



Inspection Report on

Ashgrove

Barry

Date Inspection Completed

18/01/2023

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About Ashgrove

| | |
|--|---|
| Type of care provided | Care Home Service Adults Without Nursing |
| Registered Provider | The Cedars Care Services Ltd |
| Registered places | 3 |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | 11 September 2019 |
| Does this service provide the Welsh Language active offer? | This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture. |

Summary

People living at Ashgrove appear happy, content and well cared for. Care staff have built positive relationships with the people they care for and provide care with kindness and patience. Care staff are happy working at the service and feel well supported and valued. All staff training and supervisions are up to date and the majority of care staff are registered with Social Care Wales, the workforce regulator. People are supported to do the things that matter to them and staffing levels ensure that people do not wait for care. Personal plans of care contain detailed information and are supported with additional documentation where required. External professional support is sought without delay ensuring people receive the right support. Medication processes are safe and robust. The Responsible Individual (RI) visits the service when required and has good oversight of the service. Quality assurance monitoring takes place regularly and includes views of people using the service and/or their relatives. People are cared for in a pleasant environment that is clean, safe, and suitable to meet their needs. People have access to safe outdoor space and have single bedrooms for privacy and space when required.

Well-being

People are treated with dignity and respect. Care staff attend training that equips them with the skills to undertake their roles correctly. Care staff have good working relationships with the people they care for and are able to anticipate the needs of people who cannot do this themselves. Pre-admission assessments are completed prior to admission to ensure the provider has a full understanding of people's needs. Care documentation is thorough, robust, and reviewed regularly to ensure it is kept accurate and up to date. People have their own bedrooms which are personalised and offer opportunity for personal space and privacy. Medication is stored correctly and administered safely. Referrals are made to external health and social care professionals when required. Ashgrove has policies and procedures in place to ensure the smooth running of the service.

People have choice and control over their lives. Personal plans of care are individual and include, where possible the views of people receiving care and/or their relatives. People have personal daily planners and staffing levels at the service are determined by the needs of people using the service. People attend activities of their choice within the service and the community and have choice in regard to food and drinks. The RI engages with people as part of regulatory visits and people's opinions are sought as part of quality assurance monitoring. People and/or their relatives are supplied with information about the service they can expect to receive which includes details of how to complain if they are unhappy with the service.

People are protected from abuse and harm. Ashgrove has a safeguarding policy in place and all staff attend training in the safeguarding of adults at risk of abuse which is refreshed regularly. Safeguarding referrals are made to the Local Authority when required and the RI monitors any referrals made to ensure lessons can be learned. Environmental hazards at the home are reduced and safety checks of the building are completed when required. There is a fire risk assessment in place and staff are given information on how to evacuate people in an emergency. The home has suitable equipment in place to maintain people's safety and independence which is serviced regularly to ensure it is fit for purpose. Staff are recruited safely with pre-employment checks completed before employment commences.

Care and Support

People receive the right care at the right time. Care staff understand the needs of the people they care for and do so with kindness and patience. We saw care staff engaging positively with people and there was evidence of good relationships through laughter, fun and jokes being shared. One person we spoke with was able to smile when we asked them if they like living at the service and pointed to a picture of their favourite staff member and smiled. Care documentation indicates that referrals are made to external health professionals without delay and any advice or guidance is added to people's personal plans. Personal plans of care contain detailed information about people's needs and clear instructions on how care should be provided. Personal plans are reviewed regularly to ensure they are kept current and accurate. These documents are important as they guide staff on how to care for people correctly. There are risk assessments in place where required. Medication processes at the service are safe and robust. Medication is stored safely and administered in line with prescription. We saw an opened liquid medication had not been dated to indicate when it was open and were assured that this would be addressed immediately. There are Medication Administration Record (MAR) charts in place that contain all required information and have been completed correctly to indicate when medication has been administered.

People are supported to have autonomy over their lives as far as reasonable possible. Care documentation is person centred and includes people's likes, dislikes and how they prefer their care to be provided. Where possible people and/or their relatives are involved in care planning and review processes. People have their own personal daily routines and individual activity plans in place. People do the things that matter to them and are encouraged to maintain relationships with friends and family. One person showed us pictures of family holidays they have enjoyed with staff support and tickets from music concerts they have attended. Some people have their own vehicles to enable them to access the community, and staffing levels at the service ensure that people can attend activities and events outside of the service. Weekly food menus are produced in line with people's preferences and always include a choice of meals, but we were told that there is also further choice available if people do not want the options on the menu.

Environment

People live in a suitable environment that meets their needs. Ashgrove is located in a residential area of Barry that benefits from local amenities and good transport links. The environment is warm and welcoming but would benefit from some cosmetic redecoration in places. The provider advised that there are plans for the home to be decorated as soon as possible. We did not detect any malodour during inspection. The home benefits from adequate communal space that enables people to spend time together and there are sufficient toilets and bathrooms all in good working order. There is safe, accessible outdoor space that benefits from garden furniture for people to enjoy the outdoors when the weather permits. People have their own bedrooms which are warm, clean, and decorated nicely. We saw that people's bedrooms are individual and personalised in accordance with people's needs and preferences. One room we viewed has sensory equipment that provides therapy to a person with communication difficulties.

People can be assured they live in a safe environment. On arrival we found the main entrance secure and we were asked for identification and to sign the visitor book before we were permitted entry. We saw that harmful chemicals are locked away safely and any hazards have been reduced as far as practically possible. Everyone living at the service has a Personal Emergency Evacuation Plan (PEEP) in place which are stored centrally. These documents are important as they guide staff on how to evacuate people safely in the event of an emergency. There is a fire risk assessment in place, which was written a number of years ago and then reviewed annually to reflect any changes. We advised the provider that it would be beneficial to rewrite the document fully including the changes to bring the assessment up to date. We were assured this would be done as a matter of priority. The building is well maintained and all checks including gas and electricity safety testing are completed in line with legal requirements. Equipment is well maintained and serviced regularly to ensure it is safe to use.

Leadership and Management

People benefit from the leadership and management in place. The RI has oversight of the service and the manager is registered with Social Care Wales. There are policies and procedures in place for the running of the service, which staff sign to acknowledge they have read and understood the policy. The manager also reviews policies as part of supervision processes to ensure that staff are fully aware of the providers expectations. The RI completes visits to the service in line with regulatory requirements and produces a report to support the visits. Quality assurance monitoring takes place regularly which includes seeking the views of staff working at the service and people using the service and/or their relatives. This indicates that the provider is committed to identifying where improvements are required and proving a quality service. The manager understands legal requirements in regard to caring for vulnerable people and makes referrals to external professionals where required. On the day of inspection, we saw Deprivation of Liberty Safeguard (DoLS) assessments taking place by the Local Authority designated assessor. This process ensures that placements are lawful where people lack the mental capacity to make their own decisions in regard to their care and accommodation. There have been no complaints to the service since the last inspection.

People are supported by staff who are trained and well supported. Care staff receive training appropriate to the roles they undertake; the training statistics at the service indicate that all staff are up to date with required training. All staff receive a formal supervision in line with regulatory requirement. Supervision is important as it provides staff with an opportunity to discuss any practice issues or needs in a setting that is recorded. Care staff we spoke with told us that they are happy working at Ashgrove and one person said, "*I have worked her for years, I love it, it's not like a job*". We examined a selection of staff personnel files and found that they all contain the required information. We were able to see that pre-employment checks including checks including Disclosure and Baring Service (DBS) certificates and references are applied for prior to employment commencing. These checks are important as they determine a person's suitability to work with vulnerable people. There is a system in place to ensure that DBS certificates are renewed when required.

Summary of Non-Compliance

| Status | What each means |
|---------------------|---|
| New | This non-compliance was identified at this inspection. |
| Reviewed | Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection. |
| Not Achieved | Compliance was tested at this inspection and was not achieved. |
| Achieved | Compliance was tested at this inspection and was achieved. |

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

| Regulation | Summary | Status |
|------------|--|--------|
| N/A | No non-compliance of this type was identified at this inspection | N/A |

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement

| Regulation | Summary | Status |
|------------|---------|--------|
|------------|---------|--------|

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|-----|--|-----|
| N/A | No non-compliance of this type was identified at this inspection | N/A |
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Date Published 16/02/2023