



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for older people

Name:	Abbeyfield House
Address:	California Road New Malden Surrey KT3 3RL

The quality rating for this care home is:

three star excellent service

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.

Lead inspector:	Date:
Jon Fry	1 1 1 1 2 0 0 8

This is a report of an inspection where we looked at how well this care home is meeting the needs of people who use it. 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.

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

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- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Our duty to regulate social care services is set out in the Care Standards Act 2000.

Reader Information

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Information about the care home

Name of care home:	Abbeyfield House
Address:	California Road New Malden Surrey KT3 3RL
Telephone number:	02089490022
Fax number:	02089490027
Email address:	k.nash@abbeyfield.com
Provider web address:	

Name of registered provider(s):	Abbeyfield UK
Type of registration:	care home
Number of places registered:	36

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	1	36
Additional conditions:		
As agreed on the 19th October 2006, one (1) place for a service user under the age of 65 with dementia can be accommodated.		
Date of last inspection		

Brief description of the care home
Abbeyfield House is a care home providing personal care and accommodation for 36 older people who have dementia. It is owned and managed by the Abbeyfield Society, a charitable organisation. The home is located between New Malden and Kingston, close to bus routes, shops and other amenities. Information about the home is available in the Statement of Purpose and Service User Guide. Fees range from £864 to £903 per week.

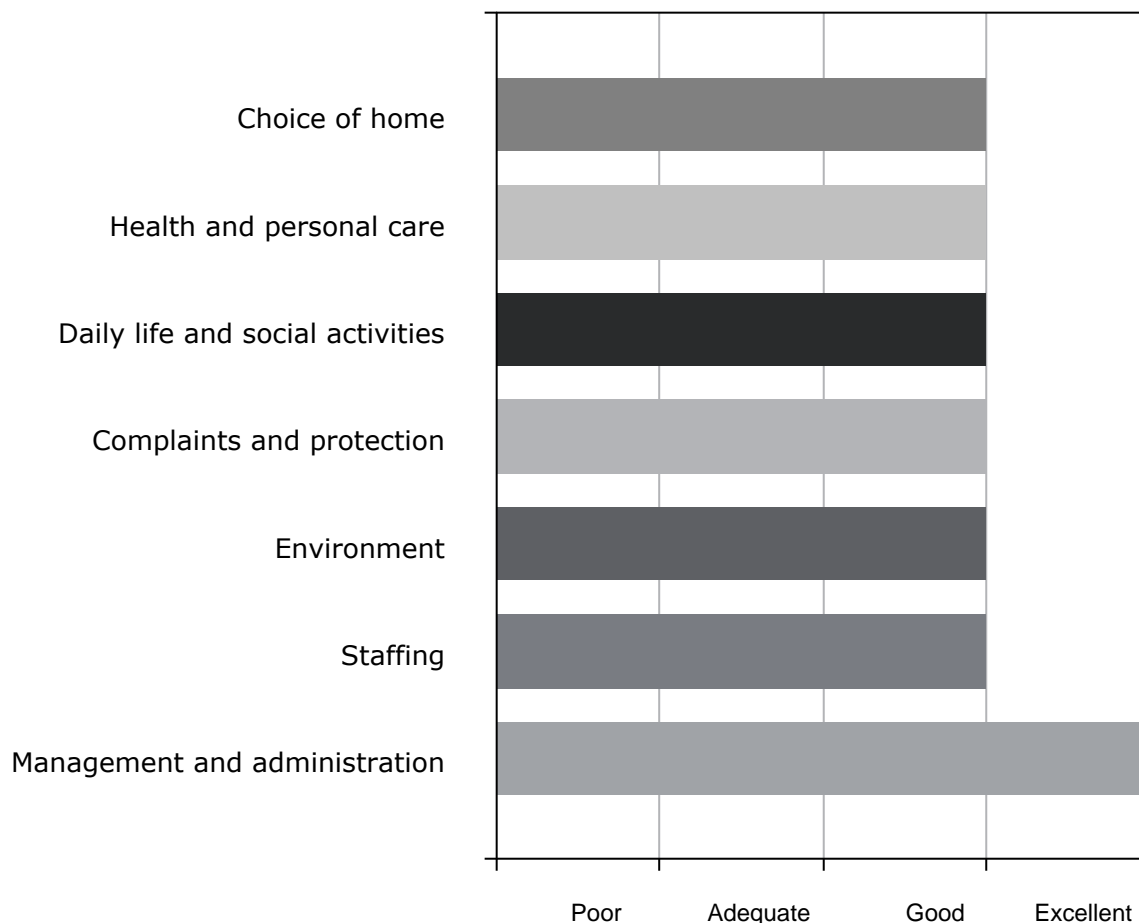
Summary

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

The quality rating for this care home is:

three star excellent service

Our judgement for each outcome:



How we did our inspection:

Two inspectors visited the home unannounced on the 11th November 2008.

We spoke with fifteen people who live there, one relative or friend of an individual, four staff members and the manager. We looked at a number of records including care plans, training and recruitment records.

The home completed an Annual Quality Assurance Assessment (AQAA) to tell us about the service provided, what it does well and any future developments being planned.

What the care home does well:

"I've never lived a lady's life but I am now", "It's nice", "It goes along well", "I'm comfy and settled" and "unique" were all comments from the people who live there. A relative or friend of a person said they "could not ask for more".

Staff clearly know the people who live there well and the atmosphere is relaxed and friendly. Feedback about the staff was very positive.

There is a strong programme of activities which helps people to be occupied and engaged. Life story books are being developed for each person that celebrate them as an individual and all that they have achieved.

People are able to move around the home freely and have access to a large garden.

The home is well managed and has a culture which values the people as individuals.

What has improved since the last inspection?

Care plans have been improved. The home plans to move to a new system in early 2009 which is more personalised and focused on the individual.

Staff training is comprehensive and individuals get the support they need to do their jobs well.

Medication is administered safely with better records kept.

What they could do better:

We think that the home overall provides excellent outcomes for the people who live there but there are still areas that could be developed. The challenge for the manager and her staff is to continue to build on the good work they have done and make the service even better.

The environment is good but could have more items and objects for people to use and interact with.

Staff need to continue to focus on developing a person centred service with people leading purposeful lives and having high levels of individual wellbeing.

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 4.

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

Details of our findings

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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.

Good information is provided to people about the home. A person's needs are assessed before they come to live at the service. This makes sure that the home can meet their individual needs.

Evidence:

The manager sent us the Annual Quality Assurance Assessment (AQAA) before we visited. This told us that the home completes an assessment before someone can come to live at the home. Individuals and their representatives are invited to spend an afternoon there to help them make a decision about living there.

Comments from people we spoke to included "I looked at four other homes and this was top of my list" and "Its the second time I've been here and I've always enjoyed it".

Evidence:

We saw that assessments had been completed for two people whose files we looked at. Assessments look at different areas of the persons life including their physical health, mobility and their preferences for daily life and social activities. The manager told us that the home was going to start using a new format for care planning in early 2009 which is much more person centred. It may be good to review the assessment format once this system has been introduced to make sure that good personalised information is being captured for the care plan. We have also recommended that the home look at Equality and Diversity issues at the assessment stage. Help to do this can be found in guidance issued by CSCI.

Good information is provided to people about the service. This includes sections about the fees payable, how to complain and the staff team. We saw that minor updates are needed to say how respite care is provided and the updated management arrangements when finalised.

The guide is available in large print and can be provided on audio tape. We have recommended that the home keep developing the guide to be as user friendly as possible. More photographs of key people, the home itself and local places may help to do this.

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.

Care plans are kept up to date and give staff good information about how to meet people's needs. Health needs are addressed and people are supported to take any medicines they need safely.

Evidence:

"It's good here", "very nice", "lovely", "I'm relaxing for the first time in my life" and "it goes along well" were comments from people who live there. A representative of one person said "It's very good - we are very happy".

We looked at care plans for two people and saw that these provided good information about how people's needs are to be met. Areas looked at include social and emotional needs, personal care and health needs. The care plans are reviewed regularly and kept up to date. As stated before, the manager told us that they are planning to move to a new more person centred care planning system in 2009. We think that this will help to develop the service provided and guide staff to be even more person centred in their practice.

Evidence:

We have recommended that the staff team look at developing their own practice in care planning by making sure that each plan gives clear personalised guidance on how to respond to the individual when they are distressed. This may be for someone who wants to see family members or to go somewhere urgently. It's important that care staff are consistent in their responses and make sure that the person's wellbeing is ensured.

In the AQAA, the home told us that 'all new residents are registered with the local GP' and 'we also provide an in-house dental service, optician and chiropody service'. The manager stated that people are always provided with a staff escort to attend health appointments and this also applies to emergency admissions to hospital. We spoke to four staff individually who confirmed that people are always escorted to attend hospital.

Medication is managed safely by the home. The records in one unit were looked at and we saw that good records are kept of administration with the medicines safely locked away. Staff are trained to give medication and have regular in-house assessments to make sure their practice is good.

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

Levels of activity and occupation are good for the people who live there. People enjoy the food provided to them.

Evidence:

"We are not pushed with work", "they keep you occupied", "good entertainers" and "there's not much to do" were all comments from the people who live there.

There is a strong programme of activities which is displayed in picture format. Things to do include baking, food tasting, chair based exercise, art and craft, quizzes and hand massage. Entertainers now come to the home each week instead of just once a month. The activities co-ordinator told us that they were getting people out more and were trying to do more interactive things such as cooking and tasting different foods like sausages.

The people who live there now have their own budgie and staff are encouraged to bring their pets to work on certain days. This is an area which could be developed to add to the wellbeing of people who live there.

Evidence:

We saw that life story books are being developed with each person living there. This is very good practice 'holding' memories for individuals and helps the person centred focus of the service.

Comments about the food included "generally good", "good", "a good lunch", "lovely" and "the food is out of this world".

The mealtime we saw was very relaxed and people were given choice about what to eat and drink. One member of staff ate with the people who live there in one unit. this is very good practice and should be encouraged throughout the home.

We have recommended that the menu be developed in a picture format and the manager said that work had started on this. We saw one instance where a person was using cutlery that seemed difficult for them to use. The staff should look at obtaining different items for people to use as necessary.

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.

Complaints or concerns are taken seriously and action taken to address any issues raised. The home safeguards people through staff training and awareness of the action to take if an alert is made.

Evidence:

In the AQAA, the home said "Concerns and complaints are listened to and taken seriously and acted upon".

People we spoke to said "I've not needed to complain", "I feel safe here" and "I'd speak to someone at the top". A representative of an individual said "I have no concerns or complaints".

We saw that the home keeps records of any concerns or complaints made and this showed that any issues raised had been responded to in full. As stated previously, we think that the information guide supplied to people about the service could be made even more user friendly. The complaints procedure in particular could include photographs of key people to go to.

Care staff receive training that teaches them how to recognise abuse. One Safeguarding issue has been looked into by the Local Authority since the last inspection took place. we saw that the home had co-operated fully with this

Evidence:

investigation and taken appropriate action where needed.

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 people with a safe, comfortable and well maintained environment.

Evidence:

"It's clean looking", "I have freedom", "it's good for a family home", "comfy" and "I've got all I need" were comments from the people who live there.

The home is arranged in four units and each one is named after it's colour scheme. This is to help people find their way around and we saw that rooms were signposted also with pictures to help people find them. One of the strengths of the service is that people are able to move around without restriction and can also access a large garden without locked doors or keypads. People we spoke to clearly did not feel 'locked in' or restricted by their environment.

We saw the bedrooms of three people. These were comfortable and homely with lots of personal items and pictures present.

The manager told us that the ground floor re-decoration has been completed and the first floor units are to be done in early 2009. We have recommended that the manager and staff start to look at how the environment could be made more stimulating and interactive for the people who live there. There is scope to introduce lots of items

Evidence:

throughout the home such as dressing tables, hat stands, rummage boxes, desks and typewriters, dolls houses and dolls / soft toys.

Memory boxes could be used by people's doors as well as interactive wall hangings or displayed life stories. Items in the garden could include interactive sheds, washing lines and animals.

The home was clean and hygienic on the day we visited.

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.

Individuals are happy with the care they receive. Staff training and recruitment is of a good standard.

Evidence:

Feedback about the staff from the people who live there was very positive. Comments included "always ready to help", "they look after things for me", "the staff help" and "the staff do what I want". One person said "she's a very very nice person that one" when talking about a member of staff.

We saw some good interaction between staff and the people who live there. Individual staff members clearly know people well and the staff we spoke to were enthusiastic about the work they were doing. Their comments included "we care well for people", "it's lovely working here" and "there's always something going on".

One member of staff was working on life story books with an individual while we were there. As stated before, this is very positive and we have recommended that staff members considering developing their own life story books. This may help to continue to develop the culture and ethos of a person centred service.

Staff have access to a strong programme of training. One member of staff commented

Evidence:

"I've never had so much training" whilst others talked of their recent training including dementia care, manual handling, Safeguarding Adults and working with challenging behaviour. We have recommended that the organisation looks at further training for the activity co-ordinator in areas such as reminiscence. Dementia care mapping is another area of expertise that the home could look at developing. This would help to measure outcomes for the people who live there and signpost areas where the service could get even better.

We looked at the recruitment records for two members of staff and saw that these are well kept with all the required information present. Criminal Record Bureau checks are carried out for all members of staff working there.

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

The home benefits from having positive leadership and a culture that clearly respects and values people with dementia.

Evidence:

The home has an acting manager in post and she has been undertaking this role since February 2008. She has completed her NVQ level Four management qualification and has over ten years experience in the care sector. We think that the service is clearly developing under her leadership.

We strongly recommend that the organisation looks at more specialist dementia qualifications for the manager and senior staff. This will help to continue to develop the service and benefit those living there even more. "The manager is supportive" and "If I have a problem, I can go and talk to my line manager" were comments from staff we spoke to. We saw that staff have regular supervision and all four people we spoke to felt supported to do their jobs well.

Evidence:

The organisation has Quality Assurance checks and we saw survey results from 2008 which were overwhelmingly positive about the service provided. The home has its own newsletter and holds regular meetings for the people who live there. The minutes seen for the October 2008 meeting included discussion around activities, mealtimes and Christmas.

Health and Safety is well managed. we saw that regular checks take place for important areas such as hot water, Fire Safety and electrical equipment.

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
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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
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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
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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	1	<p>The guide to the home could be developed to include more pictures of key people and places.</p> <p>Information about respite care and the management arrangements should be updated when finalised.</p>
2	3	The home should use the CSCI guidance to make sure that Equality and Diversity issues are fully addressed at the assessment stage.
3	3	The assessment format should be reviewed once the home moves to a new care planning system. This will help to make sure that good person centred information is captured at this stage.
4	7	<p>The staff should continue to develop their own good practice around care planning. Consistent responses to individuals should be discussed and documented with a view to ensuring their wellbeing.</p> <p>The area of sexuality and care planning should also be discussed.</p>
5	15	The menus could be developed to be more user friendly.
6	15	The staff should look at the utensils in use by each person to make sure they are suitable.

7	15	We strongly recommend that the practice of staff eating their meals with the people who live there be extended throughout the home at each mealtime.
8	16	The complaints procedure should include pictures of key people to help people know who they need to speak to.
9	19	The manager and staff should look at making the environment more stimulating and interactive for the people who live there. Lots of items such as soft toys, dolls, typewriters, hat stands and dressing tables should be provided throughout the home.
10	30	The staff could look at developing their own life story books to share with the people who live there.
11	30	The organisation should consider accessing training in Dementia Care mapping. The activity co-ordinator should attend training in areas such as reminiscence and specialised activity provision for people who have dementia.
12	31	The organisation should consider further opportunities for the manager and senior staff members to study for a specialist qualification around dementia care.

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