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Montrose Barn

Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

Montrose Barn is a care home that provides accommodation and personal care support for up to two adults with learning disabilities. The service specialises in the care of people who have a learning disability and autistic people. The service is in a rural location.

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

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.

The service was able to demonstrate how they were meeting underpinning principles of Right Support, Right Care, Right Culture.

Right Support:

The provider was exceptional in how they ensured that people were always kept safe from potential risks.

Care and support plans were holistic and reflected people's individualised preferences and support needs. People were involved, with staff support in the development of individualised care and support plans.

Staff were exceptional in the way they supported people to learn new skills and maintain their independence. People had fulfilling days and meaningful goals they chose. Staff supported people exceptionally by focusing on their strengths and encouraging people with what they could do.

People were supported to have maximum choice and control of their life and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. We observed people making real choices in the structure of their day and the activities they took part in. They were consistently in control of how they spent their time; what they wanted to do and when.

People had control of their dignity and how personal care was provided. The service consistently met their needs based on their wishes, enhancing their quality of life and well-being.

Staff were exceptionally responsive and had excellent knowledge of the people they supported. The service had a strong emphasis on ensuring people felt empowered and valued.

Right Care:

Staff were extremely passionate about providing care that was compassionate and provided the best outcomes for people. Staff looked at ways to enrich people's lives.

People were treated with kindness and were observed to be exceptionally well cared for. Staff were aware of the importance of the presentation for people and excelled in supporting people with this.

Staff understood people's communication needs as they worked with them consistently and got to know them over time, developing trusting relationships and exploring how to best capture their wishes and views. Staff deeply respected the people they supported, each other and the home environment, providing care that was thoughtful and compassionate.

People were encouraged to take positive risks to enhance their wellbeing and the service communicated well around what risks people faced and how to support them to manage these risks positively. People's care, treatment and support plans reflected their individual needs, and this promoted their wellbeing and enjoyment of life.

The service promoted equality for the people they supported. The registered manager was passionate about supporting people to access services and activities. They supported people to overcome barriers and thought outside the box to achieve this.

Right Culture:

The registered manager and staff team were highly motivated and proud of the service they delivered to the people they supported. There was a visible person-centred culture at the service.

There were consistently high levels of engagement with people using the service and with health and social care professionals to ensure people received safe, effective and responsive care that met their individualised needs.

The service placed people's wishes and aspirations at the center of everything they did, driving a culture that was inclusive and empowering. The registered manager was passionate about supporting people to be able to access, experience and participate in activities inclusively. They promoted positive risk taking and innovative approaches to support them to achieve this and to provide people with meaningful outcomes.

The registered manager was passionate about ensuring staff were suitably skilled and trained to meet people's complex and diverse needs. The ethos of the provider was that staff were guests in the people's home and this was reflected in how staff supported them.

There was clear leadership and visions and values for the service, that ensured people were at the heart of everything they did.

Last inspection

The service was rated Outstanding at our last inspection. (Published 21 November 2019) This was due to how responsive the provider was in meeting people's individual needs and the excellent leadership of the service.

At this inspection the service remained Outstanding in Well Led and Responsive as the provider continued to improve and develop its service. We also rated Caring domains as outstanding due to the person centered care that the service was providing. It was evident that people's quality of life and achievements had excelled since the last inspection.

For more information, please read the detailed findings section of this report. If you are reading this as a separate summary, the full report can be found on the Care Quality Commission (CQC) website at

Why we inspected

We were prompted to carry out this inspection due to concerns we received about recruitment of staff. A decision was made for us to inspect and examine those risks.

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.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Outstanding ☆

The service was exceptionally caring.

Details are in our caring findings below

Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Details are in our responsive findings below.

Is the service well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our well-led findings below.

Montrose Barn

Detailed findings

Background to this 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 Health and Social Care Act 2008.

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

Inspection team

The inspection was carried out by 1 inspector.

Service and service type

Montrose Barn is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and we looked at both during this inspection.

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 24 hour notice of the inspection. This was because it is a small service and we needed to be sure that a member of staff would be available to support the inspection. We wanted people to be prepared for our visit so that we could spend time with them to gain their views on the service.

What we did before the inspection

Before visiting the service, we reviewed information we held about the service and notifications we had

received. A notification is information about important events which the service is required to send us by law.

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

We used all of this information to plan our inspection.

During the inspection

We inspected the service on 24 March 2023.

During the inspection we met and spoke with people who used the service, the registered manager and deputy manager. In addition, we observed staff supporting people within the home and inspected a range of records. These included people's care records, training records, 5 staff files, staff meeting minutes and the service's policies and procedures. Following the inspection, we received feedback from 2 staff and 2 health and social care professionals about the service.

We had received views from a relative prior to the inspection visit, so were aware of their thoughts about the service. This was taken into account during the inspection process.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. At this inspection we have rated this key question good.

This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- Prior to the inspection we had received concerns about staffing levels and that recruitment of staff was not robust. These issues were fully investigated as part of this inspection.
- We reviewed recruitment records and found the registered manager had a robust recruitment process. Additional checks when shortlisting staff were made to ensure that the people they supported remained safe.
- Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions. These checks and other necessary pre-employment checks had been completed for all staff before they began working in the service.
- The induction process for new staff had been developed further by the registered manager to include competency checks for staff on the people's needs based on their care plans.
- Staffing levels were safe and based on people's needs. Staffing numbers varied to ensure people always had the support they needed to take part in activities as and when they wanted to.
- People were supported by a consistent and compassionate staff team who they knew well.

Assessing risk, safety monitoring and management

- The provider had appropriate systems in place to safeguard people within the service. Safeguarding systems were also in place for people and staff while supporting access to the community.
- Risk assessments were in place to ensure the safety for all who lived or worked at Montrose Barn. Where incidents had occurred, information had been appropriately shared with police and safeguarding authorities.
- The registered manager had liaised with the police to ensure the environment was as safe as possible.
- Staff were very aware of the triggers and signs that may lead to people becoming anxious or distressed. This was exceptionally well managed by staff and was no longer considered a significant risk. People had a comprehensive Positive Behaviour Support plan (PBS) in place which detailed what could cause people distress and how best to support them.
- When people displayed anxious behaviours, these were monitored and recorded in detail. They were then reviewed by the service alongside health and social care professionals, so they could reflect how to support people in a way that met their needs.
- Staff worked in very close partnership with the people in their care, and in liaison with health and social care professionals, to take positive risks. This had enabled people to try new activities, acquire new skills,

and had grown people's confidence when accessing the community.

- Staff used any incident which occurred as an opportunity for learning. The registered manager led reflective sessions to review incidents that had occurred and worked collaboratively with staff to identify any improvements and consider best practice. Staff had in-depth knowledge of people, and how best to support them.

Systems and processes to safeguard people from the risk from abuse

- Staff understood the importance of safeguarding people. The registered manager had sought advice and support from the local authority safeguarding team and police appropriately.
- The registered manager took steps to ensure financial issues did not compromise care.
- The registered manager demonstrated they had taken steps in collaboration with community partners to enable people to access facilities and activities they enjoyed even when there were financial challenges.

Using medicines safely

- When medicines were prescribed to be given 'when required', person-centred protocols had been written to guide staff when it would be appropriate to give these medicines. However, people had been supported so effectively and successfully by staff that the use of these medicines had reduced significantly.
- Medicines were managed safely to ensure people received them in accordance with their health needs and the prescriber's instructions. Staff were trained in medicines management and had regular competency checks to ensure ongoing safe practice.
- There were suitable arrangements for ordering, receiving, storing and disposal of medicines.
- Medicines audits were completed on a regular basis. This would identify if and where further improvements may be required and help ensure action would be taken to implement any improvements.

Preventing and controlling infection including the cleanliness of premises

- 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.

Visiting in care homes

- Specific safety concerns meant there were some restrictions in relation to visiting to ensure people's safety. The provider had worked collaboratively with involved health professionals to enable people to maintain links with relatives.

Learning lessons when things go wrong

- There was a genuinely open culture in which all concerns raised were highly valued as integral to learning and improvement.
- Learning was identified on a thorough analysis and investigation of things that go wrong. All staff were encouraged to participate in learning to improve safety as much as possible, including working with other health and social care professionals and police.

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.

At our last inspection we rated this key question good. At this inspection we have rated this key question good.

This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- There had been no admissions to the service since the previous inspection. However, there were systems to ensure people's needs were assessed before they moved into the service. These systems helped ensure people's needs were understood and could be met.
- Information about people's health, social and emotional needs was recorded and available for staff.
- Staff worked in accordance with care plans to make sure people received care and assistance which met their individual needs.

Staff support, training, skills and experience

- People received effective care and treatment from competent, knowledgeable and skilled staff who had the relevant qualifications to meet their needs.
- The registered manager was passionate about ensuring staff were suitably skilled and trained to meet people's complex and diverse needs. The registered manager had a good system to monitor staff skills. Staff had regular training and refresher training to keep them up to date with best practice. Training methods included online, and face to face training and competency assessments.
- Staff, new to the care sector, were supported to complete induction training in accordance with current good practice. New staff shadowed experienced staff until they felt confident, and their competence was assessed before they started to provide support independently.
- Regular supervision sessions were arranged when staff were able to discuss any training needs as well as raising issues around working practices. Staff told us they were well supported by management.

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

- People were supported and enabled to gain independence and life skills. For example, we observed people choosing their lunch and with staff support preparing their meal. Staff provided appropriate encouragement and support throughout this process.
- Staff assisted people to maintain good nutrition and hydration, encouraging them to eat a well-balanced diet and make healthy eating choices.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff supported people to see their GP and attend other health appointments regularly.
- A 'hospital passport' provided key information about people's communication and health needs, in the

event they needed a stay in hospital.

- People had attended routine and annual health checks with support from staff.

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

- The service was of a domestic nature and was well maintained. All rooms were personalised to reflect people's preferences. People were able to use all areas of the service which were comfortably furnished.
- People had their own en-suite facilities including bathing facilities.

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 MCA 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 when this is in their best interests and legally authorised under the MCA.

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a people of their liberty, and whether any conditions relating to those authorisations were being met.

- People's human rights were upheld by staff who supported them to have control over their own lives. We observed people making real choices in the structure of their day and the activities they took part in.
- People were supported to make decisions about their care. Staff were clear about the need to seek consent before providing care and staff had a good understanding about people's ability to consent and what to do if they could no longer give consent.
- Capacity assessments were completed to assess if people were able to make specific decisions independently.
- When people lacked capacity, Deprivation of Liberty Safeguards applications had been made appropriately.
- Best interest meetings were organised when it was necessary for others to make decisions on people's behalf.
- The service worked closely with Independent Mental Capacity Advocates [IMCA] to help ensure the people's best interests were independently represented during decision making processes.

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.

At our last inspection we rated this key question good. At this inspection we have rated this key question outstanding.

This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- People's ability to fully explain what they felt about living at Montrose Barn and the staff supporting them was limited. However, we observed when people interacted with staff, their behaviour and body language showed they felt really cared for and that they mattered.
- People had lived at the service for many years and several staff had worked at the service for the same period. This had created a 'family' atmosphere where people had built caring and trusting relationships. However, staff respected this was 'their (people's) home' and maintained appropriate professional boundaries.
- The care and support people received was exceptionally compassionate and kind.
- Staff were proud of people's achievement and celebrated them.
- Some individuals could experience anxiety and compulsive behaviour which had affected their emotional wellbeing and ability to participate in activities and daily living. Staff had gained an exceptionally comprehensive understanding of what would trigger this behaviour and had clear strategies in place to help prevent the behaviour escalating. This had been achieved because there was a long standing, stable, well trained and committed staff team who worked effectively with external professionals. There had been no major incidents of people becoming distressed for a significant period which meant people's quality of life and wellbeing had been greatly enhanced.
- Staff were clearly passionate about their work and motivated to provide as good a service as possible for the people.
- Throughout the inspection there was an exceptionally caring, relaxed, happy atmosphere at the service. Everyone enjoyed each other's company and interactions showed how people and staff valued each other. Without exception the interactions between people and staff at all levels were kind, compassionate and empowering.

Respecting and promoting people's independence

- The values of the service were based on enabling people to live as fulfilling live as possible and achieve the best possible outcomes. Staff knew people exceptionally well and worked together as a team. They set high standards for people to achieve and strived to support them to reach their full potential.
- People were fully involved in how their home was organised.
- Staff were aware that people's physical appearance and their style of clothing was important to them and went above and beyond to support people in this area to enhance their wellbeing and express their identity.

- People had complex needs and if these needs were not understood there was a risk they would become distressed leading to actions which might put themselves or others at risk. Therefore, promoting their independence, to enable them to reach their full potential, was finely balanced and challenging. The service had successfully supported people to become more independent and to develop additional skills and interests.

Respecting and promoting people's privacy and dignity

- Respect for privacy and dignity was at the heart of the service's culture and values. It was embedded in everything that the service and its staff did.
- Staff were aware and understood how people reacted to each staff member. This meant they picked up on any potential conflicts and provided people with privacy and space to prevent situations from escalating.
- People's right to privacy and confidentiality was respected. Confidential information was kept securely.

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

- People were in control of their daily routines and able to make decisions about how their care was delivered. We saw staff followed people's lead in relation to how they wanted to spend their time and that timing of planned activities was varied in response to their wishes. People determined both the order in which activities occurred and their duration and were fully in control.
- Everything about the way the service was run, and the way staff provided care and support was focused on the individual people and involving them in their care. Where any daily routines had been developed, these were in place to meet people's needs and wishes, rather than to benefit staff.
- People had limited verbal communication, staff were aware of the sounds people made and had made a reference guide so that staff could understand what their sounds and physical gestures meant. They had created 'social stories' which aided people in understanding situations they were in and aided their ability to communicate and therefore an opportunity to express their view.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question outstanding. At this inspection we have rated this key question outstanding.

This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Supporting people to develop and maintain relationships and to avoid social isolation; Support to follow interests and take part in activities that are socially and culturally relevant

- The service was exceptional in the way they supported people to learn new skills and maintain their independence.
- People had also continued to develop their current skills. This meant their confidence had grown and were able to undertake some tasks with little intervention or support from staff.
- People's fitness had improved due to the range of regular exercises they now chose to engage with. This had impacted positively on people's self-image, physical health and emotional welfare.
- The registered manager had protected one individual from the impact of their lack of access to finances and had ensured that people took part in activities that they enjoyed. The registered manager and staff had gone above and beyond in being creative in how they could support people to participate in activities.
- During the inspection, we identified numerous examples of novel actions taken by the registered manager and staff team to support people's wellbeing and enable ongoing engagement with activities they enjoyed.

Planning personalised care

- The service consistently met the needs of people based on their wishes, enhancing their quality of life and well-being. Staff were exceptionally responsive and had excellent knowledge of people. This had resulted in positive outcomes and improved their quality of life.
- The service worked in a person-centered way to meet their needs. Staff and the registered manager had a detailed understanding of current best practice and the principles of right support, right care, right culture and were ensuring that these principles were carried out. Staff had an excellent understanding of people's individual needs and acted to ensure people's values and beliefs were respected.
- The registered manager engaged positively with ongoing multi-professional processes to ensure people's needs were fully understood and accurately documented. This ensured people's needs were fully understood and supported staff to provide consistent support while supporting independence and respecting people's autonomy.
- The service had a strong emphasis on ensuring people felt empowered and valued.
- People's privacy and dignity was promoted and respected by staff. Staff were aware this was people's home and had involved them in all decision about furnishings and decor. The service's design and layout supported people and fully met their individual needs.
- The registered manager and all staff were dedicated to driving improvement, expressing their desire to provide the best possible, person-centred care. People's individual goals and aspirations were woven into

their daily support and care planning.

- People's care records were comprehensive and reflected their health and social needs. These were updated regularly. Care plans reflected the principles and values of right support, right care, right culture. Records referred to promoting people's independence, their diverse needs and inclusion within the local community.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The service excelled in empowering people to communicate so their voice could be heard.
- Professionals told us the service's support had enabled one person to gain additional communication skills.
- Staff used a range of tools and ways of communicating to engage meaningfully with people through touch, sounds, light, verbally, pointing, and using pictures.
- Accessible information was available to people so they could see their achievements, what their goals were and information around decision making.

Improving care quality in response to complaints or concerns

- The provider had a robust complaints policy and procedures in place. They had a clear process in place to investigate all complaints and learn lessons from the results. They told us any learning would be shared with the whole team and the wider organisation.
- Easy read information was available to help people understand the complaints procedure.

Is the service well-led?

Our findings

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

At our last inspection we rated this key question outstanding. The rating for this key question has remained outstanding.

This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, people-centered care.

Promoting a positive culture that is people-centered, open, inclusive and empowering, which achieves good outcomes for people;

- At the last inspection this section was rated outstanding due to the exceptional leadership of the service and we found this has remained. The vision of Montrose Barn was to provide a service which promoted independence where people were 'able to realise their potential as equal and active citizens who had as much control over their lives as possible'. We found that this practice had continued and been further developed with extensive positive impacts on the people's wellbeing.
- The registered manager and staff team demonstrated a highly positive person-centered culture as documented throughout this report. Staff had set high standards for themselves, and this promoted an exceptionally positive culture which challenged disability perceptions, improved the confidence of people and had very positive impacts on the lives of people using the service.
- The registered manager and provider established a strong and visible person-centered culture. People were valued and treated with compassion, kindness, dignity and respect by the dedicated, motivated and committed staff team including a devoted registered manager. They delivered care and support that was exceptionally caring and person-centered which clearly positively impacted on people.
- Throughout the inspection we saw examples of people being included and empowered to make decisions about their wishes and preferences. The focused person-centred approach had impacted positively and enabled people to become more independent.
- People were at the heart of the service and there was a strong commitment to provide person centered care and enable them to achieve their full potential.
- The registered manager promoted an open and transparent culture which focused on effective communication. Records demonstrated this focus was understood and valued by staff.
- The registered manager's vision and values focused on person-centeredness, being passionate about making a difference to people's lives and ensuring positive outcomes for people. We observed staff understood and cared for people in a manner that was in keeping with these principles.

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

- The registered manager and the provider had ensured that people were protected from potential significant harm from external risks. They had consulted with relevant health and social care professionals and the police to ensure that people, and their staff team were as safe as possible while supporting people's

independence. The registered manager had ensured safety systems were robust, minimised potential harm while enabling appropriate risk taking and independence.

- The registered manager had maintained excellent communication with professionals to ensure they were kept up to date with all matters in relation to any potential risk. This meant that all agencies were aware of any potential risks and situations at all times.
- The registered manager understood and had fully implemented the guidance included in right support, right care, right culture. The service model of care and setting maximised people's choice, control and independence. Care was exceptionally person-centered and fully focused on people's individual needs. The providers ethos, values and behaviours of leaders and care staff ensured people lead confident, inclusive and empowered lives.
- Staff knew people well and were immediately able to access the information they needed to provide safe and effective care. Care was provided in accordance with peoples wishes and their decision respected.
- The providers governance systems were effective and continued to drive improvement in the service performance while supporting people's independence.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- Throughout the inspection it was evident that the leadership team were all extremely passionate about their role and took ownership of ensuring improvements were continually made to the quality and safety of the care provided.
- Staff told us they felt respected, supported and valued. The provider promoted equality and diversity in its work. They felt able to raise concerns without fear of retribution.
- Staff told us they were involved in developing the service and felt listened to. Staff confirmed they were able to make suggestions to improve the running of the service.
- The registered manager was passionate about developing staff and ensuring their knowledge and skills were maintained, updated and promoted best practice. Records evidenced the high levels of staff training achieved.
- Effective quality assurance checks were carried out by key staff members. These included checks on people's medicines, care plans, and monitoring of the care being delivered. Any issues identified in the audits were shared with the registered manager and actions were cascaded to the staff team.

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

- People benefitted from a provider who was open and honest. Where complaints or concerns had been raised, full investigations had been carried out to identify what had gone wrong and what lessons could be learnt. The management of the home had worked with other relevant parties, such as the local authority, to make sure the people's health and well-being was promoted.

Working in partnership with others

- The service worked in partnership with health and social care professionals to ensure people's needs were met.