

Key inspection report

Care homes for older people

Name:	Foxley Lodge
Address:	24-26 Foxley Hill Road Purley Surrey CR8 2HB

The quality rating for this care home is:	two star good service
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A quality rating is our assessment of how well a care home is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this full review a 'key' inspection.

Lead inspector:	Date:							
Alison Ford	2	1	0	4	2	0	1	0

This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

The first part of the review gives the overall quality rating for the care home:

- 3 stars - excellent
- 2 stars - good
- 1 star - adequate
- 0 star - poor

There is also a bar chart that gives a quick way of seeing the quality of care that the home provides under key areas that matter to people.

There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

Outcome area (for example Choice of home)

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

This is what people staying in this care home experience:

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Care Homes for Older People can be found at www.dh.gov.uk or bought 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

The mission of the Care Quality Commission is to make care better for people by:

- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.

Reader Information

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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Foxley Lodge
Address:	24-26 Foxley Hill Road Purley Surrey CR8 2HB
Telephone number:	02086684135
Fax number:	02086684135
Email address:	yabhee@btinternet.com
Provider web address:	

Name of registered provider(s):	Mrs Devika Abhee, Mr Yogindrananth Abhee
Name of registered manager (if applicable)	
Mr Yogindrananth Abhee	
Type of registration:	care home
Number of places registered:	22

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	0	22
Additional conditions:		
A variation has been granted to allow a maximum of three service users aged between 60 and 65 in the Dementia (DE) category to be admitted from time to time.		

Date of last inspection									
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Brief description of the care home

Foxley Lodge is registered to provide care and accommodation to elderly residents with a diagnosis of dementia. Each resident has their own bedroom, and access to spacious communal areas including two lounges, a dining room and large garden with both paved and lawn areas. There are adequate toilet and bathroom facilities to meet the needs of the current resident group. The building was previously extended to provide two single, en-suite bedrooms and two toilets. The home is situated in Purley, and well placed for road and rail links, and access to the local supermarket. It is also within reasonable easy reach of the centre of Croydon. Fees charged range from £420 - £536 per week, with different rates being applicable for those people who fund their own

Brief description of the care home

placement, as opposed to those whose placement is arranged through the local authority. Additional charges may be payable for some extras but would be discussed prior to admission.

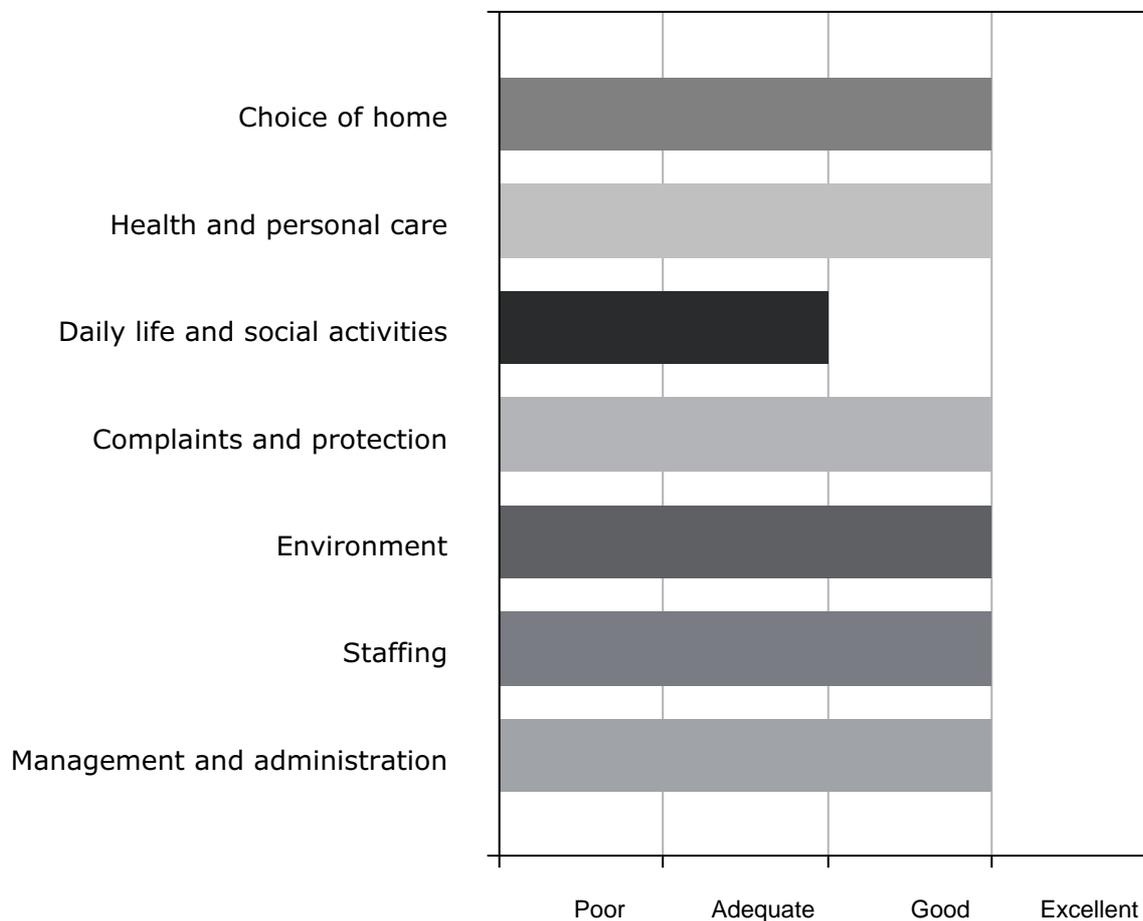
Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

two star good service

Our judgement for each outcome:



How we did our inspection:

This report follows an unannounced visit to the service. However, we have also taken into consideration other information that we have received since we last went there in August 2009. This has included comments made by people who live there and also by staff, information that we have received about things that have happened there, notifications and also what we know about how they have handled any complaints.

In addition the homes provider who is also the manager, sent us their Annual Quality Assurance Assessment (AQAA). This is a self assessment of how well the home believes that it is meeting its aims and objectives and about their plans for the future.

When we visited the home we spent time talking with the residents who live there, the staff on duty and to the manager. We undertook a tour of the premises and also looked at various records and documentation that they are required to keep as evidence of their commitment to health and safety.

What the care home does well:

Foxley Lodge provides a comfortable homely environment for up to twenty two people who have varying stages of dementia. Many of them are very confused and some have quite challenging behaviour however, they all seem to be very happy in the home, showing signs that they experience positive wellbeing in their daily lives. Those who were able to contribute to the inspection process told us that they were happy there, they liked the food and that everyone was very kind.

The registered provider also manages the home on a day to day basis. He has many years experience in working with this client group and several of his staff have worked there for some years which helps to provide residents with stability and familiarity. People have commented that "the staff are very kind and caring" and "they look after our relative very well even though this is a difficult job".

What has improved since the last inspection?

All of the requirements that were issued at the last inspection have been addressed. Parts of the home have been redecorated and new commodes purchased for those rooms without en suite facilities.

Infection control procedures have been improved and staff have undertaken training in order to increase their understanding .

Care plans have been amended to include more information about daily care routines such as what time people would like to get up in the morning.

All staff have attended mandatory training sessions which have included moving and handling training.

Much of the information that is meant for residents has now been produced in pictorial form. This has included the complaints procedure, parts of the service user guide and menus.

What they could do better:

Previous inspections highlighted a lack of activities happening in the home. Since that time work has been done to try and find out about residents interests and an activities programme has been put in place. However the sessions do not seem to be very stimulating and we have suggested that they could be more innovative. We have recommended that the manager should access some professional advice about sessions that would be suitable. Care staff could also be encouraged to see how everyday tasks such as dusting, laying the table, or putting a few plants in the garden can be a chance for interaction and a meaningful activity for people with dementia.

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 on page 4.

The report of this inspection is available from our website www.cqc.org.uk. You can get printed copies from enquiries@cqc.org.uk or by telephoning our order line 0870 240 7535.

Details of our findings

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Requirements and recommendations from this inspection

Choice of home

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the care home that includes how much they will pay and what the home provides for the money.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

No-one is admitted without having their health care needs assessed and being assured that they can be met.

Evidence:

We looked at four care plans of residents who had come to live in the home since our last inspection. We were able to see that a thorough pre admission assessment is undertaken, by the manager, and information is collated from all of the other health care professionals who have previously been involved in their care. This might include their care manager, psychiatrist, and community psychiatric nurse. A decision is then made as to whether the persons needs could be met and, if so, a care plan is devised to help staff understand the best way to support them

Relatives are encouraged to be involved in the admission process and to visit the home. There is written information available in the form of a leaflet and the Service user Guide. The latter has been amended in response to a previous requirement and

Evidence:

some of it has been produced in a pictorial format. We had some discussion with the manager about how the documentation might be made more user friendly, as currently there is a lot of information in it that is probably never read.

The home does not offer intermediate care, this standard does not apply.

Health and personal care

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People's health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it, in a safe way. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People are having their health care needs met in a way which suits them. There are policies and procedures in place to ensure the safe storage and administration of medicine.

Evidence:

Each resident has an individual care plan which identifies areas where support is needed and how they like this to be done. We looked at four of them and our judgement is that generally people's health care needs are being met in a way which suits them.

The plans are based on the information that is gathered during the initial assessment and are compiled by the manager with input from other staff members. We could see that all aspects of residents daily life had been considered and information was included about nutritional needs and preferences, moving and handling and the residents wishes in the event of serious illness or death. Consideration had been given to how they would like to spend their days with information about what time they like to get out of bed and any activities that might interest them. We could see that the

Evidence:

plans are regularly reviewed so that any changes can be addressed and that their families had been consulted during the process.

The home is visited by district nurses who are currently dressing a wound for one resident and other health care professionals such as the dentist and chiropodist also come in. Residents doctors would call as necessary. Specialist equipment would be available for anyone who needed it such as pressure relieving equipment for those who may be at risk of developing pressure sores.

We looked at the medication records and storage and found them to be in good order. The manager undertakes a weekly audit and the supplying chemist has just completed an inspection. There is a list of all of the staff who administer medication and we asked about the training that they have had. This takes the form of a formal teaching session and a period of observation by the manager until they are deemed to be competent. Currently none of the residents would be able to take responsibility for their own medication.

We observed how the staff were interacting with residents and found them to be very kind and caring. Personal care would be delivered in residents own rooms and there are both male and female staff should anyone express a preference.

Daily life and social activities

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **adequate** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Generally, people find that their daily life suits them although it judged that more could be done to provide interest and stimulation for them. They enjoy the food that is served and their visitors are always welcome.

Evidence:

We spent time talking with the people who live in the home and observing what was going on and they appear to be happy in their daily lives. There was some evidence of them being able to make choices in relation to whether they wanted to join in an activity and what they preferred to eat, and there are regular meetings which give them the opportunity to influence the way the home is run. However, most of them have advanced stages of dementia and they are happy to have some structure to their day giving them familiarity and helping them to feel safe and secure.

Previous inspections raised concerns about the lack of activities that were being organised for residents and we could see that some effort had been made to address these issues. Work has been done to try and find out what residents might like to do and there is an activities plan on the wall however, we did not consider that the sessions that have been planned were very innovative and thought that they could have been improved. In fact one of the residents refused the offer of crayons and

Evidence:

paper telling us "that's for children". Care staff, who run the sessions, might also be encouraged to see everyday interactions as activities such as offering residents the opportunity to "help" with the housework, lay the tables, or plant a few bulbs in pots in the garden.

We have recommended that the manager should consider how he might access some professional advice and support about how residents could be offered activities which interest and stimulate them.

The lunchtime meal was served while we were in the home. Traditional British food is cooked although some people like to have curry or rice and this is prepared for them. Their choices are made from a menu the day before although they may not remember what they ordered however, this did not seem to be a problem. The meal seemed to be an enjoyable occasion, tables were nicely set, everyone had a drink and there was help for those who needed it.

There were no visitors during our inspection but some relatives had returned our survey forms. All of the comments that we received were positive, telling us that staff were welcoming and pleasant when they came in to the home.

Complaints and protection

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

If people have concerns with their care, they or people close to them know how to complain. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

There is a complaints procedure in place which ensures that any concerns are addressed promptly.

Evidence:

The home has a complaints procedure in place which complies with the regulations. It is displayed in the hall and is also contained within the service user guide which is in every residents bedroom. The completed survey forms that we received indicated that people would not have any worries about raising their concerns with the manager and were sure that they would be addressed. In response to a previous requirement the procedure has also been produced in a pictorial format.

All of the staff that we spoke with had received training in recognising and reporting suspected abuse. They were aware of the procedures to be followed and knew how to access details of people that they might need to contact. Recruitment procedures include checks to ensure that those who have been judged as not being suitable to work with vulnerable adults are prevented from doing so.

There have not been any complaints about this service since the last inspection.

Environment

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People stay in a safe and well-maintained home that is homely, clean, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home provides a safe and well maintained environment for those who live there.

Evidence:

The home is located in a residential area and is close to shops and local amenities. There are adequate communal areas with a separate dining room and the lounge looks out over a large garden. All of the residents bedrooms are for single occupancy and the majority have en-suite facilities. Stairs are fitted with stair lifts and there are handrails along the walls.

We walked around the home which was clean and tidy. Given the continence problems of many of the residents we found that most areas were free from any unpleasant odours. Residents bedrooms are nicely decorated and new commodes have been purchased for the four without en-suites. We were disappointed to see that several of the bedrooms have few possessions that belong to the residents, which would help them with reality orientation. The manager knows how useful this would be however, told us that often it is quite difficult to encourage relatives to help do this.

As well as en suite facilities there are communal bathrooms and toilets throughout the home which have adaptations to help those with reduced mobility. Some of these have been upgraded since our last visit.

Evidence:

There is an ongoing programme of redecoration in place and bedrooms are decorated whenever they become vacant.

All staff have received training in infection control and previous requirements regarding the availability of equipment have been addressed.

Staffing

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have safe and appropriate support as there are enough competent staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

There are sufficient numbers of appropriately trained staff on duty at all times, in order to meet the needs of those people who use the service.

Evidence:

When we visited there were three staff members on duty as well as the Registered Provider, who is also the manager and has a nursing qualification. We are told that this is the usual staffing ratio in addition to the domestic and catering staff. We could see that this level of staffing allows them time to spend with the residents who were not being rushed or hurried.

All of the staff that we spoke with were pleasant and friendly and the surveys that we had received told us that people found them to be very kind and caring. We could see that they interacted well with residents who were relaxed and happy.

We were shown the training plans for staff and were able to see that they had all been able to attend mandatory courses yearly and various other topics had as well in order to help them meet the needs of the people that they were supporting. All new staff complete an induction programme as recommended by Skills For Care. Two thirds of the care staff have achieved an NVQ level 2 and the manager is aware of the need to encourage the others to undertake this qualification.

Evidence:

Robust recruitment processes are in place to ensure that this people who have been judged as being unsuitable to be working with vulnerable adults are prevented from doing so. We looked at the personnel files of carers employed since our last inspection and they contained all of the information as required by the regulations. One new member of staff has recently been employed and it is hoped that she might become the registered manager in the future.

Management and administration

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have confidence in the care home because it is led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately with an open approach that makes them feel valued and respected. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home is owned and managed by a person who is fit to be in charge and health and safety practices ensure that peoples welfare is protected.

Evidence:

The home is managed by the provider Mr Abhee, and has been since it opened in 1997. He is a trained nurse with additional qualifications and has many years experience in working with this client group. He spends a great deal of time in the home and works alongside the care staff. As we walked around it was evident that residents like him and feel relaxed in his company.

In order to monitor the standard of care in the home and to ensure that it is meeting the needs if the residents, there are regular residents and relatives meetings and also a yearly quality assurance survey. We were able to see the results in a folder although we did suggest that they might be collated and put up for everyone who came into the home to see.

Evidence:

The home does not take responsibility for the money of any of the residents, all of them have family or representatives to do this for them.

Health and safety practices in the home ensure the safety of both residents and staff. Records are kept of accidents, hot water temperatures, fire safety checks etc and all equipment is maintained as recommended by the manufacturer. Fire drills take place every three months although we did recommend that some of these should be solely for night staff as the problems that they encountered would be different.

We are always notified of any untoward incidents that occur in the home.

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards.

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

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	12	It is recommended that advice should be taken regarding improving the range of activities that are offered to people.
2	38	It is recommended that some fire drill should be held during the night shift when there are reduced numbers of staff available.

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.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.

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