



Inspection Report on

Ashton Park Care Home

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

Date Inspection Completed

11 August 2021

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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	30 March 2021
Does this service provide the Welsh Language active offer?	This is a service which is working towards providing an 'Active Offer'.

Summary

Care workers are attentive, kind and try their best to deliver the care people need promptly. Good relationships between people living at the service, their representatives and care workers have been established. Care workers understand people's preferences and how people like their care to be provided. Overall people living at the service and their representatives are happy with the care and support provided. Staffing levels are inconsistent which makes it difficult for care workers to meet people's needs quickly. Some people are waiting too long for their care to be provided. People do not have regular access to stimulating activities. The home continues to take a restrictive approach to indoor visiting which has had a detrimental effect on some people's well-being. Improvements in the frequency of reviews completed for people living at the service and the supervision of care workers are evident. However, people's representatives are not actively consulted as part of the review process and this needs to improve. Some investment in the home has been made since the last inspection. However, the service requires increased investment to make it a more comfortable and homely place to live. Some environmental safety risks have not been identified and rectified.

Well-being

Individuals are currently unable to take part in activities which they enjoy. During our inspection visit we saw people appeared bored, lacked social stimulation and the provision of appropriate activities. No activity plans were available and one person told us “*not a lot goes on.*” We were told the previous activities worker had left and no replacement had yet been found. We observed some activities such as boardgames and puzzles were stored in a ground floor bathroom area which was not being utilised. Care staff are busy. During our inspection we did not see care workers had the opportunity to routinely spend time chatting with people on a one-to-one basis. People can choose where they spend their time and we saw people spending time in their bedrooms and in the groundfloor communal lounge areas.

The service continues to restrict indoor visiting arrangements due to the pandemic. We requested a copy of the temporary visiting policy which provides people and their representatives with up-to-date information about visiting arrangements in the care home. We were told the service does not have one. Overall people and their representatives told us they are unhappy with the ongoing restrictions to indoor visiting arrangements. One person spoke about the “*detrimental effect*” it had on their well-being. Others stated they were “*confused*” by what they were and were not allowed to do in regards to visiting. One person told us their feet were sore as there had been restrictions to the frequency of podiatry service visits. We discussed this with management who explained in the last few weeks, contact has been made and negotiations are taking place to restart these visits. During the pandemic some essential visits were allowed and podiatry visits should not have been restricted. Where visiting restrictions have impacted on peoples’ well-being we did not see individualised risk assessments had been completed, and steps had not been taken to resolve the matter. Restricted indoor visiting was an issue we identified at the last inspection, where we encouraged the service to take a rights based approach. More needs to be done to ensure people’s well-being is promoted.

Care and Support

People have good relationships with care workers and are encouraged and supported to be as independent as possible. However, not everyone living at the service feels satisfied all aspects of their well-being are sufficiently considered. During our conversations with people living at the service and their representatives we received mixed feedback. One person stated *“staff are lovely but there’s not enough of them”*. Another said *“I’m very happy with the care, but I would like to take X out. It really would mean a lot to us both.”* Another told us *“I miss having my hair cut and my toe nails are really long and uncomfortable.”* One person explained *“my mobility is very poor and I have to try to get downstairs to see my visitor. I can’t always do it and I miss out on the visit then. There are no activities here, it can be very tiresome.”*

During our inspection visit we saw care workers were busy supporting people in their bedrooms and in the communal areas. On arriving at the care home the manager explained they were short staffed and they were required to give medication as there was no senior care worker available that day. Staffing levels on the day were lower than recorded in the statement of purpose. We were told one staff member who is employed as the domestic/laundry worker was also supporting with care tasks. This reduces the time they could spend ensuring all areas of the home had been suitably cleaned and people’s laundry had been completed. Care staff told us the service was often short staffed and this had been ongoing for several months. We spoke with management and expressed our concerns about staffing levels. We noted by late morning an additional agency worker had arrived. We saw one person’s commode had not been emptied after being used. We highlighted this to care workers who arranged for it to be emptied promptly.

We considered staffing rotas for the four weeks prior to the inspection and found there were frequent gaps where the staffing levels were lower than those recorded in the statement of purpose. Action is required to ensure there are sufficient staff available to meet people’s needs and staffing levels do not fall below acceptable levels. Some people living at the service are waiting too long for the provision of support and this needs to improve..

Care staff are as attentive towards people as they can be, and provide care to individuals as recorded in their personal plans. Personal plans and risk assessments considered contain detailed social histories for people living there. Information available enables care workers to deliver support in a way which matters most to people. There is emphasis on promoting and encouraging independence. Daily care documentation is completed and effectively records the support people receive. We noted improvement in the frequency of personal plan reviews taking place, but documentation still does not record if consultation with people’s representatives who wish to be involved takes place. This was identified as an area for improvement at the last inspection. Overall representatives told us they were not consulted about reviews which left some unsure about the ongoing goals for their relatives and with unanswered questions.

People feel the availability and type of social activities needs to improve. We did not see people had any meaningful activities available during our visit. We were shown photographs of people enjoying some activities, but we were unable to establish when these were taken. We were told the activities worker had recently left and saw no activities worker had been employed on the rota for the previous four weeks. We were provided with assurances the service would prioritise the employment of a suitable activities worker.

Environment

People live in an environment where some improvements to the building have been noted, as a result of improvements recommended at a recent inspection. However, the home is tired and communal areas in particular require redecoration. Overall people's bedrooms are personalised to individual choice, but more needs to be done to ensure the building is made as homely and comfortable as possible. The service is set back from a busy road in Newport. It overlooks a local park which could be utilised to enhance people's feelings of well-being. There is provision of chair lifts to support those who require access to the upper floors. Most bedroom doors are numbered, but there are no memory aids such as pictures of the person or specific painting of the bedroom doors to aid those with memory problems to identify their rooms as independently as possible. We saw people had choice about where they spent their time, with some people spending time in their bedrooms and others in the communal lounge areas.

Outside space is available and is mainly utilised for outdoor visiting. There are two gates which lead into the garden area which we found unlocked. One gate post was found to be situated with a significant gap at the side which could allow unauthorised visitors to access the garden area, or provide people living at the service with unsupervised access to the local community. We were able to re-enter the building through the laundry room which had been left open for increased ventilation. The grassed area of the garden was overgrown and potential risks were identified with the volume of weeds which had grown around the steps down from the patio area. People are unable to use the grassed area of the garden because of this. This was raised with management and reassurances were immediately provided that this would be rectified.

We saw a member of domestic staff was available on the day of inspection, but they were supporting with care tasks which reduced their availability for time spent on domestic and laundry tasks. We saw some frequently used areas of the home such as corridors and stairs required hoovering. Due to the pandemic, it remains important to ensure adequate time is spent ensuring the home is frequently cleaned and appropriately sanitised. We considered the staffing rota in regards to domestic staff and saw the home has identified one member of staff is sufficient to complete domestic and laundry tasks on a daily basis. We identified occasions on the rotas where no staff were available to complete these tasks. Overall care workers expressed concerns about the frequent cross over of roles due to insufficient staffing levels.

People's right to confidentiality is respected and upheld. Overall information belonging to people living at the service is stored securely and only accessible to those who are authorised to see it. However, some of the information we requested as part of this inspection could not be easily found. We saw significant amounts of paperwork in the manager's office which had not been filed and there was a chaotic feel to the working environment which needs to improve. The front door is locked and identity checks are

appropriately undertaken. Our Covid negative test result was checked prior to being allowed authorised entry. This demonstrates the service is aware of and following current guidelines.

Leadership and Management

People have access to information about the service. There is a statement of purpose available which provides information about the service, and the type of support people can expect to receive. This document is reviewed at least annually and updated accordingly. Having access to this information supports people and their representatives to make informed choices when identifying a suitable service. However, we identified some information recorded in this document does not reflect the service being provided, in particular this is around staffing levels. Improvements are required to ensure information contained within this document accurately reflects the service people receive.

Some oversight of the service takes place, but improved ways of engaging with people living at the service, their representatives and care workers employed at the service need to take place and be recorded. Environmental safety risks need to be identified as part of this process and measures taken to reduce risks need to be documented. The Responsible Individual (RI) completes quality visits to evidence there is oversight of the management of the service, and reports were available which demonstrate when and how these visits took place. However, care workers have been raising concerns in their individual supervision sessions, in particular about low staffing levels and improvements to the building, which appear to have gone unheard. The RI needs to take a more proactive approach to identifying and addressing risks to people living at the service and find improved ways of consulting with people, their representatives and care workers. We requested a copy of the most recently completed quality of care review, but were told this had not been fully completed at the time and would be sent to us in due course.

Care staff are safely recruited and receive training and supervision to support their development and improvement. The records we examined show the provider carries out the necessary checks when recruiting staff. Care staff receive mandatory training relevant to their roles and we noted refresher training is available at regular intervals. The availability of in-person training courses has been significantly reduced for all services due to the pandemic, with the majority of training provided via online training courses. Overall, care workers were positive about the training and supervision available to them. We requested information on the provision of supervision for all care workers in the last year, and were shown hand written supervision dates which management indicated was out of date. However, we were shown individual supervision records for several care staff, which demonstrates individualised supervision has been provided at the frequency required by regulation. We saw minutes of a care staff team meeting, which had taken place in June 2021 which demonstrates care workers have the opportunity to provide their feedback and voice any concerns collectively.

Areas for improvement and action at, or since, the previous inspection. Achieved

Reviews are now routinely being provided at intervals which meet regulatory compliance. However, the representatives of people living at the service continue to not be routinely consulted during reviews.

Regulation 16(1)

Staff supervision intervals.

Regulation 36(2)(c)

Maintenance of premises.

Regulation 44(4)(h)

Areas for improvement and action at, or since, the previous inspection. Not Achieved

None

Areas where priority action is required

At review people's representatives are not routinely consulted, and their feedback is not documented and acted upon.

Regulation 16(4)

Care and support is not being provided in a way which best promotes people's well-being and safety.

Regulation 21(1)

The service needs to be provided in keeping with information contained within the statement of purpose. In particular this relates to overall insufficient staffing levels and the deployment of staff. Further internal and external maintenance of the building needs to be completed and any environmental risks need to be proactively identified and responded to as a matter of priority in order to appropriately promote the safety of people living at the service.

Regulation 6

We found poor outcomes for people, and / or risk to people's wellbeing. Therefore, we have issued a priority action notice and expect the provider to take immediate steps to address this and make improvements.

Areas where improvement is required

None

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