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Aston House

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

Aston House is a residential care home providing personal care and accommodation to five people aged 18 and over at the time of the inspection. The service can support up to five people.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

The service was a large home domestic style property. It was registered for the support of up to five people. Five people were using the service. The building design fitted into the residential area and had no identifying signs to indicate it was a care home. Staff did not wear anything that suggested they were care staff when coming and going with people.

People's experience of using this service and what we found
We made a recommendation about end of life care planning.

People received safe care at Aston House. Staffing numbers were sufficient to meet people's assessed needs. Staff stored and administered medicines safely. They took steps to protect people from abuse and avoidable harm. The service had systems in place to minimize the reoccurrence of incidents and accidents.

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.

Staff were trained and experienced. They supported people to stay well by having enough to eat and drink, providing effective care and ensuring they could promptly access health care services when needed.

Staff treated people with kindness, compassion and respect. Their practice promoted the involvement of people in decisions about their care. They supported people to access advocacy services to ensure their rights and wishes were protected. People's information was stored and managed confidentially.

The care and support people received was tailored to their individual needs. They had regular opportunities to engage in meaning activities. They were supported to maintain links with their friends, family and the local community.

The service had an experienced registered manager who maintained good oversight of the service. They

fulfilled their regulatory responsibilities and monitored the standard of care to ensure it was of a good quality. People, staff and relevant professionals were involved in developing the service.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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 26 September 2017).

Why we inspected

This was a planned inspection based on the previous rating.

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Aston House

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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Aston House is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

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. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with the registered manager and two care staff. We spent time observing the care one person

received in communal areas to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included two people's care records and five medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People who used the service were safe. They were supported by staff who knew how to protect them from avoidable harm and abuse.
- The provider had policies and systems in place to keep people safe. Staff applied this in their practice. They reported and recorded any concerns they may have about people's wellbeing. The registered manager and deputy manager took appropriate actions.

Assessing risk, safety monitoring and management

- Staff assessed risks associated with people's care. Risks assessments were robust and provided guidance for staff on how to minimise risks to people.
- The measures staff took to minimise risks to people did not restrict their freedom or rights.
- Each person had a personal evacuation plan in place. This guided staff on support a person would need to be safe in an event of emergency such as a fire incident.

Staffing and recruitment

- There were enough staff on duty to meet people's assessed needs and keep them safe. Where people were assessed as needing one to one support, the managers ensured staffing ratios met those needs.
- The provider followed safe recruitment practices. They completed relevant pre-employment checks which assured them staff were suitable to work with people who use services.

Using medicines safely

- Medicines were managed safely. Staff followed good practice in the storage and administration of people's medicines.
- The service had protocols in place to guide staff when they supported people with their medicines. This included 'as required' medicines.
- People's medicines records were completed accurately. These showed people received their medicines as prescribed by their doctor.

Preventing and controlling infection

- People were protected from the risks of contracting or passing an infection. Staff followed good practice by using protective equipment when they supported people with care tasks.
- The home was clean and free from odours.
- Staff followed good hygiene standards when they supported people with meal preparation tasks.

Learning lessons when things go wrong

- Staff recorded and reported incidents and accidents that occurred at the service. They took actions to reduce the risk of reoccurrence.
- The registered manager had improved their recording systems to show outcomes and improvements made following an incident. This was not fully implemented at the time of our visit.

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 the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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

- Staff assessed people's mental, physical and emotional needs before they began to live at Aston House. This was to ensure they could meet their needs effectively.
- People's assessment was holistic and non-discriminatory. This ensured people's needs were met irrespective of their beliefs, gender or race.

Staff support: induction, training, skills and experience

- People were supported by skilled and experienced staff. Staff had received training in the relevant topics needed to fulfil the responsibilities of their role.
- Staff told us their training equipped them to do their job well. They told us their managers regularly supported them with any training needs.
- Staff had opportunities for peer to peer supervision and support. The registered manager and deputy manager provided guidance and support where needed.

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

- People had enough to eat and drink. They had access to a variety of meals, snacks and drinks of their choice.
- People's nutritional needs were met. Staff followed professionals' recommendations and made adjustments required to meet people's needs. For example, they ensured one person had a soft diet to minimise risk.

Supporting people to live healthier lives, access healthcare services and support; staff working with other agencies to provide consistent, effective, timely care

- People had prompt access to healthcare services. Staff were proactive with people's health needs and referred them to healthcare services when required.
- Staff worked collaboratively with healthcare professionals, they followed their advice and recommendations which ensured people received consistent support with their health needs.
- People were supported to maintain good oral hygiene. The registered manager spoke passionately about the impact of oral care on people's health and wellbeing, they supported staff to provide a good standard of oral care and ensured people could access dental care.

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

- The design and the layout of the home was suited to the needs of people who used the service. People had access to safe spaces and could have some privacy if they required this.

- Some areas of the home required minor repairs and upgrades. For example, to replace toilet seats and upgrade radiators. The registered manager showed us evidence of plans in place to complete these works.

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 Act 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 when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff demonstrated a good understanding of the MCA and worked within its principles. They supported people to make their own decisions as much as possible, and ensured they sought their consent before they provided support.
- Where people were deprived of their liberty, appropriate authorisation was in place. Staff met the conditions in the authorisation.
- Staff did not use restraint practices.

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

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

- Staff were kind and compassionate. Staff spoke passionately about the people they support and the difference they made to people's lives in their role.
- We observed positive and caring interactions between staff and people and saw the systems within the service promoted this.
- Staff had good knowledge of the individual needs of people who used the service. People's preferences and history were recorded in their care plans, and staff supported them according to their preferences and needs.

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

- Staff supported people to make or be involved in decisions about their care as much as possible. They used a variety of communication methods and aids to support them to do this.
- One person had the support of an advocate. The registered manager was working with other agencies to ensure other people could also have the support of an advocate. Advocates support people to promote their rights and wishes.
- Staff schedules and other systems within the service enabled them to provide support which was centred on the person receiving care.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect. Staff addressed people respectfully and promoted their dignity.
- Staff enabled people to be as independent as they chose to be. We saw some people were independent with some aspects of their daily life with minimal support from staff who ensured they remained safe with those tasks.
- The registered manager and staff team promoted the choices of the young adults who used the service.
- People's information was stored and managed securely.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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

- The service had systems which supported regular involvement of parents and relevant people in care planning and care reviews. This gave them opportunities to contribute to people's care.
- The views and contributions of people and their relatives were used to develop care plans.
- Care plans were comprehensive and included details of how people would be supported to meet their needs in all areas of their life. They considered the support people required to meet the requirements of the Equality Act.
- The service supported people to meet their cultural, religious or secular needs. For example, a person was supported to maintain links with their ethnic origin.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Each person's care records showed their communication needs, and guided staff on how to understand and give information in a meaningful way to the person being supported. We saw people had visual and audio aids which made information accessible to them.
- We reviewed records which showed written information was tailored to aid people's understanding and ensure their maximum involvement in their care.
- We observed staff also made adjustments to tailor information to people, aiding their understanding and ensuring their maximum involvement in their care. For example, staff made eye contact, touched people or altered the tone of their voice.

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

- Staff supported people to be part of their local community. People had opportunities and the right level of support they required to access social and educational opportunities.
- Staff supported people to celebrate significant events in their life.
- People could engage in their hobbies and were supported to follow their interests.
- Family and friends were supported to maintain regular contact with their loved ones.

Improving care quality in response to complaints or concerns

- The service had not received a complaint since our last inspection. The registered manager told us any concerns were dealt with during their regular meeting with relatives.

End of life care and support

- The provider had a policy in place that guided staff in the event of a person's passing.

We recommended the registered manager put systems in place to discuss people's wishes at the end of the life and ensure people could continue to receive a good standard of care towards the end of the life. The registered manager told us they would make the required 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 the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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

- The service had an open and enabling culture. Staff spoke positively about the support they received from their manager which in turn supported them to provide good and empowering care to people who used the service.
- The service was managed by an experienced registered manager.
- The registered manager told us staff had regular access to peer to peer supervision which supported team working and accountability. Staff we spoke with told us they found this positive in their practice.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 registered manager had a good understanding of their regulatory responsibilities. They displayed the rating of Aston House inspection rating and was aware to notify relevant bodies of incidents that occurred at the service.
- The registered manager demonstrated a good understanding of the duty of candour. The systems within the home support transparency and openness.
- The registered manager maintained good oversight of the service. They completed regular checks and audits. This ensured people received a good and safe standard of care.

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

- People and staff were involved in service planning. They were empowered to raise any concerns or suggestions to improve the service. The registered manager acted on their feedback.
- The registered manager and staff met regularly with people's relatives. They acted on the feedback they received to improve people's care.

Continuous learning and improving care; Working in partnership with others

- The service had systems in place to analyse incidents and accidents that occurred at the service and took action to minimise the risk of a reoccurrence.
- Staff we spoke with reported a culture of collaboration and effective team working in meeting the needs of people.
- Staff worked collaboratively with health and social care professionals to meet people's needs.

