



Inspection Report on

Ashgrove

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

Date Inspection Completed

17/01/2020

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Description of the service

The registered provider is Gresford Care Limited and they are registered to provide accommodation and personal care for up to 51 people aged 50 years or over. The service also provides specialist care for up to 10 people living with dementia. They have appointed a person to represent them as the responsible individual, Brett Bernard. There is a manager in post who is registered with Social Care Wales.

Summary of our findings

1. Overall assessment

People living at the home have a sense of belonging and are very satisfied with the standard of care, support and their quality of life in Ashgrove. Relationships between people and staff are respectful and positive with a clear sense of care and understanding by staff of peoples' holistic needs. Support is provided by suitable, kind, staff who are provided with training and support. The environment is very homely and people are supported to be involved in this in both their private room and the communal areas. Measures are in place to check, review and improve the quality of the service and this includes the involvement of people living at Ashgrove and their relatives.

2. Improvements

This is the first inspection since the service re registered under The Regulation and Inspection of Social Care (Wales) Act 2016.

3. Requirements and recommendations

Section five of this report sets out recommendations to improve the service. These include the following:

- Care plans.
- Environment – laundry.
- Staff training.
- Quality Care review.
- Responsible individual reports.

1. Well-being

Summary

People experience a sense of belonging, demonstrated through positive, caring relationships with staff. People were very satisfied with all aspects of the service and clear they were included in decision making about all aspects of their life in the home. People felt cared for, and regarded Ashgrove as their home. People told us they liked it that, "*dogs live here as well*". They told us they liked the staff and their needs were met promptly in a caring and respectful way. Relatives described Ashgrove as, "*home from home with help*", "*all the family enjoy visiting and we walk out with a warm feeling*" and it's "*like a big family*" with several commenting on improvements in people's health and well-being since they moved into the home, particularly those who had previous experiences of residential care. Staff described how they enjoyed working with people and more than one member of staff told us, "*all our residents are loved dearly*". Staff were familiar with people's lifestyle choices and routines and this was respected. Activities and opportunities to socialise within and outside the home were provided after consulting with people about their interests and this included people living with dementia. The home and people living and working there were a valued part of the local community. We conclude people are provided with a good standard of care by professional and caring staff.

People live in a clean, tidy and homely environment. People were very positive about the standard of living provided. They were able to personalise their bedrooms with their own possessions and consulted about the communal environment. The dementia unit meets the needs of the people currently living there and everyone has the opportunity to view and use the well-maintained garden. Measures are in place to ensure the home is well maintained and will continue to improve.

People are protected from harm and abuse. Safeguarding training was provided to staff during their induction and periodically thereafter. The manager liaised with relevant professionals regarding potential safeguarding matters and a safeguarding policy was in place. People we spoke with indicated they felt safe and were able to discuss any issues with staff. A complaints policy was in place. Measures are in place for promoting people's safety.

People's individual cultural and lifestyle choices are met. The manager and staff were very clear people were seen as individuals with different lifestyle, religious and cultural needs. People and relatives spoken with confirmed staff were aware of such beliefs and accommodated them as much as possible. People's Welsh language and cultural needs were discussed before people moved into the home. The statement of purpose and guide to the home would be provided in Welsh on request. Staff were asked about their Welsh language skills on application and this was taken into account where possible, in staff allocation. Welsh cultural events were celebrated and some bi-lingual signage provided. People were supported to continue their religious faith if they wanted to. People benefit from a service that sees them as individuals and works hard to provide a person centred approach.

2. Care and Support

Our findings

Activities are provided within and outside the home. People spoken with all told us they enjoyed the activities available and were able to suggest anything they would like to take place. Music was playing through the home and the majority of people spoken with told us they enjoyed this, *"it cheers me up"* although one person told us they found it, *"too loud"*. Comments included, *"I love going out"*, *"really enjoy the trips"* and *"I love it when the children come to see us"*. A person who had experienced residential care elsewhere told us they were, *"really pleased to come here because there's always something going on"*. A regular newsletter was produced which included details and photographs of past and forthcoming events. These included visits by local schoolchildren, a mother and toddler group, entertainers, coffee mornings, baking, pet therapy dogs, clothes retailers and making poppies for Remembrance Day. Trips out included a canal boat, local garden centres, pub lunches, the seaside, wheelchair ice skating and local schools. It was very positive that people living with dementia were included in activities in the main house and trips, and staff frequently volunteered to accompany people on trips in their own time. We conclude people are offered meaningful ways to occupy their time in line with their needs and preferences by a committed and enthusiastic staff team.

People's needs are identified and met. People did not move into the home until their needs had been assessed and it had been determined they could be met. People and relatives told us they had visited the home before they moved in wherever possible, and had been able to spend time there including having meals, before they made a final decision. We saw people offered support discreetly by staff familiar with their needs. People told us they were always asked about how they wanted care and support to be delivered and staff respected this. People's comments included, *"it's my home, the atmosphere and staff are excellent"*. All staff spoken with were very clear people were seen as individuals and offered choices in line with their expectations. Several relatives commented they felt people's mood and well-being had improved since moving into the home and commented, *"Mum is much happier here and her moods improved"*, *"Mums much improved so I have peace of mind"*. Relative's comments included, *"its lovely, couldn't have found a better place"*, *"there's always lots going on"*, *"Mum loves going out"*, *"tell the inspector it couldn't be any better, they couldn't look after me any better"*, *"Mum has really improved and is much happier"*. Care records were detailed and person centred with people's life history and information provided by the funding authority taken into account. Records included 'one page profiles' and people confirmed they were asked how they wanted care and support to be provided. Relatives confirmed they were consulted and invited to regular reviews. Communication between people, relatives and staff was described as, *"great"* and *"excellent"*. Risk assessments were in place where necessary and regular reviews took place with the findings recorded. However, records did not include an individual personal plan detailing outcomes people wanted to achieve. Detailed records were kept in relation to Deprivation of Liberty Safeguarding, (DoLS), whereby legal measures are in place to support people without mental capacity. The manager and majority of staff had completed training in this topic so they were aware of the legal implication of a DoLS being place and how to support people. Records showed people were supported to access healthcare services when needed and people spoken with confirmed their healthcare needs were met promptly. Relatives told us the service was proactive in supporting people to maintain good health

and they were always kept informed if people were ill. We looked at the way medicines were managed and saw this was in line with good practice. We conclude people receive the right care at the right time in a person centred way that meets their needs and expectations.

People's nutritional needs are met. People were offered choices of food and drink at meal times and in between. We saw finger foods and snacks throughout the home. The menu had been reviewed and updated after talking to people about what they would like to be available. Staff were attentive but discreet, when offering support to people at mealtimes. The menu, including a pictorial style, was displayed so people knew what choices were available. People told us they were very satisfied with the food. Comments included, "*its lovely*", "*really nice*" and "*always something I like*". Relatives were very positive about the quality and range of meals available and how they were encouraged and supported to take meals at the home if they wished to. A relative told us they had been really pleased at the support for families to eat together at Christmas and how much this had meant to them. Records showed peoples dietary needs and preferences were recorded. We conclude people's dietary needs and preferences are met in a way that involves them and offers choice and variety.

3. Environment

Our findings

People live in a comfortable, suitable environment that suits their needs. The home was clean, tidy and homely. People told us they liked their bedrooms and had been encouraged and supported to personalise them with their own possessions if they wanted to. People and relatives told us they liked the recent changes and updating of the home, which had made it, "*more homely, lovely*", and "*home from home*" since the manager had been in post. We saw some bedrooms did not include room numbers or items such as memory boxes to support people to be able to find their way around independently. Some, but not all signage was pictorial and bi-lingual. People had access to well-maintained gardens and outdoor space, including the dementia unit, which had a secure area people could use without supervision if they were able to. The manager and staff told us the gardens were frequently used in good weather for activities and events. People living with dementia in the dementia unit appeared comfortable in their environment. However, the living space was limited and the layout meant people using the sofas were sat with their backs to other people, reducing their social contact. The limited space also meant there was little choice of where to spend time, other than in their own room, if people did not want to listen to music or watch TV. The dining area facility was sufficient for people living there but did not provide enough chairs for staff to use if people needed assistance when everyone was using the room. We discussed with the manager how this space would work when people's needs increase. We conclude people are very satisfied with the standard of the well-maintained environment that meets their needs but consideration will need to be given to the layout of the dementia unit as people's needs increase.

Health and safety and infection control is taken seriously. We saw checks and servicing took place of equipment and facilities used by people who live and work in the home. We saw liquid soap, paper towels and hand wash were provided in communal bathrooms and toilets. Some bathrooms had been decorated in a homely style. However, some tiles were missing in two bathrooms and there was a disparity in the quality of the communal bathrooms between the ground and first floor. The manager told us plans were in place to refurbish the upstairs facilities. The laundry was in very poor condition with walls and flooring in poor condition and porous areas exposed presenting a potential infection control risk from dirty laundry. We also saw a hole in the ceiling and water ingress. After the inspection, the manager told us plans were now in place for this work to be completed. We conclude people benefit from a well maintained and safe environment.

4. Leadership and Management

Our findings

Information is provided about the service. A statement of purpose, (March 2019) and guide to the home, (undated), included all the required information, including the terms and conditions of residency and the contact details of external agencies including CIW. These documents were available in the home and given to prospective, and existing people and their relatives. They ensure people are provided with information so they can make an informed decision when considering using the service. Information was provided about how to raise a concern or complaint. People told us they would be comfortable telling staff or the manager if they had any concerns. Relatives were all clear about how to raise concerns and one told us they had done this, been listened to, and the issue resolved to their satisfaction quickly. The manager told us they had not received any complaints. We conclude people are provided with detailed, transparent information so they can decide if they want to use the service.

Measures are in place to make sure staff are suitable and well supported, but training is not always refreshed promptly. We looked at the way three staff had been recruited and found all the necessary checks had been made, and were in place before staff started work. This made sure they were suitable to work with people at risk. Staff files contained application forms, references, and Disclosure and Barring Service, (DBS), checks. Measures were in place to renew staff DBS checks every three years. All staff were very positive about working at the home and comments included, *"all staff always give their best"*, *"it's a really good home to work in"*, *"the morale is always really good"* and that the energy of the home was *"very happy and cheerful"*. Staff described the manager as, *"great"*, *"very hands on"*, *"very good"* and *"very approachable"*. Regular staff meetings took place and staff told us they felt able to contribute and were listened to. All staff spoken with told us they were provided with, *"lots of training and support"* and *"great training"*. Records showed staff were provided with regular formal supervision and an annual appraisal. Records showed all staff completed training in dementia with more advanced, accredited training provided for staff who worked in the dementia unit. However, training records showed not all staff had completed refreshers in necessary training. This included health and safety, fire safety, first aid, infection control and moving and handling updates. The manager provided us with details of further training booked to take place. We conclude that measures make sure staff are suitable and provided with support but refresher training is not always provided promptly.

Measures are in place to check the quality of the service. People and relatives told us their views were always sought about the service. Regular meetings were held with people who lived at the home and minutes taken. Discussion with people, relatives and staff confirmed the manager and staff listened and took action on any issues raised, for example, changes had been made to the menu because of people's requests. Meetings were also held with relatives and the record of a meeting in July 2019 noted a high level of satisfaction with the service. Comments included, *"excellent, very good communication and always made welcome"* and *"staff are marvellous, always cheerful"*. People and relatives were very positive about the way the home was managed and the improvements made since the manager had been in post. Comments about the manager included, *"it's more homely, better atmosphere and the foods improved"*, *"great"*, *"approachable"*, *"very hands on"* and

that the quality of the service was “*much better now*”. Questionnaires were sent to relatives in November 2019 and the results collated. Responses included, “*I cannot fault the care home, it is amazing*”, “*everything is meticulously clean and so homely*”, “*very satisfied*”, “*warm and friendly staff*” and “*fantastic caring job*”. Several relatives commented people had made significant improvements in their health and well-being since living at the home and had “*thrived*”. Systems were in place to check the environment, medication management and all aspects of the service. The area manager and the responsible individual undertook visits to the home. The reports completed by the RI did not record how many people or staff they had spoken with. The report of the July/August 2019, (specific date not included), did not evidence the RI had spoken with any people living at the home. The manager told us the RI had visited the home in December 2019 but they had not yet received the report. The manager confirmed they had not completed a quality of care review as required. They told us that they were meeting with a senior member of the organisation in March 2020 to look at this. We conclude people generally benefit from a service that is committed to listening to people and ensuring the service is checked and constantly improving.

5. Improvements required and recommended following this inspection

This was a full inspection undertaken as part of CIW dementia thematic review.

Unannounced visits took place on 16 January 2020 between 8.45. a.m. and 17.15. p.m. and 17 January 2020 between 9.05 am and 12.40 p.m.

5.1 Areas of non compliance from previous inspections

This is the first inspection since the service re registered under The Regulation and Inspection of Social Care (Wales) Act 2016.

5.2 Recommendations for improvement

- A personal plan detailing individuals' outcomes and how they will be achieved must be in place.
- The guide to the home must be dated.
- Measures must be in place to ensure all staff have completed necessary training and training qualifications must not be allowed to expire.
- Significant improvements must be made to the laundry to make sure it is fit for purpose.
- Quality of care reviews must be completed at least six monthly.
- The records of the responsible individual visits must include details of people spoken and with and be in line with the regulation.

6. How we undertook this inspection

This was a full inspection undertaken as part of CIW dementia thematic review. Unannounced visits took place on 16 January 2020 between 8.45. a.m. and 17.15. p.m. and 17 January 2020 between 9.05 am and 12.40 p.m.

The following regulations were considered as a part of this inspection: The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017.

The methodology included:

- We spoke with nine people who live at the home and seven relatives. We also spoke with the responsible individual, the manager and seven staff. We also included the responses of three staff who completed our questionnaire during the inspection.
- We used the Short Observational Framework for Inspection, (SOFI). The SOFI tool enables inspectors to observe and record care to help us understanding the experience of people who cannot communicate with us. The findings are included in this report.
- We toured the premises.
- We reviewed how medicines were managed.
- We reviewed the Statement of Purpose and guide to the home. We also reviewed other records including care plans, staff records, records of the visits undertaken by the responsible individual and other records related to the running of the service.
- We reviewed information held by CIW.

Further information about what we do can be found on our website:

www.careinspectorate.wales

About the service

Type of care provided	Care Home Service
Service Provider	Gresford Care Limited
Responsible Individual	Brett Bernard
Registered maximum number of places	51
Date of previous Care Inspectorate Wales inspection	This is the first inspection since the service was re-registered under The Regulation and Inspection of Social Care (Wales) Act 2016.
Dates of this Inspection visit(s)	16 January 2020 & 17 January 2020
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	Working towards. This is a service that is working towards providing an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service whenever possible.
Additional Information:	

Date Published 12/03/2020.