

Villa Scalabrini

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Inspection report

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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

The inspection took place on 13 July 2017 and was unannounced.

Villa Scalabrini provides accommodation for up to 49 people with residential and dementia needs. It does not provide nursing care. At the time of this inspection there were 47 people living at Villa Scalabrini.

There was a manager in post who was registered with CQC. 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.

When we last inspected the service on 9 June 2017 we found the provider was meeting the regulations. At this inspection we found that the provider was continuing to meet the regulations.

People told us they felt safe living at Villa Scalabrini. Staff demonstrated they knew how to keep people safe and risks to people's safety and well-being were assessed and kept under regular review to help to keep them safe. People's medicines were managed safely, by staff who had received training.

People had their needs met in a timely way and we observed there were sufficient numbers of staff who had the right skills and experience to support people safely. There was a robust recruitment process in place. This helped to ensure that staff who were employed at the service were suitable to work in a care setting.

Staff received regular support from their line managers which included one to one supervision and team meetings. Staff told us they felt well supported.

People received the assistance they needed to eat and drink sufficient amounts to maintain their health. People were supported to access healthcare professionals when required.

People and their relatives were positive about the staff and management at the service. We observed staff to be kind and caring. Staff were knowledgeable about people's individual requirements in relation to their care and support needs and preferences.

People and or their relatives had been involved in the planning of their care where they were able to and where this was appropriate. Visitors were welcomed to the home at all times and were invited to join in events and celebrations throughout the year.

People were supported to participate in a range of varied activities that were provided. There were arrangements in place to receive feedback from people who used the service and their relatives.

People were able to raise any concerns they had and told us that in most cases they were confident they

would be listened to and any concerns would be addressed.

There were systems and processes in place to regularly monitor the quality of the care and support provided for people who used the service. Plans were in place to make continual improvements.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe? The service remains good.	Good ●
Is the service effective? The service remains good.	Good ●
Is the service caring? The service remains good.	Good ●
Is the service responsive? The service remains good.	Good ●
Is the service well-led? The service remains good.	Good ●

Villa Scalabrini

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 was planned to check 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.'

The inspection took place on 13 July 2017, was unannounced and undertaken by one inspector.

Before our inspection we reviewed information we held about the service including statutory notifications that had been submitted. Statutory notifications include information about important events which the provider is required to send us. We also reviewed the provider information return (PIR) submitted to us in January 2017. This is information that the provider is required to send to us, which gives us some key information about the service and tells us what the service does well and any improvements they plan to make.

During the inspection we observed staff supporting people who used the service. We spoke with two people who used the service, two relatives and received emailed feedback from a further six relatives of people who used the service to obtain their feedback on how people were supported to live their lives. four care staff, the deputy manager and a director. the registered manager was not at the service. We spoke with relatives.

We received feedback from commissioning staff. We also used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed care records relating to four people who used the service, three staff recruitment records and other documents relating to people's health and well-being. These included staff training records, medication records and quality monitoring audits.

Is the service safe?

Our findings

People who used the service and their relatives told us they felt safe living at Villa Scalabrini. A relative of a person who used the service told us "I have never had any concerns about [name] safety here, there are always enough staff and [person] would say if there were any concerns. Another family member told us, "I have always felt reassured, they [staff] are very good here and they always keep you informed of any events or if they need to report any changes with [name] condition." There was a keypad on the door so people could exit the building safely if they wanted to.

People were supported by staff who had been trained in safeguarding and who demonstrated that they knew how to identify potential abuse and the process for reporting and elevating concerns.

Risks were assessed to help keep people safe. Where an individual risk was identified actions were put in place to help mitigate and reduce risks. Staff were able to explain how they kept people safe. For example, in relation to moving and handling people and helping reduce the risks of falls by putting measures in place such as walking aids and the use of mechanical hoists to help transfer people safely.

Staff had been recruited through a robust recruitment process in which the provider had completed pre-employment checks in advance of staff starting work at the service. We saw that there were sufficient numbers of suitably qualified and experienced staff available to meet people's needs in a timely way.

People received their medicines regularly and in accordance with the prescriber's instructions. Medicines were ordered on a 28 day cycle and checked in by two staff when the medicines were delivered to the service. Staff checked and signed to confirm the correct quantities of medicines had been received. Medicines were stored correctly and stock amounts were checked daily. Staff had received training and had their competencies checked. We checked a sample of medicines and found these to be correctly recorded. Medicine administration records (MAR) sheets were completed accurately.

Is the service effective?

Our findings

People were supported by staff who had received training and regular support to help them provide effective care and support to people who used the service. A relative told us, "I think the staff are great here, I have had experience of other homes before [name] came here and I don't think we could ask for better staff". Another family member said "The staff definitely know what they are doing and there are plenty of them too. I am sure they are well supported from what I can see when I visit."

Staff received training and support relevant to their roles and responsibilities. We saw that staff had an induction when they commenced their employment at the service. They then had regular training in topics such as moving and handling, fire safety and the safe administration of medicines. They had their competencies checked. Had work based observations and shadowed more experienced staff until they were competent to work in an unsupervised capacity. Staff could attend specialist training such as dementia care. Staff were supported by the 'home improvement nurse' who visited the home at the request of the registered manager to help with staff development in topics such as skin integrity, falls prevention and diabetes. Staff received individual and group supervision and felt they were listened to.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). People using the service had their capacity to make decisions and consent to their care assessed appropriately under the MCA. DoLS applications had been submitted to the local authority and some were pending authorisation at the time of our inspection. Staff demonstrated they understood MCA and DoLS and how this applied to the people they supported. People were supported to make decisions where they were able and given choices.

People were supported to eat and drink a healthy and varied diet to maintain their health and well-being. People were offered a choice of foods and staff told us special dietary needs were catered for such as diabetes, soft or vegetarian diet. People were weighed monthly and if any concerns noted these were appropriately elevated to professional for support and on-going management.

People were supported to access a range of healthcare professionals when required either at the home or by attending appointments such as Hospital or clinic appointments. Staff told us that the GP visited the home every week and by request if people needed to be seen on a particular day.

Is the service caring?

Our findings

People were supported by staff who were kind, caring and inclusive. We observed staff to be kind when interacting with people. For example staff stopped and spent time with people and never passed by anyone without sharing some sort of communication. We observed positive interactions between staff and people from senior management to the most junior member of staff.

People's relatives gave us very positive feedback and told us that staff were kind and caring towards the people who lived at Villa Scalabrini. One relative told us, "[Name] quality of life has improved as has their health and, as far as I am concerned, I am extremely satisfied with all the provisions and would recommend this care home". Another relative told us "I would like to say that the staff at Villa Scalabrini treat [Name] with the utmost respect and the staff are so kind and very sensitive to my [relatives] needs. Another relative told us "we are blessed to have [Name] at such a wonderful home".

People were involved in the planning of their care where they were able to. If they were unable to contribute, relatives and family members were invited to do so. We saw that where people lacked capacity relatives along with social care professionals were involved in making best interest decisions appropriately on their behalf and this was clearly recorded in people's care records.

People's dignity and privacy was maintained and respected by staff. One family member told us "The staff are attentive to their needs, polite and treat them with dignity at all times". Staff confirmed to us measures they put in place when supporting people with personal care such as ensuring the person's body was covered and that doors and curtains were kept closed.

People's relatives were able to visit the home anytime and we saw that during our inspection visitors came at all times including several family members who were welcome to join their relative for lunch. Staff told us people's relatives were involved in many social events they hosted including celebrations for people's birthdays, a summer barbecue, and other festivities throughout the year. Relatives we spoke with confirmed they were very welcome and involved with events.

Is the service responsive?

Our findings

People were supported by staff who demonstrated that they knew people well and understood their day to day needs as well as being responsive to their changing needs.

People's care records contained detailed information about their daily routines, preferences and how people wished to be supported. This detailed information enabled staff to provide people with the support they needed, whilst still encouraging people to retain some independence and control over their lives by supporting them to continue to do the things they could still manage. When people's needs changed the provider had a flexible approach and could respond for example if a person required additional support, or a piece of equipment this was addressed through referral to the appropriate professional team.

We observed that people were supported to participate in meaningful activities suited to their individual abilities and interests. People who preferred to spend time in their bedrooms were engaged in conversation, individual pampering and reminiscence. During our inspection we observed people were engaged in a 'sensory' stimulation sessions involving plants and shrubs.

Complaints were investigated and appropriately responded to in a timely way. We saw that complaints were analysed to help support learning and improvement. People's relatives told us they felt their views on the service were obtained and that they were listened too. Feedback was sought through regular dialogue and residents meetings which were regularly held.

Is the service well-led?

Our findings

People gave positive feedback about how the home was managed and run. 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.

People who used the service and relatives felt valued and told us they were treated as individuals. Staff also confirmed they were motivated and valued and had clear roles and responsibilities. One staff member told us "We are all very well supported, [name] is aware of everything that goes on in the home". A relative told us "Yes we see [name] at various times, they are always about and do make themselves available if we need to speak with them".

The registered manager and the management team promoted a positive and inclusive culture within the service, and people, their relatives and staff felt they were involved in all aspects and development of the home, and that their views were taken into account. We saw that minutes were recorded so that there was a record of discussions and actions completed. This also supported an environment where individuals were accountable for their actions.

The provider had quality assurance systems in place to monitor and assess the overall safety and quality of the service. Audits were completed in a variety of areas of the home including medicines, health & safety and the maintenance of the home. We saw that many of the audits that were in place were the same as the key domains that CQC inspect against (Safe, effective, caring, responsive and well-led). Any improvements that were required, an action was put in place to address the issue and records reviewed confirmed that these were acted upon promptly. For example, people had requested meal times be changed and this was implemented to go with the majority and people who wished to eat at alternative times were served at a time that suited them.

We observed and people, relatives and staff confirmed that the home's management team were open and transparent and that they kept everyone informed of any changes they were planning to make. We saw that many plans had been discussed for the future improvements of the service.

Providers are required to notify CQC of significant events that happen at the service. The registered manager notified us of such events to assist us in the overall monitoring of the service.