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Abbey Lodge Care Home - St Albans

Inspection report

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Tel: 01727825899

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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?

Good ●

Summary of findings

Overall summary

Abbey Lodge Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. They are registered to provide accommodation for up to eight people with mental health needs. At the time of our inspection there were eight people using the service.

At the last inspection on 22 September 2015 we rated the service Good. At this inspection we found that the service remained Good.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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.

People felt safe living in the home and told us they discussed with staff how to keep safe when they were out and about in the community.

Staff received training and appropriate support from the managers to carry out their roles effectively.

Risk to people's wellbeing were identified, regularly discussed with people and measures to mitigate the risks were regularly reviewed to ensure they were still effective.

People's medicines were managed safely by well trained staff who had their competencies assessed. Where people were able they were supported to manage their medicines.

The provider had policies and procedures in place to protect people from the risk of infections and staff adhered to these.

There were enough staff employed through robust procedures to meet people's needs effectively.

People were involved in planning their care and support, signed their own care plans and consented to the support they received.

People were involved in duties around the home like cleaning, laundry, cooking meals. Some people were working as volunteers in local shops.

People had opportunities to pursue their hobbies, interest and socialise in house and in the community.

People's feedback about the service they received was regularly sought and they felt they could voice their

opinions in meetings and one to one conversations they had with staff.

People and staff were positive about the management of the service. There were robust systems in place to ensure the quality of the service was monitored and improved if the need was identified.

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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

Abbey Lodge Care Home - St Albans

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 checked 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.

This inspection took place on 22 November 2017 and was unannounced. The inspection was undertaken by one inspector.

Before the inspection the provider completed a Provider Information Return [PIR]. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We received the completed document prior to our visit and reviewed the content to help focus our planning and determine what areas we needed to look at during our inspection. We also reviewed other information we held about the service including statutory notifications. Statutory notifications include information about important events which the provider is required to send us.

During the inspection we spoke with two people who lived at the home, two staff and the registered manager. We also reviewed the last contract monitoring report carried out by the local authority.

We reviewed care records relating to two people who used the service and other documents central to people's health and well-being. These included staff training records, medication records and quality audits. We also reviewed three staff employment files.

Is the service safe?

Our findings

People told us that they felt safe and well supported in Abbey Lodge Care Home. One person said, "I don't want to live anywhere else. I feel safe here and I like it."

Staff were knowledgeable about signs and symptoms of abuse and how to report their concerns. They told us and we saw that they received training about safeguarding people from the risk of harm and abuse. Staff knew where to find information about relevant contact details from outside safeguarding agencies where they could report their concerns under the whistleblowing policy.

People told us they discussed how to keep safe from abuse in their one to one meetings and they had a list with contact numbers for their GP, care coordinator, local safeguarding team and CQC in their room to enable them to contact these services independently.

Risks to people's well-being were identified and discussed with people and measures were in place to mitigate these risks. The identified risks were managed positively; involved and helped people overcome any obstacles and enabled them to be as independent as possible. For example people knew what to do in case they heard the fire alarm. They told us where the assembly points were and what they had to do to keep safe. People also told us how they kept safe when they were out and about in the community. They told us they made sure their mobile phones were charged to be able to contact the staff at the home if they needed and also they let staff know when to expect them back. One person said, "I will tell them [staff] where I'm going and when I will be back. I know what to do to keep safe."

People told us there were enough staff to meet their needs. One person said, "Staff are always here and I can get support if I need it." Staff told us there were enough staff and they were able to effectively meet people's needs.

Safe and effective recruitment practices were followed to make sure that all staff were of good character, physically and mentally fit for the role and sufficiently experienced, skilled and qualified to meet the complex needs of people who used the service.

People were encouraged to manage their own medicines and where they were not able staff administered these. Staff were trained and had their competencies regularly assessed by managers to ensure they followed best practice guidelines when they supported people with their medicines. There were regular audits carried out by the provider and the registered manager to check if people received their medicines as intended by the prescriber. Medicine administration records (MAR) were completed accurately and the stock of medicines we counted matched the records kept.

People were protected from the risk of infections by staff who followed correct infection control procedures when they carried out tasks around the home. The environment was clean and welcoming.

Is the service effective?

Our findings

People told us that staff were knowledgeable about the support they needed. One person said, "Staff knows me well and they know how to support me."

Staff told us they received the appropriate training and support for their role. They told us and we saw that they had regular training and refresher training in topics like safeguarding, health and safety, food hygiene and also more specialist training like diabetes and specialist mental health training.

Staff told us they had regular supervisions where they discussed their performance and development needs. They told us they felt supported by the management team. One staff member told us, "I do feel supported. The [registered] manager is always here and we get regular supervisions."

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).

At the time of the inspection every person who lived in Abbey Lodge had capacity and had no restrictions applied to their freedom. However we found that where important decisions had to be taken by people which could have had a significant impact on their future mental capacity assessments were carried out to ensure they fully understood the implications of their decision. For example when people wanted to move to a less supported service assessments were carried out to assess if they understood the risks involved.

People told us that staff always asked for their consent before they offered them support. We saw that people signed consent forms to agree and authorise staff to share information about them with health and social care professionals. They also signed their care plans to evidence their agreement with its content. One person told us, "I know what is in my care plan. We [staff and person] regularly discuss it and I sign that I agree with it."

People told us the food at the home was good and they enjoyed it. One person said, "I set the tables but I don't cook, others [other people] do. The food is very good here." The menu was designed by the people who lived in the home. They were asked individually to choose what they wished to eat and from the requests a two week menu was created which captured the choices of all the people. In case they did not like what the menu offered on a particular day they could have alternatives.

We also saw that people's weight was regularly monitored and they were encouraged to eat a healthy diet. A person told us they had discussions with staff about health eating due to them being overweight.

People were supported to access health services as and when they required. People attended regular hospital appointments, blood tests and they were accompanied by staff if it was needed. For example on the day of the inspection two people had their blood test; however they were confident in going to their appointments on their own.

People had been seen by opticians, dentists and GP's when and if required. Their mental health was monitored and regularly reviewed by mental health specialists. This meant that people's health needs were reviewed regularly and changes responded to in a way that helped to promote their health and well-being.

Is the service caring?

Our findings

People told us they liked living in Abbey Lodge because staff were nice and they knew them well. One person said, "I know staff here and I like them. They are nice and always happy."

People told us that staff encouraged them to keep in touch with their families and to maintain relationships which were important to them. One person said, "I have my [family] who comes and visits me here and they like coming because they know everyone and they are made to feel welcome here."

We saw that people and staff knew each other well; they were comfortable in each other's company, smiled and joked together. People were confident in approaching managers and staff to communicate their views, discuss plans for the day or raise any questions they had.

People told us they felt staff protected their privacy and gave them space if they needed it. One person said, "I have my room where I can spend time in private and staff won't come in just if I say `yes`." Another person said, "Can be in my room when I want privacy."

Care plans were reviewed regularly and captured people`s opinions, thoughts and wishes. We found that personal documents and records for people were held securely and people had a say in who had access to the information in their care plans.

People had access to information about services available to them and also some people had appointees to deal with their finances.

Is the service responsive?

Our findings

People told us they were happy with the support they received from staff. One person said, "staff will support me with everything I need in the way I want it. They listen."

People`s needs were assessed prior to them moving in the home and their placement was regularly reviewed by their care coordinator to ensure that they were meeting their agreed goals and that the service they received was appropriate to their needs. We found that where people achieved their goals and their needs changed they were supported to move on to less supported service types or independent living.

People were involved in creating and reviewing their plan of care and they were asked to provide staff with their interests and hobbies to ensure arrangements were in place to enable people to continue with these. People were supported to take on voluntary work, go to cinemas, shopping trips and also holidays of their choice. For example a person expressed their wish to go abroad on holiday; however they were anxious about how they would cope with a different environment. Support was organised for them to get their passport and they went on a day trip abroad. Because they liked it they were planning for a longer holiday in the near future.

People told us they had regular residents meetings where they could share any concerns they had and they could also approach staff or the manager when they needed. We saw that people had been given a complaints procedure and they were aware who they could complain to if necessary, however people told us they had no reason to complain.

Is the service well-led?

Our findings

People told us they knew about the management arrangements in the home and they felt the home was well managed. Staff told us that the management in the home was approachable and supportive. One staff member said, "I do feel supported by the managers. They are always around and if not we can always contact them."

Staff told us that the care and support people received was based on the provider's ethos and values and was dignifying and enabling. All the staff we spoke with and the registered manager told us that their aim was to provide people with the best possible care and support to meet their needs. Staff were clear on their responsibilities and job roles and they told us that the training and the support they received enabled them to carry out their roles effectively.

The registered manager monitored the standards of the service provided through regular health and safety, infection control and medicine audits. They also regularly monitored the standard of the service provided by sending out surveys to staff, people, relatives and professionals. The feedback received from questionnaires was very positive. One person told us, "I don't want anything to change here. I like it as it is."

The quality of the service was also assessed yearly by the local authority's contract monitoring officers. They checked if the provider was following the terms of their contract regarding people's placement and provided people with the appropriate care and support. We saw that the provider constantly achieved very good results and the outcome of these assessments was very positive.

We found that arrangements were in place to ensure that management was present in the home every day to ensure staff and people had continuous support if they needed. In case senior management was not present in the home an on-call rota was available for staff to request support if they needed. One staff member said, "We have an on-call rota and if we call in the middle of the night the managers are very local and they will always come and support us."

The manager demonstrated a very good understanding of people's needs and they were very passionate about delivering a high quality service. We saw evidence which confirmed that the provider was meeting their registration requirements. For example, the service had a registered manager in post. Statutory notifications were submitted by the provider. This is information relating to events at the service that the provider is required to inform us about by law.