



## Towneley House Residential Home

### Enter and View Report

**Contact Details:**

143/145 Todmorden Road  
Burnley  
BB11 3HA

**Staff met during visit:**

Karen Shillito and care staff

**Date and time of visit:**

Thursday 6<sup>th</sup> October 2016  
10.30am – 12.30pm

**Healthwatch Lancashire Authorised Representatives:**

Michele Chapman (Lead)  
Amanda Higgins  
Peter Osborne (volunteer)  
Liz Butterworth (volunteer)

**V1.3**

### **Introduction**

This was an announced Enter and View visit undertaken by authorised representatives from Healthwatch Lancashire who have the authority to enter health and social care premises, announced or unannounced, to observe and assess the nature and quality of services and obtain the view of those people using the services.

This visit was arranged as part of Healthwatch Lancashire's Enter and View schedule. The aim is to observe services, consider how services may be improved and disseminate good practice. The team of trained Enter and View authorised representatives record their observations along with feedback from residents, staff and, where possible, resident's families or friends.

The team compile a report reflecting these observations and feedback, making comment where appropriate. The report is sent to the manager of the facility for validation of the facts. Any response from the manager is included with the final version of the report which is published on the Healthwatch Lancashire website at [www.healthwatchlancashire.co.uk](http://www.healthwatchlancashire.co.uk)

#### **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.**

### General Information

Towneley House Residential Home is privately owned by Mr & Mrs S Shillito with places for 22 residents. There were no vacancies at the time of our visit. The person in charge is Karen Shillito.

Information obtained from the carehome.co.uk website states that the home provides care for people from the ages of 55+ who are affected by Alzheimers, Dementia and Old Age.

### Acknowledgements

Healthwatch Lancashire would like to thank Karen, together with staff, residents and visitors, for making us feel welcome and taking part in the visit.

### Methodology

The Enter and View team visited Towneley House Residential Home on the morning of Thursday 6<sup>th</sup> October 2016.

We spoke to 4 residents, where possible, structuring our conversations around a questionnaire covering four themes (Environment, Care, Nutrition and Activities) designed to gather information concerning residents overall experience of living at the home.

In addition, we spoke to 1 member of staff, and 2 relatives. The team also recorded their own observations on the environment and facilities.

These observations were scored on a scale of 1 to 5:

**1 = Poor   2 = Below Average   3 =Average   4 =Good   5 = Very Good.**

### Enter and View Observations

#### Pre Visit

The team evaluated several areas prior to our visit including whether there was a brochure and website that provided information about the home and its facilities; together with the manner of response to any telephone enquiries.

The team found that all areas were met. Likewise, information about the home states that service user guide and statement of purpose are available on request.

All pre-telephone contact was positive.

**The pre-visit was scored as 5/5**

#### Location

Towneley House is an older property situated on a busy main road with convenient access to shops and public transport. The home is clearly signposted and situated in an elevated position with a cultivated front garden area.

There is no dedicated parking area but limited parking is available on the main road. Disabled access is situated on a sloped area at the rear of the building.

**The location was scored as 4/5**

#### External Environment

The front of the property is characterised by several steps leading to a small elevated seating area overlooking the main road. The front garden area is pleasant and has some seating but is not secure. The exterior fabric of the building appears to be in need of maintenance with the handrail on the steps to the front door being loose. The sill and parts of the front door needed replacing. The rear of the building has a functional yard area where residents could smoke, but this was open to a gated thoroughfare at the back of adjoining properties. Representatives noted a significant number of discarded cigarette butts in this area (which staff were in the process of removing).

**The external environment was scored as 3/5**

#### Internal Environment-First Impressions

Towneley House has high ceilings and architectural features that can be expected of the era. The entrance hall area was small and ornate with stained glass windows and floor tiling; seating was available on two chairs. Staff had some difficulty opening the locked front door but we were welcomed warmly and in a timely manner.

**Internal Environment-First Impressions scored as 5/5**

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### **Reception**

Representatives noted that a visitors' book was in use and observed that A4 notices in respect of Dignity in Care, the facility Complaints Procedure and Safeguarding information were displayed in a prominent position above it. Details of staff on duty were located on a noticeboard in another area of the home but these did not have staff photographs.

Unfortunately, the Healthwatch Lancashire poster was not on display as staff stated they were unaware of our visit. However, our files indicate that a poster and letter were posted on the 26<sup>th</sup> September 2016 and a follow up telephone call to a very helpful member of care staff team on the same date.

Representatives did not see any provision for antibacterial hand gel in the reception area.

**The reception area was scored as 3/5**

### **Corridors and bathrooms**

Taking the context of the age of the building into account corridor areas of the building were quite narrow and slightly uneven in places. Likewise, the facility seemed to lack storage space as items, such as, wheelchairs and delivery boxes were stored in some corridors. Similarly, representatives noted that a lack of electrical sockets had led to electrical leads trailing in one corridor.

The stairs were particularly difficult to negotiate due to the architecture of the interior with each consecutive flight of stairs requiring a separate chairlift. It was felt that residents who had mobility issues would be particularly compromised. Furthermore, representatives noted that the electrical wiring from one chairlift was taped together in an unsafe manner.

Flooring was generally safe and unworn and corridors well lit, with no discernible odour. The temperature in this area was appropriate.

There were sufficient public bathrooms throughout the facility for the number of residents but these were in need of updating and refurbishment. Representatives observed a radiator grille coming away from the bottom of the radiator and cracked tiles which represent a health hazard. Some toilet seats needed replacing as the surface was peeling away. Grouting at the bottom of toilet pedestals in particular needed attention.

In terms of adaptations, we observed handrails and raised toilet seats as necessary. However, provision was not colour coded and dementia friendly signage was not consistent.

Toilet areas were as clean as their condition allowed with sufficient soap toilet paper and hand towels in all but two of the WC's. Similarly, temperatures in bathrooms was observed to be adequate and call bells were noted in these.

**The corridors and bathroom areas were scored as 3/5**

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### **Lounges, Dining and other Public Areas**

Public areas were spacious light and airy with high ceilings and large stained glass windows. The facility had two adjoining lounges the first of which representatives noted a discernible odour.

Floor coverings in some areas were stained and the conservatory floor covering had a significant amount of hair on the carpet.

Both the lounge and dining areas had adequate seating for the number of residents and it was felt the provision of this was varied, homely and comfortable. However, seating was arranged around the perimeter of the room in a fashion which did not promote social interaction.

Representatives noted that dining areas were attractively set with tablecloths and had jugs of fruit juice, tea and coffee freely available.

The conservatory area afforded residents and visitors a quiet area to converse, but an area leading directly from this had been used for storage which looked unsightly.

Lounges and dining areas were observed as generally well lit and of an appropriate temperature.

**The lounges, dining and other public areas were scored as 3/5**

### **Observations of Resident and Staff Interactions**

Representatives observed that there appeared to be enough staff on duty during the period of our visit. No call bells were heard. One lady in the main lounge raised her hand to attract staff and was attended to immediately.

Staff were considerate, polite and knew residents by name, the interaction between staff and residents was noted as warm and positive. We witnessed care staff knocking respectfully at a resident's door before entering by unlocking a Yale lock. (However, it was unclear whether this resident had requested the door to be kept locked).

In terms of person centred provision, little personalisation was noted in public areas or on resident's doors. A staff rota advised of the names of staff on duty that day, but staff did not appear to wear individual name badges. However, care staff were clearly identified by uniform.

In discussion with Karen the owner it became clear that she was familiar with the residents and their preferences, particularly in relation to menu, and that the facility met these with a tailored weekly shop. Care staff told us that residents were consulted in advance of their preferences and were given two choices of main meal and desert.

We did not observe residents taking part in any activities however, Karen advised us that the facility owned a minibus which was used each Thursday for outings. Outings were recorded on an activity schedule which included karaoke, theatre trips, and baking. Staff told us that residents were sometimes accompanied to church on Sunday on an individual basis.

It was clear that the facility was flexible in response to individual residents' needs with one resident telling us that he preferred to sleep in a recliner chair on occasion as the stair lifts were too uncomfortable for him to negotiate (he is waiting for a ground floor room).

However, some significant discussions with a resident regarding accommodating his wishes were made within our earshot of staff and it was felt that these should have been conducted privately.

**Resident and staff interactions were scored as 4/5**

Overall the Enter and View Project Officers rated the environment and facilities as 3.7

### Additional Information

- The owner told us that a hairdresser visited the facility once a week
- Staff told us that a chiropodist visited once every six weeks
- The owner told us that an optician visited on request
- The owner told us that a nurse practitioner visits twice a week
- Staff told us that residents went to hospital on an accompanied basis
- The owner told us that the facility employs 3 cooks on a rota basis and that most food is home cooked
- The owner told us that the facility employs cleaning staff

### Environment

#### Summary of responses

- 3 respondents were happy with their rooms.
- All respondents felt they had privacy in their own rooms.
- 3 respondents thought the home was pleasant and clean. One said it was “Okay”.
- 3 respondents told us there was a quiet lounge available for them to use.
- All but one respondent told us there was no garden area to sit out, one respondent said they couldn’t answer as they were not in residence during the summer.

#### Quotes from residents:

“Very happy. I have a special room with a view.”

“Sometimes the toilets are filthy.”

“There is not a garden but there is a bit of land at the back. We don’t go out at the front because sometimes people escape.”

“My bedroom is very nice.”

“If it’s a nice day we go out and sit in the front garden and have the umbrella up.”

“I lock the door to my room.”

‘Sometimes it’s cold in the house.’

“We haven’t been in the garden so far. The door is always locked for safety.”



### Care

#### Summary of responses

- All respondents felt they are treated with dignity and respect
- All respondents said they could talk to a member of staff if they had any concerns
- All respondents told us they felt safe
- One respondent told us that call bells and requests for help were answered in a timely manner
- Two respondents had never asked for assistance with a call bell. One respondents said they “Just shout”
- All respondents told us they have a choice about when they get up and go to bed.

#### Quotes from residents:

“Staff answer call bells quickly.”

“I can lie in if I want to.”

“I ask for them to get me up at 7am.”

“I am up early. I dress myself but someone helps me come down the stairs.”

“The staff look after you like a real person not just a job to do.”

“They don’t always take notice.”

“They are pretty good, they look after me and they talk to me.”

## **Food Nutrition**

### **Summary of responses**

- Two respondents were happy with the food; one respondent was not. One was unsure.
- Three respondents told us they had a choice of menu. One was unsure.
- All respondents said they always had drinks available to them.
- Two respondents told us they could choose where they ate their meals – in the dining room or in their own rooms. Two respondents said they had to eat in the dining room

### **Quotes from residents:**

“They come around with a trolley.”

“I always like spaghetti out of a tin.”

“The food is alright.”

“The food is not always hot.”

“I get enough to eat.”

“We get tea coffee or water.”

“I like eating in the dining room.”

“There are two choices of menu.”

“It’s quite good. I like the breakfast and the other food is nice.”

### Activities

#### Summary of responses

- All respondents found the staff helpful and friendly.
- Two respondents told us they had the opportunity to socialise with other residents. Two respondents said they had not wanted or tried to socialise with other residents.
- Three of the four respondents said there were activities and/or outings available for them to take part in.
- Two-respondents told us that they were supported to pursue their own interests. Two did not feel supported to pursue their own interests.

#### Quotes from residents:

“The staff are helpful and friendly.”

“Some staff are really good. I will miss them.”

“We go out on the bus. Not every day, and not always every week, but we do go out.”

“I like to listen to music but I don’t because I haven’t been asked.”

“You have your likes and dislikes. You get to like one member of staff and then they leave.”

“It depends what you want to do, if they are available.”

“They are taking us out this afternoon.”

### Relatives and Friends Views

#### Summary of responses

2 visitors spoke to a representative but did not complete the ‘Friends and Family’ questionnaire.

#### Quotes from relatives and friends:

‘He has two choices of menu at lunch, hot and cold.’

“Staff are very patient with him and others.”

“He likes a smoke so staff take him outside in the back yard.”

“The staff have been great.”

“He doesn’t always go to bed.”

“It’s okay... the carpet in the lounge could do with a shampoo.”

### Staff Views

We had an opportunity to speak to 1 member of care staff about their experience of working at Towneley House

#### Summary of responses

- The staff member said there were enough staff when on duty and shortfalls were covered by agency.
- The staff member felt supported to carry out person centred care.
- The staff member thought they had enough training to enable them to carry out their duties well.
- The staff member reported being happy working at Towneley House.
- The staff member would be happy to recommend this home to a close relative.

#### Quotes from staff:

"I feel I have adequate training I did moving and handling a few months ago."

"The home is good, but to be brilliant we need more things for residents to do."

"If we are short of staff we phone around to get agency staff."

### Response from provider

Karen Shillito  
Towneley House Residential Home  
143- 145 Todmorden RD  
Burnley Lancs  
BB11 3HA

Dear Michelle as requested our response to your findings from your visit on the 6<sup>th</sup> October 2016

- . Dedicated web site – we do have our own web site you can find this [www.towneleyhouse.com](http://www.towneleyhouse.com)
- . Parking spots at the front- There is parking spaces out the front but we have applied to Lancashire county council for private parking spaces but we were declined.
- . External area of the building- Yes the front door sill and other parts need replacing this was due to resident previously smashing the glass and trying to vacate the building we are in process of fixing these issues. Back entrance is secure as the gates on the end of the back street are locked and all senior members of staff have a key to this if required in an emergency situation. The cigarettes butts what was noticed is down to our residents that smoke, we have a resident who smoke quite heavily which is documented when he goes in and out the building which is under safe-guarding recommendations. Staff sweep and clean these on a daily basis throughout the day.
- . Regarding the visit- Apologies regarding us being unaware of the visit there was a telephone conversation on the 26<sup>th</sup> of September and the member of staff missed passing this communication on and apologises for not documenting into our diary but we did not receive the poster.
- . Anti-bacterial hand gel – We do not have this placed in reception area as we are not a nursing home and we have people with dementia who would drink it. All our chemicals are locked in a secure cupboard for health and safety reasons, we do have anti-bacterial gel in other areas such as the treatment room, individual's bedrooms and in communal toilets which are in secure dispences.
- Trailing lead – this was down to that the domestic was on duty and was vacuuming all communal areas on your visit, the lead was from the vacuum.
- Corridors and bathrooms – All corridors and bathrooms have handrails and the on call system is placed in all communal toilets, bedrooms and bathrooms.
- . Conservatory area - This area is provided for one of our residents who has learning difficulties. She likes to have an area where it is quite and likes to colour. One of our residents does have a mobility scooter which is stored in this area on charge.
- . Name Badgers on staff- This has been trialled in the past and was not suitable has our residents with dementia. We found that they tended to grab the badges when tasks were being carried out. We are in process of changing our uniforms and we will be having staff names and positions embroidered on to their tunics and also we are going to put back in place our photos of staff members in the reception area.
- . food and nutrition – Quote likes spaghetti from a tin, we are aware of which resident has said this as she has spaghetti on toast for breakfast.
- Quote food was not being hot – This was brought up in cooks meeting on the 25/10/16 and was stated if any reason food is standing then to place the food covers which we have this will keep food hot. The food covers are metal and will not allow heat to escape.
- Quote from relatives the carpet in lounge could do with a shampoo. We cannot shampoo the carpets through the day for health and safety reasons, this is done on the night shift every other night and if required. This is documented into ABC task book which we have in place this shows staff on duty their roles for their shift.
- Quote from resident that the toilet is sometimes dirty, I feel like I can identify this comment resident had entered the toilet which had been soiled by another resident. The resident complained to staff and the resident was asked to use the other toilet and the toilet was cleaned immediately by staff, we have

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a toilet cleaning rota system in place and checked hourly and cleaned if required and signed by the member of staff.

Staff reviews – Agency staff have had to be used in the past as our staff have rang in sick at the last minute and not within contracted 6hrs, we have had recommendation from safe-guarding that we can report staff to the DBS agency as they are letting vulnerable adults down.

We have plenty of drinks on offer Tea, Coffee, Juice, hot chocolate, Horlicks we also do have alcohol beverages if a resident requires. One of our resident has one can of carling a night.

Residents bedroom door do have locks on this was a recommendation from CQC for fire safety and to protect individuals personal belonging. For residents who are able to go to their own room without assistance have their own keys to their room and each individual staff member also have a key for access with the permission of the residents to enter their room.

When staff carry out laundry duties then white disposable aprons and gloves are worn. And at meal times Blue plastic aprons are worn.

Thank you for the report many regards

Maureen Naughton  
Manager

[www.healthwatchlancashire.co.uk](http://www.healthwatchlancashire.co.uk)

[info@healthwatchlancashire.co.uk](mailto:info@healthwatchlancashire.co.uk)

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