

Ashington House Limited

# Ashington House

## Inspection report

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### Ratings

Overall rating for this service

Good



Is the service safe?

Good



### Overall summary

At the last comprehensive inspection of this service on 27 November 2014 a breach of legal requirements was found. This was because the service was not managing risks in relation to pressure ulcers well. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Ashington House on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

Ashington House provides accommodation and personal care for up to six people with learning disabilities or autism. On the day of our visit there were six people living in the home.

The home had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. You can read a summary of our findings from both inspections below.

At this inspection we found the registered manager had put in place the necessary improvements in relation to pressure ulcer risk management. This meant the person's risk of developing pressure ulcers was reduced. The registered manager had liaised with a district nurse to produce a risk assessment and clear guidelines which staff followed to reduce the risk of pressure ulcers. Staff had attended training on pressure ulcer management. Equipment to help reduce the risk had also been provided and was being used appropriately.

# Summary of findings

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service safe?**

The service was safe. We found that action had been taken to improve safety. Risks in relation to pressure ulcer prevention were being well managed. The manager had sought professional advice and put in place a risk assessment and guidelines which staff followed.

**Good**



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## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection was undertaken to check that improvements to meet legal requirements planned by the provider after our 27 November 2014 inspection had been

made. The team inspected the service against one of the five questions we ask about services: is the service safe? This is because the service was not meeting some legal requirements.

This inspection took place on 9 April 2015 and was unannounced. It was undertaken by a single inspector.

Before our inspection we reviewed information we held about the service and the provider, including the previous inspection report.

During the inspection we spoke with the registered manager. We looked at one person's care records to see how their care was planned and carried out.

## Is the service safe?

### Our findings

At the last inspection we found a breach in relation to care and welfare as the service was not managing risks relating to a person developing pressure ulcers. However, at this inspection we found the registered manager had made the necessary improvements. This meant the person's risks of developing pressure ulcers were reduced. The manager had liaised with a district nurse to produce a risk assessment and clear guidelines for staff to follow. Staff had attended training in pressure ulcer management and professional guidance was available for staff to refer to

within the home. Staff undertook a number of measures to prevent pressure ulcers developing which were recorded. These included supporting the person to reposition when in bed regularly to relieve pressure areas.

The registered manager had identified specialist equipment required to reduce the risk. The person had been provided with this equipment which included an air-pressure relieving mattress and a pressure cushion. We checked and found the equipment was being used correctly. For example, we observed the air-pressure relieving mattress was at the right setting in relation to the person's weight. These issues meant the person was being supported appropriately in relation to pressure ulcer risk.