

Care UK Community Partnerships Ltd

Amberley Lodge - Purley

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Outstanding ☆

Summary of findings

Overall summary

This inspection took place on 3 and 4 February 2016 and our first day of inspection was unannounced. At our previous inspection in July 2014, we found the provider was meeting the regulations we inspected.

Amberley Lodge Purley provides care for up to 60 older people requiring residential or nursing care, some of whom may be living with dementia.

The home had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

We found there was outstanding leadership at Amberley Lodge Purley. The registered manager communicated a strong ethos focusing on striving for excellence, leading by example and always trying to ensure a good quality of life for the people living there. The home had made sustained improvements since 2014 and this was recognised by people using the service, their relatives and other professionals.

People and their relatives were positive about the care and support provided. Staff knew people well and treated them in a kind and dignified manner. We observed positive relationships between staff and people at the service and their relatives throughout our visits.

Any risks to people were identified and they were supported to maintain their welfare and safety. Staff were knowledgeable about safeguarding adult's procedures and said they would report any concerns they had to the registered manager and other senior staff.

People were supported to have their health needs met. Staff worked well with other healthcare professionals and obtained specialist advice as appropriate to help make sure individual health needs were met. We saw that people's prescribed medicines were being stored securely and managed safely.

Staff told us they felt valued and appreciated for the work they did by the management team. Staff attended regular training which gave them the knowledge and skills to support people effectively.

Staff had received training in the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS). Where people no longer had the capacity to consent to aspects of their care, staff worked in people's best interests and looked to use the least restrictive option.

People and their relatives felt able to speak to the registered manager or other staff to raise any issues or concerns. There were effective systems to monitor the quality of the service and obtain feedback from people and their representatives.

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. There were sufficient staff to meet people's needs and keep them safe.

Staff were aware of any risks to people's safety and followed management plans to reduce the risk of harm.

Staff were aware of safeguarding adult's procedures and would report all concerns appropriately.

Medicines were securely stored and people received their medicines as prescribed.

Is the service effective?

Good ●

The service was effective. Staff had the knowledge and skills to meet people's needs and could access an on-going programme of mandatory and more specialist training.

Staff provided appropriate support to those who required assistance with their meals. People were able to see health care professionals as required to ensure their health needs were met and could access specialist advice and support as needed.

The service complied with the requirements of the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS).

Is the service caring?

Good ●

The service was caring. People were supported by staff who were caring, kind and respectful. Their dignity and right to privacy was upheld by the staff at Amberley Lodge Purley.

Visitors said there were no restrictions on them when visiting the home.

Is the service responsive?

Good ●

The service was responsive. Care plans addressed people's care and support needs and were regularly updated.

Staff were knowledgeable about people's support needs, their interests and preferences in order to provide an individualised service.

People were supported to take part in activities and to maintain contact with family and friends.

People using the service or their representatives felt able to raise concerns or complaints.

Is the service well-led?

The service was well led. An experienced registered manager was in post who promoted high standards of care and support for people using the service at Amberley Lodge Purley.

Staff were well supported by the registered manager and her deputy who were approachable and listened to their views. The ethos of the home was positive and staff felt part of a team.

People, their relatives and staff we spoke with reflected on the significant progress made by the service since 2014.

Outstanding 

Amberley Lodge - Purley

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Prior to our inspection we reviewed the information we held about the service. This included any safeguarding alerts and outcomes, complaints, previous inspection reports and notifications that the provider had sent to CQC. Notifications are information about important events which the service is required to tell us about by law.

This inspection took place on 3 and 4 February 2016 and was unannounced. There were 42 people using the service on the upper two floors of the home at the time of our inspection. The ground floor unit had just been renovated and had not yet re-opened.

The inspection was carried out by one inspector, a CQC specialist advisor and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

We spoke with seven people who used the service. Due to their needs, some people living at Amberley Lodge Purley were unable to share their views. We used the Short Observational Framework for Inspection (SOFI). SOFI is a specific way of observing care to help us understand the experience of people who could not talk with us.

We also spoke with the registered manager and five members of staff. We observed care and support in communal areas, spoke with people in private and looked at the care records for three people. We reviewed how medicines were managed and the records relating to this. We checked four staff recruitment files and the records kept for staff allocation, training and supervision. We looked around the premises and at records for the management of the service including quality assurance audits, action plans and health and safety records.

During and after our inspection visit we received feedback with six relatives and two care professionals about the care provided.

Healthwatch Croydon carried out an enter and view visit to Amberley Lodge Purley on 29 July 2015 and some of their findings are reflected within this report. Healthwatch England is the national consumer champion in health and care. They work to ensure the voice of the consumer is strengthened and heard by those who commission, deliver and regulate health and care services.

Is the service safe?

Our findings

People told us that they felt safe living at Amberley Lodge Purley. One person told us the staff helped them feel safe and another person said, "They [the staff] come and check that I am okay." A third person said, "Yes they are very good, they all know how to treat me."

We asked people if there were enough staff on duty to meet their needs. One person said, "Yes people come and talk to me." A relative commented, "Always loads of staff walking around."

People using the service were supported to keep safe. Risks to individuals were being identified and assessed. Care records included assessments of people's mobility, their potential risk of falls and of pressure ulcers developing. Any falls were documented and we saw evidence of the action taken to help prevent further accidents.

Staff spoken with demonstrated a clear understanding of the types of abuse that could occur, the signs they would look for, and what they would do if they thought someone was at risk of abuse including who they would report any safeguarding concerns to. Staff told us they had attended training on safeguarding adults from abuse. The training records we looked at confirmed this. One staff member told us, "I would call social services to report it." A newer member of staff confirmed they had received information about safeguarding in their induction and were due to complete the organisational mandatory training.

Staff said there were enough staff on shift to meet people's needs. Their comments included, "Very good, always enough staff" and "Yes we have enough staff." The registered manager told us that staffing levels were constantly evaluated and arranged according to the needs of the people using the service. For example, if people's needs changed or they needed to attend health care appointments, additional staff cover was arranged. We saw one staff member supporting a person to attend a health appointment during our visits.

During the inspection staff were visible and available on each unit with the exception of two short time periods where people using the service were not monitored in a communal lounge. We observed senior staff reminding members of their team on more than one occasion to make sure that staff were monitoring people in these areas. The floor layout with communal areas situated off long corridors was seen not to aid staff in easily monitoring people using the service.

Appropriate recruitment checks took place before staff started work. We looked at the personnel files for four members of staff. Completed application forms included references to their previous health and social care experience and qualifications, their full employment history, explanations for any breaks in employment and interview questions and answers. Each file contained evidence of criminal record checks that had been carried out, two employment references, health declarations and proof of identification.

Medicines were stored securely in locked cabinets in locked rooms on each floor. The majority of medicines were administered to people using a monitored dosage system supplied by a local pharmacist. Medicines

folders were clearly set out and easy to follow. They included individual medication administration records (MAR) for people using the service, their photographs, details of their GP, information about their health conditions and any allergies. We checked the balances of medicines stored in the cabinets on one floor against the medicine administration records for a number of people using the service and found these records were up to date and accurate, indicating that people were receiving their medicines as prescribed. Regular audits were undertaken by senior staff to make sure medicines were being administered correctly.

We looked at the systems for reporting and monitoring incidents and accidents. These were recorded on a data base and monitored by the organisation. Any trends, patterns or queries would then be flagged up with the home manager to take action as needed. Paper records kept documented accidents and incidents on a monthly basis with the action taken logged in each instance. For example, when a falls monitoring chart was commenced and the GP and next of kin informed.

All areas of the home were seen to be kept clean and hygienic. No malodours were noted during both days of our inspection. Positive comments were received from people and their relatives about the high standard of cleanliness maintained at Amberley Lodge Purley. One relative said there were never any smells when they visited and praised the high standard of cleanliness. Another relative praised the housekeeping staff "Who went far beyond their job descriptions to brighten the day for their residents."

We saw risks associated with the environment and equipment were assessed and reviewed. Safety checks were regularly carried out such as those for the fire, gas and electrical equipment installed.

Is the service effective?

Our findings

People said they were cared for by staff who knew them as individuals and understood their needs. A relative talked about the staff working with their family member saying, "They know her well, they know what to do." Another relative spoke of the staff team as "Making the residents feel safe, comfortable and valued as individuals." A third relative told us that the staff were excellent.

Staff completed the training they needed to work effectively with people using the service. Staff told us, "The manager is very forceful about training" and "We have good training." Training records showed that staff had access to mandatory training including safeguarding adults, moving and handling, infection control and dementia care. More specialist training was also provided for staff as required including meeting end of life care needs and tissue viability. Staff told us, and records confirmed, that they completed an induction to sector standards when they started work and received training relevant to the needs of people using the service. Staff were then able to access national vocational qualifications to further their own development.

Records showed that staff were receiving regular supervision with their line manager. Each staff member also received an appraisal of their work performance annually. Staff meetings were held regularly with specific regular forums for heads of departments and other staff. We saw discussions about staffing levels, training and outcomes from quality audits.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

The registered manager understood how the Deprivation of Liberty Safeguards (DoLS) applied to the people who used the service and had sought DoLS authorisations where required. We observed that staff obtained people's consent before delivering care. Care files included capacity assessments documenting the person's ability to understand, remember, weigh and communicate the information provided to them and looked at what was in their best interests. We found that some staff may benefit from further support in completing these MCA assessments. For example, making sure they included details of how they worked with people to help them understand information such as using pictures or other formats.

People using the service told us they enjoyed the food provided for them. One person told us, "Very nice - nice meals" and another person commented, "Usually it's okay". A relative said, "There is a choice of food."

Written and pictorial menus were on display in each unit and people told us they were given a choice of

meals. There was a choice of two cooked meals and alternatives such as salads and sandwiches at the mealtime we observed. Staff helped people make choices by showing them the plated meals on offer and assisted people in an unhurried manner.

People's needs and preferences were being taken into account in how the premises were adapted and decorated. The environment of the newly refurbished residential unit had been designed and arranged to be dementia friendly. This ground floor unit was not occupied at the time of our inspection. The registered manager told us that plans were being made for the environment on all floors to be enhanced which would clearly be beneficial for the people living there. The design of the upper two floors still retained a more clinical feel although we noted improvements had been made to communal spaces since our last inspection visit.

People using the service received support from a local GP who visited regularly so that they got to know people well. They visited during our inspection and gave positive feedback about the efficient running of the home and the improvements made in recent years. One person using the service told us, "I see a doctor, dentist, chiropodist; I just got some new glasses."

Records showed that staff attended end of life care training and the home had attained commended status with the Gold Standards Framework (GSF) programme for care homes. The National GSF aims to help optimise the care for people approaching the end of life.

Is the service caring?

Our findings

People we spoke with were happy living at Amberley Lodge Purley and were satisfied with the care they received from staff. One person using the service told us, "Oh yes all kind" and a second person said, "They are alright." Another person told us that staff were, "excellent".

Relatives were also positive about the care provided. One person told us, "Yes I cannot fault the staff at all" and said that staff were always kind and caring towards their family member offering reassurance. Another relative told us about a particular staff member praising their, "Dedication, empathy, patience and good humour." A third relative described the staff as being, "kind and warm" towards their family member. The relatives and carers we spoke with said they felt involved in the care provided and that the home communicated well with them. A poem from involved relatives thanking staff for their work was displayed on the wall on each floor.

The registered manager told us that her approach to ensuring dignified and compassionate care at Amberley Lodge Purley was through leading by example and talked of the importance of looking after the staff working in the home. Staff spoke about the importance of treating people with kindness, dignity and as individuals. One staff member told us, "The care is good here."

We spent time in the communal areas observing the interaction between people and the staff who provided their care and support. We saw that staff spoke with people in a friendly and respectful manner, used touch to reassure people and responded promptly to any requests for assistance. We observed many positive interactions between people and staff. Staff working in care and non-care roles spoke with people while they moved around the home, greeting them as they passed and checking they were alright.

National Dignity day was one of the advertised events happening at Amberley Lodge Purley. Staff on one floor had been looking at what dignity meant to them with their ideas displayed on the wall. All staff working at the home received dignity training as part of their induction.

Care plans included life stories and personal preferences. One staff spoken with said they would like to use this information much more in the day to day care across the floors. Memory boxes were due to be used in the newly refurbished ground floor residential unit as part of the dementia friendly environment helping people identify their rooms. Their use could be extended to enhance all the floors helping each area reflect the identity of those people who live there.

Is the service responsive?

Our findings

One person told us they played quiz games put on by the home as an activity. Another person said they were taking part in cake baking for the first time on the day we visited and were enjoying it. A relative told us their family member regularly took part in cookery, arts and crafts, exercises and ball games. They said that they had been out to Tesco's and the garden centre in the past.

Activities were taking place on units on both days we visited including word quizzes and cake baking. Two full time activity co-ordinators work at Amberley Lodge Purley providing cover across the floors and at weekends.

Schedules of activities were displayed on each floor so people and their visitors were kept informed of social events and activities they could take part in. These included pet therapy, a Chinese new year lunch, cake baking and 1-1 sessions. Representatives from a local church visited the home on a monthly basis. Some staff at Amberley Lodge Purley had been trained in Namaste Care which was designed to improve the quality of life for people with advanced dementia. We discussed increasing the frequency of these sessions with the registered manager as this may enhance the care provided to people using the service.

One person using the service and two relatives raised the issue of not having access to Wi-Fi throughout the home. Wi-Fi was not currently provided and people said they would like to use email, the internet and to skype relatives abroad. This was discussed with the registered manager at the time of inspection who said they were continuing to pursue this matter with the organisation internally. We saw the Wi-Fi provision and access to a minibus for trips were on-going issues being raised at the regular relatives meetings.

People who lived in the home told us that they were asked for their views about the service at the regular residents meetings however some individuals said these were not always acted upon. We attended a meeting on one floor which included discussion of dignity and respect, future trips out and the food served. We observed one person raise an issue about drinks however they were told to raise it with staff on their floor. Minutes seen of previous meetings additionally did not specify what action had been taken following each of these forums. It is important that people are able to see and hear what action has been taken as a result of their feedback and this was discussed with the registered manager.

People's needs were regularly assessed and responded to. People said they were unsure if they had a care plan but said either that their family members dealt with this area or that they were not interested as the staff met their needs. The home had a 'resident of the day' scheme where the staff made sure the nominated person had extra individual care and attention. Their care plan was reviewed, room cleaned and the chef would try to cook a favourite meal. A staff member on one floor said that they would like to see this scheme enhanced so people went out for a meal or an activity with staff. The care plans we looked at were reviewed regularly and kept up to date to make sure they met people's changing needs. Each person's care plan addressed areas such as nutrition, personal care and mobility.

People and their relatives told us that they felt able to raise any concerns with managers or staff and were

confident that these would be addressed. One person using the service said they had made a complaint and this had been resolved to their satisfaction. A relative said, "No not needed to [make a complaint]." Complaints records were up to date with timescales and related correspondence logged in each instance.

A relative told us that communication had improved saying, "One of the key improvements has been in the communication between the key workers and senior nurses and floor supervisors." They went on to comment, "[The registered manager's] door is always open which means I can discuss things with her."

Relatives said that they could visit their family members at any time and stay as long as they liked.

Is the service well-led?

Our findings

One relative told us, "The place is excellent." Another relative said, "This is a care home where love and support is available in buckets!" A third relative told us, "The manager is always around and has time for a sit down and a chat." A person using the service said the registered manager was "Very nice" and went on to say, "They are all very nice people."

The registered manager had been in post since mid-2014. Both relatives and external professionals reflected on how the home had improved under her leadership. One relative described the service as "The best it has been." Another relative told us, "There is a positive, professional, happy feeling to Amberley Lodge that prior to [the registered manager] arriving had been somewhat lacking. I credit this vast improvement to her management style and feel she should be recognised for this success and all her hard work." A third relative said, "Since [the registered manager] has taken charge I do feel there has been an improvement of standards especially in the last 12 to 14 months."

The registered manager communicated a clear ethos for her team and spoke of the importance of leading by example, demonstrating her passion for great care to others and coaching the staff team as professionals whilst ensuring they were treated in a person centred way themselves. Staff stated they had confidence in the registered manager and felt the home was very well led. Each staff member spoken with told us they felt valued and appreciated for the work they did by her and the management team. They said that the registered manager had an open door policy and they could talk to her or the deputy manager any time they wanted to.

One staff member told us, "[The registered manager] is always trying to make sure everything runs well. She wants the best for the home." Some of the staff we spoke with reflected on the progress made by the service under the current registered manager. Another staff member commented, "It has gone very well. She listens to you."

Healthwatch Croydon carried out an enter and view visit to Amberley Lodge Purley on 29 July 2015. They found that staff were passionate about what they did and were dedicated to their role and the people living there. The staff they spoke with felt confident in raising suggestions or issues with the registered manager. They reported that their morale was good under the registered manager and said that they felt well supported by her.

Some staff working at Amberley Lodge had been nominated in 2015 for care awards given by the organisation annually. A staff member who was still working at the home had won an 'Angel of the Year' award at the same event in 2014. The home had attained commended status with the Gold Standards Framework (GSF) programme for care homes. We also saw the registered manager and her staff had worked with professionals from a University participating in a 2015 research project.

Scheduled audits were carried out to monitor the quality of the service and to identify how the service could be improved. This included regular audits of medicines records to ensure that possible errors were recorded

and any lessons had been learnt. Assessment tools were used to check that individual care plan documentation was fully and accurately completed. Other audits were regularly carried out around areas such as nutrition, supervision and support and tissue viability. Any actions required were recorded and we saw examples where care plans and other records had been updated following audits.

Feedback to CQC from two local authority commissioning and quality monitoring staff was positive about the service being provided at Amberley Lodge Purley. They spoke of how the home had benefited from consistent leadership and the progress made since the current registered manager had been there.

The service promoted people's involvement with their local community. We saw there was regular contact with local schools and people took part in trips to local café's and garden centres.