

ENTER AND VIEW

REPORT



INGLEWOOD RESIDENTIAL HOME
17TH NOVEMBER 2025



**Engaging
Communities**
Solutions

1 Contents	Page
2 Introduction	
2.1 Details of visit	3
2.2 Acknowledgements	3
2.3 How we collected the data	3
3 What is Enter and View?	
3.1 Purpose of visit	4
3.2 Strategic Drivers	4
4 Overall summary	5
5 Methodology	5
6 Summary of findings	
6.1 Overview	5
6.2 Premises	5 – 6
6.3 Services Offered	6
6.4 Staffing	6 – 7
6.5 Staff interaction	7
6.6 Resident / relative interviews	7 – 9
6.7 Staff interviews	9 – 11
7 Recommendations	
7.1 Examples of best practice	11
8 Service provider response	12

Name of Care service	Inglewood Residential Home
Service provider details	11 Banks St, Willenhall, WV13 1SP Telephone: (01922) 631099
Opening hours	Variable
Date and time of visit	17 November 2025 10.00 a.m. – 12.00 noon
Authorised Representatives (ARs)	Ellie Lilly (HwW Staff) Richard Jolly (AR Volunteer Lead)

The home has a current Care Quality Commission (C.Q.C.) rating of 'Requires Improvement'.

To read their report use the link: <https://www.cqc.org.uk/location/1-109731191>

2 Introduction

2.1 Details of visit

This was an announced visit. We called the Home on the day of the visit to check to ensure there were not outbreaks of infectious illnesses, e.g. Norovirus, Covid, influenza, etc. We were advised there were no such outbreaks.

2.2 Acknowledgements

Healthwatch Walsall would like to thank the service provider, staff, service users and their families for contributing to this Enter and View visit, notably for their helpfulness, hospitality, and courtesy.

2.3 How we gathered the data

This report is based on our observations on the day and answers/experiences shared by residents and relatives to a set questionnaire that was used.

Residents and relatives were asked if they wished to take part. They had the choice not to take part if they did not wish to do so.

Responses were collected and the paperwork was later collated to establish what people told us. Staff were interviewed in the same manner.

3 What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch Authorised Representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement, if applicable.

The Health and Social Care Act allow 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. This allows us to learn about and share examples of what they do well from the perspective of people who experience the service first-hand.

Healthwatch Enter and View visits are not intended to identify safeguarding issues specifically. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch safeguarding policies. If at any time an Authorised Representative observes anything that they feel uncomfortable about, they need to inform their lead, who will inform the service manager, ending the visit.

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

3.1 Purpose of visit

The service has received a rating of 'Requires Improvement' from the CQC. We wanted to understand how this related to residents care if it did.

3.2 Strategic drivers

There are many residential and nursing care home settings in Walsall. We strive to enable those service users who are more difficult to reach to have their voices heard.

4 Overall summary findings

- There is no car park but sufficient on road parking was available.
- The premises appeared well maintained and clean.
- Though there was an odour of urine in one area.
- Signage for toilets could not be readily seen.
- A resident suggested to get a dartboard as part of the activities.

5 Methodology

1. This was an announced visit.
2. We spoke to a staff member and the Manager.
3. We spoke to 4 Residents and 2 Relatives.
4. We used a pre-scripted questionnaire to evaluate responses across key themes.

On arrival, the Authorised Representatives introduced themselves to staff, and the visit details were discussed and agreed. The Authorised Representatives spoke to residents and relatives on a one-to-one basis in the communal areas. It was made clear that they could withdraw from the conversation at any time.

6 Summary of findings

6.1 Overview

The service was visited by the Care Quality Commission (C.Q.C.) on 10th April 2025. Rating as indicated previously 'Requires Improvement'

We were told by the Manager that the Home has 20 beds with 4 bed vacancies at the moment. The resident demographic is varied.

6.2 Premises

There are no car parking spaces on site.

The exterior of the property appeared to be maintained. Access to the main entrance lobby is via a secure front door. There is CCTV in operation to the exterior and interior of the building.

Entry to the main corridor is via an internal glazed door.

Staff greeted us and asked us to sign-in using the visitor's touch screen. There is a hand sanitising unit on the wall and was dispensing sanitising solution.

There is an internal lift and stairs to the upper floor.

Communal areas and some bedrooms are off the lower corridors and bedrooms off upper floor corridors. There are two communal areas including a dining area. The main communal area is on the ground floor with seating for approximately 14 residents. The interior appeared to be tidy, and décor appeared to be maintained.

We noted an odour of urine in some areas.

Whilst there weren't hand rails everywhere to promote independent movement, we noted that residents were supported in moving around.

We noted some direction signage but didn't see signs to toilets.

The external garden area was reasonably well maintained but we didn't see any benches or bird feeders.

6.3 Services offered

The service has an entry on the 'Care home' website, link:

<https://www.carehome.co.uk/carehome.cfm/searchazref/10002506INGB>

Offering the following services which have been taken from that website.

Primary Care Categories <ul style="list-style-type: none"> • Older Person Care • Dementia • Visual / Hearing Impairment • Permanent Care • Respite Care 	Dementia Care Types <ul style="list-style-type: none"> • Mild Dementia • Moderate Dementia • Advanced / Complex Dementia
Care Types Provided <ul style="list-style-type: none"> • Residential Care • Dementia Residential Care 	Provision for a maximum of 20 Service Users

6.4 Staffing

Role/Title	Number of staff
Manager	1
Deputy Manager	2
Morning – Senior	1
Morning – Care staff	2
Afternoon – Senior	1
Afternoon – Care staff	2

Night – Senior	1 part time
Night – Care staff	2
Activities co-ordinator	1
Maintenance	1
Cook	1
Domestic staff	1

6.5 Staff interaction

- Daily meetings take place to handover.
- 2 sets of management meetings are held weekly.
- Staff team meetings are held monthly.
- Residents meetings are held every 2 months and residents surveys are issued and collated for feedback.

6.6 Resident and Relative interviews

We interviewed 4 residents and 2 relatives using a pre-set questionnaire. This is what they told us.

Q. What is lifelike within the care home for you or your loved one?

A. The responses were:

'Like the dancing, singing, sewing, knitting and quizzes'

'Really nice place'

'Enjoy being here'

'Sometimes go into town on my scooter'

2 relative responses: 'Feels good atmosphere'. 'Alright'. 'Generally happy'.

Q. What choices do you or your loved one have?

A. The responses included: can choose bedtime, getting up time, clothes to wear, join in with activities like knitting, tiddledywinks, sing song, quizzes and bingo.

Q. How safe do you or your loved one feel within the home?

A. The responses were:

3 residents simply said Yes. Another resident added 'Someone always around'. A relative said: Yes.

Resident and relative comments:

"Very good company"
"Quite strict routine in a good way"
"Got mat and staff very helpful"

Q. How long have you or your loved one lived within the care/nursing home and are/ Were you involved in your/their care?

A. The responses were:

2 said "6 or 7 months".

2 said "A while".

1 was too confused to understand question.

Q. Do you or your loved one feel cared for?

A. The responses were:

5 said yes.

1 relative added that they definitely feel the resident is looked after

Resident and relative comments:

"Definitely feels looked after"
"I enjoy life. Would miss being here"
"Definitely"

Q. If you or your loved one had an issue, would you know who to speak to?

A. The responses included:

5 said yes.

2 of those people said "Speak to Manager or nearest staff member".

Q. Positive and one negative comments about the home?

Resident and relative comments

Positive:

"Very helpful staff",
"Very good company",
"Definitely looked after",
"I enjoy life. Would miss being here"

Negative:

"Ensuite toilet would be good. Not bothering resident but family would be happier"

Q. Are you or your loved one able to have a healthy balanced diet/drinks/activities?

A. "Two alternatives from menu and various drinks".

"Happy with food". "Enough choice".

Q. How involved are you or your loved one in the home?

A. "Join in some activities". "Not really".

"Don't go to meetings but we're here every day and Bal always around".

Q. If you could change one thing what would it be and why?

A. Residents/relatives could not think of anything specific but noted the following.

Resident and relative comments

"Get a dartboard"

"Nothing obvious. All seems ok"

"Ensuite toilet would be good. Not bothering resident but family would be happier"

6.7 Staff Interviews

We interviewed one staff member and the manager using a set series of questions.

Staff member

Q. How long have you served as a carer/manager here?

A. "I've been here for 21 years. I've seen a lot of changes – every day is different".

Q. Describe your care planning and risk assessment process?

A. "All records are now on-line (Care Control) and we're still getting used to the new system. There is a lot of information available".

Q. How much time are you able to spend with your residents and do you feel this is adequate?

A. "We're based in the middle of the communal areas so always monitoring what is happening. Residents take precedence over record keeping – all have different needs so not so much routine".

Q. Does the training you receive support you with the needs of your residents?

A. "The training system is on-line (Correct Care). HR send text if there is anything outstanding".

Q. Explain how you deal with comments/concerns from residents/relatives?

A. "We have questionnaires by the door. We review feedback from residents meetings and small group sessions".

Q. How do you feel about the supervision you receive to support you caring for your residents?

A. "Yes. I can always speak to Bal or other managers".

Q. Would you feel confident in raising any concerns that you have. If not, why?

A. "Most definitely".

Q. If you could change one thing what would it be and why?

A. "I'd like more personal time with each resident, get to know them better. The constant scrutiny from external organisations is wearing".

Manager

Q. How long have you served as a carer/manager here?

A. "I've been manager here for quite a while and taken over as owner more recently".

Q. How interactive are you with your residents?

A. "I spend about 50% of my time speaking to residents".

Q. How often do you hold meetings with your residents/relatives and how is this communicated?

A. "Resident meetings are held every 2 months. We give out surveys and review the feedback every month".

Q. What are your current challenges?

A. "My main challenge is retaining staff and keeping everyone motivated. I'm prioritising keeping activities going and am looking at Christmas decorations. Social media can be bad as opinions are circulated without any moderation".

Q. Any additional comments?

A. "Just had bonfire night activities which went well and we're glad to have schools visiting and various raffles with some prizes of vouchers from Morrisons and Sainsbury".

"Covid was a challenge and keeping staff motivated but we managed to avoid any serious illnesses helped by our closed-door policy which was well supported by families".

7 Recommendations

1. Add more direction signage.
2. Provide benches and bird feeders and similar in garden so that more people can sit out or watch through the windows.
3. Consider purchasing a dartboard as an extra activity.

7.1 Examples of Best Practice

1. Staff care appeared to be appreciated by residents.
2. Activities appeared to be appreciated by everyone.

8 Service provider response

The following comments about the above report was submitted by the service provider.

We have reviewed the contents and are pleased that the feedback from residents, relatives and staff reflects a generally positive experience of care, safety, staff support and activities.

We would like the following comments added under the Provider Feedback section.

We acknowledge the recommendations made and confirm the following actions:

1. Directional signage – We have already reviewed signage within the home and will be installing clearer toilet and way-finding signs to support residents and visitors.
2. Garden seating and features – We currently have a bench, garden chairs and tables in the garden, along with a bird table positioned on the back right-hand side. We will review the layout and look to relocate the bird table to a more visible area so it can be more easily enjoyed by residents from the garden and communal areas.
3. Activities – We welcome the suggestion regarding a dartboard and will be introducing this as an additional activity, ensuring it is risk assessed and suitable for our residents.
4. With regards to the odour noted, this related to a temporary issue at the time of the visit and was promptly addressed. There are no ongoing concerns, and robust cleaning schedules, continence care monitoring and environmental checks remain in place to ensure a fresh and clean environment at all times.

We would also like to confirm that staffing levels, activity provision, resident choice and involvement, and management visibility remain key priorities, and ongoing quality improvement actions are in place following our recent CQC inspection.

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Walsall

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We are committed to the quality of our information. Every three years we perform an in depth audit so that we can be certain of this.

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