

Ashbourne Lodge JM Limited

Ashbourne Lodge Rest Home

Inspection report

8 Seventh Avenue Blackpool Lancashire FY4 2ED

Tel: 01253341424

Date of inspection visit: 13 July 2022

Date of publication: 05 August 2022

Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Good •

Summary of findings

Overall summary

About the service

Ashbourne Lodge is located in a residential setting in the South Shore area of Blackpool. The home is registered to accommodate up to 24 people who require assistance with personal care, over 2 floors. The property is set in its own grounds with garden areas to the front and rear of the building. There is a passenger lift for ease of access and the home is fully wheelchair accessible. At the time of the inspection 21 people lived at the home.

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

The building was clean and hygienic, and staff were seen to wear appropriate personal protective equipment (PPE). They had an infection prevention and control policy in place. There were sufficient staff to meet people's care and support needs. Staff were employed following a thorough recruitment process. People's safety was at the centre of care delivery. One person said, "Its a lovely home with plenty of staff around to make me feel confident and safe." Risks were assessed and carefully monitored to ensure individuals safety. People received their medicines safely.

The management team had auditing systems to maintain ongoing oversight of the service and make improvements where necessary. Quality assurance processes ensured people were able to give their views of the service. Responses we looked at were positive. We found the management team acted upon suggestions or ideas that were made to ensure the service continued to develop and improve the lives of people.

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 Good (published 30/08/2018).

Why we inspected

We undertook this inspection as part of a random selection of services rated Good and Outstanding to test the reliability of our new monitoring approach.

Follow Up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good



Ashbourne Lodge Rest 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 Care Act 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.

Service and service type

Ashbourne House 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 the service 24 hours' notice. There was a prevalence of COVID-19 in the geographical area at the time of the inspection and we needed to ensure it was safe and there were sufficient management staff available to support the inspection.

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 and commissioners who work with the service. We also looked at information we had received and held on our system about the service, this included notifications sent to us by the provider and information passed to us by members of the public.

We used all this information to plan our inspection.

During the inspection

We spoke with four people who lived at Ashbourne Lodge, three members of staff, registered manager and provider. We observed staff interaction with people. In addition, we reviewed a range of records. These included care records of people, medication records, two staff files in relation to recruitment and staff training records. We also reviewed a variety of records relating to the management of the service. We had a walk around the premises and looked at infection control measures.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at their quality assurance systems and care 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 'Good'. At this inspection, this key question remains the same. This meant people's outcomes were consistently good, and people's feedback confirmed this

Staffing and recruitment

- Staff recruitment processes were robust. Pre-employment checks were completed to help ensure suitable people were employed. One staff member said, "Yes all checks had been done before starting at the home."
- Newly recruited staff told us they worked with experienced staff members until they felt comfortable to work independently.
- There were enough staff to support people's needs. People we spoke with told us they were supported by staff that were available when they required help. For example, one person said, "They don't seem rushed to me, always staff around if you need them."

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe and confident with staff that cared for them. Observations found sufficient staff available in communal areas to ensure people's safety.
- There were effective safeguarding processes in place. The registered manager and staff had a good understanding of safeguarding people. They understood their responsibilities for keeping people safe and the processes for reporting any concerns.
- Staff told us they had received training in areas of understanding abuse and keeping people safe.

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

- The registered manager had good processes in place to manage people's safety and reduce risks. Risks to people and the service were assessed and managed well. This helped to protect people's safety.
- The registered manager reviewed incidents as part of lessons learned, to ensure risks were assessed to prevent reoccurrence where possible. For example, one person suffered a series of falls and from the analysis the management team delivered extra training for staff. In addition, they consulted health professionals and identified a sensor mat for the person. The number of incidents has reduced since action was taken.

Using medicines safely

- The registered manager had good systems and procedures to manage medicines safely. Staff received training on a regular basis and staff confirmed this.
- Staff maintained appropriate records for the receipt, administration and disposal of medicines. There were written protocols to guide staff on the administration of medicines prescribed 'as and when' required.

Preventing and controlling infection

• We were assured that the provider was preventing visitors from catching and spreading infections.

- We were assured that the provider had processes to admit people safely to the service.
- We were assured that the provider was meeting shielding and social distancing rules.
- 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.
- The provider was facilitating safe visiting in line with government guidance. This meant people could visit their relatives all days of the week in line with government guidance. Indoor visiting was suspended during the COVID-19 outbreak other than in exceptional circumstances; essential care givers were able to continue to visit indoors.



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 'Good'. At this inspection, this key question remains the same. This meant people's outcomes were consistently good, and people's feedback confirmed this

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People received person centre care and support. Plans of care we looked at were well written, person-centred documents with reviews in place should people's needs change. One person recently moved into the home told us they were consulted about their needs and wishes.
- Staff spoke positively about the registered manager and management of the service. For example, one said, "[Registered manager] has been supportive to me when I needed some time. It's a great home we work well together."
- Staff said their views and suggestions were listened to and they felt valued by the registered manager and management team.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager encouraged candour through openness. The registered manager and staff were clear about their roles, and understanding of quality performance, risks and regulatory requirements.
- The registered manager assessed and monitored the service through methods such as audits and these included, infection control, medication care planning and the environment. The registered manager informed us any shortfalls were addressed to improve and develop the service for people. We confirmed this with documentation we looked at.
- The registered manager was experienced and had good staff who were knowledgeable about the needs of the people they cared for. One person said, "The place seems organised and well run and the manager is always available which is nice."
- The registered manager understood their legal obligations, including conditions of CQC registration and those of other organisations.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager encouraged people to provide their views and about how the service operated through one to one meetings and surveys.
- Relatives were involved in the service and consulted about the care and support through surveys/questionnaires. Positive results were received from recent surveys and they included, 'Staff are kind & helpful' and, 'The service is first class.'

Working in partnership with others

- Records showed, when needed, advice and guidance was sought from health and social care professionals.
- The registered manager and staff worked closely with other agencies and relatives to share good practice and enhance care delivery.