

Regal Care Trading Ltd

Ashcroft Nursing Home

Inspection report

Fairview Close
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Tel: 01843296626

Date of inspection visit:
22 July 2020

Date of publication:
03 August 2020

Ratings

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

Summary of findings

Overall summary

About the service

Ashcroft Nursing Home is a residential care home that is registered to provide people with nursing and/or residential care. In practice, the service does not provide nursing care. It accommodates older people and people who live with dementia.

At the time of this inspection there were 18 people living in the service. People living at the service only required residential care. The service can support up to 88 people.

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

People and their loved ones told us they were safe at the service and well supported by staff. Risks to people were assessed and plans were in place to minimise risks. When appropriate, people were involved in managing their own risks. Staff had the guidance they needed to keep people safe and could tell us about how they would manage risks related to people's health or support needs. Risks to the environment had been assessed and action had been taken to ensure it was safe for people. For example, equipment had been serviced and checked to ensure it was fit for purpose.

The registered manager carried out a range of audits to monitor the quality of care people received. These included health and safety checks of the environment, care plan audits and reviewing staff training needs. Completed audits formed the basis of an action plan which recorded when actions were completed. Staff told us they were all aware of the improvements to be made and were involved in improving quality.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was Requires Improvement (published 10 October 2019). The service was in breach of four regulations of the Health and Social Care Act (2014) related to safe care and treatment, the environment, person centred care and good governance.

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 however, we did not inspect all areas related to the breaches of regulation so we cannot say if the breaches had been resolved.

Why we inspected

We undertook this targeted inspection to check on a specific concern we had about the management of risk and quality improvement. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific 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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Ashcroft Nursing Home on our website at 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?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Ashcroft Nursing Home

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check on a specific concern we had about the management of risk and quality improvement.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Ashcroft nursing 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.

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 a short period notice of the inspection to check if the service had any active cases of COVID 19.

What we did before inspection

We reviewed information we had received about the service since the last inspection including submitted action plans. We sought feedback from the local authority and professionals who work with the service. 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. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection-

We spoke with one person who used the service and two relatives about their experience of the care provided. We spoke with five members of staff including the registered manager, deputy manager, a senior care worker, care workers and the administration staff.

We reviewed a range of records. This included four people's care records. A variety of records relating to the management of the service, including health and safety records and audits.

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 of this key question, as we have only looked at the part of the key question we had specific concerns about.

Following the last inspection, we issued a requirement notice in relation to a continued breach of Regulation 12 of the Health and Social Care Act (2014), (safe care and treatment). This included some concerns around risk management.

The purpose of this inspection was to check a specific concern we had about risk management. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management

- At the last inspection in July 2019 we found that risk management was not always effective. Concerns about the management of risks related to people's skin integrity, fluid intake and staff attendance at fire drills. At this inspection we found improvements had been made.
- Risks to people were assessed and plans were in place to give staff the guidance required. People were involved in managing risk where appropriate. For example, one person had a fall in their room, staff spoke to them about how it happened and how they could minimise the risk of reoccurrence. The person stated that their mattress was high for them and they struggled to get on to their bed independently. The mattress was replaced, and the person told staff they felt much safer getting on their bed now.
- Staff could tell us about the steps they would take to manage risks. For example, staff could tell us about risks relating to the use of pressure equipment, ensuring equipment was on the correct settings and how often they checked this. Pressure equipment needs to be on the correct setting to minimise the risk of skin breakdown. Staff could also tell us about how they managed risks relating to choking and catheter use. A catheter is a tube used to remove urine from the body.
- Some people were at risk of becoming dehydrated, each person had their fluid intake recorded and a target amount for each day. The registered manager checked that people had reached their target amount and took action if they had not. For example, the registered manager had purchased special sweets which are designed to increase people's fluid intake. Staff found that people who were reluctant to drink would eat these sweets increasing their fluid intake for the day.
- Risks relating to the environment had been assessed and actions had been taken to minimise these. For example, fire drills had been completed for both day and night staff. Maintenance staff regularly checked that fire equipment such as fire extinguishers were fit for purpose.
- Equipment used to help people move such as hoists or chair lifts had been serviced regularly by external contractors. Staff used equipment in line with guidance and had their competency assessed in doing so.

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. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check a specific concern we had about quality monitoring and improvement. We will assess all of the key question at the next comprehensive inspection of the service.

Continuous learning and improving care

- At the last inspection in July 2019 we found that auditing tools used at the service were not always effective in identifying shortfalls which resulted in a breach of Regulation 17 of the Health and Social Act (2014). At this inspection there had been an improvement.
- The registered manager had been at the service for two months at the time of the inspection. In that time, they had completed a comprehensive audit of the service, identifying shortfalls and a large number of areas where they felt improvement could be made. This formed the basis of an action plan, at the time of the inspection 50% of the tasks had been completed, with a further 25% having being partially completed or being ongoing tasks.
- Staff told us they were fully involved in driving improvement at the service. One staff member said, "The registered manager now explains why we are doing things which really helps. We all know what is expected of us and that this is about people getting the best care possible. Our ideas and suggestions are welcomed, which makes us feel part of the process."
- The registered manager was part of a local forum for registered managers and professionals which they told us helped them to learn about good practice and changes in guidance. Ideas from the forum were shared with staff and used to drive continual improvement.
- Audits had identified that care plans could be more consistent and contain more person-centred detail about people's choices and needs. The registered manager and staff had started work on this and consistency was improving.
- Audits relating to the service and maintenance work had been completed, the resulting action plan had been shared with the provider. Some actions had already been completed, with some windows and flooring being replaced along with new curtain poles for bedrooms. A plan was in place to address the outstanding issues.