

E.C. Investments (Gloucestershire) Limited Hill Ash House Care Centre

Inspection report

Ledbury Road
Dymock
GL18 2DB

Tel: 01531892980

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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

Hill Ash House Care Centre is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. Hill Ash House Care Centre does not provide nursing.

Hill Ash House Care Centre accommodates 36 people in one adapted building in the village of Dymock. At the time of our inspection there were 28 people living at the home.

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

The service had made improvements in implementing safeguards to ensure safe recruitment practices were followed.

People and their relative spoke positively about the staffing team and the leadership in the home.

People were supported by a consistent staffing team who understood their needs and how to protect them for avoidable harm. Care documentation and risk assessments were in place, which provided staff with guidance on how to meet people's needs and manage identified risks.

People were supported to receive their medicines safely and as prescribed.

People were supported by staff who had been trained and supported to meet their needs.

The service had infection control processes and systems in place to reduce the risk of people contracting COVID-19.

Managers promoted a culture which enabled people, their representatives and staff to feel comfortable in giving feedback, raising a concern or where needed, to make a complaint.

There were quality monitoring systems and processes in place to ensure outcomes for people remained positive and that the service remained compliant with necessary regulations. Since our last inspection we found improvements were made to ensure that audits were fully effective in identifying and addressing quality and safety concerns in areas of infection control and staff recruitment.

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 29 October 2021) 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 regulations.

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 24 August and 2 September 2021. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

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.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. 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 on our website at www.cqc.org.uk

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 well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Hill Ash House Care Centre

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.

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

Two inspectors carried out this inspection.

Service and service type

Hill Ash House Care Centre 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. Hill Ash House Care Centre is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

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.

What we did before inspection

We reviewed information we had received about the service since the last inspection.

During the inspection

We looked at the premises and observed staff interact with people. We spoke to four people using the service to gain their feedback on the service provided. We spoke to two care staff, one care leader, two housekeepers, one kitchen staff, the registered manager and the owner.

We reviewed four people's care records including a selection of records relating to medicines administration. We reviewed the recruitment records of three staff. We reviewed records relating to the management of the service, quality monitoring audits and action plans.

After the inspection:

We spoke with three people's relatives. We spoke to the nominated individual.

The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We continued to seek clarification from the provider to validate the evidence found. We looked at the service's staff training data, quality assurance records, policies and procedures, risk assessments and recruitment processes.

Is the service safe?

Our findings

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

At our last inspection we rated this key question Requires Improvement. At this inspection the rating has changed to Good.

This meant people were safe and protected from avoidable harm.

Staffing and recruitment

At our last inspection the provider had failed to ensure robust pre-employment checks were completed to ensure staff were of good character. This was a breach of regulation 19 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 19.

- People were protected from risks associated with the employment of unsuitable staff as safe recruitment practices were followed.
- Checks on staff were completed before they started work. This included screening with the Disclosure and Barring Service (DBS), checking staff's conduct in previous employment and exploring gaps in employment histories. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The registered manager discussed with us risk assessments in place when not all information could be obtained.
- People were supported by enough staff who knew them well. We saw people were attended to and supported in a timely manner. Throughout our inspection we observed staff engaging in conversations and supporting people with activities.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt safe living at Hill Ash House Care Centre. Comments from people included; "I like to think this is a lovely and safe home" and "I feel safe here, no concerns. It is a lovely place."
- People were supported by staff that had received training and knew how to raise safeguarding concerns. The provider had safeguarding policies in place and the team reported concerns accordingly.

Assessing risk, safety monitoring and management

- Risks to people's health and wellbeing were assessed and action taken to reduce or mitigate risks. This included risks associated with falls, choking, diabetes and skin integrity.
- Environmental risks to people were managed safely. Risk assessments and safety checks had been carried out to reduce risks such as those associated with fire and legionella infection.
- Regular fire evacuation drills were undertaken to ensure staff knew how to support people in the event of

an emergency. The effectiveness of these drills was reviewed as were people's personal emergency evacuation plans (PEEPs).

Using medicines safely

- People's medicines were kept secure in lock cabinets in their bedrooms and administered safely. Medicines administration records were appropriately signed by staff when administering people's medicines.
- Staff received medicine training and practice assessments were completed to ensure they remained competent to carry out this task.
- Arrangements were in place for obtaining medicines from the pharmacy. This ensured people's medicines were available when required.
- Medicine audits were undertaken to ensure people received their medicines as prescribed.

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.

People were supported to see their families in accordance with their preferences and in line with government guidance.

Learning lessons when things go wrong

- The service had systems in place for staff to report and record any accidents and/or incidents. These were reviewed by the registered manager to ensure the provider's policy was followed.
- Following the reviews, if patterns were identified, the service would work with professionals such as occupational therapists, physiotherapist and GP to further support people with their needs.

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 our last inspection we rated this key question Requires Improvement. At this inspection the rating has changed 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

- Improvements related to staff recruitment processes had been made by the service following our last inspection. The registered manager was working on ensuring a clear audit trail related to recruitment decisions would always be available.
- Improvements had also been made to ensure that audits were fully effective in identifying and addressing quality and safety concerns in areas of infection control and staff recruitment.
- The service had systems to monitor and improve the quality of care people received. The registered manager carried out a range of audits related to people's medicines, nutrition and hydration, care plans as well as a manager's quality assurance audit.
- The registered manager understood their role. They were supported at provider level to ensure the quality performance, risks and regulatory requirements. Since our last inspection, a system of provider oversight of the governance systems had been developed. The nominated individual told us about this system and their oversight of the service. The provider also offered the registered manager support in driving the service forward.

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

- People, their relatives and staff spoke positively about the management and the caring culture of the staff. Comments included: "[Registered manager] is very amiable," [service] think of the residents, offer opportunities for residents." "The management are involved and there is a clear direction." "The staff are really on point. They look after us ...I am happy here. Staff are always around."
- The service has a stable staffing team with many long-standing members. One relative told us: "Good continuity of staff." Another relative described the staffing team as "caring, very helpful and friendly" and that "they seem to know us as a family ...have paid attention, interested."
- The registered manager was fully aware of their legal responsibility to notify CQC of notifiable events. The provider understood their responsibility to be open and honest when an incident had occurred.

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

- People's relatives described the communication as being good. One relative told us that they "Can pass feedback on whenever."
- The registered manager held meetings periodically with the staff in the home and participated in daily handovers.
- The registered manager told us that the activity coordinator met with people on an individual basis and that monthly newsletters were sent to the families along with photographs from activities and that regular contact was upheld over the telephone.
- The owner and the registered manager told us about the recognition offered to the staffing team, this including gifts for birthdays and holidays as well as specific individual support for some staff members.

Working in partnership with others; Continuous learning and improving care

- The service worked with local organisations such as health and social care organisations to ensure people received good care and treatment. The registered manager told us they worked closely with occupational therapist, the GP and physio therapists. People's care documentation evidenced regular involvement from various other professionals such as district nurses and the mental health team.
- The registered manager told us about the environmental improvements currently in the process of being implemented within the home such as the development of some flats, recent renovation of the medicines room, a new hairdresser room, a new garden pod and plans for a pavilion room and new laundry room.
- The provider had invested in an additional electronic staff management system which they told us had improved the monitoring of staff training and support.