



Care and Social Services Inspectorate Wales

Care Standards Act 2000

Inspection Report

Ashdale Care Home

Golden Lane
Pembroke
SA71 4PR

Type of Inspection – Focussed
Date of inspection – 5 February 2013
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Summary

About the service

Ashdale Care home is situated within a residential area in the town of Pembroke. It is a purpose built building providing accommodation all on one level apart from an upstairs flat for one able bodied person.

Ashdale was registered to provide nursing and personal care for forty three (43) persons, over the age of sixty five (65). Respite and day care was also available.

The responsible individual for Ashdale Care Limited was Susan Harris and the registered manager was Denise Alderman.

What type of inspection was carried out?

This was a focused inspection which concentrated on the experience of people using the service and their quality of life. This therefore enabled the inspector to spend time speaking to people and observing their care and their relationships with staff.

The methodology used was;

- ξ One announced visit.
- ξ Individual discussions with a number of service users and staff.
- ξ Observations of daily life and interactions and the use of a Short Observational Framework for Inspection (SOFI) tool to observe staff interaction with service users was used in communal areas. The SOFI tool allows us to spend time watching what was going on in the home and help us to record how people spent their time, the type of support they received and whether they had positive experiences.
- ξ Examination of care documentation.

What does the service do well?

People were well supported and received a good service from a stable and competent team of staff.

Staff engaged and interacted with individuals with warmth and patience which provided people with a sense of belonging.

People benefit from living in a good standard of accommodation which provides a clean, homely and friendly atmosphere.

What has improved since the last inspection?

Two more bedrooms now had en-suite facilities.

What needs to be done to improve the service?

On this occasion a non compliance notice was not issued with regard to the following, however for the benefit of service users the registered provider must address these matters, which will be followed up at the next inspection.

The inspector notified the registered person that the service was not compliant with Regulation 12 (1) (a) as one care file was missing some relevant risk assessments and daily entries had not been completed for four days since admission to the home.

Quality of life

Overall, it was found that people using the services at Ashdale were able to exercise their rights and they were observed to be treated with respect and dignity. The manager and staff demonstrated a commitment towards ensuring that each individual experienced a good quality of life according to their likes and wishes. People told us they were able to have control of their lives and the care they received by actively being involved in decisions about their care and lifestyles which included times to rise or retire to bed and where and how they spent their day.

Staff engaged and interacted with individuals with warmth and patience which provided people with a sense of belonging. Both individuals and their relatives spoke very highly regarding the quality of care and the staff delivering it at Ashdale. However the use of terms of endearment should be discouraged as this can be seen to be patronising. We observed good moving and handling practices and saw staff provided reassurance and explained the what was happening to the person throughout the procedure. Staff were generally aware of people's needs and recognised their distress and dealt with individuals in a sensitive and respectful way, affording service users time to express their feelings. However one person's distress was not initially addressed appropriately and their agitation continued. When brought to the attention of another staff member they acted in a manner that fully recognised the importance of the person's request and knew what they wanted and facilitated it happening.

Mealtimes were a social occasion and people were able to enjoy having their meals in an unrushed manner and were supported to meet their eating and drinking needs with sensitivity and were provided with enough support to enable independence. Meals were presented in an appetising way and attention was paid to the presentation of the soft or liquidised meals. The menus were clearly displayed on each table and we observed people being offered plenty of choice of what they would like to eat. However people were not always offered a choice of drink because there was an assumption staff knew what they liked.

People using the service are actively involved in defining and measuring the quality of the service. Monthly quality circle meetings were held on the first Thursday of every month. This enabled people to make their feelings known on all aspects of their lifestyle at Ashdale and participate in organising the activity programme. Minutes and actions taken from these meetings were displayed back to back with the menus on the dining tables to ensure that they were available for all to read.

People had the opportunities to be positively occupied and stimulated. This was because there were activity organisers that planned the activity programme with the residents and this changed as the residents abilities changed. The programme covered morning and afternoon sessions six days a week. Trips out were organised for lunch, shopping, afternoon tea or just to drive around and see what is happening in the local area. We joined in the planned activity for the afternoon which was well attended, however individuals had the choice whether they attended or not and this was confirmed by those spoken with. The session was clearly enjoyed by all and visitors also joined in and assisted with the activity.

A 'What's On' information sheet was available to all and explained what activities were planned for the month and this was displayed on the notice boards. One member of

staff had the role of producing a newsletter called The 'Ashdale Telegraph' which was produced monthly with lots of information of what had been happening in the home and was available for service users, families and friends.

People generally experienced appropriate, responsive care from staff with an up to date understanding of their individual needs and preferences. This is because the sample of care files seen had care plans and risk assessments in place. However one file examined was not complete as it did not have all the necessary risk assessments in available and no daily entries had been made for days or nights since admission to the home four days prior to the inspection visit. Care documentation would have benefitted from being more personalised and evidenced people's choices. This was because one person raised a point about having choice of gender of staff attending to their personal care needs.

Quality of staffing

This inspection focussed on Quality of Life. CSSIW did not consider it necessary to look at the Quality of Staffing on this occasion because of the service had a good track record in relation to staffing and we saw that there was sufficient staffing in place to meet the current needs of people. People spoken with were complimentary, satisfied and had no concerns regarding the staff.

Quality of leadership and management

This inspection focussed on quality of life. CSSIW did not consider it necessary to look at the quality of leadership and management on this occasion. This is because there had been no changes in the management structure and no concerns had been raised since the last inspection. However this theme may be considered at future inspections.

Quality of environment

This inspection focussed on quality of life. CSSIW did not consider it necessary to look at the quality of environment in detail on this occasion. This is because Ashdale provides a good standard of accommodation which is well maintained, clean and comfortable. However this theme may be considered at future inspections.

People could be assured that there was an ongoing refurbishment and decoration plan in place and several areas of improvement had been achieved since the last inspection. In order to ensure people's well being was promoted the facilities available to people had been improved as two additional en suites had been created in two of the bedrooms. There were also further plans to extend other bedrooms to provide more en suite facilities.

How we inspect and report on services We conduct two types of inspection; baseline and focussed. Both consider the experience of people using services.

ξ **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

ξ **Focussed inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focussed inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focussed inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- ξ Talking with people who use services and their representatives
- ξ Talking to staff and the manager
- ξ Looking at documentation
- ξ Observation of staff interactions with people and of the environment
- ξ Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

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