



Enter and View visit to Aspire Supported Living

October 2025

Your
healthwatch
Leeds



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Summary

Introduction

Healthwatch Leeds carried out announced Enter and View visits to Aspire Supported Living services. This was part of a planned series of visits to Aspire's services, prompted by feedback we received from Leeds City Council.

Aspire supported living enables people with learning disabilities to live independently in their own homes, whether in self-contained flats or shared housing. As Aspire refer to people who use their services as customers, we will use this term throughout the report.

Between 30th September 2025 and 15th October 2025, we visited:

- Craven Road Bungalows.
- Delph View Flats.
- Vicarage Bungalows and Flats.

During the visits, we spoke to customers and staff. We sent out paper surveys to relatives and carers and online surveys to staff who were not working on the visit day.

Key findings

These are the key findings from both the Enter and View visits and online survey responses:

1. The bungalows and flats we visited generally looked clean and appeared safe.
2. Customers expressed that they were happy to live there and had good relationships with staff.

Safety

3. Customers reported feeling safe, and most staff expressed confidence that the service provided a safe environment. However, we observed trip hazards in communal spaces and staff highlighted several concerns, including feeling unprepared to manage challenging customer behaviour; new staff being unfamiliar with customers' needs; and gaps in the handover process that may lead to medication errors.

Care and Support

4. Customers, relatives and staff said that care and support were the best aspects about Aspires supported living.
5. Customers, relatives and staff consistently reported kindness, respect, and personalised support.

Accessible Information Standard

6. Accessible Information Standard (AIS, see Appendix 2 for more information) compliance and digital support plans were in place.

Activities

7. Customers said they enjoyed a choice of activities including supported holidays.

Food and nutrition

8. Customers said they enjoyed a choice of meals. However, some staff reported that new staff lacked cooking skills and required training.

Involvement and feedback

9. Staff actively involved customers and their relatives in care decisions through annual reviews.
10. Relatives and customers reported that most concerns were handled well, although some remained unresolved.

Service quality

11. Fewer than half of customers reported that the service had improved over the last 12 months, while over half of staff felt it had worsened. Staff feedback highlighted issues with staffing levels, recruitment quality, induction, training, and visibility of management.

Key recommendations

Good practices to maintain

1. Maintain strong and trusting relationships between staff and customers so that care is personalised and respectful.
2. Maintain a supportive living environment by ensuring it is clean and secure, as we observed in most areas.
3. Enable customers to have a choice in activities and daily meals.
4. Ensure compliance with the Accessible Information Standard.
5. Continue involving customers and relatives in care decision-making.

Areas for improvement

6. Keep shared space clutter-free, removing the trip hazards from the lounge of Craven Road bungalow.
7. Provide targeted induction for new and agency staff so they understand customer needs and know how to carry out good handovers.
8. Address all concerns promptly and strengthen support for staff in raising issues.
9. Understanding and addressing staff perceptions of service decline.
10. Review staffing levels at peak times.
11. Strengthen recruitment and induction by including skills checks.
12. Improve management visibility.
13. Provide emotional support and team-building for staff.

Detailed findings are presented in the rest of the report, and the complete list of recommendations can be found on page 28.

Background

Healthwatch Leeds is an independent organisation, committed to listening to people's experiences of health and care services and using their views to help services improve.

Aspire supported living services provide people with a learning disability with the opportunity to live in their own homes or small group settings. They help people with learning disabilities to live as independently as possible, in houses, bungalows and flats across Leeds.

Why we did it

As part of Healthwatch's role, we have a statutory right to Enter and View publicly funded NHS and adult social care services, in order to get the views of people using their services and their relatives or carers.

The visit to this service was part of a planned series of visits to Aspire services and had been prompted by the feedback we had received from Leeds City Council. This includes their respite care services.

We selected three bungalows on Craven Road for the following reasons:

- The bungalows and flats in Delph View are home to people who attend Scott Hall Respite Care and the Technorth Day Service. This helped us to gain a complete understanding of their journeys around Aspire's services.
- The Vicarage Bungalows and Flats helped us gather insight into how Aspire was meeting people's complex needs through their specialised service.



What we did

We visited three supported living services across different areas of Leeds. All visits were announced Enter and View visits. We specified a two-week period during which the service was informed one day in advance of the visit.

The visits took place at:

- Craven Road Bungalows and Delph View Flats on 30 September 2025 from 3:30 pm to 7:00 pm.
- Vicarage Bungalows and Flats on 15 October 2025 from 3:00 pm to 5:00 pm.

A survey was sent out to relatives, friends and staff. The staff received the survey by an online survey link or spoke to us on the day. Relatives and friends received a pack by post, prepared by Healthwatch Leeds and sent out by Aspire.

Both surveys were publicised on posters with Quick Response (QR) codes and links, which were sent to the service before the visit.

A team of five volunteers and led by one senior Healthwatch Leeds staff member, carried out the visits. All are authorised Enter and View representatives. During the visits, we spoke to customers using an easy read version of the questionnaire, met with staff, and service managers.

The survey and observations focused on the following areas:

- Safety
- Care and support
- Food and nutrition
- Activities
- Involvement and feedback

We received a total of 33 survey responses:

- 13 from customers
- 2 from relatives or friends
- 18 from staff

In addition to the two services we visited, we also received feedback on other supported living services, including Healy Croft Flats, Waterloo Court Flats and Grove Road.

What we found

Observations

All customers across the flats and bungalows we visited looked happy and well cared for. Staff seemed highly knowledgeable about customers' preferences, routines, and support requirements.



Most areas were clean and tidy, quiet and smelled pleasant.

There was pictorial signage throughout the services. Craven Road had menus displayed on the fridges and pictures of customers displayed in the corridor. Vicarage Bungalows had a calendar with activities on it. We visited Vicarage Bungalows in late October, and they were decorated for Halloween, which made the atmosphere fun and cheerful.





It was noted at one of the Craven Road Bungalows that the lounge was cluttered and posed several trip hazards. This may pose a potential hazard for customers, particularly two customers who were visually impaired.

Customers

We asked customers what the best thing about supported living was. 11 of the 13 customers emphasised positive feelings about living there, and 5 of the 13 customers spoke enthusiastically about going out or the activities provided, and good relationships with staff.



“Smiling, everyone smiling!” – A Craven Road Bungalows resident.

“Everything, I like everything about being here.” – a Grove Road Supported living resident.

Relatives and carers

One relative said the best thing about supported living was that customers were well cared for.

Staff

14 of the 18 staff members said the best things about the service were the customer-centred care and the customers themselves.

Six of the 18 said staff quality, teamwork and management support were the best things.



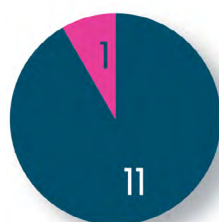
“Working with people who genuinely care for the customers and want the best for them. Treating people as family members with empathy and care”. – A Vicarage bungalow staff member.

Safety

Customers

Do you feel this service is a safe environment?

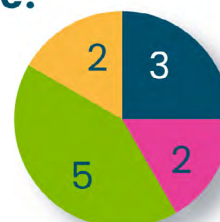
- Yes
- Sometimes
- No
- Not sure



11 of the 12 customers who responded reported feeling safe due to staff support.

Have you ever felt upset, scared or hurt here?

- Yes
- Sometimes
- No
- Not sure



This question was intended to identify potential safeguarding issues, but responses suggest customers interpreted it more broadly. Five customers mentioned feeling upset, scared, or hurt; they linked these feelings to factors such as pain, bereavement, and conflicts with other customers.



Relatives and carers

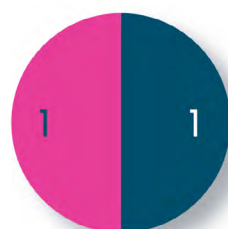
Do you feel this service is a safe environment?

■ Yes

■ Sometimes

■ No

■ Not sure



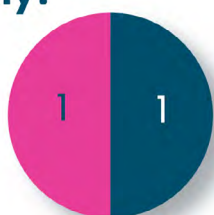
Do you feel staff are trained to respond to safeguarding concerns effectively?

■ Yes

■ Sometimes

■ No

■ Not sure



One relative felt the service provided a safe environment, and that staff were trained to deal with safeguarding concerns. The other relative said that they only felt that this was only sometimes the case. Neither relative reported any specific concerns about customers' safety.

Staff

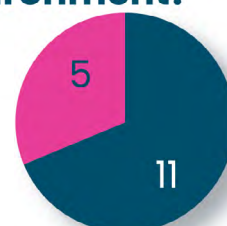
Do you feel the service provides a safe and secure environment?

■ Yes

■ Sometimes

■ No

■ Not sure



11 of the 16 staff who responded said that the service consistently offered a safe environment, due to policies being in place, secure buildings, appropriate training, and a person-centred care culture.

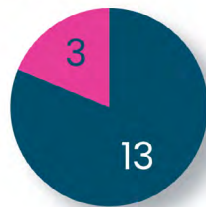
However, 5 of the 16 staff said the environment was only sometimes safe, highlighting behavioural risks among customers, gaps in staff professionalism, and inconsistent capability among new or agency staff, who are often unfamiliar with customers' needs.

Additionally, they reported that inconsistency in the handover process may lead to medication errors. For example, one staff member described problems when notes were not consistently passed on to the next shift.

They said they had experienced situations where no notes were made, making it difficult to determine whether medication needed to be given.

**Do you receive
adequate training to
handle safeguarding
concerns?**

- Yes
- Sometimes
- No
- Not sure



13 of the 16 staff reported feeling well-trained to deal with safeguarding concerns. Around half said they had previously dealt with a serious safety incident, such as being assaulted by a customer or responding to customers' medical emergencies or accidents and that these situations had been resolved appropriately.



Care and support

Customers

Are the staff kind and respectful?

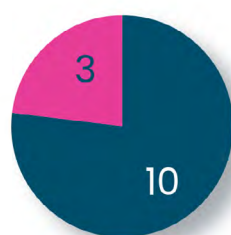
- Yes
- Sometimes
- No
- Not sure



12 of the 13 customers who responded said that staff were always kind and respectful.

Do staff look after you well?

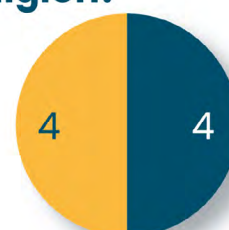
- Yes
- Sometimes
- No
- Not sure



10 of the 13 customers reported the staff looked after them well and met their needs. Customers reported staff supported them well with daily activities, such as cooking and personal care.

Do staff meet needs relating to race, gender and religion?

- Yes
- Sometimes
- No
- Not sure

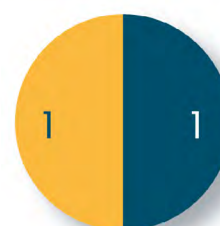


Some customers found this question difficult to understand but those that did found staff to meet their needs relating to race, gender and religion.

Relatives and carers

Are the staff kind and respectful?

- Yes
- Sometimes
- No
- Not sure



One relative said staff were kind and respectful and the other relative was unsure if staff were consistently respectful.

Do staff meet needs relating to race, gender and religion?



One relative said that the staff met the customers' needs. However, the other relative felt that staff only sometimes met customer needs. The relative did not provide further details.

Staff

Do you feel you can meet the needs of customers, including those about race, gender and religion?



Staff said they listened to customer preferences.

13 of the 16 staff who responded said they felt confident in meeting customer needs, supported by individual support plans.

They gave a range of examples showing how they ensured customers felt respected and listened to. Five staff members described using active listening and supporting customer choice and personal preferences.

Three staff members shared how they help customers solve problems in their daily lives.

Together, these examples demonstrated a strong culture of listening, respect, and personalised support in the Aspire supported living services.



Accessible Information Standard

The Accessible Information Standard (AIS) is a set of legal requirements (since 2016) that all NHS and publicly funded social care services in England must follow to make sure that people with a disability, impairment or sensory loss can get information in a way that they can understand, and they receive the communication support they need (see Appendix 2).

Aspire's supported living service managers reported that adhered to the Accessible Information Standard (AIS, see appendix 2 on page 21 for more information) by ensuring the following processes are in place.

Upon arrival at the service, each customer has an initial meeting to understand their needs, preferences, and routines to ensure tailored support from the outset.

The service uses Nourish, a digital care management system, to document and maintain each individual's support plan. This ensures that care is consistent, transparent, and easily accessible to relevant staff and services.

All new employees undergo a two-week shadowing period, learning directly from experienced colleagues to ensure high-quality, person-centred care. Agency staff complete an agency-specific induction form to align with service standards. Staff have access to a wide range of training opportunities, such as Positive Behaviour Support.

In one accommodation, two residents were blind. Staff engage directly with individuals to understand and meet their unique needs. This person-centred approach is a cornerstone of the service.

Digital support plans are shared with day service providers to ensure continuity of care. A hospital passport is used to communicate their needs to hospital staff.

Supported living managers told us that customers' support plans were reviewed annually with input from the customers and their relatives. If a person's needs changed more frequently, their support plan was updated promptly to accurately reflect their current requirements.

When interviewed, two staff members talked about the importance of respecting individual communication needs, such as using picture cards.

Customers

Do staff help support in understanding things?

- Yes
- Sometimes
- No
- Not sure



9 of the 10 customers said staff helped them to understand information.

For example, a resident in Delph View reported that staff used sign language to communicate with them, and a resident in Vicarage Bungalows and Flats said that staff explained information to them.

Relatives and carers

Do staff help support in understanding things?

- Yes
- Sometimes
- No
- Not sure



Both relatives agreed that the staff helped customers understand things.

Activities

Customers

Do customers have access to enjoyable activities?



8 of the 13 customers said they enjoyed the activities offered and were able to choose them.

Examples included gardening, swimming lessons, shopping trips, and visits to pubs and cafés. Several customers spoke positively about their supported holidays, describing them as a highlight of the service.

We also saw clips on the Nourish system (a digital care management system), used by staff to record videos of customers' daily activities, showing customers enjoying a variety of one-to-one and group activities.

Are customers involved in planning activities?



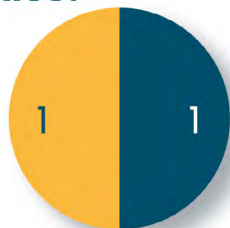
7 of the 11 customers who answered the question said they were involved in planning the activities.



Relatives and carers

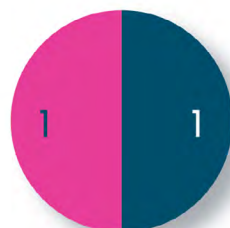
Do customers have access to enjoyable activities?

- Yes
- Sometimes
- No
- Not sure



Are customers involved in planning activities?

- Yes
- Sometimes
- No
- Not sure



One relative confirmed that customers always have access to enjoyable activities and could help to choose them.

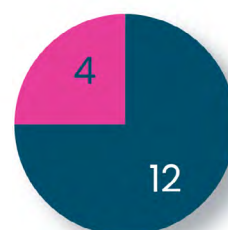
Another was less certain, commenting that they didn't know if activities were enjoyable, and customers only sometimes had a choice.



Staff

Are customers involved in planning activities?

- Yes
- Sometimes
- No
- Not sure



12 of the 16 staff reported that customers were actively involved in planning their activities. Staff said they asked customers directly about their preferences and referred to preferences recorded in their support plans.

Food and nutrition

Customers

Do customers have choices about their meals?

- Yes
- Sometimes
- No
- Not sure

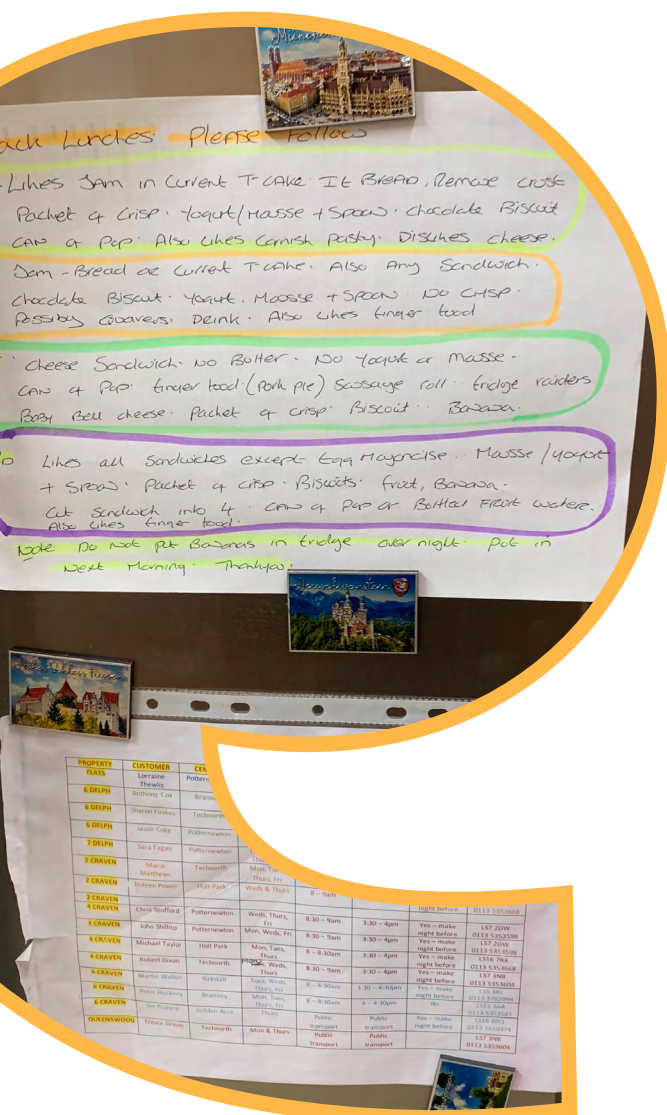


11 of the 12 customers said they were able to choose what they wanted to eat for their meals. Some customers said they went food shopping with staff, and others said they cooked meals for themselves.

However, one customer mentioned that staff didn't always heat food properly.



“Food heating can be an issue, food can be cold in the middle or not defrosted properly.” a Grove Road supported living resident.



Relatives and carers

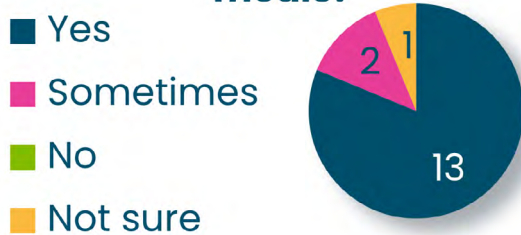
Do customers have choices about their meals?



One relative also confirmed that customers always have a choice of food and drink.

Staff

Do customers have choices about their meals?



13 of the 16 staff members agreed that customers were offered a choice of meals. Staff said they planned weekly menus with each customer, which could be changed at any time based on the customer's preferences.

Staff also said they provided flexible mealtimes to meet individual needs.

Involvement and feedback

Upon arrival at the service, each customer has an initial meeting to understand their needs, preferences, and routines to ensure tailored support from the outset.

The service uses Nourish, a digital care management system, to document and maintain each individual's support plan. This ensures that care is consistent, transparent, and easily accessible to relevant staff and services.

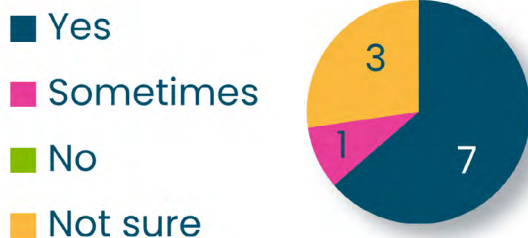
All new employees undergo a two-week shadowing period, learning directly from experienced colleagues to ensure high-quality, person-centred care. Agency staff complete an agency-specific induction form to align with service standards. Staff have access to a wide range of training opportunities, such as Positive Behaviour Support.

Digital support plans are shared with day service providers to ensure continuity of care.

Supported living managers told us that customers' support plans were reviewed annually with input from the customers and their relatives. If a person's needs changed more frequently, their support plan was updated promptly to accurately reflect their current requirements.

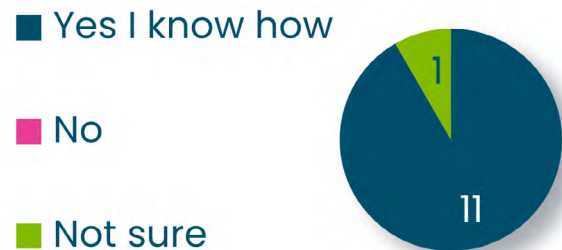
Customers

Are you involved in your own care?



7 of the 11 customers said they get to decide things about their care, such as through annual reviews and deciding what they would like to do every day.

Do you know how to report concerns?



11 of the 12 customers said they would tell staff if something was wrong; and that most concerns were resolved well.

Were your concerns handled appropriately?

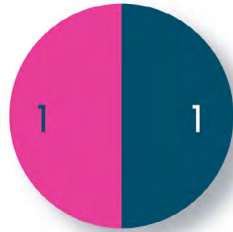


As noted in the food section of this report, one customer at Grove Road reported multiple times that their food was not reheated properly, stating the issue continued to happen even after they raised the concern.

Relatives and carers

Are you involved in your relative/friend's care?

- Yes
- Sometimes
- No
- Not sure



One relative said they had always been involved in care decisions, and said staff communicated well with them; the other said this only happened sometimes.

Do you know how to report concerns, and are they handled appropriately?

- Yes, I know how and concerns are handled well
- I know how, but concerns are not always handled well
- No, I don't know how
- Not sure



Both relatives said they knew how to report concerns; however, only one said their concerns were resolved satisfactorily.



Do staff communicate well with friends/relatives?



One relative found staff communicated with them where as the other relative only found that staff communicated sometimes.

Do you feel supported to act upon resident and families' feedback?



9 of the 15 staff said they felt supported to act upon residents' and families' feedback. Staff ensured customers' needs and preferences were respected, even if the customer's family disagreed.

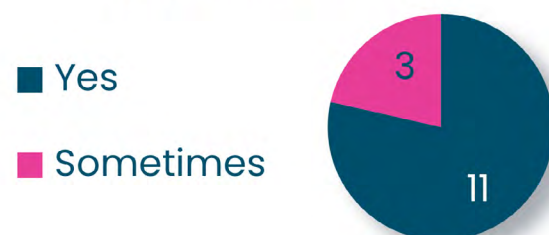
Staff

Are residents and their families involved in decisions about their care?



All 15 staff who responded said that customers and their relatives are involved in care decisions, through annual reviews.

Do you feel supported in raising concerns about poor practice or serious incidents (whistleblowing)?



11 of the 15 staff reported feeling supported to raise concerns about poor practice.

They said this was down to effective training, regular supervision, and collaborative team culture. Nevertheless, some staff expressed that they felt concerns were not always taken seriously, and anonymity was not maintained. Staff sometimes felt burdened by having to correct others' work, which undermined trust and teamwork.

People's views of how the service has changed over the last 12 months.

Customers

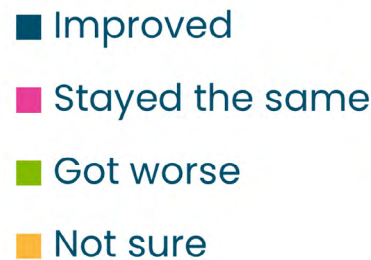
In the last year, has the service improved, stayed the same, or got worse?



6 of 13 customers reported an improvement in the service over the last year, 3 felt it stayed the same and 2 said it got worse.

Relatives and carers

In the last year, has the service improved, stayed the same, or got worse?



Both relatives said the service stayed the same.

Staff

In the last year, has the service improved, stayed the same, or got worse?



Over half (8 out of 15) staff believed the service had got worse.

Staff identified several factors hindering the delivery of consistent, high-quality care.

Key issues included medication errors, safeguarding issues, and problems with meals, often linked to poor recruitment and inadequate training for new staff. For example, three staff raised issues about new staff's capabilities such as them lacking cooking skills or missing important information about customers.

Some staff reported feeling "stretched too thin". They said excessive shifts, reliance on agency staff and unclear instructions all added to operational challenges.

During our visit we observed that only one staff member was on shift to support four customers at one of the Craven Road Bungalows. This staff member was balancing cooking meals, serving food, helping with personal care and assisting a wheelchair user. There were signs throughout the bungalow which seemed unrealistic to adhere to if only one member of staff was on shift, such as "There must be a member of staff in the kitchen at all times".

A photograph of a corkboard with a white sign and a yellow warning sticker. The sign is rectangular and has the text "Please do not leave Hotpoint Dryers unattended whilst operating" in bold black font. The sticker is circular and yellow with a black exclamation mark and the text "Caution Hot water".

**Please do not leave
Hotpoint Dryers
unattended whilst
operating**



We discussed this with the manager after the visit, who said they would explore ways to provide additional support during mealtimes.

Other challenges shared with us were about inconsistent management presence, limited communication and feedback loops, and inadequate handover processes leading to critical information being missed.

A few staff also discussed workplace culture issues in their responses such as gossip, low morale, and lack of appreciation. Additionally, staff cited customers' challenging and discriminatory behaviour as a cause of emotional strain for staff, with limited follow up support provided.

Staff identified several factors that enable good care, including improved recruitment, effective training, stronger supervision, a consistent team, clear support plans, and regular team meetings. Staff reported believing that these are critical to maintaining workforce stability and ensuring high-quality, person-centred care.

Overall, these challenges highlight the need for stronger communication, better recruitment and training, improved handover systems, and enhanced staff support and recognition.

Our recommendations

Good practice to maintain:

- 1. Maintain strong and trusting relationships between staff and customers so that care is personalised and respectful.**

This recommendation is linked to key finding 2.

- 2. Maintain a supportive living environment by ensuring it is clean and secure, as we observed in most areas.**

This recommendation is linked to key finding 1.

- 3. Enable customers to have a choice in activities and daily meals.**

This recommendation is linked to key findings 7 and 8.

- 4. Ensure compliance with the Accessible Information Standard.**

Introduce picture cards as seen used in Rothwell FLS across all services, especially for non-verbal customers. (Rothwell FLS is an Aspire Day centre service).

This recommendation is linked to key findings 6.

- 5. Continue involving customers and relatives in care decision-making.**

This recommendation is linked to key finding 9.

Areas for improvement:

6. Keep shared space clutter-free, removing the trip hazards from the lounge of Craven Road bungalow.

This recommendation is linked to key finding 2.

7. Provide targeted induction for new and agency staff so they understand customer needs and know how to carry out good handovers.

This recommendation is linked to key findings 3, 8 and 11.

8. Address all concerns promptly and strengthen support for staff in raising issues.

Concerns raised by customers, relatives and staff must be addressed.

This recommendation is linked to key findings 10 and 11.

9. Understanding and addressing staff perceptions of service decline.

Do further work to understand why over half of the staff who shared their views with us felt the service had worsened in the last year. Take action to address the identified issues, then monitor progress.

This recommendation is linked to key finding 11.

10. Review staffing levels at peak times.

This recommendation is linked to key finding 11.

11. Strengthen recruitment and induction by including skills checks.

Review staff training, particularly for managing complex behaviours. This will ensure the safety of both customers and staff.

This recommendation is linked to key findings 3, 8 and 11.

12.Improve management visibility.

This recommendation is linked to key finding 11.

13. Provide emotional support and team-building for staff.

Particularly for staff who have experienced discriminatory or challenging behaviour from customers, to help maintain morale and wellbeing.

Promote a positive work culture and support staff morale through team-building sessions and wellbeing initiatives.

This recommendation is linked to key finding 11.

Service provider response

Please see the service provider response published alongside this report.

Next steps

The report will be shared with Aspire, Leeds City Council and Care Quality Commission. We will agree with Aspire on the next steps to take in response to our recommendations and work with them to ensure that any agreed actions are followed through and implemented.

We will undertake any follow-up work required to ensure that real changes are made to the services.

The report will also be published on the Healthwatch Leeds website.

Thank you

Thank you to all those who shared their feedback, and to staff and customers at Aspire Supported Living Services for welcoming us.

Thank you to our Enter and View representatives: Tatum Yip (Lead Staff), Dianne, Janet, Craig, Denise and Annie for undertaking the visits.

This report was written by Katie Joenn, Project Support Worker and Tatum Yip, Project Manager at Healthwatch Leeds.

References

Aspire (2025). Respite Care and Crisis Services. www.aspirecbs.org.uk/aspire-respite-care-crisis-services/

Accessible Information Standard www.england.nhs.uk/long-read/accessible-information-standard-requirements-dapb1605/

Healthwatch Leeds (2025) Enter and view visits to Aspire Day Services. <https://healthwatchleeds.co.uk/reports-recommendations/2026/aspire-day-centres/>

Appendices

Appendix 1 – What is Enter and View?

The Health and Social Care Act allow local Healthwatch authorised representatives to check how health and adult social care services are run. They talk to service users, their families and carers. This is called Enter and View. These visits can be carried out in places like hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies.

Enter and View lets authorised representatives:

- Visit services and see how people experience care.
- Talk to service users, carers, and families at the point of service delivery.
- Observe how services work.
- Gather evidence-based feedback.
- Report findings to providers, the Care Quality Commission, Local Authority and NHS commissioners and quality assurers, Healthwatch England and relevant partners.
- Make recommendations to improve care locally and nationally.

What is the purpose of Enter and View?

Enter and View visits happen when people report problems or when services have a good reputation. Enter and View fits into three areas:

1. To contribute to a wider local Healthwatch programme of work.
2. To check a single issue across many places.

3. To look at one service based on local intelligence.

Who can Enter and View?

Healthwatch Leeds has trained volunteers and staff members who are authorised enter and view representatives (list of names available upon request).

All the authorised representatives have completed the following:

- Enter and View Training
- Safeguarding Training
- Enhanced DBS (Disclosure Barring Service) Check
- Equality and Diversity Training (not compulsory)

Appendix 2 – Accessible Information Standard

The Accessible Information Standard was introduced by the government in 2016, and a refreshed version was published in June 2025. The standard is to make sure that people with a disability or sensory loss are given information in a way they can understand.

As part of the Accessible Information Standard, organisations that provide NHS or adult social care need to do six things.

They need to:

1. Ask people if they have any information or communication needs and find out how to meet their needs.
2. Record those needs.
3. Highlight or flag a person's file, so it is clear that they have information or communication needs, and clearly explain how those needs should be met.
4. Share information about a person's needs with other NHS and adult social care providers, when they have consent or permission to do so.
5. Make sure that people get information in an accessible way and communication support if they need it.
6. Review people's needs regularly.

More information about the Accessible Information Standard can be found at www.england.nhs.uk/long-read/accessible-information-standard-requirements-dapb1605/

As part of the relaunch, NHS England requires health and care organisations to annually publish their compliance with the 2025 version by March 2027 using a new self-assessment framework (SAF).



**Committed
to quality**

We were awarded a committed to quality marque from Healthwatch England. To obtain this we did an in depth audit which will be reviewed.

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