

## Care and Resolve Limited The New Barn

#### **Inspection report**

Goldstone Cheswardyne Market Drayton Shropshire TF9 2NA Date of inspection visit: 16 November 2017 21 November 2017

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Good

Tel: 01630661583

#### Ratings

## Overall rating for this service

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?	Good	

## Summary of findings

#### **Overall summary**

This inspection took place on 16 and 21 November 2017 and was announced.

The New Barn provides personal care for up to 12 adults with learning disabilities. At the time of this inspection 12 people were living there.

A registered manager was in post and present throughout this inspection. 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 2008 and associated Regulations about how the service is run.

People were kept safe from the potential harm of abuse or ill-treatment as staff knew how to recognise and respond to such concerns. People were supported by enough staff to meet their needs and who responded to them promptly.

The provider followed safe recruitment procedures when employing new staff members. People were assisted with their medicines safely by staff who were competent to do so. The provider had processes in place for identifying and addressing any staff member's unsafe behaviour or practice.

The provider had infection prevention and control systems in place including cleaning schedules and processes for "deep cleans". The registered manager had also identified link person's to attend local infection, prevention and control events.

People were supported by a compassionate and motivated staff team. Staff members knew those they supported well and respected their privacy and dignity. People were encouraged to be as independent as they felt able to be. People received support to identify and achieve goals in their lives including educational, vocational and personal aspirations. People took part in activities that they found to be stimulating, challenging and enjoyable.

People were supported by a staff team that had the skills and knowledge to meet their needs. New members of staff completed an induction to their role and were assisted to develop the skills they needed to work with people. Staff attended training that was relevant to the people they supported and any additional training needed to meet people's needs was provided. Staff members were encouraged and supported to achieve qualifications in care.

Staff received support and guidance from a management team who they found approachable. People and staff felt able to express their views and felt their opinions mattered.

People's rights were maintained by staff members who were aware of current guidance and legislation directing their work. People were involved in decisions about their care and had information they needed in

a way they understood.

People were involved in the development of their care and support plans which were individual to them. People received care from staff members who knew their individual likes and dislikes and histories.

People and their relatives were encouraged to raise any issues or concerns. The management team had systems in place to address any concerns or complaints.

People had regular contact with the registered manager. The provider had systems in place to monitor the quality of support given and to make changes when needed.

#### The five questions we ask about services and what we found

We always ask the following five questions of services.

The service was safe.

People were protected from the risks of abuse by a staff team who knew how to recognise signs of ill-treatment and knew what to do if they had concerns.

People had individual assessments of risks associated with their care. Any incidents and accidents were investigated in order to minimise reoccurrence. The provider followed safe recruitment procedures. People received support with their medicines by a trained and competent staff team.

#### Is the service effective?

The service was effective. People were supported by staff members who were trained and supported to undertake their role. People had their rights protected by staff members who followed current guidance. People had access to healthcare to maintain wellbeing. People were supported to eat and drink enough to maintain their health.

#### Is the service caring?

The service was caring.

People were treated with kindness and compassion by those supporting them. Staff members regarded those they supported with warmth and respect. People were given information in a way they understood. People had their privacy respected by those supporting them and who treated them in a way that maintained their dignity.

#### Is the service responsive?

The service was responsive.

People were involved in the development of their care and support plans which were individual to them. People received care from staff members who knew their individual likes and dislikes. People were encouraged to identify and achieve goals in personal and educational development. People and their relatives were encouraged to raise any issues. The management team had systems in place to address any concerns or complaints. Good

Good

Good

Good

#### Is the service well-led?

The service was well led.

People had regular contact with the registered manager who they found to be approachable. People's views and opinions mattered to the management team and they were engaged in decisions about The New Barn. The provider completed checks to drive quality and improve the experiences of people. When needed the registered manager and provider worked in collaboration with other agencies to promote continuous care and support for people.





# The New 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 was planned to check 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.

This inspection took place on 16 and 21 November 2017 and was announced. The provider was given 24 hours' notice of this inspection. This was because the service provides care for younger adults who are often out during the day and we needed to be sure that someone would be in.

The inspection team consisted of one inspector.

We reviewed information we held about the service. We looked at our own system to see if we had received any concerns or compliments about the provider. We analysed information on statutory notifications we had received from the provider. A statutory notification is information about important events which the provider is required to send us by law.

We asked the local authority and Healthwatch for any information they had which would aid our inspection. We used any feedback as part of our planning.

We spoke with four people, two relatives, the registered manager, four care staff members and two external training facilitators. We spent time in communal areas observing interactions between people and those supporting them.

We looked at the care and support plans for two people, records of quality checks, accident and incidents records and medicine administration. In addition we also looked at records relating to infection prevention and control and details of quality checks completed by the provider. We confirmed the safe recruitment of two staff members.

We looked at how people were kept safe from the risks of abuse. People we spoke with were confident they were safe and protected by those supporting them. One person said, "I am safe and sound. No one has hurt me. If I was upset I would go to [staff member's name]." Relatives we spoke with believed that their family members were well cared for and safe at The New Barn. Staff members told us they had received training on how to recognise the signs of abuse and what to do if they suspected anything. One staff member told us, "I would go straight to [registered manager's name] or even the police. Wrong is wrong and something should be done about it." The provider and registered manager had systems in place to respond to any concerns raised with them. These included contact with the local authority in order to keep people safe.

We looked at how people were kept safe from the risks of harm associated with receiving care. People we spoke with told us they felt safe receiving care and support whilst at The New Barn. One person told us about the things they did to keep their environment safe. They told us they reported any repairs they found and also helped to rectify any problems. For example, we saw them helping a staff member to fix a door. The provider and registered manager had systems in place to respond to any maintenance issues or unsafe pieces of equipment.

Regular maintenance checks were performed to ensure equipment was safe for people and staff to use. One person showed us around their home and told us about the fire procedures in place and what they would do in an emergency. When needed external professional advice was acted on to ensure. The New Barn remained a safe living and working environment. For example, following a recent fire safety check a recommendation had been made regarding the internal fire doors. At this inspection we saw work had been completed to meet the recommendations made.

Staff members told us they had received training on how to safely support people with individualised pieces of equipment. These included hoists to support the person during personal care. One staff member told us, I received training on how to safely use the bath hoist. I was then watched to ensure I was safe to use it. If I saw anything wrong with the hoist I would report it straight away and take it out of use."

We saw incidents and accidents were recorded and reported. Any such reports were then monitored by the registered manager in order to see if any additional action was required or if there was any learning which could prevent reoccurrence. Staff we spoke with were aware of how to record and report incidents, accidents or dangerous occurrences. The registered manager analysed these reports and compiled a monthly report for the provider. This was to see if any patterns occurred or if anything could have been done differently. Since the New Barn had been registered no incidents or accidents had required any additional action by the registered manager or provider.

Staff members told us there was a whistleblowing process in place at The New Barn. The provider and registered manager had systems in place to respond to any such concerns raised with them. This included responding to the individual and investigating any concerns raised. At this inspection it had not been necessary for the provider to undertake any such investigations as no concerns had been raised. Staff

members we spoke with were aware of the whistle blowing process and felt confident they would be supported should the need to raise such a concern.

People told us, and we saw, that there was enough staff to meet their needs safely and timely. One person said, "We get all the help we need. It's not a problem." Staff members we spoke with felt the staffing numbers were sufficient to meet people's needs.

Staff members told us that before they were allowed to start work at The New Barn checks were completed to ensure they were safe to work with people. Staff told us references and checks with the Disclosure and Barring Service (DBS) were completed and once the provider was satisfied with the responses they could start work. The (DBS) helps employers make safer recruitment decisions and prevent unsuitable applicants from working with people. The provider had systems in place to address any unsafe behaviour displayed by staff members which included disciplinary action if required.

People told us they received their medicine when they needed it. One person said, "I know which ones (medicines) I need and they (staff) help me." People told us they had the option to refuse medicines if they wanted but those we spoke with said they understood the need for their medicines and were happy to take them to maintain good health. Staff we spoke with told us they had received training in the safe administration and handling of medicines. One staff member told us they completed their training and were then observed by a senior staff member to ensure they were safe to support people. People had individual medicine profiles in place informing staff members what medicines were needed and how the person preferred to take them. People told us that staff members followed these instructions when supporting them.

The provider had systems in place to identify any errors with medicines and to take action should one be discovered. However, they had not needed to take any such action since the provider had registered with us. One staff member told us, "If I think that someone had made a mistake I would check with the person to see if they had had their medicine or not. I would then check the stocks and seek medical advice if needed." When people had "When needed" PRN medicine there were guidelines for staff to follow which included what the medicine was for and when to support people with it. These guidelines were supported by written instructions from the prescribing GP.

People told us, and we saw, that they lived in an environment which was kept clean and tidy. People told us they were involved in cleaning their own rooms and every month helped staff with a deep clean of their rooms. The provider had infection prevention and control systems in place to minimise the risk of infection. This included appropriate training of staff in infection prevention and control. In addition the provider has identified a named member of staff to act as an infection prevention and control link person to attend local events focusing on cleanliness in the home. The staff we spoke with, including those working in the kitchen and responsible for food preparation, had been trained in food hygiene.

### Is the service effective?

## Our findings

People told us that their individual health and social care needs had been assessed and the care and support they received followed these assessments. One person said, "I write my care plan with the help of [Staff member's name]." One relative told us, "We are as involved as much as [Relative's name] wants us to be. We can chat about what they want out of their care and this is what staff follow."

Those living at The New Barn had done so for a significant period of time. The management team had systems in place to assess the needs of anyone moving in. This included going out and spending time with people and inviting them to spend time at The New Barn. This gave people the opportunity to form relationships with those they would be living with.

People were supported by staff members who had the skills, knowledge and training to effectively meet their needs. One person told us, "I don't worry about the staff. They know what I need help with and are very good at supporting me." Relatives we spoke with believed the staff members at The New Barn were skilled and competent to assist their family members. One relative said, "I can't sing their praises enough. All the staff are skilled at what they do and on how to assist people to get the very best from them."

People were supported by a staff team that felt supported and well prepared to undertake their work. Staff members we spoke with told us they regularly took part in individual one-to-one sessions with a member of the management team. It was during these sessions that they could express how they were getting on at work, what they did well and what they could improve on. One staff member told us, "I do find these sessions helpful. We talk about training and if there is anything else I want to do to increase my skills."

Staff members new to The New Barn undertook a structured introduction to their role. This included an introduction to policies and procedures before working directly with people. One staff member told us, "I spent some time with [staff member's name] going through different files and policies. I then worked alongside [staff member's name] and got to know those I would be supporting. I found this a useful start as there was no pressure and I could ease myself into work properly."

Other staff members we spoke with told us that after first starting at The New Barn they undertook a probationary period of employment. It was during this time that they worked towards obtaining their care certificate. The Care Certificate is a nationally recognised training programme aimed at training staff to recognise the standards of care required of them. External trainers told us they believed the management team fully embraced staff learning and encouraged people to explore and undertake training opportunities. They went on to say that the training had a positive impact on those who lived at The New Barn. For example, one staff member undertook training in Autism awareness. Following this training they recognised that perhaps excessive stimulation could cause anxiety. As a result they introduced quieter periods for one person which assisted in managing potential periods of upset.

People told us they were supported to make heathy eating decisions. One person said how proud they were at losing some weight. They went on to tell us how they had struggled over the years but with the help of the

staff at The New Barn had made some significant progress. Others told us they had choice of what they wanted to eat and drink and that they found the meals to be enjoyable. One person told us about the items of food they disliked. They went on to say how they are encouraged to make healthy eating decisions but it is up to them what they eat. If they didn't like what was on offer they could always have an alternative.

We spent time with people during meal times. People had their meals where they felt comfortable. Some preferred to eat in the dining room whilst others made the decision to eat in the conservatory. One staff member told us, "Eating is so important it is preferential to those who live here (The New Barn) to eat where they want and not where we think they should eat." In addition to eating at The New Barn, we saw that some people had chosen to go out and eat. People's weights were routinely monitored and the management team had systems in place to address any unplanned or sustained weight loss including liaison with GP's. Those whose religious and spiritual beliefs directed their food preferences were catered for. This included options for food which complied with their beliefs. The management team had collected information regarding individual's preferences and these were known by the staff members supporting people.

People had access to healthcare services including GP's Nurses, Dentists and Opticians in order to maintain good health. One person told us, "[Dr's name] comes here or I go to see them. They do all my checks and I am fit and healthy. I have just had my flu jab. It was what I wanted." When required people were referred onto specialise services for further medical intervention. We saw people had made positive decisions regarding the current health and future health care and treatment. Those we spoke with told us they were encouraged to talk directly with GP's or Specialists and to make their own informed decisions regarding their health. We saw one person talking about their health care options. They asked one staff member's advice. They told them they couldn't make the decision for them but helped them understand the information so that they could make their own informed decision.

The physical environment within which people lived at The New Barn was over two floors accessed via stairs. People told us, and we saw, that they were free to move around as they wished and felt safe to do so. We saw people going outside into the gardens or spending time in quieter areas if they wanted. One person told us, "I like to spend my time either in my room or in the conservatory. I go in there just when I want some quite time." There was appropriate health and safety signage at The New Barn for example: information was on display informing people, staff and visitors about fire exits and firefighting equipment. However, people and the management team were aware that this was a home and that as such the environment should be homely. People understood where their individual rooms and communal areas were and signage was minimal in keeping with the homely environment.

People told us, and we saw, that they were supported to make their own decisions and were given choices. People were given the information in a way they could understand and were allowed the time to make a decision. For example, we saw one person talking about meal options with a staff member. This staff member then started showing them pictures on a computer and engaged them in a discussion about meal options supported by pictures. Throughout this inspection we saw people making decisions about what they wanted to do, where they wanted to go and what help they needed with everyday tasks and personal care.

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. We checked whether the service was working within the principles of the MCA. The provider had trained and prepared staff in understanding the requirements of the MCA.

We saw people's capacity to make decisions was assessed and reviewed when needed. Staff we spoke with had a clear understanding about the process to follow if someone could not make a decision themselves. Staff had a clear understanding of the principles of the Mental Capacity Act and the process of best interest decision making. We saw details of a best interest decision which had been made to ensure someone received appropriate care with regards to dental work. This involved the person, family and relevant healthcare professionals. This care was then provided in the best interests of the person involved and the decision making process correctly followed the current guidance.

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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). At this inspection the provider had made appropriate applications to people's individual placing authorities. The registered manager had systems in place to monitor these applications including renewed requests if needed. We checked the requirements of any authorised applications and we saw the provider was supporting people in accordance with the instructions given.

People told us that they were supported by a staff team that was "Fab," "Great," and "Good." People went on to describe the care they received as kind and respectful and centred on them and their individual needs. One relative told us, "I can't sing their (staff) praises enough. They are just fab. I don't know what I would do without them." Another relative said, "I have full confidence in the staff. It is so amazing what they have supported [relative's name] with and they are so patient and yet motivating."

Staff members talked about those they supported with fondness, respect and regard. One staff member said, "We are all here to support people how they want to be supported not how we feel they should be. They can achieve so much and we are all there to support them."

We saw people received support at times of potential upset and distress. One person expressed some anxiety following a disagreement with another person. The staff member supporting them encouraged them to express what it was they felt aggrieved at. After some time the person was able to explain what had happened and how they felt. The staff member asked them what they were going to do about it and talked through some options with them. We asked the staff member about this. They told us, "We all experience different emotions all the time. Sometimes it takes a little longer to work out just how we are feeling. By talking through what happens people are better equipped to deal with life."

Another person told us about how they were feeling following a particular life event which had impacted on them emotionally. They recognised that they may need some additional assistance with this and requested support from the registered manager. We saw the registered manager talk through the options with this person and confirm what help they felt they needed. This person told us, "I feel better just by saying that."

People we spoke with told us they were involved in making decision about their care and felt involved in the planning of their support. One person said, "I ask for my care plan all the time and have a good read." Another person told us they met with their keyworker (named staff member) once a month. During these meeting they talk about what they have done and what they want to do next. For example, we saw people planning holidays and where they wanted to go.

People told us they had been provided with the information they needed in order to make future decisions about their care and support. One person told us about what they wanted to achieve in their life and that they were confident they will achieve this living at The New Barn. We saw others had made decisions regarding future healthcare options which had been appropriately recorded so that their wishes could be honoured in the future. When needed people were referred onto advocacy agencies to support at specified times. At this inspection no one had the required need for ongoing advocacy. However, the management team had systems in place to refer to appropriate agencies when this was needed.

All those we spoke with told us that staff respected their privacy and dignity at all times. One person said, "I have my own room and this is my space." Another person said, "Staff ask me if they can come into my room." We saw staff members knocking on people's doors before entering and seeking permission prior to

supporting them. Staff members we spoke with told us they promoted people's dignity by encouraging choice and decisions regarding the support people received. In addition staff members encouraged people to complete as much of their own care as they were able.

Information private and confidential to people was securely kept and only accessed by those with authority to do so. We saw staff members checking people's authority to access information before anything was disclosed.

People told us that they could be as independent as they wanted. We saw one person helping to keep their home tidy by taking items out to the recycling without any support. Another told us how they desired to do go college and that they were hopeful to do this without staff assistance. People told us they were supported to attend appointments in their local community including healthcare appointments, educational establishments, leisure centres and slimming clubs.

Friends and family were able to visit when they wanted and private areas were available. One visitor told us, "It's always a good welcome here. I feel like part of the family, which I am now, I think about it."

People we spoke with told us they felt that they were the ones who directed their care and support. They went on to say that they were fully involved in the development of their personal care and support plans. When they wanted family members were involved and asked for their input into their relatives care planning. One relative told us, "I don't get as involved as I used to. This is solely because [relative's name] is at the point where they can say for themselves what they want."

The care and support plans we looked at were individual to the person and provided staff members with the information and guidance they needed in order to support people how they wanted. These included personal histories, details on those that mattered to them, likes and dislikes and goals and aspirations.

One person told us about their desire to go back to college. They went on to tell us about the courses they have already completed and what they want to go on and do next. Another person told us about their aspiration to work in catering. They told us they were going to be supported by helping out in the kitchen at The New Barn to get used to a kitchen. However, before they could do this they needed to complete and pass their food safety awareness qualification. We saw they were working through the relevant food safety modules on the computer at this inspection.

People were involved in identifying their personal aspirations as well as educational and vocational goals. One person told us about their planned weight loss. They said with the support of staff members they had been attending a local community slimming club. It was with this support that they are well on their way of achieving their personal target. They told us, "I feel so proud at what I have done."

People had the opportunity to follow their preferred faith. One person told us how they used to go to church but that they found very little benefit in it. They said, "They (staff) went with me and stayed. But I didn't get much out of it. We spoke about it and I decided not to go any more. I know that if I change my mind I can start again and they (staff) will go with me."

The registered manager told us they were in the process of working through people's care and support plans with them in order to move them into a new format. This new format had more pictorial prompts to aid peoples understanding. One person told us they felt this was a good idea as, although they could read, sometimes it is easier to look at a picture to "help you out a bit."

People told us, and we saw, that they took part in a range of activities they found interesting, stimulating and fun. We saw people helping out with household tasks, going out shopping, planning trips out and holidays, planning their care and support and relaxing. One person told us about their love of martial arts. They were in the process of identifying clubs in the area where they could attend. They told us, "I was very impressed that I could go to such things and that they (staff) will help me get there."

People and relatives told us visitors were free to visit whenever they wanted. One relative told us they were regularly invited to attended social events arranged at The New Barn. They said, "This is just an opportunity

to relax with everyone and have some fun."

People had access to on-line services and digital communication if they needed to keep in touch with people. Wireless internet access was available and staff members were knowledgeable about how to support someone to use internet based communication tools. One person showed us their tablet computer. They wanted to find out about a particular situational comedy. With the help of a staff member they were able to find it and then streamed it to their device so they could watch it in their room. Another person told us they had used an internet based communication programme to keep in touch with family members who lived outside of the UK.

People told us they knew how to raise a concern or a complaint but no one we spoke with had felt the need to do so. One person said, "I would go straight to [registered manager's name] if I was unhappy. I am always going in and out of their office and can talk with them when I want."

The registered manager told us that they had not received any complaints since they had registered with us. However, they had systems in place to investigate and respond to anyone raising a concern with them.

The registered manager told us that as they provide a service for younger adults the provision and conversations regarding end of life care and advanced wishes had not yet been had with people. They went on to say their priority was for people to settle and feel comfortable and to achieve personal life goals before such planning. However, the registered manager went on to tell us about the supporting specialist services available should such a conversation need to be had with someone. These included specialist counselling services and end of life teams.

People told us they knew who the registered manager was and that they "Saw them all the time." Throughout this inspection we saw people going into the main office and spending time with the registered manager. We saw they chatted openly about what they wanted and if there were any issues on their mind. We saw the registered manager encourage people to express how they were feeling and to identify and follow through their own actions to resolve any problems. For example, one person spoke about a conflict with another person living at The New Barn. We saw the registered manager asking them what they could do about it and how best to approach the other person. This person practiced what they were going to say and we saw them go away happy. We later spoke with this person and the person they perceived they had the conflict with. Both were happy with how it had been resolved and the compromise that had been reached.

People and staff believed there was an open and transparent culture at The New Barn. Staff we spoke with believed that if there were any concerns or if something was wrong they could openly talk about it without fear of blame. People told us they were involved in regular "house meetings" and that this was an opportunity to express themselves and to find out more about what was happening. One person told us that changes had been made to The New Barn and that someone else was moving in. This had been talked about and with the person's permission people had received a little information about them so they knew who they were when they arrived. One person told us about the purchasing of new furniture in the lounge area. They told us that they were spoken with and asked for their ideas about what was needed and if they had any preference.

Staff members told us they attended staff meetings which gave them the opportunity to discuss their work and any areas they felt needed improvement. One staff member told us that at one of the meetings they spoke about an individual's behaviours which could be perceived as annoying to others living there. As they were all able to talk about it, they then adopted a consistent approach to manage any conflicts that may arise as a result.

People and staff members believed that they had shared values and aims for The New Barn. These included providing a safe and homely environment in which people could identify and achieve their own goals in life at a pace that suited them. We saw these values expressed in the way people and staff interacted. For example, when looking at vocational courses and potential career options staff went through the different steps that needed to be achieved first. They then agreed with the person what they wanted to do and in what order.

The New Barn had a registered manager in place at the time of this inspection. The registered manager understood the requirements of their registration with the Care Quality Commission. The registered manager had appropriately submitted notifications to the Care Quality Commission. The provider is legally obliged to send us notifications of incidents, events or changes that happen to the service within a required timescale. The registered manager took responsibility for maintaining their knowledge and skills with regular attendance on training courses provided.

In addition they received national safety notifications to assist them to maintain a safe living and working environment. These included communications from a local provider representation organisation that informed them of developments within the care sector and any changes they needed to make.

The registered manager was supported in their role by a senior management team. People and staff told us that regular quality monitoring checks took place where someone would come in and complete checks to ensure any issues were highlighted and corrected. Although people told us they were aware of these checks they felt more time could be spent with them talking about their experiences. However, as people had such a good relationship with staff supporting them and the registered manager they did not feel this would change anything. Following such quality checks actions were followed through. For example, it was identified that a suggestion box should be available for people, staff and visitors. At this inspection we saw one had been provided and was in the reception area for everyone to access. However, no one had made any suggestions at the time of this inspection.

People told us they felt part of the local community of Market Drayton and accessed the local services as well as those in the larger towns of Telford, Shrewsbury and Stafford. These included educational and vocational training centres, shopping, leisure and sports facilities. One person told us they liked to go to a particular chain of coffee shops as people knew them there and they served their favourite drink. They went on to tell us that they felt part of the town and enjoyed going out and about.

The provider had systems in place to address any unsafe behaviour displayed by staff members which included disciplinary action if required. Staff members were aware of appropriate policies which directed their practice including the whistleblowing policy. Staff members we spoke with told us they were confident they would be supported if they ever needed to raise a concern.

Resources and opportunities were available to staff members to continue to improve their professional skills and competencies. These included attendance on regular training courses and open and honest discussion about their role and the support they provide. One staff member said, "I wanted to learn more about autism and how this impacted on those we supported. I was put on a course after asking about it. I found this very rewarding and insightful."

We saw details of partnership working with other key agencies involved in the support of people. These included the local authority, GP's, district Nurses and specialist health providers. We saw the registered manager and the provider had systems in place to communicate with others involved in people's care to meet their individual's needs. For example, when someone planned to move in to The New Barn the registered manager met with the person, and the previous provider, to understand what the person wanted out of their new home.