

Aura Care Living LTD

Kings Lodge

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

About the service

Kings Lodge is a residential care home providing personal and nursing care to 62 people aged 65 and over at the time of the inspection. The service can support up to 64 people. The care home accommodates people in one adapted building across four separate wings, each of which has separate adapted facilities. One of the wings specialises in nursing care and another specialises in providing care to people living with dementia.

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

People felt safe living at Kings Lodge and were supported by staff who had been trained in safeguarding and how to identify different types of abuse. People received their medicines in a safe way by staff that were trained in this area and subject to regular competency checks.

Risks to people were identified, assessed, monitored and managed. Risk assessments set clear guidance for staff to follow to ensure risks were mitigated as much as possible. Accidents and incidents were analysed and acted upon to reduce future reoccurrence.

People were kept safe from the risk of spread of infection wherever possible and additional cleaning schedules and audits had been introduced to reduce infection risk around Covid-19.

Staff and people told us that the management team included them in decisions regarding the running of the home. The registered manager and assistant manager worked well together to ensure staff felt valued and respected.

Regular staff meetings continued through the pandemic and regular feedback was requested from people living in the home. The home worked well with other health and social care professionals.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 14 January 2020).

Why we inspected

The inspection was prompted in part due to concerns received about safeguarding. A decision was made for us to inspect and examine those risks. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

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.

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 coronavirus and other infection outbreaks effectively.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

The overall rating for the service has remained the same. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Kings Lodge on our website at 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 findings below.

Kings Lodge

Detailed findings

Background to this inspection

The 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 the 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 practise we can share with other services.

Inspection team

The inspection team consisted of three inspectors.

Service and service type

Kings 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.

During the inspection

We spoke with four people who used the service and one relative about their experience of the care provided. We spoke with seven members of staff including the registered manager, assistant manager, senior care workers and care workers.

We reviewed a range of records. This included four 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 looked at training data and quality assurance records as well as rotas and contingency plans. We spoke with two further relatives about their experience of the care provided.

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

- People told us they felt safe living at Kings Lodge. One person said, "Oh yes, I feel very safe here, the staff here are brilliant at making sure of that."
- Staff were confident in the safeguarding reporting pathway and could identify different types of abuse. One staff said, "I have had recent safeguarding training. I am aware of the types of abuse and what to look out for such as physical and emotional abuse. If I had a concern about anything then I would report it to (registered manager) and I would also talk to the person involved."
- There was a safeguarding policy in place available for staff and training records showed that all staff were up to date with their safeguarding training.
- Recent safeguarding referrals had been made in regards to the home. The management team had worked closely with the local authority to confirm all assurances requested were addressed in a timely way. The home had also raised safeguarding records if they felt it was relevant and worked in a transparent way with all professionals involved.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People were kept safe from risks. One relative said, "They just seem ahead and on top of it all the time. If anything changes, they are always telling me of new risk assessments and precautions they have implemented."
- People's care plans had individual risk assessments relevant to them which had guidance for staff and action that had been taken. An example of this was a pressure sore risk assessment that had resulted in the home ordering a pressure mattress for a person. This also detailed guidance for staff on how to manage a pressure area, identify it early and seek medical advice.
- Staff were knowledgeable about people's risks and told us how they manage these. One staff member said, "[Person] is at high risk of falls, this doesn't mean they can't still do everything they want. We just remind them to use their walking aid and ensure someone is available to support them when they mobilise."
- The registered manager recorded accidents and incidents that occurred in the home. These were then analysed to identify any trends or patterns so action could be taken to prevent any reoccurrence.

Staffing and recruitment

- People told us there were enough staff to meet their needs. One person said, "I just buzz, and they come and help". Another person said, "Staff are always around to help me, I've never felt that they're too busy to help me, they never seem rushed."
- We observed a relaxed atmosphere at the home with staff spending time with people and ensuring they

were okay. One staff told us, "There are enough staff. We always look at the dependency of the residents and if identified that extra staff are needed due to increased needs then this is sorted by (registered manager)."

- The registered manager followed safe recruitment processes. This included full interviews, detailed reference requests and checks with the disclosure and barring service (DBS). This confirmed if a person had received any police cautions or convictions. This supported the manager to assess whether a person was suitable to support the people living in the home.

Using medicines safely

- People told us they were supported with their medicines. One person said, "Since I have been here they manage my diabetes very well. I have had really bad experiences before at other places and it had been awful. Since being here they have reviewed my insulin levels and I have been stable for the seven weeks since I have been here."
- Staff were confident when administering medicines and explaining different medicines. One staff said, "We have so much regular training to make sure we are confident to support people with all of their medicines."
- There were medicine audits in place that were regularly completed. This ensured any mistakes would be addressed in a timely way to limit any serious risks. We also checked medicine administration record (MAR) charts and found these to be accurate and completed correctly.

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.

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

- People told us they were well supported by staff and made to feel comfortable. One person said, "I can't say anything better about the staff. Making me feel like I am achieving something and making me feel good about myself and building my confidence. It's helping me to improve my health and feel better."
- Staff were passionate about obtaining the best outcomes for people. One staff said, "This is their home and we want them to be happy, but so many people think they are no longer able to do things, we encourage them to realise that there is still a lot they can do and enjoy."
- The home had introduced a 'wishing tree' that stood in the communal areas. This had individual wishes of people living in the home that the management team were trying to turn in to reality. One person had wanted to attend a donkey sanctuary, the registered manager had arranged a donkey to visit the front of the home so the person could spend time with it. Pictures were seen of the person who looked happy.
- When discussing the wishing tree, the registered manager said, "It's an idea that we want to make as many of the wishes come true, even if we just have to think outside the box a little bit."

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; Continuous learning and improving care; Working in partnership with others

- The registered manager understood the importance to be open and honest when something went wrong. She said, "We are trusted to care and support people, they trust us to do the right thing and be honest about everything we are doing. We always update people and relatives of any significant events or incidents. It's so important to work in a transparent way."
- The management team had formed a close working relationship with the local authority throughout the pandemic. This has included sharing any concerns or questions and asking for support when needed.
- The registered manager has a responsibility to make certain notifications of significant events and incidents to the relevant organisations. It was confirmed that CQC and the local authority had been made aware of all relevant notifications.
- Care plans showed successful partnership working had continued since the last inspection. Evidence of health professionals' advice was seen in people's care plans. These included occupational therapist (OT) assessments and guidance, nutrition advice and chiropody which had all been accessed throughout the pandemic.

Managers and staff being clear about their roles, and understanding quality performance, risks and

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

- People told us they felt they were included in the home. One person said, "Before coming here I was really lonely in the other home. Since moving here, I have been made to feel really welcome and part of the family here."
- Staff were confident to discuss with us their responsibilities and how they carry out their role. Staff told us the management were supportive of them whilst they were at work. One staff said, "[registered manager] is very supportive and if I have any questions then I go to her and she will help me with anything at all. She is always very prompt."
- Relatives told us they felt listened to and the management team reacted to their feedback. One relative said, "If ever I had a problem or a suggestion I would go straight to management, they act on it straight away." Another relative said, "They're always asking for our feedback to make sure we are happy and if they can do anything to make it even better."
- There were regular staff meetings and feedback from people was documented clearly if action needed to be taken. An example of this was following feedback from a person, menu choices were changed.
- The registered manager told us how they tried to reward staff wherever possible. An example of this was a recent awards ceremony had been arranged for staff to acknowledge hard work and individual strengths. The registered manager had made trophies for staff members receiving awards. The registered manager said, "After this year especially and all the staff that have gone above and beyond we just really wanted to do something special to reward their hard work."