



Inspection Report on

Montrose Residential Home

Montrose Rest Home

35a

Merlins Hill

Haverfordwest

SA61 1PE

Date Inspection Completed

14 February 2022

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About Montrose Residential Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Sarah Wilkie
Registered places	10
Language of the service	English
Previous Care Inspectorate Wales inspection	12 February 2020
Does this service provide the Welsh Language active offer?	No. This is a service which does not anticipate nor meet the needs of people who wish to communicate in welsh.

Summary

People who have made Montrose their home are cared for in a clean and homely property. Improvements to the environment would further enhance people's experience.

The home is safe and the atmosphere is calm and well-organised.

There is a small staff team who work well together and remain motivated to offering people a good standard of personalised care and support.

People receive care and support from an experienced team who are committed to providing a quality service. Improvements are needed to ensure all staff have the required and suitable references before starting work.

Well-being

People have very good relationships with those who care for them. Care workers are described by people as “*very good*” and feedback from relatives rated all aspects of the home as good to excellent. We saw some friendly, calm and kind interactions. One person asked for some assistance and this was offered promptly.

People are safe and protected from abuse and harm. Staff know the action they must take if they suspect a person is at risk of abuse or harm. They are confident the manager will take the appropriate measures to deal with, and report any concerns to make sure people are safeguarded.

Access to, and exit from the home is controlled by staff, which ensures only those with a legitimate reason for being in the home are allowed in.

Staff wear the appropriate PPE (personal protective equipment) and make sure visitors show evidence of a current negative lateral flow test (LFT) as well as having their temperature checked.

People can do some things that matter to them. Visitors from the local community are starting to come back into the home as restrictions caused by the pandemic are easing. People and their relatives are satisfied with the way the home has managed Covid and kept people safe. People appear content and to enjoy the company of those they live with and who work in the home.

Improvements to the physical environment would enhance people’s overall well-being. The kitchen is in need of refurbishment and some of the carpets are worn. The garden area needs attention and for the unused items to be disposed of.

Aspects of the recruitment process need to be tightened to ensure the service is meeting their regulatory responsibilities. Two references are required for all staff employed at the home. This is considered as an area for improvement. A Priority Action Notice has not been issued on this occasion as there does not appear to be any adverse impact for people living in the home. This will be followed up at the next inspection.

Care and Support

Electronic records are maintained. Care plans are written for a range of support needs, including oral hygiene; mobility; activities and nutrition. Daily records contain the information required and whilst most reflect person centred care, some do not. The manager has agreed to discuss this again with staff.

Care workers say they find the care records helpful and have time to read them. They get the information needed to ensure they know people's current care and support needs.

There is a helpful document called "This is me" which sets out information about people's history, as well as what and who is important to them.

People's physical health needs are met. Some people are receiving care in bed and there is enough pressure relieving equipment to reduce the risk of skin pressure damage. We saw people are assisted to reposition every two to three hours and care workers know how to recognise signs of skin damage.

There is enough moving & handling equipment and this is serviced as required.

There is an understanding of the importance of good nutrition. All the people we spoke with are satisfied with the quality of food they have. Food is available outside of meal times and the cupboards are well stocked. Care workers have a good knowledge of people's likes and dislikes and alternatives are offered if requested. We have asked the provider to consider ways to reduce the reliance on processed food such as jars and tins of food. Meal times are flexible based on people's preferences and we saw one person enjoying a late breakfast.

People can do some things that matter to them. An activities co-ordinator works two days a week and at other times, care workers provide some activities for people. During the inspection, people were enjoying some valentine's day crafts. Some people, however, told us they are not interested in taking part in any activities and prefer to spend their time alone in their rooms.

Other activities include water colouring; baking; pet therapy; sing-alongs and quizzes.

The activities worker said they consider people's interests when planning activities and does spend time with people who are being cared for in bed.

The home has recently purchased an interactive screen which is used for both group and individual activities.

Environment

People live in a home which is generally suitable for their needs. Accommodation is provided over two floors, with some bedrooms on the ground floor and others on the first floor. There is a stair lift for people to use.

The home is clean and everyone we spoke with is satisfied with the standards of hygiene in the home. There are no malodours.

Parts would benefit from redecoration and refurbishment. Some of the bathrooms have been upgraded in recent years, but the work to replace the kitchen remains outstanding. There is a cupboard door missing and one of the other doors are not secured properly. Despite this, we were told all of the appliances work and the kitchen has been awarded the maximum score of five by the Food Standards Agency.

Some rooms are personalised with bedding, photographs and ornaments. There are no en-suite facilities but each room has a wash basin.

Some of the window restrictors can be easily disabled, therefore we have asked the provider to check with the Fire and Rescue service that they meet the standard required.

There is a large and secure garden, but it is overgrown and would benefit from some maintenance. There is some old and unused furniture and some other items which, if discarded, would enhance the environment.

Everyone eats their meals in the lounges. Staff told us people choose to do this and one person confirmed they prefer to eat in the lounge.

People are safe from anyone unauthorised from entering the home as visitors are required to be let in by staff. They are also required to show evidence of a negative lateral flow test and have their temperature taken.

Leadership and Management

The manager is also the RI for the service and is very visible in the home. She is supported by a small team of experienced and motivated staff who feel supported in their role and are able to discuss any ideas or concerns they have with their manager.

One staff member told us about the excellent support they received from their manager and their colleagues to ensure they were able to maintain a healthy work-life balance.

There are some governance arrangements in place. The quality assurance report provides a detailed summary of the provider's feedback about the service as well as the views of people who live in the home and their relatives. We saw responses have been received from visiting professionals and staff but these are not included in the report. Comments made include "*genuinely a lovely home*"; "*very caring, always a pleasure to deal with*", "*the atmosphere is calm, peaceful and homely*" and "*always hear good things about you*". The responses were rated as almost all good to excellent.

Staff are appointed following a generally safe recruitment process. However only one reference was available for one member of staff. This is an area in need of improvement. We have not issued a Priority Action Notice on this occasion as there does not appear to be any adverse impact of people.

Staff consider they have had the training they need to carry out their duties. The provider does not keep a training matrix and says that because the staff team is so small, she is able to keep a check to ensure all training is up to date. We saw some training certificates in staff files but noted that some are out of date.

Staff receive feedback on their work. Supervision consists of individual one to one sessions as well as observation and discussion of practice.

There are enough staff on duty to ensure people's needs are met. Staff presented as calm and well organised. They do not feel rushed and are able to assist people in a timely and responsive way.

Checks are made to ensure equipment and services are safe. Fire alarms and emergency lighting are checked weekly and fortnightly respectively and the fire safety system is checked every six months. Hoists have recently been serviced.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people’s well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement

Regulation	Summary	Status
35	Only one reference had been obtained for a member of staff. Regulation 35, Schedule 1, part 1,	New

	paragraph 4 states "Two written references, including a reference from the last employer, if any".	
73	Regulation 73.	Achieved
80	Regulation 80	Achieved

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