

Care service inspection report

Full inspection

St. Davids Care Home Care Home Service

40 Glamis Road Forfar



Service provided by: St. Davids Care (Forfar) Limited

Service provider number: SP2005951138

Care service number: CS2005105557

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 6 Excellent

Quality of environment 6 Excellent

Quality of staffing 6 Excellent

Quality of management and leadership 6 Excellent

What the service does well

St David's continues to provide a very warm and friendly environment, with a strong emphasis on living in a 'real home from home' where residents can feel valued and are involved in daily life. The service excels in meeting the health and wellbeing needs of the residents who live there. The provision of meaningful daily living tasks contributes significantly to these achievements.

What the service could do better

The use of the 'Inspiring action' checklist has provided the management team with a focus on where the service could improve. One area identified by the service that could be improved was staff engagement with residents in the later stages of dementia.

What the service has done since the last inspection

The service has made big changes to the environment since the last inspection. This was the result of the 'butterfly training' that the staff team had completed. The introduction of two more distinct living/dining areas means that the space within the service is used more creatively to meet the needs of residents who are in differing stages of dementia.

Conclusion

St David's is a service of exceptional quality which continues to provide a real person centred approach to care. There continues to be a very strong emphasis on participation, consultation and involvement in the day to day running of the home. The owner, manager and staff team are to be commended on the amount of work they have done over the past year that ensures a very high level of quality.

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

St David's Care Home is a privately owned care home in Forfar and is registered to provide care to a maximum of 22 older people. The service prides itself on its high quality care and person centred approach to care.

The accommodation is provided over two floors. Residents have individual rooms and all but two have en- suite facilities. Public areas within the home include two lounge/dining areas, sun lounge and attractive garden area to the rear of the property.

The home is ideally situated for access to local community resources, such as the local shops.

The services information brochure states the following;

'At St David's we believe that as a persons dementia progresses and their ability to make decisions deteriorate, they go from being 'thinking' beings to 'feelings' beings. Most of their decisions and communications are based around their present feelings and their sense of reality. In the home we try hard to 'jump into the bubble', their world, and connect with their present feelings, interpret their words or communications, regardless of how irrational these may seem to us. No one would choose to have anxiety, stress and fear or live in a chaotic world so we try hard to create a home and offer care which is calming and makes sense'.

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 6 - Excellent
Quality of environment - Grade 6 - Excellent
Quality of staffing - Grade 6 - Excellent
Quality of management and leadership - Grade 6 - Excellent

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

This report was written following an unannounced inspection that took place on 17 July and 17 August 2015 by an Inspector.

In this inspection evidence was gathered from various sources, including the relevant sections of policies, procedures, records and other documents, including;

- evidence from the service's most recent self assessment
- personal plans of people who use the service
- training records
- health and safety records
- accident and incident records
- complaints records
- Public Liability Insurance Certificate
- Certificate of registration
- Schedule of staffing
- questionnaires that had been requested, filled in and returned to the care service from people who use the service, their relatives or advocates and staff members
- discussions with various people, including:
 - the manager
 - care staff
 - the people who use the service
 - relatives and carers of people who use the service
- observing how staff work
- examining equipment and the environment

We used the Short Observational Framework for Inspection (SOFI2) to directly observe the experience and outcomes for people who were unable to tell us their views

- On this inspection we used SOFI2 to observe the breakfast time experience of two people.

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 service provider. We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each of the headings that we grade them under.

The service provider identified what they thought they did well, some areas for development and any changes they had planned. The service provider told us how the people who used the care service had taken part in the self assessment process.

Taking the views of people using the care service into account

The views of people who used the service were not sought on a formal basis. We chatted with two residents during our unannounced visits. We also sat in the lounge area for a period during the morning and watched the breakfast time experience. Residents were seen to be very relaxed and settled and engaged with staff in an extremely positive and meaningful way. One resident told us that she liked having 'chores' to do because it kept her 'mind ticking over'. A resident also told us that 'the meals are very good here which is just as well as meal times are very important to me'

Taking carers' views into account

We received four questionnaires that had been completed and returned to us. All those who had replied indicated a very high level of satisfaction with the service provided to their relatives.

Written comments in the questionnaires included the following;

'Person centred practice can be seen throughout the environment'

'Well staffed on each shift'

'Plenty of activity happening for individuals'

'Good banter can be heard between staff and residents'

'The building would welcome some refurbishing and repairing although I fully understand this would be very costly'.

'I am very happy about the standard of care and mental stimulation received by my relative. Standard and variety of menus is very good and alternatives are always available. Although I have clearly marked all items of clothing, several items have gone missing never to be found again. Some items have been located in someone elses room'

'Staff are very friendly, helpful and welcoming always'

'There is a good buzz about the environment'

'Staff are working hard at getting interactions and the environment just right for people with dementia. There's lots of things needing fixed around the building'.

We discussed some of the issues raised in these comments with the manager and owner. We were satisfied that they had listened to these and had taken action to address them where possible to do so. We did not come across any outstanding repairs that required attention.

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: 6 - Excellent

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 the service had an excellent level of performance in relation to this statement.

A written participation strategy was seen to be in place. This provided a framework upon which the service based their practice.

There continued to be evidence that the service consistently and proactively promoted resident and carer involvement. A wide range of methods were used and residents were supported so that they could give their views, make suggestions and influence service development.

The services brochure stated the following;

'From our experience, the ability of older people to maintain the skills to do things for themselves offer significant advantages, particularly for those with dementia. The benefits from improved health, self esteem and increased confidence are obvious and ultimately enable people to continue life as they know it'. This approach to engagement and involving residents was exactly what we observed to take place during our unannounced visits.

We were provided with an exemplary range of evidence that clearly demonstrated how creative the service had been.

Since the last inspection the service had continued to assess and further develop using the 'Inspiring Action' checklist which had been developed by 'dementia care matters'.

We found that there was significant involvement of residents and relatives where possible and practicable to do so. The service had acknowledged that they needed to examine future ways of how to seek feedback from residents with a greater degree of short term memory loss then residents they had cared for previously.

A new framework model which had been developed by dementia care matters had brought about new models of participation for residents, relatives and staff.

Residents participated in home life through active engagement such as meal preparation, helping with laundry tasks such as folding clean items and room tidying. We were very impressed to see that residents levels of well and ill being were monitored to measure their levels of satisfaction.

Positive social interactions were also measured through observations of staff interaction with residents. We saw that many opportunities for meaningful interactions such as setting tables, placing napkins on the table were created. This gave residents an increased sense of pride and staff were seen to provide compliments which also promoted a great sense of achievement.

Further opportunities for residents to be part of every day life included the baking and preparation of a regular afternoon tea. We saw some residents make scones and sausage rolls for tea that was to be served in the afternoon. This was a regular occurrence that happened every couple of weeks and was enjoyed by everyone.

The external garden provided a very welcoming and stimulating area, there was a bowling green which some residents liked to mow, a beach area with an upturned boat, space that was safe to wander, hanging baskets and a plot in which fruit and veg were growing.

Monthly relative forums were held. These provided an opportunity for relatives to be consulted and informed about the changes that were taking place within the service. We also saw that relatives and friends were able to visit at any time. They were encouraged by the staff team to support their relatives in activities such as;

assisting with beauty care such as applying nail polish and setting hair men shaving their fathers face watering plants together going for a walk together helping with a life story book joining others for a meal taking someone for a drive in the car.

We continued to be very impressed with the way in which the staff team encouraged and promoted independence. It was recognised that this approach was not for everyone but it was also acknowledged that some residents took pride in the every day tasks they carried out.

In summary we found that participation and meaningful involvement was built into everyday care practices. The excellent outcomes that we identified were a measure of how well the service engaged people on the activities of daily living.

Areas for improvement

The service should continue to promote participation and engagement in order to maintain the excellent standard identified in this area.

The following area for improvement was identified in the completed self assessment that was submitted by the service;

'We feel that the current resident population is significantly different from that of a few years ago. To participate fully they need greater staff support and increased staff ratios. This however is not likely to be achieved without a proper level of funding. To achieve person centred care, the ratio should be 1:4'. We acknowledged this area for improvement. The challenges that faced the service in relation to the delivery of real person centred care were discussed with the manager and the owner. We saw that the service managed to achieve this through flexible staffing hours.

Grade

6 - Excellent

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 the service had an excellent level of performance in relation to this statement.

We continued to be overwhelmed by the extremely positive outcomes that we saw during the two unannounced inspection visits. The service felt and was operated like a 'real home from home' for the residents who lived there.

We examined a sample of personal plans and found that these had been further developed since the last inspection. A more positive approach to care had been adapted and we saw that there was a focus on supporting what residents could do for themselves rather than what they could not do. The plans that we looked at contained a range of detailed information that provided a very clear picture of the residents support needs. We also saw that a life history had been developed which included photographs that told a story about residents lives and family which gave you a real sense of who the person was. This supported a real person centred approach to care where each resident was treated as an individual by a staff team who were very knowledgeable about each residents care needs and life story.

Care reviews were seen to be held every six months. We were very impressed with the reports that had been developed and produced by the service. These reports titled 'well-being' and 'ill-being' provided an in-depth summary of each residents progress. Information had been gathered through regular observations of staff care practices and interactions with residents.

Excellent relationships between the service and the local primary healthcare team continued. This meant that any health and well-being needs that were identified by the service were addressed. We saw that professionals such as the district nurse visited as and when required and was welcomed as part of the extended team.

We examined Medication Administration Records (MARs) and found these to be in very good order. This supported the safe medication administration practices that we saw during our visits. We observed medication being given to residents in a very discreet and respectful manner. The service continues to receive excellent support from the local pharmacy who provided support, advice and training on a regular basis. Well managed medication systems meant that residents symptoms were very well managed and any healthcare conditions that were present were treated timeously.

We sat for a period in the morning and watched breakfast time. We saw that the service continued to provide a very warm and homely experience for residents during this time. As residents entered the room they were offered a cup of tea or coffee and their daily newspaper. Staff were available to provide assistance with eating and drinking if help was needed. Nothing was seen to be too much trouble for staff and we were particularly impressed with the meaningful conversations that were taking place between staff and residents.

The range of meaningful activities provided by the service contributed to residents sense of well-being. One resident told us that she enjoyed doing tasks such as folding the clean laundry because 'it keeps my mind ticking over'.

In summary we found that the service continued to provide an exceptionally high quality of care and support to the residents who lived there.

Areas for improvement

The service should continue to monitor, review and evaluate the excellent practices that have been identified in this statement.

Grade

6 - Excellent

Number of requirements - 0

Number of recommendations - 0

Quality Theme 2: Quality of environment

Grade awarded for this theme: 6 - Excellent

Statement 3

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

Service strengths

We found that the service had an excellent level of performance in relation to this statement.

The services brochure stated the following: 'We are different to homes that have "hotel like" surroundings, St David's is a place where you can kick off your shoes and put your feet up, a place where you can be as busy or as relaxed as you wish. We are a traditional home with furnishings familiar to an elderly persons home that includes lots of stimulating and memorable items spread around the lounges. We like St David's to be treated as a home and not a health care unit'. During our unannounced visits, this is exactly what we found.

In January of this year, the service decided to make changes to the environment. This was in response to the 'Butterfly' training that had been carried out by the staff team. A compatibility study was completed to assess which areas of the service residents would be best placed. As a result, the lounge areas were split into two smaller lounge/dining areas. These were seen to be very homely. One lounge area had a television and comfy lounge chairs. This lounge was seen to generally be the busiest room, where residents carried out domestic chores and watched films on the television.

The other lounge area was a quieter space that provided opportunities for one to one time with less noise and distractions. It was designed primarily to stimulate the senses of residents who experienced the later stages of dementia. These changes promoted a more person centred approach to daily living.

We saw that there were items available throughout the service for residents to rummage through and use. Examples of this included a desk with items on it such as pens, reading glasses and newspapers. In another area we saw some piles of washed laundry that was ready to be folded and also a pile of coat hangers that needed to be untangled. A singing corridor had also been developed where words and song came to life as they were displayed on the walls

A safe outdoor space was also available for residents to use. The rear garden area had a range of features which included a bowling lawn, an area for drying washing, a patio area and a beach area with an upturned boat. We saw that residents were able to go outside any time they wanted to and staff were very proactive in prompting residents.

We also saw that staff sat and ate their meals with residents which further enhanced the 'homely' feel that the service had. It was really nice to see staff and residents share a table and chat over a meal. To make sure that the environment was made as homely as possible, the staff team had also made the decision to stop the use of trolleys for serving drinks and snacks. We saw that these were served individually to residents.

It was very clear that the whole philosophy of the service was one where a 'home from home' environment was provided as far as possible. This meant that there were no strict routines but instead a relaxed and go with the flow environment had been created. We saw that this had a very calming and assuring affect on residents who lived there.

Areas for improvement

The service should continue to review and assess the excellent level of practice identified in this statement.

The following area for improvement was identified in the completed self assessment;

'To continue to provide a homely and stimulating environment'.

We will be keen to see how the service can further develop the very homely environment that had already been achieved and will follow this up at the next unannounced inspection.

Grade

6 - Excellent

Number of requirements - 0 Number of recommendations - 0

Statement 4

"The accommodation we provide ensures that the privacy of service users is respected."

Service strengths

We found that the service had an excellent level of performance in relation to this statement.

Observations of staff care practices and inspection of communal areas found that the privacy of residents was respected at all times. This included the following;

We saw that staff knocked on residents bedroom doors before entering. Sensitive discussions between staff and residents were carried out in private and very discreetly. This was also the case for any discussions that took place between staff. This demonstrated that the staff team were very aware of the need to ensure that residents privacy was protected and respected at all times.

The service had been creative about making private areas that could be used for residents and their visitors to meet if they wished to have some privacy. Two lounges, a porch or use of the residents room were all available to use as and when needed.

Systems were in place for the safe management of residents personal mail. We also found that the service did not manage residents finances but that a process was in place to manage petty cash expenditure for residents sundries. There was also a great awareness of the role and remit of residents Power of Attorney where there was one in place.

Confidential information was seen to be stored securely within the office area in lockable filing cabinets. We did not find any personal information lying about in communal areas or displayed on noticeboards. This demonstrated an awareness by staff of the need to ensure that residents information was treated in confidence and not shared with people who did not need to know.

We saw that the privacy and choice of residents was also respected. Residents were able to choose for themselves how much they wanted to participate, where some residents preferred more sociable activities, others preferred to sit in a quiet spot and read a book or watch the world go by. The accommodation provided supported them to do this.

Areas for improvement

The service should review and assess the excellent level of performance identified in this statement.

Grade

6 - Excellent

Number of requirements - 0 Number of recommendations - 0

Quality Theme 3: Quality of staffing

Grade awarded for this theme: 6 - Excellent

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 the service had an excellent level of performance in relation to this statement.

The services brochure stated that 'The quality and number of the staff team makes the difference between a good home and a bad home. Quality carpets and fine furnishings will not reduce fears and anxieties or help a person live positively with dementia'.

We found that the continuous learning and development of the staff team remained a significant strength within the service.

Investment in staff, learning and development was seen to be a priority. The following elements were in place that supported this;

Comprehensive induction based on the Scottish Social Services Council (SSSC) format 'preparing for practice'.

Regular supervision which provided opportunities for reflective practice; Annual appraisals which helped the manager identify any learning and development needs for individual members of staff. An annual training plan highlighted the training needs for the staff team for forthcoming year. Job training that provided staff with 'on the job' support and modelling of care practices which enabled them to learn a high quality of care practices.

The whole staff team had participated in the 'butterfly training' which is a resource that had been developed by 'dementia care matters'. The training that staff took part in comprised of a series of workshops which involved engagement, behaviour, feelings, language, being person centred, life story and resident outcomes. We heard that staff had gained some very valuable experiences that had provided them with a greater insight into the life experiences of residents who were living with dementia. This had resulted in the further development of the service with regards to how care and support was provided. We thought that this was a great achievement. An excellent example of this was that when staff went about their daily job, they considered whether or not a resident would be able to take part in the task they were about to carry out. This meant that residents had become meaningfully engaged in the day to day operation of the service.

We saw how staff had been involved in the training from the very beginning. We read minutes of meetings that had taken place where discussions had led to decision making. Further information about this process can be found in quality theme 4.

It was observed that the staff team had reduced barriers to a 'them and us' culture and environment. An example of this was that staff no longer wore uniforms as they preferred to come across as someone who was there to support residents and not just be someone who says 'I know best'.

We watched staff interactions with residents and noted that the staff team were incredibly skilled in creating opportunities for residents to be involved. The manager told us that staff were always advised to stop and think if they were able to involve a resident in the task they were about to do. We saw this during our unannounced visits where opportunities were created to accompany a staff member to the post office or to help in the folding of laundry.

It was very clear that there was a real sense of team work and an in-depth understanding of what real person centred care looked like.

Areas for improvement

The following area for improvement had been identified in the completed self assessment;

'We need to develop further ways of marrying practice to theory learnt'.

We thought that this was a very worthwhile area for improvement that will provide some challenges for the service. We look forward to finding out how the service manages to take this forward at the next unannounced inspection.

Grade

6 - Excellent

Number of requirements - 0 Number of recommendations - 0

Statement 4

"We ensure that everyone working in the service has an ethos of respect towards service users and each other."

Service strengths

We found that the service had an excellent level of performance in relation to this statement.

A culture of respect and values was introduced to staff during the induction process. Staff were also made aware of the Scottish Social Services Council (SSSC) code of conduct. This meant that the staff team were vey aware of the importance of practicing these values.

We observed staff practices and interactions with residents during our unannounced visits. We saw that staff were very respectful to both residents and their colleagues in all their interactions and communications. Exchanges between staff and residents were seen to be very meaningful. It was very evident that members of staff knew residents life histories as they were able to make conversation about this instead of chatting about the weather. Discussions about family members and daily household chores in days gone by were heard. We were very impressed with the amount of knowledge that staff had about each of the residents that they supported.

The manager carried out observational work on a regular basis to audit the care that residents received. We were provided with some very detailed information about observations that had been made by the manager. It had been identified that the level of staff engagement with residents in one area of the service was not as high as in another area. This information was displayed in a staff only area and had served as a reminder for staff that improvement in this area was a priority.

We saw that residents were supported in how they liked to spend their time. Some residents liked to be involved in the hustle and bustle and other residents liked to spend time on their own. These choices were respected by staff who were very skilled in making sure that residents were comfortable and happy in whatever they chose to do.

We were particularly impressed with the way in which the service had sought to find out individual residents music preferences. Staff had then created specific 'play lists' for each residents and these were stored in ipods which could be used whenever residents chose to. We saw one resident sitting listening to music with headphones on. It was very clear that he was thoroughly enjoying the music that he was listening to.

In summary we found that the service had a culture of respect and care values that centred around each residents personality, beliefs, likes and dislikes.

Areas for improvement

The following area for improvement had been identified in the completed self assessment;

'To continue to use materials developed by 'Dementia Care Matters'.

We were very impressed with how the service had developed since the previous inspection. We will be very interested to see how the service further develops using these materials as a means of achieving continuous improvement.

Grade

6 - Excellent

Number of requirements - 0 Number of recommendations - 0

Quality Theme 4: Quality of management and leadership

Grade awarded for this theme: 6 - Excellent

Statement 2

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

Service strengths

We found that the service had an excellent level of performance in relation to this statement.

We were very impressed with the amount of evidence provided by the service that supported our assessment of this statement. The information in quality themes 1 and 3 are also relevant to this statement.

We saw that the whole staff team had been involved in the planning and delivery of the changes that had taken place within the service. We read minutes that had been taken of staff meetings following the 'butterfly' training that had taken place. We were very impressed with how the whole staff team had contributed to suggestions and feedback about suggested changes.

- Discussions at staff meetings had led to the following decisions being made; removal of staff uniforms to make staff appear more welcoming and friendly; splitting the service into two lounge/dining areas so that more person centred space could be created;

To stop the use of trolleys that reflected an 'institutional approach' to serve drinks and snacks;

To introduce a more relaxed day with no set routines to stick to;

The manager modelling person centred care daily 'on the floor' to the staff team;

The quality of life sub group to continue.

The developments and changes that had taken place within the service had involved the whole staff team and not just a few individuals. This meant that staff had taken ownership of the new ways of working and had worked extremely hard to make sure that the service continued to improve.

Areas for improvement

The service should continue to review and assess the excellent practice that we identified in this statement.

Grade

6 - Excellent

Number of requirements - 0 Number of recommendations - 0

Statement 3

"To encourage good quality care, we promote leadership values throughout the workforce."

Service strengths

We found that the service had an excellent level of performance in relation to this statement.

The information in quality theme 3, statement 3 is also relevant to this statement.

The management team had committed a lot of time to the interview and recruitment process of new staff. It was very clear that they ensured that the staff they recruited were 'naturals' who displayed consideration, kindness and compassion and the potential to become good leaders.

Sound leaderships skills were promoted through a variety of ways within the service. For example, the deputy manager had completed management qualifications and had recently been promoted to the managers position. The creation of two separate living areas within the service had provided the opportunity for the further development of senior staff into unit leader roles. We thought that this was an excellent idea as it meant that the manager was able to delegate tasks to unit leaders that also supported their learning. Staff were seen to be registered with the Scottish Social Services Council (SSSC) this provided opportunities for discussions about codes of practice and accountability. We also saw that regular supervision and senior development days also provided a focus for leadership development.

On the job role modelling provided the staff team with learning opportunities and the chance to gain further skills and knowledge. We saw that this worked well within the service, the staff team were enthusiastic and very motivated to further enhance their own professional development.

It was very clear that staff were very confident about how they went about their day to day roles. We saw that they used their own initiative in making decisions and required minimal supervision whilst doing so.

Areas for improvement

The following area for improvement had been identified in the completed self assessment:

'To continue to develop leadership skills of key members of staff'.

We saw that the service created opportunities to promote leadership skills. We will be very interested to see what further developments take place in this area. Progress in this area will be followed up at the next unannounced inspection.

Grade

6 - Excellent

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

There are no outstanding requirements.

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

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

7 Enforcements

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

8 Additional Information

We found that the excellent performances identified at this inspection was due to a number of different approaches that were used by the service. Although we assessed each statement as excellent, we found that the whole ethos and culture within the service was what achieved the extremely positive outcomes for residents.

As stated in the services brochure;

'Our aim is to create a homely atmosphere where you can feel relaxed and comfortable, where staff can sit and talk to you about any worries you may have and give you a hug if it's welcomed. Staff and residents come across as friends, who can assist each other with any difficulties that arise and help to focus on the things that we can do'.

9 Inspection and grading history

Date	Туре	Gradings	
4 Aug 2014	Unannounced	Care and support Environment Staffing Management and Leadership	6 - Excellent 5 - Very Good 6 - Excellent 6 - Excellent
3 Jul 2013	Unannounced	Care and support Environment Staffing Management and Leadership	6 - Excellent 5 - Very Good 6 - Excellent 6 - Excellent
3 Jul 2012	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good Not Assessed Not Assessed
3 Nov 2010	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed Not Assessed Not Assessed
29 Jul 2010	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 6 - Excellent Not Assessed
9 Dec 2009	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 5 - Very Good Not Assessed
2 Jul 2009	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good 5 - Very Good 5 - Very Good

22 Dec 2008	Unannounced	Care and support Environment Staffing Management and Leadership	Not Assessed 4 - Good 5 - Very Good Not Assessed
22 May 2008	Announced	Care and support Environment Staffing Management and Leadership	4 - Good 3 - Adequate 4 - Good 4 - Good

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

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

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Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.