workforce of approximately 85 staff members, including bank staff. Where additional cover is required, staffing is provided through neighbouring Barchester sister homes rather than external agency staff.

This approach helps to maintain continuity of care, as residents are more likely to be supported by familiar staff who understand their individual needs and routines.

At the time of our visit, Chacombe Park Care Home had last been visited by the CQC – Care Quality Commission in October 2025, and the service was rated as good in every area (safe, effective, caring, responsive and well-led) by the CQC. This report was reviewed by our HWW team and was kept in mind during our visit².

Our review of the home works to help highlight areas of best practice and also ways the service can improve from the patients' perspective; this is reflected in our findings and recommendations within this report.

¹ <https://www.cqc.org.uk/guidance-providers/all-services/mental-capacity-act-deprivation-liberty-safeguards>

² <https://www.cqc.org.uk/location/1-120671475/reports/AP20721/overall>

Key Findings

Positives

- **Welcoming and well-maintained environment:** The team found Chacombe Park to be clean, bright, calm and homely, with spacious and accessible communal areas and well-maintained facilities.
- **Person-centred care:** Residents' rooms and the wider environment reflected residents' individuality, with personalised rooms, photographs and Getting to Know Me information supporting familiarity and independence.
- **Dementia-friendly environment:** The home demonstrated a strong awareness of the needs of residents living with dementia. Large-print and contrasting signage, photographs on bedroom doors, themed areas, sensory activities and the Magic Table all provided opportunities to support orientation, stimulation and independence.
- **Positive staff and resident interactions:** The team observed kind, respectful staff greeting residents by name, supporting individuals to remain independent and taking time to reassure and orientate residents when needed.
- **Range of activities and opportunities:** A varied programme was available, including exercise, music, creative and sensory games, social groups and dementia-focused activities. Staff also provided one-to-one engagement where appropriate.
- **Good use of outdoor spaces:** The gardens, balconies and veranda provided residents with opportunities to access fresh air, enjoy the surrounding grounds, take part in gardening and engage with nature. The team felt this was an important strength of the home.
- **Good access to healthcare and clinical support:** The home demonstrated structured care planning, regular GP involvement, multidisciplinary support and processes for monitoring areas such as falls, nutrition, hydration and pressure care.
- **Good accessibility:** The home had lifts, handrails, accessible bathrooms, mobility equipment and secure outdoor areas, supporting residents with different levels of mobility and care needs.
- **Staff continuity:** The use of permanent staff and support from neighbouring homes rather than relying on external agency staff was

viewed positively, as this can help residents receive care from people familiar with their needs and routines.

Challenges and areas for improvement

- **Food variety and choice:** Feedback highlighted concerns around the repetition of meals and the range of options available. There was also feedback about changes to the menu not always being clearly explained.
- **Accessibility of signage:** Signage within the main dementia and nursing areas was particularly accessible, with larger fonts, photographs and contrasting colours. However, residents' names on doors within the independent living areas were displayed in a smaller font, which may be more difficult for some residents with visual impairments to read.
- **Minor environmental issues:** A small number of maintenance issues were observed, including exposed wiring around some plug sockets. An inaccurate clock was also noted during the morning, although this had been corrected by the afternoon.

Recommendations

Based on the feedback from the residents, staff and family members, alongside our team's findings, we have created the following recommendations for Chacombe Care Home.

1. Continue to develop meal variety and choice, listening to residents' requests.

We suggest that the home review the range and frequency of meals offered to residents, particularly where meals are repeated. Consider how residents' preferences and feedback can be used to introduce greater variety and alternative options. As some residents and family members shared feedback that more variety was needed, perhaps the home can host a resident feedback session dedicated to asking what residents would like to see on the menu or review the comment book to find a solution.

2. Continue making full use of outdoor spaces

The home's gardens and outdoor areas were a particular strength. We recommend that the home continue to encourage residents to access these spaces throughout the year, including through gardening, walks, outdoor seating, nature-based activities and seasonal events. We felt the ability for residents to be involved in the gardening and outdoor spaces provided a meaningful opportunity for residents to remain active while maintaining interests and hobbies that may have formed part of their lives before moving into the home.

3. Continue dementia-friendly best practices

We recommend that the home maintain and build on the strong dementia-friendly features already evident throughout the home. This includes personalised room identification, contrasting colours, large-print signage, sensory activities, the Magic Table and opportunities for residents to remain active and independent within a safe environment.

4. Review room identification within independent living areas

We suggest that the home consider increasing the font size and/or contrast of residents' names displayed on independent living apartment doors. This would improve accessibility for residents with visual impairments or age-related changes in eyesight and bring these areas more closely in line with the dementia-friendly signage observed elsewhere in the home, particularly as individuals' needs may change over time.

5. Address minor environmental issues

Continue routine environmental checks to identify and address small maintenance issues, such as exposed wiring, and ensure clocks and other orientation aids remain accurate. Whilst these were relatively minor issues, ensuring that maintenance concerns are addressed promptly is particularly important within care environments, especially for residents living with dementia, where environmental cues such as accurate clocks can help support orientation and reduce confusion.

6. Incorporate coloured crockery in dining rooms

Whilst we noted that staff stated that coloured plates and glassware can be provided to residents as needed, we feel that the consistent use of these dementia friendly adaptations can have benefit for residents. We recommend that these be added to the first-floor dining room for those with dementia to have regular use while dining.

Methods

Healthwatch West Northamptonshire has a statutory right to enter Health and Social Care Services to view the premises and to speak with both patients, residents, families of residents/patients and staff members. We used our ability to enter services and review through a format called an Enter and View. This methodology is a tool created by Healthwatch England, and our visit was conducted alongside their guidelines and our Enter and View Policy³. This ability to Enter and View services offers a way for Healthwatch to meet some of their statutory functions and allows for the ability to identify what is working well with services and where they could be improved⁴.

We preplanned and arranged this visit with the managerial staff at Chacombe Care Home, allowing time for staff and patients to have notice. Before our visit, Healthwatch West Northamptonshire (HWW) posters were shared with the home with the request that they be distributed and displayed within the communal areas within the home, and leaflets were provided for the home to inform residents, residents' families and the staff at the care home about what HWW does as an organisation.

Upon arriving at the home, the visit aimed to ensure that the perspective of the resident was captured; therefore, Healthwatch Representatives (staff and volunteers) focused on seeing things through the "eyes of the resident, as this is their home". Healthwatch Representatives used an Enter and View template to guide them through the visit, and walked around and observed the home's facilities. By walking around, observing the surroundings of the care home, speaking and asking questions to both staff, residents' families and residents, Healthwatch was able to gather a thorough understanding of how the service was functioning.

Our team of Healthwatch Representatives used elements of the Patient-led Assessments of the Care Environment (PLACE) framework as part of the Enter and View, so that we could assess whether the environment would be considered accessible and friendly to those with learning disabilities and dementia^{4,5}. This allowed our organisation to highlight the positives and the

³<https://www.healthwatchnorthamptonshire.co.uk/report/2023-01-17/our-enter-and-view-policy>

⁴https://network.healthwatch.co.uk/guidance/2019-04-23/guide-to-enter-and-view?gad_source=1&gclid=Cj0KCQjwncWvBhD_ARIsAEb2HW9oQ_19jklyXM7W8hblfMPSyK7rDPcjGChI25TLBnBvIFr7ar9XH8aAgIHEALw_wcB

⁵<https://digital.nhs.uk/data-and-information/areas-of-interest/estates-and-facilities/patient-led-assessments-of-the-care-environment-place/dementia-friendly-environments-guidance-for-assessors>

elements of the service that are effective, as well as looking to reflect on what can be improved.

Our Representatives spoke to patients, their families and/or carers and the staff on the day of the visit to explore their views and experiences in relation to the service.

These findings were documented and summarised by our Healthwatch Representatives, who then expanded and reported on them within this report. After the report was finalised, a copy of the report was sent to the Managers of the care home, who were given the opportunity to respond and were asked to formulate an action plan for our recommendations.

Findings from Chacombe Park

Chacombe Park is a care home located in Banbury, a village bordering both West Northamptonshire and Oxfordshire. When our team visited the 79-bed home, there were 69 individuals residing there. Chacombe Park is a care home that belongs to a larger care home group called Barchester Healthcare. The home is made up of three floors, which separate residents based on their levels of independence and cognition. There are areas within the home that cater to residents in need of nursing support, mainly with dementia, and areas for independent residents.

Planning the Visit

Before the visit, the Healthwatch team liaised with the management team at Chacombe Park Care Home to arrange a suitable date and discuss the visit. Communication throughout the planning process was straightforward, with the management team responsive, welcoming, and keen to engage with our service.

Ahead of the visit, our team met with the care home manager to introduce Healthwatch, explain our role, and provide an overview of the purpose of the visit. During a separate visit to deliver promotional flyers, staff noted that the receptionist was friendly and welcoming, creating a positive first impression. The home also appeared clean, well-maintained, and had a pleasant atmosphere.

First Impressions of the Home

From the moment we entered the home, we found the environment to be calm, welcoming and well organised. The atmosphere throughout the home felt relaxed and unhurried, allowing residents to move freely around the building while visitors and staff interacted comfortably within the different communal spaces. Despite the home being busy with daily activities, there was a clear sense of organisation, and the home never felt overcrowded or chaotic.

Throughout our visit, the home appeared bright and well maintained. Large windows allowed natural light to flow into many of the communal areas, creating light and comfortable spaces for residents to spend time in. We did not notice any unpleasant odours, and all areas visited appeared clean and fresh. Furnishings throughout the home were of a good standard and created a

comfortable, homely feel, with a variety of communal lounges offering residents different spaces to relax or socialise depending on their preferences.

The interactions we observed from the beginning of the visit contributed positively to our first impressions. Staff greeted residents warmly as they moved throughout the home and were approachable when engaging with visitors and members of the Enter and View team. Residents appeared comfortable within their surroundings, with many independently accessing communal areas while others were supported sensitively by staff where required.

Overall, the Enter and View team felt that Chacombe Park Care Home provided a welcoming first impression, with an environment that supported residents' comfort, independence and wellbeing.

Facilities and Environment

Chacombe Park Care Home provides residential, nursing, dementia, respite and short-stay care, alongside several independent living apartments situated adjacent to the main care home. The independent living accommodation offers residents the opportunity to maintain a greater level of independence while still having access to support when required. Staff explained that, as residents' needs change over time, individuals are able to transition into the main care home, helping to provide continuity of care while minimising disruption during what can often be a significant life change.

The home is arranged across three floors, each supporting residents with differing levels of care needs. Staff explained that residents requiring lower levels of support are generally accommodated within the upper residential areas, while residents requiring nursing care or more specialist dementia support are cared for within dedicated areas of the home on the ground and first floors. We felt this approach allowed care to be delivered according to residents' individual needs whilst maintaining a welcoming and homely environment throughout the building.

Accessibility appeared to have been carefully considered throughout the home. Three lifts provided access between all floors, allowing residents with mobility aids or wheelchairs to move safely throughout the building. Corridors were spacious and had handrails equipped to support resident stability; we found these spaces to be well lit and free from unnecessary clutter, making them easy to navigate for residents and visitors alike. Fire exits and directional signage were

clearly displayed throughout the home, while code-secured doors helped maintain the safety of residents living with dementia who may be at risk of wandering.

Throughout our visit, we observed residents moving independently with walking aids, while others received support from staff using wheelchairs or specialist moving and handling equipment where appropriate. Staff explained that a variety of equipment, including hoists, pressure-relieving mattresses and sensor equipment, was available to ensure residents could be supported safely whilst maintaining as much independence as possible.

During our walk around the home, we noted that the home was very well kept and clean, with no hygiene concerns. The spaces were well decorated, and we noted the different themes of each floor, which were reflected in the colours and artwork displayed.

The Enter and View team noted only a small number of minor environmental observations. A small number of plug sockets were noted to have exposed wiring, and one clock displayed an incorrect time in the morning, but we noted this was fixed in the afternoon.

Communal Spaces

The home provides a variety of communal areas, allowing residents to choose how and where they spend their time throughout the day. We observed many lounges, dining rooms and activity spaces located across the different floors, allowing residents with varying levels of independence to access communal facilities close to their own living areas.

The lounges were spacious, comfortable and well furnished, with seating arranged to encourage both conversation and relaxation. Each lounge had a theme, which helps residents differentiate between the spaces and offers a variety of décor throughout the home. During our visit, residents were seen using these spaces in different ways; some chose to sit quietly, others enjoyed conversations with fellow residents, while several participated in organised



activities taking place throughout the day. The overall atmosphere remained calm and welcoming, with sufficient space for residents using mobility aids to move comfortably around the rooms.

The home also benefits from dedicated activity spaces, which provide flexible environments for group sessions, exercise classes, creative activities and community events.

During our visit, we observed the activities room being used to facilitate a physical exercise session, with residents actively participating under the guidance of an instructor. We also noted community rooms equipped with puzzles, games and hobby-based activities, allowing residents opportunities to engage in activities according to their own interests. In two of the communal spaces on the first floor, we observed staff engaging in activities with residents, with colouring books, a game of catch and many colourful sensory toys, games and soft plush animals being utilised by residents.



One communal room also featured projection equipment, which staff explained is used for interactive activities and cognitive stimulation sessions outside of meal times, making effective use of the space throughout the day.

Our Enter and View team heard music throughout the home, noting music playing in a few of the spaces, including classical music in the garden room; one of the first-floor lounges had 60s music videos playing, where we observed residents listening to the music and relaxing.

An aquarium situated within one of the communal areas provided an additional sensory feature within the home. We felt this created a calming focal point and added to the welcoming atmosphere of the environment.

One of the larger lounges on the first floor offered an outside veranda for residents to access if they chose to be outside and see the grounds; there was ample seating available, and this also allowed for a free flow of air between the lounge and outdoor area. The space was



safely enclosed, increasing independence if residents accessed this area on their own.

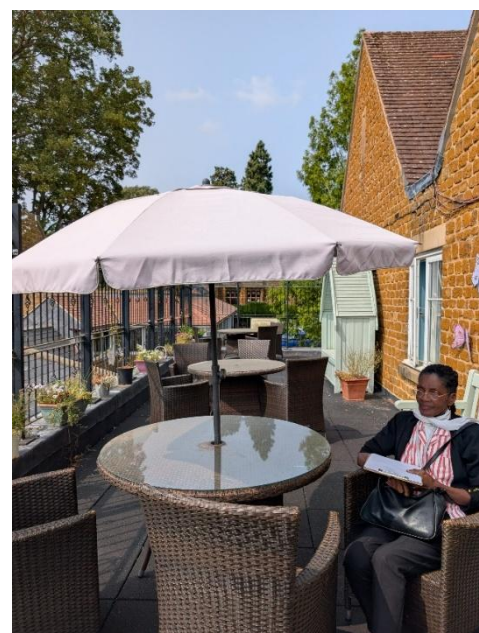
Throughout all communal spaces, the Enter and View team found the areas to be clean, well maintained and accessible. Residents appeared comfortable navigating between different areas of the home, and staff remained visible within these spaces, offering support while encouraging residents to maintain their independence wherever possible.

Dining Spaces

The home provides dedicated dining areas on each floor, ensuring that residents are able to enjoy meals close to their living areas while maintaining a comfortable and sociable dining experience. During our visit, we found each dining room to be clean, spacious and well-maintained, with tables arranged to allow residents to dine comfortably while also encouraging conversation and social interaction.

The dining spaces felt bright and welcoming, benefiting from natural light and comfortable furnishings. Residents were observed spending time within these areas both during and between mealtimes, demonstrating that these spaces are used for more than simply dining and act as communal areas where residents can socialise throughout the day. The first floor dining room had an outside seating area, which allowed residents with dementia to have access to fresh air and views of the grounds within the home's estate.

Menus were clearly displayed within the dining rooms, providing residents with a choice of meals available each day. For residents living with dementia or those who experienced communication difficulties, staff explained that photographs of the meal options were shown to support individuals in making informed choices.



Our team asked staff if coloured crockery was available to support those with dementia, as none was observed on the tables and all tableware was white and glassware was clear. Staff stated that this was available as needed and based on the needs of the residents. We noted that the dining room on the second floor, where those with higher levels of dementia and nursing needs resided, did have contrasting tablecloths.

Alongside the dining rooms, refreshments and snacks were readily available throughout the day. During our visit, we observed a refreshments trolley circulating the home offering hot drinks and light snacks to residents between mealtimes. Additional refreshments, including water, hot drinks and snacks, were also available within communal areas and activity spaces, allowing residents to access food and drinks outside of scheduled meal times should they wish.

The home also maintained a meal feedback book within the dining areas, allowing residents and visitors to share comments and suggestions regarding meals. We felt this demonstrated a commitment to gathering feedback and continually reviewing the dining experience offered within the home.

Overall, the dining areas provided a welcoming environment that encouraged both nutrition and social interaction, while offering residents choice and flexibility throughout the day.



Resident Bedrooms

Residents' bedrooms were observed across each of the home's three floors and appeared comfortable, well maintained and personalised. Each room was designed to provide residents with their own private living space while allowing opportunities to personalise their surroundings. Residents' bedrooms reflected a person-centred approach to care, and residents are encouraged to bring their own decorations and to put personal photographs on display, encouraging comfortable private spaces with familiarity.



The Enter and View team noted that bedrooms were clean, tidy and free from unnecessary clutter. Natural light entered the rooms through large windows, with each room overlooking the gardens and surrounding countryside. We observed that residents were able to enjoy views from both their rooms and from their beds, with all beds in the rooms observed to allow vantage points to the garden and windows, helping maintain a connection with the outside environment.

All bedrooms benefitted from ensuite bathroom facilities, allowing residents to maintain dignity and independence while accessing personal care. Staff explained that environmental adaptations within individual rooms were made following residents' assessed needs, with some bathrooms modified where appropriate to ensure safety and accessibility. All spaces appeared to be clean and well-maintained.

Bedroom doors displayed residents' names, and on the floors which house residents with dementia, doors included coloured name plates, larger printed fonts and photographs, supporting individuals in recognising their own rooms and assisting with orientation throughout the home. We did note that on the independent living floors, residents' names on doors were in a small printed font, which could pose challenges to see, depending on residents' eye health.



Bathrooms

The home provides both ensuite facilities within residents' bedrooms and additional accessible bathrooms throughout the building. During our visit, the Enter and View team found these facilities to be clean, well-maintained and designed with residents' safety and comfort in mind.

Bathrooms were equipped with appropriate accessibility features, including grab rails and other adaptations to support residents with varying mobility needs. Many of the shower rooms featured tubs for residents who desired to have a bath as opposed to a



shower. We observed that these facilities were spacious enough to allow staff to provide assistance where required while still maintaining residents' dignity and privacy.

Guests visiting the home had access to the communal bathrooms around the home, and a dedicated guest bathroom at the front of the home near reception.

The cleanliness of the bathrooms reflected the high standards observed throughout the home. Infection prevention measures appeared to be embedded within daily practice, with bathrooms maintained to a good standard and appropriate hygiene procedures evident throughout the building.



Laundry

The laundry facilities, located on multiple floors, were also viewed during the visit. These areas were organised and well maintained, with residents' clothing clearly identified to reduce the risk of items becoming misplaced. Colour-coded systems were in place to support infection prevention and promote safe laundry practices.

Hairdressers

There is a dedicated hairdressing room on the ground floor of the home, where a hairdresser offers cuts and styles to residents within the home each week. The space was clean and well-lit, and residents who desired this service pay a small fee for the service.

Garden and Outdoor Space

One of the most notable features of Chacombe Park Care Home is its extensive outdoor environment. The home is surrounded by well-maintained gardens and open green spaces, providing residents with attractive views and opportunities to spend time outdoors throughout the year.



Many of the resident bedrooms and communal areas overlook the landscaped gardens and neighbouring golf course, allowing residents to enjoy views of the surrounding countryside from within the home. We felt these views contributed positively to the overall atmosphere, creating a peaceful and relaxing environment.



Residents are able to access secure outdoor areas either independently or with support from staff where required. The gardens appeared well cared for, with maintained lawns, flower beds and pathways suitable for residents using mobility aids. We observed that outdoor areas had been designed to balance accessibility with safety, enabling residents to enjoy fresh air and outdoor activities confidently.

The dining areas on the ground floors have patio spaces outside the enclosed rooms, where residents can sit outside during meal times or outside of meal times during the day.



Staff explained that the outdoor spaces are used regularly for seasonal events and activities throughout the year, including picnics, barbecues and outdoor games. During the winter months, part of the courtyard is transformed into a festive "Winter Wonderland", allowing residents to continue enjoying seasonal experiences even when opportunities to access the wider community may be more limited.

The Enter and View team also learned that residents are encouraged to become involved in gardening where they wish, with support from the home's gardener and care staff.

Communication and Signage

Throughout our visit, the Enter and View team observed that considerable thought had been given to the communication and wayfinding features within the home, helping residents to navigate their surroundings as independently as possible. Clear directional signage was displayed throughout the building, identifying communal areas, dining rooms, lounges and key facilities. Corridors

remained well lit and uncluttered, providing residents with clear lines of sight and supporting safe movement throughout the home.

The Enter and View team noted that staff information boards displaying photographs and names of team members were positioned throughout the home. We felt these boards helped residents to become familiar with the staff caring for them, particularly where individuals may find it difficult to remember names or recognise unfamiliar faces. These boards are also useful for visitors and family members to help identify staff and to know who is working that day.



During the visit, we observed that staff members wore clearly visible name badges. This made it easy for residents, visitors and members of the Enter and View team to identify staff and understand their roles within the home.

Whilst the Enter and View team found the overall signage and communication features to be effective, we did identify one area where accessibility could be further enhanced. While the nursing and dementia residential rooms had names and photographs displayed in large print with colourful backgrounds, which made it easy to identify each room, within the independent living apartments, residents' names displayed on apartment doors were printed in a relatively small font. Although this may not present difficulties for all residents, we felt that individuals with visual impairments or age-related deterioration in eyesight may find the text more difficult to read.

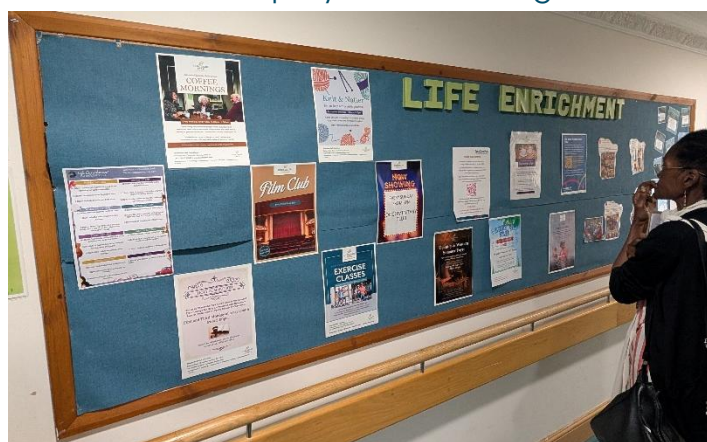
To ensure residents can communicate their needs and share feedback, the home hosts resident meetings where residents can raise views. The home also has a dedicated speak-up champion, who is a team leader who will speak with residents regarding any requests or concerns.

Daily Activities and Entertainment

Throughout our visit, it was evident that supporting residents' wellbeing through meaningful activity was an important part of life at Chacombe Park Care Home. The home offered a varied programme of activities designed to promote social

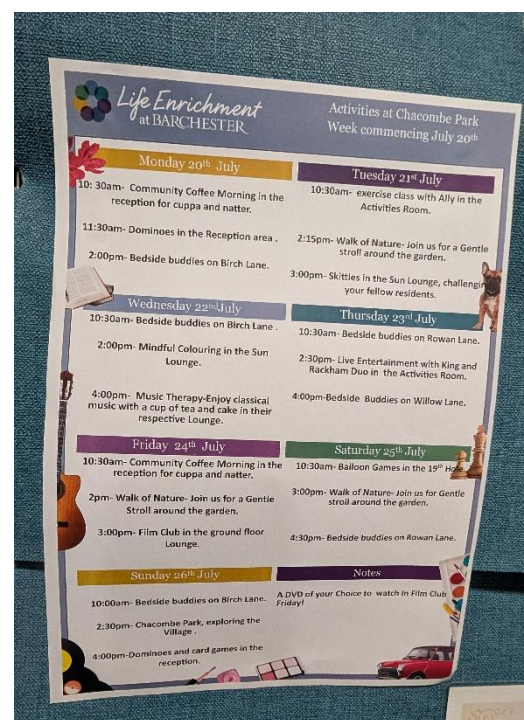
interaction, physical wellbeing and cognitive stimulation, while recognising that residents have differing interests, abilities and levels of independence.

The ground floor features a “Life Enrichment” board, which displays a wide range of upcoming activities, clubs and events for residents to engage with. Around the home, a weekly activities programme was displayed, outlining a variety of opportunities for residents to participate throughout the week, with three activities scheduled for each day. Activities included coffee mornings, film afternoons, holy communion days, exercise sessions and a dementia cafe, alongside creative and recreational opportunities that encouraged residents to remain active and engaged.



During our visit, members of the Enter and View team observed a group exercise session taking place, with residents participating enthusiastically under the guidance of an instructor. The atmosphere within the room was positive and encouraging, with residents appearing to enjoy taking part together.

The communal lounges and activity rooms provided flexible spaces for residents to engage in puzzles, games and hobbies, and supported smaller group activities throughout the day. Multiple small group or one-on-one sessions were observed with residents throughout the visit, with residents seen engaging in assisted activities like colouring and sensory toys.



The grounds of the home benefit from being built within a large estate, which offers many green spaces and grounds to incorporate in residents' activities. During our visit, we learned that many residents take part in gardening and often enjoy the outside spaces by accessing outdoor seating spaces around the home and taking walks with staff. Residents can bring their own bird feeders and plants; the home has a supply of bird feed and peanuts, which residents use to feed the wildlife.

The home has a resident ambassador, who runs a resident formal each month.

Dementia Friendly Care

The Enter and View team observed a number of environmental and operational features that demonstrated the home's commitment to supporting residents living with dementia.

Throughout the building, visual cues had been incorporated to assist residents with orientation and independence. Each floor followed a distinct theme, helping residents identify different areas of the home more easily. Bedroom doors within dementia care areas displayed residents' names and photographs, while clear signage throughout the home supported navigation between communal spaces and resident areas.

We noted that blue was used throughout the home, which can be calming for residents with dementia. The notice boards had a deep blue background, helping notices stand out. The carpets were blue in the majority of the rooms within the home, and the chairs in the first-floor dining room were blue.

Management explained that each resident completes a personalised "Getting to Know Me" booklet, capturing information about their life history, interests, routines and preferences. This information supports staff in delivering personalised care and encourages meaningful conversations that reflect each individual's experiences and identity.

Several communal areas had been designed to encourage engagement for residents living with dementia. During our visit, we observed the interactive Magic Table, which provides projected games, photographs and activities designed to promote cognitive stimulation, movement and social interaction. Staff explained that this resource is used regularly with residents and forms part of the home's wider activity programme.

We observed a small session with residents on the dementia floor engaging in sensory activities, where residents and staff were seen working with colourful toys and plushies and a few residents playing catch with a soft ball with staff members. The home also hosts a dementia café to support residents.



The home also provides dedicated dementia care alongside residential and nursing services, allowing residents' care needs to change without necessarily requiring them to move to another provider. Management explained that this continuity helps residents remain in familiar surroundings and supports established relationships with staff.

Environmental design also reflected dementia-friendly principles. Corridors remained uncluttered and well lit, communal spaces were easy to identify with clear signs, and contrasting colours were used within some areas to support residents with visual or cognitive impairments. We observed calm and comfortable communal environments that encouraged residents to move freely throughout the home while maintaining safety. Residents can decorate their rooms how they would like; we noted that many of the rooms we observed had many photographs and pictures, helping to ensure spaces felt familiar.

Dining and routines

There are dedicated times for residents to dine, breakfast is typically served at 8 am, lunch at 12:30 pm and dinner/ tea between 17:30 pm. Management stated that individual choices are respected and considered if residents have any preferred meal times. In addition to the main meal times, snack rounds are held at 10:00 am, 15:00 pm and 21:00 pm daily. Light bite menus, cakes, snacks, and sandwiches are always available for residents. Alternative main meals are available to residents as per their preferences if required.

We did not observe a full mealtime during our visit; however, we observed residents being set up for a meal and staff making residents comfortable at tables and discussing the day's menu and options.

Management explained that residents are offered a choice of meals each day, with menus displayed within the dining areas. To support residents living with dementia or communication difficulties, visual representations of meal options are used to help individuals make informed choices. We noted books within the dining rooms dedicated to comments on the food and beverages served.

The Enter and View team observed that refreshments were readily available throughout the day. With drinks stations, snacks in some of the communal spaces and refreshment trolleys, we observed that these circulated to residents' rooms and provided residents with access to hot and cold beverages between

mealtimes, alongside light snacks, helping to promote hydration and nutritional intake outside of scheduled meals.

The home demonstrated an awareness of residents' differing nutritional requirements, with management explaining that specialist diets, texture-modified meals and individual nutritional needs are accommodated where required. Information regarding dietary requirements was managed appropriately to support safe meal provision.

Interactions with staff and residents

Throughout the visit, the Enter and View team observed positive and respectful interactions between staff and residents across all areas of the home. Staff consistently greeted residents warmly, addressing individuals by name and engaging in friendly conversation as they moved around the building.

Residents appeared comfortable approaching members of staff for assistance, with staff responding promptly and patiently to requests for support. We observed staff adapting their communication according to residents' individual needs, allowing people time to respond and maintaining eye contact during conversations. Interactions were calm, respectful and unhurried, helping to create a reassuring atmosphere throughout the home. We noted staff knocked on residents' doors before entering.

Staff were visible across the communal areas during the visit and remained attentive to residents while allowing individuals to maintain as much independence as possible. Rather than completing tasks for residents unnecessarily, staff were seen encouraging individuals to participate in everyday activities and offering support only where required.

The Enter and View team also observed positive interactions between staff members themselves. Communication appeared professional and supportive, with staff working collaboratively across different areas of the home.

Management explained that the home places significant importance on maintaining continuity of care, with staffing provided by permanent employees and support from neighbouring homes within the organisation where additional cover is required, reducing reliance on external agency staff. We felt this approach contributes to residents receiving care from familiar faces and helps promote consistency in care delivery.

Medical Support and Care Plans

During discussions with the management team, the Enter and View team gained an overview of the home's approach to clinical care and care planning.

Management explained that care is delivered using a multidisciplinary approach, with regular involvement from healthcare professionals including GPs, district nurses, speech and language therapists, tissue viability specialists and other external services where appropriate.

Residents' care plans are developed following comprehensive assessments and are reviewed regularly to ensure they continue to reflect individuals' changing needs. Staff explained that care plans are updated following significant changes in health, hospital admissions or incidents, enabling care to remain responsive and person-centred.

The home demonstrated a proactive approach to managing clinical risks. Falls prevention formed an important part of residents' care, with management explaining that individuals who experience repeated falls receive multidisciplinary reviews to identify any underlying causes and implement appropriate interventions. Equipment such as sensor mats, pressure-relieving mattresses, profiling beds and mobility aids were available where required, supporting residents to remain safe whilst maintaining as much independence as possible.

The Enter and View team also learned that pressure area care is closely monitored, with risk assessments completed routinely and preventative measures implemented according to individual need. Clinical oversight is supported through regular monitoring and documentation, helping staff identify changes in residents' health at an early stage.

Management explained that a GP visits the home weekly to review residents requiring medical assessment, while additional clinical support can be accessed promptly when concerns arise. The home also described its "whole home" approach to responding to emergencies, ensuring all staff understand their responsibilities and work together effectively when responding to residents' changing health needs.

Throughout the visit, we observed that clinical equipment appeared well maintained and appropriately stored. Infection prevention measures were

evident across the home, with clinical areas, treatment rooms and equipment appearing clean, organised and ready for use.

Hearing the voices of residents

When speaking with residents, we asked individuals how they make their preferences known and how they are able to provide feedback to the care home's staff and managerial team. Residents stated that they felt that they could advocate for their needs with the staff at the home and that they would be listened to.

Family Involvement and visitation of residents

When we asked the home if there are set times for visitors, the staff stated that there are no set hours for families or visitors. Families and visitors of the residents are encouraged to visit at any time. Family members stated that they felt it was easy to visit the home and felt welcome to come anytime.

When we asked family members about how they were able to support their loved ones in the home, it was stated that many felt they could raise any requests or concerns with the home.

What People Told Us

During our visit on the 21st of July, our Healthwatch team spoke to 8 residents, 4 members of staff and 3 family members and/or visitors of the residents. Before speaking with anyone on the day, we ensured that we first asked permission to see if they would like to speak with our team. We also introduced ourselves and explained the purpose of our service and our visit to the home that day.

On the day of the visit, we made efforts to ensure we did not disturb staff members if they were providing care to residents. The residents we spoke to were happy to engage and share their experiences with us. As residents had varying levels of dementia, we ensured we checked in with staff to see if it was a good time to speak with the residents prior to asking questions. Our staff and volunteers were all equipped to handle conversations from our recent Dementia Awareness and MHCA/DoLS training. While some conversations varied in cognitive levels, every voice matters and is important to capture the experience of each resident.

The number of families visiting the home was dependent on the day; the home informed families that we would be visiting and shared that we were interested in interviewing them if they were willing to participate. We were able to speak with two families visiting residents, all of whom were happy to share their feedback on the care of their loved ones.

Resident Feedback

Experience at Chacombe House

We asked residents how they liked to spend their time during the day at the home and what they liked to do. When asked this question, some residents gave feedback to say:

"There is nearly always something to do, but if I do not want to take part, I do not have to."

"I like to do quizzes and general knowledge. Bowling in town, but sometimes I am limited by my back."

"I enjoy bird watching, picnics, walking around the grounds and taking part in activities organised by the activity team. I like to watch the golfers."

"I enjoy spending time outdoors, including bird watching and walks around the grounds."

"I like to do the exercise classes; they are helping me feel stronger."

"I like the hair and nail services."

"I can wander freely throughout the home and outside. I like poetry and have run a few groups on this interest of mine."

"I enjoy my role as resident ambassador, and I feel very central to the activities at Chacombe. I enjoy being able to play piano."

We asked residents if they enjoyed the activities and socials that the home offered. All residents who responded said that they did enjoy the offerings at the home.

We asked residents if they felt they could voice their opinions and make decisions about activities, meals and their care. Residents gave their feedback to say:

"Easy to do so, very good."

"Although we can make suggestions for meals, these are not always acted upon."

"Yes, although I'm a quiet person but I can always ask for assistance. I'm happy here."

"My care programme is very good, very caring staff, and I feel very popular with both staff and residents."

We asked the residents if they liked the food at the home; the residents gave their feedback to say:

"Sometimes I like it, sometimes I don't. I can order what I want from the chef- sometimes I want something specific like a pukka pie."

"It is okay. Some days are better than others. If you have meat, it is always nicely cooked and good. I love the stroganoff, and I always have a lovely cooked breakfast."

"I mostly eat in my room as the dining room can be noisy. The staff provided excellent service in the dining room, but I prefer to be in my own room."

"Excellent, as we have menus and can always provide feedback on what we've had to eat."

"It is shocking and very repetitive. The menu is repetitive and lacks variety throughout the week."

"I enjoy the meals."

We asked the residents if they find it easy to make their way around the home. Residents' feedback was:

"Yes. I know this place well."

"The home is easy to navigate."

Quality of Care and Communication

We asked residents if it is easy for them to get the support and attention of staff when they need it. Residents gave their feedback to say:

"If I want to summon staff, I have a call bell around my neck, or I can shout for their attention."

"Yes, it is easy to do; they are very good here."

"Yes, I go to the office, and I can speak to them. Review. Everything is there for me and is put in place. I do need them quite a bit."

"Staff are really helpful and provide all the information I require."

We asked the residents whether they felt cared for, and all who answered said they did.

We asked the residents whether it is easy to access dental and healthcare. Residents' feedback to say:

"Yes, I am registered with the GP who came, and I am pleased that there are nurses there. I feel that my health is being looked after"

"The GP is easy to see, it is all taken care of by the home."

We asked residents about their experiences with the staff at the home and how their interactions with them had been. Residents gave their feedback to say:

"I am looked after wonderfully – staff are helpful, careful, never look annoyed, and are willing to oblige."

"Very good, they treat me very well. Like I am their grandmother."

"The staff are very good and I have no complaints."

"Pretty good. I am a bit of a jokester. I like to joke with staff. I am happy here."

"Some carers are excellent and some are not."

"Very caring staff."

We asked the residents if they wished to share anything additional about their experience at the home. Residents shared the following:

"The care home feels like home to me, and I am made to feel comfortable by the care support team."

"Wheelchair users are sometimes brought into the dining room around 12:00 pm, despite lunch not being served until approximately 12:30 pm, leaving some residents waiting with little to do. There has been no ice cream available for over a week, despite it remaining on the menu, and I feel that communication regarding unavailable menu items could be improved. Also, management were not very visible within the home and would like to see them engaging more regularly with residents."

"The grounds are beautiful and well looked after."

"They are hiring someone who can take us to town; when they get this it will be good, as I would like more trips to town."

"I feel that this is not a care home but it is my home."

"I enjoy the way my family can access the home."

"As the Ambassador, I feel that I have more access to the home than some of the other residents, as my musical skills are used to entertain. I do not feel exploited, but like an asset and I am happy to contribute to the home."

Resident's Families Feedback

On the day of our visit, our team were able to speak to a few families visiting residents. We asked them about their experience visiting the home and how they felt the quality of care was for their family member.

Environment and Experience

We asked the family members if they were able to choose the home and why they chose it. One family shared:

"We chose it as we live in the area and knew about it, and needed something local."

We asked the family members if they found it easy to arrange visits at the home. One family shared:

"It is really easy to visit; they will let you in any time."

"We feel welcome whenever we visit."

We asked the residents' family members if their family member has access to a range of activities. Family members said:

"Our family member is engaging in activities, which is great, as before coming to the home they were not doing well and did not want to do anything."

We asked the families if there was anything that they wanted to highlight at the home. Families shared the following feedback:

"It feels like home, and I feel confident that they are receiving good care."

"We love that they are kept company, the home is able to give them care and attention, and we felt worried before when they were on their own, and now they are stimulated by people around."

"Staff have taken the time to get to know both ourselves and our loved one."

We asked the families if there was anything that they felt could be improved at the home. Families shared the following feedback:

"Our relative tells us that the food could be improved and that there could be greater variety offered."

"More food variety would improve their experience."

Quality of Care and Communication

We asked how their interactions with the staff at the home had been. Family members' feedback says that:

"Good interactions, they are always smiling."

"Staff are very approachable."

We asked family members if they felt informed and involved in their family member's care and were able to communicate the needs of their family member, including care plan reviews, medications and health appointments, as well as if they felt they were well cared for at the home. Family members shared:

"Our communication with staff is good, and we appreciate being involved in our relative's care."

"The care provided is very good, and the carers are supportive and approachable."

"It is easy to communicate with the staff here, and they are good, we are up to date with medication and GP appointments and are able to voice our opinions when needed."

We asked the residents' family members about their family members and whether they found it easy to access personal, health and dental care. One family said:

"The GP visited last week, and the home communicated this and gave us updates. They are helping us to get our loved one signed up with the memory clinic."

We asked families if they felt that the staff knew their relative as a person, including their likes, dislikes and preferences. Families said:

"They ask us about our family members' preferences and background to get to know them better. They gave us a booklet to fill in with photos and information. The staff are always smiling."

Staff Comments

During our visit, we spoke to four staff members; we were mindful of ensuring we did not interfere with any care they needed to provide before asking to speak with individuals. Staff were happy to speak with our team and provided the following feedback:

Training and Support

We asked staff if they felt adequately trained to handle and understand the residents and their needs. Staff said that they felt adequately trained. One staff member shared more about their training:

"We are adequately trained and work on each floor. Each resident has a get to know me document, which shows their interests and helps staff to get to know residents and their history."

"Yes, we are well trained. Our appraisals are often used to identify training needs, and this is done by our manager"

We asked staff if there had been any training that has benefited them since working at the clinic, and if there was any training that they wished to have. Staff said the following:

"Getting trained on manoeuvres, handling, and feeding, all from Barchester. We get refresher training every few months."

"We have received a lot of training: customer service, manual handling, food and nutrition, as a carer, interaction with families. Etc."

"The training we have is adequate."

We asked staff if they felt supported by other staff and management at the home. Staff said:

"Yes, everyone here works together, including management."

"The staff make life so beautiful for working. We have a good team and we can swap shifts to suit our needs when necessary."

"Yes, I feel very much supported by all the staff at Chacombe, regardless of the person's role."

We asked staff what kind of support is available at the home to make dementia residents feel at home and supported. Staff shared:

"The bedside buddies and supports are very helpful."

"Every dementia resident is different, and every approach is different; we do what we need for each resident to make them comfortable."

"Memory sessions, photo albums, the "get to know you" booklet, using knowledge of needs, interests, and working life history to inform appropriate activities for the individual. A mixture of group and individual activities."

We asked staff what they would do if a resident raised a concern or complaint. Staff said they would:

"I would discuss the issue there and then, and if I could not resolve it, I would raise it to management."

"I would try to fix it there and then, try and fix the issue the best that I can. We do not have many complaints, and we know the needs of our residents."

"Any complaints by a resident are dealt with by care staff, the deputy manager, and families."

We asked staff what the best part was about working at Chacombe Park. Staff said:

"I enjoy my job. The families trust us, and if the residents are happy, the families are happy. I take care of residents like my own grandparents. Being a carer is a privilege and a beautiful job. I put the residents first so that they are safe, clean and well-fed."

"We work as a team."

"This home is my family; it brings me happiness to look after them. I am happy, and I feel lucky to be a part of Barchester. Really happy to have Shaju as my manager."

"The relationships with residents, families and colleagues."

We asked staff if there was anything they thought could be improved. Staff shared the following:

"More activities; we have many activities, but more variety for the needs of different residents would be good."

"I would like the language in training documents and work documents to be simplified."

"Chacombe Park is located on such a wonderful site, I would like to see more use of the outside spaces, like additional benches, seasonal nature trails."

Commissioner and Provider Responses

Provider Response – Chacombe Park Care Home

Recommendation 1: Continue to develop meal variety and choice, listening to residents' requests.

Response: We welcome this feedback and are committed to ensuring residents have a varied and enjoyable dining experience. Resident meetings are held regularly, and menu feedback is reviewed monthly with the Head Chef. We will continue to promote opportunities for residents to suggest meal options and will review menu cycles to further increase variety and ensure preferences are reflected wherever possible. Feedback regarding unavailable menu items will also be communicated more effectively to residents.

Recommendation 2: Continue making full use of outdoor spaces.

Response: We are pleased that our gardens and outdoor areas were recognised as a key strength of the home. We will continue to incorporate outdoor activities, gardening opportunities, walks, seasonal events, and social gatherings into our Life Enrichment Programme. We will also explore additional seating areas to further encourage enjoyment of the grounds.

Recommendation 3: Continue dementia-friendly best practices.

Response: We are committed to maintaining and further developing our dementia-friendly environment. Existing initiatives, including personalised room identification, "Getting to Know Me" profiles, sensory activities, dementia cafés, themed areas, and the Magic Table, will continue to be embedded within daily practice. We will regularly review opportunities to introduce further dementia-friendly enhancements.

Recommendation 4: Review room identification within independent living areas.

Response: We acknowledge this observation and will review signage within the independent living apartments. We will consider increasing font sizes and improving visual contrast to ensure room identification remains accessible for residents with visual impairments and changing needs.

Recommendation 5: Address minor environmental issues.

Response: Environmental audits and maintenance checks are completed routinely throughout the home. The exposed wiring identified during the visit has been rectified, and processes remain in place to ensure maintenance issues are

reported and actioned promptly. Staff will continue to monitor clocks and orientation aids to ensure they remain accurate and support resident wellbeing

Recommendation 6: Incorporate coloured crockery in dining rooms.

Response: Chacombe Park already has coloured crockery available and uses it according to individual resident needs following assessment. Following this recommendation, we will review opportunities to increase the routine availability of dementia-friendly crockery within dining areas, particularly where this may enhance independence and the dining experience for residents living with dementia

Overall Provider Comment:

Chacombe Park Care Home would like to thank [Healthwatch West Northamptonshire](#) for undertaking the Enter and View visit and for recognising the many positive aspects of the home, including the welcoming environment, person-centred care, dementia-friendly practices, staff interactions, activities programme, outdoor spaces, and clinical support available to residents. We welcome the recommendations contained within the report and will use them to further enhance the experience of residents living at Chacombe Park. We remain committed to delivering high-quality, person-centred care and continuously improving our service through resident, relative, and stakeholder feedback.

Acknowledgements

Healthwatch West Northamptonshire is grateful for the time, efforts, and cooperation of the staff and management at the Chacombe Park Care Home Facility. We appreciate the ability to be allowed into the home's facilities to evaluate and assess the premises, as well as being able to speak with staff, residents and their families to better understand their experiences.

Thank you to our volunteers for their hard work and time dedicated to gathering the data and valuable information needed for this Enter and View. Special thanks to our Healthwatch West Northamptonshire's volunteers, Mark Vincent, Rutendo Msonza, Susan Hills, Morcea Walker and Joan Nduati.

About West Northamptonshire Healthwatch

Healthwatch West Northamptonshire is the local independent consumer champion for health and social care. We are part of a national network of local Healthwatch organisations. Our central role is to be a voice for local people to influence better health and wellbeing and improve the quality of services to meet people's needs. This involves us visiting local services and talking to people about their views and experiences. We share our reports with the NHS and social care, and the Care Quality Commission (CQC) (the inspector and regulator for health and social care), with recommendations for improvement, where required.

Our rights and responsibilities include:

- We have the power to monitor (known as “Enter and View”) health and social care services (with one or two exceptions). Our primary purpose is to find out what patients, service users, carers and the wider public think of health and social care.
- We report our findings of local views and experiences to health and social care decision-makers and make the case for improved services where we find there is a need for improvement.
- We strive to be a strong and powerful voice for local people, and to influence how services are planned, organised and delivered.
- We aim to be an effective voice rooted in the community. To be that voice, we find out what local people think about health and social care. We research patient, user and carer opinions using many different ways to discover views and experiences. We do this to give local people a voice. We provide information and advice about health and social care services.

Where we feel that the views and voices of Healthwatch West Northamptonshire and the people whom we strive to speak on behalf of are not being heard, we have the option to escalate our concerns and report our evidence to national organisations including Healthwatch England, NHS England and the Care Quality Commission.

Find out more at <https://www.healthwatchwestnorthants.com/>



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Connected Together Community Interest Company (CIC) is the legal entity and governing body for Healthwatch West Northamptonshire.

The remit of the Connected Together CIC includes:

- Contract compliance
- Legal requirements
- Financial and risk management
- Sustainability and growth
- Agreeing strategy and operations
- Agreeing policies and procedures



Connected Together CIC is a social enterprise. It aims to be first for community engagement across the county of Northamptonshire and beyond.

By using our expertise and experience, we can help you in delivering community engagement programmes including workshops, research, surveys, training and more. Contact us to find out how we can help your community.

We welcome ideas and suggestions for projects that benefit Northamptonshire and its community.

Find out more at www.connectedtogether.co.uk

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