

# Aspire Healthcare Limited

## Alexandra Villa

### 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

Alexandra Villa is a small care home providing personal care to one person. The service can support up to two 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.

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

The home was clean and tidy, but the lounge lacked homeliness. We made a recommendation about this.

The registered manager and the staff understood how to keep the person safe. They understood risks and how to mitigate them. Staff were subject to recruitment checks before they were employed in the service. Appropriate staff cover was provided at all times. Safety checks were carried out to make sure the home was a safe place in which to live.

Staff were supported using supervision, appraisal and training. The staff were aware of the need for a nutritious diet. They supported the person to have a healthy lifestyle and assisted them to attend appointments.

Staff treated the person well. They were kind and worked to ensure the person's well-being was promoted.

The person was supported to have maximum choice and control of their life 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.

Care plans contained accurate information. Access was provided to the complaints procedure and staff worked with the person to use the procedure as a means of opening up discussion and addressing any of their concerns.

Staff felt supported by the registered manager. Systems were in place to audit the quality of the service. A new auditing process had recently been introduced by the provider. This required further development.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that the person using 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 the person using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. The person'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](http://www.cqc.org.uk)

Rating at last inspection and update: The last rating for this service was good (published 4 May 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

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?**

The service was safe.

Details are in our safe findings below.

**Good** ●

### **Is the service effective?**

The service was effective.

Details are in our effective findings below.

**Good** ●

### **Is the service caring?**

The service was caring.

Details are in our caring findings below.

**Good** ●

### **Is the service responsive?**

The service was responsive.

Details are in our responsive findings below.

**Good** ●

### **Is the service well-led?**

The service was well-led.

Details are in our well-Led findings below.

**Good** ●

# Alexandra Villa

## 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

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

#### Notice of inspection

This inspection was announced. We spoke with the registered manager on the morning of our intended arrival and arranged a time to visit the home that afternoon.

#### What we did before 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.

#### During the inspection

We spoke with the one person who used the service. We spoke with five members of staff including the registered manager and four care workers.

We reviewed a range of records. This included one person's care 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.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with one professional who was in regular contact with the service.

# 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 the person was safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff had been trained in safeguarding and understood when they needed to report concerns to the registered manager.

Assessing risk, safety monitoring and management

- Staff understood how to keep the person safe and minimise risk.
- Staff carried out regular checks on the building and its contents to ensure the home was a safe place in which to live.
- Fire drills were held to practice evacuation.

Staffing and recruitment

- The provider had a recruitment process in place to make sure staff were suitable to work in the service.
- On checking records we found one staff member did not have a second reference. This was obtained by the registered manager during the inspection.
- One member of staff was on duty at any one time to support the person.

Using medicines safely

- Medicines were managed in a safe manner. Staff spoke with us about the actions they take to check on medicines.
- Appropriate care plans were in place to support the safe use of medicines.

Preventing and controlling infection

- The home was clean.
- Staff had access to gloves and aprons should they be required to use them.

Learning lessons when things go wrong

- Staff had learned lessons and had taken steps to avoid them being repeated.

## 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 now remained the same. This meant the person's outcomes were consistently good, and their feedback confirmed this.

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

- The lounge area lacked homeliness. New settees were delivered during our inspection.
- The lounge was a conservatory type room with a corrugated plastic roofing. Water had penetrated into the lounge and steps had been taken to address the issue and re-plaster the walls. At the time of inspection it was raining heavily. The noise of the rain on the roof was not conducive to relaxing in the lounge and watching the television.

We recommend steps be taken to provide an improved homely environment.

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

- Staff assessed the person's needs and choices. These were described in care plans in line with standards and the law.

Staff support: induction, training, skills and experience

- Staff were supported through a programme of induction, supervision and training.
- An online training programme was available to staff. Staff confirmed they had completed their required training and were updating their knowledge on a regular basis.

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

- Staff had adapted how they worked with the person to plan a daily menu to meet the person's needs.
- Staff did the shopping and engaged the person in shopping and what they liked to eat.

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

- Staff had made a range of health appointments to provide effective and timely care. When new appointments came through the post staff made arrangements to support the person to attend.
- Advice from other professionals was documented in the care plans. Staff described how they supported the person to follow up such advice.

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).

- The service was working within the principles of the MCA.
- No applications for DoLS were required.

# 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 had remained the same. This meant the person was supported and treated with dignity and respect; and involved as a partner in their care.

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

- The person using the service was well-treated by staff who knew their likes and dislikes and promoted their emotional well-being. Staff spoke in kind tones and offered their help and support.
- Staff respected the person's needs and enabled them to make decisions and be an active participant in their daily life. One staff member said, "It's their choice."

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

- Staff had worked with the person to express their views and make their wishes known. One professional felt this meant the person was gaining trust with the staff which resulted in a reduced number of calls to them.
- The provider used an outcomes tool to review the person's goals each month and measure the progress they had made.

Respecting and promoting people's privacy, dignity and independence

- Staff provided privacy and dignity. They knocked on the person's bedroom door before they entered.
- The staff team knew how to promote the person's independence. They offered advice and support to enable the person to go out on their own. The person confirmed staff did this.

# 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 now remained the same. This meant the person'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

- Care plans covered a range of topics which were important to the person. They contained person-centred details.
- Staff ensured the person had choice and control over their daily lives. They offered help and support to enable the person to make the right choices for them.

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.

- The person told us staff helped them understand information given to them.
- Staff confirmed they respected the person's wishes and supported them to make information accessible.

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 reported they had previously noted a decline in the person's willingness to go out and socialise with others. This had recently improved, and they were increasingly willing to access local community activities. The person told us they liked to play on their gaming equipment with one member of staff.
- The provider supplied a weekly budget for activities. Staff had a clear understanding about how this should be spent.
- Staff supported the person to have contact with people important to them and understood what steps they needed to take to help them feel comfortable.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy and procedure in place.
- The person used the complaints procedure to express any worries or concerns. Staff consistently responded to these concerns and provided explanations.

End of life care and support

- Staff had discussed end of life care and documented a care plan which described the person's wishes.

# 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 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 staff team had developed a positive culture in which they delivered consistent care. This minimised any distress to the person. Staff were alert to any changes and introduced new approaches to empower the person. One professional told us the staff team had provided a settled placement.

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 understood the importance of sharing information with other professionals.

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

- The registered manager frequently visited the service and was supportive to the person who used the service and the staff. These visits provided the person with an opportunity to express their views.
- The registered manager told us they used their frequent visits in addition to supervision and staff meetings to engage staff in discussions. Staff confirmed these regular opportunities to speak to the registered manager took place.
- Staff understood the importance of equality and diversity. They offered opportunities to the person to enable them to have equal access to the community.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager carried out audits to monitor the quality and performance of the home. Actions were taken when necessary to make improvements.
- The provider had recently introduced a new auditing tool. Actions were documented on the audits. The new type of auditing was in the early stages of development and required further implementation to demonstrate continuous improvements.
- The registered manager and the staff understood their roles. Staff said they felt they could approach the manager with confidence. One staff member said, "Even on a weekend, you can send her (registered manager) a text and they will get back to you."

Working in partnership with others

- One professional told us the staff are in contact with them if they need to raise an issue.

- Staff worked with other professionals to support the person.