



Enter and View Report

Riverside Care Home

April 2025

Report details

General information about the service	
Name and address of the Care Home:	Riverside Care Home, Manchester Rd, Hyde, SK14 2DE
Type of Care:	Residential, nursing and dementia care.
Number of Residents:	87
Description of Facility:	Situated in a residential area of Hyde, Riverside is an 87 bed care home with several lounges, dining areas and gardens. All living areas are easily accessible by wheelchair. The home is ran by CareUK
Care Quality Commission Rating:	Good. The report can be viewed: Riverside - Care Quality Commission
Details of visit	
Visit date and time	30/04/25 - 10:30am
Healthwatch Tameside Enter and View Representatives	Ayesha Khatun Imogen Shortall Linda Kent

Acknowledgements

Healthwatch Tameside would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme.

Disclaimer

This report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.



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“Our Enter and View visits offer a vital opportunity to see services in action, hear directly from those receiving and delivering care, highlighting both good practice and areas for improvement. This work ensures that the voices of Tameside residents are not only heard, but also help shape more person-centered compassionate, and effective care environments.”

Alex Leach, Healthwatch Tameside Manager



Introduction

About us

Healthwatch Tameside is the independent consumer champion for health and care. It was created to listen and gather the public and patient's experiences of using local health and social care services. This includes services like GPs, pharmacists, hospitals, dentists, care homes and community-based care.

Emerging from the Health and Social Care Act 2012, a Healthwatch was set up in every local authority area to help put residents and the public at the heart of service delivery and improvement across the NHS and care services.

As part of this role Healthwatch Tameside has statutory powers to undertake Enter and View visits to publicly funded health or social care premises. These visits give our trained Authorised Enter and View Representatives the opportunity to observe the quality of services and to obtain the views of the people using those services.

What is Enter and View?

Local Healthwatch representatives carry out Enter and View visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act 2012 allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation – so we can learn about and share examples of what they do well, from the perspective of people who experience the service first hand.

Healthwatch Tameside Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with our safeguarding policies.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the Care Quality Commission (CQC) where they are protected by legislation if they raise a concern.



Purpose of the visit

The purpose of the visit was to:

- Observe the environment and routine of the venue with a particular focus on how well it supports the dignity of residents and their independence.
- Speak to residents, family members and carers about their experience in the home, focusing specifically on the care and any treatments provided.
- Give staff an opportunity to share their opinions and feedback about the service.

The questionnaires and observations were based on eight care quality indicators developed by the national charity, Independent Age. These were:

1	Have Strong, visible management
2	Have staff with time and skills to do their job
3	Have a good knowledge of each individual resident and how their needs may be changing
4	Offer a varied programme of activities
5	Offer quality, choice and flexibility around food and mealtimes
6	Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists
7	Accommodate residents' personal, cultural and lifestyle needs
8	Be an open environment where feedback is actively sought and used



Executive summary of findings

Riverside is a well maintained, spacious care home. Residents benefit from rooms with en-suite toilets, several lounges, cafe-style dining rooms and an in-house salon. Ground floor residents have easy access to large well maintained gardens. The building is currently undergoing refurbishments, including redecoration and a new sensory room is being built.

Staff reported enjoying their roles, as they enjoy “the interaction with the residents,” “helping people” and “find it interesting to learn about residents past.”

Many staff members have been working for the care home for many years enabling continuity of care to residents. Staff felt well trained and support was adequate to do their jobs effectively. Several comments were received about the positive impact the new manager has had since her appointment in December 2024.

During our observations residents appeared to be well groomed and residents told us staff work very hard.

Relatives told us they were happy with the care their family member received and praised staff for their hard work. They felt communication with the care home is good and receive regular updates about their family member. Relatives felt comfortable providing feedback and approaching management if they had an issue.



Methodology

Prior to the Enter and View taking place

We informed the care home of our intention to conduct an Enter and View visit four weeks in advance. An intention to visit (though not the date and time), the purpose and structure of the visit were clearly shared with the provider in writing.

We offered to meet with the care home manager prior to the visit taking place, but we did not have a response. Therefore, we were unable to put together a schedule in advance of the visit.

We asked the provider to display a poster with details of the Enter and View visit and copies of Family, carers and friends questionnaires were left at the home to return via FREEPOST.

During the visit

On the day of the visit, we were introduced to the manager and met with a staff member. A schedule for the visit was agreed, taking into consideration mealtimes, visiting times for carers and families etc. We also ascertained if there were individuals who should not be approached or were unable to give informed consent and a comprehensive risk assessment was completed.

The visit was carried out over the course of two hours. The visit date and times are shown on the front cover of this report. During the visit Healthwatch Tameside representatives spent time talking to the staff, relatives and residents using an agreed set of questions.

16 Interviews and observational methods were used to give an overview of this service from a layman's perspective. This data was recorded using standard observation sheets and questionnaires developed by Healthwatch Tameside.

Authorised representatives spoke to 5 residents and 3 relatives and conducted short interviews about their experiences of the service using guided questionnaires. 2 surveys from family, carer and friends were received in the post. 5 members of staff were also interviewed. The manager was not available to speak to us on the day of the visit and a questionnaire was returned to us by email 5 weeks following the visit.

Following the Enter and View Visit

Initial findings were shared with the provider straight after the visit. Following the visit, we promptly completed a draft report within 17 working days of the visit. The draft report was sent for comment to the provider, allowing 20 working days for their response. Despite multiple contact attempts and offering an extension, no response was received by the provider.



Results of the visit

Observations

Location and external environment

Riverside is a purpose-built care home located in a residential area of Hyde, near to a main road with a regular bus route and is close to local amenities. Signage to the Care home was clear from the road. On the day there were multiple parking spaces with marked disabled parking bays. The building is on two floors and all areas are wheelchair accessible.

Access to the garden is through patio doors leading to a large patio and lawn area with multiple seating areas where residents can relax and socialise. There is a designated smoking area. The flower beds, bird feeders and hanging baskets were well maintained.

Internal environment

On arrival the reception area was warm and welcoming with a staff member at the reception desk and a visitors book where representatives were asked to sign-in. A staff member provided a brief tour of the building, facilities, routines and residents.

The care home has four categories of care, split into 4 areas of the building which include a residential unit, dementia unit, nursing dementia unit and young person's unit. Each area has a similar layout with separate lounges, dining areas and communal bathrooms. All of the units were secure and require a staff pass in order to enter and a code to exit the building.

All areas of the home appeared clean, well maintained and with no inobtrusive smells or noises with adequate lighting and clear walkways wide enough for wheelchairs and walking frames. On the day we saw some areas were undergoing redecoration and a new sensory room was being constructed.

The lounges were spacious with TV's, music playing and several types of seating including comfortable armchairs grouped together with magazines and newspapers available to residents. There are quiet areas if residents wanted to meet with visitors.



Figure 1: Corridors



Figure 2: Lounge



Residents

Residents appeared well groomed and dressed appropriately. We saw a few residents with no shoes on, when we asked staff about this, we were told that this was related to their condition and it was in their care plans. During the visit we saw one resident involved in a colouring activity with a staff member and other residents were sleeping or watching TV. Residents looked comfortable and content and others were moving around the home independently. Staff wore identifiable uniforms colour coded to match their job roles. A member of staff was seen sensitively helping a resident out of their chair and supporting them with their aid to the bathroom and back.

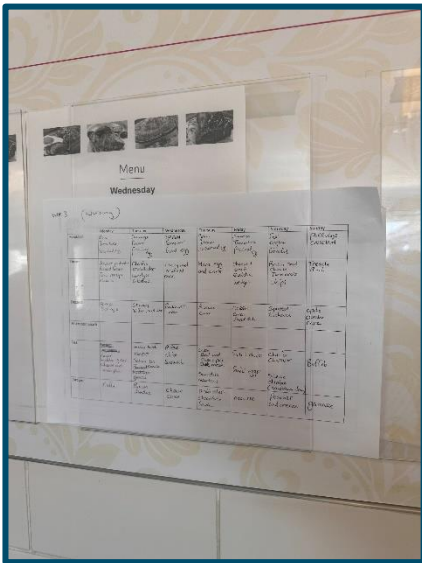


Figure 5: Menu



Figure 4: Dining Room



Figure 3: Dining Room

Food

Residents are served three freshly cooked meals a day with a three course set menu option and a dessert. Alternative meal choices are available on request and snacks are served throughout the day, which include fruit options. The menu operates on a three-week rotation and incorporates a varied diet and is displayed in the reception area and each unit, see image below. Relatives are welcome to sit with their family member during mealtimes.

Representatives were able to have a quick overview of lunch time. Residents appeared to enjoy their meals and tables were set in groups to allow socialisation. Some residents were seen being supported to the tables by staff and offering assistance in a caring manner. We observed staff maintaining residents' dignity when assisting residents to eat their meal.



Bathrooms

Communal bathrooms were accessible and clean and free from clutter. There are four large bathrooms in each unit which include a bath or shower. Aids such as grab rails, hoists, shower chairs were seen.

The bathrooms had dementia friendly signage with pictures and words. The overall hygiene of the bathroom was good as a regular cleaning schedule is maintained by housekeeping staff. They have onsite laundry, and all clothes are labelled with names and room numbers.



Figure 7: The Salon



Figure 8: Bathroom

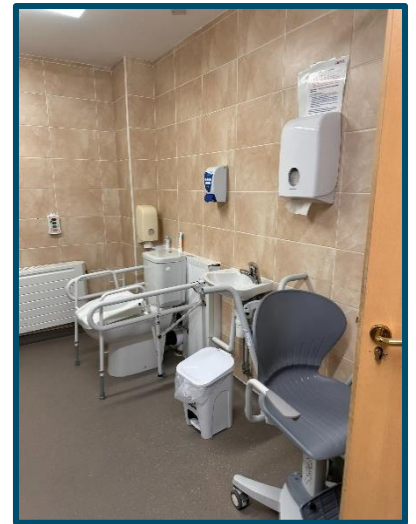


Figure 6: Bathroom

Resident rooms

A sample of resident bedrooms were included in observations that formed part of the visit. Residents' rooms were clean, comfortable and pleasantly decorated. Resident rooms were personalised with familiar belongings, such as family photos, ornaments and bedding to help foster a sense of belonging and identity.

Each bedroom had an ensuite, which were clean and in good condition. There is sufficient storage for belongings and a comfy chair. Rooms had radios and televisions and a nurse call system. Rooms were numbered, some had artwork or pictures outside and representatives were made aware that memory boxes were used in the past however these were taken down due to being a risk. In the dementia unit some rooms had window films on the glass to avoid disorientation. The ground floor bedrooms have independent access to the gardens.

There is also a salon on site for residents to use.



Notice boards and signage

Notice boards were on display in the reception area included a complaints procedure, menu, activities, relative satisfaction survey results and a 'meet the team' board. Some information was outdated. A poster inviting people to feedback about Riverside through scanning a QR code was also on display.



Figure 11: Notice Boards

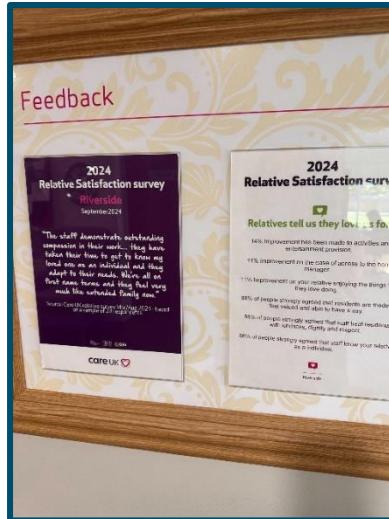


Figure 10: Notice Boards

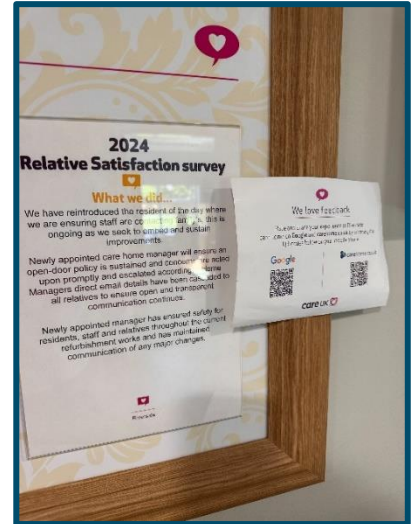


Figure 9: Notice Boards

The home observed a number of dementia friendly indicators in areas used by residents including floor and door colour contrast with walls and signs approx. 4ft from floor level and toilets labelled clearly with pictures and bathrooms without mirrors.

Grab rails and door handles were in a distinctive colour. The care home also has an in-house Dementia Care Co-ordinator.



Findings from speaking to staff, residents, family, friends and carers

1: Have Strong, visible management

Staff and management feedback

The manager has been at Riverside for four months and brings nine 9 years of experience in senior management positions. She told us that she enjoys being able to make a difference in people lives and supporting the residents.

Staff gave positive feedback about the new manager, they told us they find her approachable and supportive and management have an open-door policy. One member of staff highlighted positive changes have been made under new management such as equipment and supplies are better and staff attendance has improved.

Comments from staff included:

- *Kind and lovely, very good manager*
- *Made improvements, supplies are better*
- *Support staff, eg. when needing to change rota's, reviewing strutures*

Resident, family, friends, and carer feedback

All of the 5 residents we spoke with told us they did not know who the manager was, some knew there was a new manager. Residents told us all staff are very good.

3 out of 5 relatives did not know who the new manager is, and one relative reported past interactions with the deputy manager have been positive. Relatives also told us management are approachable and have an open-door policy. We asked family, friends and carers: how helpful and friendly are the management?

- *Don't know manager, but relative was in a different home which was not so good for communication*
- *Think I know the manager*
- *Agree - there is strong and visible management*
- *Management office is in the reception area and are easily spotted*



2: Have staff with time and skills to do their job

Staff and management feedback

The manager informed us staff development is addressed during supervisions and one to one meetings. Internal staff growth is promoted, and additional training is offered. She ensures staff have enough time to care for residents based on their individual needs.

Staff felt well equipped and supported in their roles with regular access to ongoing training and mentioned undertaking moving and handling, dementia awareness, first aid, life support, Autism and fire safety. Development opportunities include NVQ's and mental health first aider training. Most staff felt they had enough time to care for residents, with one staff member commenting they felt more staff were needed and sometimes other staff do not have time to help as much as they could. Another staff member stated that the equipment request process takes too long, as requests go through too many hands. Staff gave the following comments:

- *Have all the training I need*
- *Any extra training I need, I just ask*

Resident, family, friends and carer feedback

Overall residents were positive about the care they received from staff, however, several comments were made about staff being very busy:

- *Staff are alright, they look after me*
- *Good staff but very busy*
- *Staff try their best, but they are sometimes rushed off their feet*

Relatives gave the following feedback about the care their family member receives:

- *Family member is always clean and tidy in appearance*
- *I ring up to check on care. Staff will chat with relatives.*
- *Staff treat my father with compassion, care and concern*
- *Staff are very busy*

3: Have a good knowledge of each individual resident and how their needs may be changing

Staff and management feedback

The manager and staff informed the Healthwatch Team that information about a resident is gathered before they are admitted to the care home, and a care plan and one-page profile is developed incorporating medical information, preferences and life history, with input from family members.



Residents benefit from the continuity of staff at Riverside, the length of service of the 5 staff that we spoke to range from 1- 15 years and staff feel they have a good knowledge of resident's needs. Any changes in residents' needs are reviewed during daily meetings, handovers and weekly clinical meetings. Staff told us management are kept up to date of any changes and care plans are updated. Staff gave the following feedback:

- *It is a priority to understand residents needs*
- *I have lots more time here than other care homes I've worked at*
- *We make time to get to know residents*

Resident, family, friends and carer feedback

Residents generally felt staff have a good understanding of their needs and likes and dislikes. One resident told us that staff 'didn't always' have a good understanding of their needs, likes or dislikes. All the relatives we spoke to strongly agreed when asked if staff have a good knowledge of their family member and changes are discussed with them, with the comments:

- *They are very aware of my relatives needs and always keep me informed of any changes, they call me or discuss it when I come into the home.*
- *Staff often ask about my dad before his dementia journey which this helps them to understand him better*

4. Offer a varied programme of activities

Staff and management feedback

The home benefits from 3 activity co-ordinators. A range of daily activities is on offer (see activity programme below) as well as trips and events. Staff gave us examples of karaoke, movie nights, namaste care (for residents who are bed bound), fitness Wednesday and football and use of the salon. Staff told us activities are tailored as much as possible and planned around residents' preferences and interests. The home tries to support residents to continue to do the things they used to enjoy before coming into the home, for example attending trips. Staff encourage residents to participate in activities and engagement is logged on the 'Relish' app, which families have access to. One staff member felt that although there were lots of activities on offer, there could be more.



Figure 13: Activity Timetable



Figure 12: Activity Timetable



Resident, family, friends and carer feedback

Residents gave us examples of activities they enjoyed such as watching football, TV, or listening to music. 2 residents told us they choose not to engage in activities and their wishes are respected. One resident explained that they cannot join in with activities due to not being able to sit or move much. On the day we did not see any activities apart from one resident who was colouring. Family, carers and friends gave the following feedback:

- *My relative knows about the activities but likes to be on their own*
- *Relative has advanced dementia but goes to lounge even though unable to participate*
- *Plenty of activities on offer and relative is always encouraged but they are reluctant to take part.*
- *Due to the decline in my father's health, he is only able to do the Namaste activity*

5: Offer quality, choice and flexibility around food and mealtimes

Staff and management feedback

Meals are cooked fresh on site, and the menu caters for various dietary needs including allergies, diabetes and softer diets. International Dysphagia Diet Standardisation Initiative (IDDSI) training is undertaken by staff to enhance their knowledge and skills to safely manage food and drink textures.

The manager stated that mealtime experience audits are conducted to maintain a high standard of food and quality. Meals are usually served in the dining room in each unit, however, residents can choose where to eat and at a time that suits them. Staff told us they do a "show me" meal at lunch and dinner to show the residents what food is available, and residents also have the option to order off-menu. Staff try to make mealtimes enjoyable with music and encouraging conversations. Outside of mealtimes regular snacks and drinks are offered.

- *We sit with residents and assist when required*
- *We know about their likes and preferences*

Resident feedback

All of the residents reported food and drink in the home being adequate and enjoy the meals. One resident made a comment about roast potatoes being hard. When relatives were asked about what they thought about the quality and choice of food, they said:

- *Food is always available and we have eaten together at the home*
- *I have sat with my father at meal times and the food looks plentiful and good quality*
- *They manage diabetic needs very well*



6: Ensure residents can regularly see health professionals such as GPs, dentists, opticians or chiropodists

Staff and management feedback

Digi-health, a digital health solutions app was noted to be used by the care home to request medical advice and support. Staff told us 4 regular GP's visit the care home as required and Healthy Hyde team visit once a week. Dental and optician appointments are requested, and a Chiropodist visits every month. Appointments and transportation are arranged by Riverside and where family members cannot attend, the care home provide staff.

Resident, family, friends and carer feedback

Residents told us:

- *I do see regular health professionals but want to find out more about podiatry service*
- *Trying to get specsaver apppointment*
- *Doctor comes in*
- *Well-being clinic is in house*

Relatives highlighted appointments are made in a timely manner and doctors have come into the home to see their family member, and staff keep them informed. One relative informed us that her father's eyes are tested regularly and a chiropodist visits the home and he has been referred to Digi-health on occasions.

7: Accommodate residents' personal, cultural and lifestyle needs

Staff and management feedback

Staff actively support resident's personal, cultural and lifestyle needs and take the time to understand each resident's background, beliefs and personal routines and incorporate these into the care plans. Examples given included providing support for resident to attend church, providing halal or kosher meals, providing a prayer space for worship and encouraging residents to choose their bedroom wallpaper. Staff gave the following comments:

- *We treat everyone fairly*
- *I try to learn parts of their language for eg. Ukranian*
- *We get details from family and note on care plans*



Resident, family, friends and carer feedback

All of the residents informed us that the home does accommodate their lifestyle and cultural needs with the following comments:

- *I can watch the match*
- *I'm able to watch horse racing*
- *Church of England vicar came to visit*
- *I can wear my own clothes*

Family agreed that the care home does cater to their family members lifestyle needs and one relative was not sure if a regular priest visits the home, but her father would benefit from this as he was a practising catholic prior to becoming a resident.

8: Be an open environment where feedback is actively sought and used

Staff and management feedback

The manager shared that residents and families can give feedback via the CareUK website, in person, by email, Google reviews, and surveys. This feedback informs improvements and is reflected in a 'you said, we did' report. Staff said they felt comfortable raising concerns or ideas through supervisions, direct conversations with the manager, and CareUK surveys. Positive contributions can be recognised through the 'Gem system'. However, one staff member felt decisions were made higher up without staff input. When asked about desired changes, staff shared the following:

- *Changes are being made, but slowly. Needs building from the ground up*
- *Staff to work as a team to help each other out*
- *Need continual investment from CareUK to keep moving forward*

Resident, family, friends and carer feedback

2 residents told us they get opportunities to feedback, one resident didn't know, and another resident disagreed. When asked if they knew how to make a complaint, residents told us they would speak to staff or get a family member to. We asked residents if there was anything they would change about the home, two residents told us they wouldn't change anything and another gave the following comment:

- *Nothing – but staff turnover is a problem*

We found that relatives knew how to make a formal complaint and would speak to staff or management if they had concerns. One relative told us concerns are addressed straight away. We asked relatives if there was anything they would change about the home, with relatives commenting:

- *More staff needed particularly at night. Staff are always really busy in the day as well.*
- *I would like to see the residents from the Lowry and nightingale units have the opportunity to go into the grounds more often, when weather allows.*



Recommendations



- 1. Create a visible display of the menu and activity programme with picture elements:** The current menu and activity programme does not have any picture elements. Including pictures would enable residents, especially those with dementia to better understand choices and make decisions.
- 2. Review of the activity programme:** We had consistent feedback from relatives that their family member does not want to engage in activities, or cannot, due to physical limitations. Care home to explore ways of maximising the activity programme to include more dementia friendly activities or one to one room-based activities for less mobile residents alongside the current 'Namaste' activity.
- 3. Care home to consider leaving tabletop activities and games on lounges for residents to independently access at their leisure:** We only saw one resident doing a colouring activity during the duration of our visit and other residents playing with their own toys or watching Tv.
- 4. Review of all notice boards and revise the staff photo display:** Notice boards on the day contained outdated information, we recommend noticeboards contain up-to-date information. We also recommend the staff photo display is updated with current staffing, incorporating photographs, role descriptions, and uniform colours to enable residents and visitors to easily identify regular staff members.
- 5. Increase visibility of the management in the care home**

None of the residents or relatives knew the manager in person, they told us they knew there was someone new in the role. When capacity allows manager could increase visibility around the home, for example, by doing frequent walk rounds in the home.
- 5. Review feedback methods:** In addition to the QR code the poster in the main entrance inviting feedback about the care home, we recommend providing a more user-friendly option for those who may not be familiar with digital technology such as a 'comments and suggestions box.'
- 6. Review staffing levels:** We recommend a review of staffing levels, following feedback from residents and relatives about staff being very busy and one staff member expressing they would like more staff available when they need support.



Response from service provider

No response was received by the provider.



Contact Us

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