

HC-One Limited

# Ashington Grange

## Inspection report

Moorhouse Lane  
Ashington  
Northumberland  
NE63 9LJ

Tel: 01670857070

Website: [www.hc-one.co.uk/homes/ashington-grange](http://www.hc-one.co.uk/homes/ashington-grange)

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## Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

**Requires Improvement** 

Is the service well-led?

**Requires Improvement** 

# Summary of findings

## Overall summary

### About the service

Ashington Grange is a care home providing nursing and personal care for up to 59 people; some of whom are living with dementia. At the time of the inspection there were 34 people living at the home.

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

People and staff were at an increased risk of infection because a safe and effective infection control system was not fully in place.

Staffing levels had been affected by current events at the home. Staff told us that whilst there had been issues with staffing on certain shifts, they had worked as a team to ensure people received appropriate care and support. Medicines were generally managed safely. We have made a recommendation relating to medicines storage.

The service had been through a difficult period. However, staff spoke positively about working at the home and the people they supported. One staff member told us, "The bond we have with the residents is amazing. I love coming here every day." We observed positive interactions between staff and people.

The provider had a system to assess and monitor infection control across its services. This had been updated and amended in response to the COVID-19 pandemic. However, this system had not been robustly implemented at the home to ensure an effective infection control system was in place. We have made a recommendation about this.

The registered manager and senior management were open and honest and told us that improvements had been made and lessons had been learned.

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

The last rating for this service was Good (8 December 2017)

### Why we inspected

We undertook this targeted inspection to look at specific concerns which we had received about the service. The inspection was prompted in part due to concerns received about staffing and infection control. A decision was made for us to inspect and examine those risks. When we inspected, we found there was a concern with infection control, so we widened the scope of the inspection to become a focused inspection which included the key questions of safe and well-led.

The overall rating for the service has changed from good to requires improvement. 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 Ashington Grange on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection.

We have identified a breach in relation to safe care and treatment regarding infection control. Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

#### Follow up

We will work alongside the provider and local authority to monitor progress. We will 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?**

The service was not always safe.

Details are in our safe findings below.

**Requires Improvement** ●

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

The service was not always well-led.

Details are in our well-led findings below

**Requires Improvement** ●

# Ashington Grange

## 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

The inspection was undertaken by one inspector.

#### Service and service type

Ashington Grange 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

We gave short notice of the inspection. This supported the staff and ourselves to manage any potential risks associated with COVID-19.

#### What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. We sought feedback from the local authority and other professionals who work with the service. This information helps support our inspections. We used all of this information to plan

our inspection.

During the inspection

We spoke with 12 members of staff. The registered manager was not on duty on the day of the inspection. We reviewed three people's care records.

After the inspection

We spoke with the registered manager, the regulation manager and the regional quality director. We reviewed records relating to the management of the service which the provider and registered manager sent us.

# 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 good. At this inspection this key question has now deteriorated to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Preventing and controlling infection; Assessing risk, safety monitoring and management

- A safe and effective infection control system was not fully in place to ensure people were protected from the risk of infection.
- Risks relating to COVID-19 had not been fully assessed and monitored to reduce the risk of cross infection. Government guidance relating to safe working practices including the management of waste and use of PPE was not always followed.

The above shortfalls constituted a breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following our inspection, the registered manager and senior management told us that action had been taken to address the concerns we had raised to ensure a safe and effective infection control system was in place.

- The premises were in a good state of repair and generally clean. No other concerns were raised or identified relating to people's safety or the safety of the premises and equipment.

Using medicines safely

- Medicines were generally managed safely. We identified several issues with the storage of medicines which the registered manager told us would be addressed.

We recommend that best practice guidance is followed regarding the storage of medicines.

Learning lessons when things go wrong

- The registered manager and senior management told us that lessons had been learned following the inspection and action had been taken to improve and ensure effective IPC and PPE practices were embedded within the home.

Staffing and recruitment

- Staffing levels had been affected at times by current events within the home. Staff told us that staffing levels had dropped below usual assessed staffing levels at times. They said however, they had worked hard as a team to help ensure people received appropriate care and treatment. Extra support had been provided from regional and peripatetic staff. We did not observe any people's needs not being met on the day of the inspection with the numbers of staff deployed.

- There was a recruitment system in place. Staff told us that appropriate checks were carried out before they started work at the home.

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

- Systems were in place to safeguard people and protect them from the risk of abuse. Staff were knowledgeable about the action they would take if abuse was suspected. Staff raised no concerns about staff practices or the care and support people received.



# 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 good. At this inspection this key question has now deteriorated to requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- The provider had a system to assess and monitor infection control across its services. This had been updated and amended in response to the COVID-19 pandemic. However, this system had not been robustly implemented at the home to ensure an effective infection control system was in place. We identified shortfalls relating to the management of infection. The registered manager and provider took action to address the concerns we raised.

We recommend the provider continues to review the IPC system at the home to ensure best practice guidance is followed and embedded into practice.

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

- The service had been through a difficult period. However, staff spoke positively about working at Ashington Grange and the people they supported. They explained they had worked as a team to help promote people's wellbeing throughout the pandemic. The deputy manager told us, "The staff have been amazing. The compassion they have shown – I wouldn't expect anything else." We observed positive interactions between staff and people.

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

- The registered manager and senior management were open and honest following our inspection visit and explained improvements had been made and lessons had been learned.

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

- Processes were in place to involve people and staff in the running of the home. Staff told us they felt supported and spoke positively about the registered manager.

This section is primarily information for the provider

## Enforcement actions

The table below shows where regulations were not being met and we have taken enforcement action.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment
Treatment of disease, disorder or injury	An effective system was not fully in place to assess, prevent and control the spread of infection. Regulation 12 (1)(2)(h).

### **The enforcement action we took:**

We imposed urgent conditions on the provider's registration linked to infection prevention and control.