

Albany Care Limited

Albany House - Doncaster

Inspection report

5 Woodlands Road
Woodlands
Doncaster
South Yorkshire
DN6 7JX

Tel: 01302723203
Website: www.albanycare.co.uk

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Albany House – Doncaster is a residential care home providing personal care and accommodation for up to 40 people. There are two areas of the home, with one of the units specialising in supporting people living with a more advanced stage of dementia. At the time of our inspection there were 26 people living in the home.

People's experience of using this service:

A new manager had registered with CQC since the last inspection and they had worked with the provider in addressing the shortfalls identified at the last inspection and to make further improvements in the service. Improvements had been made in cleanliness and infection control and we were assured the service were following safe infection prevention and control procedures to keep people safe. The provider had ensured staff knew what to do in the event of a fire. Improvements had also been made to the effectiveness of the quality and safety audits, so appropriate governance and quality assurance systems were in place to monitor and improve the service.

Relatives told us people felt safe and happy with the staff who cared for them. We saw risks were well managed, and people's medicines were managed safely. Staff had a good understanding of how to safeguard people from abuse and there were enough staff to meet people's needs and keep them safe.

We received very positive feedback about the management and leadership of the service from people we spoke with. This included people's relatives, staff and other professionals. One relative said, "[The registered manager] is amazing." The feedback we received also showed the service worked creatively to help people keep in touch with their friends and families during the COVID-19 pandemic. It was also evident the team worked well in partnership with other professionals to provide a person centred service that met people's needs.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update:

The last rating for this service was requires improvement (published 10 April 2019) and there were breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of the regulations.

Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection. Additionally, the inspection looked at the Infection Prevention and Control (IPC) practices the provider has in place. This is because, as part of CQC's response to care homes with outbreaks of coronavirus, we are conducting reviews to ensure the IPC practice was safe, and the service was compliant with IPC measures.

We reviewed the information we held about the service. We did not inspect other key questions as no areas of concern were identified in them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has changed from requires improvement to good.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Albany House Care Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Is the service well-led?

Good ●

The service was well led.

Albany House - Doncaster

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

This inspection was carried out by one inspector.

Service and service type: Albany House is a care home. People in care homes receive accommodation and personal care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

We gave the service 24 hours' notice of the inspection because we wanted to ensure that managers would be available to support our inspection visit. Inspection activity started on 4 November and ended on 16 November 2020. We undertook a site visit to the home on 4 November and held on-line meetings with members of the management team on 4 November and 16 November 2020.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from professionals who work with the service, including Doncaster local authority. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with the nominated individual, the deputy manager a senior carer two care workers and a laundry assistant during the inspection visit. Due to the COVID restrictions we met and spoke with one person who used the service . Further inspection activity was completed by telephone and email. This included speaking with four people's relatives about their experience of the care provided. We maintained contact with the registered manager by telephone, e-mail and on-line meetings throughout the inspection process.

We reviewed a range of information sent to us by the service. This included specific risk assessments and the related care plans for two people. We reviewed records of staff training and supervision including fire drills. We looked at the COVID-19 risk assessment for the service, quality assurance and safety audits, including recent infection control and medicines audits, and all the associated action plans. We saw monitoring records kept and analysed by the registered manager, related to areas of risk, such falls. We also saw the annual quality survey feedback and minutes of recent staff meetings.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Preventing and controlling infection

- At our last inspection in March 2019 we found not all equipment, such as toilet seats and commodes, were sufficiently clean. At this inspection we completed a tour of the home and found the registered manager had introduced improvements, ensuring the premises and equipment were clean.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider's infection prevention and control policy was up to date.

Assessing risk, safety monitoring and management

At our last inspection we found the provider had not ensured that people and staff took part in regular fire evacuation. At that time, we recommended the provider ensured they understand their legal responsibilities and followed guidance laid out in The Regulatory Reform (Fire Safety) Order 2005 or "the Fire Safety Order".

- At this inspection we found the provider was clear of their responsibilities under the "Fire Safety Order" and fire evacuation drills were undertaken. Staff received appropriate guidance and training in relation to fire prevention.
- The provider assessed the risks to people and plans put in place to ensure the risks were managed and mitigated, without overly restricting people's freedom. For instance, people who preferred to spend time in communal areas were able to move around freely in designated areas. This was managed in a way that reduced the risk of the spread of COVID-19 within the home.
- Relatives spoke positively of the safe care provided. One person's relative praised the staff for their care in ensuring their loved one's safety and preserving their dignity. They said there had been an improvement in the person's weight and personal hygiene since living in the home. They concluded, "I can't fault the team."

Systems and processes to safeguard people from the risk of abuse

- The provider continued to ensure systems and processes protected people from the risk of abuse.
- Staff remained well-trained with regard to safeguarding and knew how to deal with issues relating to people's safety. People told us they felt safe living in the home.

Staffing and recruitment

- The provider continued to ensure the safe recruitment of staff. This included obtaining pre-employment checks prior to people commencing employment.
- There were enough staff to support people safely, to ensure their needs were met and to engage with people in a positive and meaningful way.

Using medicines safely

- Staff who administered medicines received appropriate training and had their competency to do so, verified through observations.
- Regular medicines audits were undertaken. These showed action was taken to address any issues or shortfalls identified.
- The audit information we saw also provided evidence that people received their medicines on time and when they needed them.

Learning lessons when things go wrong

- The registered manager monitored accidents, incidents and risks closely to identify trends and patterns.
- The provider responded to accidents and incidents, lessons were learned, and measures were put in place to help minimise reoccurrences.

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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care

At our last inspection we found the provider had failed to robustly and effectively assess, monitor and improve the quality and safety of the service provided to people. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- There was a registered manager who came into post after the last inspection. The registered manager was clear about their roles and responsibilities and were well supported by the deputy manager. The staff we spoke with were clear about their roles.
- Regular quality and safety audits took place and the outcome of these audits were fed into the provider's quality improvement process. The audits had been strengthened since the last inspection and identified areas of improvement effectively. Where concerns were identified, action plans were devised to ensure issues were addressed promptly.
- We received feedback from the local authority that positive improvement had been made since the registered manager had come into post. This included that cleanliness had improved. The contracts team told us an infection control nurse specialist visited the home in May 2020. Although some recommendations were made, no major issues were identified.
- The provider had included the recommendations in their ongoing improvement programme for the building and had made good progress with improvements to the environment and décor.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- All feedback from relatives was positive. One relative told us, "I've always been very satisfied with the service. I'm very happy with the staff. They are lovely with [person] and [person] gives them a right nice smile. That shows me [person] is happy and comfortable with them. They are brilliant. "
- The registered manager and staff were very open during inspection process. Staff said the service had improved since the last inspection. They told us the staff team worked well together and communication between staff had improved.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care: 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

- Relatives we spoke with told us they understood why there had to be restrictions on visiting due to the pandemic. They said the service helped people keep in touch in various of ways. For instance, one relative said, "In the better weather I was able to see [person] as we had garden visits and window visits. "
- The service had set up a private social media group for relatives. This helped to keep relatives updated about the care and welfare of their loved ones and for chat and feedback. One relative said, "We have a Facebook group and it feels good I can see pictures of [person]. They look happy." They added, "[The registered manager] is amazing". Another relative told us they were kept up to date via letters and photos.
- We saw annual surveys were carried out to gain people's, relatives' and staffs' views and the registered manager used this feedback to improve the service.
- Staff meetings were held regularly, and the minutes were made available to staff who had not been able to attend.
- The registered manager understood the requirements of the regulations to make notifications and to comply with duty of candour responsibilities when things had gone wrong. The provider informed CQC of significant events at the service, as required by the regulations.

Working in partnership with others

- The service helped people to maintain links in their local community, in line with COVID guidelines.
- The service worked closely with other health and social care professionals to ensure people received consistent and timely care. This included family members, social workers, nurses and GPs.