

# Accomplish Group Limited

# Merstone House

## Inspection report

180 Coleshill Road  
Marston Green  
Birmingham  
West Midlands  
B37 7HP

Tel: 01217705827

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

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Outstanding ☆

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service:

Merstone House is registered to provide accommodation for up to eight adults with complex mental health. The adapted property is detached and provides three flats, and four bedrooms with en-suites. There is also a self-contained flat at the rear of the property. At the time of our visit there were seven people who were supported at Merstone House.

### People's experience of using this service:

The service provided by the registered manager and the staff at Merstone House was highly effective at supporting people to achieve their goals.

The service was praised by people they supported and by visiting professionals. People praised the ways in which the quality of their life had improved since they had moved to Merstone House. We were repeatedly told staff made a difference and promoted a good quality of life for people.

People's care and support had been planned proactively and in partnership with them. People felt consulted and listened to about how their care would be delivered. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible.

People supported by the service consistently told us staff were polite, reliable, caring and professional in their approach to their work.

The service worked in partnership with other organisations to ensure they followed good practice. The registered manager took a person-centred and holistic approach to meet the health needs of people who they supported. This had resulted in positive outcomes for people. Risk was actively and proactively managed to keep people safe from harm.

The registered provider and the registered manager used a variety of methods to assess and monitor the quality of the service. This enabled Merstone House to be monitored and improve areas that were identified through their quality monitoring processes.

There was a complaints procedure which was made available to people. We found any concerns raised had been resolved to a satisfactory conclusion and in a timely approach.

### Rating at last inspection:

This was the first planned inspection of the service since its registration with CQC on 09 May 2017.

### Why we inspected:

This was a planned and scheduled inspection.

Follow up:

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme or if any issues or concerns are identified.

## 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?

Outstanding ☆

The service was exceptionally 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.

# Merstone 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

#### Inspection team:

This inspection was carried out by one adult social care inspector.

#### Service and service type:

Merstone 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 comprehensive inspection visit took place on 31 January 2019 and was announced. The provider was given 48 hours' notice because the location provided care to eight adults who were often out during the day. We wanted to ensure people were available at the home to speak with us.

#### What we did:

Before our inspection we completed our planning tool and reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people supported by the service and previous inspection reports.

As part of the inspection 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.

During the inspection we spoke with four people who lived at Merstone House. We spoke with six members of staff including the deputy manager and the registered manager. We also gained feedback from two visiting healthcare professionals during the visit.

To gather information, we looked at a variety of records. This included care plan records relating to three people who lived at the home. We also looked at other information related to the management of the service. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead in ongoing improvements.

As part of the inspection process we walked around the building to carry out a visual check. We did this to ensure the home was clean, hygienic and a safe place for people to live.

# Is the service safe?

## Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People we spoke with told us they felt safe. Comments included, "Oh god yes. I am not always safe from myself but I am absolutely safe with the staff." And, "I definitely feel safe."
- The service had effective safeguarding policies in place which were reviewed regularly to ensure they were current.
- People were supported by staff who understood safeguarding, what to look for and how to report concerns.
- The registered manager was aware of their responsibility to report concerns to the relevant external agencies. Any safeguarding incidents had been reported and evidence was available to show the home worked with external agencies in order to protect those who lived at Merstone House.

Assessing risk, safety monitoring and management

- The registered manager had developed a person-centred risk-taking culture in which people were supported to take risks to promote their own self development. A visiting professional told us, "The beauty of this service is the way they actively and proactively manage risk."
- We looked at how personal risk was managed and addressed to ensure people were safe. Staff understood where people required support to reduce the risk of avoidable harm. Care plans we looked at contained explanations of control measures and had indicators of what to look for that would identify a person at risk in certain situations. This helped staff to keep people safe and reduce risk of incidents.
- A visiting professional told us the service understood people's presenting needs and put structures in place to manage the risks. They told us that staff were alert to the triggers to people's behaviour which, "Reduces the incidents and manages the person's road to recovery."

Staffing and recruitment

- We looked at how the service was staffed and found appropriate arrangements were in place. People who were supported by Merstone House, staff and visiting professionals all told us there were no issues with staffing levels and deployment of staff in the home.
- We observed staff going about their duties and noted they had appropriate time to respond to people's needs.
- The registered provider implemented appropriate processes to ensure suitable checks were carried out for all staff employed to work at the home. Staff told us they were not able to commence work without first completing all the necessary checks. This included checking on previous employment history, checking they had the correct skills for the job and ensuring they were suitable for working with people who at times could be vulnerable.

### Using medicines safely

- Medicines were managed safely and in line with good practice guidance, "Managing medicines in care homes." (National Institute of Clinical Excellence, 2014.)
- Staff told us they were unable to administer medicines unless they were trained to do so. This included regular training and competency checks to ensure staff had the suitable skills to carry out the task safely. We observed medicines being administered and saw good practice was followed.

### Preventing and controlling infection

- We looked around the home and found it was clean, tidy and maintained. People praised the standard of cleanliness throughout the home.
- Staff had received training in infection control and had access to protective personal equipment such as disposable gloves and aprons.

### Learning lessons when things go wrong

- Robust systems were in place to record and review accidents and incidents. We saw evidence any accidents and incidents were investigated and actions put in place to minimise future occurrences.
- The registered manager was aware of their responsibility to report concerns to the relevant external agencies. A visiting professional told us, "The communication is fabulous." They went on to explain the registered manager would alert the agency about all incidents, including what action had been taken to prevent recurrence.



# 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

People's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive.

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

- The goal for people who were supported by Merstone House was to recover sufficiently to eventually live independently in the community, initially with minimal support from the care staff, until they felt able to gradually withdraw the support permanently. The service was highly effective at supporting people to achieve their goals.
- Most of the people supported by the service had moved to Merstone House from secure units. The pre-admission processes were diligent and thorough to ensure the service was right for the person and the service could meet the person's needs.
- To ensure the transfer process was safe and effective, it took place at a pace that suited people's needs; we saw evidence the process could take up to a year.
- A visiting professional told us, "From the very start the assessments are extremely thorough to identify the risks and the needs."
- The thorough assessment process resulted in people receiving personalised, high quality care that met their needs and enabled them to achieve their aims and aspirations. One of the staff we spoke with told us, "People we support have so many challenges in their life and we can see them progress with our care and support. Since the home has been open three people have been supported to be independent."
- Merstone House had been nominated for and had won an internal Care Recognition award for Mental Health Best Practice in November 2017. Nominees had to demonstrate a thorough understanding of the nature and impact of mental health issues on individuals and the key people in their lives. The nomination details that within six months as a new service, the registered manager and staff team had supported three people to 'move on' and live independently. During this inspection we noted that through the highly effective care and support provided by the service another four people were preparing to 'move on' to live within the community within a short period of time.
- A person we spoke with told us that before coming to Merstone House, they were in and out of hospital trying to take their life up to four or five times a day. The person told us they can still self-harm, "But far less and no way as severe." The person went on to explain this was because, "Staff understand me, they know me well. I have structure and boundaries in my life. It is them that have made the difference. I have weekly meetings to discuss my care needs and a monthly review with my key worker to review my care plan."
- Another person had been supported by the registered manager and staff team to reduce the amount of times they self-harmed. A visiting professional told us, "Here they are secure and comfortable. [The person] will be ready for moving on; to live independently. That is quicker than anyone thought. Its fantastic."
- We spoke with one person who had been supported by the service for six months. They told us that when they came to the home they were in both mental and physical pain. They explained, "When I first came here, the voices in my head, caused me so many problems, I couldn't support myself. I couldn't speak, I had

forgotten how to cook." They then went on to explain, "I am looking to move into a flat and that is due to the help and support from the team here."

Staff support: induction, training, skills and experience

- Two people who were supported by the service took an active part in the recruitment process and had an influence on the outcome on the offers of employment.
- Three of the staff on duty on the day of our visit were 'new' staff; still within their induction period. They were extremely complementary about the recruitment process and the training they had received which fully equipped them for their role. One member of staff told us, "The induction, training and support has been fantastic to prepare me. I feel supported. Best start to a job I have had. Lots of support and encouragement to ask questions."
- Comments we received from people who were supported by the service included, "They know their business to stop me self-harming." And, "They know me well and what's best to support me."
- The registered manager had access to a wide-ranging training programme to enhance and develop staff skills, in addition to support them in their roles.
- During the inspection we noted and saw evidence of an innovative practice the registered manager had adopted to ensure the care and support to each person was individual and effective.
- One person had transferred to Merstone House from a secure unit. To ensure the service could meet the person's needs staff attended bespoke training. The registered manager had arranged a co-ordinated approach with the secure unit. This involved staff from the secure unit working alongside the service at Merstone House so they understood how best to support the person. The registered manager explained that this allowed staff to familiarise themselves with the person's presenting needs and to understand the environment the person was coming from. The registered manager also arranged positive behaviour training specific to the person's presentation for the staff at Merstone House. When the person transferred to Merstone House, the triggers to the person's behaviour were managed for the benefit of the person. This approach had been highly effective in managing the person's presenting behaviour and they were as a result working with the service towards independent living.

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

- People were encouraged to select healthy menu choices, complete food shopping and budgeting and were supported with meal preparation.
- Staff spoken with during our inspection visit confirmed they had received training in food safety and were aware of safe food handling practices.
- People supported with meal preparation told us they were happy with the arrangements in place.

Staff working with other agencies to provide consistent, effective, timely care

- Visiting professionals told us the service worked exceptionally well with them to ensure people's needs were met. One visiting professional told us, "The service is fabulous. Problem is there are not enough beds."
- The visiting professionals told us communication with the registered manager and staff at Merstone House was excellent. One visiting professional told us they received constant feedback from the registered manager. An example was given where a new person to the service was at risk of self-harm; the staff identified a trigger to the behaviour and were able to de-escalate without incident. The information was fed back to the visiting professional. They told us this way of actively and proactively managing risk was impressive.

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

- The building was a newly adapted building. The registered manager had contributed towards the design of the building and was able to suggest adaptations for the people the service would support. This included

requesting separate communal rooms to maximise space and was used as a low stimulus environment to promote calmness and well-being. We observed people sitting in this space looking relaxed and content.

- Before people were admitted to the home they were able to make a choice of the rooms available and select their colour schemes and preferred furnishings.

Supporting people to live healthier lives, access healthcare services and support

- We found good evidence to show people were supported to access relevant health and social care professionals. This helped to ensure people's assessed needs were being fully met, in accordance with their plans of care.

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 with appropriate legal authority.
- We checked whether the service was working within the principles of the MCA. We established that all those who were supported at the time of our inspection were able to make decisions and were not being deprived of their liberty. Therefore, DoLS applications were not required at this time. However, formal consent had been obtained from people, to ensure they were in agreement with the care and support they received.

# 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

People were supported and treated with dignity and respect; and involved as partners in their care. □

Ensuring people are well treated and supported; equality and diversity

- We received consistently positive feedback about the approach of staff and the care and support people received. Comments we received included, "It's the best place I have ever been in. It is a friendly family home. One big family." And, "Staff are honest, they are genuine and I have never had people who care about me."
- Each person had their life history recorded which staff used to get to know people and to build positive, caring relationships with them.
- Staff talked with us about the importance of supporting and responding to people's diverse needs. People's personal relationships, beliefs, likes and wishes were recorded in their care records and this helped people to receive the right support around their individual beliefs and preferences.
- People told us, and we observed, staff knew their preferences and used this knowledge to care for them in the way they liked.
- We observed staff treated people with kindness and respect. We witnessed many positive interactions between staff and people they supported.

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

- Care records we looked at contained evidence the person supported had been involved with and were at the centre of developing their care plans at Merstone House.
- The registered manager and staff documented people's diverse needs and assisted them to maintain their different requirements.
- The registered manager was committed to ensuring people's views were heard and listened to. People who were supported by the service told us they were consulted with and supported to make their own decisions.
- Information was readily available about local advocacy contacts, should someone wish to utilise this service. An advocate is an independent person, who will support people in making decisions, in order to ensure these are made in their best interests.

Respecting and promoting people's privacy, dignity and independence

- We observed people were being treated with respect and that both staff and those who were supported by the service were respectful towards each other.
- Records we saw and our observations demonstrated that dignity and respect was a high priority for the service, with a wide range of choices being offered and diverse needs being consistently met.
- People's confidentiality was respected and people's care records were kept securely.

# Is the service responsive?

## Our findings

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

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People were empowered to have as much control and independence as possible.
- The care files we saw were person centred and individualised documents. They contained detailed information, providing staff with clear guidance about people's specific needs and how these were to be best met.
- The registered manager was aware of the accessible information standard. It wasn't currently required however adjustments could be made to documents if required.
- People who were supported by the service had helped to develop their own care and support plans. They were involved in health and social care reviews and were able to discuss their individual needs with the relevant professionals.
- Care records we saw highlighted the immense impact this service has had on each person. People were being supported to be as independent as possible. One person supported by the service had started working on a voluntary basis, had then been employed on a permanent basis and had recently been promoted to Head Chef.
- A visiting professional told us, "The service is so good at picking up on people's interests." They explained how this had brought enjoyment and excitement to the person they were visiting, saying, "They find activities that have a real benefit to the person, that enrich people's lives. Its remarkable and impressive. What they have done for this person has reduced the amount of time they hear the voices in their head which gives [the person] time to have quality and get on with enjoying their life."

Improving care quality in response to complaints or concerns

- People knew how to provide feedback about their experiences of care and the service provided a range of accessible ways to do this. This included regular reviews of their care and arranged meetings for people who were supported by the service.
- The people we spoke with knew how to make complaints. They felt confident that these would be listened to and acted upon in an open and transparent way, as an opportunity to improve the service.
- The service had a complaints procedure which was made available to people they supported. The procedure was clear in explaining how a complaint should be made and reassured people these would be responded to appropriately. We reviewed one complaint and saw this had been dealt with professionally and appropriately.

End of life care and support

- We reviewed systems for end of life care for people supported by the service. End of life care was included within people's plans of care. Although none of the people supported were end of life, we were informed the service would work alongside other health professionals to coordinate end of life care.

# 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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered told us Merstone House followed all current and relevant legislation along with best practice guidelines. This was to ensure the diverse needs of everyone who used their service were met.
- The service was well-organised and there was a clear staffing structure. People spoke positively about how the service was managed. They informed us the registered manager was visible about the home and had a good understanding of people's needs and backgrounds. One person told us, "The manager knows me well, she is great; really helpful."
- A visiting professional we spoke with told us, "Culture comes from the top down and the atmosphere is so calming which has a soothing effect on the people who work at Merstone House and the people they support."
- Staff we spoke with told us they were treated equally and felt supported. One member of staff told us, "The manager supports us in everything we do. We all work hard together as a team to support people to be the best they can."
- The registered manager understood their role in terms regulatory requirements. For example, notifications were sent to CQC when required to report incidents that required had occurred and required attention.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The provider's systems ensured people received person-centred care which met their needs and reflected their preferences.
- Policies and procedures provided guidance around the duty of candour responsibility if something was to go wrong.

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

- The service had sought the views of people they support through satisfaction surveys. The surveys had been summarised and although feedback was generally positive an action plan had been produced to address any areas where people felt improvements could be made. This showed the service listened and responded to the views of the people they supported.
- People told us they were encouraged to comment on care plans and feedback to the management team through regular review meetings. People also told us they could simply speak with staff if there was anything they wished to discuss or change.
- Staff spoke positively about the support they received from the management team. They told us senior

staff were approachable and available for advice and support.

#### Continuous learning and improving care

- The registered manager was committed to ensuring continuous improvement. Accidents and incidents were investigated and actions recorded where improvements could be made. For example one person who was at risk of self-harm had swallowed coins. With the person's permission they had been issued with a bank card to make contactless payments whilst out shopping.
- Systems were in place to ensure the quality of service was regularly assessed and monitored. These included a wide range of effective audits such as medication, care records, the environment and infection control. We saw evidence the service had acted upon any findings from the audits. This demonstrated improvements were made to continue the home to develop and provide a good service for people who lived there.

#### Working in partnership with others

- The service worked in partnership with other organisations to make sure they followed current practice, providing a quality service and the people in their care were safe. We saw Merstone House had liaised with health care professionals and specialist teams to ensure timely referrals were made and where necessary additional support had been sought. This ensured a multi-disciplinary approach had been taken to support care provision for people in their care.