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Enter and View Visit to  Thornton Green Lane, Thornton-le-Moors Chester CH24JQ  Date  5th March 2015  Authorised Representatives Staff Present  Background  Thornton Manor provides residential and nursing care for people with physical and mental disabilities, including severe dementia. It also specialises in end life care. The home is able to care for those with the most challenging needs has a capacity for 44 rooms on two floors including three doubles for couplest those wanting to share. At the time of visiting two rooms had been recently vacated and were being redecorated prior to reoccupation.  The service is owned by Mr. Barry Potton who owns a number of other homes providing different services in Todmorden, Manchester and Hull. Representatives understand that he is in daily contact with the manager and visits at least monthly.  Overall  Impression  At a previous Enter and View visit by Authorised Representatives (ARs) on December 10th 2013, ARs concluded that, though the standard of care was his there were some serious deficiencies in the maintenance of the premises. Sin then very considerable investment has been made. Carpets and floorings have been re-laid, furnishings renewed, rooms redecorated and matching cheerful and individual curtains and bedding introduced. New double glazing is on ord we were told. The lift remains small but was clean. Staircases are narrow, be we were told that chutes are now available (in extreme cases only) for any eventual evacuation from the top, secure floor where the most challenging cases are housed. There is no trace of the bad odour detected last time. Bio mass heating has been installed, increasing cost efficiency.  Since the last visit Jane Green, with the owner's backing, has spent her spar time at Bolton University and has obtained a degree in end-of-life care. Othe staff have continued to gain extra qualifications.  Representatives feel that this home deserves praise for having tackled its problems head-on and for coming up with the investment.  There appears to be	Healthwatch Cheshire West Enter and View Report		
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#### **Environment**

With reference to our previous report, the entrance hall is now welcoming and the smell has gone. The building was once a hotel - before the advent of the motorway or the oil refinery - and has some exterior charm. It has garden areas around it which we saw at least one resident use on this chilly day. There are chickens and the grounds are well-tended.

The rooms are compact. Own furniture is an option. In one room we saw an outside window-box was in full bloom with spring bulbs and primroses, while curtains and bedding were cheerful, matching and individual - another change since the last visit. Two rooms were being recarpeted and re-decorated. This happens each time one was vacated, we were told by the maintenance man who was busy there.

The halls and corridors had been redecorated and re-carpeted since the previous visit by ARs. Laminate floors are now used in the dining room. Menu choices were on the board and we saw the chef go to several rooms to check on individual choices. Jane told us that all staff, including cleaners and kitchen staff, had been trained in dementia and first aid and that, "If a resident is distressed, I don't want to see someone cleaning round them. I want to see them sit down and talk to them."

The downstairs lounge was also cramped but chairs were staggered to give more privacy. Most residents were dozing in front of the TV. Here, too, there is an adjacent kitchenette with access to the garden where visitors can also make their own refreshments if they so wish, a large table and a considerable store of activities material. Residents were not allowed into this room unaccompanied because of the possible risk from cooking facilities or other items, we were told.

### Health and Wellbeing

This remains a positive with staff appearing dedicated and caring and the manager welcoming, knowledgeable and open.

Dr. Gregson is still in attendance, providing continuity of care. He sees all residents once a week, helps review care plans and also comes when called out. Medication is stored in a locked trolley in a locked treatment room.

The needs of residents are extremely diverse. When we arrived Jane Green was not present. She had been, she told us, to interview a potential new resident. "I vet every applicant myself. I visit them and also talk to family and friends. It is important that the home is right for them and that they can fit in without disrupting the other residents", she told us. She described in detail how the home had absorbed a difficult case.

Some residents suffer from severe conditions, including dementia. Jane told us that every effort is made not to send residents to hospital to die. "This is their home. They deserve a dignified end here." If residents do have to go to hospital for any reason, the home has its own specialised mini-bus with a trained designated driver. This bus is used to take residents, accompanied by staff, to routine appointments out of house and waits to bring them back promptly.

**Staffing** - No agency staff are used and there is a very low staff turnover, we were told. Most staff lives locally. The Manager has been in post for six years, her deputy took up her position five months ago having worked at the home for the previous four years. There are eight daytime carers with two nurses and five staff on at night.

All staff have NVQ level two qualifications, some level three. There is ongoing training. The atmosphere between residents and staff was relaxed and friendly.

**Food** - All food is cooked on the premises, with special diets to meet individual needs. Much is sourced locally. There is a set menu, on a board in the dining area, but also choices. The chef was observed going to some rooms to check orders. ARs understand that kitchen staff are also

trained in dementia and first aid. It was difficult to ask residents in general about food on this occasion because those asked were mostly unresponsive to someone they didn't know. One resident told us that he found the food good and was given a special diet for his health needs.

# **Activities and Community Links**

There are two part-time activities coordinators. They discuss what to provide and use care plans to discover the interests and hobbies of residents. Group activities are provided. Weekly activities include an art therapist, 'Oomph' exercises and a hairdresser and manicurist, whose services are also available to visitors. There is much individual activity with residents in the downstairs lounge mostly engaged sporadically in some activity, such as knitting or puzzling or simply reading. The activities coordinator was spending time helping a severely physically handicapped resident with a puzzle game.

The mini-bus is also used for trips outside, and for transporting visitors who have difficulty reaching this rather isolated spot. Visitors are very much encouraged, with overnight lodgings and meals provided if necessary. "There's one who brings his caravan and parks outside for a few days," we were told.

#### **Feedback**

ARs spoke to one resident and the partner of another. The resident; a man with complex health needs and now confined to a wheelchair; was returning from a visit to the garden propelled by a carer. He was a retired musician who said he felt very comfortable in the home and could even play the drums. The food was good. Asked if anything could improve, he said, "More nurses!" - though it was not clear whether this was for nursing or aesthetic reasons. A relative who visits another resident every day from Wales told us that his partner had been so badly neglected in another care home that she had ended up in hospital for several months. This home, he said, "Had given her a new lease of life!" He further commented, "They took care with the necessary diet and were alert to her needs." He told ARs that he enjoyed visiting and chatting with the staff. His partner herself looked cheerful and alert, sitting in her personalised room.

# **Additional Comments**

All credit to manager Jane Green, the staff and the owner for what they have achieved. Our impression is that they are not going to rest on their laurels. Jane Green told us that the owner has given her a free hand with the budget so that she can establish priorities. It would be easy to nit-pick on detail such as some patterned carpets where plain might have been a better choice for dementia sufferers, but this team seems sufficiently aware to identify details that could be improved. Their priority is the complex care they provide. One quote from Jane Green stayed with us: "Let's face it, nobody wants to be here. They would all much rather be back at home. So let's make it the best for them we can."

Authorized Representatives would like to thank Manager Jane Green, her deputy manager Karen, and her staff who were extremely generous with their time, well-informed and helpful during the visit.

### Feedback from Provider of Service

Staff and Residents state that they felt very comfortable with the visit and the AR's made them feel at ease when they were asking them questions which in turn facilitated the relaxed atmosphere during the visit.

We feel that your report is accurate and honest and we will continue to aspire to attain our high standards of care. - Jane Green