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Abbey Lodge Care Home

UNIT 1

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 Unit 1 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 three people with mental health needs. At the time of our inspection there were three 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.

The provider owned another care home in the near vicinity of Abbey Lodge Unit 1 and people spent their time there when they were at home and not out and about. People told us that they liked to socialise with other people from the sister home because they knew each other well. Staff worked across both homes and were familiar with people`s needs. People told us that the care and support they received met their needs and they felt safe.

People told us they knew how to keep safe from risks when they were in the home and out and about in the community. Staff received appropriate training and had on-going support from managers to understand and carry out their roles effectively.

People had care plans in place with comprehensive guidance and risk assessments for staff to understand how to deliver care and support to people in a safe and effective way.

Medicines were managed safely by staff who were trained and followed best practice guidance when administering people`s medicines.

People were protected from the risk of infections by staff who ensured the environment people lived in was clean and infection control measures were followed.

There were enough staff to meet people`s needs. Recruitment processes were safe and ensured that staff employed were suitable to work in this type service.

People were involved in planning and reviewing the support they needed and wanted. They signed their own care plans and consented to the care and support they received.

People were able to plan their days as they wished and were supported and encouraged by staff to pursue their hobbies and interest.

People were involved in daily living tasks and were helped by staff to learn and develop new skills like cooking, cleaning and shopping for their own necessities.

People were asked for their feedback about the service they received in regular meetings and surveys so they could contribute to the running of the home.

People and staff told us they were happy with how the home was managed and they felt managers were approachable and listened to them.

The registered manager and the provider carried out regular audits to ensure they were able to check on the quality of the service people received.

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

UNIT 1

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 one person 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 do feel safe. I have no problems here."

People told us they knew how to keep safe in the home and also when they were out in the community. Staff told us they received safeguarding training and they confidently described the signs and symptoms of possible abuse and also how these symptoms may have manifested in people's behaviours. They told us they would not hesitate to use the whistleblowing policy and report their concerns externally to local safeguarding authorities or CQC.

Risk assessments for all aspects of people's well-being were identified and measures were in place to mitigate these. People told us staff regularly discussed with them how to keep safe when they were out and what to do in case of an emergency. People told us they informed staff about their whereabouts when they went out for the day. They also told us they knew how to respond to a fire alarm.

People told us they felt there were enough staff around and if they needed support they always received it. One person said, "Staff is around and I can ask them if I need anything. I think there are enough. I know them all."

Recruitment was completed robustly with all appropriate pre-employment documentation being sought. This included written and verified references, criminal record checks, eligibility to work in the UK and proof of previous qualifications.

People had their medicines safely administered by staff who had training and their competencies were regularly assessed. People told us they wanted staff to administer their medicines and they signed consent forms to show their agreement. We found that medicine administration records (MAR) were completed accurately and signed by staff each time after they administered people's medicines. We counted medicines for two people and we found that the stock corresponded with 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 they were happy how staff supported them and felt staff knew their needs well. One person said, "Staff knows me and what I need. They help me do things."

Staff told us that the training they received helped them understand the roles they performed. They told us they liked that the registered manager organised face to face training sessions and they found these effective. We saw that all the staff working for the provider held national vocational qualifications or they were working towards achieving this.

Staff told us that support from managers was always available and they were working at the home every day. Over the weekends and night time there was an on call rota which staff said they used when they needed support. One staff member said, "The managers are always around and if not there is an on-call rota and we can phone them during the night or weekends. They are local and very responsive."

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 Unit 1 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 staff asked for their consent before they supported them and they also signed consent forms in their care plans to indicate their agreement with the support they received. One person said, "Staff ask me if I want or not something and I can say no and I also signed my care plan."

People told us they liked the food which often they helped prepare together with staff. One person said, "Some people here will cook. I do like the food. Staff talked to me about my weight and I try to be healthy." 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.

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 staff were nice and polite. One person said, "I know staff well. I lived here [number of years] and they are all nice. They told us staff were friendly and they trusted them.

We observed people being relaxed and smiling when talking to staff and from their conversations it was clear they knew each other well. There was a happy and relaxed atmosphere at the home where people were going out and coming back when they wished and staff adapted the support they gave to people`s needs.

People told us they were encouraged by staff to maintain their family relationships and they kept in regular touch with people who were important to them. One person said, "Staff helps me buy presents for [family member]."

People told us they could have the privacy of their bedroom if they wished and staff respected this and gave them space. One person said, "I will go to my bedroom and staff will knock on my door." The support people received was dignifying and personalised. We heard staff calling people on their preferred name and respected people`s views and opinions and listened when people had something to say.

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, "I discussed with staff that I am putting weight on and I bought a bike. I find it difficult to get motivated to use it." The registered manager told us they were organising a cycling group with other people who lived in the home and staff to support the person to find motivation to do this activity.

The registered manager and the staff were knowledgeable about peoples' needs and issues they were dealing with on a daily basis. They gave us examples where the support provided to people helped people feel less anxious about being more independent. For example a person who wanted to move to independent living was supported by staff to learn and acquire cooking skills, shopping for food and clothes on their own.

Care plans were detailed and gave sufficient details to staff about people's past history, medical conditions and their mental health. Their placement was regularly reviewed by their care coordinator to ensure people were still receiving the appropriate support.

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. One person told us, "I have been to London Zoo, Chinatown and I go on shopping trips. I also like going to the cinema time to time." we found that the registered manager helped people get free passes to a local gym and this helped people stay healthy.

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, "The support is always at hand. We all support each other and the managers are always here and they know what is going on."

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 can't think about anything I would like to change. It is nice here, I like it."

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.

The manager demonstrated a very good understanding of people's needs and they were very passionate about delivering a high quality service. Statutory notifications were submitted to CQC by the provider. This is information relating to events at the service that the provider is required to inform us about by law.