Care and Social Services Inspectorate Wales

Care Standards Act 2000

Inspection Report

Montana Healthcare Limited

41 St Isan Road
Heath
Cardiff
CF14 4LW

Type of Inspection – Focussed
Date(s) of inspection – 28th January and 20th February 2014
Date of publication – 3 April 2014

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Summary

About the service
Montana Healthcare Ltd was registered with Care & Social Services Inspectorate Wales (CSSIW) as a domiciliary care provider in 2007 and is currently trading from two offices in the Heath and Pentwyn areas of Cardiff. The Registered Manager is Robert Hession.

The agency is registered to provide personal care and support services to people up to the age of 65 years of age, with a learning disability or mental health difficulty. It provides a service to those living in their supported accommodation provision as well as those living in the community.

What type of inspection was carried out?
This was an unannounced, routine, focussed inspection and considered the quality of life theme and the experience of people using the service.

Information for this report was gathered from the self-assessment of service documentation, a discussion with the Registered Manager and a Service Manager at the office premises, discussion with several service users and staff when visiting a supported accommodation provision, and an inspection of 4 care files and information included in a quality monitoring report from March 2013.

What does the service do well?
The service understands the needs and preferences of people and can provide appropriate support for those they care for.

Service users have choice and influence over the care they receive and feel they are supported to remain as independent as possible.

What has improved since the last inspection?
The service has made the improvements to the service delivery plans as indicated in the previous report.

The manager is registered with the Care Council for Wales as required by the Domiciliary Care Agencies (Wales) (Amendment) Regulations 2013.

What needs to be done to improve the service?
There were no non-compliance issues identified at this inspection.
Quality of life

Overall service users have a good quality of life where their needs and preferences are known and they are supported to be as independent as possible.

People are encouraged to speak up, are listened to and feel their views are valued, rights are protected and they are treated with dignity and respect and have choice and influence in their daily living.

The care plans indicate that people have input into their care and have influence as to how the care is delivered. Potential service users are visited and a supplementary assessment is undertaken (in addition to that provided by the referring agency). Service delivery plans seemed clear and understandable and a staff member spoken with was clear about the needs and preferences of a specific service user, when asked. He added that any changes are reflected in the regular reviews and should something need to be changed immediately then the support diaries and communication logs enable staff to communicate changes.

Service users spoken with felt their needs were being met. “I enjoy being here as they understand me” one commented, and another said he “was supported and felt able to ask when he wanted something, they listen to me.” He added, "and staff explain so I can understand”.

People using the service experience well-being and a sense of achievement, are active and positively occupied and stimulated and feel their needs are recognised and catered for.

We (CSSIW) inspected four care files and evidenced that service user’s needs, to be actively involved, were being catered for. House meetings, core group meetings and one-to-one scheduled meetings were documented and identify that activities were based on choice and ability and service users had influence in the type of activity.

We spoke with several service users from one of the organisations supported accommodation houses who, during the duration of the visit, were either involved at the time of inspection or were about to leave for an activity. One service user spoken with was involved in history classes and was about to leave to a session on first world war history. He was very happy to discuss, with us, other opportunities he has including photography. Another was going fishing and explained his recent catch of a trout. Another was supported with independent living skills in the homes large kitchen. He was able to inform us of his schedule of activities and particularly commented on the support he received from staff.

The care files indicate that the individual schedules are reviewed, regularly, to ensure the needs are met and that the service users are enjoying the types of activities.

People are helped to look after themselves and, to an extent, exercise control over how they are cared for, remain as healthy as possible and have access to specialist or medical support.

The care files detail the ongoing involvement of health professionals from a variety of disciplines but particularly the mental health services. Reviews are regularly conducted, as detailed and documented in the care file, and visits are sometimes made to the
individual at their home.

In discussion with the service manager, we were informed that the delivery of care plans, in respect of physical well-being, is done closely in association with the relevant agencies. We were able to evidence review documentation which indicated that service users were making progress, both physically and psychologically.

We spoke with one service user who was currently trying to improve his lifestyle and trying to eat more healthily and appropriately. He said he was being supported by staff and was relaying to us, items which he likes to eat that he knows, help him to meet a healthier lifestyle. We sat in the kitchen when staff and the service user were discussing upcoming meals and how they might be more nutritious. The conversation demonstrated the staff members’ understanding of the service users physical needs. One service user spoken with had reduced his intake of alcohol and took pride in informing us that it had reduced dramatically over the last year.

People experience warmth, attachment and belonging and are treated with dignity and respect and are supported in dealing with difficult feelings.

The atmosphere within the supported accommodation environment was warm and welcoming. Care files for both supported accommodation and those supported in the community (we were informed) detail an ABC analysis in order to assist staff in preventing an escalation of difficult behaviour. In the supported accommodation environment we saw staff talking honestly with service users but in a very positive and supportive way. A staff member spoken with said that he had learned much about service users from the service users themselves and knew particular triggers for particular individuals.

Care files include strategies for dealing with certain situations and knowledge of the individual helped to maintain an atmosphere that, a service user described as, “a family who get on”.

Feedback from stakeholders, in a quarterly monitoring report, included “this agency has worked extremely well with this service user after other agencies had failed to manage her complex needs”. Another recorded “….has provided a valuable and individually planned service to a vulnerable young man. An excellent piece of skilled work”.

In discussion with the service manager we were informed that the service was able to help care professionals identify issues that had been "missed" previously and she took pride in demonstrating the positive outcomes created for an individual at the supported accommodation service we inspected.

In feedback and detailed in the quality monitoring report a family member commented that "Montana Healthcare are flexible and the care workers provide sessions of a high standard and which (name of service user) enjoys and looks forward to".
### Quality of staffing

This inspection focused on the quality of life. CSSIW did not consider it necessary to look at the Quality of Staffing on this occasion because the focus was on the experience of service users. However, this theme will be considered during future inspections.
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How we inspect and report on services

We conduct two types of inspection; baseline and focussed. Both consider the experience of people using services.

- **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

  At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

- **Focussed inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focussed inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focussed inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under ‘Quality Themes’. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet ‘Improving Care and Social Services in Wales’. You can download this from our website, Improving Care and Social Services in Wales or ask us to send you a copy by telephoning your local CSSIW regional office.