

A Carnachan

# Ashford Lodge Nursing Home

## Inspection report

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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
Is the service well-led?	Inspected but not rated

# Summary of findings

## Overall summary

### About the service

Ashford Lodge Nursing Home is a residential care home providing accommodation, personal and nursing care to up to 20 people. The service provides support to younger adults, older people and people living with dementia. At the time of our inspection there were 8 people using the service.

This was a targeted inspection that looked at medicine management, risk management and governance only.

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

People received their medicines safely. There were still some areas where best practice guidance had not always been followed. The manager assured us they had implemented measures to improve this.

Risks to people's safety were assessed, managed and reviewed. Where people's needs changed the manager updated the guidance for staff to follow to ensure staff knew how to keep people safe.

The manager had implemented improvements in the governance systems. The system enabled the manager to review the care people received and identify where improvements may be required to ensure people received safe care that met their needs and preferences.

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 and update

The last rating for this service was requires improvement/inadequate (published 28 December 2022).

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 Warning Notice we previously served in relation to regulations 12 [Safe Care and Treatment] and 17 [Good Governance] 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.

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?

Inspected but not rated.

**Inspected but not rated**

### Is the service well-led?

Inspected but not rated.

**Inspected but not rated**

# Ashford Lodge Nursing Home

## **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 Health and Social Care Act 2008.

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to risk management, lessons learned, medicine management and governance.

#### Inspection team

This inspection was carried out by 1 inspector.

#### Service and service type

Ashford Lodge Nursing Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Ashford Lodge Nursing Home is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was not a registered manager in post. There was a manager in post who told us they intended to apply to register with CQC.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We spoke with commissioners who are involved with the service to gain their feedback. 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.

#### During the inspection

We spoke with the manager and management consultants. We spoke with 1 staff member and 1 person. We reviewed all medicine administration records. We looked at governance records and 8 people's care plans.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection this key question was rated 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 if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

At our last inspection the provider had failed to implement enough improvement in medicine management, risk management and accident investigation. This placed people at risk of harm. This was a continued breach of regulation 12 (safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement has been made at this inspection and the provider was no longer in breach of regulation 12. We will assess all of this key question at the next inspection.

### Using medicines safely

- At the last inspection we found medicines were not always safely managed. At this inspection we found improvements had been made.
- People received their medicines as prescribed. However, there were some still inconsistencies in the way staff recorded people's medicines. For example, staff had not always recorded why people took some medicines that were prescribed for as and when required. This meant that health professionals might not always be able to identify if people's health deteriorated.
- We raised the above point with the manager. They took immediate action and implemented a system to support staff to improve medicines recording.
- There was clear guidance to guide staff how and when people could and should take their medicines.
- People's medicine requirements had all been reviewed and updated with input from healthcare professionals since the last inspection.

### Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- At the last inspection we found risks to people's safety were not always assessed or managed. At this inspection we found improvements had been made.
- Risks to people's safety were recorded in their care plans. There was guidance for staff about how to keep people safe from harm.
- People's care plans were reviewed regularly, and changes were made as people's needs changed.
- The manager had introduced a system for reviewing information about people following an accident. This involved reviewing the circumstances leading up to and around the accident and what could be done differently in future to prevent the same thing happening again.

# 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 our last inspection this key question was rated requires improvement. 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 warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

At our last inspection the provider had failed to ensure systems were used effectively to assess, monitor and improve the quality and safety of the care provided. This was a continued breach of regulation 17 (good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17. We will assess all of this key question at the next inspection.

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

- At our last inspection the systems for identifying and capturing risks to people's safety were not always effective. At this inspection we found the manager had implemented improvements.
- A system was in place that identified themes and trends of any safety concerns and highlighted where improvements may be required to ensure people were safe.
- The manager had enrolled all staff on training on how to effectively support people with a learning disability.
- Although there was no registered manager in post, there was a manager who was supported by a team of management consultants. The manager was working towards an action plan that detailed how and when further improvements would be implemented.