Enter & View Report

Pemberley Manor Care Home, 7th July 2026

healthwatch Bromley

Contents

Visit Details	
Service Visited	Pemberley Manor Care Home
Registered Manager	Jade Smith
Date & Time of Visit	Tuesday 7th July 2026, 11:00 – 14:30
Status of Visit	Announced
Authorised Representatives	Margaret Kalu, Orla Penruddocke, Graham Powell
Lead Representative	Charlotte Bradford

1. Visit Background

1.1. What is Enter & View?

Part of the local Healthwatch programme is to undertake and report on 'Enter & View' (E&V) visits.

Mandated by the Health and Social Care Act 2012, the visits enable trained Authorised Representatives (ARs) to visit health and care services such as care homes, hospitals, GP practices, dental surgeries and pharmacies.

E&V visits can happen if people tell us there is a problem with a service but can also be made when services have a good reputation.

During the visits we observe service delivery and talk with service users, their families, and carers. We also engage with management and staff. The aim is to gain an impartial view of how the service is operated and being experienced.

Following the visits, our official 'Enter & View Report', shared with the service provider, local commissioners and regulators, outlines what is working well, and makes recommendations on what could work better. All reports are available to view on our website.

1.1.2 Safeguarding

E&V visits are not intended to identify specific safeguarding issues. If safeguarding concerns arise during a visit they are reported in accordance with safeguarding policies. If at any time an AR observes anything about which they feel uncomfortable they inform their lead, who will inform the service manager, ending the visit.

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.

1.2 Disclaimer

Please note that this report relates to findings observed during this specific visit. It is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed on the day.

1.3 Acknowledgements

Healthwatch Bromley would like to thank the service provider, service users and staff for their contribution and hospitality in enabling this E&V visit to take place. We would also like to thank our ARs who assisted us in conducting the visit and putting together this report.

2. Information About the Service

2.1 Pemberley Manor Care and Nursing Home

Owned by Country Court Care Homes Limited, Pemberley Manor Care Home is situated in Orpington, with local bus routes outside the home, and a convenient railway station. With a capacity of 75 beds, the home is split across three floors. The home provides a range of respite and long-term residential care, frailty nursing, dementia nursing and end of life care.

2.2 Ratings

The CQC is the independent regulator of health and adult social care in England. It ensures that health and social care services provide people with safe, effective, compassionate, high-quality care and encourages services to improve.

An inspection was announced and carried out in January 2026. The service was rated 'Good'.

2.3 Residents

During our visit, Pemberley Manor had 72 residents, aged 65+. Many have mild, moderate or severe long-term conditions, 48 are living with dementia, and 15 have an additional long-term condition (LTC).

2.4 Staff

The home has 114 staff on full-time, part-time and bank contracts. Staff include a Home Manager, Deputy Manager, Administration, Customer Relations Manager, Reception, Maintenance, Client Service Manager, Chef and a Kitchen team. The home has a full care and senior staff team and does not use agency staff. There is also a housekeeping and laundry team, and front of house staff who provide support with meals and drinks throughout the day.

3. Summary of Findings

The E&V visit was carried out on Tuesday 7th July 2026; four E&V ARs were present. It was announced and planned in partnership with the home. In preparation, we shared with the manager a poster announcing the E&V, to display in communal areas, and questionnaires explaining the purpose of the visit in further detail and seeking feedback.

3.1 Entry and General Accessibility

Notes
The building is located on a residential road, providing a quiet environment away from traffic noise. There is visitor parking available at the front of the property, and additional, free, off-street parking nearby.

What works well?

- Easily accessible by public transport
- Visitor parking
- Doorbell at entrance
- Sign in and out at reception
- Wheelchair friendly and lifts available

- Hand sanitiser on reception desk
- Designated ambulance bay.

What could be improved?

- We found no areas for improvement.

3.2 General Environment

Notes

The double-door entrance opens into a bright, spacious reception area with comfortable seating for visitors. All visitors are required to sign in upon arrival and sign out when leaving.

A notice board displaying staff names and photographs is positioned within the reception area. The Healthwatch Bromley Enter and View poster was displayed by the entrance door when we arrived.

The reception area includes a comfortable seating space for visitors, contributing to a warm and welcoming environment. The décor features neutral-coloured walls, complimented by distinctive handrails and flooring.

A comment box is situated in the main reception, providing residents and visitors with the chance to submit feedback or suggestions. There is also a poster inviting visitors to review the home on www.carehome.co.uk

Walls throughout the building are decorated with a variety of artwork and inspirational quotes. Corridors and communal areas are well lit with soft lighting. Large windows provide good levels of natural daylight throughout the building.

The care home is split across three floors. The ground floor provides 32 residential beds, the first floor accommodates a further 32 residents, and the second floor comprises a 15-bed dementia unit. Each floor has its own lounge and dining area, with lounges furnished with dining tables, chairs and comfortable armchairs. All units have access to an outdoor space with seating.

A range of facilities is available to support residents' wellbeing and enhance their quality of life, including a hairdressing salon, therapy room, gym and a playroom for visiting children. Residents can also enjoy the "Palace Cinema" and several breakout areas which offer quieter spaces for relaxation.

The first floor includes a dedicated reading area for those who prefer a peaceful environment. An entertainment room, known as "The Bug Hutch", is regularly used for activities and social gatherings and is particularly popular at weekends when residents spend time with visiting family members.

A dedicated "Bistro" provides a comfortably furnished area where residents can enjoy lunch with visiting family and friends. Air conditioning is available in the dining room, and quotations are currently being obtained to repair or replace non-operational air conditioning units in the remaining communal areas.

Outside the dining room, the daily menu is clearly displayed in both written and pictorial formats, enabling residents to make informed meal choices while supporting a range of communication needs.

Residents also have access to a large, well-maintained garden with modern outdoor furniture, including benches, tables, chairs and parasols. Opportunities to participate in the "Country Court in Bloom" initiative encourage residents to engage in gardening, to promote wellbeing. The programme is led by the Wellbeing Co-ordinator, supporting residents to enjoy the therapeutic benefits of spending time outdoors.

Residents' rooms vary in size, and all feature an en-suite wet room. Each door is numbered and displays the resident's name and photo. Some also have brief information and care cues (e.g. "Please introduce yourself to me when you enter my room").

The bathrooms are clean, with toilet seats and light switches in contrasting colours for optimum visibility. Residents also have access to a spa-style bathroom equipped with a sound system, allowing them to play music and enjoy a relaxing atmosphere, and emergency alarm buttons are conveniently positioned near the toilets to enhance safety.

What works well?

- Easily accessible, suitably adapted toilets equipped with emergency buttons
- Daily menu is clearly displayed
- Comment box clearly visible by reception and a poster inviting reviews on www.carehomes.co.uk
- Wide corridors and lifts for easy wheelchair access.

What could be improved?

- Lack of dementia friendly clocks throughout the home.

3.3 Safety and visiting

Notes

At the time of our visit, there were no restrictions on visiting. Fire exit signs were clearly displayed, and fire extinguishers were easily visible. Emergency evacuation sledges were positioned at the tops of staircases. Visiting times are not restricted but visitors are asked to avoid mealtimes where possible.

What works well?

- Fire alarms tested weekly
- Lift accessible via keypad
- Beds have motion sensor mats
- Emergency call buttons reachable from beds
- Kitchen staff wear hair nets in kitchen
- Clean and well organised kitchen

What could be improved?

- We found no areas for improvement.

3.4 Activities and Personal Involvement

Notes
Management highlighted the team's dedication to offering person-centred activities that reflect each resident's individual needs. They recognise that certain activities may not suit everyone, especially those living with dementia or an LTC.

The weekly and monthly activity schedule is clearly displayed on notice boards around the home and residents' rooms. Activities vary daily and include:

- Arts and crafts
- Gardening
- Hairdressing
- Church services
- Movie screening
- Live music
- Exercise
- Knitting club
- Games (e.g. scrabble, puzzles)

What works well?

- A range of activities to engage residents and keep them active
- Activities timetable displayed in communal areas
- Range of books available in the reading room.

What could be improved?

- We found no areas for improvement.

3.5 Diet and Cultural Practices

Notes
Food is prepared in the home's kitchen. The catering team works to meet specific dietary needs and cultural preferences.

Residents identified as being at risk of weight loss are monitored through regular weight checks and are offered supplementary nutritional drinks where appropriate. Staff also work in partnership with a dietitian to support residents' nutritional needs and implement individualised care plans.

Residents who prefer an alternative to the daily menu are encouraged to speak with a member of staff, who will discuss other available meal options. Clear allergen information is displayed in the Bistro to support residents and visitors in making informed food choices. A hostess is available during mealtimes to serve meals and provide assistance to residents where required.

Management emphasised that residents can contribute to menu planning.

What works well?

- Residents can choose what they would like to eat every day
- Daily menu is displayed by entrance of dining area
- A variety of food is on offer (e.g. slow cooked lamb, risotto with prawns and courgette, vegetable soup, poached fish, pasta bake, shepherd's pie, ham omelette).

What could be improved?

- We found no areas for improvement.

3.6 Feedback and Complaints

Notes

The home holds residents' meetings, covering various topics including activities, meal options, and care provision.

What works well?

- Comment box by main reception
- Poster to leave a review on www.carehomes.co.uk.

What could be improved?

- We found no areas for improvement.

4. Residents' and Families' Feedback

We received feedback from eight residents and five family members. We asked about various aspects of their experience, including satisfaction with care, dietary options, activities and personal development, access to healthcare, opportunities for social interaction, safety, and communication with the home.

Overall, the feedback received from residents and their family members was positive, with respondents expressing satisfaction with the care and support provided at Pemberley Manor. Residents reported that they felt safe, received appropriate personal care, and were encouraged to make choices about their daily lives, including mealtimes and participation in activities. Support with eating and drinking was available to those who required assistance.

Residents were asked whether they had a personalised risk assessment that included measures to reduce the risk of falls. Of the eight residents who responded, five said "yes", one said "no", and two were unsure. When asked whether they knew the arrangements in place in the event of a medical emergency, five of the eight residents who responded said "yes", while three were unsure.

Residents were also asked whether staff identified and responded appropriately to outbreaks of infection and took steps to protect them from infection. Of the six residents who responded, five said "yes" and one was unsure.

Family members provided positive feedback regarding the support their loved ones receive from local health and care services, including GPs, dentists, and pharmacies. They expressed confidence that residents receive high-quality personal care, including assistance with washing, hairdressing, and chiropody.

Family members were asked whether they felt they were kept informed about matters such as falls, changes in health, and future care plans. Of the five who responded, three said "yes", one said "no", and one was unsure. When asked whether they knew the arrangements in place for their relative in the event of a medical emergency, four of the five respondents said "yes", while one was unsure.

Family and Friends' Selected Comments

"Good service."

"Good service always."

"We are very fortunate that they are here."

Residents' Selected Comments

"Good service."

"I am quite happy here."

5. Staff & Management Feedback

We received feedback forms from six staff members and one from management. During the visit, staff were observed interacting with residents in a kind and respectful manner.

5.1 Staffing

Of the six staff members with whom we spoke, two have been working at the home more than four years, three between one and three years, and one did not specify.

Training
The home is currently reviewing and updating its induction programme. New staff complete a two-week induction followed by a period of shadowing experienced colleagues. All new employees are subject to a six-month probationary period and receive regular supervision throughout this time.

All staff completing the questionnaire were asked about their interest in additional training opportunities, four said they would like to receive additional training.

Breaks
Most staff we heard from said that they are given sufficient breaks during their shifts. They expressed satisfaction with the way handovers are managed and felt that they have the necessary opportunities and resources to support residents

effectively. One staff member said they were not given sufficient breaks during their shifts.

Management
Staff appear to have a positive relationship with the manager; all those to whom we spoke during our visit stated that they feel heard and supported when raising concerns or asking questions.

What works well?

- Staff are satisfied with the way handovers are managed

What could be improved?

- Four staff members said they would like to receive more training.
- One staff member said they were not given sufficient breaks during their shifts.

5.2 Selected Comments from Staff

"I think residents are treated with dignity and respect."

"Has been through upheaval but now in a really good place."

"This place is very good."

5.3 Management

Notes
The registered manager stated that residents have personalised risk assessments which include mitigating risk of falls.

Diet
Residents identified as being at risk of weight loss are monitored through regular weight checks and are offered supplementary nutritional drinks where appropriate. Staff also work in partnership with a dietitian to support residents' nutritional needs and implement individualised care plans. Help is provided to residents who need support with eating and drinking. Overall provision of liquid is monitored.

Quality of care
Management confirmed that residents are kept warm enough and have suitable ventilation. The home provides additional heating and air conditioning.

Laundry services are done within the home.

To prevent unnecessary hospital admission, the home has a clear falls policy. Some residents have a Universal Care Plan (UCP), a free NHS digital service, in London, that records your care preferences, medical needs, and personal wishes.

Safety
The manager stated that staff, residents, and visitors have the necessary knowledge and skills to address safeguarding concerns, and all are aware of the procedures for raising a complaint.

The manager confirmed that all staff wear uniforms and ID badges. Staff wear colour-coded uniforms to help residents and visitors easily identify their roles (i.e. Wellbeing Co-Ordinators wear red uniforms, Senior Care Assistants wear blue, and Housekeeping wear purple.

All staff are aware of the evacuation procedures.

Activities
Residents are able to suggest social activities and are helped to participate. There is a residents' forum where residents can make suggestions on activities. The Wellbeing Co -Ordinators take residents for outings.

The home supports residents of diverse cultural and sexual identities. They have recently celebrated Diversity Day and hosted a BBQ.

Residents can contact faith groups if they wish, for example a resident goes out to a service every Sunday. The home also plays a live streaming link for Christian church weekly.

Community Services
The home works closely with a Dentist, Dietician, Physician, GP, and Optician. An earwax service and self-referral are done through Occupational Therapy, provided by Bromley Healthcare.

COVID-19 infection prevention measures
The manager confirmed that staff identify and respond well to outbreaks of infection in the home. When they had a resident diagnosed with an infection, the

home acted swiftly. There has not been any COVID-19 outbreak since January 2025. The home has a notice board with clear infection prevention details. Vaccinations continue to be offered by the home, though uptake has been declining.

Staff

The home is currently reviewing and updating its induction programme. New staff complete a two-week induction followed by a period of shadowing experienced colleagues. All new employees are subject to a six-month probationary period and receive regular supervision throughout this time.

A mandatory refresher training is provided every six months, with additional training opportunities available to all staff. A competency matrix is maintained to monitor staff competence and identify any development needs. Staff are supported through regular supervision and ongoing professional development. Additional falls prevention training has also been requested to further enhance staff knowledge and skills.

The manager indicated that they are currently satisfied with the staffing levels. They also noted that agency staff have not been needed and rotas are planned a month in advance.

6. Recommendations

Healthwatch Bromley would like to thank Pemberley Manor Care Home for their support in arranging our E&V visit. Based on the analysis of feedback obtained, we have made recommendations which prioritise safety and wellbeing.

6.1 General Environment

6.1.1. Lack of dementia friendly clocks through the home.

We recommend installing dementia-friendly clocks in communal spaces to support orientation and independence for residents living with dementia.

6.2 Residents and Family

6.2.1. Two residents said they were not sure whether they had a personalised risk assessment.

We recommend involving residents in discussions about their personalised risk assessments, where appropriate, so they understand the measures in place to support their safety and wellbeing.

6.2.2. Three residents said they were unsure of the arrangements in place for them in the event of a medical emergency.

We recommend informing residents informed, where appropriate, about the arrangements in place in the event of a medical emergency, so they understand what to expect and feel reassured about the support available.

6.2.3. One family member said 'no', when asked if they felt kept informed about matters such as falls, changes in health, and future care plans of their relative

We recommend reviewing communication processes to keep relatives informed, where appropriate and in line with the resident's wishes, about significant events such as falls, changes in health, and future care planning.

6.3 Staffing

6.3.1. Four staff members said they would like to receive more training.

We advise the management team to assess the current training programme and identify opportunities for staff to take courses that will help with their career progression and further enhance the quality of care provided at the home.

6.3.2. One staff member said they were not given sufficient breaks during their shifts.

We recommend reviewing and improving the handover process between shifts to ensure it is organised effectively and meets staff needs.

8. Glossary of Terms

AR	Authorised Representative
CQC	Care Quality Commission
EAL	English as Additional Language
E&V	Enter and View
ID	Identification
LA	Local Authority
LTC	Long-term condition
UCP	Universal Care Plan

Cover photo by Marcus Aurelius.

9. Distribution and Comment

This report is available to the public and shared with our statutory and community partners. Accessible formats are available.

If you have any comments on this report or wish to share your views and experiences of health and care services, please contact us.

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Healthwatch was established in 2013 in accordance with the Health and Social Care Act 2012.

Within this legislation [Arrangements to be made by relevant bodies in respect of local Healthwatch Organisations Directions 2013] Healthwatch has a right to a reply within 20 working days to Reports and Recommendations submitted by Local Healthwatch to a service provider.

Report & Recommendation Response Form

Report sent to	**Jade Smith**
Date sent	05/08/2026
Report title	Pemberley Manor Care Home Enter & View Report, 7th July 2026
	Response (If there is a nil response please provide an explanation for this within the statutory 20 days)
Date of response provided	11/08/2026
Please outline your general response to the report including **what you are currently doing to address** some of the issues identified.	Thank you for your time on the 7th of July 2026. We appreciate your recommendations and value your feedback. We appreciate your comments and will take on board as part of our ongoing commitment to improving the quality of care and experience we provide to our residents. We have discussed the recommendations with the management and care team and have identified appropriate actions to address each area. Residents are being involved wherever possible, and their views, preferences and individual needs are being taken into consideration. Staff have been reminded of the importance of involving residents in their care planning, risk assessments and medical emergency planning, and ensuring that information is communicated in a clear and accessible way. We will continue to monitor progress through regular checks, staff discussions, care plan reviews and feedback from residents. Any further actions identified will be addressed promptly, with outcomes documented to demonstrate ongoing improvement.
	Please outline what **actions** and/or improvements you will undertake **as a result of the report's findings and recommendations**. If not applicable, please state this and provide a brief explanation of the reasons.
Recommendation 1	We have welcomed the feedback and taken on board the comments. We have purchased dementia friendly clocks to suit the needs of our residents and placed them around the communal areas.

Recommendation 2	We acknowledge this recommendation and we will ensure that people are giving people the opportunity to be involved with updating their personalised risk assessments and care plans. Where this is not possible and the resident is unable to fully participate in this, their representative or advocate will be involved where appropriate.
Recommendation 3	We will inform people at the next resident meeting any medical emergency plans and what these could look like so they feel reassured what services are available.
Recommendation 4	We hold regular care reviews with our residents and their representatives where applicable to ensure that people know about health changes and any other significant health changes where appropriate.
Recommendation 5	Staff felt that they would like more training and we have access to some great resources through our own company, the local authority and other partnerships that we work alongside. At the next staff meeting we will explore what training staff would like to receive following this review.
Signed	Jade Smith
Name	Jade Smith
Position	Home Manager