



## Inspection Report on

**Ashburnham House**

**Ashburnham House  
High Street  
Brecon  
LD3 0PF**

## **Date Inspection Completed**

12/12/2024

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## About Ashburnham House

Type of care provided	Domiciliary Support Service
Registered Provider	Shaw healthcare (Cambria) Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	First inspection under RISCA registration
Does this service promote Welsh language and culture?	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

Ashburnham House provides good quality care and support. People are understood and are treated with dignity and respect. People's voices are heard, and they do the things that make them happy. People choose how they spend their time and are supported to maintain their tenancies and be as independent as possible. People are safe and protected from abuse and neglect. People spend time in their community and feel like they belong.

Personal plans of care are detailed, robust and reviewed regularly. Referrals are made to health and social care professionals without delay and care staff document any changes to people's needs promptly. Medication is stored correctly and administered safely.

A long-standing team of committed care staff are recruited safely, are well trained and caring. Good management arrangements and oversight of the service are in place. The service manager is accessible to people using and working at the service. The Responsible Individual (RI) visits regularly and consults with people to make improvements.

## Well-being

People have information about the service and what opportunities are available to them in the wider community. People's individual circumstances are understood and considered, and their voices are heard. Individuals supported by Ashburnham House are treated with dignity and respect. They speak for themselves and make decisions, helping them to feel in control of their lives. People make choices about their home, promoting a sense of involvement and independence.

People make choices about how they would like to spend their time and where they would like to go. People use facilities in their community, and we were told about groups they were involved with. People contribute to their communities and are valued in society. We were told about attending events, volunteering and visiting family, doing the things that mattered to them. People are supported to maintain the relationships that are important to them, with the service being proactive in planning visits to loved ones.

People enjoy living in a home they call their own and we were told about people being supported to furnish and decorate their rooms. People told us they feel safe and protected. People receive a good standard of care and support from staff who they trust and who know them well. Care staff have been safely recruited, trained and supported, helping to maintain their wellbeing. A person using the service told us, *"They look after us and help us."*

People are supported to maintain their overall health and emotional wellbeing. The care staff team have good relationships with people and understand their physical and emotional needs, and when they may need some extra support. A member of staff told us, *"I enjoy being with the tenants."* Care staff maintain good communication with other professionals and seek support in a timely manner. Robust management systems also ensure people's medications are well managed.

## Care and Support

People are positive about the care and support they receive. People using the service are supported to live as independently as possible in their own home. They are supported by caring staff who understand their needs and know them well. People have regular planned opportunities to talk with care staff about their personal outcomes. Support is planned according to people's wishes.

Detailed personal plans accurately reflect people's personal outcomes, care and support needs. Robust individual risk assessments identify risks and provide instruction for keeping people safe and well. People using the service are involved in timely reviews of personal plans, including risk assessments. Personal plans recognise specialist needs, which inform individuals' care and support provision. We saw care staff understand individuals' needs and use effective strategies to support their wellbeing. Daily notes record care and support provided and information from the day which is important to the person.

People are supported to maintain their overall health and well-being. The service provider accesses other health and social care professionals when required, to ensure people receive prompt medical treatment or assessments. Advice from other professionals is included within care plans. Daily recordings are used to effectively monitor people's health, wellbeing and activities.

The service provider has safe systems for medication management. Medication records are fully complete, storage arrangements are safe, and the overall administration of medication is effective.

People are kept safe by care staff who have undertaken safeguarding training and understand their responsibilities. Robust risk assessments are in place to identify and minimise individual risks

## Leadership and Management

The staff described the RI as being approachable and helpful. There are systems and processes in place for effective governance and oversight of the service with the RI visiting regularly. People using the service provide feedback to the RI about the support they receive. The RI completes audits and produces action plans, to ensure continuous improvement of the service.

The statement of purpose describes the service offered at Ashburnham House and explains how the service will be provided. We found the service delivery aligns with the statement of purpose.

The manager and care staff know the people who use the service well and people are comfortable and confident in their company. Staff have confidence in the manager and feel well supported. We were told the manager was, *“Extremely understanding and helpful, if he can help he will.”* People using the service trust and value the care staff, one person told us, *“They couldn’t be kinder to the tenants.”*

People are supported by staff who are suitably vetted and trained to provide the levels of care and support required. Staff enjoy working at the service and value the people they support. Staff are registered with Social Care Wales, and staffing levels are appropriate to the needs of people using the service. There are sufficient numbers of skilled and experienced staff available to cover rotas. There is a stable staff team at Ashburnham House with little staff turnover, ensuring there is continuity and consistency of support.

Staff complete comprehensive mandatory training and additional training which is service specific. Staff have a positive attitude to training and training compliance is very high. A member of staff told us, *“I find the training to be really good.”* Staff told us they receive regular supervision and are positive about the support received during supervision.

Policies and procedures provide clear guidance for staff and support them to raise concerns. People living at Ashburnham House have access to information giving them a clear understanding of how the service is provided and the records kept.

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.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	
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