

# Resicare Homes Limited

# Ashton Lodge

## Inspection report

Ashton Road  
Dunstable  
Bedfordshire  
LU6 1NP

Tel: 01582673331

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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

Ashton Lodge is a residential care home providing personal care to 48 people most of whom were living with dementia and long-term conditions. The service can support up to 54 people.

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

One person said, "It suits me fine, staff are nice." One person's relative said, "Its so much better its improved a lot, they [staff] love her, they treat her like she is one of their own. Staff are very chatty; they talk to me as if they know me too." Another person's relative said, "I just wished I knew about this place when my parents needed to go into a care home."

People's safety was promoted at the home through staff and managers regularly monitoring and responding to changes in people's health needs. Professional advice was sought quickly, and plans were made to ensure people were safe.

Care staff knew how to respond to any concerns to protect people from potential harm and abuse. The registered manager ensured checks were completed to ensure people were safe at the home, such as staff recruitment checks, equipment, building and fire safety checks.

There was a positive person-centred culture at the home. The registered manager, deputy manager and activity coordinators made efforts to promote people's interests and to give people a happy and enjoyable experiences at the home.

Staff felt supported and listened to. The management team regularly audited and assessed the service to promote a good standard of care. Staff and relatives spoke openly about the improvements which had taken place over the recent years at the home.

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 and update

The last rating for this service was requires improvement (published 12 March 2020). 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 regulations.

### Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the

service can respond to COVID-19 and other infection outbreaks effectively.

We carried out an unannounced comprehensive inspection of this service on 18 February 2020. A breach of a legal requirement was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Ashton Lodge on our website at [www.cqc.org.uk](http://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.

Details are in our safe findings below.

### **Is the service well-led?**

**Good** ●

The service was well-led.

Details are in our well-Led findings below.

# Ashton Lodge

## 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 Care Act 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

This inspection was completed by one inspector.

#### Service and service type

Ashton Lodge is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. 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

This inspection was unannounced.

#### What we did before the inspection

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. We reviewed the information we had received about the service since the last inspection. We sought feedback from the local authority.

#### During the inspection

We spoke with three people. Most people were living with dementia and were unable to talk with us, so we completed observations. We reviewed a sample of people's risk assessments and care plans and checked staff recruitment files. We also sampled medicine records and stocks within the home. We spoke with the registered manager and two deputy managers.

#### After the inspection

We continued to seek clarification from the provider to validate the evidence we found. We looked at a further five people's risk assessments and care plans, fire related safety checks and assessments, equipment checks, training records, staff competency checks and medication audits. We spoke with four people's relatives, six members of staff, and a professional who has regular contact with the service.

# 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.

At our last inspection the provider had not ensured people always received their medicines in a safe way. This was a breach of regulation 12 (Safe Care and Treatment) 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 12.

### Using medicines safely

- Clear guidance was available to support staff to decide if people needed their 'as required' medicines.
- We checked a sample of medicines and found the amounts held in stock tailed with records.
- Staff received competency checks when administering people's medicines to assist the managements oversight of how people received their medicines.

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

- The registered and deputy manager raised safeguarding concerns when it was appropriate to do so.
- Care staff had a good understanding about the potential signs of abuse and what they must do about this.
- Despite this we did speak with a member of staff, who was not involved in the delivery of care, who did not have a good understanding about what they must do if they had concerns. Safeguarding adults from potential abuse is everyone's responsibility. We spoke with the registered manager about this and they told us this issue would be addressed.

We made a recommendation to the provider to consider best practice guidance and ensure all staff were confident and knowledgeable about their responsibilities in relation to safeguarding people from potential abuse.

### Assessing risk, safety monitoring and management

- The registered and deputy manager ensured people had appropriate risk assessments in place. These explored the individual risks people faced and evidenced the actions taken to manage these risks. Care plans guided staff of what they should do to promote people's safety.
- The management team and staff responded when people's needs changed. Health professionals were contacted, interim plans made, and risk assessments were updated and shared with staff.
- Checks on the safety of the building and the equipment used had been completed and were up to date.

### Staffing and recruitment

- People's relatives told us they were felt there was enough staff. They told us there was never any difficulty in speaking with the service on the phone during lockdown or requesting support during their visits. One relative said, "There's always plenty [of staff] about and they pop in to see if you are alright."
- We observed there was sufficient staff. We also saw staff spending time and chatting with people.
- Appropriate pre-employment checks had been completed before new staff started at the home. This included references and a criminal records check.

#### Preventing and controlling infection

- 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 was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.
- Relatives told us they were given time and privacy with their loved ones. The managers and activity coordinators arranged and facilitated socially distanced meet ups with families in a local park with planned activities. Which included safe infection prevention measures to keep people safe.

#### Learning lessons when things go wrong

- The registered and deputy managers had sustained improvements and developed the service further over the last four years.
- Falls and safeguarding events were reviewed to learn from these events.

# 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.

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

- Staff told us they were given clear instructions about people's needs and they were updated when this changed. Staff said they were supported to do their jobs, with regular supervisions, meetings and daily hand overs which were helpful.
- Staff said they sought advice and shared information with the managers. They also said the managers were present in the home and they did not spend all their time in the office.
- Regular effective audits took place in relation to the quality of the service. Staff received competency checks to check they knew people and their own roles well.

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

- There was a positive culture at the home. Real efforts had been made to promote and develop people's current and past interests especially those living with dementia. Regular internal events were now the norm, including outings in small groups to the local open spaces. Creative one to one time was also given to people living with advanced dementia who did not leave their bedrooms.
- Relatives told us how staff had helped their relatives settle into the home. One relative said, "[Name of staff] suggested we played calming music at night to settle [name of relative] as I have a calm voice and thought it might feel familiar to him, and it worked." Another relative said, "Unfortunately [name of person] is in their own world now but staff do tactile activities and involve [name of person]."

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

- Staff told us there was now good communication between them and the managers. They told us they were confident with raising issues and when they did, they were listened to and changes were made.
- Relatives felt involved in the home. They said staff took the time to get to know them. They were kept up to date about their relatives needs and how they were. They were confident any issues they would have in the future would get resolved quickly.
- Staff told us how they involved people especially those living with dementia with their care and what they had done to make life interesting and fun for them.

Working in partnership with others; Continuous learning and improving care

- We saw in people's records the registered and deputy managers sought the input from other professionals to support people. One professional we spoke with praised the manager's for being so responsive and caring to people's well-being.
- Staff and people's relatives told us how the service had improved over the last four years. In relation to being better organised, continuity of staff, staff support, and better experiences for people at the home.
- We have also seen sustained and continued improvements during this time.