

Oval Care Homes Ltd

Auriel Lodge

Inspection report

116 Auriel Avenue
Dagenham
RM10 8BU

Tel: 07852378358
Website: www.ovalcarehomes.co.uk

Date of inspection visit:
10 June 2021

Date of publication:
15 July 2021

Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service

Auriel Lodge provides nursing and personal care to adults in a care home. The home can support up to three people and at the time of the inspection, one person was using the service.

People's experience of using this service and what we found

People felt safe in the service. Risk assessments were completed, and appropriate equipment provided to ensure people were safe. Staff knew what actions to take to ensure people were protected from harm.

People were confident that their medicines were managed safely. Staff administered and audited medicines ensuring that people received their medicines as prescribed by their doctors.

The service was clean, and systems were in place to mitigate the impact of Covid-19.

The management structure was clear, and the service worked with health and social care professionals. Staff had a good knowledge of equality and diversity ensuring people were treated without any form of discrimination.

Rating at last inspection

This service was registered with us on 09 April 2019 and this was the first inspection.

Why we inspected

The inspection was prompted in part due to concerns received about infection control and how the service managed the impact of Covid-19. A decision was made for us to inspect and examine those risks.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

We found no evidence during this inspection that people were at risk of harm from this concern.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

This was the first inspection of the service. We have not rated the service at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

This was the first inspection of the service. We have not rated the service at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Auriel Lodge

Detailed findings

Background to this inspection

This was a targeted inspection to check on a specific concern we had about infection control and how the service managed the impact of Covid-19.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Auriel Lodge Limited is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection. Inspection activity started on 7 and ended on 10 June 2021. We visited the care home on 10 June 2021.

What we did before inspection

We reviewed information we already had about the service. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We were not able to talk to the person who used the service because they were not communicating verbally. However, we spoke with one member of care staff and the registered manager. We observed how staff

provided care and communicated with people.

We reviewed a range of records. This included one person's care records and a variety of records relating to the provider's policies, procedures and medicine administration records.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection for this service. This key question has not been rated.

- Risks to people were assessed, monitored and reviewed. They included risk from Covid-19, electronic devices, bathrooms, kitchen and falls.
- Suitable equipment such as hoists, walking frames and air mattresses were provided to ensure risks to people were mitigated and people were safe.
- Risk assessments contained guidance for staff how to ensure people were safe. Staff we spoke with told us they had read the risk assessments and followed the guidance to ensure people were safe.

Using medicines safely

- Staff administered medicines to people. Records showed people received their medicines as prescribed by their doctors. Staff recorded and signed medicine administration record sheets [MARS] to confirm this.
- Staff who administered medicines had relevant training and experience in administration of medicines.
- There was a system in place to audit medicines. The registered manager told us, and records confirmed, medicines were audited weekly and monthly to check there were no gaps in the administration and management of medicines.

Preventing and controlling infection

- All parts of the service were clean and tidy. There was a cleaning and monitoring schedule for communal areas including the kitchen, lounge and bathrooms.
- The service worked to prevent infection and had implemented government guidance to limit Covid-19 transmission. People and staff had periodical tests for Covid-19 and we noted they all had at least one dose of vaccination for Covid-19.
- Staff wore personal protective equipment [PPE] such as gloves and face and nose masks when providing personal care. The provider had enough supplies of PPE.
- Visitors followed the service's risk assessment which meant that they had to use PPE and observe social distancing when they visited. This ensured that people, staff and visitors were protected from Covid-19.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection for this service. This key question has not been rated.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The service had a registered manager who was also the owner. There was a consultant quality officer who came to the service to undertake regular audits of aspects of the service including the provider's policies, procedures and various records.
- Risk assessments and care plans were completed and reviewed. Where changes were needed, the registered manager liaised with placing authorities to ensure that adjustments were made to people's care to meet their needs. The registered manager told us they had contacted a placing authority to review the care package of a person whose needs had changed.
- The registered manager and staff were clear about their roles, and understood quality performance, risks and regulatory requirements. Staff told us they had read and understood the provider's policies and procedures.
- The service promoted equality and diversity. Staff were clear about equality and diversity and their responsibility to treat people without any discriminations.

Working in partnership with others

- The provider worked with other social and healthcare partners. These included GPs, occupational therapists, psychiatrists, speech and language therapists and social workers. A social care professional said, "They are good, we had no problems and communication with the service was also good."