

Accomplish Group Support Limited

Cranwell Court

Inspection report

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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

Cranwell Court is a care home providing personal care to five older and younger adults who may be living with learning disabilities and autism. The service can support up to seven people. People had their own bedrooms and shared facilities such as the kitchen, the garden and lounge areas.

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

People and relatives were positive about the support they received at the service. A relative told us, "Cranwell Court is exactly the right service for [family member]. The registered manager and the staff team do a fantastic job."

People were supported by staff who had good knowledge of safeguarding and how to keep people safe from abuse. Risks to people had been assessed and action were taken to mitigate risks as far as practicable. People received support with their anxieties and behaviours that may challenge others and staff were trained to support people in this area. There were enough suitably trained staff to support people and recruitment checks were completed in line with legislation. Staff supported people safely with their medicines. The service was clean, and staff followed good infection control procedures. Incidents and accidents were reviewed, and actions were taken if there was any area for improvement.

The registered manager promoted a positive culture at the service and staff were supported to empower people to achieve their goals. The registered manager and senior staff completed audits to monitor the quality of the service and acted if improvements were needed. Feedback was collected from people, relatives and the staff team and used to inform what happened at the service. The registered manager and staff team worked well with health professionals and external stakeholders to ensure that people received the correct support.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. People were kept at the centre of their support and all the decisions made about their care. Staff and managers had a passion for promoting people's independence. There was a focus on supporting people to live their lives free from restrictions and restrictive practices. People were supported to celebrate their achievements and achieve good outcomes.

Rating at last inspection

The last rating for this service was good (published 24 May 2019).

Why we inspected

We received concerns in relation to risk management and the way in which staff supported people when they needed support with behaviours that may challenge others. 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.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe and well-led sections of this report.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Cranwell Court on our website at 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 re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

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.

Cranwell 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

This inspection was completed by one inspector.

Service and service type

Cranwell 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. We gave the service a short period of notice to ensure that it was safe for us to enter the premises.

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. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they

plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with two people who used the service and one relative about their experience of the care provided. We also observed how staff interacted with people who were unable to talk to us about their experiences of living at the service. We spoke with seven members of staff including the registered manager, senior support workers and support workers.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence we found. We reviewed training and quality assurance records.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safe living at the service. Staff had a good understanding of what abuse might look like and knew how to report concerns to external authorities such as safeguarding teams or CQC. A relative said, "[Staff] know what to do if [family member] is not safe. They have lived at the service for a long time and I have no concerns."
- Safeguarding policies and procedures were available in accessible formats for people so that they understood how to raise concerns. One person told us, "[Staff] always listen if something is wrong."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The registered manager completed assessments to help mitigate risks to people in all areas of their support including detailed 'positive behaviour support plans which were followed by the staff team. These were updated when necessary and staff had a good understanding of these assessments and how to follow them to promote people's safety.
- People sometimes expressed themselves using behaviours that may challenge themselves or others. Staff were trained to support people in these circumstances and had a good understanding of each person's specific support needs. A relative told us, "Records show that [family member] is having less and less incidents at the service and [registered manager] is always on the phone if things have happened [with what they will be doing following the incident]."
- The support that people received meant that incidences where physical support was needed, were a rare occurrence. Whenever an incident happened this was investigated by the registered manager and actions were taken. This involved a debrief with the person and staff involved, reporting to the safeguarding team where necessary and reflections as to what could be done better next time. Findings were shared with the staff team at team meetings and in supervisions.

Staffing and recruitment

- There were enough staff to keep people safe. Staffing levels were based on people's support needs and were reviewed and increased if people needed more support. People received support from a consistent staff team. One person said, "I see the same staff all the time. We always joke about how long [staff] has been working here."
- The provider completed thorough recruitment checks to ensure that staff were suitable for the roles they were applying for.

Using medicines safely

- Staff received training and competency checks to ensure they had the skills to support people safely with their medicines. One person told us, "[Staff] know what they are doing and make sure I take my tablets."

- People had protocols in place for any as and when required (PRN) medicines and these were understood and followed by the staff team. Staff completed audits and checks of medication stock to ensure that medicines were being handled and administered safely.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- 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 promoting safety through the layout and hygiene practices of the premises.
- 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 were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.
- Staff kept the service clean and followed extra cleaning measures to ensure good infection control during the ongoing COVID-19 pandemic. One person said, "[Staff] are very good at keeping the house clean."

Is the service well-led?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question 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

- Staff told us how the registered manager had created a positive culture where staff put people at the centre of their support. Staff were enthusiastic about people leading independent lives and achieving their own personal goals. People had been supported to learn new skills and take part in activities that were important to them, such as getting a job or visiting nature areas to do some artwork.
- People and relatives were positive about the support they received at the service. One person said, "[Staff] have supported me with [my chosen activities] and they always come with me to make sure I am safe. I cook by myself with staff's help and am planning [chosen holiday] as well." A relative told us, "I have no concerns and I know [family member] is well supported at the service."

Managers and staff being clear about their roles, and understanding 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

- The registered manager and staff team had a good understanding of their job roles and were supported to develop. For example, the registered manager sourced training for the staff team around supporting people living with learning disabilities so that they could stay up to date with best practice.
- The registered manager and senior support workers completed audits in areas such as care plans, medication records and incidents and accidents to monitor the quality of care people received. Actions were taken to make improvements if any were found.
- The registered manager was open and honest with people, relatives and the staff team if things went wrong. The staff team were supported to reflect on things that went wrong to inform and improve their future practice.

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

- People and their relatives were involved in their support and were regularly contacted for feedback about the service. This was done formally through surveys and informally through regular meetings and telephone calls. One relative said, "[Registered manager] is very good at communication. If I say that something is not right, then it is put right straight away which is very reassuring."
- Staff were supported to feedback about their job role in supervisions and team meetings. Staff told us that they felt listened to and were able to contribute to discussions about the support people received.

Continuous learning and improving care

- The registered manager was keen to continually improve the service. Incidents and accidents were thoroughly investigated, and actions were taken where improvements were needed. Audits from external partners such as the local authority were used to identify areas for improvement and actions were taken where necessary.

Working in partnership with others

- The registered manager and staff team linked and worked with health professionals such as clinical psychologists and GP's to ensure that people received the right support.
- The registered manager stayed up to date with current best practice through several forums that they attended. This meant that people were supported in line with current legislation and guidance.