

Ashgrove Residential Care Home Ltd

# Ashgrove Residential Care Home

## Inspection report

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Hornchurch  
RM11 1XA

Tel: 01708458834

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04 July 2022

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## Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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Is the service well-led?	Inspected but not rated
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# Summary of findings

## Overall summary

### About the service

Ashgrove Residential Home is a residential care home registered to provide accommodation and personal care to 18 older people. The service is a two-floor building. Each floor has separate adapted facilities.

At the time of our inspection, the service provided personal care to 17 people.

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

At our previous inspection of this service on 12 October 2021, we found robust quality assurance systems were not in place to identify shortfalls we found with risk assessments, infection control, need for consent and staff training and support. At this inspection we found improvements had been made and quality assurance systems were in place to identify shortfalls and take prompt actions to ensure people were safe.

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 previous rating for this service was requires improvement (published 25 November 2021) and there were multiple breaches of regulation. We issued requirement notices for breaches of. Regulation 17 (Good Governance), Regulation 11 (Need for consent), Regulation 12 (Safe care and treatment) and Regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The provider completed an action plan after the last inspection to show what they would do and by when to improve.

### Why we inspected

We undertook this targeted inspection to check if there were improvements regarding the concerns we identified at the last inspection about governance of the service. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

We use targeted inspections to follow up on warning notices or to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

### 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?

At our last inspection, we rated this key question Requires Improvement. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

**Inspected but not rated**

### Is the service well-led?

At our last inspection, we rated this key question Inadequate. We have not reviewed the rating at this inspection. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

**Inspected but not rated**

# Ashgrove Residential Care Home

## **Detailed findings**

### Background to this inspection

#### The inspection

This was a targeted inspection to check whether the provider had met the requirements of the requirement notice in relation to Regulation 17 (Good Governance).

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 carried out by one inspector.

#### Service and service type

Ashgrove Residential Care Home 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.

#### Registered Manager

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

The 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.

We reviewed the information we already held about the service. This included previous reports and notifications. A notification is information about important events, which the provider is required to tell us about by law. We used all of this information to plan our inspection.

During the inspection

We spoke with four people, the provider, the registered manager, the deputy manager and two staff. We reviewed quality assurance records such as audit arrangements. As part of this, we reviewed a sample of risk assessments, training and supervision records and consent records.

# 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. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check 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.

### 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.

### Visiting in care homes

- The provider was facilitating visits for people living in the home in accordance with the current guidance.

# 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 Inadequate. We have not changed the rating as we have not looked at all of the well-led key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the requirement notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

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

At our last inspection the provider had failed to take proper steps to ensure there were effective systems to assess, monitor and mitigate risks to the health and safety of people to improve the quality and safety of the services provided. This was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We had found there was lack of robust audit systems in place to identify shortfalls we found and take prompt action to ensure people received safe high-quality care. This was required to ensure high quality care was being delivered at all times and there was a culture of continuous improvement.

At this inspection we found enough improvement had been made and the service was no longer in breach of Regulation 17 and had complied with the requirement notice in this area. However, the provider needs to ensure recent improvements are consistently implemented and sustained.

- During this inspection we found systems were in place for quality assurance of the service. A number of audits were being completed. This included audits on medicines, care plans, infection control and nutrition. The registered manager also carried out daily walkaround audits and night-time spot checks. Audits were also being completed by external consultants, which provided actions for the home to complete. The registered manager told us the audits helped the service to identify any shortfalls and take prompt action.
- Risk assessments were in place for people living at the home permanently. However, we found detailed risk assessments were not in place for people living at the home on a respite basis. We fed this back to the management team who informed this would be put in place immediately.
- As part of good governance, we found improvements had been made with infection control, need for consent, staff supervision and training.
- People and staff told us the service was well-led. A person told us, "I am happy here. Staff are all good."