



Making Social Care Better for People

Inspecting for better lives

# Random inspection report

## Care homes for older people

Name:	Abbey Lodge Residential Care Home
Address:	91 Seabrook Road Hythe Kent CT21 5QP

The quality rating for this care home is:	three star excellent service
The rating was made on:	

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full assessment of the service. We call this a 'key' inspection.

This is a report of a **random inspection** of this care home. A random inspection is a short, focussed inspection. Details of how to get other inspection reports for this care home, including the last key inspection report, can be found on the last page of this report.

<b>Lead inspector:</b>	<b>Date:</b>								
Susan Hall	1	7	0	2	2	0	0	9	

## Information about the care home

Name of care home:	Abbey Lodge Residential Care Home
Address:	91 Seabrook Road Hythe Kent CT21 5QP
Telephone number:	01303265175
Fax number:	
Email address:	mail@abbeyresthome.co.uk
Provider web address:	

Name of registered provider(s):	Abbey Lodge (Residential Home) Ltd
Type of registration:	care home
Number of places registered:	25

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	25

Conditions of registration:							
The registered person may provide the following category/ies of service only: Care home only - (PC) to service users of the following gender: Either Whose primary care needs on admission to the home are within the following categories: Old age, not falling within any other category (OP).							
The maximum number of service users to be accommodated is 25.							
Date of last inspection							
Brief description of the care home							
Abbey Lodge provides accommodation and personal care for up to 25 Older People. The premises are detached and there is a new extension which was built in 2007, which provides additional facilities and bedrooms. Accommodation is on the ground, first and second floors. There is a shaft lift providing access to all floors, and also a stair lift. Three bathrooms are available for service users' use, two of which are assisted. There are communal lounges on two floors allowing service users a choice of							

## Brief description of the care home

where to sit.

Staffing numbers are based on the dependency levels of the residents.

One of the proprietors (Mrs Elizabeth Bown) manages the home and has gained the NVQ Level 4 qualification in management and care. The Home has achieved the Investors in People award.

Previous inspection reports are available from the home. Current fee levels can be obtained from the manager.

## What we found:

This was a random inspection, which was carried out by one inspector over the course of two hours. The home's last key inspection was in January 2007, and this was followed up by an Annual Service Review in January 2008. CSCI decided to carry out a random inspection this year, as another way of monitoring ongoing progress in the home.

We (i.e. CSCI) looked generally at all aspects of the running of the home; viewed the premises; met several residents and chatted with three of them; and inspected some documentation including one care plan and medication administration records.

Residents' comments included " I am very well looked after, and the staff are always very kind;" and "I could not possibly be looked after any better than I am here. I am very happy living here".

The manager has updated the statement of purpose and the service users' guide to reflect changes which have taken place over the past year. This includes information about the new build extension, which has increased the maximum number of beds to twenty five. The admission process remains the same. All residents have a detailed pre admission assessment, and are invited to come into the home and stay for a meal prior to admission. This gives them the opportunity to meet other residents and some of the staff. All residents are provided with a contract which details the terms and conditions of residency.

Care plans are set up prior to admission, and are then reviewed every month and updated accordingly. Each resident has a care assistant assigned to them as a key worker, and it is the key worker's responsibility to ensure that the care plan is amended as needed. The care plans include all aspects of daily living; such as personal hygiene management, mobility, medication, social preferences, and mental state. The care plan viewed had good details, such as oral care and visits to the dentist; risk assessments for going out of the home; and a moving and handling assessment. Residents are enabled to take a bath or shower according to choice, and can have one every day if they wish to. One resident said she had had "a lie in" that morning, as she had been late to bed the night before, and this showed that residents are able to get up and go to bed at the times they wish.

Medication management was inspected and is generally good, but some aspects could be further improved, and there is a requirement in regards to this. Residents are able to manage their own medication if they wish to do so, providing that a detailed risk assessment shows that the person clearly understands the instructions and reasons for each item, and can physically manage to open the packets or bottles as needed. There is a lockable facility in each room for this purpose. There were no residents managing their own medication at the time of the inspection.

The home employs an activities coordinator one day per week, who has drawn up an activities programme in agreement with the residents. This is carried out by care staff on other days. The programme includes a good range of choices, such as musical entertainment, regular outings, playing games, and cooking. The gardens have been

newly landscaped, and include raised beds where residents can take part in gardening if they wish to do so. Most activities take place in a designated area at the back of the dining room. There are separate sitting areas on the ground and first floors, and a quiet library area which residents appreciate. The management have recently arranged for wireless access to be fitted, so that residents will be able to use the internet. This facility will be available in individual bedrooms in the future.

Food is well managed by one cook during the week, and a different cook at weekends. Meals are home made, and residents said that the food is good, and they enjoy it. One said that they can always ask for something different if they want to.

Residents are aware of the complaints procedure, and have no difficulty in raising concerns if they are not happy with something. All complaints are recorded, including minor concerns, so that there is evidence to show that concerns are dealt with. The providers initiate change according to residents ideas and wishes, and are very proactive in this. All staff are trained in understanding how to recognise and prevent abuse towards vulnerable adults. This training is commenced at induction, with further training afterwards.

The home has been extended and completely refurbished since the last key inspection. The new extension fits in well with the original building, and all decoration, furniture and fittings are of a high standard. The building retains a homely feel, even though it has been increased in size. It was seen to be extremely clean in all areas, and residents said that the home is always clean and fresh. Most bedrooms are for single use, and most have en suite toilet facilities. Some also have their own walk in showers. The home has two bathrooms with assisted baths, and a separate wet room shower, so that residents can have a choice of bath or shower. All rooms are fitted with an intercall system, which enables residents to call for help. The system also acts as an intercom, enabling staff to ask questions prior to attending to residents. The rear gardens have been pleasantly landscaped, and there are walkways and seating areas. The front has been altered to provide off road parking and seating areas, in accordance with what the residents wanted. The home has a small, but well designed, laundry room. There is also a separate sluice room which has recently been installed, with a sluice disinfector for ensuring that any commodes or bedpans used can be properly washed and disinfected.

Staffing levels are well maintained, and usually include four care staff in the mornings, (on week days), and three care staff for afternoons, evenings and at weekends. The manager sometimes carries out care duties, as this is good for keeping hands on care up to date, and for managing clinical supervision of other care staff. There is always a senior carer or manager or deputy on duty. There are two waking care staff at night.

The home has good procedures in place for recruitment, ensuring that all required checks are carried out. There is a detailed twelve week induction programme for staff, and the manager is currently working on improving this still further. This will include more shadowing of staff, and increased supervision. Over fifty per cent of care staff have achieved NVQ levels 2 or 3 in health and social care, and the home rewards staff with performance enhanced pay if they train to these standards. All mandatory training is kept up to date; and training is provided in house, to make it easier for staff to attend.

The manager keeps her own training updated, and is fully involved in the day to day care and running of the home. She has many years of experience in caring for older people, and is highly motivated in ensuring they have a good quality of life. She has completed NVQ 3, and NVQ 4 training, and the Registered Managers Award. Residents meetings are held three to four times per year, but there are also informal meetings and one to one input on a daily basis. The residents know that they have a say in the running of the home, and that their views will be taken into account. The manager provides questionnaires about different subjects on a regular basis, to enable specific feedback. The home has the Investors in People Award. An audit process has been developed for items such as fire checks, medication and new staff and residents, to see how they are fitting into the life of the home. There is an ongoing programme for ensuring effective supervision of staff; and yearly appraisals are carried out by the manager and discussed with each staff member on an individual basis.

### **What the care home does well:**

The home has good processes in place for providing information to enquirers and prospective residents.

Personal care is given according to individually assessed preferences and needs; so that residents are able to make day to day choices about how they wish to be cared for, and how they wish to spend their time.

The food is home made, and provides residents with a varied and nutritious diet.

The home is very well maintained, and kept clean and attractive, providing the residents with a pleasant and homely environment.

Staff are carefully recruited, well trained, and competent in their work. This helps residents to feel confident that they will be well cared for.

There is a strong emphasis on ensuring that residents are involved in all aspects of the running of the home, and any changes which are planned. They know that they will be listened to, and that their views will be taken into account.

### **What they could do better:**

Some aspects of medication management need to be improved. These are as follows: The controlled drugs cupboard must be fitted in accordance with legislation requirements for storage of controlled drugs, set out in the Misuse of Drugs (Safe Custody) Regulations 1973.

A system must be put in place for recording the temperature of the drugs fridge on a daily basis, to ensure that medication is being kept at the required temperatures. Hand written entries on Medication Administration Records (MAR charts) must be checked and signed by two appropriately trained staff.

It would be good practice to carry out a regular audit for the number of homely remedies in stock.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details set out on page 2.

Are there any outstanding requirements from the last inspection?

Yes

No

### Outstanding statutory requirements

These requirements were set at the last inspection. They may not have been looked at during this inspection, as a random inspection is short and focussed. The registered person must take the necessary action to comply with these requirements within the timescales set.

No.	Standard	Regulation	Requirement	Timescale for action
-----	----------	------------	-------------	----------------------

## Requirements and recommendations from this inspection

### Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action
-----	----------	------------	-------------	----------------------

### Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
1	9	13	<p>Some aspects of medication management need to be improved. These are as follows:</p> <p>The controlled drugs cupboard must be fitted in accordance with legislation requirements for storage of controlled drugs, set out in the Misuse of Drugs (Safe Custody) Regulations 1973. A system must be put in place for recording the temperature of the drugs fridge on a daily basis, to ensure that medication is being kept at the required temperatures.</p> <p>Hand written entries on Medication Administration Records (MAR charts) must be checked and signed by two appropriately trained staff.</p> <p>The registered person shall make arrangements for the recording, handling, safekeeping, safe administration, and disposal of medicines received into the care home.</p>	31/03/2009

## Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No.	Refer to Standard	Good Practice Recommendations
1	9	It would be good practice to carry out a regular audit for the use of homely remedies in the home; including the number of tablets in stock.

## Reader Information

Document Purpose:	Inspection Report
Author:	CSCI
Audience:	General Public
Further copies from:	0870 240 7535 (telephone order line)

Our duty to regulate social care services is set out in the Care Standards Act 2000. Copies of the National Minimum Standards –Care Homes for Older People can be found at [www.dh.gov.uk](http://www.dh.gov.uk) or got from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: [www.tso.co.uk/bookshop](http://www.tso.co.uk/bookshop)

## Helpline:

**Telephone:** 0845 015 0120 or 0191 233 3323

**Textphone:** 0845 015 2255 or 0191 233 3588

**Email:** [enquiries@csci.gsi.gov.uk](mailto:enquiries@csci.gsi.gov.uk)

**Web:** [www.csci.org.uk](http://www.csci.org.uk)

We want people to be able to access this information. If you would like a summary in a different format or language please contact our helpline or go to our website.

Copyright © (2009) Commission for Social Care Inspection (CSCI). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CSCI copyright, with the title and date of publication of the document specified.