

## Mark Zylinski

# Aston House

#### **Inspection report**

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Tel: 01432267996

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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

Aston House provides accommodation and personal care for up to 16 people who have mental health support needs. People who live at Aston House may need a long-term home or be planning to move towards a more independent way of life. At the time of our inspection there were 16 people living at the home.

At our last inspection in January 2016 we rated the service as good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

There was a registered manager in post. A Registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated regulations about how the service is run.

People were supported to manage any risks to their safety and wellbeing.

People are supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice.

People were complimentary about the care and support that they received. Staff were described as kind and caring and treated people with dignity and respect. People received care that was centred on them as individuals and their independence and freedom of choice were promoted and supported.

People had the support they needed to take their medicines safely. People received their medicines as prescribed. People were supported to keep healthy and had access to other health professionals as and when required.

People were offered choices of meals and felt the food they were served was of a very good quality.

People care was planned in ways which reflected their preferences and wishes. Relatives' and health and social care professionals' views and suggestions were considered when people's care was planned.

People, relatives and staff were confident if any complaints were made these would be addressed. Systems were in place to manage complaints. Although none had been received in the last twelve months.

People were encouraged to stay active. The provider had a comprehensive activities and entertainment programme for people to join in and enjoy.

People, their relatives and staff were encouraged to make suggestions to develop the care they received further through open communication with the senior management team. The registered manager and provider regularly checked the quality of the care people received.	

## 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 remains Good	
Is the service effective?	Good •
The service remains Good	
Is the service caring?	Good •
The service remains Good	
Is the service responsive?	Good •
The service remains Good	
Is the service well-led?	Good •
The service remains Good	



## Aston House

**Detailed findings** 

#### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 24 October 2018 and was unannounced. The membership of the inspection team consisted of one inspector.

As part of the inspection we reviewed information we held about the service including statutory notifications that had been submitted. Statutory notifications include information about important events which the provider is required to send us by law. We sought information about the service from the local authority and Healthwatch. The local authority has responsibility for funding people who used the service and monitoring its quality. Healthwatch is an independent consumer champion, which promotes the views and experiences of people who use health and social care.

We used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

We looked at how staff supported people throughout the time we were at the home. During the inspection we spoke with six people who lived at the home, two relatives and two care staff, the registered manager and the provider. We reviewed two care records, the provider's quality audits, resident meeting minutes, accident and incident records, the provider's complaints and compliments records and three staff recruitment files.



#### Is the service safe?

### Our findings

When inspected in January 2016 this key question was rated as Good. We found the service continued to be rated as Good at this inspection.

All the people we spoke with told us they liked and felt safe living at Aston House. One person told us, "I've never felt unsafe here. I can't say I'd want anything more from a care home." Another person said, "I feel safe here, it's my home and I've lived here for over seven years." A relative commented, "If ever [person's name] goes off the rails, I know the staff are there to support them. So absolutely they are safe."

The provider continued to protect people from avoidable harm, abuse and discrimination. Staff had received training in, and understood, how to recognise, respond to and report abuse. They told us they would immediately report any abuse concerns to the management team. Staff were also aware of whistleblowing procedures and felt confident raising any concerns. The registered manager understood their responsibilities in reporting and dealing with concerns to ensure people remained safe.

People who lived at the home and staff provided examples of how avoidable risks to people's wellbeing were reduced. We saw where necessary, people had the mobility equipment supplied to help them maintain their independence. One person told us, "I've got my own mobility scooter, it's great it helps me to get out to the shop." Any accident and incidents were recorded and monitored so lessons could be learned and help prevent further occurrences. People told us there were enough staff to keep people safe and meet their needs. The provider told us when a new person came to live at the home staffing levels were reviewed to consider the person's dependency levels and would be adjusted accordingly.

People were protected from infection through staff being knowledgeable about infection control measures. We saw staff wore personal protection equipment such as gloves and aprons when required. A staff member told us, "There is always plenty of gloves and aprons available for us to use." We noted the home was clean and had no mal odours present. People told us how staff supported them to clean their bedrooms and do their laundry.

Staff we spoke with confirmed employment checks were carried out on their suitability to work at the home before they commenced their employment. Records showed that Disclosure and Barring checks (DBS) were completed before staff started work, so people were protected by the provider's recruitment arrangements. This check helps employers make safer recruitment decisions and prevents unsuitable people from being employed. We saw the provider had also obtained employment and personal references to further check the staff's suitability to work at the service.

People were supported to have the medicines they needed to remain well, safely. One person told us, "I always get my medicines of time." We saw staff offered pain relief, or as and when medicines [PRN], safely as prescribed. Staff were not allowed to administer people's medicines until they had received training and their competency had been checked. We saw staff kept clear records of the medicines people had received. Regular checks were made to ensure people had the medicines they required. Where people could look

after their own medicines this had been as assessed as safe and staff reviewed this on a regular basis.	



#### Is the service effective?

#### Our findings

When inspected in January 2016 this key question was rated as Good. We found the service continued to be rated as Good at this inspection.

The registered manager and provider completed in depth face to face assessments of people's care where they were looking to move into the home. These types of assessments meant that staff could be sure they were able to meet the person's needs.

People and their relatives told us staff were confident in their approach and had the knowledge and abilities to meet their needs. One person told us, "The staff are excellent here." A relative described the staff as being "Well-trained and understand [family members name]". Staff told us they felt they were suitably trained to undertake their role. One staff member described how they had completed the Care Certificate when they came into post. The Care Certificate is a set of standards that should be covered as part of induction training of new care workers as they are considered to be best practice. Staff had received further training and specialised in different areas, for example, staff had received mental health awareness training and were using this knowledge to support people when they became anxious.

Staff told us they felt supported in their role and were given the opportunity to reflect on their practice through regular supervision and appraisals. The registered manager showed us an out building used for staff handover and staff communications before staff started their shift. They said conducting the meetings here ensured people's right to privacy and confidentiality Here they could discuss what was happening that day and to ensure each staff member was aware of any appointments, events and any changes in a person's needs.

People were very complimentary about the food that was available. We saw people enjoying their meals and told us they had enjoyed their lunch time meal. Lunchtime was a very relaxed and unrushed. We saw staff, registered manager and provider sat with people eating their lunch together, taking the opportunity to chat about the day's events. The cook told us she was given any dietary relevant information for people such as diabetes, weight reducing diets and allergies to assist people stay healthy.

We saw from people's records they had been assisted to access health professionals to stay healthy. One person told us, "Staff encourage us to make our own doctor's appointments, but if I wasn't well enough they would certainly do it for me."

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are 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 were being met. We found that people's mental capacity to make decisions had been assessed and at the time of inspection no DoL applications had been

made.

Aston House had a very homely relaxed atmosphere. We saw there were photographs and art work around the home of the people living there. The registered manager told us of the redecoration plans for the next twelve months to replace some of people's bedroom furniture and repaint parts so the home as they felt it was looking "Tired."



## Is the service caring?

### Our findings

When inspected in January 2016 this key question was rated as Good. We found the service continued to be rated as Good at this inspection.

All the people we spoke with were very complimentary about their experience of living at Aston House. One person told us "I love living here, staff are so caring. They leave you alone but if they haven't heard from you for a couple of hours they come up to your room and knock on your door to see if you are okay?" Another person said, "All the staff are lovely and very approachable you could go to any of them." We saw a relative had written a compliment which stated, "When I did visit I thought what a lovely place and how pleasant the staff were "

Staff supported and encouraged people to live as independently as possible. We saw people come and go from the home as they pleased. Some people were involved in volunteering in the community and proudly described their role in the charity shop. When people returned to the home staff enquired how their day had gone and showed a genuine interest in people's response.

Throughout the inspection we witnessed lots of laughter between people and staff. In the morning we sat in the daily social event of a coffee morning, where most people living the home attended. The atmosphere was warm and welcoming and people were encouraged to join in the conversation. If anyone became anxious staff were quick to respond and assure the person sensitively.

People told us they were encouraged to bring back friends to their home and visitors were always made welcome with no visiting restrictions. A relative described, "The staff are so good with they encourage people to socialise. They encouraged me and my family to attend barbeques...It's like a home from home."

We saw people were treated with dignity and respect. People's right to confidentiality was maintained, for example care plans were kept securely in a locked cabinet.



### Is the service responsive?

#### Our findings

When inspected in January 2016 this key question was rated as Good. We found the service continued to be rated as Good at this inspection.

People continued to be involved in the planning their care from the beginning and their needs continued to be met. One person said, "At least once a month or if anything changes, I sit down with my key worker to discuss my care plan and support." Where appropriate relatives were involved in their family members care who told us they felt listened to and that staff acted quickly where needed. One relative told us how they were kept informed when their family member had become unwell and needed to see a doctor.

Staff had the training, skills and knew people well to recognise when a person was not well. A relative told us that staff had acted quickly when their family member's mental health started to deteriorate. Staff also shared examples of what action they would take in response to a person's declining health.

Staff told us they were kept up to date with people's changing needs and told us the communication within the team was good. One staff member told us, "People have lived here and I've worked for a long time so people are like my family. I know them all so well."

People were supported to maintain their hobbies and interests. One person proudly showed us their art work which was displayed in the home. Another person showed us their collection of model cars and buses which were displayed in purpose built cabinets. We saw the provider and the registered manager had organised an annual holiday and a variety of group trips such as shopping in a nearby town. People were requested to write their name down on a list if they wanted to go. One person told us, "There is no pressure to go on holidays or trips, they know I don't like going out so there is no pressure put on me."

We heard how people were supported to follow their individual faith. People's religious beliefs were recorded in their care plan and any specific instructions respected by staff. On the day of our inspection a few people chose to attend a social event at the local church.

The provider had a complaints procedure for people, relatives and staff to follow should they need to raise a complaint. People and relatives told us they knew how to raise a complaint if they needed to but were happy with the service provided. We noted no complaints had been received in the last twelve months.

We saw people had been asked about their end of life wishes and these had been recorded in their care plan, so staff could access this information to support people's agreed decisions in the event of their death.



#### Is the service well-led?

#### Our findings

When inspected in January 2016 this key question was rated as Good. We found the service continued to be rated as Good at this inspection.

At the time of our inspection there was a registered manager in post who had worked at the home for many years. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People and their relatives continued to feel enabled to make decisions in how the service was run. People told us there were resident meetings that were held regularly where they could discuss topics that were important to them. We read some of the past meeting minutes and saw that people had been consulted and were planning their future events and outings. People we spoke with told us they felt included and that the staff and registered manager listened and responded to them. One person told us, "[Registered manager's name] is very good. You can go to her if you have a problem she is a great manager, steadfast and fair."

Staff said they all worked as a team and felt supported in their role. Staff had regular team meetings which they felt were useful, but also had daily communication with a senior staff member and the registered manager. The registered manager told us, "I regularly work on shift with people, that way they think of me as part of the care team, and I get a real feel of what's happening with people and staff."

We spoke with the provider who told us he visited the home at least two or three times a week. We saw people knew who he was and were happy to engage in conversation with him. The registered manager told us they had good support from the provider, who was responsive to their requests.

We spoke with the registered manager about the checks they made to ensure the service was delivering high quality care. The registered manager told us communication with people, their relatives and staff was key to ensuring the service was delivering good quality care. They also took time to be visible around the home such as attending the coffee mornings, so people had the opportunity to communicate with her. We heard examples of how the registered manager kept in contact with people and their relatives after they had moved on from the home, because she had built such a good relationship with them.

The registered manager and staff had built good working relationships with their community professional colleagues. We saw a feedback comment left by a professional which said, "It's always a pleasure to have contact with Aston House"

The registered manager understood the requirements of their registration. They submitted statutory notifications to us where this was required. The previous rating was displayed in the home for people and visitors to view.