



Enter and View Report

Fir Trees Care Home

January 2026

Report details

General information about the service	
Name and address of the Care Home:	Fir Trees Care Home, Gorse Hall Rd, Dukinfield SK16 5HN
Type of Care:	Residential and dementia care
Number of Residents:	44
Description of Facility:	Situated in a residential area of Dukinfield, Fir Trees is a 44 bed care home with lounges and dining areas over two floors and a large garden. All living areas are easily accessible by wheelchair. The home is ran by HC One Ltd.
Care Quality Commission Rating:	Good. Report can be viewed; Fir Trees - Care Quality Commission
Details of visit	
Visit date and time	14/01/26 - 10:30am
Healthwatch Tameside Enter and View Representatives	Ayesha Khatun Imogen Shortall Karen Whitworth

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

Our findings indicate that Fir Trees Care home is delivering a good standard of care within a supportive and well-managed environment. Family members of residents described strong and visible management presence and praised staff for being approachable, compassionate, understanding, and responsive to the needs of both residents and their families.

Residents told us they are happy with the care provided and feel their individual needs are recognised and met. Relatives spoke positively about the dedication of staff, commenting that they frequently “go above and beyond” to ensure residents’ comfort and wellbeing. Observations during the visit supported this feedback, highlighting respectful, warm, and meaningful interactions between staff and residents, and demonstrating well-established, trusting relationships.

Staff morale was notably positive and team members shared that they feel supported and listened to within their roles, contributing to a motivated and engaged workforce. Staff expressed genuine enjoyment in their work, particularly in building relationships with residents, providing quality care, and creating a cheerful and friendly atmosphere within the home.

The home has a strong partnership with families, with relatives being actively involved in home life. Families are actively encouraged to participate in events at the home, further strengthening community involvement. The activity provision was widely commended, with relatives highlighting the varied and engaging programme delivered by the activity coordinator.

There is clear evidence of a person-centred culture throughout the home. Residents are encouraged to share their views and influence decisions, including contributing to activity planning and providing feedback on meals and daily routines.

While the overall environment at Fir Trees is welcoming and comfortable, some areas of décor would benefit from refreshing, and minor repairs are required in certain parts of the home, which is detailed within the recommendations section of the report.

Overall, Fir Trees Care home demonstrates effective leadership, a caring and committed staff team, strong resident and relative engagement, and a clear focus on person-centred care.



Methodology

Prior to the Enter and View taking place

We informed the care home of our intention to conduct an Enter and View visit five 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.

A key contact was identified from the service provider and a schedule for the day was put together with their input, taking into consideration mealtimes, visiting times for carers and families etc.

The provider was contacted to see if there were individuals who should not be approached or were unable to give informed consent and a comprehensive risk assessment was completed.

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

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 and residents using an agreed set of questions.

23 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 2 residents and conducted short interviews about their experiences of the service using guided questionnaires. 6 staff members and 1 manager were also interviewed, with a further 3 staff surveys completed online. 2 relatives were interviewed and further 9 surveys were completed online and received by post.

Following the Enter and View Visit

Initial findings were shared with the provider at the end of the visit. This report was completed within 32 working days of the visit, with a draft sent to the provider for comment. The provider was given 20 working days to respond, and their response is included at the end of this report.



Results of the visit

Observations

Location and external environment

Fir Trees care home is located in a quiet residential area of Dukinfield and is close to local amenities and is a short distance from the train station and a regular bus route. The care home is clearly signposted on the main road leading to a designated large car park with multiple spaces including marked disabled parking bays. Access to the home is via a ramp leading to the main entrance with double doors.



Figure 1: Main entrance

The garden area has safe access and appears generally well maintained, with lawns and patio areas. While the lawn appeared overgrown and in need of attention, recent refurbishment works have been undertaken to create a new pathway and designated smoking area, with some building materials temporarily stored on the lawn. A range of seating is available to support residents in relaxing and socialising, and planters offer opportunities for residents to participate in gardening activities.



Figure 2: Garden

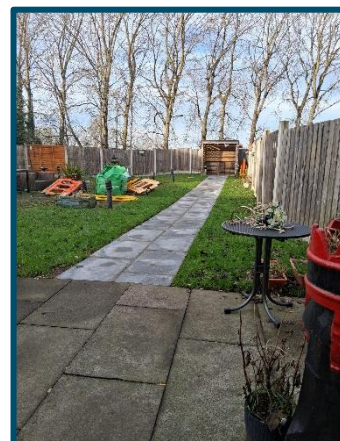


Figure 3: Garden with new refurbished areas

Internal environment

On arrival representatives were asked to sign-in and welcomed by a staff member and Nicole the manager, provided representatives with a quick tour of the building and facilities. Staff could be identified by their coloured uniforms. The reception area was large, warm and inviting with a seating area. Healthwatch Tameside posters were displayed advertising the 'enter and view' visit alongside our postcards. Hand sanitiser and masks were available for use. External doors were secured with keypad entry systems, helping to maintain the safety and security of the home.



Figure 4: Reception area



The building is on two floors and all areas are wheelchair accessible, the upper floor is accessible via a lift located near the communal lounge. The buttons within the lift appeared faded, which caused representatives some uncertainty in identifying the correct button for the upper floor.

All internal areas of the home were clean and well maintained, with no obtrusive smells or noises. The home was decorated in neutral, calming colours, complemented by wooden features and a range of artwork was displayed throughout. Interior spaces were well lit, benefiting from good natural light and the temperature was comfortable with thermometers placed in various areas for monitoring.

All the corridors within the home were of a similar size and sufficiently wide enough for wheelchairs and walking aids. Dementia friendly grabrails were in place, featuring contrasting colours for visibility and support independence. However, the handrails in the two walkthrough areas with glass windows could be improved by using a more distinct colour to enhance the visibility. Radiators were covered for safety.



Figure 5: Lift buttons



Figure 6: Thermometers

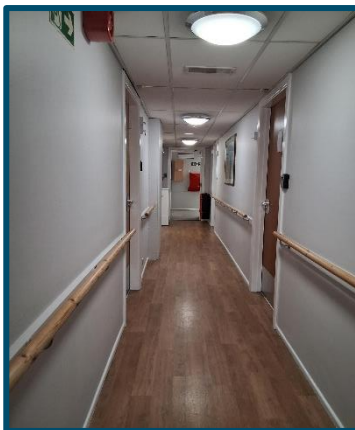


Figure 7: Corridor



Figure 8: Glass walkthrough

The home has spacious, well-lit communal living and dining areas on each floor with large windows. The rooms were appropriately furnished with sofa's, comfortable armchairs, coffee tables and large widescreen TV's. Recreational and leisure resources were available in the rooms for residents to use including toys, activity sheets, magazines and books. There is a quiet area on both floors if residents wanted to meet with visitors and the home has an onsite salon.





Figure 9: Magazines and activities



Figure 10: Lounge

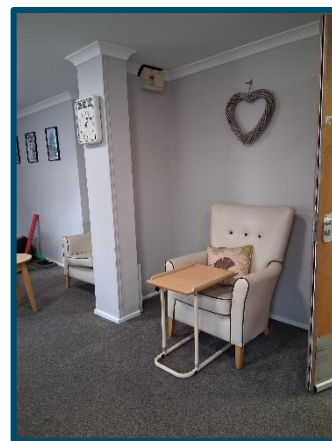


Figure 11: Lounge

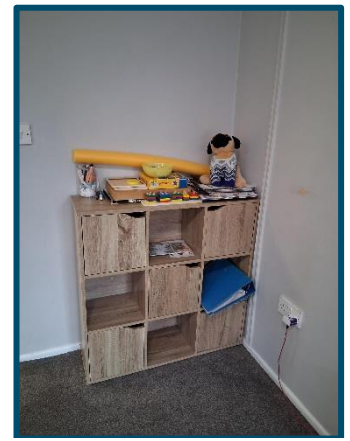


Figure 12: Resources

Notice boards and signage

The reception area contained brochures, feedback forms and a notice board displayed policies, certificates and Health and safety information. Relative meeting posters and an activity timetable was seen on the table. Representatives did not see the latest CQC report, a complaints procedure or a list of staff names and photos displayed. Having the CQC report and complaints procedure accessible to residents, visitors and families promotes transparency and an awareness of how to raise concerns.



Figure 13: Notices



Figure 14: Feedback forms

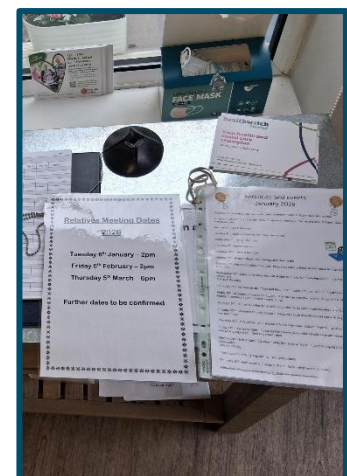


Figure 15: Posters

Residents

Residents were appropriately dressed and well groomed, demonstrating a person-centred approach that supports dignity and wellbeing. Residents appeared settled, comfortable, and at ease, engaging in a range of activities such as resting, watching television, singing and walking independently.

Staff were observed engaging regularly with residents, indicating staff balanced care duties with meaningful interaction. Staff interactions were consistently warm, respectful, and compassionate. One resident became distressed while recalling a past personal experience, and staff responded promptly with reassurance and provided emotional support,



demonstrating good awareness of residents' emotional needs. A group karaoke activity was taking place in the afternoon, with staff encouraging and joining in, promoting social interaction and inclusion. However, some residents were observed in the upstairs bedrooms and did not engage with the karaoke activity downstairs.

Food

Residents are provided with three main meals a day, along with regular snacks and drinks to ensure adequate hydration and nutritional intake. The care home operates a weekly rotating menu, offering two choices per meal, which is set by HC-One and designed to meet residents' individual dietary requirements and nutritional needs.

All meals are prepared fresh in the on-site kitchen, and the dining area was noted to be spacious, clean, and well presented, with ample comfortable seating and large windows. Representatives were of the view that the dining rooms could be made more inviting, by adding decorative elements such as flowers on tables and artwork on walls. Mealtimes are protected, however, family members can request to join residents for meals.

A daily menu was clearly displayed on the dining tables and on the walls within the dining area, enabling residents to make informed choices about their meals. Feedback on meals is regularly gathered from residents during resident meetings. Due to time constraints of the visit, representatives did not have the opportunity to observe lunch time.

Bathrooms

The bathrooms were bright and clean, and suitably equipped with supportive aids such as grab rails, shower chairs, and hoists. Safety features include colour-coded taps for hot and cold water, non-slip flooring, and emergency pull cords. The bathrooms provide sufficient space for carers to assist residents, promoting a safe, dignified, and efficient environment.

Representatives noticed that there were no toilet roll holders in the bathrooms, and toilet rolls were observed to be placed on top of the cistern, which may make it difficult for residents to access. A towel was also placed on top of a bin, and representatives noted there were no towel holders in the bathroom. Bathrooms could benefit from additional dementia-friendly features, such as contrasting grab rails and pictorial signage on doors to help residents easily identify the facilities. A regular cleaning schedule is held by housekeeping staff.

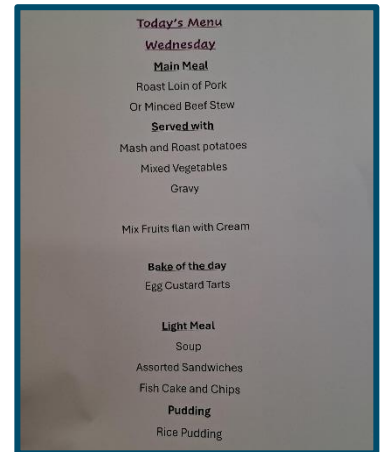


Figure 16: Menu of the day

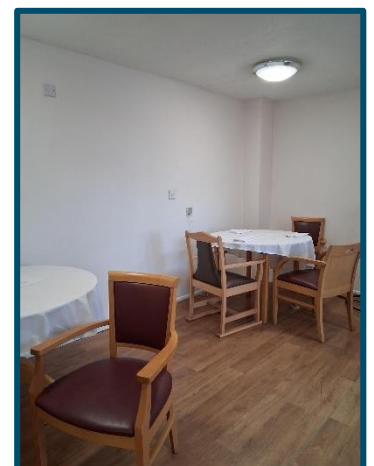


Figure 17: Dining room





Figure 18: Bathroom



Figure 19: Bathroom

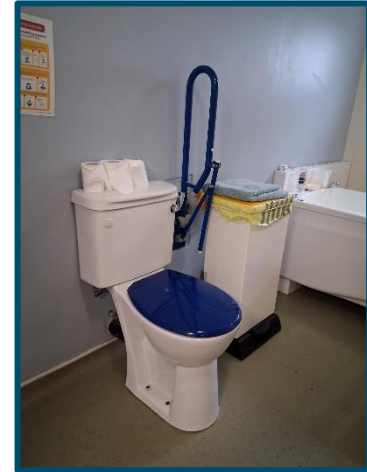


Figure 20: Bathroom

Resident rooms

Residents' bedrooms were located across both floors and had numbers on doors, with some doors also displayed photographs of the residents. The majority of bedrooms had en-suite toilet facilities, except for four rooms where residents shared a nearby communal bathroom. Residents are encouraged to personalise their rooms with their own belongings and furniture on admission, helping to create a familiar and homely environment.

With consent from a resident and the care home, we viewed a residents bedroom. The room was well presented and included a television, artwork, and personal items such as fresh flowers, family photographs, cards, and decorations. Storage space was sufficient, with wardrobes and drawers provided, along with comfortable seating for visitors. There was adequate space for mobility aids and are equipped with call bells that are easily accessible, and thermometers for monitoring of room temperatures. The resident informed us they were happy with their bedroom and spent a lot of time in there.

The home observed a number of dementia friendly indicators in areas used by residents including floor and door colour contrast with walls and signs approximately 4ft from floor level.



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

1: Have Strong, visible management

Staff and management feedback

During the visit we spoke with the manager and six members of staff and a three staff completed online surveys. Staff length of service ranged from four months to fourteen years, demonstrating a mix of experience within the team. The manger expressed a high level of job satisfaction and a strong commitment to her role, stating that she enjoys coming to work and has a genuine admiration for the residents. She demonstrated a clear understanding of each residents individual needs, reflecting strong and visible leadership within the home.

Staff described the working environment as positive and supportive. They commented on the management teams approachability, visibility, and willingness to address concerns promptly. Staff highlighted that when flexibility was required or personal matters arose, they felt listened to and valued, contributing to high moral across the team. However, one staff member noted that they felt the manager spent a lot of time in the office and they felt more comfortable approaching the deputy for support.

Staff comments included:

- *Manager is very good, best manager I've ever had*
- *Feel like I can talk to management, there's always someone in*
- *Kind manager, door always open*
- *Management are very understanding and offer support where appropriate*

Resident, family, friends, and carer feedback

Both residents we spoke with told us they knew the manager, however, they didn't see her around much, with the following feedback:

- *Hardly ever see her*
- *Don't see much of her*

Relative, carer and friends feedback suggests they agreed that the care home had strong and visible management and they were all familiar with the manager. One person noted that management presence could be better, as they have only seen the manager twice in fourteen months. Relatives commented:

- *Management have an open door and are friendly, professional and responsive, nothing is too much trouble.*
- *last time I saw her was when I was unhappy with something*



- *Managers door is always open, when our family member first moved into Fir Trees management were great at explaining the process*
- *The whole care home has friendly and caring staff*
- *We are always welcomed by management when we arrive*

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

Staff and management feedback

The manager demonstrates a strong commitment to effective leadership and fosters a culture of continuous learning, reflective practice and ongoing professional development within the staff team. Staff development is actively encouraged, with structured opportunities in place for information sharing and feedback, including daily flash meetings, handovers and huddles.

The manager explained staffing levels are reviewed regularly in response to residents' changing needs. Currently, daytime staffing includes six care staff and two seniors in the morning, and five care staff and one senior in the afternoon, with four care staff and one senior on night duty. She monitors staffing arrangements through review of daily handover records and by maintaining a good knowledge of residents, she makes timely adjustments to staffing to ensure care is safe, appropriate and person-centred.

Staff felt they had the time and the skills to carry out their roles. They told us periodic e-learning training is completed and progression and training needs are discussed in 1-1 meetings. Several staff commented when they complete training through 'touchstone', information could be difficult to retain and expressed a preference for more interactive learning opportunities to support their understanding. Two staff feedback they have experienced minor issues with equipment, such as only having one working hoist with a remote, stock cupboard needing better maintenance and quicker replenishment of stock i.e. pads not always in rooms.

Staff comments included:

- *We are asked at Appraisals if we want to move up*
- *Expressed interest in doing senior work in future*
- *Faulty equipment reported, fixed same day*
- *I would like for some additional training in regard to medication to aid my role.*

Resident, family, friends and carer feedback

Residents were happy with the care they received and described staff as kind, supportive and approachable. Staff have a good understanding of resident's needs, with one resident with a visual impairment told us that every day staff described the weather to her. However, one resident told us that staff don't always have a lot of time to spend with her. Comments included:

- *The staff are really nice*
- *They are always asking if I want tea and bring it to me.*



Two relatives felt that the care home could benefit from more staff, and gave the following feedback:

- *Not enough staff at weekends.*
- *Staff have a lot of demands and although staffing levels meet the legal requirement, it can sometimes be precarious for example if theres an incident, it takes staff off the floor and I feel there needs to be 4 staff on each floor.*

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

Staff and management feedback

The manager explained information about residents' life history, health needs and personal preferences is gathered during the pre-admission process, with input from families to create a comprehensive care plan. The manager uses this information to assess whether the service can meet the individual's needs, ensuring staff have the necessary knowledge to provide personalised and person-centred care. Each resident has a 'Remembering Together' record within their electronic care plan. Changes to a residents needs are communicated during handovers, and care plans are updated accordingly with staff able to access resident information on handheld devices.

Staff shared they are familiar with the residents needs and have developed strong, positive relationships with the residents. Staff highlighted they value the Nourish app, which provides them instant access to resident information. Six staff shared that while they generally have time to spend with residents, mornings can sometimes feel rushed, particularly when some residents choose to get up later. They also explained that management have made efforts to arrange additional staff during breakfast times.

Resident, family, friends and carer feedback

Residents informed us that staff had a good understanding of their likes and dislikes and made efforts to accommodate personal preferences where possible. Examples included staff providing items such as chocolates and offering meal choices tailored to their preferences.

Family and friends commented:

- *Very caring, attentive staff*
- *The staff go above and beyond, they treat my nan as if she was a member of their own family.*
- *All the staff are friendly, helpful and cheerful*
- *My family member is always clean and dressed well.*
- *I feel they don't encourage my friend enough*



- *New staff are well trained, although they need to be encouraged to get to know residents better.*
- *Staff need to give more attention when dressing residents, when we visited our family member they had shoes on on the wrong feet*

4. Offer a varied programme of activities

Staff and management feedback

The care home employs two part-time activity coordinators. Monthly activities are planned in advance following consultation with residents about their preferences. The activity timetable is shared with residents and their families and is also available on the home's Facebook page, and families are encouraged to attend events. For residents who prefer not to join group activities, coordinators provide one-to-one sessions and visits to bedrooms to reduce isolation.

Staff reported a wide range of activities and outings available, including shopping trips, meals out, visits to garden centres and parks and trips to Blackpool illuminations. One staff member highlighted the challenges of engaging residents with advanced dementia and noted that additional time is often required for 1-1 activities. Another staff member commented that the same residents often participate and suggested activities could be more inclusive to encourage wider engagement.

Resident, family, friends and carer feedback

One resident mentioned enjoying activities such as the singer/entertainer and that chair exercises were fun, however they didn't enjoy the games. Another resident who has a visual impairment said that they don't join in with activities but they listen to the TV. An activity timetable with picture elements was displayed in a communal area showing a varied weekly programme of events offering one or two activities a day.

Relatives provided the following feedback:

- *The staff could offer more encouragement to residents to do activities, they may say no but its just left at that*
- *The activity coordinator Katie is brilliant, has made a massive difference*
- *A great range of activities which also include family and are well publicised*
- *Mum doesn't always want to join in but the staff do encourage her, loves the live music and sing alongs*
- *Lots of trips and my nan loves the visit from the local nursery, they let her stay in her room if she doesn't want to take part.*
- *The time and attention the activity coordinator, Katie gives residents is remarkable she always puts them at the heart of her work*
- *The activities are good, but the activity coordinator could do with being full time*

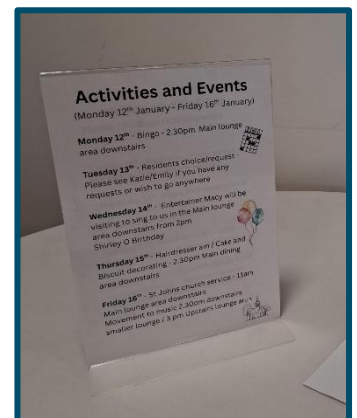


Figure 21: Activity timetable



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

Staff and management feedback

The manager informed us that residents are offered visual options at mealtimes through the use of 'show me' plates, allowing them to choose meals. Staff explained they provide discreet and respectful assistance during mealtimes, and residents have access to a variety of snacks and drinks throughout the day. Staff try to make mealtimes sociable, by arranging residents to sit together and provide background music to create a pleasant atmosphere. Staff shared the following comments:

- *Many residents aren't keen on the food and request alternative meals, creating wastage*
- *I feel there should be more fluid and snack options available*
- *Modified diets could be made to look nicer, eg. food displayed in shapes rather than piped*
- *We try to get all the residents to sit together for meals but its harder with residents upstairs*

Resident, family, friends and carer feedback

Residents generally reported receiving adequate food and drink throughout the day. One resident reported that meals prepared by agency cooks were of a lower standard. They gave an example where a meal they were looking forward to did not meet their expectations. However, they also stated that the home ensured that alternative options were provided when meals were not suitable. The manager confirmed that agency cooks were used temporarily while the regular cook was on long-term leave and a permanent cook has now been appointed to ensure consistent quality of meals.

Residents commented:

- *The 'tato' hash yesterday was like soup*
- *I enjoy the meals, particularly the cake and custard, but I don't get this often enough*

Relatives were generally pleased with the food and support provided to their family member during mealtimes, with one relative commenting that her mother's appetite has increased recently. A few comments were received about the meals needing to be more balanced:

- *Meals are improving and healthy meals are being provided, however need variety in desserts, too many cake based need more fresh fruit and the meat needs to be varied – too much Pork and Gammon*
- *At times the meals do seem to lack balanced nutrition, only on a couple of occasions the evening meal has been a beige offering. Although I haven't seen a menu or viewed all meals everyday*



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

Staff and management feedback

The Manager informed representatives a GP carries out a weekly ward round and residents receive regular eyesight and hearing checks within the home. She noted that access to dental care can be difficult due to the limited availability of NHS dentists taking on new patients; however, residents are supported to access a community dentist when needed. Staff praised the digihealth system which they use for urgent care. Staff mentioned a Chiropodist visits every 6 weeks and a masseuse has visited in the past. Families assist residents to attend external appointments, with additional support from the home provided where necessary.

Resident, family, friends and carer feedback

The overall feedback from residents suggested a strong level of satisfaction with access to health professionals, with one resident commenting that the staff contact healthcare providers as she wouldn't be able to do it herself.

Relatives told us their family member generally does get to see a health professional when needed with one relative highlighting issues with dentist access. Comments included:

- *The family keep up the appointments*
- *Digi health and complex case nurse access are good*
- *Got cream for a rash after informing office staff*
- *Sometimes we've had problems with the dentist, short notice of appointments being booked/changed/cancelled.*

7: Accommodate residents' personal, cultural and lifestyle needs

Staff and management feedback

The home supports residents to attend a regular Church service and bible reading visits take place in the home. Residents have access to a weekly hairdresser and a 6 weekly chiropodist. Staff explained information about a residents lifestyle and background information are in care plans and shared amongst staff to ensure consistency of support. Staff gave examples of how they supported a Scottish resident to celebrate burns night with appropriate foods, ordering appropriate meals for vegetarian residents, and celebrating traditional British cultures and values with decorations and events. The care home currently does not have any residents outside of British/Scottish/Irish culture.

Resident, family, friends and carer feedback

Of the two residents we spoke with, one reported that their lifestyle needs were being met, noting that they receive appropriate support in relation to their frailty, sight and mobility. The



other resident felt that their needs were not fully accommodated, explaining that they had not been offered to go to a carol service, which they would have enjoyed, and outings to the pub, shops and garden centres only occur once a month. They also mentioned that due to the high level of residents with Dementia they feel they are not able to relate to many residents.

Relatives told us:

- *There are no needs, but I'm sure Fir Trees would accommodate if required*
- *St Johns come into the home once a month*

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

Staff and management feedback

The manager stated that feedback is gathered through a variety of methods, including resident and relative meetings, feedback surveys, a suggestions box and online platforms. She maintains an open door policy allowing staff, residents or relatives to make direct contact. The manager describes complaints as 'gifts' and uses them to implement changes and share learning with staff. The home did not have a 'You Said, We Did' information displayed and this has been put forward as a recommendation.

All staff reported feeling they have a voice in how the home is run and are comfortable raising concerns or suggestion. Staff told us they are able to work independently and management do not take an overly supervisory approach. However, some staff commented that they were not always kept updated following making a suggestion. When asked what they would change, staff commented:

- *I would like to see a refurbishment, new paint, fresh lounge chairs. I feel the home can be a bit plain in areas.*
- *Improvements to internal decoration and furniture to make it feel a little more homely in communal spaces. Tea trolleys to look more professional. More involvement in local events.*
- *More fun food options, take aways, desert options*
- *HC-One to make staff aware if making any changes for eg. digital updates*
- *New starters could be trained / supported better by senior or deputy staff to take the strain off other staff supporting them*

Resident, family, friends and carer feedback

One resident told us they get opportunities to feedback and they have attended a residents meeting and would attend another. If they had a complaint they felt comfortable speaking directly to the manager or staff. We asked if there was anything residents would change about the home, one resident suggested they would like a bigger room but understands this may not be possible.



Relatives told us they have opportunities to feedback at relative meetings, suggestions boxes and at quarterly review meetings. Relatives felt comfortable approaching care home staff or the manager directly if they had concerns and appreciated the managers open door policy. One relative felt that suggestions were not always acted upon and another relative mentioned that Healthwatch surveys are useful. When we asked relatives if there was anything they would change at the home, comments included:

- *More staff needed, increased senior / management presence on the floor*
- *More staff needed on each floor, garden needs revamp and to include raised flower beds, more outdoor seating for families and refurb of bedrooms*
- *Improvement to smell on upstairs corridor, improved decoration in upstairs dining room and photos for residents on doors, this was in place and helped Nan get to her room, they seem to have stopped that now*
- *Very happy with the care my mum receives at Fir Trees*
- *More interactive activities and trips out in the summer, eg. parks / cinema*



Recommendations



Priority: High – within 1 month

- 1. Repairs to lift buttons** – Replace or repair lift buttons, as the current faded appearance may cause confusion for residents and visitors when selecting the correct floor.
- 2. Photographs of residents to bedroom doors** – Photographs of residents to be placed on bedroom doors to support individuals in easily identifying their rooms. A relative noted this had previously been in place and was beneficial to her grandma.
- 3. Display of information in reception area** – We recommend that a noticeboard is installed in the reception area containing key information including a staff photo board, CQC report and complaints procedure. Information on relatives' meetings and activity timetable should also be clearly displayed on the board.
- 4. Improve dining room décor** – Dining rooms to be made more inviting and homely, for example through the addition of flowers, artwork and other decorative features.
- 5. Enhance the homes Dementia friendly features** – Introduce colour-contrasting handrails in the glass corridors. Bathrooms to have contrasting toilet seats and grab rails and add pictorial signage to bathroom doors.

Priority: Low – within 6 months

- 6. A 'you said we did' to be displayed** – We recommend a 'you said we did' is displayed to clearly demonstrate how feedback has been acted upon. Staff and relatives told us they were not kept informed of outcomes following making a suggestion.
- 7. Review Touchstone training** – Following staff feedback that information from Touchstone training was not always well retained, care home should consult with staff and consider alternative options or additional supportive measures, as necessary.
- 8. Graden improvements** – The large garden area to be made more inviting and purposeful, for example having raised flower beds and increase seating areas for families and residents to enjoy time together outdoors.
- 9. Bathrooms fixtures and fittings** – The fixtures and fittings to be reviewed in bathrooms and toilets to ensure suitability for residents. This should include the installation of toilet roll holders and towel rails.



Response from service provider

Thank you for your visit to Fir Trees on 14th January 2026. It was a pleasure to welcome you to our home, and we very much appreciated your friendly and supportive approach throughout the inspection.

Following your visit, I would like to provide an update on the actions we have taken in response to the feedback received:

- Lift maintenance: We have requested replacement buttons for the lift, and these are currently being arranged.
- Bedroom door personalisation: Due to GDPR requirements, we are unable to display photographs on residents' bedroom doors. However, our Dementia Manager has completed a full environmental audit, and we are exploring and implementing alternative ways to support orientation and meaningful personalisation for residents.
- Reception notice boards: These have been reviewed and updated to ensure that clear, relevant, and accessible information is displayed for residents, relatives, and visitors.
- "You Said, We Did" board: We are in the process of implementing a dedicated board to demonstrate how feedback is listened to and acted upon within the home.
- Staff training: Compliance with tactile (touch) training is currently at 98%, and we continue to work towards achieving 100% compliance.
- Communal bathrooms: Toilet roll holders have now been installed in all communal bathrooms to improve dignity and accessibility.

We are committed to continuously improving the quality of care and environment at Fir Trees and value the feedback provided during your visit.

Thank you again for your time and input.



Contact Us

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