

Living Ambitions Limited

Living Ambitions Limited - 63a Victoria Avenue

Inspection report

63a Victoria Avenue
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Date of inspection visit:
02 June 2023

Date of publication:
12 July 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Living Ambitions Limited - 63a Victoria Avenue provides personal care for up to 7 adults with a learning disability. There were 7 people living in the service at the time of our inspection. The service is provided in one adapted, 2 storey residential building which is wheelchair accessible throughout.

People's experience of using this service and what we found

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Right Support

People received planned and personalised care and support. People, their relatives and healthcare professionals participated in people's needs assessments and reviews. People received their medicines safely from staff trained to administer them. The environment of the service was clean, and staff undertook a range of health, hygiene, and fire safety checks.

Right Care

Staff were kind and caring to people. People and staff knew each other well and over many years. Staff understood people's individual ways of communicating. The service had enough appropriately skilled staff to meet people's needs and keep them safe. People's risks were assessed and reduced.

Right Culture

There was an open culture at the service. The registered manager checked the quality of care people received, and developed action plans to ensure continuous improvements. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 05 March 2018).

Why we inspected

We undertook this inspection to assess that the service is applying the principles of right support, right care, right culture.

We looked at infection prevention and control measures under the Safe key question. We look at this in all

care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Living Ambitions Limited - 63a Victoria Avenue on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

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Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was carried by one inspector and one Expert by experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Living Ambitions Limited - 63a Victoria Avenue is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Living Ambitions Limited -63a Victoria Avenue is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations. At the time of our inspection there

was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We interacted with 3 people who could not use verbal communication and gathered the views of 2 relatives. We spoke with 2 staff and the deputy manager. We reviewed 4 people's care records and risk assessments and 4 staff files. We undertook checks of the environment and people's medicines, and we reviewed the provider's infection control and quality monitoring processes.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from abuse and improper treatment because staff received training in safeguarding people. Staff we spoke with understood the actions they should take if they were concerned about people's safety.
- Staff supervision records noted discussion about safeguarding and whistleblowing. This meant the registered manager ensured staff knew their responsibilities to keep people safe.
- The provider had an up to date safeguarding policy. This meant the registered manager and deputy manager had clear guidance regarding their roles, responsibilities and procedures to report any concerns.

Assessing risk, safety monitoring and management

- People's risks were identified and measures were in place to minimise risks. Staff assessed people's risks related to their care and support needs. For example, the support people required to move and transfer were individually risk assessed. Additionally, staff received moving and handling training to ensure they had the knowledge and skills to support people safely.
- Where required, healthcare professionals undertook specific risk assessments for people. Staff followed their guidance to ensure people were supported safely and their risks were managed.
- People had Health Action Plans, which detailed their needs, health associated risks and how they could be supported.
- Staff received training around specific healthcare conditions. For example, staff received initial and refresher training to manage epilepsy. This meant people were safe, because staff knew the actions to take to manage seizures.
- Where required staff maintained detailed records of people's food and fluid intake. These records were reviewed by healthcare professionals to ensure people were well nourished and hydrated.
- The environment was secure. Doors which should be locked were locked. For example, a key was required to access cupboards containing cleaning chemicals. This meant people were protected from the risks associated with accessing potentially harmful materials .

Staffing and recruitment

- The registered manager ensured people were supported by enough staff at all times .
- People were supported by staff who were safe and suitable to provide care. This was because robust recruitment processes were followed. These included interviews, checks of employment histories and the confirmation of candidates' identities. As part of confirming the suitability of staff, the provider carried out Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make

safer recruitment decisions.

Using medicines safely

- Staff were trained to administer people's medicines. The registered manager ensured staff medicines training was up to date and arranged refresher training when required. This meant people received their medicines from staff who were competent to administer them.
- We checked people's medicines administration records. These were signed accurately and contained no gaps. This meant people received their medicines as prescribed.
- People's medicines records contained their photographs. This ensured that the right medicines were administered to the right people.
- Where people were prescribed 'when required' medicines, protocols were in place to guide staff. These included the name and dose of the medicine; how many doses could be administered within 24 hours and the actions to be taken by staff if the medicines did not have the required effect.

Preventing and controlling infection

- People were protected by the hygiene practices followed by staff at the service. Staff wore personal protection equipment (PPE) when providing personal care. PPE included gloves and aprons, which were used once and then disposed of to reduce the risk or spread of infection.
- The home was visibly clean and free from unpleasant odours. Staff used daily cleaning checklists to ensure all parts of the premises were cleaned.
- The enhanced cleaning programme, which was implemented during the COVID-19 pandemic had been continued. This included the repeated cleaning throughout the day of frequent contact points such as door handles, rails, work surfaces, tables and taps. This reduced the risk of any viruses spreading.
- The kitchen was clean and tidy. Staff stored and prepared food appropriately and in line with food safety guidance. This meant people were protected against the risk of poor food hygiene practices .

Learning lessons when things go wrong

- Where things had gone wrong the provider ensured a review took place and learning shared with staff.
- The registered manager reviewed accidents and incidents to prevent recurrence and drive improvements.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Relatives told us the service achieved positive outcomes for their loved ones. One relative said, "My [family member's] needs are well met at Victoria Avenue."
- People and staff knew each other well. Approximately half of the team had worked with people at the service for over 15 years and understood people's non verbal communication needs. This enabled people to express their feelings and make choices.
- The registered manager regularly reviewed people's care records to ensure they remained accurate and reflected people's current preferences. This meant that the planning of care and support was person centred.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider understood their responsibility to share important information with people, their relatives, the CQC and local authorities. One relative told us, "I am always impressed by their transparency and quick response time."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The managers and staff were clear about their roles. Relatives were positive in their comments about the registered manager. One relative told us they are, "A good manager. They keep us well-informed and seems to run quite a tight ship."
- The registered manager undertook quality checks. These audits covered a range of areas including care records, medicines, health and safety and staff training. Where shortfalls were identified actions were planned, carried out and reviewed to ensure sustained improvements.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People's cultural needs were assessed as part of their needs assessments and meeting people's preferences. Where required, relatives had input into this process to ensure people's cultural needs were met.
- People's views were gathered. Staff knew people well and used this knowledge to support people to make choices in residents' meetings and in one-to-one meetings with keyworkers. Keyworkers are members of

staff with specific responsibilities towards people around areas such as planning activities, personal shopping, personalising bedrooms and liaising with relatives.

- The registered manager arranged meetings for staff to attend. The minutes of team meetings were retained for later review and to confirm agreed actions were completed.
- People were supported to engage in activities they were known to enjoy. For example, people enjoyed weekly massages from an aromatherapist who visited the service each week and music therapy with a visiting musician twice each week.

Continuous learning and improving care; working in partnership with others

- The registered manager ensured that ongoing learning took place at the service. The registered manager and staff undertook training and networking to develop their skills and knowledge and accessed the resources necessary to deliver high quality care.
- The staff team worked collaboratively with other health and social care professionals to ensure positive outcomes for people. This included reassessing people's needs and updating their care records to reflect changes.
- The provider worked with others to ensure people were supported to have enjoyable holidays. For example, a week before our inspection two people had been supported to holiday at a seaside hotel with the specialist facilities required to meet people's complex physical disabilities.