

Barchester Healthcare Homes Limited

Ashford House

Inspection report

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Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Inspected but not rated

Summary of findings

Overall summary

About the service

Ashford House is a residential care home providing personal and nursing care to 50 people aged 65 and over at the time of the inspection, some of these people are living with dementia. The service can support up to 54 people.

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

People were kept safe by systems and policies in the home. Safeguarding incidents were managed, and referrals were made to relevant professionals. Staff received safeguarding training regularly to ensure they could identify different types of abuse.

Risks to people were identified, assessed and managed in a timely way. Action was recorded so staff had guidance to refer to for each person's individual risks.

The home had responded to the COVID-19 pandemic and additional measures had been implemented.

To ensure people's mental wellbeing during periods of "lockdown" where visits were not possible, additional video and phone calls for all residents were organised. When visits were permitted there was a booking in procedure implemented to ensure people were kept safe. This included a health questionnaire, temperature check and testing for in house visitors.

Separate entrances for different parts of the home had been utilised to ensure the least amount of foot traffic through the home occurred. Staff had access to a plentiful supply of personal protective equipment (PPE) and social distancing was encouraged through separate break times to ensure all government guidance was complied with.

Additional cleaning had been introduced in the home to ensure high touch areas were regularly cleaned and other areas that may increase risk of the spread of infection.

Social distancing had been encouraged by staff moving furniture to allow for a more spacious communal area. People living with dementia were reminded of the risks related to the pandemic on a regular basis by staff to ensure people received the appropriate support based on their needs.

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 19 March 2020).

Why we inspected

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.

The inspection was prompted in part due to concerns received about recent safeguarding referrals and the home experiencing a recent outbreak of COVID-19. A decision was made for us to inspect and examine those risks. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe section of this report.

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 COVID-19 and other infection outbreaks effectively.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection. The overall rating for the service has remained the same.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Ashford House 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?

Inspected but not rated.

At our last inspection we rated this key question Good. 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.

Details are in our safe findings below.

Inspected but not rated

Ashford House

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.

This was a targeted inspection to check on a specific concern we had about safeguarding management and a recent outbreak of COVID-19 in the home.

As part of CQC's response to care homes with outbreaks of coronavirus, we are conducting reviews to ensure that the Infection Prevention and Control (IPC) practice was safe and the service was compliant with IPC measures. This was a targeted inspection which included looking at the IPC practices the provider has in place.

This inspection took place on 31 March 2021 and was announced.

Inspection team

This inspection was carried out by one inspector.

Service and service type

Ashford 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 who was going through the process of being registered with the Care Quality Commission. Once registered, 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.

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 professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service. 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 six members of staff including the manager, deputy manager, senior care workers, care workers and administration staff.

We reviewed a range of records. This included safeguarding action plans, lessons learned documents, accident and incident records and documents relating to infection prevention and control.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at the business continuity plan including COVID-19 pressures and further infection prevention and control documents.

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. 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.

The purpose of this inspection was to check on a specific concern we had about recent safeguarding referrals as well as to check on infection prevention and control policies and procedures and ensure good practise. We will assess all of the key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

- People and relatives told us they felt safe in the home. We observed a relative say to staff, "I really can't thank you all enough for everything you have done to keep [person] safe."
- Staff received safeguarding training. Staff we spoke with felt confident to raise any safeguarding concerns and identify different types of abuse. The manager said, "We receive all the relevant training to ensure everyone is confident to report safeguarding correctly".
- Safeguarding referrals had been made to us in a timely way and the manager was keen to work with social care partners in an open, transparent way. The manager and deputy manager completed all relevant referrals and when further information was required this was provided to CQC.
- We observed that the manager had a robust procedure for dealing with any current safeguarding concerns and had been working with other professionals to fully investigate. The manager stated they would keep CQC updated with any developments or changes.

Assessing risk, safety monitoring and management

- People's individual risk assessments had been completed to ensure staff had guidance in how to support people in accordance with their preferences and individual risks.
- There were people living in the home who displayed behaviour that challenged. These people had positive behaviour plans in place and evidence was seen of staff regularly seeking advice and sending referrals to the local mental health team and other health specialists requesting support and guidance.
- Staff identified emerging and new risks and responded by completing assessments in a timely way. For example, if a person's mobility changed a new falls risk assessment would be put in place to ensure the risk was minimised.

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.