

A Carnachan Ashford Lodge Nursing Home

Inspection report

1 Gregory Street Ilkeston Derbyshire DE7 8AE

Tel: 01159307650 Website: www.ashfordlodge.com

Ratings

Overall rating for this service

Inspected but not rated

Date of inspection visit:

Date of publication:

22 March 2023

25 April 2023

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 is a residential care home providing personal and nursing care to up to 20 people. The service provides support to younger and older adults and people living with dementia. At the time of our inspection there were 7 people using the service. Accommodation is provided in one large, adapted building.

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

This inspection took place in response to concerns raised about the ineffective management of the location. At this inspection it was identified people were at risk of not receiving safe and consistent support at Ashford Lodge. Actions were taken during and immediately after the inspection to ensure people were no longer at risk of harm.

There was not a robust system in place to ensure adequate numbers of suitable staff were available to meet people's needs. Financial stability systems were not in place, this meant consistent care and support may not be available to meet people's needs. People were at risk of not having sufficient nutrition available to them due to the lack of a robust system in place for buying groceries.

People received their medicines as prescribed. Although staff members knew people well, they were not offered the managerial support they needed to promote safe care.

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 31 January 2023).

Why we inspected

We undertook this targeted inspection to check on specific concerns regarding the management of the location. 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
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.	
Is the service well-led?	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 on concerns we had received about the management of the service.

Inspection team The inspection was carried out by 2 inspectors.

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

At the time of our inspection there was not a registered manager in post. The manager appointed by the management company to work at the location withdrew their application to register with CQC during the inspection and resigned from their management post with immediate effect.

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 provider and representatives of the management consultancy company. We spoke with 4 staff members. We looked at everyone's care records, including some medicine administration records. We looked at governance records and 1 staff recruitment record.

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 on concerns we had received about management. We will assess the whole key question at the next inspection of the service.

Assessing risk, safety monitoring and management

- People were at risk of injury from very hot water. For example, the temperature of the water in the communal bathrooms was not regulated. There was no system in place to monitor the water temperature of the showers used by people.
- People were at risk of harm as safety concerns had not been identified. For example, a missing drain cover in a bathroom was identified during the inspection. The manager was not aware of the potential risk of injury to people using this room.
- Personal emergency evacuation plans were in place. These plans are used to identify the support people require to safely exit the home in an emergency situation. A number of people required the use of equipment for safe evacuation. The equipment was seen to be available, however, the manager informed us staff had not been trained to use this equipment.

Staffing and recruitment

- People were at risk of insufficient suitable staff being available to meet their needs safely.
- Gaps in the staff rota had not been identified and therefore arrangements were not made to ensure sufficient staff were available to meet people's needs.

• People were at risk of being supported by unsuitable staff. Some staff in post did not have an up-to-date DBS check in place. Therefore, the provider had not ensured staff employed were safe to support people. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

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.

The purpose of this inspection was to check on concerns we had received about management. We will assess the whole key question at the next inspection of the service.

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

- There was no suitable management support available. There were no arrangements for the effective management of the location following the resignation of the manager in post.
- There was not a competent, experienced person providing day to day oversight, guidance, or support. For example, staff rotas had not been reviewed to ensure a safe number of suitably trained and skilled staff were available to meet people's needs.
- There was not an effective financial stability system in place at the location.
- People were at risk of a lack of nursing staff being available to meet their needs. There were 4 people assessed as requiring nursing care. The duty rota identified all nurses were provided by a staffing agency. This agency had an agreement in place with the company responsible for the day-to-day management of the location to provide staff whilst a payment plan was complied with. We were informed if the payment plan was not kept up, nurses would not be provided.
- There was no contingency plan in place detailing the arrangements in place if staff who were scheduled to work, either employed staff or staff from the agency, did not turn up to work.
- We were aware of claims of finances being unavailable to pay for food and supplies. We saw food and cleaning products were available and considered there were sufficient supplies to last for approximately one week. We were not assured of the financial stability to provide ongoing supplies.