

Umika Trading Ltd

# Ambika Lodge Care Home

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

Ambika Lodge Care Home is a nursing home that provides accommodation and personal care and support to a maximum of 21 people. The service provides care and support for older people some living with dementia. At the time of our inspection 18 people were living at the service.

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

Staff knew who to report to if they felt a person was at risk of potential abuse and were confident that any reported incidents would be addressed by the registered manager.

Staff and people felt there were enough staff working in the service and people said staff were available to support them when they needed assistance.

Medication was administered by staff who had received training to do so and medicines were managed safely. Risk assessments were in place, which identified possible risks and how to manage them.

The service had systems in place to monitor the quality of the service. Actions were taken and improvements were made when required. People and their relatives felt able to speak to the registered manager or any of the staff team at any time if they needed help and assistance.

The last rating for this service was good (published 14 September 2018).

Why we inspected

We received concerns in relation to safeguarding and infection control processes. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

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

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Ambika Lodge Care Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

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?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service well-led?

Good ●

The service was well led.

Details are in our well led section below.

# Ambika Lodge Care Home

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

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 team consisted of two inspectors

#### Service and service type

Ambika Lodge Care Home 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.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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 spoke with five people who used the service about their experience of the care provided. We spoke with seven members of staff including the registered manager. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included five people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with two relatives.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Safeguarding systems were in place to safeguard people from abuse. Staff we spoke with had a good understanding of safeguarding procedures. One staff member told us, "I would whistle blow if I had any concerns, first to the manager and then I would raise with CQC or the local authority."

Assessing risk, safety monitoring and management

- Risks associated with people's care were assessed and managed. Staff understood the risks to people's safety and wellbeing and how to support people to minimise them.
- Care plans contained risk assessments for areas such as falls, mobility and skin integrity. When risks were identified, clear guidance was in place for staff on how to reduce the harm to people and how to keep them safe. For example, one care plan had information about how the service used equipment to protect a person at high risk of skin damage.

Staffing and recruitment

- There were enough numbers of staff on duty to meet people's individual needs.
- Staff we spoke with did not raise any concerns regarding staffing levels at the home. One person told us, "Occasionally thin on the ground but most days someone straight here, we do not have to wait long. Last night one of the staff know I wake very early and had a cup of coffee ready for me."
- Staff had been recruited safely to ensure they were suitable to work with the people they supported.

Using medicines safely

- People were receiving their medicines when they should. The provider was following safe systems for the receipt, storage, administration and disposal of medicines.
- During the inspection we identified one administration error which had occurred very recently prior to an audit taking place. The registered manager immediately rectified this.
- Medicines which needed to be given at certain times of the day (time critical) were administered appropriately.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.

- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

#### Learning lessons when things go wrong

- The provider had systems in place to review when things go wrong to ensure lessons were learnt and action was taken to minimise the risk of reoccurrence.

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- During our inspection we observed an exercise session with people being encouraged to participate. The activity organiser encouraged people to have a drink throughout the activity.
- There was a positive atmosphere at the service. We saw people and staff interacting with each other throughout the day and enjoying each other's company.
- People and their relatives were positive about the service. One person told us, "This place is as good as it gets, it has a nice laid-back feel and staff go the extra mile." Another person told us, "I find it alright, as care homes go it is a good home. There is enough staff around and the food is excellent."
- A staff member told us, "All the carers are lovely and dedicated, they work really hard."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- A registered manager was in place and was supported by a deputy manager. The registered manager and deputy manager were very responsive to any minor concerns identified during the inspection and acted immediately.
- A range of quality checks were carried out to monitor the quality of the service. These included monitoring care records, medicine audits, health and safety checks and infection control audits. Records showed these checks were carried out on a regular basis and where they had highlighted areas for improvement, these were addressed quickly.
- The registered manager understood their responsibilities under 'duty of candour' to be open and honest when things went wrong.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager told us they had used various communication methods to communicate with people's relatives which included telephone calls, teams calls and window visits during the pandemic. The service was now open to visitors and had followed current guidance to organise these visits safely.
- One relative told us, "The service phone me and my [family member] about everything, whilst we are still not allowed in as another family member is the designated visitor, so far we cannot fault the home. The [registered manager] and staff are fantastic." Another relative said, "I am visiting now, I do a Covid test, they take my temperature and I wear full PPE. Prior to that we had window visits, facetime and telephone calls. If



there are any issues, they call us straight away."

- Staff told us that they felt supported. One staff member told us, "It's nice working here we have good and attentive managers. It's more like a family here. We have staff meetings quite frequently and If I have concerns about anything then we have a meeting about it."

Continuous learning and improving care; Working in partnership with others

- The service worked in partnership with other organisations to ensure staff followed current best practice. These included healthcare professionals such as dieticians, speech and language therapists and GP's.
- The service learnt from incidents that had occurred and made changes in response to these to improve care and safety.