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Montrose Barn

Inspection report

Montrose Barn
Rose-in-Vale, Mithian
St Agnes
Cornwall
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Tel: 01872553059

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Outstanding ☆

Summary of findings

Overall summary

Montrose Barn provides accommodation and personal care for up to two people who have a learning disability and/or autistic spectrum disorder. During this inspection visit two people were living at the service.

The service is situated in a quite rural position close to the north Cornish coast. Besides the accommodation there is a large outdoor area where there are animals including pigs and chickens. People using the service were involved in their care and wellbeing. One person told us they liked looking after the animals. The provider lived in an adjoining property meaning that people had the use of the house to themselves. The provider had recently added a sensory room to the house. They told us, "It's been a successful project but it is taking a bit of time for (Person's name) to get used to it."

At the last inspection the service was rated overall good with an outstanding rating in the domain well led. At this inspection the rating remained overall good with the domain well led remaining outstanding.

The registered manager had systems in place to record safeguarding concerns, accidents and incidents and take appropriate action when required. Recruitment checks were carried out to ensure suitable people were employed to work at the home. Our observations and discussions with staff and people who lived at the service confirmed sufficient staff were on duty.

Support was provided by a consistent staff team who knew people well and understood their needs. There were sufficient numbers of suitably qualified staff on duty. People were supported to access the local community and take part in a range of activities of their choice.

People were able to do things they enjoyed and keep in touch with those people who were important to them. Risks to people's safety were understood by staff and people benefited from receiving care and support which took into account their health and welfare. Staff understood what actions to take if they had any concerns for people's wellbeing or safety. Where required people were supported to take their medicines so they would remain well.

People were being supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People were supported by staff that used their skills and knowledge so they would enjoy a good quality of life. Staff worked with other organisations and relatives so people's right to make decisions and their freedom was protected. Staff ensured people received help from staff to enjoy a range of food and drinks so they would remain well. Staff assisted people to attend health appointments and followed the advice given by specialist health services so people would receive the care they needed as their health needs changed.

People and relatives knew how to raise any complaints they had and were confident staff would take action

if this happened. There was clear and open communication between the registered manager and staff, so staff knew what was expected of them. Robust checks were undertaken on the quality of the care by the registered manager/provider and actions were taken where developments had been highlighted. The registered manager/provider made sure there was a focus on continuous development of the service.

The five questions we ask about services and what we found

We always ask the following five questions of services.

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|---|----------------------|
| Is the service safe? The service remains good. | Good ● |
| Is the service effective? The service remains good. | Good ● |
| Is the service caring? The service remains good. | Good ● |
| Is the service responsive? The service remains good. | Good ● |
| Is the service well-led? The service remains outstanding. | Outstanding ☆ |

Montrose Barn

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.¹ Explain whether this was a comprehensive or focused inspection.

This inspection took place on 14 February and was announced. The provider was given 24 hours' notice because the location was a small care home for younger adults who are often out during the day; we needed to be sure that someone would be in.

The inspection was carried out by one adult social care inspector. Before the inspection we reviewed previous inspection reports and other information we held about the service including notifications. A notification is information about important events which the service is required to send to us by law.

During the inspection we spoke with one of the two people living at Montrose Barn. We spoke with one relative visiting the service. We looked around the premises and observed care practices on the day of our inspection visit.

We spent time with people who lived at the service and spoke with one person about their life at the Montrose Barn. The examples we have given are therefore brief because we respect people's right to confidentiality.

We spoke with the registered manager/provider and a member of staff on duty. We looked at two records relating to the care of people, two staff recruitment files, staff training records and other records relating to the running of the service. Prior to and following the inspection we spoke with a professional associated with the service and received information from four other professionals.

Is the service safe?

Our findings

People living at Montrose Barn and a relative told us they thought it was a safe place to be. One person said, "Feel very safe," "(staff name) makes me feel safe" and "Has everything (Person's name) could possibly need. It's safe and comfortable and a home from home." A staff member told us, "Safety is the key here. It's important they (people using the service) feel safe and secure. We do everything we can to make sure that's the case." A professional said, "I have every confidence in the service that's delivered to my client and that they are safe because of the hard work by the manager and staff."

Managing risk was paramount, however the registered manager was very clear that they did not want it to constrain people from doing things they wanted to do. For example, looking at other options, so people could still get the experience they wanted but in a way which was safe and less restrictive. One person liked swimming. By choosing a swimming centre which did not have a number of entry and process points meant the person was less anxious and mitigated potential risks to themselves, staff or others. The service had systems in place to manage risks when people were in the community. For example when using transport and going into public areas, staff had a strategy for leaving quickly and safely. There were mobile phone contacts so staff could summon support if they felt it was necessary. Records showed staff had clear directives in how best to manage a person's behaviour which challenged. For example, '(Person's name) soon picks things up from others around them including behaviours and emotions'. A staff member said they are encouraged to try and be as neutral as possible in such situations. "I make sure there is not too much emotion in my voice. All staff must approach in the same way."

People living at the service had a range of complex needs and this was reflected in how the service was staffed. There was enough staff on duty to support people to take part in individual activities, attend appointments and engage in daily chores and routines. During the day of the inspection visit one person was going out, another person was picked up by a staff member from day care to go onwards to a walk and swim. This was a regular event. We were told, "It gives (person's name) time to focus after the day's events and helps them to achieve a calm state of mind. There were always enough staff on duty day and night so that people were not restricted in their choices of activities."

The service made sure staffing levels were flexible in order to be able to respond to the changing situations. A staff member said, "Every day is different and depends on so many things. That's why we are so flexible."

Only one of the two people were prescribed a medicine. Medicines were stored appropriately and records kept medicines administered. All medicine stock was checked into and out of the service to ensure it was correct against the medicines dispensed and administered. Where a person was prescribed PRN medicine (medicine to be administered only when required) there was clear guidance for staff to follow, in order to determine when it should be used.

Robust recruitment procedures were in place. Files contained all the relevant recruitment checks to show staff were suitable and safe to work in a care environment, including Disclosure and Barring Service (DBS) checks. The recruitment process identified they had the appropriate skills and knowledge needed to provide

care to meet people's needs.

The registered manager had procedures in place to minimise the potential risk of abuse or unsafe care. These policies were regularly reviewed and any changes to guidance included so the service had the current best practice guidelines to follow. There had been no safeguarding's raised since the previous inspection.

Is the service effective?

Our findings

A family member and other professionals involved with the service said they were very confident in the skills of the staff team supporting people living at Montrose Barn. Their comments included, "Completely understand (person's name) needs and how to manage any situation." Professionals told us, "(Registered manager) is very much 'hands on' and promotes the skills of the staff. Staff came across as fully involved and knowledgeable" and "each time I visit I have been met with nothing but professionalism."

Staff clearly had the knowledge and skills necessary to carry out their roles and responsibilities effectively. The registered manager said, "We empower staff by encouraging them to learn things independently to help them make judgements." A staff member told us, "Training is excellent and focused on the needs of the people living here." and "This is a very supportive place to work." This statement was reinforced by a professional who told us, "The staff team were skilled and knowledgeable. They offer appropriate support." Staff received regular training in areas required by law including, moving and handling, fire safety, infection control and food hygiene. Further training in areas specific to the needs of the people using the service was provided. For example training in autism awareness and communication techniques, de-escalation and breakaway techniques.

The registered manager told us it was very important for new staff to feel confident and comfortable in their role before they took on certain responsibilities and worked alone. For this reason there was no hard and fast rule as to a set induction timescale. It was flexible and new staff were closely supported by the registered manager. A staff member told us, "The way the induction is carried out meant I felt comfortable. I was never asked to do anything on my own before I felt confident to do it." The induction was in line with the Care Certificate as well as using the Qualifications and Credit Framework (QCF). Both were designed to help ensure care staff that were new to working in care, had initial training that gave them an adequate understanding of good working practice within the care sector.

Staff told us that they received regular supervision and that this included face to face discussion and also observations of their work practice and staff had received feedback on their performance. A staff member told us, "Supervision almost weekly at the beginning. So well supported." Supervisions were planned and scheduled in advance to ensure that this was delivered effectively to all staff. However, a staff member told us there was always support available from the registered manager. This showed staff had the support they required when they needed it.

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.

DoLS is part of the MCA and requires providers to seek authorisation from the local authority if they feel there may be restrictions or restraints placed upon a person who lacks capacity to make decisions for

themselves. The registered manager and staff were aware of the court ruling where the criteria for when someone maybe considered to be deprived of their liberty had changed. The manager had acted in accordance with the law in respect of applying for authorisation where it had been required. The service worked closely with an Independent Mental Capacity Advocate (IMCA) who represented a person using the service. The advocate told us they thought the service acted in the best interest of the person. They said, "It is a service which promotes independence. (Person's name) is very well supported and at each visit I find they are very happy living there."

The dietary and nutritional needs of people were taken seriously. Staff understood how they should promote healthy eating. For example, involving people in meal preparation where they took interest and when shopping. On the day of the inspection it was Valentine's day. The table had been set to reflect this with hearts and cards around the table. The menu was also decorated in hearts and colours associated with the event. Daily logs reported any changes in diet or appetite so that staff were alerted to any issues. A staff member told us, "We know what (names of people using the service) like and don't like. A person using the service confirmed they liked the meals and could get snacks whenever they wanted to."

Maintaining people's health was important to the registered manager and staff. A family member told us their relative was supported by staff to see health professionals when they needed to. Staff knew about the health backgrounds of people living at Montrose Barn and any associated risk to people's health. Staff explained how they supported people to see health professionals. This included support from staff to see dentists, opticians, chiropodists and to have regular comprehensive health checks, so people would enjoy good health. A professional told us, "They (people using the service) are supported to get any specialist help when it was needed. The manager and staff are very focused and alert us to any concern they may have at an early stage."

The environment was clean throughout. It was comfortable and decorated in neutral colours which supported people with autism to help create a calm environment. The registered provider/manager had adapted a spare room to create a sensory room. It included various lighting points, large cushions and music. The purpose was to provide a therapeutic space to promote engagement with the environment and for the person to derive positive change. The registered manager told us the person who would most benefit from this room was slowly engaging with it but that it had been a slow process. The registered manager said, "It is a slow process but one we are working at with at (Person's name) own pace."

Is the service caring?

Our findings

Throughout the inspection visit we observed a person using the service and their relative being completely relaxed, happy, smiling and comfortable. When we spoke with one person they told us, "Very happy here," "(Staff names) very kind." A family member said, "I trust the staff. It's been a very good move for (Person's name). I wouldn't want them to be anywhere else." A professional said, "It's a very caring and supportive environment where staff encourage (Person's name) to achieve so much more and this adds greatly to the quality of their life."

It was very evident that relationships between staff and people living at Montrose Barn were forged based on trust and respect. It was clear through talking with a staff member that they knew the people they supported very well. They knew what indicators there were for any slight change in mood or temperament which might negatively impact on the person or others around them. A professional told us, "Their approach is totally person centred and always striving to put the needs of the person first." We observed how the registered manager and a staff member constantly engaged with a person who was moving around the service. When the person asked for some advice staff were very respectful. For example, staff took time to stop and engage with the person to answer their questions. The brief interactions meant the person felt listened to and valued. Another example was when the person came back from a shopping trip. They wanted to show the registered manager what they had purchased and asked for advice about what to do with some items of clothing. The registered manager actively listened and gave the person the opportunity to think through what was best for them. This showed the empathic and caring approach while giving the person every opportunity to make their own decisions.

A staff member told us about a person's background and described the progress they had made and the pride they took in their achievements. One person was described by staff as having achieved their optimum level by challenging the boundaries of their physical disability. Another example was where a person had achieved positive engagement in a community setting. Staff recognised indicators which might lead to the person becoming anxious and agitated in situations where there was a lot of noise and people. The support worker had taken time with the person to support them in small caring ways. This helped them to gain more confidence, which meant more community activities could be enjoyed. This showed that staff considered how to support people to overcome their anxieties and were patient in working with the person at their pace to achieve their desired outcome.

The routines within the service were very flexible and arranged around people's individual and collective needs. People were provided with the choice of spending time anywhere in the service including their own rooms. Throughout the inspection visit one person there had freedom of movement around the service and were able to make decisions for themselves. For example, choosing to listen to music and talking with staff. Staff clearly understood people's needs and preferences and gave examples of how they supported people in their care. For example, they were able to describe behaviours which indicated when people were happy or anxious and what sort of interests stimulated them. This showed staff understood the care and support people needed.

Some people using the service had the potential to use disinhibited behaviour at times which might compromise their privacy and dignity. This was clearly demonstrated in their support plan and a staff member was very aware of the importance to support and protect the person. They provided examples of how they would manage this in a community setting, by using communication techniques to distract the person and to summon additional support to minimise any negative impact. People had their own rooms and space to be private and staff respected this by knocking on their door and requesting consent before entering people's personal living space. Staff introduced us and explained the reason for our visit. This helped the person feel more comfortable in our presence.

People's care plans showed their styles of communication were identified and respected. The care records were written in a person centred way. This meant the person was at the centre of their care which was arranged around their individual needs. Care records contained detailed and personalised information to help staff to deliver care that met the person's preferences. People's individual preferences were described, for example their choice of clothing, personal care and preferred routines.

Is the service responsive?

Our findings

Montrose Barn put the people who used the service firmly at the heart of how it was run. People told us and we observed a number of examples of how the service responded to needs in a person-centred approach when tailoring quality activities to meet people's specific needs. For example, using key words to get a positive response from people. For example, 'that's good (Person's name).' Also, taking account of individual needs and choices by using protocols based upon focusing on the person and what steps to take to broaden their life experiences. This had resulted in people extending their boundaries beyond the service. For example, using community facilities including shopping, leisure activities and going on holidays.

Staff understood people's goals and worked with them so these would be achieved. One staff member we spoke with told us finding out about and understanding people's life histories helped them to support people to identify what they wanted to do and plan their care. A family member told us they were extremely satisfied with the way the service involved and informed them of the care planning process and that they were kept informed of any changes to their relative's needs. They told us, "I am regularly updated and keep in touch. It is useful and we bounce ideas with each other," "I am told if there is a need for any change, or if (Person's name isn't well)." A professional told us, "They (staff) are very good at letting us know if they need some support or advice."

People had a range of complex care needs relating to their safety, health and previous life experiences. There were examples of how staff regularly undertook additional work with external professionals so they could find out the best way to care for people and promote their well-being and safety. Professionals supported this by telling us of, "The total commitment by the manager and staff to promote independence and achieve goals and give people a sense of purpose and belonging is exemplary." Another professional said, "They are always looking at promoting the individuals wellbeing by finding new opportunities and ensuring (Person's name) safety. They (manager and staff) pride themselves in being advocates for a person. They (manager and staff) put themselves into often uncomfortable situations which can be difficult for them but ensure a good outcome for the individual."

Staff told us about the values and approaches they used to help people achieve their full potential. This involved trying different ways to support people, sometimes over long periods of time, to respond to people's individual needs and help them achieve their goals. This included staff assisting people so they would be able to do things they enjoyed and express themselves and their diversities in ways which recognised their right to take risks, but promoted their safety and quality of life. One person was keen to share this with the inspector. They were animated about their responsibility in helping to care and support the farm animals. A family member told us this had been a very positive experience and had increased the person's confidence.

People using the service were at the centre of their care planning. Care plans were very focused and person centred. They were regularly updated and reviewed to ensure they reflected people's changing needs. There were pictorial prompts for staff to use to explain care and support if necessary. A relative told us they were invited to care planning reviews. If they could not attend they were provided with an overview of what was

discussed and any actions agreed on. A relative said, "I am always kept up to date about what's going on and feel very involved" This showed Montrose Barn did not make decisions without sharing necessary information and making people feel they were involved.

The registered manager focused on staff work patterns to ensure they were flexible to enable people's needs were effectively responded to. For example, where a person had inconsistent sleep patterns, the service made sure staff were available throughout the night. A staff member said, "There can be times during the night when we are watching DVD's, using the kitchen or taking part in any sort of activity (Person's name) might like to take part in." This demonstrated the service was being run in response to the person individual needs and choices.

People had access to a wide range of pursuits which were meaningful to them and reflected their individual interests. For example, going for walks, using community leisure facilities, visiting family members and engaging in activities around the house. The new sensory room had been introduced to a person who might benefit from it. The registered manager said, "It's a work in progress but we are getting there." On the day of the inspection one person was attending a day centre; another person was going out with a staff member to purchase some new protective wet clothes for use when they were providing welfare care to the services farm animals. On their return they were very keen to show what they had purchased. It had been a positive experience for them. Activities were very flexible and people's choices were acknowledged by staff who understood what people liked to do.

There was a policy and procedure in place for dealing with any complaints. This was made available to people and their families and provided people with information on how to make a complaint. An easy read version was also available for people which used pictorial symbols alongside simple and limited text. People we spoke with including a relative told us they had never felt the need to raise a complaint but had the information if they felt they needed to.

Is the service well-led?

Our findings

The provider was also the service's registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

Everyone we spoke with while carrying out this inspection of Montrose Barn including a relative, staff and professionals were all consistently positive and complimentary about the service. A relative said, "It's all about those who live here. They (staff) go over and above in every way" and "They (staff) really care about how to give them (people using the service) every opportunity for the best quality of life."

A staff member told us staff morale was high because the registered manager gave them every opportunity to develop their skills and to help them understand the best ways to communicate and support people using the service. They said, "It's great to work in a place where everybody is looked after so well, treated with dignity and are respected for who they are. These are the values the service is built upon."

The atmosphere was observed to be warm, happy and supportive. A staff member told us, "It was a different role for me and I was a little unsure when I first came to work here. With the help and support from the manager and other staff it's turned out to be the best job I've had", "We (staff) get all the support we need and have great access to training. I think we do well in supporting people to extend their quality of life." The culture of the service was open, caring and much focused on people's individual needs.

External professionals told us they had confidence in the organisation and how it worked in the best interest of the people who lived at Montrose Barn. Comments included, "Have done a few visits to the service and each time I have been met with nothing but professionalism. (Registered manager) has always answered any queries with no problems and I have never had any worries regarding the residents in their care" and "Their approach is total person centred and always striving to put the needs of the person first."

A staff member told us they worked with other staff closely and effectively due to the strong and focused leadership skills of the registered manager. The registered manager explained throughout the inspection their aims to enable people to enjoy a settled and happy life, to be encouraged and supported in maximising their range of skills, confidence and well-being. For example, regularly reflecting what had worked and what could be developed. They told us in order to achieve this it was important to have a culture where staff were supportive, but open and honest with people living at Montrose Barn. By maintaining regular communication and dialogue through daily notes, discussions and staff meetings the service was demonstrating it listened to people and acted on best practice. For example, the registered manager had liaised with providers of a similar service in another country. That provider had published an academic paper looking at 'Understanding Autism.' They had visited Montrose Barn to look at their approach and had invited the registered manager to visit their service to look at practice and exchange good practice theories. The registered manager told us they were planning a trip in the coming year. This showed the service was open to explore and share good practice issues for the benefit of people using the service.

One person's birth country was not Great Britain. The registered provider/manager had supported them to examine their roots and heritage. The service had supported them to visit the country of their birth. The experience had been positive for them. In order to reinforce their heritage there was a map of the country in their room and the person was keen to show the inspector where they had been born and lived during the early part of their life. There was also a picture of a landscape from that country, all of which gave great comfort to the person. This showed the person's heritage was being respected and their cultural roots were being embraced.

There were examples of where the registered manager and staff had worked with external agencies to make a positive difference to people's quality of life. This included working with government departments to make sure people were receiving the level of support to meet their needs and reflected their rights. A professional told us the registered manager made sure the service was well managed and worked in collaborative ways so people would get the correct care and support.

There were clear lines of responsibility and accountability within the service. The registered manager was supported by senior staff. Staff had the responsibility for reviewing and updating care documentation, organising appointments and co-ordinating care planning. This showed there was continuity of care and support.

Staff told us they used the open communication as an opportunity for them to raise any issues or ideas they may have. They felt confident the registered manager respected and acted on their views. The registered manager was aware of what was happening at the service on a day to day basis, they were always available and also spent time supporting people. There was a clear shared set of values across the staff team. In our conversations with a staff member they frequently referred to the aim of supporting people to have fulfilled lives. One staff member said, "It's all about the person and how best to support them."

People and their relatives were consulted regularly both formally and informally. People talked together frequently to discuss any plans or changes. Decisions were made individually about holidays, outings, meals and any changes made to the environment. This showed people living at the service were provided with as much choice and control as possible about how the service was run for them.

The service had recently carried out a survey to capture peoples' views on how the service was run. It was delivered in a format which people could understand and comment on with the support from staff. A relative told us they were actively encouraged to approach the registered manager and staff with any concerns or ideas they might have. Comments included, "I am always made to feel welcome," "(Manager's name) is very good at sharing information. I can speak with them any time. They listen to what I am saying. I have always felt very supported by them (staff)."

The service had introduced an interactive web site where people were guided through the pages with noises associated with the topics. For example, when displaying the activity, swimming there was a splash noise, cooking had a frying noise and clubs and dancing there was music. This made it easier for people to understand what was going on at the service and showed the service looked at technology to support what they were advertising in a way which was meaningful.

The registered manager oversaw quality assurance systems to drive continuous improvement within the service. Policy and systems audits were carried out annually or if guidance changed. There were other regular audits for systems including medicines, accidents and incidents and maintenance of the service.

