



Inspection Report on

Ashton Park Care Home

**Ashton Park Residential Home
37 Waterloo Road
Newport
NP20 4FP**

Date Inspection Completed

19 April 2022

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About Ashton Park Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	BIRA CARE HOMES LTD
Registered places	17
Language of the service	English
Previous Care Inspectorate Wales inspection	11 August 2021
Does this service provide the Welsh Language active offer?	Yes. The service provides 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.

Summary

Ashton Park care home is registered to provide care services for up to 17 people. Improvements have been made since our last inspection with the running of the service and the environment. People living at the service are happy with the care and support they receive. Care staff are dedicated and provide support to people with genuine care and warmth.

Personal plans are clearly written to instruct care staff on how best to support people in all relevant areas. We saw that improvements have been made with including people and their representatives in their plan reviews, but this needs to be done more consistently.

The home currently has an interim manager whilst a permanent manager is being appointed. Care staff feel well supported by the interim manager. The Responsible Individual (RI) and another director are supporting with the management of the home. Staffing levels have been improved and are now sufficient to meet the care needs of people living at the home.

The home is now secure from unwanted visitors and some improvements have been made to the environment. Some areas of the home still require redecoration, which the RI assured us would be prioritised.

Well-being

People have control over their day-to-day lives as much as possible. We saw people socialising with each other and care workers supporting people to engage in activities. People choose where to spend their time. We saw some people prefer to stay in their rooms whilst many spend time in the communal lounge.

People enjoy having visits from their loved ones and a local hairdresser visits every week. People we spoke to were complimentary about the home and care staff. One person told us *“I love it here the staff look after me well, the staff are lovely”*. Another person said, *“it’s very good here the food is excellent. The girls are very good looking after us and always see to us when we need anything.”*

Residents receive the support they need to maintain their health and wellbeing. The service completes a range of risk assessments and personal plans, which identify each person’s care and support needs and how these can best be met. The interim manager has been updating these plans to make them more person centred, some more work is required with this including records of people’s social histories for care staff to refer to. Individuals are supported to access medical and specialist services, as required. Care workers recognise when people need emotional support and provide this with kindness and compassion.

Residents have their own rooms, which are personalised to their individual tastes. People have some of their own furniture, family photos, cards and collectables in their rooms, which gives a homely feel to their surroundings.

The service helps to protect people from abuse and neglect. Care staff complete training in relation to the safeguarding of adults at risk and understand their role in protecting people. The service has a safeguarding policy, which reflects the Wales Safeguarding Procedures and is kept under regular review. People are encouraged to share their views about the service they receive.

Care and Support

People receive the care and support they require, as and when they need it. We saw that care staff were attentive, courteous and supportive to people throughout our inspection visit. Requests for support, both with tasks and emotional support are responded to promptly and provided with warmth and compassion. Personal plans of care have been improved since our last inspection. The interim manager is continuing to review these plans to improve the content and ensure they are person-centred. The care needs of each person are clearly documented, and all staff access this information regularly to inform their daily routines. We saw that there was a lack of detail about the social history of each person; the manager assured us this will be addressed. Improved social histories will give a clearer picture of the person, their life, interests and loved ones.

Referrals are made to health and social care professionals as and when required. People are registered with a local general practitioner (GP). Records are kept of all appointments and outcomes for review as required. Care staff records are accurate and overall comprehensive. Detailed daily notes evidence that care staff are supporting people in line with their personal plans.

People are encouraged to engage in activities if they choose to do so. An activities coordinator is employed for four days a week. People enjoy their meal experience; they are encouraged to be as independent as possible and supported when required. Residents told us that the food is good and has been improved recently.

Systems are in place for the safe management of medication within the service. People receive appropriate support with their medication, which helps to maintain their health. The records we checked were all completed accurately.

Infection prevention and control procedures are good. Care staff wear appropriate personal protective equipment (PPE) and wash their hands regularly. Temperatures of residents are taken daily and regular COVID-19 testing is carried out on staff. We were asked for evidence of a negative lateral flow test result before we entered the property and had our temperature taken before entering.

Environment

Our previous inspection we raised some concerns about the security of the property. We saw that the provider has addressed these concerns. The side gates to either side of the home are now locked. The doors into the laundry and small conservatory leading to the lounge are also now kept locked. We saw that the lawns continue to be unkempt and require cutting. The rear of the property benefits from a level patio area which residents can access. The lower section of the garden is laid to lawn and has uneven steps leading to a greenhouse. A wooden ramp leading out to the patio was damaged which the RI assured us has since been replaced. The RI assured us that this would be risk assessed to ensure people were not at risk of harm.

People benefit from a secure environment; the front door is kept locked. We viewed the maintenance file and saw that all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms take place at the home and staff are trained in fire safety. People living in the home have a personal emergency evacuation plan to guide staff on how to support people to leave safely in the case of an emergency.

People's bedrooms are personalised to their individual tastes, individuals have some of their own furniture in their rooms as well as photos of loved ones and other belongings. Some areas of the home, such as the stairway are in need of redecoration.

People benefit from a secure environment; the front door is kept locked. We viewed the maintenance file and saw that all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms take place at the home and staff are trained in fire safety. People living in the home have a personal emergency evacuation plan to guide staff on how to support people to leave safely in the case of an emergency.

We saw that the home is overall kept clean and tidy. We were told that care staff are required to complete cleaning tasks whilst the vacant domestics position is filled. This could impact on care delivery; however, we were assured that a new domestic is due to start shortly.

Leadership and Management

The home is currently being run on a day-to-day basis by an interim manager. They are suitably qualified and know the home well. Care staff told us that they find the interim manager approachable and that they are making improvements to the running of the home. The provider has effective governance arrangements in place to support the smooth running of the service. The model of care described in service's statement of purpose accurately reflects the actual support provided

The interim manager has been covering shifts as well which has limited their time on management tasks. We were assured that this had been rectified from the start of May, so they are able to spend all of their time on management tasks. We saw that sufficient care staff are employed at the service to support people in a dignified and unrushed way. Residents told us that there are always enough staff available to support them when they need it.

Overall, staff feel valued and supported in their roles, we saw care staff were confident in going about their duties and supporting people in a variety of ways.

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
N/A	No non-compliance of this type was identified at this inspection	N/A

Date Published 26/05/2022