

HC-One Limited

Ashton View Nursing Home

Inspection report

Wigan Road
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Wigan
Greater Manchester
WN4 9BJ

Date of inspection visit:
14 March 2023

Date of publication:
12 April 2023

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Ratings

Overall rating for this service

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Ashton View is a care home with nursing operated by HC-One Ltd located in Wigan. Ashton View is registered with CQC to provide care for a maximum of 58 people. There were 55 people using the service at the time of the inspection.

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

At our last inspection we identified concerns regarding the documentation of the Mental Capacity Act and best interest decisions, record keeping and governance systems. We found improvements had been made in these areas at this inspection.

People said they received enough to eat and drink and staff told us they received the necessary training and supervision to support them in their roles. People had access to the necessary healthcare as needed, such as dentists.

There were systems in place to seek feedback from people living at the home, including the use of satisfaction surveys and staff/residents' meetings. The home also had a number of links within the local community and worked well with partner agencies including the local authority.

Rating at last inspection

The last rating for this service was requires improvement (published July 2021) and the provider was in breach of regulations relating to good governance. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection, enough improvement had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this focused inspection to check the provider had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions Effective and Well-Led. For those key questions not inspected (Safe, Caring and Responsive), we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Ashton View on our website at 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. For more details, please see the full report which is on the CQC website at www.cqc.org.uk

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Ashton View Nursing Home

Detailed findings

Background to this 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 was carried out by 2 inspectors and an expert by experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Ashton View is registered with CQC as a 'care home' and CQC regulates both the premises and the care provided. This inspection did not cover the key question, 'Is the service Safe', therefore the safety of the premises was not looked at on this occasion.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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. At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced, we visited the home on 14 March 2023.

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 who work with the service. 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 this information to plan our inspection.

During the inspection

We spoke with 7 people who used service and 4 relatives about their experience of the care provided. We spoke with 14 members of staff including the registered manager.

We reviewed a range of records. This included staff training records and records associated with the provider's quality monitoring systems.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection we rated this key question requires improvement. The rating for this key question has now changed to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Ensuring consent to care and treatment in line with law and 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 Act 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 when this is in their best interests and legally authorized under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorize people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- Correct procedures were in place for people who lacked the capacity to make their own decisions. Mental capacity assessments were completed to ensure decisions were made in people's best interest.
- Staff had good understanding of mental capacity and knew how to seek consent from people. One member of staff said, "It is in relation to understanding people's capacity and ability to make decisions."
- DoLs applications were submitted to the local authority as required and the registered manager kept a record of their progress.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support;

- People's needs were assessed when they first moved to Ashton View, referred to as 'Moving in Assessments'. These involved people's friends and families when possible. People were initially referred to the service via the local authority and these assessments were also available within peoples' support plans where necessary.
- People were supported to maintain good health and had access to services such as dentists. People attended appointments with opticians if they needed any checks regarding their sight.

Staff support: induction, training, skills and experience

- Staff completed an induction when they first started working for the service, which they said helped prepare them well for the role.
- Both people living at the home and relatives said they felt staff were well trained and had the correct skills.

One relative said, "I feel the staff are well trained as they know how to support people with dementia. They are calm and relaxed with (person)."

- Staff told us they received the appropriate training and induction to meet the needs of the people they supported. One member of staff said, "We use the internal training system known as touch stone. There is enough support and training available."
- A training matrix was in place which detailed the different types of training staff had completed.
- Staff supervision and appraisal took place and gave staff the opportunity to discuss their work.

Supporting people to eat and drink enough to maintain a balanced diet

- People told us they received enough to eat and drink and enjoyed the food at the home. One person said, "I get enough food. I especially like the fruit snacks they give out. There is a good choice each day at mealtimes and I am provided with lots of tea to drink." Another person said, "I can't fault the food. I get plenty to eat and I get a good choice. There are snacks and drinks provided all day long."
- People had specific nutrition and hydration care plans in place, and this provided staff with information about the support people needed to eat and drink.
- The service had good links with other healthcare professionals, such as speech and language therapists (SaLT) and dieticians. Records of people's food and fluid were maintained and we saw people received the correct consistency of food if they were deemed to be at risk of choking.

Adapting service, design, decoration to meet people's needs

- Decoration and refurbishment had taken place in parts of the home since our last inspection with the necessary equipment available to meet people's individual needs. Pictures and memorabilia of the local area was displayed on walls for people to relate too.
- There was dementia friendly signage for communal spaces to support people living with dementia to orientate themselves. Each unit had various communal spaces for people to use depending if they wished to socialize or be in a quiet space.
- Some bedrooms had the option of creating a memory box outside of their bedroom door to fill with what they wished to represent who they were as a person.

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 requires improvement. The rating for this key question has now changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

At our last inspection the provider had failed to ensure appropriate governance systems were in place. This was a breach of regulation 17 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.

- At our last inspection, MCA assessments and best interest decisions were not clearly documented where any restrictive practices were used. We saw these were now being recorded.
- Competency assessments were also carried out of areas such as medication and moving and handling. Out of hours visits were also completed to ensure standards were adhered to overnight.
- Systems were in place to involve people, relatives and staff in how the service was run, including the use of satisfaction surveys to obtain feedback. Team meetings were held to gather staff views and staff told us they felt comfortable sharing their views.
- Improvements to personal care records were also required, however at this inspection we saw these were now being completed more consistently by staff.

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

- The staff team spoke of a positive culture at the service and said they enjoyed their roles. One member of staff said, "Everything is going well here at the minute. Staffing levels have improved and this has made a big difference. There is good team work and we communicate well."
- Staff told us they felt the service was well-led. One member of staff said, "There is an open door policy at the home and I find the manager approachable." Another member of staff said, "The manager is supportive and visits the unit quite a lot."
- People achieved good outcomes whilst living at Ashton View and we received positive feedback from everybody we spoke with about the care provided. People had been able to celebrate wedding anniversaries at the home and attend football matches with staff at Wigan Athletic.
- The feedback about the care at the home was positive. One relative said, "We rate the quality of care very highly. We have another relative in a different home and we wish (person) was here." Another relative said, "(Person) has problems with their skin. The quality of the staff is fantastic, they look after (person) so well and they are friendly and helpful. They keep a very close eye on (person's) condition."

Working in partnership with others

- The service worked in partnership with other agencies as required including local authorities and social work teams. The home had previously been involved with market oversight meetings operated by Wigan Council and other multi-disciplinary teams, due to previous concerns about the quality of care. However after demonstrating a sustained period of improvements, the home had since exited this process.
- The home also had a number of links in the local community, for example dementia cafes which people living at the home enjoyed visiting.

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

- The service had a registered manager and we liaised with them throughout the inspection. They understood their role and responsibility to submit statutory notifications about any incidents that had occurred within the service. The registered manager had recently won an award as 'Home Manager of the year 2022' within HC-One.
- It is a legal requirement for the ratings from the last inspection to be displayed on any websites operated by the provider and at the office location. We saw these were displayed as required from when the home was previously rated requires improvement.

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

- There were systems in place to monitor the quality of service provided to ensure good oversight. This included audits, with action plans created if any shortfalls were identified.