

Merrybrook Care Home Service

43 Peace Avenue
Quarriers Village
Bridge of Weir
PA11 3SX

Telephone: 01505 616043

Type of inspection: Unannounced
Inspection completed on: 31 August 2017

Service provided by:
Quarriers

Service provider number:
SP2003000264

Care service number:
CS2003001118

About the service

Quarrier's Merrybrook is a residential care home for up to six adults with learning disabilities. Many of the people supported at the service also have complex physical disabilities and additional health needs.

The service is located in a detached Victorian house in Quarrier's Village near Bridge of Weir. Out of the six bedrooms, two have full en-suite facilities and four have a toilet and sink. There are also fully accessible communal bathrooms. The house has a large living area, a well-equipped sensory room, kitchen, laundry room and garden. Staff are available at all times and have a sleepover room.

The aims of the service are to provide safe accommodation to people with physical and learning disabilities and to support their social inclusion. It aims to promote people's choice, privacy and dignity.

Merrybrook registered with the Care Commission in 2002 and transferred its registration to the Care Inspectorate in 2011.

What people told us

We sought the opinion of people who used the service and their families through face to face discussions, telephone interviews and questionnaires. People who used the service were unable to verbally communicate and so we observed staff practice and interactions.

The feedback we received was generally positive, and included:

'The service is excellent. I have no complaints - they do a great job.'

'Communication is very good. We live a fair distance away and we're always kept up to date.'

'The activities are good. [Person's name] has complex needs and is always out doing things.'

'[Person's name] has progressed since moving there. He's much more settled and comfortable.'

'My son has lived there for many years. He's settled and very happy there.'

'The communication with the staff and management is good. If there are any issues they're quickly resolved.'

'My son is active. He's supported to do lots in the community and goes on holiday every year.'

'My daughter is very settled at Merrybrook which for us is reassuring in lots of ways.'

'To watch my daughter interact so well with some of the staff is heart-warming.'

'The service is much more stable now. They lost some staff for a while but it has improved again. You need that consistency.'

'My only gripe is the amount of paperwork the staff have to complete. It seems to be getting more.'

Self assessment

The service was not required to submit a self-assessment for this inspection year. We reviewed the service's development plan and internal quality assurance documents which highlighted its strengths and areas for improvement.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of environment	not assessed
Quality of staffing	not assessed
Quality of management and leadership	5 - Very Good

What the service does well

Merrybrook met the complex needs of people very well. We saw a high level of support for people living with severe and profound learning disabilities, physical disabilities, autism and various health conditions. The service had the skills to meet these varied needs and ensured people were safe, comfortable and socially included.

The service displayed positive values and ensured that people were not defined by their disabilities or health conditions. Staff displayed real insight into people's interests, personalities and preferences, and placed these at the centre of their practice.

We also saw evidence of positive risk taking in which people were supported to safely participate in new opportunities. For example, people were supported to go on annual holidays, and try new activities such as indoor skiing and cycling. Staff explained that people appeared to enjoy and appreciate these new opportunities. This was indicative of the service's culture of risk enablement.

We generally found people were supported to achieve very good outcomes and positive physical and mental wellbeing. For example, someone was supported to have sensory baths at home. Staff observed the person to be more stimulated and interactive. This developed to regular hydrotherapy sessions and a holiday with accessible hot tub facilities. Another person with complex behavioural needs appeared happier and less anxious as the staff developed a consistent support approach. They were socially included and accessed community activities on a daily basis.

The service had developed impressive communication tools. Every person had a comprehensive communication passport that highlighted their unique communication style, and offered clear guides for staff to follow. The service also trialled the use of eye-gaze computer technology which allowed people with limited non-verbal communication to interact with staff. This was an example of innovative practice.

We also found very comprehensive positive behaviour support plans. These documents aimed to support staff to understand people's behaviour and reduce accidents and incidents. There was sophisticated analysis of people's needs, methods of communicating, potential triggers and appropriate staff responses. This ensured that staff were practicing consistently.

Management ensured that staff had varied and relevant training to meet people's needs well. We reviewed records and confirmed that staff had regular training sessions, supervision meetings and team meetings. These were of a high standard and further promoted consistency. Staff confirmed that management were supportive of their practice and development.

The service had established links with health and social care professionals. We saw evidence of joint working with psychology, speech and language therapy and nursing. For example, professionals had recently delivered training around sexuality and relationships. This had helped improve people's understanding, staff knowledge and overall interventions.

Management had a robust system of quality assurance which further ensured that the service was performing well and safely. There were weekly, monthly and six-monthly audits. These confirmed that staff were completing relevant health and safety, finance, medication, and other key duties.

The management team also consulted staff, people and families to plan for the future. There was a comprehensive service development plan that highlighted areas in which the service could improve. There were also regular newsletters, questionnaires, and correspondence with families to exchange ideas and keep them up to date. This was a further example of the service's person-centred and open communication approach.

What the service could do better

Some people living in the service had forms of mechanical restraint which aimed to keep them safe. For example, some people had bed frames to reduce the risk of falls, and there was a locked kitchen gate at times to reduce the risk of harm. Management explained that these were agreed at multi-disciplinary meetings. We asked the service to ensure that all risk assessments were signed by people's families and appropriate professionals to confirm their consent in line with best practice guidance.

The service had a period of increased medication errors earlier in the year. We were satisfied by the management's response - changes to procedures, and increased staff training and observation - and encouraged them to maintain these improvements.

Similarly, there was a period of significant staff change earlier in the year as several members left at a similar time. This naturally resulted in additional pressure on the remaining team members. We were happy to see that the service had now successfully recruited, and staff morale had returned to high. We also encouraged the service to maintain these improvements.

We asked the service to continue to seek the opinion of families and professionals. We noticed that response rates to service questionnaires had recently decreased. Supported people had limited ability to communicate their opinion, and so it's vital that others advocate on their behalf. This will help the service to identify further areas for improvement.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Inspection and grading history

Date	Type	Gradings	
15 Aug 2016	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	Not assessed
14 Aug 2015	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
31 Mar 2015	Unannounced	Care and support	4 - Good
		Environment	5 - Very good
		Staffing	4 - Good
		Management and leadership	4 - Good
6 Jun 2014	Unannounced	Care and support	4 - Good
		Environment	5 - Very good
		Staffing	4 - Good
		Management and leadership	4 - Good
17 Jun 2013	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
8 Jun 2012	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
19 Jul 2011	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	5 - Very good

Date	Type	Gradings	
28 Sep 2010	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good Not assessed Not assessed
7 Apr 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good 4 - Good Not assessed Not assessed
24 Nov 2009	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed
19 Jun 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
22 Dec 2008	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good Not assessed Not assessed
26 Jun 2008	Announced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good

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