

Care service inspection report

Full inspection

Redmill Nursing Home Care Home Service

Lady Court
East Whitburn
Bathgate

Service provided by: HC-One Limited

Service provider number: SP2011011682

Care service number: CS2011300850

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care 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	4	Good
Quality of environment	4	Good
Quality of staffing	5	Very Good
Quality of management and leadership	4	Good

What the service does well

The service provided a caring and safe environment where service users were valued, and supported by a stable core staff team who knew service users' needs well.

We received some very positive feedback from people who used the service and their relatives about the care and support they received.

The service had improved the way in which it audits the environment from the new manager taking a daily account during his walk round, to detailed action plans from the maintenance officer, this had resulted in a phased approach to improving the internal environment.

What the service could do better

The service should continue to review and improve the environment in respect of corridors and bedroom doors to ensure that the environment allows service users to have a positive quality of life as possible.

The service should continue to review and improve the garden areas.

What the service has done since the last inspection

A new manager was in place and was focussing on getting to know people who used the service and their relatives and also to identify what areas of work they needed to prioritise in order to improve the service provided.

The service has recently introduced a self-assessment which looks at the service provided. There are five themes- Safe, Effective, Caring, Responsive and well-led. There are five key assessment areas, Management, Resident well-being, environment, Eating and Drinking and Medicines Management.

This assessment gives the registered manager the opportunity to look at important aspects of the home and create an action plan that will develop the service in a way that can be measured.

Conclusion

We found the service was working at a good level with some examples of very good interaction and support to service users.

Service users and relatives spoke very highly of the service provided.

The service continued to make improvements to the environment, although the timescales for completion will have to be reviewed.

1 About the service we inspected

Redmill Nursing Home (referred to in the report as "the service") is registered with Social Care and Social Work Improvement Scotland (the Care Inspectorate) to provide a care service to 68 older people. The service is owned and managed by HC - One Limited (referred to in the report as "the provider"). The service is situated on the outskirts of East Whitburn adjacent to a small private housing estate.

The home is a purpose-built, single storey building, situated in private grounds with a central courtyard garden. All service users' rooms are single with en-suite facilities.

The home is divided into two units, Forth and Clyde, each with its own entrance from the main hallway. Each unit has its own sitting rooms, dining room, toilets and bathrooms. There is a designated smoking area.

There are separate kitchen, laundry, staff rooms, hairdresser, office and administration accommodation within the home.

Care is provided by a team of registered nurses and care staff 24 hour per day.

Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or

orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

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 5 - Very 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 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 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

We wrote this report following an unannounced inspection. This was carried out by two inspectors. The inspection took place on 1 July 2015 between 10am and 5pm. It continued the following day, Thursday 2 July 2015 from 7.45am until 5pm. We gave feedback to the Registered Manager, Assistant Operations Director, Regional Support Manager, and the Depute Manager on 2 July 2015

As part of the inspection, we took account of the completed annual return and self-assessment forms that we asked the provider to complete and submit to us.

We sent 25 care standards questionnaires to the manager to distribute to residents. Eight residents returned a completed questionnaire. We also sent 30 care standards questionnaires to the manager to distribute to relatives and carers. Relatives and carers returned three completed questionnaires before the inspection.

We also asked the manager to give out 30 questionnaires to staff and we received six completed questionnaires.

Throughout the inspection process we obtained various pieces of evidence from speaking to the following staff and people who used the service.

- Three residents
- Three relatives
- The registered manager
- The Depute Manager
- Registered Nurses

- Care Assistants
- Two Activity coordinators
- Three Catering staff
- Housekeeping staff
- Operations Director
- Maintenance personnel
- Administrator.

To support the inspection process we also looked at the following documents:

- Insurance and registration certificates
- Accident and incident reports
- Complaints folder
- 13 Care plans
- Training planner and records
- Staff supervision records
- The service development plan
- Minutes of resident meetings
- Minutes of carer meetings
- Minutes of staff meetings
- Questionnaires
- Maintenance records
- Environmental improvement plan
- Shift handover records
- Medication recording systems.

We used the Short Observational Framework for Inspection (SOFI 2) to directly observe the experience and outcomes of people who were unable to tell us their views.

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.firescotland.gov.uk

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 fully completed self-assessment document from the provider. We were satisfied with the way the provider completed this and with the relevant information included for each heading that we grade services under.

The provider identified what it thought the service did well, some areas for development and any changes it had planned.

Taking the views of people using the care service into account

These are reflected throughout the statements of the report.

Taking carers' views into account

These are reflected throughout the statements of the report.

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

After we reviewed the information we gathered during the inspection process, we decided that the service was performing in this quality statement at a very good level.

The service used a variety of tools to gain feedback from people who used the service and their relatives, for example, service user satisfaction surveys, and they had also recently introduced a touch screen system whereby service users, relatives, and staff could give their feedback on their own experience.

We will review this at the next inspection to gauge the impact on the service.

During our inspection we attended a residents meeting which gave valuable feedback to the service on how improvements could be made, this included, trips out, activities, and summer menu planning.

It was noted at the meeting that service users had to choose their meals the day before, but could always change their minds the next day if they wanted, giving them flexibility and choice of meals.

We found that reviews of care were carried out regularly at six monthly intervals. These involved the service user and their family where possible.

Previous inspections had noted that the service was working towards the development of a dementia support group. This group had since met, and is driven by relatives providing opportunities for support, and building relationships.

The service promoted various activities, for example, barge trips, and quizzes, which were advertised throughout the home, this was supported by two activity co-ordinators who were very knowledgeable in respect of service users likes and dislikes within the home.

We discussed the activities with one service user and their relative, the service user stated "we had a great time at the safari park a few weeks ago; it was nice to get out".

A relative we met with stated "I never have a problem communicating my mum's needs to the staff, just recently we wanted to decorate her bedroom in a style that suited her, and they were very supportive, now mum has a little home from home, she is much more settled now".

Another service user stated "my room is nice, the food is nice, but sometimes not much to do, but if the weather is nice we always use the garden, I did enjoy the barge trips".

Throughout the inspection we witnessed some very good interaction and engagement with service users, for example, reminiscing about the local area, and the changes that have happened over the years, to discussing current events from newspapers and magazines.

Areas for improvement

The service should further develop the dementia support group as people move on; others should be encouraged to join.

The service should demonstrate a clearer commitment in working through any action plans and build on ways of involving service users, carers, staff and stakeholders in assessing the quality of the service provided.

Grade

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

After we reviewed the information we gathered during the inspection process, we decided that the service was performing in this quality statement at a good level.

Throughout the inspection we found evidence that service user care plans were person centred, they included information about the service user in respect of their like and dislikes, there was evidence of specific detail contained within the life story book, which was drawn through from a comprehensive pre-assessment process.

The service used various assessment tools promoting a consistent level of care, which included M.U.S.T. (malnutrition universal screening tool), fluid balance and weight charts, oral healthcare, and risk assessments for moving and handling, risk of falls, and skin integrity.

During our observations we witnessed staff positively engaging with service users whilst using hoists, the service users appeared relaxed and confident with the staff.

We found that staff were aware of fortifying food for service users, we evidenced service users being offered additional milk with their meals, or home baking in between meals, we didn't however evidence this from catering staff whom agreed that the process they used was not very person centred, as most food that left the kitchen was fortified with additional butter and cream.

At a previous inspection it was noted that there were a number of "as required" medication protocols out of date, during our inspection we have found that all medication protocols are in place and up to date.

Areas for improvement

The service should ensure that when there is a change to a service user's support by an external professional, they must transfer that information to all aspects of the persons care plan which are affected.

The management team should ensure that all care and catering staff have a shared understanding of the benefits of fortified food, ensuring a person centred approach to the service users care planning.

See Recommendation 1.

Grade

4 - Good

Number of requirements - 0

Recommendations

Number of recommendations - 1

1. The service should ensure that catering staff are aware of which service user users require a fortified diet, ensuring that they are considerate of the health and well-being of all service users, using a person centred approach.

NCS 13 Care Homes for Older People - Eating well. Your meals are varied and nutritious. They reflect your food preferences and any special dietary needs. They are well prepared and cooked and attractively presented.

Quality Theme 2: Quality of environment

Grade awarded for this theme: 4 - Good

Statement 2

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

Service strengths

After we reviewed the information we gathered during the inspection process, we decided that the service was performing in this quality statement at a good level.

Throughout our inspection we found the home to be mostly clean and free from obvious sources of danger.

The service has a key pad door entry system which provided security for the people using the service.

We found that all service users had profile beds, we discussed this with two care staff who told us "we find that service users really benefit from these beds, it helps to reduce fluid, or pressure in their legs, and they can adjust them themselves when needed".

We found that some service users required a pressure mattress to support their skin integrity, and these were in place, and maintained by in-house maintenance.

We also found that there appeared to be sufficient staff to meet the needs of the people using the service.

At a previous inspection the service received the following requirement, "the provider must ensure that environmental checks are consistently effective in identifying possible sources of danger and possible deficits in care practices".

We found during our inspection that the service had appropriate environmental checks in place to manage possible sources of danger. The manager carries out a daily walk round of the service, and has developed a maintenance log system which is managed daily by the maintenance officer. The service carries out a comprehensive health and safety audit every three months with appropriate actions taken for identified issues.

This ensured that service users felt safe when accessing any areas within the environment.

Areas for improvement

It was noted throughout the inspection that there were some offensive odours within two bathroom areas; the manager explained that they had some work done in respect of the drainage system and it would be monitored daily.

We discussed with the manager about appropriate signage to assist service users to locate their own areas, some of the corridors and doors were in the middle of a refurbishment.

We will follow this up at the next inspection.

We discussed with staff the appropriate usage of the space within the laundry room, the service should look to clearly define a clean area and a dirty area with appropriate containers to distinguish from clean and dirty laundry.

Grade

4 - Good

Number of requirements - 0

Number of recommendations - 0

Statement 3

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

Service strengths

After we reviewed the information we gathered during the inspection process, we decided that the service was performing in this quality statement at a good level.

We found that service users had access to a choice of newly refurbished lounges and dining areas, although there was still work to be done in some corridors.

Service users had access to the services minibus for outings, one service user that we met with stated "I did enjoy the trip to the safari park, getting out in the minibus was great"

Service users had access to a secure garden area, which was being re-developed during our inspection with the addition of a pergola type wooden structure being installed in order to protect service users from the sun, one service user stated "I can't wait until it's all finished it will be lovely, just in time for the summer"

We met with a service user who stated "I didn't like the colour of my bedroom, so we changed it, my daughter spoke with the manager and they were fine with me changing the colour, looks more like home now".

Throughout the inspection we found evidence that service users bedrooms were personalised to their own particular likes.

Areas for improvement

We met with a service user's relative who stated "the entrance area has improved, but the décor is a bit tired looking"

The service should ensure that it continues with the refurbishment of corridors and bedroom doors, the service should review the timescales for completion in order that the service users can benefit from further refurbishment sooner.

Grade

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 2

"We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff."

Service strengths

Following the review of the information we gathered during the inspection process, we decided that the service was performing in this quality statement at a very good level. The outcomes for people using the service were of a very high quality.

We examined a number of staff personnel files, all staff who were required to be registered with the Nursing & Midwifery Council had copies of their registration and Personal Identification Numbers in place.

Staff who were required to be registered with the Scottish Social Services Council had done so.

The service had a safer recruitment procedure in place which required all potential staff to complete a robust application process, including PVG (Protection of Vulnerable Groups) checking and appropriate references given; this ensured the safety and well-being of people who used the service.

We found that all new staff had undertaken mandatory training via e learning within their first three months of employment, and were supernumerary for the first two weeks of service.

One staff member we met with stated "I have been here for just over one year, I was given a mentor who gave me advice and support during my induction, and I am very much up to date with my training, we have a training room which

gives us access to our e learning account and we can update our skills when needed should a service users support needs change".

We found that staff had regular supervisions sessions and annual appraisals; we evidenced this from the supervision planner.

Staff that we met with stated that they could discuss any issues in respect of service users with their line manager and any appropriate actions were taken, an example of this was given "I met with my supervisor and we discussed the service users in my group, one service user would have benefited from an "airflow" mattress to protect the integrity of their skin, once the service user had been assessed an appropriate mattress was purchased for them. We spoke with the service users key staff who stated " they were so much more comfortable".

Areas for improvement

The service should ensure that all staff have access to policies and procedures which aid their learning as they cannot always get on line to view them.

Grade

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

After we reviewed the information we gathered during the inspection process, we decided that the service was performing in this quality statement at a very good level.

Throughout the inspection process we saw very good interaction between service users and staff; it was friendly, and respectful.

We found that staff had regular supervision sessions and annual appraisals; we evidenced this from the supervision planner.

Staff that we met with stated that they could discuss any issues in respect of service users with their line manager and any appropriate actions were taken, an example of this was given "I met with my supervisor and we discussed the service users in my group, one service user would have benefited from an "airflow" mattress to protect the integrity of their skin, once the service user had been assessed an appropriate mattress was purchased for them. We spoke with the service users key staff who stated " they were so much more comfortable".

The service had a dedicated training room which allowed staff to update their training which included:

- Emergency procedures
- Fire drills
- Food safety in care
- In safe hands - health and Safety
- Infection control
- Manual Handling
- Safeguarding

- Safer people handling
- Understanding equality and diversity.

We met with one staff member who stated "I use the training room to keep my skills up to date".

The service has now installed sufficient and appropriate equipment which allows all staff to complete their online training.

We met with the manager and senior operational managers to discuss the effectiveness of e learning and how the service could measure a person's competence on completion of an e learning course, the manager stated "Our staff are provided with on-going opportunities for learning and development to ensure that the care we provide is not only the kindest possible, but is also delivered from a sound, professional knowledge base".

During the inspection process we witnessed staff interacting with service users, they appeared motivated and joined in with the singing activity, and dominoes, we clearly saw that this allowed service users to participate and join in with each other creating a very socially interactive environment.

Areas for improvement

The service would benefit from ensuring that staff have the relevant refresher dates in place for mandatory training, for example, infection control training.

Grade

5 - Very 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 2

"We involve our workforce in determining the direction and future objectives of the service."

Service strengths

After we reviewed the information we gathered during the inspection process, we decided that the service was performing in this quality statement at a good level.

We had various discussions with staff, including the housekeeping and catering staff, who gave their views on their ability to determine the future direction of the service.

Mostly, staff felt that their ideas and views were taken on board with the new management team in place, but this was not always the case in the past, staff that we met with stated "we used to take our ideas for the service to the manager, but things were not always acted upon, we have a new management team in place now and things appear to be getting better"

Staff also felt comfortable in raising any issues that occurred whilst carrying out their role, for example, one staff member felt that an airflow bed would support a service user better, this was discussed with senior staff and the appropriate resources were purchased.

This allowed the staff the confidence to support the service user and ensure that their health and wellbeing was being maintained.

Staff that we met discussed the new touchscreen feedback system, they were looking forward to using it in order to get more of their ideas heard and

possibly taken forward.

We found that staff meetings were taking place with minutes posted on staff notice boards, there were clearly identified actions and views from staff in respect of new policies and plans for the development of the service.

Areas for improvement

The service should ensure that all staff have access to policies and procedures which aid their learning as they cannot always get on line to view them.

The service should make staff aware of the results of the staff survey carried out and any appropriate actions being taken.

The service should encourage senior staff to take the lead in staff meetings in order to promote greater ownership of the issues discussed and actions required.

Grade

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

After we reviewed the information we gathered during the inspection process, we decided that the service was performing in this quality statement at a good level.

We found that various audits were carried out by the manager and the depute, some examples of these include:

- Health and Safety Audits
- Accident and Incidents
- Care Planning
- Service user review meetings
- Portable appliance testing.

There had been regular staff meetings and minutes are displayed on dedicated staff notice boards.

During our inspection we attended a residents meeting which gave valuable feedback to the service on how improvements could be made, this included, trips out, activities, and summer menu planning.

Areas for improvement

Some residents and relatives that we spoke with were not sure if they had met the new manager.

We acknowledged that the current manager had not been in post long and that they were still becoming acquainted with the home and getting to know the people living there, their relatives and the staff team.

The service should demonstrate a commitment to continue to involve the service users, relatives, and staff in use quality assurance systems and processes; we will review this at a future inspection.

Staff had discussed with us during the inspection that they would like to take part in monitoring the lunchtime experience to provide reflective practice, the service should explore this further.

We could see from the health and safety reports that whilst audits were being carried out, they appeared to be more focusing on compliance.

The service should ensure that all audits carried out have a full action plan attached detailing the issues that have been found, the proposed action to take, completion dates for actions carried out, and any relevant review dates.

Grade

4 - Good

Number of requirements - 0

Number of recommendations - 0

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

Previous requirements

1. The provider must ensure that environmental checks are consistently effective in identifying possible sources of danger and possible deficits in care practices.

This is in order to comply with SSI 2011 No'210 Regulations 4(1)(a) and 10(1) Requirements concerning health and welfare and fitness of premises.

Timescale: By 31 January 2015.

This requirement was made on 20 November 2014

The service has introduced a maintenance checking system which is monitored by the maintenance officer and the manager on a daily basis. The manager carries out a daily walk round of the service ensuring that there are no possible dangers which would affect the people using the service.

The provider has initiated a programme of refurbishment which has saw new furniture, flooring, and soft fabrics purchased for the lounges and dining areas.

Met - Outwith Timescales

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

Previous recommendations

There are no outstanding recommendations.

6 Complaints

The complaint is still live and sits with the Care Inspectorate Complaints Department

7 Enforcements

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

8 Additional Information

No additional information recorded.

9 Inspection and grading history

Date	Type	Gradings
20 Nov 2014	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership 4 - Good
10 Jan 2014	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership 4 - Good
23 Jan 2013	Unannounced	Care and support Not Assessed Environment Not Assessed Staffing Not Assessed Management and Leadership 4 - Good
7 Nov 2012	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership Not Assessed
9 Feb 2012	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership 4 - Good

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Tha am foillseachadh seo ri fhaighinn ann an cruthannan is c?nain eile ma nithear iartras.

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