



healthwatch

Blackburn with Darwen

Magdalene House

Enter and View report.

Tuesday 5th July 2022



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.

Contact Details:

Magdalene House
10/14 Shear Bank Rd
Blackburn
BB1 8AP

Staff met during our visit:

Philippa Bailey (Manager)

Date and time of our visit:

Tuesday 5th July 2022 at 10:30am

Healthwatch Blackburn with Darwen
Representatives

Michele Chapman (Lead)
Michelle Livesey (Volunteer)
Jenny Hayes (Healthwatch staff)
Gervaise McCaughran (Healthwatch staff)



Introduction

This was an announced Enter and View visit undertaken by authorised representatives from Healthwatch Blackburn with Darwen 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. The representatives observe and speak to residents in communal areas only.

This visit was arranged as part of Healthwatch Blackburn with Darwen's Enter and View programme. 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, residents' families or friends.

A 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 Blackburn with Darwen website at www.healthwatchblackburnwithdarwen.co.uk

Acknowledgements

Healthwatch Blackburn with Darwen would like to thank Philippa Bailey together with staff, residents, and visitors, for making us feel welcome and taking part in the visit.

General Information

Magdalene House is privately owned by Mr Alastair Barrett and Mrs Philippa Bailey with places for 52 residents. There were 15 vacancies at the time of our visit. The persons in charge are Mr Alastair Barrett and Mrs Philippa Bailey

Information obtained from carehome.co.uk states that the home provides care and nursing for people who are affected by old age and physical disability.

Methodology

The Enter and View representatives made an announced visit on Tuesday 5th July 2022 at 10:30am.

We spoke to 11 residents and 5 staff members, where possible within the constraints of the home routine, people's willingness, and ability to engage and access to people in public areas. Discussion was structured around four themes (Environment, Care, Nutrition and Activities) designed to gather information concerning residents overall experience of living at the home.

The team also recorded their own observations of the environment and facilities.

Our role at Healthwatch Blackburn with Darwen is to gather the views of service users, especially those that are hard to reach and seldom heard, to give them the opportunity to express how they feel about a service regardless of their perceived ability to be able to do so. It is not our role to censor feedback from respondents.

We use templates to assess the environment of a facility and gather information from respondents, to ensure that reports are compiled in a fair and comparative manner.

Observations were rated on Red, Amber, Green scale as follows:

Green = Based on our observations and the responses gathered we would consider the experience of this home to be good.

Amber = Based on our observations and the responses gathered we consider the experience of this home to be need of some improvements.

Red = Based on our observations and the responses gathered we would consider the experience of this home to be in need of significant improvement.

Summary:

Magdalene House presented as a very agreeable place to live, work and visit. From the first impressions of the lovely gardens to the homely internal environment and the care and support of the solicitous and capable staff.

Underscoring this was a sense of clear leadership, structure and process, which seemed to engender a confidence in daily routine from both staff and residents.

Feedback from both groups was very positive, staff reported management as flexible and supportive *“Shifts can be flexible for childcare etc.”* Some of the staff were long serving and told us, *“I have worked at the home many years and I am very happy here.”*

Indeed, this is reflected in the commitment from the provider whose mother and father, Mr. & Mrs. Barrett, started the business in the 1980s, and since when the home has continued to grow as a family business.

Residents were appreciative of the many regular activities on offer and enjoyed the company of those that made activities *“fun.”* Food was similarly appreciated with residents sensitively supported and encouraged to eat. One response being *“It’s too good. We put weight on.”*

Likewise, residents reported feeling safe and cared for and trusting of the staff *“I feel safe, and I can talk to the staff if I have to.”* Representatives observed that residents were encouraged to maintain independence with an open-door policy and links with family maintained.

One resident concluding *“the only limitation I have is that of my own physical disabilities. Staff do everything they can to support me.”*

Based on the criteria, the Enter and View Representatives gave the home an overall score of:

Green

Enter and View observations

Pre-visit and location

Prior to our visit we sent a letter and poster to the home. The date of the visit was changed by Healthwatch Blackburn with Darwen, and the manager was very flexible accommodating the change, and amending the date on the poster.

Representatives also looked at the website for the home and found it to be clear and self-explanatory with good representative images however, we could not access the images on the “social activities” tab.

The home is situated in a leafy conservation area of similar properties with amenities and public transport nearby on the main A666. Blackburn town centre is a short drive away.

Public transport is available from the A666 however, some pedestrians may find the incline of Shear Bank Rd difficult to navigate.

The home was easy to locate and well signposted from Shear Bank Rd. The sweeping driveway led to a clearly definable and extensive parking area. We did not recall a dedicated disabled parking area. However, we noted the provision of disabled ramp facilities to the building.

Green

The external environment

The external environment and approach to the home was very impressive. The building which had originally been three Victorian houses has successfully been consolidated into one facility and appeared well maintained. Set back from the road the home is surrounded by similarly well-maintained gardens surrounding the building.

We noted how welcoming the home appeared with bunting to the front and mature planting framing the doorway. We also observed bench seating to the front overlooking the gardens.

The manager told us later that she made full use of the gardens and we observed a gazebo, garden seating, and a visitor pod to the rear. Similarly, that the garden was often used for outdoor activity including gardening, and that as she employed an “open door” policy, the garden was available to residents all day. The manager told us that the garden had been invaluable during Covid isolation, and we could see from the Union Jack flag that the area had been utilised during the recent Jubilee celebrations. One resident remarking later *“I feel very privileged to be here, the gardens are magnificent”*,

We initially approached the front door and were redirected to the rear entrance which we observed to be secure.

The manager met us promptly in the reception area.

Green

The internal environment/reception -first impressions

We were greeted by the manager who was very generous with her time ensuring full PPE protocols were met, and later guiding us around the home.

Representatives produced lateral flow tests (taken that day) donned fresh face masks, and gelled hands thoroughly as requested. We also had our temperatures recorded and signed into the visitors book as directed.

The reception area is adjacent a small conservatory with chairs and a coffee table which made the environment welcoming and homely. Representatives were immediately drawn to a window display of residents' craft work celebrating the Jubilee and the atmosphere was light and bright.

Representatives observed that key staff were easily identifiable and that a poster distinguishing the different coloured uniforms and their role within the organisation was displayed on an internal corridor.

There was no discernible odour and the first impressions were of a clean, well maintained interior, and an efficiently managed organisation. The manager was similarly welcoming offering us drinks and engaging in an introductory conversation which was both enjoyable and informative.

Green

The observation of corridors public toilets and bathrooms

Corridors were clean and clutter free with neutral colour décor and mid tone carpets. Hand gel was accessible on all the corridors, and we observed handrails to these areas, but these were not colour contrasting. The manager pointed out that much of the wall décor had been contributed by residents in the form of artwork, needle craft and poems.

Lighting was ambient and supplemented by homely "punctuation points" of chairs, hall tables, table lamps, and fresh flowers. Doors were of a similar colour to the walls and were clearly identifiable. Residents doors were identified by a room number and name whilst some residents had personalised their doors with artwork from the activity sessions.

Several ground floor corridors met at a juncture the manager termed "the hub." This was at a prominent position which gave an overview of the downstairs public rooms. Representatives also observed a stair lift, and a small lift were available to access upper floors.

The main noticeboard was situated here, and we observed the Healthwatch Enter and View poster displayed as requested. The hub displayed a wealth of information including a record of staff on duty that day a weekly activity schedule and an

illustrated poster inviting residents to a monthly in-house tea party on Friday afternoons.

Given that many of the bedrooms are en-suite, representatives considered that there were an appropriate number of public bathrooms to service the number of residents. All of the bathrooms observed were clean fully stocked and clearly marked on doors. Adapted bathing facilities were also observed, but not colour coded.

Indeed, although the public areas had very little in the way of dementia friendly signage or colour coded adaptations this must be seen in the context that home is not a dementia specific facility.

Many of the corridors displayed evidence of the providers commitment to activity sessions. The home has a dedicated activity coordinator each weekday afternoon and one resident told us he “loved” the activities offered and enjoyed the social interaction. There were similar positive comments about the fitness instructor James (who attends each Friday). Residents were equally enthusiastic about the recent Jubilee party. *“We had tables, decorated with Union Jacks and centre pieces. We had chocolates and shortbread and there was a special buffet with trifle and strawberries and cream. There was an organised quiz and organised singing.”*

Representatives observed that a hairdresser was in attendance that day and that board games, film nights and days out were available. Religious ministers also attended the home.

Green

The lounges, dining area and other public areas

Magdalene House is a large Victorian building which allows the use of a variety of lounges and dining rooms. These were similarly decorated and complemented by high ceilings decorative mouldings and traditional fireplaces. There were three dining areas in use at the time of our visit and several of the lounges. The manager told us that residents could have a preference to where they chose to eat but staff liked to put residents together who had similar needs and preferences. One resident confiding *“We are very lucky, there are different rooms to sit in”*

Seating to the lounge areas looked comfortable and the TVs unobtrusive. We observed homely touches like newspapers and fresh flowers with soft music playing in the background. A representative had the opportunity to speak to two residents who had formed a bond and liked to sit together in a particular lounge. One of the residents (who was visually impaired) explained she preferred to be in this lounge with her friend who would describe verbally what she could see on the TV for example whilst watching Wimbledon. She could then ask her friend to describe the players and *“whether they were good looking”*.

Three dining areas were in use during our visit each accommodating small round tables with four chairs, representatives felt this replicated a domestic environment and avoided a “canteen” feel. Representatives observed that both a daily menu and a cyclical weekly menu were on display on the walls. The daily menu featured butchers mince and dumplings with seasonal vegetables and boiled potatoes followed by home baked ginger sponge and white sauce. The evening meal was baked kippers or soup and assorted sandwiches with jelly and ice cream to follow.

The weekly menu indicated such choices as fish and chips, roast pork, chicken, ham and leek pie and lamb steaks. Desserts included rhubarb and custard, jam roly poly and peaches and almond sauce. The manager told us that meals were all home cooked and that alternative choices were available if required. A resident reflecting *“the meals are tasty. I haven’t disliked anything that I have been served”*.

In addition to the small conservatory at the rear entrance, there was a larger conservatory which overlooked the rear and side gardens. We saw that the door was propped open here, indicating that residents were able to have convenient access to the garden. This conservatory was much larger and furnished with cane style armchair seating and side tables. Representatives noted that this space was used for activities as well as relaxation, evidenced by a piano and a music player.

Green

Observations of resident and staff interactions

Magdalene House is a family-owned facility, founded by the current providers mother and father, Mr and Mrs Barrett. The family had formerly lived at the home and had added to the property over the years. There seemed to be a very congenial environment with residents taking the opportunity to pursue interests and form friendships. When the family dog came in (Poppy), we observed that residents were happy to stroke and interact with her. It was good to see the joy Poppy was bringing to the residents, she was very gentle and well behaved and evidently knew her way round.

All of the residents whom we saw looked well dressed and happy, they were confident to engage with representatives and seemed to enjoy us chatting to them. We observed a continuity of care from the top down and residents being confident and trustful of that care. One resident reported *“Everyone here is helpful, for example just before, she (*Phillipa the manager) was just walking past me on the stairs doing something and she stopped, asked if I was okay and helped me down”*

Whilst in conversation with another resident representatives noticed it was nearly lunchtime. The representative suggested the resident used the call bell so as not to miss lunch. She confidently said, *“oh no I don’t need to ring the bell they will come for me”*. Minutes later the staff duly arrived.

Representatives observed the nurse to be equally respectful in delivering care. This was done in the least restrictive way and there was a good rapport between the nurse and the residents. Residents reporting *“If we bang our leg or hurt ourselves, the nurse will help to dress it or look after it. They have a good number of care staff on duty, and they know about my disability and the care I need.”*

Some of the current residents had prior knowledge of the home having visited in a different capacity and one long standing staff member had been able to move her dad there.

Another resident explained that she had chosen to live at Magdalene House following a period of time in hospital. She had previously lived in supported living accommodation, but she needed more support after becoming unwell and decided that she would like to be cared for at Magdalene House. Yet another resident told us that she had experience of the care of her father in residential care before he passed away and that, *“the care here is better, staff are good and look after me. They think of everything.”*

We did not hear any call bells during our visit to Magdalene House.

Green

The Lunchtime Experience

On this occasion, representatives chose to focus on the experience of residents during the lunchtime. We evaluated the lunchtime as a social experience, the quantity and quality of the food, the interaction between staff and residents, and the dignity afforded residents during this period.

Representatives endeavour not to hinder the daily running of the home and are mindful of the dignity of residents. Therefore, observations were conducted by two representatives who were each present in two of the dining areas in use on the day.

The majority of residents ate in the dining areas with others preferring to eat in their bedrooms or lounge area. In one dining area there were nine residents whilst in another area there were five residents. One resident ate in the lounge area.

The dining areas were spacious, light and pleasant with room to accommodate both wheelchairs and other walking aids. Table settings were made similarly attractive with tablecloths, crockery, and napkins. We also noted that standard cutlery and some adapted aids (cups) were available. Cold drink refills were offered at the table as were condiments. However, we did not see tea or coffee served or requested during the meal.

It was a nice day and representatives noticed that the door to the garden had been left open for fresh air (however, staff checked that this was not draughty for residents.)

Representatives observed that staff were equally attentive to residents asking if they needed the toilet prior to lunch and ensuring that all residents were offered hand wipes. Staff were observed to be wearing appropriate PPE. They appeared well organised and worked as a team. (However, we did overhear a conversation between two staff inappropriately referring to lunchtime as “*feeding time.*”)

We noted that whilst the residents were being supported to walk/move to the dining room the manager went to assist a resident in lounge one. A resident was coughing and struggling to catch her breath. The manager went immediately to assist, cleaning up the resident with her napkin guard. She reassured the resident and helped to maintain her dignity. The care was given with empathy, and it was prompt.

Lunchtime began at 12 noon and once residents were seated in their preferred place the plated lunch was delivered directly from the serving hatch in the kitchen. The food appeared to be at a good temperature and looked very appetising. Indeed, we observed one resident asking for “seconds.”

Staff interacted well with residents throughout the lunch period, residents exchanged pleasantries with the kitchen staff and each other and we heard staff explaining what was on the menu. Despite this, representatives felt that a table-based menu would have been helpful for those residents who may not be able to read the notice board menus.

One resident asked for a larger plate and two residents asked for smaller plates, yet another resident requested more gravy. Requests were happily accommodated and all the residents we observed ate well. During this time, we noted that medicines were administered in a discreet manner.

Support for residents who required assistance with eating was offered on a one-to-one basis. A staff member delivering this support was noted to be extremely courteous and caring, engaging in constant reassurance and asking which part of the meal the resident would like to eat. The same staff member asked the resident “*are you ok*” encouraging her to eat and enquiring “*do you want to stop for a drink.*”

One resident who required support did not eat until much later than the others, but this may have been because she was dozing, and staff eventually woke her up to eat. Likewise, the resident in the lounge area was also asleep and woken later, the carer who supported her was very patient and encouraged her to eat.

Dessert of home baked ginger sponge and white sauce was served after lunch, and this proved very popular. (We were told later that one resident had several helpings of pudding.)

Staff continued to engage with residents as they left the dining areas asking them if they needed the toilet. General conversation ensued with staff asking residents if they would be doing the afternoon activity and where they preferred to sit.

Additional information

- Representatives had the opportunity to chat with the manager prior to our leaving and she showed us a system that had been introduced during Covid “KOMP”. (Komp has a flat screen tv appearance and works from the caller’s phone so that relatives and friends can talk face to face with residents. The system is portable and can be used in the residents own room for privacy.)
- The manager told us that the home had been able to make good use of supportive technology generally using YouTube, iPad and Dot.
- A dedicated activity coordinator worked very effectively with the manager to provide a wide-ranging schedule of regular daily activity.
- The manager reported similar collaborative working with outside professionals having been able to engage a qualified dentist to visit the home on a regular basis and enjoying a positive relationship with the local GP service.

Feedback from residents

Feedback from residents who responded was very positive, engaging with Healthwatch staff and telling us about their lives. One resident talked about the “old days” when they were encouraged to eat everything. Yet another resident talked about his life as an engineer and how he and his wife had owned sail boats. Residents told us that they were taken out by their families for their hair done and other appointments whilst other residents enjoyed using the hairdresser that attended the home. Many residents enjoyed the company of the activity coordinator and the fitness instructor valuing the regular activity programme on offer. Others spoke of the “magnificent gardens” and how they liked their rooms. Likewise, residents confirmed feeling cared for and safe.

Environment

“I like my room.”

“I feel very privileged to be here.”

“The gardens are magnificent.”

“The rooms are good; my room is very comfortable, and I have my own toilet.”

“Visually very nice, a bit old fashioned but the rooms are okay.”

“I like everything here, I used to come here for a singing group and liked it so much I came to stay.”

“We are very lucky, there are different rooms to sit in.”

“I have my own room and its ok.”

“The home is always clean.”

“I like the garden.”

“I have my own room which I really like.”

“Do you think it is warm enough to sit out?”

“We have lovely gardens.”

Activities

“I like the activities; I join in lots of things.”

“Last night we did a quiz.”

“There’s always something going on in one of the rooms.”

“They come every day to do craft things. It’s not for me though, it’s not my cup of tea.”

“It’s quite good here, they look after us and there are activities such as board games and crafts during the week. I like to watch films and the staff are really good at searching for films that I enjoy. We recently watched Casablanca, My Fair Lady and The King and I.”

“There is a fitness instructor that comes into the home and tailors exercise programmes according to our physical ability. We don’t have to take part, but we can if we want.”

“We had tables, decorated with Union Jacks and centre pieces. We had chocolates and shortbread and there was a special buffet with trifle and strawberries and cream. There was an organised quiz and organised singing.”(re. the Jubilee)

“The only limitation I have is that of my own physical disabilities. Staff do everything they can to support me. There are things I would like to do that my physical health does not allow, such as staying out in the garden. It’s my preference to stay indoors now and there are plenty of activities organised that I enjoy.”

“James is great when he comes. He does PT with us. He is great fun.”

“We sometimes have a quiz.”

“I love Lyndsay coming in. She does craft work and likes dancing.”

“I like to make my own choices. I like to be quiet in the afternoons as I have done all my life. It comes from always getting up early, I like to sit in the top floor sitting area where its quiet and I like to watch the birds from the window. I like to read and write, and I have a daily paper.”

"I like to get my hair done every week."

"I enjoy joining in with the quizzes, sing along and craft sessions. I don't go out, but my family visit me."

Care

"I feel safe, and I can talk to the staff if I have to. I don't like wetting the bed though and they don't always come straight away (at night)"

"I haven't spoken to my family for a while. I can't work a mobile."

"Very considerate and caring."

"The staff are all very good and very helpful, but they are hard pressed."

*"Everyone here is helpful, for example just before, she (*Phillipa the manager) was just walking past me on the stairs doing something and she stopped, asked if I was okay and helped me down."*

"The care here is better, (than another home) staff are good and look after me. They think of everything."

"If we bang our leg or hurt ourselves, the nurse will help to dress it or look after it. They have a good number of care staff on duty, and they know about my disability and the care I need"

"It seems ok here. I'm getting used to it. I have a nice bungalow at home but I'm getting older, and I need more help. I'm not sure when I will be going home, it depends on my son who helps to care for me."

"They help me get washed and dressed."

"The carers are great, and everyone is friendly. The carers help get me up when they come in. I can't choose the time but I don't mind."

Food

"It's ok, I like cottage pie and things that are easy to eat."

"The food is adequate, for example, I don't like my veg to be so well cooked."

"They do well to accommodate for everyone here."

"On the whole the food here is very good, I like the fish."

"We have a hot meal at lunch time and there is a choice such as roasts, baked salmon, meat pie, corned beef hash with a good variety of vegetables such as carrots, cauliflower and broccoli. I really like dessert and my favourite is sticky toffee pudding, but sometimes we have ginger sponge or chocolate sponge."

“The meals are tasty. I haven’t disliked anything that I have been served.”

“My favourite is stew and dumplings and sausage and mash.”

“It’s too good. We put weight on. We have a breakfast and two good meals a day. Really, we don’t need that amount.”

“I don’t have any favourite foods, but the meat pies are good.”

“I would prefer smaller portions, I don’t like to waste food.”

Staff views

Staff feedback from respondents was positive and indicated the provider supporting staff beyond the employer role.

One long standing staff member(33 years) related that both her parents had been at the home prior to their passing. Her father had fallen ill shortly before Covid, and the home helped to get him transferred there so she was able to see him throughout lockdown.

One representative spoke at length with the activity coordinator. And she was described as *“demonstrating enthusiasm and satisfaction in her role”*. We were shown the plan for activities, and it was good to see that all residents were included. Those who were nursed in their rooms and not able to participate in group sessions had time allocated and could have hand massage, music therapy or just time chatting.

Two of the staff we spoke to reported recent training in respect of LGBTQ+ and were able to explain the importance of awareness.

Do you have enough staff when on duty to allow you to deliver person centred care?

“We have a good team.”

“Yes.”

How does the organisation support you in your work?

“We are kept up to date with all the training”.

“I have support from fellow carers and management.”

“Shifts can be flexible for childcare etc. Staff are supported by management when sick and have a return-to-work interview.”

How do you deliver care to diverse groups such as LGBTQ +?

“We cater to all sorts of diets and religions.”

“Yes, we have training for it.” (In relation to LGBTQ)

“It is important to know residents’ preferences. We should care for everyone equally.”

Are you aware of residents’ individual preferences? Where do you find this information?

“Yes, all the information about their specific needs for things like diet etc. are on their care plans”.

“I know residents very well and we use care plans to note resident’s needs. We have a daily handover where we hear of residents up to date needs and specific plans for the day.”

Would you recommend this care home to a close friend or family?”

“My dad was ill before Covid, and I was fortunate enough to be able to get him to come here.”

“Yes.”

“Yes.”

“Yes, I would.”

“I have worked at the home many years and I am very happy here.”

Responses from provider

By email 27/07/2022

Hi Michelle,

We are very happy with the fair and honest report, thank you once again for coming and I hope you enjoyed your time here with our staff and residents.

Regards

Philippa Bailey RGN RM

Manager & Proprietor

Magdalene House Nursing Care Home

10-14 Shear Bank Rd, Blackburn

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FEEDBACK FORM FOLLOWING ENTER & VIEW BY AUTHORISED REPRESENTATIVES

Healthwatch Blackburn with Darwen values any constructive comments that would help to enhance our practice of the Enter & View process. Could we therefore ask the service provider to use this form to provide feedback to help us evaluate our effectiveness?

Organisation Address	Premises -if different
Magdalene House 10-14 Shearbank Rd Blackburn.	philippabailey2@nhs.net
Contact Name	Telephone Number and/or email
Philippa Bailey	07960850666
Name of Healthwatch Enter & View Authorised Representatives	Michele Chapman-Project Officer
Date & Time of Enter & View	05/07/2022 10:30am
Were you happy with the Enter & View Arrangements prior to the visit? Comments-	
Yes - notification by email & letter. The first meeting was cancelled due to illness, but we were informed by phone the day before.	
Please outline any Positive aspects of the Enter & View visit. Comments-	
Very pleasant members of the team. Smart in appearance & well groomed, which is a great visual image for our residents to relate too. The phone stand used Tops were colourful & welcoming.	
Please outline any Negative aspects of the Enter & View visit. Comments-	
Felt 4 members of the team was a lot as it caused an infringement on the workings of the daily routine - although it actually didn't - and worked very well.	

healthwatch
Blackburn with Darwen

Please use this space to comment on how you think we could improve your experience of our Enter & View visit. Your views are very important to us at Healthwatch and we appreciate, in anticipation, your time to complete this form.

A very professionally handled visit
Feedback was positive & constructive.
A pleasure to have on the premises

It was refreshing to have a
welcoming team present that were
person centred & valued the
time given to them by the residents.
The staff were made to feel at ease
also -

Thankyou from all at Magdalene
House - Phippa.

Completed by	<i>Phippa</i> Phippa Bailey
Position	House manager - owner
Date	5.7.2022

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Blackburn with Darwen

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