

# Walton Manor



Enter and View Report, April 2024

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# Introduction

## What is an Enter and View visit?

Healthwatch Liverpool has powers to carry out what we describe as 'Enter and View' visits. These are visits to health and social care settings which help us in our role as the independent local champion for health and social care. Enter and View visits are carried out by small teams of trained members of our staff and volunteers to observe a health and social care service at work, for example at a GP practice, a care home, or a hospital. We only visit services that are publicly funded, e.g. through the NHS or via local authorities.

## What happens during an Enter and View visit?

During an Enter and View visit we talk to people using the service, whether patients or residents, and to friends and relatives where appropriate. We also speak to staff to find out where they think the service is working well, and where it could be improved. We also observe the service. We write up our observations and the feedback we receive and publish it as a report. Our report is sent to the provider of the service, as well as to regulators such as the Care Quality Commission (CQC), the local authority, and NHS commissioners when appropriate.

If there are recommendations in the report, the service provider is asked for a response, which we later publish online alongside the Enter and View report.

## Details of the Enter and View Visit:

Name of the service visited: Walton Manor Residential and Nursing Home

**Address:** 23 Luton Grove, Liverpool, Merseyside, L4 4LG

**Website address of Walton Manor:** <https://www.qualiacare.co.uk/our-homes/walton-manor/>

## The Time and Date of the Enter and View Visit:

Monday the 8<sup>th</sup> of April between 2pm and 4pm.

The names of the members of the Healthwatch Enter and View Team that undertook the visit were:

- Inez Bootsgezel, Engagement and Project Officer
- Terry Ferguson, Engagement and Project Officer

This was an announced visit.

We would like to thank Walton Manor staff and residents for facilitating the visit and for taking the time to talk to us.

## Why did we carry out this visit?

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Enter and view visits can take place for a variety of reasons, for example to find out more about a particular service, or in response to public feedback.

The Enter and View visit to Walton Manor was to learn more about the service, and to find out from observations and speaking with people where the service appeared to be doing especially well, in addition to finding out if any improvements could be made. The visit was not in response to any prior feedback or concerns identified relating to the quality of this service.

## **Safeguarding**

Healthwatch Liverpool Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch safeguarding policies, and the Local Authority will be notified on the same day as the Enter and View visit.

There were no safeguarding concerns identified during this visit.

# **About the Service**

## **Background**

Walton Manor Residential and Nursing home is in a purpose built two storey building situated in Liverpool. The service supports older people, some of whom are living with dementia and people with nursing needs, we were advised the service can accommodate up to 45 people. At the time of the inspection, there were 41 people living at the home. The service is owned by Qualia Care Limited. Some residents are self-funding and there is a top up fee of £56 per week. The manager has waived this previously in special circumstances.

## **Discussion with the assistant manager**

When we arrived at Walton Manor we were greeted by staff and were asked to sign into the care homes visitors' book. We met with the deputy manager for the home, Leanne Abbott.

## **Staffing**

Leanne advised that staffing levels for Walton manor are "not too bad", and they have multiple staff members who have worked there for many years. Leanne has worked at Walton Manor for 15 years; they have a chef that has worked there for over 20 years and some Healthcare Assistants (HCAs) with over a decade of experience. Leanne describes the atmosphere amongst staff as "like a family" with agency staff mainly used for nursing cover with the manager able to stand in if needed.

## **Relationships with GP/Pharmacy/Dentists**

Leanne advised Walton Manor has been using the General Practice Great Homer Street for 22 years, and they have a good relationship with high praise for Dr Abraham. Walton Manor currently has no residents remaining with their previous

GPs. Some residents had tried previously but had been advised they were out of their previous GP practice's catchment area.

Residents are registered at Hale Road Dental Practice for dental treatment and residents who can access services on site attend there. Staff advised Hale Road have a hoist and it is accessible for residents with mobility difficulties. Community dentists also attend Walton Manor from Deysbrook and staff advise that the service is "really good" and they help with dentures and assessing residents on site as best they can.

Walton Manor has a relatively new pharmacy provider, McKeevers and things seem to be working well "so far so good, we are building up a relationship".

### **Working relationships with hospitals and trusts**

Leanne discussed a recent incident where a resident was discharged from the Royal Liverpool University Hospital without anticipatory drugs and who had deteriorated to the point of reduced capacity. The resident was readmitted back to the hospital within two days of discharge. It was later discovered the resident had been diagnosed with cancer upon the first admission, but this was not communicated to the home upon discharge.

Leanne advises that staff have had difficulties with the Telemed service. She says it can be difficult to reach help due to reoccurring technical difficulties which often require support. They advised that a team lead failed to get through to the Telemed service on the day of our visit due to technical problems. Leanne advises that other care homes have reported similar difficulties during meetings at the Cunard building. She also advises some medical staff insist on speaking to residents in unrealistic situations (when a resident is unable to remain in one place). She feels sometimes their expertise and knowledge of the resident is not taken into consideration. There have been positives with the Telemed services particularly in dealing with falls. Staff report they can't rely on the Telemed services, and it can feel like a barrier to accessing support.

### **Visitation and Activities**

Walton Manor has an open visiting policy except for protected mealtimes as some residents are not comfortable with visitors when eating. Residents can have meals in their rooms with visiting relatives if they prefer. There is an external smoking area available for residents to use.

Walton Manor employs a full-time activities coordinator who has been in post for 16 years. They have weekly and monthly activity plans for residents and this is displayed in the lounge. It includes activities such as bingo, movie nights, cooking, card games, painting, chair-based exercises, watching horse racing and dress-the-doll days. There are external activities such as trips out for those who can take part. Walton Manor currently does not have a minibus as the lease expired last year.

The activities coordinator advised some residents refuse activities but has found most will join in activities that involve either making food or music. Activities are discussed in resident feedback meetings, but the activities coordinator advised they are not well attended. Some individuals are bed bound and unable to

communicate so activities can include sitting and talking to the resident whilst holding hands and reading to them.

The Activities coordinator has worked at Walton Manor for 16 years and says "I love it here. She keeps a 'life story book' for each resident which includes their life story, religion, what they like to be called, their interests and previous jobs and other information. She described how she reaches the residents, "everyone seems to react positively to either music or food. In a 1-1 setting it works really well".

## **Meals and food**

Leanne advised that Walton Manor has a chef who has worked there for 24 years. The menu was recently changed and each resident's individual's dietary requirements are catered for including 2 residents who eat halal food. Only 7 residents can have a standard unrestricted diet due to the amount of advanced health conditions making it a challenging role. There is a diet notification plan for every resident kept in the kitchen.

## **Residents**

Leanne advised that when a resident is admitted to Walton Manor, they prepare a 'social profile' with the person and family. This social profile includes previous jobs, where they grew up, any religion and a specific care plan. This is accessible to all staff including agency staff to help build relationships with residents. The activities coordinator also regularly updates this as wishes/needs can change over time.

Leanne advised that to assist with communication they create a 'communication chart' for each resident, and this is available for all staff. They advise there are several non-verbal residents but knowing them as a person helps them understand when they are unsettled. Leanne advised that communication aids tend to fail when used with residents with dementia and more suited to residents who have had strokes.

Residents' clothes are marked with room numbers to prevent loss. Sometimes families give clothes directly to residents without informing staff which can increase the likelihood of loss with slippers being the easiest to lose. There is a history of residents losing dentures, staff think residents are wrapping dentures in tissue paper and they are then thrown out accidentally.



# Observations

Upon arrival at Walton Manor, we were met by Leanne Abbott the deputy manager and after signing in and confirming our identity we were taken into the office to talk.

## Observations on arrival

The exterior of Walton Manor looked in good condition and was tidy with a well-maintained car park. The front door was securely locked and there was a sign-in book in place for visitors.

## Observations of the building and facilities

### General areas

The hallways we saw were bright and free from obstructions. They were pleasantly decorated with noticeboards and large named pictures of staff. Notice boards included upcoming activities, CQC information and information on dignity in care. The upstairs area was very warm with external fans in the hallway running to keep it cool for residents. The stairs are securely code locked. There was no loose or distressed carpet and stair treads were well marked. There were bannisters on both sides of the staircase.

There is a 'you say we did board' detailing requests and the care homes response. Requests were for the gardens to be more secure and colourful, for more outings and for more bingo. The care home detailed their responses including information from trips to Crosby beach, safari park visits, museum visits and shopping trips. During our visit the garden looked very inviting and was being maintained at the time. It is a large garden with multiple outdoor seats, coloured benches, well-kept grass, and a large central flowering tree.

### Downstairs and upstairs lounges

The downstairs lounge is a large with comfortable looking chairs arranged to create an open space with sunlight coming in from the large windows overlooking the garden. There are multiple pictures on the walls including a selection of local figures. There is a large TV, radio, books, multiple plants and a piano. There were objects for residents to interact with such as a replica old fashioned telephone, dolls and stuffed toys. During our time in the downstairs lounge the activities coordinator was taking part in chair-based exercise with residents.

The upstairs lounge had a large TV on the wall and comfortable looking chairs. There were pictures on the wall and the room was bright and well-lit with natural light from the windows. The resident watching tv became distressed by our presence, so we left the room.

## **Dining room and kitchen**

The dining room resembled a café and was a pleasing environment. There were menus on each table with a flower and salt and pepper shakers. There was also a kitchen dresser and multiple pictures on the wall. A staff member advised the dining room is not used as often as they would like due to the physical limitations of residents. The Chef was preparing food and we saw through the hatch he was wearing gloves to do so.

## **Observations of residents and staff**

All the residents at Walton Manor looked appropriately dressed, clean and well cared for. There was a resident who had a small piece of food on his jumper that was noticed by staff who cleaned him whilst continuing their conversation. During our visit staff used residents' names and knew a lot about their likes, relatives and history.

We saw a resident's family member speak to the deputy manager to pass on money for recent visits to the onsite hairdresser. The family member appeared comfortable and familiar with staff and had a friendly discussion. Staff showed knowledge of both the resident and the family member. Another resident came in and spoke to the deputy manager about access to their money. This conversation was skilfully managed by the deputy manager who gently reminded the resident that their money was now kept in a safe and can be accessed anytime. The resident was happy with the conversation and told us he had a bad habit of leaving money in his trousers and around the care home. The resident praised the deputy manager "She's my favourite lady, I trust Leanne, I would be knackered without her".

We witnessed one interaction between a member of staff and resident we feel could have been better. There was a resident who appeared slightly confused and was asking us for help in accessing money from her bank. During our conversation she advised she was unable to get around as much. The resident mentioned they were uncomfortable sitting on a hoist positioned behind them. A staff member explained to us in a hushed manner the hoist remains in situ to help the resident mobilise for toilet needs. The staff member then stood behind the residents and adjusted the seat but without explaining she was doing. This caused the resident to shrink back in the chair a little. This was an isolated example of poorer communication between staff and residents, and we did not witness anything similar. Staff talking through actions and considering their body language/positioning communicating with vulnerable residents would have helped this interaction. It was noted the staff member was familiar with the resident's history and hobbies and expressed fondness of the resident.



# Feedback from residents, relatives, and staff.

Healthwatch spoke with 6 residents/relatives and multiple members of staff.

## Quotes from residents.



“I like having company and the staff. I can always speak to the staff”.



“I’m really settled, and it was my choice to move here. Staff are very good; they are caring and do everything for us. I like the hairdresser and chiropodist”.

“I can’t get used to it; I’ve been here a few months”.

“It’s excellent I would say.”

“Other people need someone to talk to and we talk to them, it’s a happy environment.”



**“The passion and commitment of staff is 2<sup>nd</sup> to none, from the cleaners to the manager and top to bottom, it’s a wonderful place”.**

*Feedback: From 2 siblings who visit their sister multiple times per week:*

“Really caring and wonderful staff, I would recommend it 110% here.

Another sister lives out of area and on days that we can’t come she will phone in, and all the staff will know how our sister is doing. You feel like you are part of the family. She had been in hospital a long time before coming here but she settled in really quickly.

They let you know when things happen or go wrong, they know what is going on. There is a residents’ meeting 4x per year, the families can come to that too, and any problems can be aired there. And you can go in to speak to the manager any time, ask questions.

The hygiene of the residents and the home (is excellent), they’re always cleaning, the gardens are mowed, there are no lingering smells, and they take safety precautions.

Toni (the manager) has high standards, has come up from the grassroots so knows. “



# Summary and recommendations

## Summary

At Walton Manor of the small number of residents we spoke to the majority had many positive things to say. Walton Manor appeared clean and well maintained with decorations making it feel homely. The outdoor areas and dining room area were particularly inviting. The security measures and CCTV on site helped the home feel safe and secure. The few residents we spoke to seemed happy with both the food and activities on offer. The long employment of key staff including the deputy manager, chef and activities coordinator seems to be creating a safe, caring, and fun environment for residents.

We would encourage Walton Manor to continue with maintaining these good relationships and to be aware of what makes for positive interactions. This is especially important interacting with residents who may not have the capacity to understand a conversation and rely on non-verbal communication cues.

Overall, we observed that Walton Manor seems a warm, inviting, and well-run care home with long serving staff that care deeply about their residents.

## Recommendations

We make the following recommendations for Walton Manor

- Maintain awareness of good communication with vulnerable people and the importance of non-verbal communication as part of this. The dementia society has information on the importance of this at <https://www.alzheimers.org.uk/about-dementia/symptoms-and-diagnosis/symptoms/non-verbal-communication-and-dementia>

# Appendix

## Healthwatch Liverpool – Powers to Enter and View Services

Healthwatch Liverpool was established under the Health and Social Care Act 2012 and came into being in April 2013. We work to give local residents a stronger voice to influence and challenge how health and social care services are provided.

We enable people to share their views and concerns about local health and social care services, helping build a picture of where services are doing well, and where they can be improved. Enter and View visits are undertaken in accordance with the remit of Healthwatch Liverpool, and assist us in carrying out our statutory functions under the Health and Social Care Act 2012.

Enter and View visits are not designed to be full inspections, audits or an investigation of the service, rather they are an opportunity for us to get a better understanding of the service by seeing it in action and by talking to staff and service users.

We aim to identify and share good practice wherever possible. However, if during a visit we identify any aspects of a service that it has serious concerns about, then these concerns are referred to the appropriate regulator or commissioners of the service for investigation or rectification.

Any safeguarding issues identified will be referred to the Local Authority for investigation. Addressing issues of a less serious nature may be done directly with the service provider.

For more information about Healthwatch Liverpool, please visit our website [www.healthwatchliverpool.co.uk](http://www.healthwatchliverpool.co.uk) or contact us using the details at the end of this report.



**healthwatch**

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