

Field House Care Home Spinners Green, Rochdale Enter and View Report

June 2025





Introduction

About Healthwatch

Healthwatch Rochdale is the local independent health and social care champion for the Rochdale borough. We are here to listen to local people's experiences of using health and social care services and we use those experiences to help improve services locally and nationally.

About Enter and View

Healthwatch Rochdale is part of the Healthwatch network which was established by the Health and Social Care Act 2012, with the right to 'Enter and View' places that deliver health and care. The right to 'Enter and View' is a statutory power for Healthwatch.

The objective of an 'Enter and View' visit is to understand the experiences of residents, collect their views and make observations of the site.

As part of an Enter and View visit Healthwatch Rochdale:

- Collect the views and lived experiences of people at the point of service delivery (users, carers and relatives).
- Observe the nature and quality of services being delivered.
- Write up a report which may include recommendations or praise for good practice.
- Share findings and reports with providers, regulators, local authority, NHS
 commissioners and quality assurers, the public, Healthwatch England and
 other relevant partners.
- Use insights and recommendations to shape health and care decisions that are being made locally.

Our Enter and View policy is available to view at https://healthwatchrochdale.org.uk/news/2023-01-18/our-policies

The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013 is available to view at http://www.legislation.gov.uk/uksi/2013/351/pdfs/uksi_20130351_en.pdf

Acknowledgements

Healthwatch Rochdale would like to thank Fieldhouse Care home management and staff members, residents, family members and all those who took part and took the time to speak to us.

Disclaimer

Please note that this report relates only to the service observed at the time of the visit. This report is not a representative portrayal of the experience of **all** service users and is only an account of the views of those who met with the Enter and View team at the time of the visit.

Enter and View visits are **not** inspections but are an opportunity for residents and service users to share their views on the care they are receiving. It is not the role of Healthwatch Rochdale to see evidence of policies, procedures, care plans or any other written evidence.

Enter and View Visit Information

Service address	Spinners Green, Rochdale, 0L12 6EJ		
Service Provider	Franklin Care Group		
Type of service	Residential registered for 42 beds. Care home with nursing.		
	Residential provision for dementia care, older personal care,		
	permanent and respite care.		
Date and time	Monday 16 th June 2025		
of Enter and	d (plus, a pre-visit took place on Friday 30 th May to meet with		
View visit	resident's family and friends)		
Authorised	ised Naomi Burke, Margaret Parker, Rosemary Nunwick, Anne		
Enter and View	w Taylor and Terry Rich		
Representatives			

Care Quality Commission rating.

The Care Quality Commission (CQC) monitors, inspects, and regulates services to make sure they meet fundamental standards of quality and safety. CQC publishes its findings, including performance ratings to help people choose care.

At the time of the Enter and View visit it was noted that the last inspection took place on 18th October 2023 and published on 4th January 2024. The CQC inspection determined that the caring was rated good but found that the overall

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rating for the home was "requires improvement." However, it was noted that a further CQC inspection of Fieldhouse Care Home took place on 28th March and 3rd April 2025 (and a medicines inspection on the 4th April) and the final report was due to be published soon.

To read the inspection information and reports for Fieldhouse Care Home please

visit: https://cgc.org.uk/location/1-124610869/reports

Visit Background and Purpose

Background

Fieldhouse Care home is a purpose-built home which is registered for up to a maximum of 42 people who require care. At the time of the Enter and View Visit 40 people were resident in the home. The home is situated in a modern housing estate with reasonable access to public transport within a short walk from the home with onsite parking for staff and visitors. The accommodation is provided over two floors, with lift access and a chair lift. The home offers a variety of communal areas including a small, secure garden.

Healthwatch Rochdale visited Fieldhouse Care Home on Monday 16th June 2025 as part of a programme of announced Enter and View visits to care homes in the Rochdale Borough. A pre-visit to meet with friends and family took place on Friday 30th May 2025.

The home was notified of our visit in advance by letter and by email. The manager was given a four-week time frame and informed that the visit could take place at any time within that time frame.



Methodology

The Enter and View team undertook observations round the home and:

- Spoke with 11 residents and 6 family members visiting relatives
- Observed areas of the home and garden
- Spoke with the manager and the Activities Co-ordinator, and informally with **several** staff including the chef, as the team looked round the home.

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Opportunities for friends, relatives, staff and visitors to share feedback, were displayed in the home alongside invitation for friends and family to chat to us.

The questionnaires and observations were based on nine care quality indicators developed by the national charity,

These are:

- Have strong, visible management.
- Have staff with the time and skills to do their job.
- Have good knowledge of each individual resident and how their needs may be changing.
- Offer a varied programme of activities.
- Offer quality, choice and flexibility around food and mealtimes.
- Ensure residents can regularly see health professionals such as GPs, dentists, opticians, or chiropodists.
- Accommodate residents personal, cultural and lifestyle needs.
- Be an open environment where feedback is actively sought and used.
- Provide a physical environment which is suitable for the needs of the residents.

The Enter and View Representatives advised that Healthwatch Rochdale would send a report with recommendations which require a response within twenty working days in line with the following legislation.

http://www.legislation.gov.uk/uksi/2012/3094/regulation/44/made



Positive highlights of the visit

- ✓ Staff were friendly and accommodating. They were open, honest and transparent to us as Enter and View Reps.
- Décor in dining room and lounge was fresh, neutral, clean, light and homely.
- Fieldhouse was clean and had a neutral smell.
- Staff had a natural rapport with residents demonstrating compassion and encouragement.
- ✓ The Kitchen staff were knowledgeable, and food provided was cooked fresh on the premises offering good choice and nutritional value.
- Hydration Station available at all times and staff observed checking residents had taken fluids throughout the visit.
- Manager's honesty was appreciated and insightful.



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Recommendations

The Enter and View visit identified the following areas for improvement and therefore recommend:

1.	Review the signing in book, or system, to ensure it is more clearly		
	accessible for visitors		
2.	Activities Board: To review the board to provide a daily display of the		
	planned activities using words, pictures and images for ease of		
	understanding. If a weekly or monthly overview is needed, to display		
	this separately.		
3.	To add a fixed display board to large wall in dining room to display		
	residents work without damaging paintwork.		
4.	Ensure staff and visitors are using a designated smoking area and		
	suitable ashtrays/bin provided, away from the lounge area.		
5.	Movable lip on ramp leading out to garden to be coloured/painted to		
	ensure not a trip hazard when not laid flat/flush.		
6.	To ensure no items are stored/left in front of fire exits. Staff are		
	reminded of fire precautions policies and procedures and a new		
	location is sought for the essential equipment.		
7.	Consideration being given to offering a more dementia friendly décor		
	and using more consistent colours to differentiate between rooms		
	(e.g. bathrooms and toilets) when planning the redecoration		
	programme for the home.		
8.	To enhance garden area where possible.		
9.	To remind staff to regularly check, all keys are not left in door locks.		
10.	To ensure all wall mounted Defib images state clearly where Defib is		
	located.		
11.	To incorporate more "dementia friendly" activities and signs within		
	the home.		



Results of the visit to Fieldhouse Care Home

A good care home should:

1. Have strong, visible management.

Residents Feedback

Residents were asked if they knew the manager of the home – and all eleven did. When asked what they thought about her, the residents spoke positively about the manager and said she has made "big changes..."

Friends and Family feedback

When relatives were asked if they know the manager of the home and what they think about her, all the relatives said they know the manager and the following comments were noted:

- She is more approachable than the last manager.... she is open and honest and seems committed to sorting everything out!
- I find her easy to talk to her predecessor was useless!!
- Yes. (The manager) is much better now...

Manager feedback

Ann Bannon is the registered manager for the care home, who has worked in her present role at Fieldhouse Care Home since February 2024. She has considerable experience of working in care homes gained over a career spanning 21 years. She commenced initially as a care assistant and, after promotions, became a manager who has obtained a wide range of experience through her employment with several companies and work in residential homes in Greater Manchester.

The Manager did not complete the prepared questionnaire ahead of the Enter and Visit although contributed further information during the Enter and View visit. The manager operates an open-door policy, and welcomes input and feedback from residents, family and friends.

Observations

During the visit it was observed that although the manager was busy with a range of administrative duties in the office, she kept the office door open and dealt with staff entering the office asking questions (and, in one instance, sharing information about a resident returning to the home after a hospital stay) in a

relaxed and easy manner and interacted with all the people positively and expressed enthusiasm for the resident returning to the home.

Staff feedback

Staff told us that the Manager of the home is approachable, easy to speak to, supportive of new ideas and "Mucks in to help when needed...!"



2. Have staff with the time and skills to do their job.

Residents' Feedback

When Residents were asked what they thought about the staff, most of the residents responded positively about them and said they like the staff, they feel part of a bigger family, that they can "have a laugh" with them and three said they know who **all** the staff are.

Friends and Family feedback

Relatives were asked if the staff have the time and skills to care for your friend/relative and received the following responses:

- The care staff have always been kind....(my dad) is happy here. It is his home.
- Generally, all very good. Some are lovely. A couple of the team could be better...
- I always feel like they are too busy to talk to me when I visit. Never say what he's been up to or if I ask if he's been OK (as I know he can be a handful) they just smile and say he's fine – which I find hard to believe sometimes.

A resident's daughter told us that she is highly appreciative of the staff and how they handle her 88 year old father who has dementia, she said "Although my

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dad's dementia has got worse, the staff are aware of his situation, they are skilled in negotiations with him and encourage him – this shows they have the skills for their role in the home."

Observations

On the day of the visit staff were observed interacting with residents in a variety of ways. Two staff members were observed with the medication trolley, they greeted residents, told them what they were giving them, chatted with them in a warm and friendly manner. Kitchen staff were observed taking the days lunch orders, when a resident was unsure, they told them they would come back to them when they had decided without any added pressure on the resident.

It was observed that staff were busy and in between interactions with residents they were filling in notes, verbal feedbacking to other staff, getting drinks for residents.

Manager feedback

Since her appointment, the manager has placed a strong emphasis on ensuring that all staff have the necessary training and support to carry out their roles to a high standard. She has improved the Fieldhouse staffing quality by addressing previous poor practices and embedding improved systems. Since her arrival, there has been a notable turnover in care staff, with recruitment targeted at ensuring the home has a full complement of trained and competent individuals.

A comprehensive induction programme is now in place for new care staff, lasting approximately four weeks. During this period, new starters are, wherever possible, paired with the same experienced member of staff to provide continuity, support, and mentoring. This approach is intended to help new employees become familiar with the home's expectations and procedures, and to promote consistent standards of care.

Mandatory training requirements for care staff have been significantly increased from 23 to 33 units, most of which are delivered online. The manager has also introduced a system to record and monitor staff training compliance, with monthly audits conducted to ensure training remains up to date and no certifications expire.

In addition to care staff training, all other staff groups receive role-relevant training. For example, housekeeping staff complete training in Health & Safety and COSHH, while kitchen staff undertake food hygiene and food safety training.

The manager continually reviews the staffing levels in the home and adjusts them in consultation with the owners based on observations of resident needs and staff workload. This includes taking account of staff feedback and signs of pressure or stress to ensure that safe and appropriate staffing levels are always maintained.

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Staff feedback

One staff member told us: "Although I have a role, a job I do, if I see something that needs doing I just chip in if I am able to and qualified to do so – we are one team here and we all work together..."

Another commented "There's not enough hours in my day, but Ann (manager) makes sure that we have a good balance and don't get too stressed. We also now get opportunities to say more about what she can do to make our roles better."

Staff also told us that alongside the mandatory training that is now required of all staff there are other training courses which can be added if staff are interested in enhancing their skills and knowledge. The Manager supports this and implements a good training package, including reminders about refresher training with a thorough, much better, induction.

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

Residents' Feedback

Residents were asked do the staff know what you need and what you like and don't like, a male resident told us if he needed anything he only had to ask, another male resident said he often has chats with the staff around his needs and two residents gave praise for a member of staff who always goes above and beyond to make sure their needs are met, "Even down to getting my brew just right, he's a good 'un..."

One resident told us he was only in Fieldhouse for a short while and the staff are working to help him gain strength to go back home.

Friends and Family feedback

Relatives were asked: "Does the home notice and respond when your friend/relative needs change and how do they let you know about these changes?" The representatives received the following statements:

- Yes, they get him. They know and understand his needs. They come into his room and chat to him and encourage him to come to the lounge and join activities and have his meals.
- They want the best quality of life for them and have their best interests at the heart of what they do.

Additionally, we were told by a family member that the staff don't hesitate to contact her if her elderly father's care plan needs reviewing or altering. She explained that her father's needs alter each week it seems, but she understands this is due to his old age and dementia- staff are very good.

Manager feedback

The manager has implemented a thorough and person-centred approach to understanding and responding to the individual needs of Fieldhouse residents. A key element of this has been her active involvement in the pre-admission assessment process, which she undertakes alongside the deputy manager. This enables a detailed evaluation of each potential resident's suitability and ensures compatibility with existing residents and the home's overall dynamic.

Upon her appointment, the manager prioritised the development and maintenance of individualised care plans for all residents. She has overseen a complete overhaul of the resident records system, introducing a new set of comprehensive files stored in a shared management office. This has enhanced accessibility for all staff and ensured that care information is up-to-date and easily retrievable.

In addition to this, the manager has recently introduced digital systems including online records, audits, and trackers, thereby improving the ability to monitor changes in residents' health and wellbeing proactively. Additionally, she has included improvements in medication recording and auditing, the establishment of a Deprivation of Liberty Safeguards (DoLS) tracker, infection control enhancements, and robust safeguarding documentation and procedures.

An improvement plan developed by the manager further supports team awareness and continuous improvement. It is reviewed regularly and acts as a dynamic tool for aligning the Fieldhouse team on priorities related to individual resident care and evolving needs.

Staff feedback

Fieldhouse staff commented they built on their knowledge of each resident and how their needs may be changing during team meetings, day to day conversations and through family members visiting the home.



4. Offer a varied programme of activities.

Residents' Feedback

Residents were asked about what activities there are in the home for them and how easy to join in. (Image)

"I like seeing my work on the wall..." Resident proudly showed us a picture they had coloured for VE Day celebrations on display in the dining room.



Two said they were growing tomatoes.

Some residents did not feel as positive about the activities on offer:

- Never go out anywhere, never been on a trip in all the time been here.
- Don't really like doing anything in here, it's not for me really. My Brother does come though and takes me out to the market.
- I don't know why they bother, half of us are half asleep and the other half too old...

Five residents we spoke to said they would like to be able to do more trips outside and around the locality, this was something they missed doing.

A garden area was observed yet eight of the residents we spoke with told us they have never been in it or don't use it as they don't smoke.

Friends and Family feedback

One family member said that she helps raise funds for the activity programme within Fieldhouse by holding raffles, football cards etc. The money helps pay for entertainers mainly for celebration events such as VE Day or residents' birthdays. We were additionally told that a family member had paid for a Singer for their father's birthday due to the lack of funds for the home's activities programme, she has relayed her concerns around this to management.

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When friends and relatives were asked what they think of the activities inside and outside the home, they said:

- Yes, they have a good range of activities. They do brilliant with no budget, automatically assume that the activities in the home would be funded as activities are important for mental well-being and stimulating residents and so I help where I can with football cards etc.
- Dad used to play the piano but cannot do this now. However, he enjoys the telly and watches programmes like world at war and sometimes he goes into the kitchen and makes bread.
- Don't see lots, but know the home has singers and children coming in as well as other things going on.

A resident's grandson told us that he has never seen the residents doing anything when he has visited, and feels they are under stimulated, although he has been to the home when they have had an Easter event on which he thought the staff had put a lot of effort into and the residents enjoyed it, especially the Easter Bonnets.

Observations

During the pre-visit to meet with family and friends, we observed a card game activity taking place in the lounge area led by the Activities Coordinator. Noted the Coordinator and other staff engaging with and encouraging resident participation. It was nice to see the "banter" the staff had with the residents.

During our visit we observed residents taking part in making bird feeders with cardboard tubes, peanut butter and bird seeds. The staff were encouraging participation, one resident was rather vocal in his attitude towards not taking part in this activity but told us he does like to feed the geese on the front lawn of the



The Activity Co-ordinator displays a month's overview of activities on a board. We asked four residents if they knew what was on that day and all responded no with two stating that they couldn't see the board as too small and one resident stated as he was in a wheelchair it was a little more difficult to see the board due to the positioning on wall.



Therefore, we recommend a clear daily activity board/display using key images/pictures and large simple words. If a weekly or monthly overview is needed, to display this separately.

On the wall in the dining room was an art display showcasing pictures the residents had done for VE Day. The dining room has been newly decorated, and the display was simply stuck to the wall.

Therefore, we recommend that a fixed display board be put in place, which will further boost the residents' creativity and personal expression in a focal place whilst being easy to interchange displays without damaging the paint work.



Staff feedback

The Activities co-ordinator showed us photographs on display of recent activities done which included memory card games, bread making, Bingo, Colouring and sensory stimulation activities around touch and smell.

They further told us that on a rotational basis they also have "Tracing Steps" and Church Singers who come to the home as part of the activity programme and with residents who are bed-bound she finds the time to visit them on a one-to-one basis.

- There are many different activities that are done in the home. Most are quite simple as we don't really have funds to provide much. (Staff member) is good though she does the best she can with what she has.
- We have residents in here who **think** they are staff; they encourage the reluctant ones to join in with activities.

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

Residents' Feedback

When the residents were asked what they thought about the food, whether there is enough choice and what is good at mealtimes there was a mixed response. A lady told us that she was not keen on the food admitted that she is very fussy and particular around her food. One Male resident told us that if he doesn't want what

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is on offer, the kitchen staff don't bother they make him a sandwich which he prefers, and they are happy to make him toast if desired.

Friends and Family feedback

When relatives were asked about the mealtimes and the quality and choice of food, they said:

The home offers fresh food and choices each day. It provides tea and biscuits midmorning and afternoons, they get big dinners and puddings and offer soup/ sandwich choices for tea. They also have fish Fridays. The kitchen staff are also very accommodating with residents' requests. My dad also has a jug of juice available in his room although dad likes to stay in his room, the staff, and I, encourage him to come down to the dining room for his meals. He says food is good.



- Fine. Always have a choice and have proper meals for the residents. Never hear complaints about the food.
- Mum needs no specific support at mealtimes. However, because of her condition some days/nights she wanders. Staff are understanding and supportive about this and will be flexible (about her mealtimes/eating patterns)
- Due to her condition mum is susceptible to infections and had to have diet adjusted since coming into the home.

Family members referred to the fact that mealtimes are protected and that they arrange their visits outside these set times.

Family members also said that they can take their relatives out for food anytime they wished, with one saying her Dad enjoys a pub lunch, and two family members said they also have brought food/snacks in for relatives e.g.: cockles from Bury Market and local chippy.

One resident's daughter told us that he has thrived since coming to Fieldhouse in December 2024. He has dementia and when he was at home was forgetting to eat and not getting shopping in.

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She has noticed he has gained weight, always has a brew next to him and enjoys all the food he is offered.

All six family members we spoke to said that they are always asked if they would like a cold drink, brew or biscuits when they visit and sometimes an occasional cake!

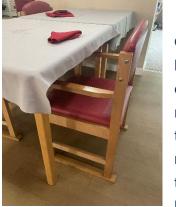
Observations

A representative from the Enter and View Team was invited to look around the kitchen area. There was a Chef and Assistant on duty and the representative was advised that two staff are on rota to cover the kitchen daily. A new person has been recruited to commence on Wednesday, and it is planned that this staff member will be paired to work Chef who mainly covers the weekend shifts and that they, in effect, work as two separate teams.

A walk-in larder was open at the rear of the kitchen facing the main door and the rear door was open, offering additional freshness and air into the room. The kitchen looked dated, but the equipment looked serviceable, and the cupboards, work surfaces and floor were clean and tidy. The Assistant Chef was observed preparing a fried egg in a roll which was passed







Observed staff setting tables with cutlery and table clothes as lunchtime was approaching. Residents were observed being encouraged by staff to sit at the dining tables and we saw several residents being escorted by staff to the dining from their rooms and the lounge areas, with lots of positive interaction and support where needed. We noted some residents also chose to remain seated in the lounge and were provided with small fold away tables for their lunch.

Staff feedback

The Chef confirmed that they have a summer and winter menu, which is regularly reviewed, through which they ensure there are at least 2 choices for residents at mealtimes. The Chef said they are kept informed of resident's allergies and food

preferences and it was noted that a list of resident allergies etc. details are on the wall just near the main door leading from the dining area for easy reference.

The Chef stated that they try to finish the breakfasts by 10.30 am to allow sufficient time to prepare the lunch (which she had started to get ready on the workbench across the middle of the room). However, they said they try to be flexible to accommodate the differing needs of the residents.

A member of the kitchen staff told us they were proud that they had a 5-star food hygiene rating for Fieldhouse Kitchen.

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

Residents Feedback

We spoke to 11 residents and none of them had recently seen a dentist. One resident told us that if she needs a GP, the home arranges this for her. One resident commented he felt he would benefit from physiotherapy, but did not know how to go about this.

- 4 residents told us that they see a podiatrist who visits the home on a regular basis, but they all fund this service themselves.
 - I need to see someone about my teeth really as my dentures don't seem to fit like they did, they are a bit loose...

Friends and Family feedback

When asked about health professionals seen by their relatives whilst in the home, family members said:

- Not sure about health professional visits, however, I know she doesn't see a dentist but saw an optician last year. Someone does her toenails, and she sees a hairdresser regularly. When she had a fall, the home called an ambulance.
- He has podiatry once a month which we pay for. He needs this as he is diabetic. We take him to the dentist. They are 'on the ball' in the home and he sees a GP as and when needed we usually take him. They phone and let us know if there are any concerns and I am handed all the health letters that arrive for him.

A family member told us that their relative had an eye infection. The home had got them a GP appointment, and it has got better as the staff have been attentive in administrating medication and cleaning of the eye another said their relative had recently had a stomach bug but had been "well looked after".

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7. Accommodate residents personal, cultural and lifestyle needs.

Residents Feedback

Residents were asked around if their personal needs were met and one lady told us that she is often bathed, and the home provides the toiletries necessary.

3 residents told us that they could have their nails and hair done within the home for an additional fee by outside agencies.



Residents told us that they provide cultural foods and snacks around certain festivals made by the onsite kitchen staff.

• Yeah, we've had curry and samosas to celebrate before now.

When residents were asked about their religion or culture in the home one resident said she has been taken out to attend her Church, they appreciate the local Church Choir who visit the home each month. One resident said he would like to see the Priest coming in more.

One resident told us that she had attended her daughter's funeral last December and a member of staff accompanied her and the whole team supported her in her grief.

A male resident commented that he uses an additional agency "HomeCare4U" who take him to Rochdale shopping, and he buys his clothes online.

Friends and Family feedback

The family members said:

- He is catholic and Christ Church (Healey) come in once a month.
- Not an issue for mum as her dementia has worsened since her admission to the home.

The residents' personal presentation was commented on from Friends and relatives with one family member telling us:

Generally, yes, she is ...well groomed...although her hair needs attention some days, but because of her condition...can't force her to wash and look after her hair every day.

A visitor to the home highlighted that his father had been a resident in the home but has now passed away. He spoke about how his father was treated with respect and dignity when he was passing and that family were all able to sit in the room with him until his passing. He was particularly touched by the fact that the manager came into the home, in the early hours of the morning, to see him and offer her condolences to the family.

Manager Feedback

The manager spoke of an incident involving a resident that passed away suddenly in the lounge area and how they tried to protect his dignity by clearing the area and covering him (just as the CQC inspectors arrived). She emphasised that they endeavour to respect any resident who dies and ensure they leave the home via the front door and expects all the staff to line up to say their goodbyes as the resident leaves the home.

Observations

On the visit, representatives observed that residents appeared well groomed and clean with neat, combed hair.

We did not observe any religious or cultural items or displays within Fieldhouse.

Residents' bedrooms looked personalised, well aired, no unpleasant aromas and clean.

Toilets and Bathrooms all had adaptive aids within them, handrails were along the corridors and areas were wheelchair accessible.



Staff feedback

Kitchen staff told us they can accommodate any of their residents' dietary requirements for their religion or cultural needs.

The Activities co-ordinator organised an Eid party and has also done colouring activities or craft sessions for religious celebrations including Halloween and Christmas.

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

Residents Feedback

When asked if they are listened to and feel safe, all said they felt safe. When asked about how they would make a complaint about the home, residents all said they would speak to staff or the manager with one resident commenting that she would tell her daughter, as she deals with all her needs within the home.



Friends and Family feedback

The majority of the family members we spoke to all said that they are happy to just say what they think and feel to the manager and staff. They feel that the home is open to this transparency. Two family members told us that the staff had been open to them when they had approached them with suggestions around care and activities for their family members in residence.

When asked about how they would raise any issues, they said:

- Although there are set dates for meeting with the manager, her door is always open, and I often pop in to chat with her.
- Would speak to the manager if I had any concerns.

Observations

Observed a notice on the main door entering the building after signing in which highlighted proposed quarterly meeting dates and times over the year for residents to meet with the manager. There was also notice cancelling the proposed meeting for June stating an alternative date is to be arranged. Additionally, there was a "You said, we did" display board, but this was untidy, worn and outdated.



Therefore, we recommend that the 'You said, we did' board is reviewed, and the home showcases the vast improvements it has made over the last 12 months based on feedback received.

An updated "positivity" board can bring multiple benefits to Fieldhouse as it demonstrates their responsiveness and accountability that feedback is actively listened to and showcases CQC ratings, positive praise and can be of huge benefit to the staff in giving them a sense of pride in their workplace.

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Staff feedback

Ongoing meetings, with family involvement, provide vital feedback to support improvements, build relationships, and ensure all are satisfied with Fieldhouse.



9. Provide a physical environment which is suitable for the needs of the residents

Residents

All the residents we spoke to during the visit said yes when asked if they thought Fieldhouse was clean and tidy.

When asked if they were ever too cold or too warm the residents said the temperature is ok, radiators in rooms and fans available in Summer.

Friends and Family feedback

When asked is the home well maintained, well decorated and clean and tidy and how is the temperature, family members replied:

- Dad's room is tired. The carpet needs a change, foam is wrapped around the piping, and it has flaky paint. Although I know there is only a man covering lots of homes- repairs are carried out when reported, e.g. radiator problems sorted, and windows replaced.
- Some of the communal areas are also tired but pleased that the lounge and dining area was decorated and refurbished since the manager arrived.
- Dad is always cold and so his radiator is always on in his room
- They do clean the home and are good at it. Sometimes the communal areas are a little untidy, but they do their best to keep on top of things that need doing.
- Bedroom is tired. However, the lounge and dining area is nicer since they redecorated the room.

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Observations

Dementia Friendly Environment. Some visual, cohesive signs were displayed within the home. The lounge area and dining room had good lighting, and areas were clutter free with contrasting colours being used. We did not see any specific dementia friendly activities or memory boxes however the Activity Co-ordinator said she did meaningful activities based around sensory stimulation. The dining area was calm with contrasting tableware, it was observed that there were coloured cups, bowls and plates.

Therefore, we recommend that the home incorporate more "dementia friendly" activities and signs within the home. (NB: Dementia Uk and NHS website are trusted resources)



Staff Feedback ground Dementia

Staff told us that they undergo mandatory Dementia Awareness training as part of their induction and ongoing skill building but two felt that more needs to be within the home to help some of their residents with dementia.

Laundry system. We met the new head of housekeeping, recently appointed but experienced and familiar with the home from a previous post she had. The secure, dedicated laundry room had a large washer/dryer in use, labelled baskets for residents' clothes, which are also labelled with resident's name or room number. Staff collect and return laundry daily. Unlabelled items are checked for identification by care staff. There are coloured laundry baskets throughout the home, including bathrooms, for separate items such as soiled bedding/clothing.



Family and friends stated about the Laundry/clothing:

- Never had anything go missing. The clothes are taken away in the morning and returned by the end of the day. Brilliant.
- Never had any problems or issues with mum's clothes or the laundry arrangements.

Personal care of residents. Representatives all commented that all the residents were clean, hair was neat, they did not have any visible signs of neglect and that their clothes were clean and appropriate to the weather/temperature.

Temperature. Fieldhouse was warm with covered, energy-efficient radiators and thermometers throughout. Windows on safety catches provided ventilation, though one Representative noted the downstairs corridors felt stuffy due to lack of ventilation or open windows.

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General Observations

Outside the Building and Location. Fieldhouse Care Home is in a quiet area near a main road, with clear signage, parking, and a lounge visible upon arrival via large French windows. It matches nearby housing in its brick design. The surroundings are pleasant, though the garden needs some care.

Therefore, we recommend enhancing the garden area where possible.

Entrance area. The entrance features a desk with a sign-in book, stairs to the right, and double doors ahead.

Representatives found the sign-in book hard to read, difficult to write in, and poorly laid out.

Therefore, we recommend that the signing in book or system be reviewed to ensure it is more accessible for visitors.



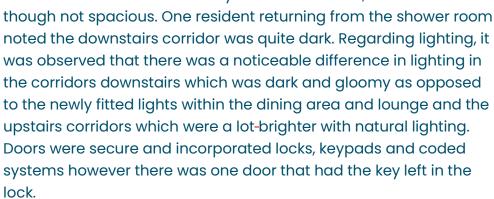
The double doors lead to the ground floor resident rooms on the right and on the left to a slighter larger open area containing a small lending library with a

wide genre of books including large print and several staff areas leading off this space (such as the manager/deputy very small office, storeroom, staffroom and laundry) and the double doors to the resident lounge and dining area.

Very limited displays and health or social care relation information or advice within the entranceway and hallways although a staff member board was noted with images and roles of all Fieldhouse staff and a nice photo montage of the residents taking part in activities in the dining/lounge area.

Facilities and Accessibility. Residents using wheelchairs and mobility aids could move around safely, aided by handrails, ramps, a lift, and

stair lift. Corridors and doorways were accessible,



Therefore, we recommend reminding staff to regularly check all

keys are not left in door locks.



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Storage. Three wheelchairs were stored under the display boards in the small corridor leading into the lounge; further wheelchairs were stored to one side of the lounge area. We observed limited storage facilities within the home.

Additional to this we saw that a hoist was stored in front of a named Fire Exit.

Therefore, we recommend that all staff are reminded of Fire safety precautions, policies and procedures and areas are checked on a regular basis. Additionally, for a new location to be sought for the essential equipment.



Flooring. All clean, even, non-slip and clutter free. Dining Room and Lounge area carpets had recently been replaced and Wet floor signs in place within bathrooms and newly mopped areas.

Lounge and Dining area. Fieldhouse's open-plan lounge is spacious, clean, and well-decorated, with residents using preferred, adapted seating and footrests. It includes a TV on the wall, which was on with subtitles, an area now adapted as an "activities corner," and small tables for drinks and we saw newspapers and magazines on them. French windows and lounge nooks enhance comfort in this functional, accessible, and clutter-free environment. Just off the main lounge is a central dining space with lino wood effect flooring, rectangular tables, wipeable, sturdy chairs and an open kitchen hatch and on the other side of this is a smaller residents lounge. It was noted that due to space there was not anywhere that residents could go with visitors for privacy and comfort away from the main.



Outdoor/Garden provision. The home has a secure garden to the rear and right side of the building, which can be accessed through French windows via the lounge /dining area. The ramp leading outside the

representatives felt was a potential trip hazard when now in use as a ramp due to the hinged element sticking up, which one representative did trip over when going outside. (To note she did not hurt herself)

Therefore, we recommend that the hinged

part of the ramp into the garden area be painted to highlight it to eradicate trip hazards and make people more aware of it.





There is grassed area on both sides, a couple of sheds and a small Greenhouse containing plants and barbecue to the rear of the area. An open seating area with recently purchased rattan chairs and a

coffee table was available. However, it was felt that this area not wheelchair accessible and residents would need to be carefully supervised.

In this area was a sign on the wall, which stated this area is a smoking area, but there were no ashtrays (fixed or loose). Staff were observed smoking sat in the shelters and saw

cigarette stubs dropped within the shelter and around the exit from the lounge, which were cleaned up later in our visit.

Therefore, we recommend that everyone within the home is reminded of where the designated smoking area is, preferably away from the lounge area.



Fire safety. Observations were made of a variety of fire extinguishers around the home, a fire safety blanket, fire evacuation box, emergency evacuation sheet, fire exits and illuminated emergency lighting. There was also visible "Fire Assembly Point" signage.

Health, Safety and Hygiene. All Representatives noted that the home was clean and smelled pleasant. The second floor was well ventilated and

bright due to external windows. Windows were observed with safety catches.

Domestic staff were observed cleaning areas of the home and ensuring that "Wet Floor" signs were in place.

The representatives noted numerous "Defibrillator" signs around the home, but none of them were clear or readable in where the defib could be located. A representative asked two members of staff and neither knew the location either.





Bedrooms. Observed all the bedroom doors had laminated labels with room numbers and name of resident in situ and a smaller label with picture labels with their required specific evacuation method. Noted that some doors also had wooden notices nearby which showed the room number and the wording 'Do Not Disturb, personal care in progress' that can be hung on the door to offer an additional level of privacy and protection of the resident's dignity. Bedrooms were tailored to residents' tastes and contained personal items and were clean, although it was observed some were a little "dated" as in décor.

Bathrooms. It was noted that suitable ground floor bathrooms and shower rooms were available and there were a number of toilets, including one for staff and visitors only. Toilets were accessible, had adaptive aids within them, safety cords in case of an emergency and all areas observed where clean, clutter free and included hand sanitiser, aprons, gloves and hand washing signs. Both bathroom and shower rooms have adaptive aids and lockable door for dignity. Toiletries were on shelving within bathrooms. Wet floor signs were also in place.



Maintenance. From observations made, the home did not have any major maintenance that needed doing. The staff and manager told us that there is a shared maintenance team of two men that covers all the homes in this care group and that the repairs are reported to the Director for listing and prioritising for attention in the maintenance work programme.

Décor. Although it is noted that improvements have been made to the lounge and dining area, (given several family members expressed views and our observations) we feel that the home needs to establish a rolling programme of redecoration for the home, that can be implemented over time, particularly prioritising the resident bedrooms and downstairs corridors.

Therefore, we recommend consideration being given to offering of more dementia friendly décor and using more consistent colours to differentiate between rooms (e.g. bathrooms and toilets) when planning the redecoration programme for the home.

Response from the Provider

Below is the response to the report and recommendations along with agreed actions received from Anne Bannon, Registered Manager, Fieldhouse Care home.

	Healthwatch Rochdale	Fieldhouse	Fieldhouse
	Recommendation	Response	Update/Actions/Further
	June 2025	Name &	comments
		position of	Date: August 2025
		responder	
1.	Review the signing in book or system to ensure it is more clearly accessible for visitors Ensure staff and visitors are using designated smoking area and suitable ashtrays/bin provided	Anne Bannon Registered Manager, Fieldhouse Care	The Signing in book is a GDPR book as recommended.
2.	Activities Board: To review the board to provide a daily display of the planned activities using words, pictures and images for ease of understanding. If a weekly or monthly overview is needed, to display this separately.	Home. (Franklin Group)	A review of the activity board will be completed alongside a review of the planner to include pictures to make it easier to understand, The planners will then be put in every resident room.
3.	To add a fixed display board to large wall in dining room to display residents work without damaging paintwork.		The owners have decided not to do this,
4.	Ensure staff and visitors are using a designated smoking area and suitable ashtrays/bin provided, away from the lounge area?)		There is a smoking area for staff and visitors, Residents are encouraged to also smoke in the designated area, there is one resident who does sit out front of the home, this is her choice and preference,
5.	Movable lip on ramp leading out to garden to be coloured/painted to ensure not a trip hazard when not laid flat/flush.		This has been added to the service improvement plan and to be completed by the maintenance team
6.	To ensure no items are stored/left in front of fire exits staff are reminded or fire precautions policies and procedures and a new location is sought for the essential equipment.		This is checked on walk rounds of the home to ensure that fire exits are not blocked.

7.	To incorporate more "dementia friendly" activities and signs within the home.	There is a redecoration plan in place by the providers.
8.		This is under review
9.	To enhance garden area where possible.	Doors are checked to ensure keys are removed
10	To remind staff to regularly check all keys are not left in door locks.	Wall signs have been clearly marked with the location of the Defib.
11.	To ensure all wall mounted Defib images state clearly where Defib is located	This has been discussed with the owners

Contact Us



Healthwatch Rochdale
Tel 01706 249 575
info@healthwatchrochdale.org.uk
www.healthwatchrochdale.co.uk











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