SCSWIS
social care
and social work
improvement scotland

Care service inspection report

Craigmill House

Care Home Service Adults

Balmoral Road
Rattray
Blairgowrie
PH10 7HX
Telephone: 01250 - 873268

Inspected by: Averil Blair

Type of inspection: Unannounced

Inspection completed on: 3 February 2012

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Service provided by:

Craigmill House

Service provider number:

SP2003002111

Care service number:

CS2005108941

Contact details for the inspector who inspected this service:

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Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of Care and Support	5	Very Good
Quality of Environment		N/A
Quality of Staffing	5	Very Good
Quality of Management and Leadership		N/A

What the service does well

The service works hard to provide a personalised service for residents in a warm and welcoming environment.

What the service could do better

Although staff were able to show that they had a good knowledge of strategies used to manage some difficult behaviours, this was not necessarily clear in residents care plans.

What the service has done since the last inspection

The service has tried to provide more activities for residents, some of which are on a one to one basis.

Conclusion

Relatives of residents using the service were pleased with the quality of service provided, and felt that their relative received a very personalised and caring service, and that they were kept up to date with any changes in their relatives condition.

Who did this inspection

Averil Blair
Lay assessor: Not Applicable.

1 About the service we inspected

Craigmill House Care Home is registered to accommodate a maximum of 16 older people. There are sixteen single rooms, fourteen of which have en suite facilities. There are two sitting rooms and one designated smoking area. This is an established, small family run home located in a scenic country environment. Mrs. Kathy Felton is the owner/ manager responsible for the day to day running of the home and supervision of staff. In their statement of aims and objectives the home affirms its aim to provide a highly professional care service and a home for life.
Before the 1st April 2011 this service was registered with the Care Commission. On this date the new scrutiny body, Social Care and Social Work Improvement Scotland (SCSWIS) took over the work of the Care Commission, including the registration of care services. This means that from the 1st April 2011 this service continued its registration under the new body SCSWIS (known as the Care Inspectorate).

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 5 - Very Good
Quality of Environment - N/A
Quality of Staffing - Grade 5 - Very Good
Quality of Management and Leadership - N/A

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.scswis.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

The report was compiled following an unannounced inspection carried out on the 3rd February 2012 by Inspector Averil Blair of the Care Inspectorate.
During the inspection evidence was gathered from a number of sources, including relevant records and other documents such as :
- the service's self assessment document
- personal plans of people who use the service
- analysis of satisfaction questionnaires
- staff records particularly those relating to training supervision and appraisal.

Discussions took place with various people, including:
- The Manager
- 3 residents
- 2 staff
- 1 Cook
- 3 relatives

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The service had submitted an electronic self assessment as requested by the Care Inspectorate. This identified some of the service's strengths, and also some areas for improvement. However it did not always reflect some of the good practice carried out, or the positive outcomes for service users.

Taking the views of people using the care service into account

Residents spoken with during the inspection spoke highly of the service and made comments such as "I really enjoy the food here, they make a good pot of soup", "I like my room", and "staff get things going, we were playing games yesterday and they have music and games".

Taking carers' views into account

3 relatives were present during the inspection and were pleased with the quality of service their relative received. They felt they were kept up to date with any changes in their relatives condition, and felt the staff worked hard to look after their relative well. 7 Care Standard Questionnaires were returned to the Care Inspectorate prior to the inspection, and were very satisfied with the quality of care and support provided by the service. They made comments such as "the staff ensure that I have confidence in the service". One other comment made was that "the staff are always warm and friendly and the home feels just like that- a home rather than an institution". One relative was able to confirm that her relative was " treated with every respect and is well cared for in a comfortable clean warm and safe environment."

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

The service had a very good range of opportunities in place for residents and families to participate in assessing and improving the quality of care and support provided by the service.

A review system was in place, and minutes of reviews confirmed that residents were able to invite any family member to reviews for support. Two personal plans were sampled, and all included minutes of reviews and evidenced that residents had the opportunity to formally comment on all aspects of the service they received. Residents confirmed that they were able to make suggestions, for example, of changes to menus or new activities. These discussions were recorded in personal plans at least twice a year, and information gathered was used to compile the summer or winter activity programme and menu. Residents said that they were happy with this approach and felt that it resulted in a range of activities that they were interested in. Relatives confirmed that they could discuss issues with any member of staff and that any issues raised were dealt with promptly and efficiently.

The service had continued to carry out Quality Assurance questionnaires, which residents and relatives were encouraged to complete prior to six monthly reviews. These were then analysed annually. Results had been positive and no issues for development noted by relatives. Results were displayed on the service's noticeboard, and for those who were not able to visit the service, possibly because they lived too far away.

Areas for improvement

Currently relatives and friends who did not visit the home had to specifically request a copy of the analysis of annual questionnaires. The service could consider how this information is passed to any interested parties including stakeholders.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We ensure that service user's health and wellbeing needs are met.

Service strengths

Four residents' personal plans were examined during the inspection, and these provided very good evidence that their health and wellbeing needs were being met. Assessments of need and accompanying care plans were reviewed as frequently as necessary, and at least every 6 months. Records showed the involvement of relatives where requested by the resident, and also the involvement of appropriate other professionals, such as Care Managers and District Nurses. A dependency tool was completed on a monthly basis, and this reflected the support required by individual residents from staff. Records showed that staff had a good awareness of the risk of falls by residents, and this was discussed at team meetings. Discussions with the cook and care staff showed that they had a good awareness of any dietary needs of residents. The cook confirmed that although current residents did not have any special nutritional needs, she was aware of how to meet special diets as well as individual likes and dislikes. She also commented that she and her colleague were currently reviewing the menu, and may make changes, mainly based on likes and dislikes. During the inspection the Inspector sampled the food on offer at lunchtime, and this was high quality home cooking which residents obviously enjoyed.

An area for improvement had been identified at the last inspection relating to the analysis of accident and incident reports. Accident reports were now appropriately retained which allowed the service to analyse any trends. The local pharmacy had carried out an audit of medication processes, and one small issue was raised which the service immediately rectified. A sample audit of medication was carried out during the inspection and no issues were raised.

Areas for improvement

Although staff appeared to have a good knowledge of strategies to be used with one particular resident who could on occasion show some difficult behaviours, and information was found in personal plans, this was not presented in a clear and readily accessible format. This was also the situation where residents had been visited by the GP, and although the information was recorded it was not readily accessible and did not always result in a temporary care plan to cover any medical issues.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 2: Quality of Environment - NOT ASSESSED

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths

Information in support of this statement can be found in Quality Theme 1 Quality Statement 1.

Areas for improvement

See Quality Theme 1 Quality Statement 1.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

Staff records evidenced regular supervision and appraisal, and this was confirmed by staff spoken with during the inspection. Staff were able to be involved in these processes, and records showed where staff had been able to identify their strengths and areas for development. This resulted in the identification of appropriate training. Staff confirmed that they were able to attend appropriate training.

Staff had the opportunity to attend staff meetings, and could add items to the agenda if required. All staff spoken with felt that issues raised were dealt with promptly. . Minutes were kept of these meetings, and staff not able to attend were informed of any outcomes on a one to one basis by the Manager. Staff felt that they could access additional information and training on any issues they were particularly interested in.
They were also confident that if they required additional information specifically relating to the needs of residents this would be provided promptly.

Areas for improvement

Although staff confirmed that they had access to appropriate training and had carried out training in the recent past, training records did not always evidence this.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership - NOT ASSESSED

4 Other information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

None noted.

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Environment - Not Assessed	
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Management and Leadership - Not Assessed	

6 Inspection and grading history

Date	Type	Gradings	
16 Dec 2010	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed Not Assessed Not Assessed
2 Aug 2010	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good Not Assessed Not Assessed
26 Oct 2009	Announced	Care and support Environment Staffing Management and Leadership	4 - Good Not Assessed 5 - Very Good Not Assessed
31 Mar 2009		Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good 5 - Very Good 4 - Good

29 May 2008	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good 5 - Very Good 4 - Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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Translations and alternative formats

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