

# Accomplish Group Limited

# Lester Court

## Inspection report

2a Storer Road  
Loughborough  
Leicestershire  
LE11 5EQ

Tel: 01509230622  
Website: [www.accomplish-group.co.uk](http://www.accomplish-group.co.uk)

Date of inspection visit:  
08 November 2021

Date of publication:  
22 December 2021

## Ratings

Overall rating for this service	Good ●
---------------------------------	--------

Is the service safe?	Good ●
----------------------	--------

Is the service well-led?	Good ●
--------------------------	--------

# Summary of findings

## Overall summary

### About the service

Lester Court provides accommodation and support for up to 10 younger adults with mental health needs. At the time of the inspection there were six people using the service.

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

People felt safe at the service and able to speak out. A person said, "Everyone has a voice here, everyone has come out of their shell."

The service had an established staff team meaning people had continuity of care. Staff were safely recruited and well-trained. They were caring and kind and had positive relationships with the people using the service.

People were encouraged to become more independent, try new activities, and make use of the local community. Staff knew where people were at risk and supported them to remain safe. They listened to people and encouraged them to make positive lifestyle choices.

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.

The service was well-led by an experienced registered manager and deputy. People and staff had confidence in their ability to run the service to a good standard taking into account the views of those who lived and worked there.

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

The last rating for this service was Good (report published 29 December 2018).

### Why we inspected

The inspection was prompted in part due to concerns received around safeguarding, leadership and governance. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection. The overall rating for the service is Good. This is based on the findings at this inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Lester Court on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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 well-led?

Good ●

The service was well-led

Details are in our Well-Led findings below.

# Lester Court

## 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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

The inspection was carried out by two inspectors.

#### Service and service type

Lester Court 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. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

#### During the inspection

We spoke with four people who used the service about their experience of the care provided. We spoke with the registered manager, the deputy manager, the regional manager, a senior support worker, and a support worker. We reviewed a range of records including a person's care records and a variety of records relating to the management of the service including audits, policies and procedures, and infection control documentation.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found.

# Is the service safe?

## Our findings

Safe – this means 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 had remained the same. This meant people were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse Kim

- People felt safe at the service. A person said this was because of the 'kind staff'. Another person said they hadn't always felt safe, due to previous group dynamics, but these had been resolved.
- Managers reported safeguarding concerns to the local authority and CQC in line with national and local safeguarding protocols. They said a higher than usual number were reported this year due to some challenges the service had faced. These were no longer an issue.
- People knew about the services safeguarding policy which was in the service users' guide and displayed on a board in a communal area of the service. They said if they had any concerns about their own or other people's safety, they would tell the staff.
- Staff showed understanding and compassion in challenging situations and knew how to keep people safe. They were trained in safeguarding and de-escalation techniques and knew how to calmly support people who were experiencing mental distress.

Assessing risk, safety monitoring and management

- People's individual risks were assessed and documented. Staff knew what actions to take to reduce risk at the service.
- A social care professional told us skilled staff interventions kept people safe. They said staff had the right training to prevented situations escalating and this had resulted in a calmer environment for people.
- Some people using the service smoked and there was an outside smoking shelter for them to use. Measures were in place to reduce the risk of fire. People had call bells in their room so they could alert staff in an emergency.
- Staff and external contractors carried out environmental checks as necessary, and carried out repairs to ensure the premises and the equipment in it were safe to use.

Staffing levels

- The service was well-staffed. There were enough staff on duty to meet people's needs. People said they liked the staff and the staff always had time for them.
- The registered manager reviewed staffing levels if people's needs changed, or if there were changes in occupancy levels. Senior staff were on call 24/7 to support staff working at the service.
- Staff were safely recruited with background checks carried out to ensure they were suitable for their role at the service. Training records showed staff had the training they needed to provide safe care and support.
- Staff provided group and one-to-one support for people in line with their needs. Staff supported people at the service and out in the community.

### Using medicines safely

- Staff managed people's medicines safely. They followed the provider's safe handling of medicines policies and procedures and knew what to do if an error was made.
- Medicines records were in good order and up to date. Medicines were stored safely and subject to regular audits. People had PRN ('as required') medicines protocols where necessary.
- People were supported to manage their own medicines where possible. A person said staff reminded them to take their medicines when they needed them, and said this arrangement suited them.
- Staff were trained in medicines administration and understood the importance of ensuring people were not over-medicated, but rather supported to stay well and have a good quality of life.

### Preventing and controlling infection

- We were somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises. A ground floor bathroom needed attention due to cracked paint beneath the sink which made the area difficult to clean. The deputy manager said this would be addressed.
- We were somewhat assured that the provider was preventing visitors from catching and spreading infections. Visitors took LFT (lateral flow tests) on arrival and had their temperatures checked. However, they were not screened for symptoms of acute respiratory infection before entering the premises. The deputy manager said a screening checklist would be put in place.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

We have signposted the provider to resources to develop their approach.

### Learning lessons when things go wrong

- Managers reviewed and investigated accidents and incidents and learnt lessons from these. Staff said the registered manager always debriefed them after an accident or incident to reduce the likelihood of it happening again and to ensure they had the support they needed.
- Lessons had been learnt at the service about the management of substance abuse issues. The registered manager said this learning would be taken forward to ensure that in future only people whose needs could safely be met would be supported at the service.



# Is the service well-led?

## Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection 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

- People and staff said the culture of the service had improved. A person told us, "It's a lot better now, everyone is smiling." A staff member said, "The atmosphere is lovely because we have the right mix of people in the home."
- The service had been through a difficult period when there had been challenges in meeting some people's needs. With these issues now resolved, the service was calmer and more stable. This had a positive effect on people and staff.
- People and staff praised the registered manager and deputy for the way they led the service. A person said the registered manager was always available if they wanted to talk. A staff member said, "[The registered manager] is brilliant, so supportive, and so is the deputy. Staff stay because of their excellent leadership. They give us continuity and they really care about the service users and the staff."
- People gave us examples of staff supporting them to become more independent. One person was moving to a room where they could cook for themselves. Another person was trying different hobbies to find out what interested them. Staff provided personalised care and support and encouraged people to make positive lifestyle choices.

Managers and staff are clear about their roles, and understand 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

- Managers and staff understood their regulatory responsibilities and how to ensure the service provided high-quality personalised care and support.
- The service was audited by managers, staff and the provider. Where necessary, action plans were put in place to bring about improvements. Audits covered all aspects of the service including health and safety and quality.
- Managers and staff were open and honest about any accidents or incidents at the service. Notifications about significant events were completed and sent to CQC as required.

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

- People were encouraged to attend monthly residents' meetings and have a say in the running of the service. They also completed satisfaction surveys and shared their views on the service at care review meetings.

- As the service was small, people and staff were in regular contact with managers and could talk to them whenever they wanted to about any aspect of the service.
- Advocacy, complaints and safeguarding information was displayed in communal areas to ensure that people knew where to go if they had any concerns about the service.
- The service had a custodian of the culture and a dignity champion. This helped to ensure people were protected from abuse and staff encouraged to speak out if they felt people weren't being respected at the service.
- Staff had regular supervisions and team meetings. They said the registered manager was extremely supportive of the staff team. A staff member said, "No matter what time it is, day or night, the registered manager will always come to the service to de-brief us if there's been an incident."

#### Continuous learning and improving care

- The service had a culture of learning and improvement. Information from incidents, investigations and compliments were used to drive quality and improvement.
- Changes to the service's grounds were being made to give people more privacy and security. The regional manager said the work would be done in this financial year, having been previously delayed due to COVID-19.

#### Working in partnership with others

- Managers and staff worked in partnership with health and social care professionals, the police, and other agencies to ensure people had the support they needed to live safely in the community.
- A social care professional said staff worked effectively with them during a review. They asked staff to monitor the person's support needs over the course of a week and this was done enabling the social care professional to assess the suitability of the placement.