

# Ideal Carehomes (Number One) Limited

# Ashworth Grange

## Inspection report

Ashworth  
Dewsbury  
West Yorkshire  
WF13 2SU

Tel: 01924869973

Website: [www.idealcarehomes.co.uk](http://www.idealcarehomes.co.uk)

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## 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

Ashworth Grange is a care home providing personal care for up to 64 people, some of whom are living with dementia. There are communal areas and accommodation on both the ground floor and first floor. The service has 4 units, referred to as neighbourhoods, Daisy, Poppy, Rose and Lilly. At the time of our inspection there were 64 people using the service.

### People's experience of the service and what we found:

The service provided a homely, friendly, and inviting environment for people. There was a positive and inclusive culture maintained by managers and staff, where people were actively engaged and placed at the heart of service delivery.

People were protected from avoidable harm and had their individual care needs and risks assessed, monitored and managed. Where accidents and incidents occurred, these were reported and investigated appropriately, and learning used to mitigate future risks and improve the service. Medicines were managed safely.

Staff were recruited safely and there were enough staff to meet people's needs. Effective infection prevention and control (IPC) practices were in place. The service provided a homely, clean and tidy environment for people.

Effective quality assurance systems were in place to drive service improvement. The registered manager maintained good oversight of the service and information was shared with staff and external agencies when required.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

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

The last rating for this service was good (published 13 November 2018).

### Why we inspected

We inspected due to the length of time since the last inspection. We undertook a focused inspection to review the key questions of safe and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

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

Ashworth Grange on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### 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?**

**Good** ●

The service was safe.

Details are in our safe findings below.

### **Is the service well-led?**

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# Ashworth Grange

## 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.

#### Inspection team

The inspection team consisted of 1 inspector, 1 regulatory co-ordinator and an Expert by Experience (ExE). An ExE is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

Ashworth Grange 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. Ashworth Grange is a care home without 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 a registered manager in post.

#### Notice of inspection

The inspection was unannounced.

#### What we did before the inspection

We reviewed the information we had received about the service since the last inspection. We sought

feedback from the local authority, commissioners and Healthwatch Kirklees. 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 (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

We spoke with 9 people who used the service and 4 relatives about their experience of the care provided. We spoke with 10 staff members including the registered manager, care manager, carers, housekeeping and kitchen staff. We spoke with 1 healthcare professional who worked with the service.

We reviewed a range of records including 3 people's care records and multiple medication records. We looked at 3 staff files in relation to recruitment. We reviewed records relating to the management of the service, including policies and procedures and quality assurance records.

# 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 we rated this key question good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

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

- Risks to people's health and safety were assessed, monitored and managed safely.
- People had care plans and risk assessments in place. They were kept up to date and were reflective of people's individual needs and risks.
- Health and safety maintenance checks were up to date, for example, electrical testing and fire safety checks.
- Systems and processes were in place to report and investigate accidents and incidents. Lessons learned were identified and shared with staff. Staff told us, "We discuss lessons learned in supervision and meetings" and "Learning is shared and discussed in meetings."

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- Staff received safeguarding training. They knew how to identify different types of abuse and how to protect people from harm.
- People and relatives felt the service was safe. Feedback included, "I feel safe here. I am well looked after" and "[Name] is safe here, better than at home."

Staffing and recruitment

- Processes and procedures were in place to ensure safe staffing and recruitment at the service.
- There were enough staff to meet people's needs safely. People told us, "There are enough staff" and "There are enough staff. It is the same during the night and weekends too."
- The service completed appropriate staff recruitment checks, including Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Medicines were managed, stored and administered safely.
- Staff were trained in medicines management. Their competency was regularly checked. One staff member told us, "We get in depth training for medicines."
- Medicines records were accurate. Protocols were in place for as required medication and people received their medicines as prescribed. Feedback included, "They give me my medicines on time, and they have never missed" and "I have tablets and they are on time."

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- The service was homely, clean, tidy and in a good state of repair. Housekeeping staff followed cleaning schedules and checks were in place to ensure compliance with IPC practices.
- Policies and procedures were in place to support effective IPC.

#### Visiting in Care Homes

People were able to receive visitors without restrictions in line with best practice guidance.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS).

- The provider was working in line with the Mental Capacity Act.



# 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 we rated this key question good. At this inspection the rating has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Quality assurance systems and processes were in place to monitor the service and drive improvement.
- The provider had a clear management structure in place. The registered manager maintained good oversight of the service. Where shortfalls were identified action was taken without delay and information shared with staff to learn lessons and improve standards.
- The registered manager understood their regulatory requirements and the need to notify CQC and other relevant agencies of any significant events at the service, for example safeguarding concerns.
- The provider had created a learning culture at the service which improved the care people received. Staff development was supported through regular training and supervision. Staff meetings were held, and information shared to make improvements, for example, learning from compliments and complaints.

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

- The registered manager and staff created an open and positive culture which was person centred and achieved good outcomes for people.
- People and relatives were involved in their care. They spoke positively about the service, staff and care they received. Feedback included, "I live life to the full. The staff are marvellous and kind," "I have all I need here. The staff are very nice, and I can do what I want," "[Name] is very well looked after. The staff are very hard workers they go above and beyond" and "I am so happy with the care [Name] is getting here."
- Staff felt happy and supported in their roles. They were able to raise concerns with the management team and spoke positively about the registered manager. Comments included, "If I have any concerns I go to the [registered] manager and I know they will action it and act upon it. There is an open door policy," "I absolutely love it here. We are able to raise things with management. It's an absolutely lovely home" and "I love it here. I like to think I have high standards for my own work and so do they, they have the highest standards."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Systems and processes were in place to support engagement with people, relatives and staff.
- People, relatives and professionals were invited to give feedback either during meetings or via surveys and the information was used to inform service improvement.
- The service worked effectively with other healthcare agencies, for example, the GP and district nurses, in

order to meet people's health needs and achieve positive outcomes. One health professional told us, "They always respond to feedback I give. They [staff] all know exactly what is going on."

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 understood their responsibility under the duty of candour and was open and honest when accidents and incidents occurred.