

Ashville Care Limited

Ashville Care Home

Inspection report

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West Yorkshire
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Date of inspection visit:
29 September 2020
08 October 2020
14 October 2020
15 October 2020

Date of publication:
09 November 2020

Ratings

Overall rating for this service	Inspected but not rated
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

Ashville Care Home is a residential care home providing personal care for up to 29 older people living with dementia. There were 19 people living in the service when we inspected.

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

People and relatives were happy with the care provided. Comments included; "They look after me very well here. The food is very good. I cut the grass and prune the flower beds, and love going for a walk in the garden" and "The home? One word – fabulous."

People looked well cared for and comfortable.

We assessed infection control procedures within the service and were assured appropriate systems were in place to help keep people safe.

Governance processes had improved and effective quality assurance systems were in place.

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 20 August 2019) and there was one breach 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 undertook this targeted inspection to check whether the requirement notice we previously served in relation to Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. 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 regulatory breaches 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.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

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 this key question in relation to infection prevention and control.

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

Ashville Care Home

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check whether the provider had met the requirement notice in relation to Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 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 carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Ashville 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

This inspection was announced. We gave a short period of notice of the inspection because we needed to check the arrangements in place for preventing and containing transmission of COVID-19 prior to entering the building. Inspection activity started on 29 September 2020 and ended on 15 October 2020. We visited the service on 15 October 2020.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority, Healthwatch and professionals who work with the service. Healthwatch is an

independent consumer champion that gathers and represents the views of the public about health and social care services in England. 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 five people who used the service and seven relatives about their experience of the care provided. We spoke with four members of staff including the registered manager, deputy manager, a senior care worker and a care worker. Discussions with people who used the service, relatives and staff were conducted either on site or via telephone calls. We reviewed a variety of records relating to the management of the service. We looked at records relating to infection prevention and control and COVID-19 management.

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 which relates to infection prevention and control.

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.

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 if the provider had complied with the requirement notice issued at the last inspection. We will assess all of the key questions at the next comprehensive inspection of the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

At our last inspection the provider had failed to ensure appropriate arrangements were in place to assess, monitor and improve the service. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection enough improvements had been made and the provider was no longer in breach of Regulation 17.

- Robust quality assurance systems were in place, which addressed the shortfalls identified at the last inspection.
- Wheelchair cleaning schedules and maintenance checks were implemented.
- Staff had completed medicines training and had their competency assessed. People's medicines records were personalised showing how they liked to take their medicines. A range of medicines audits were completed and any issues addressed.
- Improvements had been made to staff supervision and appraisal records. Staff said they felt well supported by the management team.
- Accident and incident analysis showed themes and trends were identified and action was taken to mitigate risks.
- People told us they liked living at the service and were well looked after. One person said, "I like it here because people are kind and helpful to me."
- Relatives spoke highly of the care provided and felt the COVID-19 pandemic had been handled very well as no staff or people at the service had contracted the virus.
- The provider and registered manager were committed to continuous improvement and making the service the best it can be for people who live there.