healthwatch
Leicester and
Leicestershire

Enter & View Report

Hayes Park Nursing Home

August 2026

Contents

Report Details

Details of Visit	
Service Address	Hayes Park, 2 Cropthorne Avenue Leicester LE5 4QJ
Service Provider	Huskards New Care Ltd
Date and Time	Friday 7th August 2026, 10am
Authorised Representatives undertaking the visit	Hafsah Mohammad, Riyaadh Mussa (Staff) and Dulna Shahid (Staff)

Acknowledgements

Healthwatch Leicester and Leicestershire would like to thank the service provider, residents and staff for their contribution to the Enter & View Programme.

Disclaimer

Please note that 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 residents and staff, only an account of what was observed and contributed at the time.

This report is written by Enter and View Authorised Representatives who carried out the visit on behalf of Healthwatch Leicester and Leicestershire.

Purpose of the visit

The purpose of the Enter & View visit was to speak with residents, relatives and staff, and to observe the care being provided within the care home. The visit aimed to understand people's experiences and look at key areas such as dignity, respect, safety, the environment and overall wellbeing. It also identified examples of good practice as well as areas where improvements could be made, to help support ongoing quality assurance and improve the experience of people living in the home.

Methodology

This was an announced Enter and View visit.

We contacted the care home management team in advance and had access to communal areas during our visit.

Our Authorised Representatives (volunteers or staff who have undergone specialist training and are DBS checked) attend and make observations.

Where possible, talk to residents about aspects of their care and whether this is delivered in a way that promotes their dignity and independence including the ability to make choices about their daily lives.

Where possible, talk to relatives, if they are available to ask if they are happy with the care provided to their relatives and whether they are aware and feel able to report any concerns or complaints.

Speak to staff about training, turnover, support and staff levels.

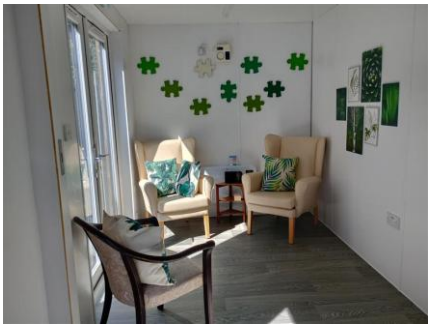
Observing interactions between residents, staff, manager and visitors.

At the end of the visit, we gave our initial findings to the management team.

Results of the Visit

External

The care home is a purpose-built home with clear signposting to the home. The home is accessible from the car park however, our Authorised Representative who uses a wheelchair struggled to get down the road and into the home. Staff assured us that they usually provide support to visitors, as they have assisted wheelchair users before and they did offer support for the Authorised Representative. The Authorised Representative decided not to continue with the visit due to access restrictions.



The outside of the building appeared well maintained and the gardens were well looked after. The garden areas were accessible to residents, although access is supported by staff as the garden is located next to the car park. Residents can ask carers when they would like to go outside and use the garden areas. The garden can be accessed via the lift. There is an outdoor pod area which provides additional space for residents to sit and spend time outside, as well as a designated smoking shelter/ area.

CCTV is not in operation at the home, with posters displayed to make visitors aware of this.

Internal

The home consists of three floors, with bedrooms, wet rooms and bathrooms on each floor. The facilities were accessible, spacious and free from any unpleasant odours. Toilets had handrails and alarm cords and wheelchairs and hoists were available within the home. Personal protective equipment (PPE) stations and hand sanitiser were available throughout.

The main lounge area was large and spacious and was combined with the dining area which featured dining tables and chairs. There was a separate quiet lounge which residents could use if they wanted some quieter time. Families can use this space with residents and staff told us it could be used if a resident was feeling distressed. The nurse station is situated next to the quiet lounge, with a window overlooking the area, allowing staff to observe residents when needed.

Reception is located at the entrance of the building. A visitor book was in use. The décor was in good condition and we were told that the home was currently in the process of redecorating. Furniture and soft furnishings were in good condition and corridors were free from clutter. There were a number of notice boards around the home, including an activity board, the Care Quality Commission (CQC) report and other relevant information. There was a feedback booth where visitors and residents could share their views, with the complaints procedure displayed. The activity board in the lounge showed the activities taking place, including an activity of the week. The home has a pet bird.

The manager explained that she has been the interim manager since 1 June 2026, with a new manager due to take over on 17 September 2026. She spoke positively about the improvements made during this time, stating that “the plans we’ve done have been immense” and that the improvements have been significant. We were told improvements to the home have included painting the corridors, replacing fire doors,

improving furniture and changing curtains.

Residents

The home has a capacity of 49 residents, with 26 residents currently living at the home. There are 37 bedrooms in total, with a mixture of single and double rooms. Some of the bedrooms have en-suite facilities.

Resident rooms are numbered; pictures of the resident are usually on the door but are currently off due to painters.

Staffing

The home has 24 carers and 2 nurse assistants supporting residents. There is 1 Activity Coordinator, with 2 domestic staff plus additional cover when required. The home is currently recruiting for a Maintenance role. Administration is covered by 1 administrator and 1 senior carer, with 1 manager overseeing the home. The catering team consists of 3 key cooks and 3 catering assistants.

Agency staff has not been used.

Staff interaction and quality of care

During the visit we felt very welcomed by staff and manager. We observed staff interaction with residents and staff were attentive and kind towards residents. we were told staff are appropriately trained and that training needs are discussed during staff meetings, with refresher training provided where required. Training is delivered through a mixture of in-house and external training and staff are supported to develop further skills and qualifications.

Staff also spoke positively about the support they receive from the manager and said they feel comfortable approaching them with any concerns or requests for further training. One nurse said, "I am happy here. I feel I can approach the manager. They helped me to become a nurse here. I have been here 4 years and don't want to go anywhere else."

The manager was observed to be interactive and engaged with residents. The manager said residents know them well and will regularly spend time sitting and talking with them. The manager said she also joins residents during lunchtime and teatime. The manager gave an example of an occasion when she bought a takeaway meal for all residents and staff. We were shown photographs of this, which showed residents appearing happy and enjoying the occasion.

The manager said that there were not many challenges at present, although filling beds can be challenging due to the level of competition from other care homes. She also explained that when she first started in post, there was one whistleblowing concerns raised within the first few weeks, which required her attention but everything is working well now.

The home has regular access to GP services, with the GP visiting every other week and a junior doctor attending during the weeks when the GP does not visit. Staff can contact the GP between visits if required. We were told residents do not need to travel to the GP, as appointments take place at the home.

Residents are supported to attend optician appointments outside of the home, while district nurses also visit the residents when required. We were told that accessing dental services can be difficult, with dentists generally only seeing residents when there is an issue. Carers support residents with their day-to-day oral health. We were told there are no issues with hospital visits, we were told transport is not provided by the home and is arranged through the hospital when residents need to attend.

Social engagement and activities

The home provides a range of activities including bingo, dominoes, films, arts and crafts, music and sensory activities, with activities tailored to residents' individual needs and preferences. Residents are able to choose activities from the activity trolley and sensory blankets and books are available for residents who may not wish to take part in group activities.

Although the home does not currently organise outings, carers can support residents with one-to-one outings and families are encouraged to take residents out. We were told residents who are able to go out can only be out for 1 to 1.5 hours at a time before needing to return to bed and confirmed that a minibus/taxi is not plausible at this time. When asked whether the home had a minibus, the activity coordinator confirmed that it does not, but noted that the manager at the time, approximately 3 years ago, had said would look into getting a wheelchair-accessible bus/taxi if and when one became available. The previous manager's consideration of this was based on the different needs of service users at the home at that time.

Special occasions, including birthdays and religious festivals are celebrated and children also visit the home. During the visit, an activity was taking place and residents appeared happy and engaged, with music playing and the television on. We were also shown a folder containing photographs of activities and celebrations at the home, with photographs also shared on Facebook.

We were told the home is working towards an initiative where they use tyres as flowerpots and residents and staff have been involved in this. The home has a 'Butterfly Book', where messages from family members and external organisations are recorded. A butterfly is then created for each message and displayed in the outdoor pod.

The Activity Coordinator has worked at the home for 14 years and spoke positively about the support received from the manager, saying, "The manager has helped me a lot, manager has been giving me support. I love it, I feel like I have more to do, I am in my element."

Dining experience

We were told the menus have been reviewed and the number of meals provided has been reduced from eight to five meals a day, which has helped to reduce food waste. Menus are displayed around the home, which staff said is particularly helpful for residents living with dementia. Lunch has also been moved from 12.00pm to 12.30pm, helping to reduce the gap between lunch and dinner.

The home has separate summer and winter menus, although new menus are currently being developed. Residents have a varied choice of food, and special dietary requirements, including vegetarian and religious needs, are catered for. Residents can also order food from outside the home.

We were told residents are supported with eating and drinking, with nutrition and hydration monitored through the 'Kare.in' app as well as being recorded in writing. Individual food choices and nutritional needs are recorded and communicated to the kitchen separately to ensure residents receive the appropriate support. During the visit, we observed a drinks trolley being taken around the home, with staff offering residents' drinks and cake.

Choice

We were told residents have choice and over their day-to-day routines, including food, drinks, clothing, bedtime and personal care. Individual care plans are tailored to residents' needs, and staff said that residents' needs are being met. Residents observed during the visit appeared well cared for. Call bells and call buttons are available for residents to request assistance. Staff also carry out hourly checks on residents who are unable to use the call system to ensure their needs are being met and that they are safe.

Residents spoken have expressed they are happy at the home. One resident said: "I am happy here. I like the food. The staff look after me, give me what I want and need."

Another resident said: "I enjoy the activities. I've been here for 10 weeks and love it. The staff are like family. I would like to be going to the shops more often. I go every Friday but want more carers to take me. They really care for me here. I have good choice over things, like my finances. The food is great here, they feed me well." The manager told us that residents are able to ask to go out when they like.

A resident who spoke Polish which was translated to us said: "I am happy but the language barrier is difficult. There is only one staff in laundry that can translate for me. It can feel lonely. Otherwise generally I am happy here." The manager said they are trying to bring people in to talk to him.

We observed relatives being made to feel welcome at the home and we were told they are able to visit residents at any time. We were told that relatives are kept well informed about residents and their care. Resident meetings are held every 3 month and families are encouraged to be involved.

Summary

Overall, the visit team found the home to be welcoming, clean and well maintained, with staff observed to be attentive, kind and positive towards residents. The manager spends time with the residents. Staff spoke positively about the support they receive from the manager. Residents appeared well cared for and generally happy, with good relationships between residents and staff.

Residents were offered choice in their daily routines, food, personal care and activities. A range of activities were provided and tailored to individual needs, and during the visit residents were observed taking part and appearing happy and engaged. Families were welcomed and encouraged to be involved. Overall, staff interaction, resident choice, activities and family involvement were positive aspects of the visit, although some residents identified a desire for more opportunities to go out more frequently and one resident highlighted difficulty with a language barrier.

One of the Authorised Representatives was unable to conduct the visit due to access difficulties. The home offered support and advised that they are able to provide support with access where needed and have supported visitors with similar needs on previous occasions. However, the Authorised Representative decided not to continue with the visit.

Service provider response

The report was agreed with the Service Provider as factually accurate. They have provided the following responses to the report.

Hayes Park Nursing Home would like to thank the Enter & View team for taking the time to visit and for their thorough and constructive report. We welcome the observations made regarding the atmosphere within the home, and are pleased that staff and residents were put at ease by the visit, with residents treated with dignity and respect throughout.

Page 4, Paragraph 1 (External): The Service Manager has confirmed that two staff were at the door when the Authorised Representatives arrived, and had already offered support to the Authorised Representative who uses a wheelchair. The Service Manager then came out from the office to meet the team and offer support herself. We would like to reiterate that support was offered promptly, by more than one member of staff, as part of the home's normal response to visitors.

We are grateful to Healthwatch for the time taken to visit and for the valuable feedback provided. We remain committed to the ongoing improvement of the service and welcome any further engagement with Healthwatch going forward.

Distribution

The report is for distribution to the following:

- Hayes Park Nursing Care Home
- LLR Integrated Care Board (ICB)
- Care Quality Commission (CQC)
- Leicester City Council (LCC)
- NHS England (Leicestershire and Lincolnshire) Local Area Team
- Healthwatch England and the local Healthwatch Network
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