

Oakley Carehomes Limited

# Abbey Care Home

## Inspection report

Collier Row Road  
Romford  
Essex  
RM5 2BH

Tel: 01708732658

Date of inspection visit:  
30 June 2022

Date of publication:  
19 September 2022

## Ratings

Overall rating for this service

Good 

Is the service safe?

Good 

Is the service responsive?

Requires Improvement 

Is the service well-led?

Good 

# Summary of findings

## Overall summary

### About the service

Abbey Care Home is a residential care home providing personal care for up to 20 people. The service provides support to older people and people with dementia. At the time of our inspection there were 16 people using the service.

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

People had limited experiences of stimulating activities and the provider was working to improve this. However, people felt safe and there was a caring atmosphere in the home. There was a robust staff recruitment process in place to ensure staff employed at the service were safe to provide personal care. People had person-centred care plans and staff knew the needs of each person they supported. Each person had a risk assessment, which was reviewed. This ensured that potential risks to people were identified and managed.

Staff respected people's privacy and dignity. Care plans detailed people's likes, dislikes and how they wanted staff to support them. Staff knew about equality and diversity and their responsibility to treat people without discrimination.

The registered manager audited various aspects of the service and ensured that people, staff and relatives provided feedback as part of the provider's quality assurance system. The service worked in partnership with health and social care stakeholders.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was Good (published 25 November 2019). We also inspected the service (not rated) (published 22 December 2022).

### Why we inspected

This inspection was prompted by a review of the information we held about this service.

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.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained Good.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Abbey 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, which will help inform when we next inspect.

## 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 responsive?

Requires Improvement ●

The service was not always responsive.

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.

# Abbey Care Home

## 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 Health and Social Care Act 2008.

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.

#### The inspection team

The inspection was carried out by one inspector.

#### Service and service type

Abbey Care Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Abbey Care Home is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

#### 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 (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

#### During the inspection

We spent time observing people individually and in groups in communal areas. We spoke with three people who used the service, two care staff and the registered manager. We reviewed a range of records including three people's care records, three staff files, menus, medicines records and the provider's policies and procedures.

# 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 the rating for this key question has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so. One person told us, "I feel safe here."
- Staff had received training on how to recognise and report abuse and they knew how to apply it. One member of staff told us, "I will report any incident of abuse to my manager."
- People and those who matter to them were provided safeguarding information in a form they could use, and they knew how and when to raise a safeguarding concern.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Assessing risk, safety monitoring and management

- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well.
- People's care records helped them get the support they needed because it was easy for staff to access and keep high quality clinical and care records. Staff kept accurate, complete, legible and up-to-date records, and stored them securely.
- People, including those unable to make decisions for themselves, had as much freedom, choice and control over their lives as possible because staff managed risks to minimise restrictions.
- People had risk assessments which identified possible risks to their personal needs. The risk assessments detailed guidance for staff how to manage the risks.

Staffing and recruitment

- The service had enough staff, including for two-to-one support for safe moving and handling.

- Staff recruitment and induction training processes promoted safety, including those for agency staff. Staff knew how to take into account people's individual needs, wishes and goals.

#### Using medicines safely

- Staff followed effective processes to assess and provide the support people needed to take their medicines safely. The registered manager audited medicines regularly and medicine administration sheets and the medicines we checked showed no gaps.
- Staff reviewed each person's medicines regularly to monitor the effects on their health and wellbeing and provided advice to people and carers about their medicines.
- People were supported by staff who followed systems and processes to prescribe, administer, record and store medicines safely.

#### Preventing and controlling infection

- The service used effective infection, prevention and control measures to keep people safe, and staff supported people to follow them. The service had good arrangements for keeping the premises clean and hygienic.
- The service prevented visitors from catching and spreading infections.
- The service admitting people safely to the service.
- Staff used personal protective equipment (PPE) effectively and safely.
- The service promoted safety through the layout of the premises and staff's hygiene practices.
- The service made sure that infection outbreaks could be effectively prevented or managed. It had plans to alert other agencies to concerns affecting people's health and wellbeing.
- The service's infection prevention and control policy was up to date.
- All relevant staff had completed food hygiene training and followed correct procedures for preparing and storing food.

#### Learning lessons when things go wrong

- People received safe care because staff learned from safety alerts and incidents.
- The service managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately and managers investigated incidents and shared lessons learned.



# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At our last inspection we rated this key question Requires Improvement. At this inspection the rating for this key question has remained Requires Improvement. This meant people's needs were not always met.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- At our last inspection we found that people did not have enough activities within the service. During this inspection, we did not observe people being engaged in stimulating activities most of the time. One person told us, "I sit here all day, keep myself to myself."
- At our last inspection the provider had assured us that they would take action to improve the provision of activities at the service. The registered manager told us they could not make the improvements they had planned due to the impact of COVID-19 pandemic. We were advised by the registered manager that the improvements needed to provide people with person-centre activities would be implemented. We will check their progress at our next inspection of the service.
- During our visit people we saw care staff providing beauty therapy and hand massages to people.
- Staff supported people to stay in regular contact with friends and family via telephone calls.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Staff provided people with personalised, proactive and co-ordinated support in line with their communication plans, sensory assessment and support plans.
- Staff used person-centred planning tools and approaches to discuss and plan with people how to reach their goals and aspirations. Care plans were written from people's perspectives and outlined what people could do independently and the support they needed from staff with personal care.
- Staff made reasonable adjustments to ensure better health equality and outcomes for people. This included ensuring people with sensory sensitivities were supported in a way which was comfortable to them.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff ensured people had access to information in formats they could understand.
- Each person's communication needs, and preferences were recorded in their care plans. For example, one person's care plan stated, "Staff please speak slowly and clearly and do not overload me with information."
- Staff had good awareness, skills and understanding of individual communication needs, they knew how to facilitate communication and when people were trying to tell them something.

#### Improving care quality in response to complaints or concerns

- People, and those important to them, could raise concerns and complaints easily and staff supported them to do so.
- The service treated all concerns and complaints seriously, investigated them and learned lessons from the results, sharing the learning with the whole team and the wider service. Since the last inspection, one complaint had been received, investigated and responded to by the registered manager.
- Staff were committed to supporting people to provide feedback so they could ensure the service worked well for them. One compliment written by a relative stated, "We cannot thank you enough for everything that you did for our [relative]."

#### Supporting people at their end of life

- Staff supported people to make plans about their end of life care.
- The service worked with other professionals to co-ordinate and support people with end of life care. This ensured people received effective end of life care at the service.

# 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 our last inspection we rated this key question Good. At this inspection the rating for this key question has remained Good. 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; 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

- Management staff were visible in the service, approachable and took a genuine interest in what people, staff, family, advocates and other professionals had to say. One relative stated in a compliment card, "[The registered manager] is always willing to help and support with the view to make sure residents are happy and well cared for."
- Management and staff put people's needs and wishes at the heart of everything they did. Care plans were person-centred and were regularly reviewed. This ensured staff knew and met people's current needs.
- Staff felt respected, supported and valued by senior staff which supported a positive and improvement-driven culture. One member of staff told us. "The manager is good, any problem, I can go to the manager, can discuss anything. I have supervision and support."
- The registered manager promoted equality and diversity in all aspects of the running of the service. The registered manager knew their responsibility to be open and transparent when things went wrong. They sent CQC notifications and informed relatives and other stakeholders of incidents and accidents as required.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs and oversight of the service they managed.
- Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support.
- Staff were able to explain their role in respect of individual people without having to refer to documentation.
- Staff delivered good quality support consistently. One person told us, "Staff are very nice."
- The provider kept up to date with national policy to inform improvements to the service.
- The registered manager told us that she was a recognised dementia champion and kept herself up to date with current understanding and practice of dementia.

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

- The provider sought feedback from people and those important to them and used the feedback to

develop the service. Feedback was received from relatives through meetings and surveys. Comments were noted and actioned by the provider.

- People who used the service and staff provided feedback through meetings.
- Staff arranged independent advocates for people who did not have relatives. This enabled people to have independent voices to support them during reviews of their care plans or when they had personal issues.

Working in partnership with others

- The provider was involved in provider engagement groups organised by the Local Authority which aimed to help improve care services in the local area.
- The service worked well in partnership with advocacy organisations/ other health and social care organisations, which helped to give people using the service a voice.