

Ascot Lodge Ltd

# Ascot Lodge Nursing Home

## Inspection report

38 Chambres Road  
Southport  
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Date of inspection visit:  
30 October 2023  
31 October 2023

Date of publication:  
23 November 2023

## 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

### About the service

Ascot Lodge Nursing Home is a residential care home providing personal care to up to 18 people. The service provides support to older people, including those living with dementia. At the time of our inspection there were 16 people using the service.

Ascot Lodge Nursing Home is a large, adapted house with 4 floors and lift access to all floors. There was a communal lounge and a dining room located on the ground floor. People also had access to a private and enclosed rear garden.

### People's experience of using this service and what we found

We were assured people received care and support based on their needs, however, care plans required further person-centred detail to provide guidance for staff.

We have made a recommendation about updating people's care plans, to include more detailed information and guidance.

Risks to people's health and safety were assessed. Staff had access to information about how to manage and mitigate people's identified risks, to support them in a safe way.

Safeguarding policies and processes were in place to help ensure people were protected from the risk of harm and abuse.

Safe recruitment processes were in place and there was enough staff on duty to meet people's needs in a timely way.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests. The policies and systems in the service supported this practice and were followed by the provider in line with the Mental Capacity Act.

Many staff members had worked at the home for a long time (under the previous provider). People were supported by staff who were well known to them and were familiar with their needs and preferences. People told us staff were kind and looked after them well. The home had a 'family' feel to it and a relaxed atmosphere.

The management team were well thought of by people, their relatives and staff. Staff were keen to tell us how much they loved their job and thought of the people they cared for as 'family'.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

This service was registered with us on 1 March 2023, and this is the first inspection.

#### Why we inspected

We carried out this inspection to award the service with a rating.

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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.

Details are in our safe findings below.

### Is the service effective?

Good 

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good 

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good 

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good 

The service was well-led.

Details are in our well-led findings below.

# Ascot Lodge Nursing Home

## 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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

#### Inspection team

The inspection was carried out by 1 inspector.

#### Service and service type

Ascot Lodge Nursing Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Ascot Lodge Nursing Home is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there were 2 registered managers in post.

#### Notice of inspection

This inspection was unannounced on the first day and announced on the second day.

#### What we did before the inspection

We reviewed information we had received about the service since it's registration. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give

some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

#### During the inspection

We carried out a walk round of the home to ensure it was safe and suitable to meet people's needs. We also observed the delivery of care and support at various times throughout the day. We spoke with 4 people who lived at the home, the provider, the nominated individual (the nominated individual is responsible for supervising the management of the service on behalf of the provider), the registered managers, the cook, the maintenance person and 2 members of care staff.

We looked at records in relation to people who used the service including 3 care plans, medication records and systems for monitoring the safety and quality of the service provided. We looked at staff training and quality assurance records.

#### After the inspection

We spoke with 3 relatives of people being supported at Ascot Lodge Nursing Home over the telephone, to help us understand their experience of the care and support received by their loved one.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

- Although people had Personal emergency evacuation plans (PEEPs) in place, some required further person-centred information. PEEPs are plans to help people evacuate a building or reach a place of safety, in the event of an emergency or fire. We discussed this with the registered manager who confirmed this information would be added immediately.
- Information about risks and safety was up to date, meaning there was a good track record on safety and risk management within the home.
- Processes were in place to help review and analyse risk to help improve risk management processes and promote safety.
- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- People told us they felt safe living at the home. Comments included, "I feel safe, yes. I couldn't be safer" and "Staff always check I am OK whenever they are passing by." A relative confirmed, "Mum is safe here and so my mind is at rest and I feel reassured."

### Using medicines safely

- People were supported to receive their medicines safely. One person told us, "Staff help me with my medicines, and I get them instantly."
- Where people were prescribed PRN medicines (as and when required medicines), people's medicines records contained written guidance, to help guide staff as to when these medicines should be administered.
- Medicines policies and protocols were in place to help staff to meet good practice standards.

### Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff and people's needs were met in a timely way. One person told us, "When I need help, they [Staff] are here, I only have to press my call bell and they are here."
- Many of the staff were longstanding members who had worked at the home for several years. It was clear staff knew the needs of the people they supported well.
- The provider operated safe recruitment processes.

### Systems and processes to safeguard people from the risk of abuse and avoidable harm

- Effective safeguarding systems and procedures were in place to help manage any safeguarding concerns in a timely and appropriate way.
- People were safeguarded from abuse and avoidable harm.

#### Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- Any incidents or accidents were discussed amongst the staff team, to help mitigate the risk of any recurrence and help further improve practices. One member of staff confirmed, "We discuss any safeguarding, changes are made, and we move on and learn from it."

#### Preventing and controlling infection

- People were protected from the risk of infection and staff were following safe infection prevention and control practices.
- A relative told us, "The home is always clean when I visit."

#### Visiting in Care Homes

- People were able to receive visitors without restrictions in line with best practice guidance.
- We witnessed people enjoying visits from their loved ones during our inspection, and the beneficial impact this had on people's emotional well-being.



# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Supporting people to eat and drink enough to maintain a balanced diet

- Although we were assured people were receiving appropriate care and support with their nutrition and hydration requirements, people's daily hydration records were not always accurate.
- For example, for people who were prescribed thickener (a prescribed product added to fluids to help reduce the risk of choking), although staff were adding this to fluids as prescribed, it was not always being recorded each time the person was given a drink. We discussed this with the registered manager who confirmed paperwork would be amended immediately to ensure more accurate record keeping.
- People and their relatives told us they got enough to eat and drink. People told us, "The meals are good, good choice, there's enough to eat and drink" and "I enjoy the food and I get a good choice, I choose to eat in my own room, but that's my choice." A relative shared, "The food is great – last time I went in they had homemade soup, it looked delicious."

Staff support: induction, training, skills and experience

- The service made sure staff had the skills, knowledge and experience to deliver effective care and support.
- People told us they thought staff were competent in their roles. People told us, "Staff are well trained and kind with it" and "Staff are very well trained and very professional."

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People were supported to live healthier lives, access healthcare services and support.
- Where people required intervention from external health and social care professionals, this was sought appropriately and any guidance provided was incorporated in people's care plans.
- The provider ensured the service worked effectively within and across organisations to deliver effective care, support and treatment.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed and care and support was delivered in line with current standards to achieve effective outcomes.
- People's care and support were regularly reviewed to ensure people's needs were being met.

Ensuring consent to care and treatment in line with law and guidance

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 MCA 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 to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

- The provider was working in line with the Mental Capacity Act. One person confirmed, "Staff always get my consent before doing anything."
- Where people had been assessed as lacking capacity to make decisions, DoLS applications had been applied for and staff acted in the best interests of the person.

Adapting service, design, decoration to meet people's needs

- People's individual needs were met by the adaption, design and decoration of the premises.
- A new ramp had recently been added to the front of the building to help further improve access for people with mobility requirements.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were well supported. People told us staff supported and looked after them well. One person shared, "Staff explain it all and make sure I am OK, for example, if they see my cup is empty they fill it up, I don't even have to ask."
- We observed warm and positive interactions between staff and the people they supported. One member of staff explained, "People's needs are met very well here. We adapt to their needs and are suitably flexible to any changes, it's our resident's home."
- Relatives were also keen to tell us how well treated their loved one was. One shared, "The staff go the extra mile, they make such a difference to people's lives. They celebrate Christmas and birthdays and everyone gets a present, they also do this for people who don't have family, it's amazing."

Supporting people to express their views and be involved in making decisions about their care

- People were supported to express their views and make decisions about their care. One person told us, "Staff are used to my routine and I have choice in what I want to do each day."
- The home also involved people's families and significant others at every available opportunity. Relatives told us they were kept well informed and updated about their loved one's care.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence were respected and promoted. One person told us, "Yes, I do feel staff respect me and my dignity."

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Although we were assured people's needs were met in line with their choice and preferences, care records required more detailed person-centred information to help provide guidance for any new members of staff.
- For example, one person's care plan contained an instruction for staff to 'check them regularly through the night.' Further information was needed to detail how often these checks should be made.

We recommend the provider ensures care plans include more person-centred information to evidence how people's specific needs are met by staff.

- People confirmed staff knew them well and delivered care in line with their needs and preferences. Comments from people included, "Staff know me well and that includes my sense of humour!" "Staff have got to know me well" and "The staff here know me as a person." A relative told us, "Staff know Mum's needs now better than I do!"
- People were supported as individuals, in line with their needs and preferences. One person shared, "I have complete choice in how I want to live my life."

End of life care and support

- People were supported at the end of their life to have a comfortable, dignified and pain free death.
- Some people's records required further details regarding their preferences for end-of-life care. We spoke to the registered manager about further developing these records.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were understood and supported.
- People's care plans contained information and guidance about how best to communicate with people in a way that they understood.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff supported people to maintain relationships, follow their interests and take part in activities that were relevant to them.

- People were also supported with their spiritual needs and beliefs. During our inspection we observed one person being visited by a chaplain from their practising Church.

#### Improving care quality in response to complaints or concerns

- People's concerns and complaints were listened to, responded to and used to improve the quality of care.
- People told us they would feel comfortable to speak up if they had any concerns. One told us, "If I had any concerns I would raise it with staff, no problem at all."

# 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Systems were in place to identify and manage risks to the safety and quality of the service.
- The provider had a clear management structure who monitored the quality of care to help drive improvements in service delivery.
- The registered managers were also supported by the nominated individual who took a hands-on role in quality compliance. One of the registered managers told us, "We have a visible and involved provider. We are fully supported in our role."
- We received positive feedback about the management team from people and staff. One person told us, "I know all the managers here, they are all good and they run the home well." Another person had written in a feedback questionnaire, "It's a very friendly place and I can speak openly to the management." A member of staff told us, "The managers are so very supportive, and that makes us work really well as one big team."

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

- There was a positive and open culture at the service. Positive outcomes were achieved for people. People's relatives confirmed, "Before coming here Mum was depressed and cried a lot, now, she is happy, settled and smiling. I can't praise the home enough" and "This place is head and shoulders above the rest, I am so thankful Dad is here."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and staff were engaged in the running of the service and staff fully understood and took into account people's protected characteristics.
- Where people were not able to express their views, families and significant others were consulted to help people and relatives feel engaged with both the home and their loved one's care and support.
- The home held functions for people and their relatives, such as cheese and wine afternoons and garden parties, which were also used as opportunities to discuss people's care and any relevant updates.
- Staff were keen to tell us how much they enjoyed their role and how well engaged they felt, one told us, "It's amazing here, it's like one big family. We have staff surveys and meetings, I get listened to and I feel valued."

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

- The provider understood their responsibilities under the duty of candour and the need to be transparent when things went wrong.
- The management team operated an 'open door' policy and were available for people and their relatives to speak to at any time.

Working in partnership with others; Continuous learning and improving care

- The provider worked in partnership with external organisations to support holistic care provision. This helped ensure people received an experience based on best practice outcomes, choice and preference.
- The provider and management team created a learning culture at the service which improved the care people received.