

Care service inspection report

Canderavon House

Care Home Service Adults

34 Queen Street

Stonehouse

Larkhall

ML9 3EE

Telephone: 01698 793454

Type of inspection: Unannounced

Inspection completed on: 31 March 2015



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Service provided by:

South Lanarkshire Council

Service provider number:

SP2003003481

Care service number:

CS2003001335

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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	4	Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership	5	Very Good

What the service does well

Written personal plans were very good - well presented and easy to follow.

We heard some good examples of ways in which the home supported people with dementia and their families.

Staff training was good and most now had a social care qualification.

Relatives and residents we heard from were happy with the quality of care overall.

Parts of the home had been refurbished to a high standard.

What the service could do better

The Council was very aware of the access problems in the home due to the buildings now outdated design and dimensions, and recognised that as residents become frailer the building will no longer be fit for purpose.

Several relatives we heard from were not sure if their relative was encouraged to discuss their concerns and feedback their views, and were also unsure about personal plans and occupancy agreements. The manager was going to explore this with families, in particular those who were newer to the home.

What the service has done since the last inspection

The Council has agreed to keep the Care Inspectorate informed as to how it plans to address problems about the longer term suitability of the building.

The new downstairs dining room/ communal area greatly enhanced the standard of accommodation here and removed the access problems of the former small unit dining rooms.

Plans for converting the original small dining rooms into quiet lounges with tea/ coffee making facilities were underway, with one completed so far.

The home was now able to have two staff in each unit all the time and also had a dedicated night senior on site. The change to centralised dining arrangements had given staff more time to spend with residents.

Conclusion

At recent inspections the most significant issues for this home have been the longer term suitability of the building for the client group and staffing requirements. Staffing had been addressed but we have not received any confirmation of plans for the building. Refurbishments that have taken place have greatly enhanced the standard of accommodation and improved residents quality of life. Grades reflect the overall very good quality of care and progress made, as well as the drawbacks of the building and the need for firm, long-term plans for the accommodation.

1 About the service we inspected

Canderavon House in Stonehouse is a care home for older people. It is owned and managed by South Lanarkshire Council (referred to as the Council throughout this report). The home provides long-term residential care and short stay respite care for up to 35 people. At the time of the inspection, there were 32 residents living here.

The home's stated aims are to 'provide a good quality of life for service users, affording privacy, dignity and choice, in a homely, comfortable and welcoming environment. Independence and individuality are encouraged and service users' rights as citizens are promoted.

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 - Grade 4 - Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - Grade 5 - Very 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 0345 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 inspection took place over the course of one visit in March 2015. We sent the home 20 questionnaires for distribution to residents and 20 for distribution to relatives. We got back 9 completed questionnaires from residents and 11 from relatives. We spoke to the manager and some of the staff on duty, inspected the premises and also looked at a sample of records. (Please see Quality Statements for more information about what these were).

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

1. The Council must keep the Care Inspectorate informed of progress with decision making as regards the upgrading or replacing of this home; and once known must inform the Care Inspectorate what their plans are and what timescales are envisaged.

What the service did to meet the requirement

Please see comments at Quality Statement 2.3

The requirement is: Met - Outwith Timescales

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

In the last report we made one recommendation which the home had progressed

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.

Completed in depth noting strengths and some areas for improvement.

Taking the views of people using the care service into account

The nine residents who completed or were supported to complete a Care Inspectorate questionnaire agreed /strongly agreed that they were happy with the quality of care they received in this home. We have commented on people's answers to specific questions in more detail in the Quality Statements. Overall comments included: "I am delighted with the staff and home"

Taking carers' views into account

The 11 relatives who returned a Care Inspectorate questionnaire agreed that overall they were happy with the quality of care their relative received in this home. We have commented on people's answers to specific questions in more detail in the Quality Statements. Overall comments included

- "In my opinion this is an efficient compassionate and well run home"
- "my relative has always been happy in the home and there are no major concerns"
- "Canderavon is definitely the right place for my relative; all in all a very good and safe place for my relative"

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

We found that this service's performance remained very good in the areas covered by this statement. We concluded this after we heard from residents and relatives, spoke to the manager and looked at a range of records including survey results, residents personal plans and care review reports.

Participation Strategy

As noted in previous reports, South Lanarkshire Council had a clear policy on participation, consultation and involvement. The home was committed to honest and meaningful consultation and tried to involve people with dementia in the process. Most residents who sent back a Care Inspectorate questionnaire agreed that they were encouraged to discuss their views and asked for their opinions and most relatives who sent back a Care Inspectorate questionnaire agreed that they got asked for feedback and ideas.

Surveys and meetings

The home continued to use satisfaction surveys and had involved the family carers group in simplifying the wording of its surveys so that the language used was easy to understand and jargon free. The home continued to hold regular residents meetings and respond to points raised. Since the last inspection the home had sought residents views about mealtimes and menus, and in response to these the home now had a main meal and a dessert at lunchtime followed by soup and a light meal at tea time.

Participation In Support Planning and Reviews

As noted in previous reports, families and residents were involved in care planning

and could also comment on their experience of care in the home at reviews. Files contained paperwork recording involvement in care planning and signed agreement to care plans, as well as a note of who the resident wanted present at their reviews. Most people who sent back a Care Inspectorate questionnaire agreed that their relative had a personal plan which contained information about their care and support needs and detailed their likes, dislikes and preferences

Complaints

Most residents and relatives who sent back a Care Inspectorate questionnaire said they knew about the homes complaints procedures knew they could complain to the Care Inspectorate. The home had a well established key worker system which meant that residents and their relatives had someone they knew and with whom they could discuss any concerns.

Areas for improvement

Participation

Several relatives who sent back a Care Inspectorate questionnaire ticked "don't know" or "not applicable" to questions about their relative being encouraged to discuss their concerns and views, feedback their views and be taken seriously by management. We think this may have been related to their relatives dementia. Two relatives we heard from disagreed about being asked for their ideas and feedback. Also, a few people who sent back a Care Inspectorate questionnaire ticked 'disagree' or 'don't know' in response to the question that their relative having a personal plan which contained information about their care and support needs and also about having an occupancy agreement. We discussed these responses with the manager who was going to explore this with families, in particular those who were newer to the home.

The home had an active residents and family carers group for several years which had recently taken a decision to disband due to limited membership. The manager, in consultation with family carers is looking at new methods of developing direct engagement opportunities.

Complaints Procedures

A few residents and relatives who sent back a Care Inspectorate questionnaire ticked no or don't know in response to the question about the home's complaints procedures and knowing they could complain to the Care Inspectorate. Again we discussed this with the manager who was going to explore this with families

Grade awarded for this statement: 5 - Very 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 that this service's performance remained very good in the areas covered by this statement. We concluded this after we heard from residents and relatives; spoke to the manager and staff; and looked at some residents care plans and information relating to dependency levels.

Residents Personal Files

As noted in previous reports, residents written support plans were very good - well presented and easy for staff, resident or family to follow; with a note of preferences, risks attached to a particular activity, plus a clear description of what staff were expected to do. The manager and staff continued to work on streamlining this paperwork to make it even more straightforward to use.

Legal Arrangements

Residents personal files contained a record of any legal arrangements that were in place such as appointee arrangements, power of attorney or guardianship and DNR orders and also anticipatory care plans. The home also used the Mental Welfare Commission (MWC) Guardianship checklist.

Personal Care

As noted in previous reports, written plans had good detailed information about personal and intimate care needs. Residents looked well cared for with good attention to helping people to look after their appearance. Some relatives we heard from commented on how well staff cared for their relatives appearance.

Eating & Drinking and Meal times

As noted at Quality Statement 1.1, the home had taken on board residents views about mealtimes and menus, and now had a main meal and a dessert at lunchtime followed by soup and a light meal at tea time. Since the last inspection, the dining experience for all the residents had been greatly improved. The home no longer used the small unit dining rooms and residents now had their main meals in a new ground floor dining area which was much closer to the homes kitchen. This did away with the need for heated trolleys and also allowed for much better interaction with catering staff who had a folder of information about individual preferences and dietary needs. Staffing levels and space restrictions at mealtimes were no longer a

problem. Residents and most relatives we heard from agreed that meals were nutritious and took account of any special dietary needs; that people were able to eat and enjoy their food getting help from staff where required and that there were always snacks and hot drinks available.

Mobility and Falls

As noted in previous reports, the incidence of notifiable accidents as a result of falls remained low and staff continued to take appropriate action to minimise risk.

Activities

The home continued to try to achieve a good balance of individual and group activities tailored to people needs and interests. Staff had taken the last activities survey into account when planning the home activities programme and had for instance taken on board suggestions such as having more live entertainment with a visiting company doing a performance the day we visited. All residents and most relatives we heard from agreed that there were frequent social events, entertainment and activities organised that residents can join in if they want to. Comments included: "my relative is encouraged to participate in social events and often does but is not pressured to join in "

Reviews

From records sampled during this visit, we were satisfied that reviews were taking place at least every six months and a record of what was discussed and agreed at the most recent review was available.

Staffing and Dependency Levels

Staffing levels have been an area for improvement and requirements in recent inspection reports had now been met. The Council had made a decision to close one of the homes four units and reduce overall capacity from 47 to 35. They had applied for and been granted a variation to conditions of registration and the homes new staffing agreement now more accurately reflected the minimum number of staff that were required to be on duty should the home be full. The home was now able to have two staff in each unit all the time and now also had a dedicated night senior on site. The change to centralised dining arrangements had freed staff from domestic duties and given them more time to spend with residents. Most residents and relatives we heard from agreed that there were enough trained and skilled staff on duty.

In the last report we made a recommendation about reassessing residents, particularly those who were now more dependent due to increased frailty or advanced dementia to determine whether they would now be classed as in need of nursing care or not. In their action plan the Council advised that while Canderavon was whenever possible a home for life, residents assessed as in need of nursing care had been supported to move to a nursing care home. There were instances of people with more

complex needs being able to live here with the support of care home staff and District Nursing input

Dementia

Staff had been given training in using a particular model of care to support residents with dementia who were experiencing stress and distress, and we read about some good examples of this in practice. Comments from family members included: "my relative who has Alzheimers has been treated with the utmost compassion" and "since coming into the home my relative show more interests in our chats and remembers details from previous visits". We were also aware of other instances when the homes had managed difficult situations sensitively while ensuring that people were protected from harm.

Health Care

The home will soon be able to access the new Hospital at Home Service from mid-April where residents may be offered immediate care for acute medical issues that would normally require hospital admission. Residents and relatives we heard from were confident that the staff met their healthcare needs including arranging to see healthcare professionals and accessing specialist services.

Areas for improvement

Staffing levels and dependency levels

New staff were being recruited and the Council intends to apply for the home capacity to go back up to 47 once these staff are in post. Two relatives we heard from disagreed that there were enough trained and skilled staff on duty and two ticked 'don't know'. We have made no new recommendations or requirements at this time and will review staffing levels at the next inspection.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 4 - Good

Statement 3

The environment allows service users to have as positive a quality of life as possible.

Service strengths

We found that this services performance was good in the areas covered by this statement. We concluded this after we heard from relatives and residents spoke to the manager and staff and saw round the premises.

Location and Gardens

As noted in previous reports, the home was well situated in the centre of Stonehouse, with easy reach of local amenities. It also had a very attractive garden.

Public Rooms

The home had a recently refurbished reception area which was welcoming and comfortable and very tastefully furnished and decorated. Lounges had also all been fully refurbished in the last year. Since the last inspection a new downstairs dining room/ communal area had been created. This room greatly enhanced the standard of accommodation here and removed the access problems of the former small unit dining rooms. It also gave the home improved space for activities and visiting services. A lot of care and attention had gone in the layout and choice of furniture and furnishing. It was one of the nicest dining areas we have seen in a home for older people. On the day we visited it was evident that catering and care staff took real pride in maintaining high standards in this room. Plans for converting the original small dining rooms into quiet lounges with tea/coffee making facilities was underway with one completed so far.

Bedrooms and Bathrooms

As noted in previous reports, all bedrooms were for single occupancy with en-suite toilet and wash hand basin facilities and all recently refurbished again with care and attention paid to the needs of those with dementia such as good natural light ceiling lights and lamps. The homes shower rooms were well equipped with good access.

Housekeeping and laundry

Nearly everyone who sent back a Care Inspectorate questionnaire agreed that the home was clean hygienic and free from smells and that personal property and

clothing were clearly marked and properly cared for. We found the home to be clean and hygienic and we were not aware of any odours on the day we visited

Heating and lighting

Problems with the home's heating system had been resolved since the last inspection. Following an incident caused by a fused lighting unit the Council had replaced these units throughout the building.

Areas for improvement

Design Layout and Accessibility

The standard of the accommodation here has been greatly improved by the refurbishment programme and the dining room access problem had been eliminated. However, the provider was very aware of the access problems in the rest of home due to the buildings now out dated design and dimensions. As stated in the last few reports bedrooms, bathrooms and corridors were too small for staff to safely and easily assist frailer, more dependent residents, especially those who needed aids and equipment. One resident who sent back a Care Inspectorate questionnaire commented on how much they would like a bath or shower in their room. The Council recognised that as residents have become frailer, the building would no longer be fit for purpose. They have now advised of plans for some new builds, but were not yet in a position to tell us what the longer term plans for this home were. In the last report, we made it a requirement for the Council to produce plans for upgrading or replacing this home and inform the Care Inspectorate as to what these plans were. At the time of the visit we had not received any update from the Council. Following discussion with the manager and her line manager we agreed that it would be acceptable to provide us with updates at planned liaison meetings with the Care inspectorate. We have therefore recorded this requirement as met but may review this at the next inspection depending on progress.

Housekeeping

One person who sent back a Care Inspectorate questionnaire said that the home wasn't always free from smells and commented that where this had not been a problem in the past they felt it sometimes was an issue.

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: 5 - Very Good

Statement 3

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

Service strengths

We found that this services performance was very good in the areas covered by this statement. We concluded this after we heard from residents and relatives, spoke to the manager and staff and looked at training and supervision records and staff meeting minutes.

Training & Development

As noted in previous reports, the Council had well established staff development policies and procedures and an extensive programme of training and refresher courses in relevant topics. The Council had a corporate programme to train staff to the appropriate SVQ level required to register with the SSSC, with relevant staff already registered or with an application in progress. Examination of the home's current training plan and records confirmed this. The home had been incorporating the Promoting Excellence framework and related dementia training into its overall plan. Residents and relatives who had sent back a Care Inspectorate questionnaire agreed that staff had the knowledge and training to care for them/ their relative.

Support & Supervision

Records seen confirmed that one to one staff supervision meetings took place regularly, along with an annual performance development review. In response to a recommendation in the last report, the home had now replaced all paper records with electronic ones to ensure that records were always complete and up to date. The home held regular staff meetings in each unit and senior staff also met regularly

Ethos of Respect

Residents and relatives who returned a Care Inspectorate questionnaire agreed that staff treated people politely at all times; respected their privacy and their individuality. Comments included: "my relatives carer is very good to her as are other staff members " and "visitors have commented on the efficiency and friendliness of staff who now recognise most visitors and family"

We were satisfied that the home had correctly managed any concerns about alleged staff misconduct.

Areas for improvement

We have identified no new areas for improvement and the home should maintain and build on its present high standards.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 – Very Good

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 that this service's performance remained very good in the areas covered by this statement. We concluded this after we spoke to the manager and looked at a sample of in-house audits.

Quality Improvement Policy

As noted in previous reports, the Council had a quality improvement policy and had a range of ways to monitor the quality of its care homes.

Corporate

Corporate tools were used to monitor progress with meeting targets, such as for reviews and staff development and to evaluate different areas of practice in social work across departments. Health and safety and fire audits were also carried out annually by the local authority,

In House

Consultations took place involving residents, relatives, staff and stakeholders such as health professionals and social work personnel. Monthly manager reports were required on a range of topics, including critical health matters such as the incidence of falls and injuries, significant weight loss and pressure wounds. The home carried out various in-house audits of care plans, accident records, medication, activities, catering and cleaning with action plans and timescales. The format for auditing residents files ensured that staff were clear about what they were expected to check. The home also did an in-depth analysis of where falls occurred in its audit of accidents, so it could use this information to inform risk assessments and practice. Findings from visits by external agencies like Environmental Services also informed quality.

The home had introduced its own monthly in-house log of all concerns and complaints. This helped the home to keep track of areas of concern and use any information about trends as part of overall quality assurance.

Areas for improvement

We have identified no new areas for improvement at this time. The home should maintain and build on present good practice.

Grade awarded for this statement: 5 - Very 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

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 - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Environment - 4 - Good	
Statement 3	4 - Good
Quality of Staffing - 5 - Very Good	
Statement 3	5 - Very Good
Quality of Management and Leadership - 5 - Very Good	
Statement 4	5 - Very Good

6 Inspection and grading history

Date	Type	Gradings
28 Mar 2014	Unannounced	Care and support 5 - Very Good Environment 4 - Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
1 Aug 2013	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing Not Assessed Management and Leadership 5 - Very Good
11 Mar 2013	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
10 Jul 2012	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good

Inspection report continued

		Management and Leadership	4 - Good
12 Oct 2010	Unannounced	Care and support	4 - Good
		Environment	Not Assessed
		Staffing	Not Assessed
		Management and Leadership	Not Assessed
17 May 2010	Announced	Care and support	4 - Good
		Environment	Not Assessed
		Staffing	Not Assessed
		Management and Leadership	4 - Good
10 Feb 2010	Announced	Care and support	5 - Very Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and Leadership	4 - Good
24 Aug 2009	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and Leadership	4 - Good
19 Mar 2009	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and Leadership	4 - Good
20 Oct 2008	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and Leadership	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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本出版品有其他格式和其他語言備索。

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