

Sheval Limited

# Asheborough House Care Centre - Saltash

## Inspection report

St Stephens  
Saltash  
Cornwall  
PL12 4AP

Tel: 01752845206  
Website: [www.asheboroughhouse.co.uk](http://www.asheboroughhouse.co.uk)

Date of inspection visit:  
29 February 2016

Date of publication:  
21 March 2016

## Ratings

Overall rating for this service

Requires Improvement ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection of this service on 27 and 30 October 2015. Breaches of legal requirements were found and enforcement action was taken. This was because the provider's systems to monitor the quality of service people received were not effective.

After the comprehensive inspection the provider wrote to us to say what they would do to meet the legal requirements in relation to our enforcement action. We undertook this focused inspection on 29 February 2016 to check they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Asheborough House Care Centre – Saltash on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Asheborough House Care Centre – Saltash provides nursing and residential care for up to 31 older people who require support in their later life or are living with dementia or mental ill health.

There were 28 people living at the service at the time of this inspection. The home is on three floors, with access to the lower and upper floor via stairs, a lift or chair lift. All bedrooms have wash hand basins. There are shared bathrooms, shower facilities and toilets. Communal areas include three lounges, and one dining room. There is a garden for people to use when they wish to.

The service had not had a registered manager since August 2015; however an application for a new manager had been made and was in process. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Monitoring systems had been devised, implemented and improved to help ensure the quality of care people received was effective and met their needs. A quality assurance policy had been created to reflect the new processes which were in place, and other policies had been written to support the new quality auditing systems. Records showed one of the directors had also been visiting the service to meet with the manager, to discuss the operation and delivery of the service. This helped to support the manager with the leadership of the service and to promptly identify when the manager may require support. People, their family and loved ones were being encouraged to be part of the creation of their care plan and with care planning reviews.

The manager had been working positively with the local authority service improvement team, to complete an action plan which had been put into place, following our last inspection.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service well-led?

Monitoring systems had been devised, implemented and improved to help ensure the quality of the service people received was effective and met their needs.

The manager was working positively with the local authority, to help ensure the service was meeting people's needs.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice.

We will review our rating for well led at the next comprehensive inspection.

**Requires Improvement** 

# Asheborough House Care Centre - Saltash

## **Detailed findings**

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook an unannounced focused inspection of Asheborough House Care Centre - Saltash on 29 February 2016. This inspection was carried out to check that improvements to meet legal requirements after our comprehensive inspection on 27 and 30 October 2015 had been made. We inspected the service against one of the five questions we ask about services: is the service well led? This was because the enforcement action was in relation to this question. The inspection team consisted of one inspector.

During our inspection, we spoke with the registered manager and the local authority service improvement team. We looked at four records that related to the care and support of people, accident and incident records, weight monitoring records, policies and procedures, quality assurance and monitoring paperwork.

Before our inspection we reviewed the information we held about the home. We reviewed notifications of incidents that the provider had sent us since our last inspection and the previous inspection report. A notification is information about important events, which the service is required to send us by law.

# Is the service well-led?

## Our findings

At our last inspection on 27 and 30 October 2015 the systems in place to monitor the quality of service people received were not effective. The provider did not have systems and processes in place to monitor and improve the quality of care for people in respect of; the planning of people's care, and reducing and monitoring risks associated with people's care, such as falls, accidents, weight loss and pressure ulcers.

At this inspection, we found action had been taken to address these shortfalls. Further work was also being undertaken to make continued improvements and strengthen the systems which had been put into place. The manager had a good understanding of the importance of monitoring the service, and had worked hard to make improvements.

Auditing systems had been devised, implemented and improved to help ensure the quality of service people received was effective and met their needs. These had been introduced to help highlight areas which required action and drive continuous improvement across the service. Some of which included, the review of falls and accidents, people's daily care, weight monitoring, and care planning records. As a result of the implementation of a new falls and accidents audit, one person's falls had significantly reduced.

Policies and procedures had been created to underpin the new quality assurance systems. A new quality policy had been introduced which detailed how people, families, staff, and external health professionals would be part of helping to ensure "adequate monitoring of the service is met". This would include quarterly quality assurance questionnaires being sent out, invitations to care planning reviews, and resident and family meetings taking place. A new suggestions box had been placed in the main entrance, for anyone to write their comments. The manager would be checking this box on a monthly basis.

A new falls policy had been written to help ensure falls and accidents were being effectively recorded and monitored. A contingency staffing plan had been devised by the creation of a new "reporting of staff sickness" policy, which had been introduced to help reduce the likelihood of the service being understaffed. Infection control procedures had been rewritten, to help ensure staff understood their responsibilities.

Nursing staff were now carrying out audits of care planning documentation, which was followed by a monthly one to one meeting with the manager. The meetings had been implemented to discuss the quality of the auditing which was taking place. The manager had also started to review care plans on a three monthly basis to help ensure their accuracy, and to assist in promptly highlighting areas requiring improvement.

Records showed one of the directors had been visiting the service to meet with the manager, to discuss the operation and delivery of the service. This helped to support the manager with the leadership of the service; to ensure they had sufficient hours to carry out their duties, and to promptly identify when they may require additional support or resources.

The manager had been working positively with the local authority service improvement team, to complete

an action plan which had been put into place, following our last inspection.