



Inspection Report on

Ashgrove

**Ashgrove
Chester Road Gresford
Wrexham
LL12 8PP**

Date Inspection Completed

17/08/2023

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About Ashgrove

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Gresford Care Limited
Registered places	51
Language of the service	English
Previous Care Inspectorate Wales inspection	16 January 2020
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People are happy and are supported to live their lives as they choose. Their voices are heard, and their independence is promoted. People's health needs are understood by care staff, and timely referrals are made to the appropriate professionals to seek advice and guidance when needed. The home is supported by a range of visiting health professionals to ensure people receive the care they need to remain as healthy as possible.

Care is delivered by an enthusiastic and familiar staff team, led by a highly effective senior manager. Care documentation accurately reflects that people are being cared for appropriately by care staff and in line with their personal plans.

The home provides a comfortable environment for people to live in which is safe, well looked after, and meets their needs. The environment is warm, clean, and decorated to a high standard. The Responsible Individual (RI) has oversight and visits the service regularly. There are clear systems in place to monitor the quality of care provided, and the RI's three-monthly report and the services six monthly reviews are being undertaken and detailed.

Well-being

People are supported with their physical and social wellbeing. People, relatives, and health care professionals we spoke with are complimentary of the care staff and management of the home. We observed care staff assisting people calmly with dignity and respect. Care records give care workers the instruction required to support people accurately and are reviewed appropriately. We spoke with professionals; relatives of people living at the service and care staff and saw documentation which show referrals to relevant health care professionals are made in a timely way. We observed care workers have good knowledge of people's needs, refer to people in a positive way and it was clear they know the people they support well. Feedback from people living at Ashgrove, their relatives and professionals is positive about care staff and managers. We saw people being helped by care workers appropriately, not being hurried, in a kind and gentle manner.

People can exercise choice and control over their every-day lives. We observed people enjoying the company of others in various seating areas. We observed interactions with people by care staff to be considerate and respectful of people's wishes. There is a choice regarding meals, and we saw people having alternatives if they do not like what is on the menu. We observed and people told us they could get up and go to bed when they wished. The provider seeks the views of people living at Ashgrove and the staff team.

People are protected from potential harm, abuse, or neglect. Care staff records are checked robustly. Training records show care staff have undergone appropriate training. There is a robust set of management audits in place which ensure any risks are minimized.

The home is clean, warm, comfortable and bedrooms reflect individuality. We viewed documentation which showed maintenance work had been identified. It is clear the provider is investing in the home.

Care and Support

People can be confident staff have an up-to-date plan of how their care is provided. Personal plans are in place, reviewed regularly, and care workers told us documentation gives them enough instruction to undertake their role. This was confirmed by documents we viewed. People's personal plans and risk assessments give a detailed history of their medical conditions and reflect outcomes in professional and health care professionals' documentation found in people's records. We viewed staff handover documentation which was detailed. Care workers we spoke with confirm personal plans and risk assessments are an accurate reflection of the person they are supporting. We spoke with people and their relatives, all felt care staff support them in a timely way, discuss their or their relatives care with them and support the person in the way they wish. A relative told us *"They involve me in my relatives care and support."* We spoke with a visiting professional, who confirmed care staff follow instructions well and are aware of people's needs.

Care and support are provided in a way which protects and maintains the safety and well-being of individuals. We saw care workers supporting people appropriately, at the persons own pace and with dignity and respect. People we spoke with confirmed care staff are kind and gentle when supporting them. A relative told us *"My relative was always well kempt, they were immaculate... I will forever be indebted to the home for what they did when I couldn't."* We saw people's dietary requirements are clearly detailed in people's care documentation and this information is available for staff in the kitchen and reflects information held in professional documentation. We saw information in regards areas such as food and fluid intake and people's weight are monitored by care staff. Another relative told us *"The staff encourage my relative to drink...my relative gets plenty of food... staff encourage my relative to walk, my relative gets the support they need to walk, and staff walk with them."*

People can be confident they are provided with quality care and support they need and takes into consideration their personal wishes. We saw people were given preferences of what food they could have at mealtime through menus, and we saw people who, when they told staff they didn't like the choice, were given something different of their choosing. People we spoke with also confirmed this happened and the food was good. We observed mealtimes which were a pleasant experience for people, with good positive interactions happening. We saw people enjoying each other's company and spending time with care workers. We observed care staff interacting with people appropriately at their eye level and at the person's pace. People told us there were a lot of activities for them to be involved in, including day trips, which we evidenced. We saw the activities co-ordinator interacting exceptionally well with people, undertaking activities with them throughout the day of the inspection, which people clearly enjoyed.

Environment

People live in an environment that is suitable to their needs. The home is warm, welcoming, and very well decorated throughout. There is space for people to choose where they want to spend their time and during the inspection, we saw people sat in the different lounges. We visited Dolydd, the dementia specific area of the home. This was secure, with its own kitchen / dining and lounge area for people to use. The decoration in Dolydd was of a very high standard in the communal areas, as it was throughout the home. We viewed a selection of bedrooms throughout the home and saw they are well decorated, warm, clean and people can personalise them if they so wish. People told us they are happy living at the home. We observed daily cleaning being undertaken by the domestic staff. Communal areas are hazard free. The home shows evidence of recent investment by the owners and input by the manager to a very high standard. We saw internal decoration had been undertaken showing individuality in different spaces and numerous pot plants had been purchased and dotted around the communal areas of the home. We were shown evidence that new flooring for downstairs has been ordered and will be fitted shortly. Ashgrove has superb outside space which is secure for people to enjoy.

People can be confident they live in a safe environment. The main entrance is secure, and our identification was checked before we were permitted entry. People's care documentation is kept electronically, and this is password protected. All the relevant equipment checks are being undertaken throughout the home.

Leadership and Management

Care staff are employed in appropriate numbers to enable people to achieve their personal outcomes. Care staff said there are enough staff on duty and people are not left for long periods of time, which was also confirmed by people we spoke with. We viewed paperwork which shows staffing levels are in line with the providers statement of purpose and what is expected by the managers. The provider also uses a tool to calculate the numbers of staff required, this calculation is done regularly.

The provider ensures care staff receive supervision in the time frames stipulated in the regulations. We also spoke with care workers who told us they receive enough training to undertake their role and people we spoke with told us care staff support them appropriately. We viewed records which showed care staff receive appropriate training. We saw staff recruitment is robust and care workers are registered with the appropriate bodies in regards their fitness to work. We saw evidence staff team meetings are undertaken.

Arrangements are in place for the effective oversight of the service, through ongoing quality assurance processes that review standards of care and compliance with regulations. Information, and views of people obtained are used for the continued development and improvement of the service. A six-monthly quality assurance review has been completed in line with regulations which considers the views of people using the service to ensure people are satisfied with the service they receive. We saw the RI undertakes their three-monthly reviews of the service appropriately. We saw senior managers have a comprehensive range of audits, such as personal plan reviews, to ensure the home is run effectively. There are a range of policies, such as safeguarding infection control and medication, in place to ensure the service is run safely and as intended.

People can be confident senior managers take issues seriously and work to a high standard. Care staff told us managers take issues seriously and they receive good support from managers. One member of the care team told us *"I love working here, I get good management support, I am well supported."* Another told us *"I get great management support... managers take issues seriously."* People living at Ashgrove and their relatives told us managers were approachable, one person told us managers were *"fabulous."* Whilst a professional we spoke with told us *"Managers are approachable.... Issues are reported appropriately."*

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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