

*We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.*

## Lester Hall Apartments

15 Elms Road, Stoneygate, Leicester, LE2 3JD

Tel: 01162745400

Date of Inspection: 02 October 2012

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We inspected the following standards as part of a routine inspection. This is what we found:

<b>Respecting and involving people who use services</b>	✓ Met this standard
<b>Care and welfare of people who use services</b>	✓ Met this standard
<b>Management of medicines</b>	✓ Met this standard
<b>Records</b>	✓ Met this standard
<b>Requirements relating to workers</b>	✓ Met this standard

## Details about this location

Registered Provider	Lester Hall Apartments Limited
Registered Managers	Mr. David Goodwin Ms. Marina Lester
Overview of the service	Lester Hall Apartments provide care and support for up to 20 people with a range of needs which include old age, physical and mental health needs and alcohol and drug dependency.
Type of services	Care home service without nursing Rehabilitation services Residential substance misuse treatment and/or rehabilitation service
Regulated activities	Accommodation for persons who require nursing or personal care Accommodation for persons who require treatment for substance misuse Diagnostic and screening procedures Treatment of disease, disorder or injury

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*When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.*

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## Summary of this inspection

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### Why we carried out this inspection

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This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

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### How we carried out this inspection

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We looked at the personal care or treatment records of people who use the service, carried out a visit on 2 October 2012, observed how people were being cared for and checked how people were cared for at each stage of their treatment and care. We talked with people who use the service and talked with staff.

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### What people told us and what we found

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We spoke with six people who use the services of Lester Hall Apartments. They spoke to us about their experiences and views of the service. People's comments were positive and included - "with (provider's name) and the carers it's like a family firm and they take ever such good care of you." And "I am very comfortable here; I have my own apartment and can come and go as I please." People told us how they spent their day. One person told us "I play scrabble with the social skills lady on Tuesdays and Thursday, we play 'themed' scrabble. They also take me to the local shops." A second person told us: - "I like to spend time in my apartment watching television I also go out to the shops with the social skills lady; I recently went to the supermarket to buy some essentials things

Records showed that the service supported people to access a range of health care professionals who work with the staff of the home to monitor and promote people's health. Monitoring of people's health included regular reviews with a range of health care professionals. People's diversity, values and human rights were respected. The service supported people to access advocacy services and had used legislation which included the Mental Capacity Act to promote people's safety and welfare where people were unable to make an informed decision for themselves.

You can see our judgements on the front page of this report.

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### More information about the provider

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Please see our website [www.cqc.org.uk](http://www.cqc.org.uk) for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

## Our judgements for each standard inspected

**Respecting and involving people who use services** ✓ Met this standard

People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

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### Our judgement

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The provider was meeting this standard.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

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### Reasons for our judgement

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We spoke with six people who use the services of Lester Hall Apartments. People told us they valued their independence and were able to make decisions about their short and long term future. One person told us they were planning to return home and that this had been achieved by the support provided by the staff of Lester Hall Apartments and external health and social care professionals. A second person told us they enjoyed going out meeting relatives and friends, which they did independently. This shows people were supported in promoting their independence and community involvement. We spoke with one person who told us they liked to spend time sitting in the garden and the reception area, they went onto tell us they felt relaxed at the home and were able to plan their day as they wished and very much appreciated being able to smoke in their apartment.

People's diversity, values and human rights were respected. We found the registered manager had followed guidance and legislation consistent with the Mental Capacity Act. Referrals were made to lawfully deprive people of their liberty, where it was felt to be in their best interests. Referrals were comprehensively recorded and the service had involved an advocate to act on behalf of the person. Training records for staff showed staff had received training in the promotion of peoples' equality and diversity and the mental capacity act.

We found the service regularly sought the views of external professionals which included doctors, district nurses and social workers along with the views of people who use the service and their relatives by the use of questionnaires. Completed questionnaires we viewed showed professionals and people using the service were happy with the service provided and received.

**People should get safe and appropriate care that meets their needs and supports their rights**

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**Our judgement**

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The provider was meeting this standard.

People experienced care and support that met their needs and protected their rights.

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**Reasons for our judgement**

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We spoke with six people and asked them for their views about their care and support. One person told us: "I attend a review every year with my psychiatrist, community psychiatric nurse, social worker, and managers from the home." They went on to say "Now I've been here for a few years I couldn't cope in the community on my own. I have my own apartment here and I haven't lost my independence." Another person told us: - "I get the support and care I need; the staff are very attentive and kind." Whilst another person told us: - "I can't fault this place, I get to make decisions and come and go as I please. Staff are always there if you need to talk things through."

We looked at the care plans and records of three people who used the services of Lester Hall Apartments. We found people's needs were assessed and care was planned and delivered in line with their individual plan. We found care plans provided clear and concise information for staff as to how people's support and care was to be provided. Care plans were tailored to the individual needs of people and were supported by risk assessments which identified the level of risk and actions staff needed to take to reduce risk, which included a consistent approach to supporting people.

Records showed people were regularly supported by a range of health care professionals and attended appointments independently or with the support of staff. Information about the monitoring of people's health was included within their care plan. Care plans and other supporting documents such as risk assessments were found to be regularly reviewed which produced a monthly summary.

Records showed staff had received training relevant to the needs of people using the service. Staff had also received training which supports the health and safety of people using the service, which includes first aid, food hygiene, fire awareness and health and safety.

We observed staff interactions with people using the service and found staff to be responsive to the needs of people. Staff spent time supporting people with their individual needs which included assistance at mealtimes as well as conversing with people about issues which were important to them, which included visits to health care professionals.

**People should be given the medicines they need when they need them, and in a safe way**

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## **Our judgement**

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The provider was meeting this standard.

People were protected against the risks associated with medicines because the provider had appropriate arrangements in place to manage medicines.

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## **Reasons for our judgement**

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We spoke with one person and asked them about the medication they received. They were able to tell us why the medication had been prescribed. They told us that in addition to the medication administered by staff from Lester Hall Apartments they also had an injection which was administered a Community Matron.

We looked at the medication and the medication records of three people whose records we had viewed. We found appropriate arrangements were in place for the obtaining, recording and administration of medicine. We found medication to be handled appropriately and to be safely stored and administered.

Staff responsible for the administration of medication had completed training in the safe handling and administration of medication. We observed the deputy manager supported by a care worker administering medication to people upon our arrival in the morning. We saw that they cross referenced the medication with the medication administration record. We saw the care worker assist people in taking their medication offering them a drink. The deputy manager then signed the medication administration record to record that the medication had been administered.

## Records

✓ Met this standard

**People's personal records, including medical records, should be accurate and kept safe and confidential**

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### Our judgement

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The provider was meeting this standard.

People were protected from the risks of unsafe or inappropriate care because accurate and appropriate records were maintained.

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### Reasons for our judgement

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We viewed the records for three people who use the service and found they were regularly reviewed and updated. Information recorded was clear and provided clear guidance for staff as to the individual support needs of people.

Records for the maintenance of the home were in good order and showed that the provider is proactive in ensuring the property is maintained. We found staff records for recruitment and training to be in good order.

Records were secured within the registered managers' office, which included computer records.

## Requirements relating to workers

✓ Met this standard

People should be cared for by staff who are properly qualified and able to do their job

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### Our judgement

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The provider was meeting this standard.

There were effective recruitment and selection processes in place and people were cared for by suitably qualified, skilled and experienced staff.

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### Reasons for our judgement

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Appropriate checks were undertaken before staff began work. We looked at the records of four members of staff who worked at Lester Hall Apartments. Records showed pre-employment checks had been carried out, which had included the completion of an application form, the seeking of two written references, a Criminal Record Bureau (CRB) disclosure and confirmation of their identity. This meant people using the service could be confident that staff had been screened as to their suitability to work with vulnerable adults. The provider may find it useful to note that people using the service were not involved in the recruitment of staff.

We found staff received appropriate professional development as the provider required staff to undertake training in a range of topics which were linked to the health, safety and welfare of people using the service. Training in some instances was specific to the needs of people who use the service which included management of challenging behaviour, managing addictions, managing incontinence, food and nutrition, epilepsy, pressure care awareness, dementia awareness, strokes and falls awareness.

## About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of dentists, primary medical services and other services at least once every two years. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times but we always inspect at least one standard from each of the five key areas every year. We may check fewer key areas in the case of dentists and some other services.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

## How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

 **Met this standard** This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

 **Action needed** This means that the standard was not being met in that the provider was non-compliant with the regulation. We set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action.

 **Enforcement action taken** If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

## How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. We make a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation) from the breach. This could be a minor, moderate or major impact.

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**Minor impact** – people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

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**Moderate impact** – people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

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**Major impact** – people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

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We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

## Glossary of terms we use in this report

### Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

### Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

## Glossary of terms we use in this report (continued)

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### **(Registered) Provider**

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There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

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### **Regulations**

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We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

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### **Responsive inspection**

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This is carried out at any time in relation to identified concerns.

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### **Routine inspection**

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This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

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### **Themed inspection**

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This is targeted to look at specific standards, sectors or types of care.

## Contact us

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