

Trafalgar Healthcare Limited

Auburn Mere

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

Auburn Mere provides accommodation and personal care for up to 37 older people, some of whom may live with dementia. There were 36 people living in the home at the time of the inspection.

This unannounced inspection took place on 18 December 2018.

There was a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission 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.

At our last inspection we rated the service Good. At this inspection we found the evidence continued to support the rating of Good overall. There was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. We have written this inspection report in a shorter format because our overall rating of the service has not changed since our last inspection.

People continued to receive a safe service. Staff demonstrated how they protected people from potential abuse and harm. Risk assessments were in place and had been regularly reviewed so staff were aware of what measures were in place to reduce risks to people. There were enough staff with the correct skills and experience to ensure that people's needs were met in a timely way.

Recruitment checks were completed to ensure staff were suitable to work at Auburn Mere. People received their medicines as prescribed, and at regular intervals. Accidents and incidents were monitored so that any learning could be implemented to help reduce the risk of a reoccurrence.

People continued to receive an effective service. Staff received training and support which gave them the skills and knowledge they required to provide people with care and support that was effective. People were supported to have maximum choice and staff obtained their consent before supporting them.

Staff supported people to eat and drink a sufficiently balanced diet to maintain their health and wellbeing. People were supported to access a range of healthcare professionals and services when required.

People continued to receive care and support from staff who were kind and caring. Staff were patient and compassionate when supporting people and provided reassurance when required. Staff respected people's privacy and dignity. They knew people well and supported people to be as independent as possible. People's families and visitors were welcomed at all times.

People continued to receive a service that was responsive to their needs. People and their families were involved in the development, planning and review of their care and support. Support plans were personalised and included information about people's life histories and what was important to them.

People were supported to participate in various activities both in the home and also in the community. People and their families knew how to raise a concern and were confident if they needed to complain it would be dealt with appropriately.

The service continued to be well-led, by the registered manager who was open, transparent and provided hands-on leadership. People were at the heart of the service and staff were motivated to provide them with a good quality service. There was a range of quality assurance systems in place which monitored all aspects of the service for quality. Actions were in place to address any shortfalls identified. The provider sought the views of people, their relatives and staff and these views were taken into account to help drive improvements.

Further information is in the detailed findings below.

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.

Auburn Mere

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 was meeting the legal requirements and regulations associated with the Health and Social Care Act 2012, to look at the overall quality of the service and to provide a rating for the service under the Care Act 2014.

The inspection was unannounced and carried out by one inspector. Before the inspection, we reviewed all the information we held about the service. This included a Provider Information Return (PIR). This is a form that requires the provider to give some key information about the service, what the service does well and improvements they plan to make. Other information reviewed was statutory notifications. Statutory notifications include information about important events that happen at the service which the provider is required to send us.

During the inspection we spoke with four people who lived at the home and two relatives. We received emailed feedback from a further three relatives. We spoke with seven staff members which included two care staff, two activities staff, the administrator, deputy manager and the registered manager.

We reviewed the latest local authority commissioner's report. We looked at care plans relating to three people who lived at the home. We observed people in communal areas of the home, including lunch service in the dining room and used the Short Observational Framework for Inspection (SOFI). SOFI is a specific way of observing care to help us understand the experience of people who lived at the home who were unable to provide verbal feedback.

Is the service safe?

Our findings

People continued to receive safe care, and told us they felt safe living at Auburn Mere. One person told us, "I feel safe, I feel reassured knowing there are people and staff around all the time. If I need help I only have to ask." One relative told us, "I certainly feel that the people who reside here are safe. I visit regularly and see how [staff] look after people's safety and wellbeing."

Staff were aware of how to protect people from the risk of harm. We observed safeguarding information placed strategically around the home as a reminder of the process to follow should anyone have any concerns. One relative told us, "I am confident that [family member] is safe at Auburn Mere and that staff are aware of reporting any concerns."

Staff were aware of the procedures to follow if they suspected anyone was at risk of abuse. One staff member told us "I would report anything immediately to the manager or senior person in charge. I would have no hesitation what so ever." Staff had regular refresher training relating to safeguarding to keep them updated with any changes.

Risk assessments were completed by the registered and were regularly reviewed to ensure the information was still relevant. Any risk identified had measures put in place to help reduce the risk. The risk assessment provided staff with the information they needed to reduce risks to people to help keep them safe. People were encouraged and supported to remain as independent as possible, for example to still manage to do everyday living tasks themselves if they were able.

There were robust recruitment procedures in place to ensure that new staff were suitable to work at this type of service. The registered manager carried out all the required checks, including a criminal record check (CRB) and references. There were adequate numbers of staff deployed to assist people in a timely way. Staff supported people in an unhurried way which helped maintain their safety.

Medicines were managed safely. People received their medicines regularly from staff who had received training in the administration of medicines and had their competencies checked. One person told us, "The staff give me my medicines, I am not sure what these are for but I am sure they are doing some good."

One relative told us, "I'm sure that medicines are administered on time and correctly." We observed staff administering medicines and saw that they checked all the details before administering the medicines. We noted that regular audits were completed to check the medicines had been correctly administered and recorded on the medicine administration record. We checked the stock balance of a random sample of medicines and found they all tallied with the record.

Staff completed training in infection control procedures. The registered manager ensured there was personal protective equipment (PPE) available and that staff used this when they supported people with personal care.

Accidents and incidents were recorded so that any patterns could be identified and any learning from such

events could be implemented to reduce the risk of a reoccurrence. For example falls were recorded and considered in terms of time, place, staff on duty and any mitigating circumstances.

People were protected from the risk of fire, and staff had received training. People had individual assessments completed(PEEPs). Personal emergency evacuation plans. The fire alarm was checked weekly along with equipment such as fire extinguishers and equipment.

Is the service effective?

Our findings

People continued to receive an effective service. Staff from Auburn Mere completed a detailed pre-assessment to ensure they fully knew the needs of people and could meet their needs before they moved in to the home.

Staff completed an induction and an ongoing training plan was in place to help ensure staff retained the skills required to do their jobs well. Staff were trained in a range of topics. Staff received regular support from the registered manager and the management team. This included individual supervision meetings and appraisals which enabled them to discuss any development needs, their performance or any other work related topics. Staff were invited to attend team meetings and to contribute to the agenda. Work based competencies were also completed.

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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether staff were working within the principles of the MCA, and found they were. Staff had received training and had a good understanding of the ways in which this legislation related to their everyday work. Staff gave people choices, involved them in decision making, and asked for consent before providing care and support to the person.

People were supported to eat and drink a nutritionally balanced diet. Staff provided people with appropriate assistance which was both respectful and dignified. People were offered a choice of food from the main menu, and alternatives. They could also choose where they ate their meals and were offered second helpings. One person told us, "I like the food here it is almost like home cooked." One relative told us, "The food here is very good, always served hot, plenty of it and they are given choices". We noted that specialist diets were catered for if required including a vegetarian option, soft and pureed foods and culturally appropriate options.

People were supported to access health care services and professionals when required. Staff told us that they supported people to attend hospital or healthcare appointments if family were unable to assist. GPs and district nurses visited the home regularly as well as opticians, chiropodists and dental practitioners when required. This helped to ensure people's health and wellbeing was maintained.

Records were kept detailing any medical interventions, so that all staff were aware of people's current health conditions. This included any treatment they were receiving, for example if a person was taking an anti-biotic for an infection.

Following any hospital admissions people's needs were reassessed before returning to the home to make sure the service could fully meet the person's needs.

Is the service caring?

Our findings

People continued to receive a caring service from staff who demonstrated they were patient, knew people well and took the time to support people at their own pace.

People and their relatives told us they thought staff were kind. One person told us, "I like living here, I like the company and my personal space. I have brought a lot of personal items from home so it is familiar. The staff are very kind to me." Another person told us, "Staff are kind, they are all lovely and help me with my anything I can't manage on my own." One relative told us, "There is a homely feel at the home. It has a lovely ambience and there is a happy atmosphere."

Another relative told us, "We have been very satisfied with the care [Family member] receives and some of the care staff are very special and really go the extra mile! My [Family member] really likes some of them and tells this to us when we visit. We are always made welcome by the care staff and offered drinks. Staff helped to move [Family member] to a different room, which helped them settle in. We receive regular phone calls from the care staff so we are kept informed of any issues in a timely way."

Staff made people feel they mattered. Staff spoke with people whenever they passed them in a communal area. Staff sat with people during lunch which made the experience much more sociable and people clearly enjoyed the experience. On the day of our inspection some visitors had joined people for Christmas lunch, again adding to their enjoyment.

People thought the staff knew them well. One person told us, "Yes I think they know the routine. They do ask if I want my cup of tea and give me time to have that before assisting me with other things. I think they are lovely." Staff knew people well. For example, we saw a person looking a little distressed. A staff member approached them, sat down and asked if they were alright. After a few minutes the staff member left then came back with a cup of tea. The person appeared much happier and more relaxed. The staff member told us "[Name] often gets a little upset. They just need a bit of reassurance from a familiar face and they are fine."

It was clear that staff enjoyed working at Auburn Mere. One member of staff told us "This is by far the best place I have ever worked. I really enjoy coming in to work here. I like chatting with the residents, helping them in the way I would want my family to be assisted. Just being kind to people, it makes such a difference to their daily living. Yes, I think the most important thing is being able to make a positive difference."

People and staff got on well together. We saw people moving around the building freely, stopping along the way to have a chat. This included positive interactions with the registered manager. The relationships between people and staff were friendly, caring and compassionate.

People told us that staff respected their privacy and dignity at all times. One person told us, "They respect your privacy and dignity when they help with bathing. They always keep me covered up and have a chat, they make me feel comfortable." One relative told us, "Staff interact with residents in an appropriate and

considerate way. They are professional but very approachable. They have the right approach and treat people as individuals. Some people are tactile, while others are less so and the staff here do recognise this."

People were encouraged and supported to have positive relationships with their families and friends, who were regularly invited to the home for meals and events.

People were fully involved as much as possible in making their own decisions about their care. We saw that family members were also fully involved in the review of their care, where this was appropriate.

Is the service responsive?

Our findings

People continued to receive a service that was responsive to their changing needs. People and their relatives were fully involved in the planning and review of their care and support.

Support plans were very detailed and included information about what was important to the person, for example their life histories, interests and likes and dislikes. People had been asked to think about 'advanced planning' to ensure any specific end of life wishes were known to staff. People were cared for in the home if this was their end of life preference.

One family member told us, "I feel I have been fully involved and am always consulted about any proposed changes." People and their relatives told us they felt their views were valued and felt they were listened to. One family member told us, "[Staff] have been hugely supportive to me as well as my [family member]."

Staff took time to understand the best way to support each person. For example, by ensuring that people were able to communicate effectively. There were a lot of pictures and prompts to assist people where they had difficulty with verbal communication. The corridors were appropriately decorated with objects that people recognised and could relate to, for example names of places in London.

All of the relatives that provided feedback about their family member's experience at Auburn Mere were very positive about the care and support their family members received. One relative told us, "Staff provide a very flexible approach to people's support, which is important. It is clear they treat people as an individual and accommodate any changes. For example, I know that sometimes [Name] does not want to get up or get ready for the day. The staff will always respect that and will come back later."

Staff worked hard to arrange opportunities for people to be involved in meaningful activities. We saw that there was a full activities schedule with two or three different activities daily. In addition, an external company visited the home weekly to engage people in things that were of interest to them. People were also supported to do things in the community such as shopping and visits for example during the summer people enjoyed days out at the seaside.

A relative told us, "I think the staff are extremely geared towards helping [family member] get the most out of every day." Another relative told us "There is a good selection of activities and entertainment. The staff who support the activities are very adventurous and conscientious. They are always trying new things, and they make sure as many people as want to get involved. They tailor the activity to people's differing abilities."

The provider had a robust comments and complaints process in place so that people could raise concerns if they needed to. We saw that people and their family members were invited to attend regular 'residents' meetings' where they were invited to discuss topics relating to the home. People and their relatives told us that they could always raise any concerns with the management team and felt that they addressed any concerns without the need to make a formal complaint. One relative told us, "If I had any complaints I would speak to the registered manager or deputy manager who are both very approachable and helpful."

Is the service well-led?

Our findings

The service continued to be well-led by a management team that was inclusive, with a person-centred culture. One person told us, "The service is well managed. The managers are all hands-on, and visible around the home. They are approachable and always take time to acknowledge you." During our inspection we experienced a positive and calm atmosphere at the home and saw that people, staff and visitors were all comfortable to approach the management team. There was a registered manager in place.

One relative told us, "I feel I can always speak to the [registered] manager whenever I need to and the staff are approachable and helpful. Another relative told us, "The registered manager is extremely caring, and works hard to ensure staff employed are the service embrace the culture of the home." The provider and registered manager had a clear vision and strategy and staff were fully involved. One staff member told us "I feel valued and motivated working at Auburn Mere. I know that we provide a good service to people and that is down to the service being well managed."

The manager and the provider worked closely with other professionals and with the local authority. This included raising safeguarding alerts and liaising with social work teams and other professionals when appropriate, to ensure people's safety.

There was a range of quality assurance processes in place to continually monitor the quality and safety of the service. People were also asked their views of the service and their feedback was taken into account to continually improve the service. Questionnaires were given to people to obtain their views on different aspects of the service for example food, activities, and staffing levels. One family member told us "We have been very satisfied with the care and facilities offered at Auburn Mere and have been pleased to get to know the staff and other residents. We always feel welcome and appreciate being able to visit whenever we choose. Most of all, I feel confident that my [family member] is safe and being well cared for."

The registered manager and senior staff carried out audits on various aspects of the service, such as care plans, risk assessments, completion of records relating to medicine management, and health and safety, to check that staff were following the correct procedures. This ensured that the service continued to learn and improve.