

Ashwood House Limited

Ashwood House Limited (Leyton)

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Ashwood House is registered with the Care Quality Commission to provide accommodation and support with personal care to a maximum of 17 adults with mental health needs. At the time of our inspection, there were 14 people using the service.

People's experience of the service and what we found:

We saw people were protected from the risks of abuse and neglect, as staff were trained to identify signs and were clear of their roles and responsibilities to protect people from harm. The provider ensured staffing levels were appropriate to meet people's support needs and there were systems to recruit staff safely.

People's risk assessments were completed, which guided staff on how to keep them safe from avoidable harm. The service had systems to record and monitor accidents and incidents. People were protected from the risks associated with the spread of infection and the home was clean and tidy.

People's needs assessments were completed prior to people moving to Ashwood House. People received support from staff who had the knowledge and skills to meet their individual support needs. Staff were supported to complete an induction programme when they first started at the service. Staff received regular training, and supervision. 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.

People told us they were treated with kindness and respect and that staff encouraged them to be as independent as possible and learn new skills. People felt they were supported to express their choice in areas such as how they wanted to be supported. Care documents were written to reflect people's individual needs and were regularly reviewed. The provider had a policy and procedure for addressing concerns or complaints.

We found the home to be clean and tidy, and well maintained to meet people physical needs. The provider ensured that there were systems in place for learning from accidents and incidents took place to prevent recurrence.

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 inspection for this service was rated good (published 25 September 2017).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive 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.

Inspection team

The inspection was carried out by 1 inspector.

Service and service type

Ashwood House 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. Ashwood House 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

The inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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 also reviewed notifications that the registered provider had sent to us. A notification is information about important events which the service is required to send us by law. We used all this information to plan our inspection.

During the inspection

We spoke with the registered manager. We reviewed a range of records. This included 6 people's care records, 6 staff files, training records, risk assessments and satisfaction surveys. We also looked at audits and a variety of records relating to the management of the service, including policies and procedures. We spoke with 5 people and 4 relatives by telephone to obtain their views of the service. We also spoke with 4 members of staff and 3 staff by telephone, to ask them questions about their roles and to confirm information we had received about them.

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 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 safeguarded from abuse and avoidable harm.
- People told us they felt safe living at the home. Comments included, "Staff are very nice to me, I like living here. And "I know that there is always staff about if I need any help."
- Feedback from relatives were very positive. Comments included, "I feel my [family member] is well supported and is very safe at this home. I have no concerns." Another relative said, "This is the best service my [family member] has lived at. I'm very happy with this home."
- Staff were clear of their roles and responsibility to report concerns to and how to work with other agencies such as the safeguarding team and police. A staff told us, "I would report any safeguarding concerns to my manager or to the local authority."

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- People told us they felt staff provided safe care and support to them. A person said, "The staff are great They, always make me feel safe if I'm feeling that I'm having a bad day."
- The registered manager completed environmental risk assessment, which identified any potential risks and how to minimise them. This enabled people to receive their care and support within a safe environment.

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff.
- The provider operated safe recruitment processes.
- People told us they felt supported by the staff team. One person said, "I know staff are here if I need them, as were I lived before the staff visited me once a day."
- The provider carried out checks on staff before they were able to work at the home. This practice helped ensure staff were recruited safely and staff had the right skills and experience to meet people's needs.

Using medicines safely

- People were supported to receive their medicines safely.
- People told us they felt supported by staff with their medicines. A person told us, "I get support from staff to help me take my [medicines] as I sometimes forget."
- The provider had a medicines policy and staff were trained and assessed before they administered medicines to people.

Preventing and controlling infection

- People were protected from the risk of infection as staff followed safe infection prevention and control practices.
- We were assured that the provider admitted people safely to the service.
- We were assured that the provider used PPE effectively and safely.

Visiting in Care Homes

- People were able to receive visitors without restrictions in line with best practice guidance.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- The registered manager met with staff in staff meetings and staff supervisions to discuss lessons learnt and the actions taken to help manage risk.
- Staff told us, they received regular updates and meetings by the registered manager on any changes as part of lessons being learnt.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed, and care and support was delivered in line with current standards to achieve effective outcomes.
- People and their relatives told us they were involved in the process. A person said, "I was visited by the manager to ask me question on how I wanted to be supported and they told me about the home."
- Care plans were developed from the provider's initial assessment, with the support from the person. which covered all aspects of the person's care and support needs.

Staff support: induction, training, skills and experience

- The service made sure staff had the skills, knowledge and experience to deliver effective care and support.
- The provider had an induction programme for all new staff to complete, prior to them lone working with people.
- The service ensured staff received appropriate training to help carry out their role effectively. Training records showed staff received training in first aid, Mental Capacity Act, food hygiene, infection control and safeguarding.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to eat and drink enough to maintain a balanced diet.
- People told us they were given a choice of different meals and drinks they chose to have. A person told us, "I make my own food with support from the staff."
- Staff knew people well and their likes and dislikes, or if they had any dietary requirements due to their medical condition.

Staff working with other agencies to provide consistent, effective, timely care

- The provider ensured the service worked effectively within and across organisations to deliver effective care, support and treatment.
- People's care plans held information on who was involved in the person circle of support,. for example, social workers, and health professionals.

Supporting people to live healthier lives, access healthcare services and support

- People were supported to live healthier lives, access healthcare services and support.
- Staff told us how they monitored and recorded people's health and welfare. A staff said, "I would report any concerns to the manager and to health professionals, by calling the GP or 999."

- We saw that staff worked closely with other professionals which was recorded in people health notes. This included, working with mental health team, general practitioners and community nurses.

Adapting service, design, decoration to meet people's needs

- People's individual needs were met by the adaption, design and decoration of the premises.
- The environment was homely and were accessible to meet people's support needs. The home was over two floors, some people's bedrooms had an en-suite bathroom. There was a communal kitchen, and lounge.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

- The provider was working in line with the Mental Capacity Act.
- Staff received training on how to protect people's rights and were aware with the processes and principles of the MCA.
- As part of the provider's initial needs assessment, the registered manager checked if people had capacity to make decisions prior to them receiving their care and support. This ensured people received the right support.
- We saw people had consent forms in place and staff acted in accordance with their wishes.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people were supported and treated with dignity and respect. They were involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were well supported.
- The provider supported staff to complete equality and diversity training and people's spiritual and cultural needs were respected. Care plans had information on how people wanted to be supported with their spiritual and cultural needs.
- Staff had a good understanding of people care and support needs. They were able to describe people's like and dislikes regarding how they wanted to be supported.

Supporting people to express their views and be involved in making decisions about their care

- People were supported to express their views and make decisions about their care.
- People were involved in making decisions about their care. A person told us, "We have keyworker meeting were we talk about my support and how I want to be helped."
- Staff knew how to support people to access independent advocacy if required.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence were respected and promoted.
- People told us they had the opportunity to try new experiences and develop new skills to help improve their independence. A person said, "I lived by myself before moving here, and have always been independent. Staff help me keep my skills and independence."
- People's care records outlined information of areas what people can do for themselves and areas where they needed support.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People were supported as individuals, in line with their needs and preferences.
- People told us they were involved in reviewing their care plans to ensure that they were up to date. A person told us, "The staff involve me in reviewing my care plan. We have meeting to look at any changers to my care, which I can invite my family to the meeting."
- Staff were knowledgeable about adapting people's support to their individual needs.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The provider was meeting the Accessible Information. People's communication needs were understood and supported.
- People had individual communication plans that were detailed and preferred methods of communication, including the approach to use for different situations.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to maintain relationships, follow their interests and take part in activities that were relevant to them.
- People told us, that they were supported to develop relationships that were important to them. A person said, "I'm able to go out by myself and meet up with my family."
- Staff told us how they support people to achieve their goals and aspirations. For example, a staff said, "It's important that people don't become lonely and feel part of the community."

Improving care quality in response to complaints or concerns

- People's concerns and complaints were listened to, responded to and used to improve the quality of care.
- People told us they felt supported and listened to by staff to regarding their right. For example, comments included, "I'm able to talk to staff about any concerns and I feel they listen to me." Another person said, "I know I can talk to the manager if I'm worried about anything."
- The service held meetings with people on a regular basis to receive feedback, which helped the provider

to improve their service and to adjust people's support if required.

End of life care and support

- People were supported at the end of their life to have a comfortable, dignified and pain free death.
- At the time of inspection, no one were being supported with end of life care.
- Some people chose to have information that described how the person would like to be supported with their end of life wishes.
- The provider was clear of their responsibility and knew how to access the support from other agencies if a person was identified needing support around their end of life.

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 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

- There was a positive and open culture at the service.
- The provider had systems to provide person-centred care that achieved good outcomes for people.
- The service promoted equality and diversity in all aspects of the running of the service.

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; Continuous learning and improving care

- The provider understood their responsibilities under the duty of candour.
- The service had systems and processes to help monitoring the quality of the service. The systems included feedback from people who used the service and their relatives, as well as staff and stakeholders.
- The registered manager completed care plans, medicines and infection control audits and spot checks were carried out to improve and help develop the running of the service. The provider had created a learning culture at the service which improved the care people received.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- People and relatives spoke positively about the management and staff team. 1 person said, "The staff are easy to talk to and always take time to check how I'm feeling." Another person said, "I have no concern on how I'm supported, I feel I achieved a lot since I have lived here."
- Staff told us they felt supported, by the registered manager. Staff were able to contact the registered manager for advice when required.

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

- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.
- People confirmed staff encouraged them to be involved in the development of the service. For example, a person said, "We have meeting were we can give ideas, like place were we want to go to."
- The registered manager held monthly staff meetings, this gave staff the opportunity to share ideas and

challenges that they may be experiencing. Staff told us that the meeting were also helpful for learning and developing their knowledge and skills as the staff team had different skills and experiences.

Working in partnership with others

- The provider worked in partnership with others.
- The registered manager attended different meetings to keep themselves updated with the latest practices in health and social care. This included local authority meetings where this gave them an opportunity to meet other providers within the area.
- We received positive feedback from a health professional, that the service worked in partnership with. They said, "They are a good provider who communicates well and engages with [us] about any issues they may have with [people they support]."
- People told us they were supported by the staff to make health appointments and attended reviews.