

## Visit to Ashbrook Care Home

We first visited this home in July 2016 and carried out a follow-up visit in May 2017. At the times of both the original visit and the follow-up, the home was undergoing extensive re-building and so, on 12 October 2017, we carried out another follow-up visit.

At the time of this latest visit, the building work was nearly finished, the main work outstanding being the provision of car parking facilities.

The home now had 37 beds available, but there were only 27 residents accommodated, many of whom were in long term rehabilitation. One resident was receiving end of life care, and seven residents were subject to Deprivation of Liberties Safeguarding (DoLS).

Staffing levels were excellent for the number of residents, some who had resided in the home for a long time.

The manager, who in the team's opinion has always been open and honest with them, informed us that one disgruntled member of staff had referred a whistle-blowing issue to Havering Council, but no substance had been found to the allegation.

Shift patterns were 7am-2pm, 2pm-9pm and 9pm-7am overnight. Flexi-time working was available for those who wished to avail themselves of it. Staff comprised two Nurses and seven carers during the day and, at night, one Nurse and three carers. There were two cooks, one kitchen assistant and three cleaners, one laundry assistant and one administrator of the staff. The staff to whom the team spoke were all happy and felt the home was looking good for everyone involved.

The Deputy Manager would shortly be re-starting work, having been away for a long period for family reasons. In her absence, the two senior nurses had deputised when the Manager was not available, although she remained on call.

The team were advised that, once the home was running at its full capacity with all 70 beds brought back into use (and it appeared that the CQC were about to sanction

that), then they would recommence use of the Gold Standard Framework for End of Life Care again.

Two nurses covered the medications round. Medications were provided by the Park End Pharmacy (as they did for Moreland House, another home provided by Abbey Healthcare). The GP service was provided by the nearby Lynwood Medical Centre.

The team took opportunity to speak to several patients and staff, all of whom were happy with the home. Some residents could visit a local café frequently, and because they found long trips out exhausting the home had decided to bring in external entertainment, which was enjoyed by all.

The team was shown one bariatric bed and were advised that another three would become available once the home was fully up and running at capacity (one prospective resident was currently awaiting admission to a bariatric bed).

Discharge from hospital remained a problem and the home would not accept discharged residents later than 6pm. There was one resident in Queen's Hospital at the time of the visit.

The kitchen and laundry were satisfactory. New tables and chairs had been delivered and were awaiting installation in the new dining rooms on each of the three floors.

The team had no further recommendations to make.