care inspectorate

Care service inspection report

Camilla House.

Care Home Service Adults

Main Street
Auchtertool
Kirkcaldy
KY2 5XW
Telephone: 01592 780590

Inspected by: Susan White

Type of inspection: Unannounced

Inspection completed on: 17 January 2014

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Contents

	Page No
Summary	3
1 About the service we inspected	5
2 How we inspected this service	7
3 The inspection	11
4 Other information	22
5 Summary of grades	23
6 Inspection and grading history	23

Service provided by:

Kingdom Homes Ltd

Service provider number:

SP2003001615

Care service number:

CS2005112020

Contact details for the inspector who inspected this service:

Susan White
Telephone
Email enquiries@careinspectorate.com

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	4	Good
Quality of Environment	4	Good
Quality of Staffing	4	Good
Quality of Management and Leadership	4	Good

What the service does well

The care home has a relaxed and welcoming atmosphere. It appears well maintained and is clean and spacious. There is open visiting which means that people can see their families and friends at time that are convenient to them.

Staff are friendly and relationships within the Home are very good.

The provider has a lifestyle team who work across eight care homes in the Kingdom homes group, providing opportunities for residents to take part in activities both within and outwith the care home.

What the service could do better

Finding ways to gather views of residents with impaired communication remains a challenge for the manager and staff at Camilla House.

What the service has done since the last inspection

There have been some changes in the staff team which are now settling down and this helps residents to be more involved in regular activities outwith the Home.

Conclusion

Overall people who use the service and their relatives were positive about the quality of care and support in Camilla House.

Who did this inspection

Susan White

1 About the service we inspected

Camilla House is a privately run nursing home and the Provider is Kingdom Homes Ltd. The property is of two-storey construction and is registered to accommodate a maximum of 42 older people with physical and/or mental frailty; 35 of whom may suffer from Dementia.

Two bedrooms are of sufficient size to be offered to couples and/or persons who may choose to share. The home is situated in the village of Auchtertool in Fife.

There are a variety of public rooms and ancillary provision; two internal passenger lifts provide access to the upper floor.

There is a landscaped enclosed garden area to the rear of the property with occasional seating for residents' use. There are car parking facilities to the side of the home.

The Manager is responsible for the day to day running of the home and supervision of staff.

The organisation's Statement of Purpose includes:

"Kingdom Homes ethos remains that quality of life should never be a thing of the past - it will always have a long term future with Kingdom Homes.

We want everything we do in our homes to be driven by the needs, abilities and aspirations of the residents, not by what staff, management or any other group would desire. We are committed to ensuring that the facilities, resources, policies, activities and services of the home remain resident led.

We are committed to achieving our stated aims and objectives and we welcome the scrutiny of our residents and their representatives.

We aim to provide a total range of care in collaboration with all appropriate agencies to meet the overall personal and health care needs and preferences of our residents".

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

Quality of Care and Support - Grade 4 - Good
Quality of Environment - Grade 4 - Good
Quality of Staffing - Grade 4 - Good
Quality of Management and Leadership - Grade 4 - Good

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.careinspectorate.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 medium intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

What we did during the inspection

This report was written following an unannounced inspection of the service on 8 January 2014 between 10am and 1.30pm, on 9 January 2014 between 9am and 5pm. The inspection was carried out by Susan White, Care Inspectorate.

The manager of the care service sent us an annual return and a self assessment form. We talked to the manager, staff in the service and service users during the inspection.

We looked at records and documents during the visit. These included:

- Certificate of registration
- Public liability insurance
- Written risk assessments
- A sample of five care and support plans
- Audits and quality assurance systems
- Information on the office noticeboard

We talked to the manager and senior staff.

We reminded the manager about recent changes to legislation - The Public Services Reform (Scotland) Act 2010 and we discussed the need to update policies and procedures in light of these changes. We explained our Regulatory Support Assessment which is part of our preparation for the inspection visit.

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

What the service has done to meet any requirements we made at our last inspection

The requirement

The providers must make proper provision for the health, welfare and safety of service users. In order to achieve this the providers must:(i) ensure that care plans accurately and clearly reflect all risks and needs, detailing the actions required to minimise or manage risks and to meet needs.(ii) ensure that planned interventions are regularly evaluated for effectiveness. This is in order to comply with: SIS 210/2011 Regulation 4(1) Welfare of users SSI 210/2011 Regulation 5(2)(b) - Personal plans Timescale: within 4 months of receipt of this report

What the service did to meet the requirement

We saw improvements in the quality of the information recorded in personal plans

The requirement is: Met - Within Timescales

What the service has done to meet any recommendations we made at our last inspection

We saw that practice has been changed to meet recommendation 1. Competency assessments are recorded to follow up staff training. Work continues to improve the dependency tool used in the service.

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 Care Inspectorate received a self assessment document from the service provider.

In the self assessment the provider identified what they thought they did well and some areas for development.

The provider should use their self assessment to detail outcome focussed information to show how the work being carried out in the service has resulted in changes and improvements for the residents. The self assessment needs to reflect current practice which can be evidenced. It should demonstrate how the views and opinions of residents and their relatives/carers have been sought and used to inform the assessment and improvement of all aspects of service delivery.

Taking the views of people using the care service into account

People told us that they though the staff were 'very good'.

Through observations we saw that relationships between staff and residents were very positive. Conversations were at a relaxed pace and demonstrated a positive regard for the person.

Taking carers' views into account

Carers said they felt the atmosphere in Camilla House was good and that staff were always welcoming. Visitors thought that their relatives were well looked after.

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: 4 - 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

We found the service was performing at a good level for this statement. We graded the service 4 - good for ensuring the residents and their families were involved in assessing and improving the quality of care and support provided by Camilla House.

We looked at a sample of care and support files. We saw the recent newsletter published by Kingdom Homes. We saw minutes of meetings for relatives, residents and staff.

At the last inspection we asked that the quality of information in the assessment of needs before a resident moved into Camilla House to be improved. At this inspection we looked at three files where we saw the quality of the information was enough to determine and meet the care needs of residents. Reviews of care and support were seen to take place regularly, at least every six months. Families were invited to attend these meetings to review care and support. This helps to ensure that the service hears opinions about the aspects of care and support which are important to the resident.

The newsletter was posted throughout the Home and copies were seen in lounges. Information was positive and photos helped to illustrate the activities shared in the newsletter.

Areas for improvement

We spoke with a nurse about a gap noted in one of the care files inspected. They explained that a diagnosis had not been agreed between medical staff. We advised that where this had an impact on the care strategy for the resident, staff should

prompt medical staff to advise on a treatment approach to meet the healthcare needs of the resident involved.

The manager explained that the activities team had been changed for a few months and this had an impact on the participation of residents in the leisure programme over the winter.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

We found the service was performing at a good level for this statement. We graded the service as 4 - good fo ensuring the health and wellbeing needs were met.

We inspected a sample of five care and support plans. We made observations throughout the inspection. We spoke with four residents and two relatives. We spoke with a nurse and four care staff during the inspection.

We found the notes written in the care plans were nicely written with respect and dignity upheld. Risk assessments were written promptly and reviewed appropriately. In particular we looked at food and fluid records.

We saw that meals taken to rooms were properly managed. Residents told us that the meals were tasty and enjoyed. The cook told us that she offered alternate meals for several residents on a regular basis. She enjoyed making smoothies to add calories to diets where weight loss was an identified risk.

We saw that residents had a high level of support needs including nutrition, pressure care, catheter care, anxiety, risk of falls and the symptoms of dementia.

In the care and support plans we inspected, we saw that staff understood the needs of individual residents and plans were in place to deliver a good standard of care and support. Care staff were attentive and good humoured throughout the visits. Staff could give a good account of how care was delivered for individual residents. For example, one resident had limited vision and staff told us how they delivered care in a manner that took account of this difficulty. This made the resident feel secure.

Areas for improvement

We asked the nurse about advice for treatment of skin breaks. It is good practice that specialist advice from health professionals is sought but we saw that both tissue viability nurse and podiatrist gave advice about the care of one resident. The nurse said they spoke with both professionals and they agreed that they work closely together and advice does not clash. If such a situation should happen, staff would speak with GP.

We observed an incident of assisting a resident to move from wheelchair to chair and the assistance given was poor. We spoke with the manager who agreed that closer monitoring by senior staff would be in place to minimise such incidents.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 4 - Good

Statement 1

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

Service strengths

We found the service was performing at a good level for this statement. We graded the service 4 - good for ensuring the residents and their families were involved in assessing and improving the quality of the environment at Camilla House.

We looked at a sample of care and support files. We saw the recent newsletter published by Kingdom Homes. We saw minutes of meetings for relatives, residents and staff. We made observations throughout the Home.

In the minutes we saw that plans for changes in the decor in public areas of the Home were discussed at meetings. Suggestions from visitors to the service were taken into account when decisions were made.

We saw that bedrooms contained items which were important to the individual. Some residents chose to spend a lot of their day in their room and personal items help to make the room feel more like home.

The newsletter was posted throughout the Home and copies were seen in lounges. Information was positive and photos helped to illustrate the activities shared in the newsletter.

The Home was generally free from clutter and corridors were free from obstructions. This reduced the likelihood of trips and falls making the environment safe for residents.

Areas for improvement

We talked with the manager about ways to help residents to find their way around the Home.

The manager acknowledged the difficulties of reflecting the views of residents who have difficulties in communications.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

We make sure that the environment is safe and service users are protected.

Service strengths

We found the service performed to a good standard for this statement.

We looked at information in care plans, records kept in the service. We spoke with care staff and other staff working in the service, including the cook on duty. We made observations during the period of inspection.

We saw that the manager reviewed all accident and incident reports. This helped her to make changes to care practice to minimise any further accidents. We saw that files had a plan for staff to help residents evacuate the building should a serious incident occur.

We saw that regular health and safety checks were carried out and action taken to ensure the continued safety of residents.

Through observations on the days of inspection we saw that safe practices were carried out by staff in their support for residents.

Regular annual checks for large pieces of equipment such as hoists were seen to be in place. Regular maintenance contracts were also seen to be in place. This ensures that any problems with equipment were attended to promptly so that the care needs of residents continued to be met.

Areas for improvement

We observed one incident of poor moving and handling practice which we discussed with the manager. Staff had recognised their error before we raised it with the manager. The outcome of poor practice can be pain or discomfort for the resident and this is why good techniques are needed in practice.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

Statement 1

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

Service Strengths

We found the service was performing at a good level for this statement.

We spoke with three care staff, nurse on duty, the cook and the manager of the service. We observed practice throughout our visits. We looked at the minutes of staff meetings.

We observed that staff had a good understanding of the needs and interests of individual residents. We saw that all conversations demonstrated respect and good humour. Staff demonstrated genuineness through our visits.

Residents told us 'The staff are very good.'

We saw that relationships between staff and residents were very supportive of each other. The cook told us how staff are attentive for residents who are not enjoying their meal and how alternatives are offered.

Areas for improvement

The manager is working on ways to seek the views of residents and their families and using them to better inform the supervision and appraisal process.

The manager should use examples of outcomes from involving people in their self assessment to demonstrate how change of improvement has been achieved as a result of helping people to get involved and have their say.

Grade awarded for this statement: 4 - 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 told us about training they had attended and how this had helped them to support residents to a good standard.

One of the staff we spoke with was recently recruited to the service. She told us about her induction to her duties and how she worked alongside an experienced carer until her confidence increased. One example of this confidence was in delivering personal care in a sensitive manner.

Areas for improvement

We spoke with the manager about senior carers registration with the Scottish Social Services Council (SSSC). This is important as the recruitment of a new senior carer is agreed.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 4 - Good

Statement 1

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

Service strengths

Please refer to Quality Theme 1, statement 1 for areas of strength which were also relevant to this statement.

Discussions with residents and carers and observations made during the inspection highlighted the accessibility of the manager. People told us they were confident that if they had any concerns they would be listened to and the manager would address the issue raised.

Areas for improvement

Easy read and large print versions of minutes, particularly of residents' meetings would help information to be more accessible to more of the people living in the Home.

The provider was in the process of developing their annual questionnaire to make it more user friendly. We look forward to following this up at the next inspection.

The manager should begin to look at how they evidence and ensure that any changes they have made have the desired effect. This could enhance residents' ownership of the care home and contribute to the service development plans.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Service strengths

We found the service was performing to a good level for this statement.

We took account of minutes of staff meetings. Minutes of meetings with residents and their relatives. We looked at how the manager monitored the performance of the service.

The manager carried out a range of audits within the Home to help assess the quality of the service being delivered to residents. This included audits of residents personal plans, medication systems and any accidents or incidents which happened in the Home. These audits helped the manager to have an overview of how well the service was performing and areas which could be improved.

The provider had a complaints procedure which was on display around the Home. We saw that complaints were documented in line with the provider's procedure and there was evidence that the manager investigated complaints thoroughly.

The manager made notifications to the Care Inspectorate as required under legislation. This gave us confidence that important information was being shared appropriately.

Areas for improvement

The manager continues to work with staff to make sure that all records are of a good standard to aid the audit process.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

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.

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 the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 4 - Good	
Statement 1	4 - Good
Statement 3	4 - Good
Quality of Environment - 4 - Good	
Statement 1	4 - Good
Statement 2	4 - Good
Quality of Staffing - 4 - Good	
Statement 1	4 - Good
Statement 3	4 - Good
Quality of Management and Leadership - 4 - Good	
Statement 1	4 - Good
Statement 4	4 - Good

6 Inspection and grading history

Date	Type	Gradings	
15 May 2013	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate 4 - Good 4 - Good 4 - Good
22 May 2012	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good 4 - Good 5 - Very Good 5 - Very Good
5 Nov 2010	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed Not Assessed Not Assessed

9 Sep 2010	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed Not Assessed 5 - Very Good
11 Feb 2010	Unannounced	Care and support Environment Staffing Management and Leadership	Not Assessed 5 - Very Good Not Assessed 5 - Very Good
5 Aug 2009	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good 5 - Very Good 5 - Very Good
2 Mar 2009	Unannounced	Care and support Environment Staffing Management and Leadership	Not Assessed Not Assessed Not Assessed 4 - Good
16 Sep 2008	Announced	Care and support Environment Staffing Management and Leadership	4 - Good 5 - Very Good 4 - 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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Telephone: 0845 600 9527
Email: enquiries@careinspectorate.com
Web: www.careinspectorate.com