

# MeadowField House

## Fulwood

Wednesday 25<sup>th</sup> March 2026

11:00am-2:30pm



**Disclaimer:** This report relates only to the service viewed at the time of the visit and is only representative of the views of the staff, visitors and residents who met members of the Enter and View team on that date.

# Contact Details

## Address

Meadowfield House Care Home

Meadowfield

Fulwood

Preston

PR2 9NX

## Practice Contact:

Chloe Walmsley (Registered Manager)

## Date and Time of our visit:

Wednesday 25<sup>th</sup> March 2026

11:00am-2:20pm

## Healthwatch Lancashire Authorised Representatives:

Emmy Walmsley (Senior Engagement Officer)

Austin Staunton (Healthwatch Lancashire Volunteer)

# Introduction

Healthwatch Lancashire is the independent public voice for health and social care in Lancashire and exists to make services work for the people who use them. We believe that the best way to do this is by providing the people of Lancashire with opportunities to share their views and experiences.

Healthwatch Lancashire has statutory powers to listen, act, challenge and gather feedback to improve local services and promote excellence throughout the NHS and social care services.

To help achieve this Healthwatch have a statutory power to 'Enter and View' health and social care services that are publicly funded. The purpose of an Enter and View is to listen to people who access those services and observe service delivery.

Following the Enter and View visit a report is compiled identifying aspects of good practice within the service visited along with any recommendations for any possible areas of improvement.

As we are an independent organisation, we do not make judgements or express personal opinions but rely on feedback received and objective observations of the environment. The report is sent to the service provider providing an opportunity to respond to any recommendations and comments before being published on the Healthwatch Lancashire website at:

[Healthwatch Lancashire Enter and View - People First](#)

The report is available to members of the public along with the Care Quality Commission (CQC), Healthwatch England and any other relevant organisations. Where appropriate Healthwatch Lancashire may arrange a revisit to monitor the progress of improvements and celebrate any further successes.



# What did we do?

Healthwatch Lancashire Enter and View Representatives made an announced visit to Meadowfield Care Home on Wednesday 25<sup>th</sup> March 2026 and received feedback from:



## Pre-visit survey

Healthwatch Lancashire emailed a pre-visit questionnaire to the care home manager. The aim of this questionnaire is to gather information about the staff structure, resident population, services offered and activities that are planned for residents to take part in. Some information from this questionnaire is included in the summary below.

## Introductory meeting with manager

At the beginning of the enter and view visit, Healthwatch Lancashire met with the manager to discuss the care home and view the facilities. This involved discussing the different areas of the home and aspects of the daily routine, and to hear the manager's perspective on what is currently working well at the care home.

## One to one discussions with residents and their relatives

Residents were asked about their experiences in the care home, including their opinions on the facilities, daily activities, food, and the care they received. They were also asked about how they were involved in the day-to-day life of the home, and whether they were included in planning activities.

## Discussions with members of staff

Staff were asked about their experience working at the care home and what they thought was working well, and anything they thought could be changed to improve the experience for themselves and the residents.

## Observations

Observations were made throughout the visit. We focused on resident and staff interactions, how accessible the care home was for residents, and the condition and cleanliness of the facilities.

# Summary



Healthwatch Lancashire representatives made an announced visit to Meadowfield Care Home on Wednesday 25<sup>th</sup> March 2026, and spoke with seven staff members, eight residents and one relative.

Meadowfield House Care Home can accommodate up to 47 residents in total over two floors. At the time of the visit there were 34 residents within the home. 17 residents in the rehabilitation part and 17 in the residential side.

Overall resident feedback was positive with comments about the environment meeting their needs, the staff within the care home and also how they feel the food provided is really good. Recommendations provided by residents were around the choice of food being moved to mornings instead of the night before and also staffing levels at key points and in the rehabilitation area.

Overall staff feedback was positive with them mentioning that they feel well supported by management and their team. There were comments around how they have been working for the care Home for many years and see the staff and relatives as family. A few recommendations were made by staff including looking at staffing levels at key points during the day, looking at going out more with the residents and changes to the medication round to ensure this can be done appropriately.

Relatives spoken with at the time of the visit were positive. The relative mentioned that they felt involved with the care and how staff will speak to them about their relative when they go to visit. The only recommendation was around what activities were in place as the relative was not aware if there were any available in the rehabilitation area.

Healthwatch Lancashire observed an activity in the residential area during the visit and the staff were supporting two residents with a game and were seen to be kind, courteous and encouraging the residents. We also observed meal time where staff again were supportive of the residents and ensured they had everything they needed during that time.

The Care Home also mentioned that they had won an award for the golden standards framework around the end of life. There is also a board in the main area that highlights the work that has been done around the end of life within the Care Home.

# Service Overview

## Location and Background



Meadowfield House in Fulwood, Preston provides residential care for older adults, including people aged 65 and over, and those with physical disabilities, as well as offering respite care and rehabilitation support, particularly within its assessment unit, Rosemeadow. The home accommodates up to 47 residents across three areas: Poppyfield with 11 beds, Daisyfield with 13 beds, and Rosemeadow with 23 beds, supporting a range of needs from general residential care to more focused rehabilitation pathways.

There is parking available at the front of the home including disabled parking space and an ambulance bay.

## services available

Meadowfield House offers a varied and engaging activities programme designed to enhance residents' wellbeing, led by two dedicated activity coordinators who deliver both group sessions and personalised 1-1 activity. Residents enjoy regular opportunities for exercise, social games, and reminiscence activities, supported by the home's commitment to providing meaningful daily engagement.

The home maintains strong community links, welcoming visits and involvement from local schools, the priest, and groups such as the Brownies, helping residents stay connected to the wider community. A hairdresser attends every Tuesday, ensuring residents can enjoy personal grooming as part of their weekly routine, and the home also arranges trips out to local places of interest for those who wish to take part.



# Enter and View observations

## External Environment

The external area of the care home is well maintained with enough space for both staff and visitors, there is also road parking nearby. There is an accessible path from the car park leading you to the entrance of the home. The Care home had an intercom system where visitors needed to be let into the building by a member of staff.

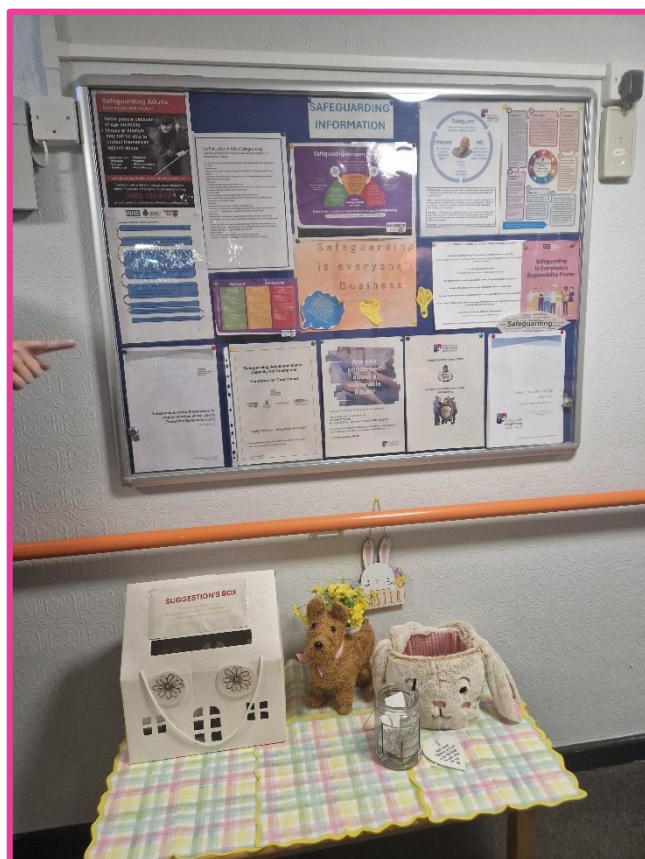
## Internal Environment – first impressions

When Healthwatch Lancashire representatives arrived at the Care Home we rang the bell to the home and were let into the home. We were greeted by a member of staff and asked to sign in the visitor's book before being taken through to see the manager. The reception area was colourful and had a visitors sign in book, the cqc report, certificate of achievement and information packs available. On the wall was a staff board which highlights what staff work in certain areas and what job they are doing.

Healthwatch Lancashire Representatives sat with the manager to explain the order of the day and to discuss the Care Home in more detail. The entrance of the Care Home opens up to a large corridor which has multiple notice boards which highlighted activities, health and safety, end of life, safeguarding and a champion board. In the corridor is a suggestion box for residents, relatives and staff, this is then looked at every month, and all suggestions are added to the 'you said we did' board so everyone can see what has come of the comments made.

This then led down to the manager's office and a separate room for both staff and relatives to use if they need some time out or some time to think. Further down the corridor is the entrance to the residential areas, these are clearly signposted with dementia signage. The rehabilitation area was closer to the main entrance.

Staff were identifiable by wearing either uniforms or lanyards at the time of the visit.



## Observation of corridors, public toilets and bathrooms



Both areas of the home have bedrooms, some with en-suite some with bathrooms and toilets nearby. Residents can decorate their rooms to suit their own personal needs and bring in personal items from home to make it feel like home.

Communal spaces, including bathrooms and toilets are clean and free from clutter. There were toilets, accessible bathrooms and accessible shower areas within the care home. These were situated around the bedrooms for ease of use from the residents.

Corridors were clutter free with the use of colour contrasting walls and grab rails. All bedrooms within the home consisted of a bed, wardrobe and a set of drawers. Each room can be decorated to the resident's personal tastes, and they can also bring in personal items from home.

## Lounges, dining and other public areas

The Residential part of the home each had a joint lounge area with a dining and kitchen area attached. Both lounges consisted of multiple chairs adaptable to different needs, a television and table space. Each dining area was set up for lunch time with a daily menu on for the residents to see. Both areas had enough room to move around effectively and all on one level for the residents.

There were also hydration stations in both areas for residents to help themselves to juice or water at any point during the day. In the middle of the two residential areas is a joint lounge area with more seating and a television for the residents to utilise. On the wall in this area was a community wall that staff update every month with an activity that has taken place that month.

At the entrance to the residential area is a memory table for relatives and residents to add to at their leisure. This then led round to a separate seating area with sofas and a piano. This space can be used for anyone in the care home and offers a quiet space to receive visitors as well.

Moving onto the physiotherapy unit, this is an open plan unit with a large dining/kitchen area. This was set up for lunch at the time of the visit and offered enough room to move around effectively. To the left of the entrance is a kitchen for residents to learn to cook again when they go back into the community and learn some independence. This then leads on to the lounge area which had multiple seating available which promoted social interaction, a separate sofa and a table with a game on. There was also a vending machine available for residents to use.



There was an enclosed garden in the middle of the home that is mostly used by the residents within the rehabilitation unit. The garden area also stretches around the whole home and has an accessible path all the way around.

The hairdresser comes to the Care Home every Tuesday and goes around the home asking residents if they would like their hair doing.

## Staff and resident Interactions



Staff were observed to be kind and courteous throughout the visit and speaking to residents with respect. Residents were sat in different parts of the care home including lounge areas and dining area. The activity coordinator was observed to be doing a game of beanbags in the residential area, the activity coordinator was encouraging the residents and showing them what to do and how they could get a higher score. Staff were attentive towards the residents and listened to them when they were talking and asking questions.

Healthwatch Lancashire also observed the meal time routine in the residential area. Staff were observed to be putting on their aprons and then supported residents that needed it to the table. One staff member sat with the residents and spoke to them about what was happening this afternoon and if they would like to join in with the activity. Staff confirmed with residents what they would like for dinner time and repeated to them what the soup was, so they were aware what they were eating.

Staff members were then observed to be handing out sandwiches and asking the residents individually which ones they would like. Once residents had finished their meals they asked them if they would like any more food. One member of staff was observed to be supporting someone with their meal during the visit.

In the rehabilitation unit staff were observed to be taking part in assessments with residents in their bedrooms and in the clinical room. They were observed to be kind and courteous towards the residents. A lot of the residents in this area were in their bedrooms and only one resident was out in the lounge area at the time of the visit. It would be good to relook at an alarm system in the rehabilitation lounge area to ensure that residents are able to communicate with staff if they need something. (Recommendation 1) Staff were observed supporting residents to the dining area at lunch time and ensuring they were in the right seat to suit their needs.



# Resident feedback

Healthwatch Representatives spoke with eight residents during the visit.

## Tell us what you think about the home

When speaking with residents they were happy with the home and what was provided for them.

**“I came in here initially as a rehabilitation patient, but I wanted to look at the residential side and the staff were great and took me over to look, a year later I’m still here.”**



**“I think the environment is good here for my needs.”**

One resident mentioned that they like that they have their own space and they can make it their own.

**“I like my own space and my own room; I can make it my own.”**

## What activities are on offer, and do you join in?

There was mixed feedback around activities within the home. On the residential side residents spoke to use about how they are happening, but they might not want to join in. they also mentioned that they like the variety and look forward to upcoming planned activities.

**“There are activities taking place, but I don’t want to join in with them.”**

**“We do quite a bit here including singing, pantomimes, raffles and we have people visiting as well.”**

**“I don’t have a favourite, I like trying new things, we have a singer in this afternoon and I’m looking forward to that.”**

When speaking to residents in the rehabilitation part of the home they weren’t sure what was on offer or what they could join in with.

**“I don’t think activities happen in rehabilitation, do they? I haven’t seen any.”**  
(recommendation 2)

## How do you find the care you receive?

When speaking with residents they spoke about how they really appreciate the staff that work within the Care Home and how good they are. There were a few comments around staffing levels.

**“I think the care is out of this world, i can’t complain.”**

**“I think the care is very good here.”**

**“I feel more staff would be good at times, especially at key times as it feels a bit thin at times.”**

A few comments were raised within the rehabilitation area around staffing levels and how they find the care good, but levels could be higher.

**“I think most of the staff are lovely but in rehabilitation it can feel quiet on the staff side, I sometimes don’t see anyone for hours.”**

“I think it would be good to review staffing in rehabilitation, for the amount of patients they need to get around I don’t think the staffing levels are right. The staff I’ve seen are lovely and try their best, but they look stretched.” (recommendation 3)

**“I think it’s good for short term care but not long-term care.”**

## How do you find the food provided?

All residents were happy with the food provided; there were a few concerns around giving in the meal order the night before in case they change their mind the day of the meal.

**“I eat the meals here regularly and I think they are good.”**

**“I feel the food here is good, we get a lot of choices.”**

“I think the choices are good, but I can’t always remember what I ordered and I might change my mind in the morning.” (recommendation 4)

# Relative feedback

## At your relative's care home, how do you feel generally about the service?



When speaking with relatives they mentioned that they are happy with what they have seen so far.

**“I think it’s good here so far, they haven’t been here long but what ive seen so far is good.”**

## Do you think that you are kept informed about your relative?

### For example, with their health and future care plans

Relatives mentioned that they felt they could just come in and speak to any staff member and they would be happy to update them on any news or updates.

**“I will ask staff when I come into the home and they are really happy to update me.”**

## Are you aware of the social activities provided by the service? And do you feel that you are able to join in these activities?

Activities was an area that the relative was not aware of at the time of the visit.

**“I don’t think they do activities in here do they? If they do I don’t know about them.”**

# Staff feedback



Healthwatch received feedback from seven staff members during the visit.

## **Do you have enough staff when on duty and do you feel supported?**

When speaking with staff members it was clear that they felt they had enough staff but at key times during the day more support would be helpful.

**“I feel more in the mornings would be helpful to help with medication, menus and personal care.”**

**“I feel we do have enough staff, but it can be hard if working on rehabilitation or in the mornings on residential.”**

Staff mentioned that if there are any queries that the manager will help and support where appropriate.

**“I feel it can be hard at times, but Chloe is great and if we ask she will give us more staff if its needed.”**

## **Do you feel supported to carry out a person-centred experience?**

All staff members mentioned they felt supported by their colleagues, and they felt the care plans provide enough support for individual residents.

**“Yes, I feel I can talk to my team if I have any problems.”**

**“Yes, I do feel supported and everyone has their own personal care plans that we follow.”**

**“I feel well supported by everyone here.”**

## **What is your experience of working here?**

All staff members mentioned they were happy working within the Care Home and feel that they are supported and the team at the moment is working well.

**“I would have my own parents here if I could.”**

**“I have worked here a long time, a lot of changes have happened, and I feel we are good with the staff we have at the moment, it just works.”**

**“I love working here, I feel the staff and residents are just family.”**

## **What measures are in place for people with additional support needs?**

There were mixed comments from this question from staff, some struggled to answer as they said they haven't had any residents with additional support needs recently.

**"I'm not actually sure, we don't have a lot of people here with additional needs."**

**"I know we wrote down on a whiteboard when we had a patient who was deaf a while ago and for anyone who is blind or partially blind, we will keep things in the same place so they know where they are going."**

**"We have visual aids, eye tests, assisted support and we use outside agencies where needed."**

## **Are there any changes that can be made to improve the Resident experience?**

Staff members made a few suggestions during the visit including staffing levels at key times of the day and more staff to support in rehabilitation.

**"Staffing on the rehabilitation part could be higher to support with demand." (recommendation 3)**

Staff spoke about how they would like to take residents on more outings from time to time.

**"It would be nice to take residents out more, I feel it's something we don't do very often." (recommendation 5)**

Some members of staff talked about how they would appreciate more resident feedback on how they are feeling and if any changes need to be made.

**"It would be nice to see more resident feedback as I don't feel we get any at the moment." (recommendation 6)**

Staff members commented on medication rounds and how these can sometimes be interrupted to support with personal care which then takes them away from medication.

**"Doing medication should be one job but it can sometimes be interrupted to support with personal care, I think this needs looking in to." (recommendation 7 A)**

A comment around how certain patients require medication at certain points during the day and how this can be interrupted at times.

**"I think it would be good to review medication rounds to help support with personal care plans and support personal needs." (Recommendation 7B)**

Staff during the visit mentioned that they are having a lot of work done on the outdoor area and are currently having the roof redone. They also mentioned that they have some people coming in to do mosaic art work around the building for the residents. (Recommendation 8)

# Recommendations

The following recommendations have been formulated based on observations of the environment and feedback gathered from residents, relatives and staff.

1. Review the alarm system in the lounge area in rehabilitation and ensure staff are aware of the policy around having the alarm near to residents to call for help or support if needed.
2. Advertise activities in all areas so that all residents no matter what area they are in can see what is on offer and when.
3. Look into staffing levels at key points in the residential area and also staffing levels in rehabilitation to ensure that all residents are able to see staff members when they need to.
4. Review the menu routine and see if this could be changed to suit more residents needs so they can choose in the morning.
5. Look at the possibility of taking residents on outings more and plan ahead for these.
6. Review how you can receive more resident feedback in order to show staff where they are doing well but also room for improvements.
7. A. Review medication rounds and ensure there are other staff on hand to help with personal care so medication can run smoothly.  
B. Ensure all staff are looking at personal care plans when on medication rounds so residents are receiving the right medication at the right time.
8. Invite Healthwatch Lancashire back when the roof and garden design have been completed.

# Provider response

Recommendation	Action from provider	Timeframe	Comments
Review the alarm system in the lounge area in rehabilitation and ensure staff are aware of the policy around having the alarm near to residents to call for help or support if needed.	Alarm systems are in place, there is now a walkie talkie system to alert staff of all aid calls and timings. Staff are allocated to areas.	Actioned.	
Advertise activities in all areas so that all residents no matter what area they are in can see what is on offer and when.	Activity monthly calendar is now shown in the main dining area, there is now dedicated dominoes and crossword area in the main lounge.	Actioned.	
Look into staffing levels at key points in the residential area and also staffing levels in rehabilitation to ensure that all residents are able to see staff members when they need to.	Staffing levels match the requirement of needs of service user, however, should they need additional staffing this is supported on a daily basis.	As and when required.	
Review the menu routine and see if this could be changed to suit more residents needs so they can choose in the morning.	Meeting held with catering Choice is now able to be offered each morning before 10.30am. There is also an additional menu and the option to change their mind before 10.30am should the residents wish to do so.	Actioned.	

Look at the possibility of taking residents on outings more and plan ahead for these.	Advertised x1 activities vacancy interviewing planned for 14 <sup>th</sup> April, will schedule for more outings/ discuss what they would like to do at residents meeting in April.	April	
Review how you can receive more resident feedback in order to show staff where they are doing well but also room for improvements.	On discharge residents how have a feedback form for the short term care pathway, resident feedback for residential is shared by the you said we did board.	Actioned.	
A. Review medication rounds and ensure there are other staff on hand to help with personal care so medication can run smoothly.	Staffing numbers match the area, however discussion held with management to offer support if required and assist with any medication rounds/ personal care. Management allocated to areas.	Actioned.	
B. Ensure all staff are looking at personal care plans when on medication rounds so residents are receiving the right medication at the right time.	Staff now have access to iPads whereby they can read and review care plans.	Actioned.	
Invite Healthwatch Lancashire back when the roof and garden design have been completed.	Will plan for when completed	June.	



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Lancashire

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