

Wyndford Locks Nursing Home Care Home Service

1 Currie Street
Maryhill
Glasgow
G20 9EW

Telephone: 0141 945 1523

Type of inspection: Unannounced
Inspection completed on: 7 June 2016

Service provided by:
BUPA Care Homes (CFHCare) limited

Service provider number:
SP2003002226

Care service number:
CS2003010416

About the service

This inspection focused on standards of care for people living with dementia. We are using a sample of 150 care home services to look in detail at the standards of care for people living with dementia and this service is one of those selected as part of the sample.

The areas looked at were informed by the Scottish Government's Promoting Excellence: A framework for health and social care staff working with people with dementia and their carers, and the associated dementia standards. It is our intention to publish a national report on some of these standards during 2017.

Wyndford Locks Care Home is registered to provide care and support for a maximum of 150 older people. It is a purpose built with single en-suite accommodation within five separate units that can accommodate 30 service users in each.

Two units provide enhanced residential care and three offer nursing care, two of which are for people with dementia.

All accommodation is on one level with an enclosed well maintained garden for each unit.

The home is reasonably close to local amenities and transport links.

The service is provided by BUPA and their aim is:
'to treat residents with dignity and respect and to preserve their rights as citizens.'

What people told us

During the inspection we spent time in the communal areas of all five units. We spent time with residents chatting about their experiences of living in the home. Residents who spoke with us were happy with the service.

Some residents were unable to easily tell us their views of the service or how staff cared for them. In those instances we observed staff and residents to see how they interacted with each other. We saw staff interacted well with residents. Staff had obviously built good relationships with residents as they knew their needs and how to support them in a way they preferred. We sent out 60 Care Inspectorate questionnaires to residents before inspection. We received 13 back. The questionnaire gave residents an opportunity to give their views about the service.

Questionnaires showed that eight residents were strongly satisfied and five were satisfied with the quality of service.

Overall questionnaires showed residents thought staff treated them fairly, could meet their healthcare needs and were well trained.

However questionnaires showed:

- Two residents disagreed they did not have unnecessary restrictions placed on them, such as when they can go to bed or get up
- Five told us they were not encouraged to discuss their views about the care home

- Three did not know the home's complaint procedure and four did not know they could make a complaint to the Care Inspectorate
- Two told us their privacy was not respected by staff and other residents

These are areas the service should improve.

Some residents had added comments such as:

'Quality of care and support is excellent'

'Staff are always helpful'

'Happy with everything.'

We also sent out 50 Care Inspectorate questionnaires to relatives and carers. We received seven back. This questionnaire gave relatives and carers an opportunity to give their views on the quality of care and support their loved one received. The questionnaires showed six relatives and carers were strongly satisfied and one was satisfied with the quality of care. Questionnaires showed relatives and carers thought staff would meet the health needs of their relative/friend, they felt they were safe and secure in the care home and staff knew their likes and dislikes.

However questionnaires showed:

- One did not know the home's complaints procedure or that they could make a complaint to the Care Inspectorate
- One felt the home did not provide the type of food their relative liked
- One felt their relatives personal property and clothing was not properly cared for

These are areas the service should improve.

Some relatives had added comments such as:

'Feel my mother is very well cared for by the key staff at Wyndford Locks. Staff are caring and respectful to all residents. Concerns have been acted on appropriately by staff.'

'I was made to feel very welcome when I visit. My relative was warmly welcomed and has received good care and attention from the staff who have been very observant with health issues and quick to get the attention that was needed. I feel more staff day and night would benefit the residents in areas of their life.'

'As a family this is our first involvement in care home environment. It is pleasing to see she has settled well to her new home, is being looked after and we are assured she is safe and well.'

There was an Inspection Volunteer involved in the inspection. An Inspection Volunteer is a member of the public who volunteers to work alongside the inspector. Inspection Volunteers have a unique experience of either being a service user themselves or being a carer for someone who has used services. The Inspection Volunteer role is to speak with people using the service being inspected and gathering their views.

The Inspection Volunteer involved in the inspection talked with 13 residents and eight relatives and reported:

Quality of Care and Support:

The residents I spoke to were on the whole pleased with the care and support that they receive. They enjoy the food and the comfort and company of other residents and staff.

Residents commented-

'It's great here. No complaints at all. There's something wrong with folk if they complain.'

'There's not too much in the way of activities now. We used to have things going on during the week but it's mostly at the weekends now.'

'The food is very nice-plenty of choice.'

'It's fine here. I've adjusted well since I came in. There's not much to do though. We were out for a trip recently.'

'The food is good-plenty of choice.'

'It's just fine here. I'm happy. I walk around quite a bit. I like walking. Food is ok.'

'It's fine here. I can do what I like. I can go out if I want and make my room the way I want it.'

'I'm very satisfied with everything here-absolutely no problems.'

'It's lovely here. I'm very content.'

'Food is good. I've no complaints at all.'

'I'm hunky dory. Great place.'

'It's good in here. I love it.'

The relatives commented-

'I've no problems with any of his (relative) care. He is very content.'

'I'm very pleased with Mother's care. There are sometimes small things that go wrong but they are always dealt with quickly. When she came in she was very frail but she has put on weight now. She goes on trips and thoroughly enjoys them. We had a meeting with catering and it had a very positive outcome.'

'There are very positive comments from all the relatives that visit. We are very pleased with his care.'

'Everything is fine here. No problems at all.'

'Everything is perfect. No complaints at all.'

'Our relative is very well looked after. He is very difficult at times but we can go home content that he is getting the best care.'

'I would like to see more stimulation (activities)'

There are varying activities which are being expanded and a new programme is being implemented. One of the units had the TV on as well as music playing which was very confusing for the residents. The food menus are varied and there are alternatives for residents. Mealtimes were a calm experience with assistance for any resident that needed it.

Quality of Environment

All the rooms are bright and well furnished. The corridors are decorated with paintings and photographs. Some units have pictorial signage and it is planned to have all units the same in the near future. There are extensive garden areas which are having new garden furniture soon. There are chickens in one area which the residents love to visit. One of the units has a regular pet dog visiting. All units are spotlessly clean.

Residents commented-

'I get out into the garden when it's nice. I can't walk far but I like to sit out when I can.'

'I've got a lovely room. I can have all my own things in it.'

'My room is great.'

'All rooms are very nice - colourful.'

'They've done a good job with new furniture and decorating.'

Quality of Staff

From what I observed the staff were all very patient, attentive, friendly and caring. At mealtimes they were attentive and assisted residents when needed.

Residents commented-

'All staff are great.'

'The girls are all wonderful. They are so kind.'

'Girls are very nice.'
 'They look after us well.'
 'Lovely staff-very kind.'
 'No complaints about any of the staff. We all have a good laugh. They are all lovely.'

The relatives commented-
 'Staff are great and work so hard.'
 'He (relative) can be a bit loud and cheeky but the staff are very good with him.'
 'The staff are second to none, so helpful, caring and friendly. Office staff are very helpful too.'
 'All the staff are very helpful and friendly.'

Quality of Management

Some residents commented that they have seen the manager in the units and one relative remarked that-
 'If I had any problems that couldn't be dealt with in the unit, I would go to the Manager as he is very approachable.'

There was a very happy, caring atmosphere in all the units.

Self assessment

Each year all care services must complete a 'self assessment.' This tells us how the service think they are performing.

The self assessment details strengths, areas for improvement and what grades the service would award themselves under each quality statement.

The inspector reviews this as part of the inspection planning and looks at evidence of their performance during the inspection.

When we looked at the self assessment we found no evidence residents, relatives and staff had been involved in this process. The self assessment is a way for residents, relatives and staff to evaluate all areas of the service. This opportunity had been lost.

The self assessment would benefit from including information about how the home supported residents to have positive outcomes. The home should involve residents, relatives and staff in this process recording how this was carried out. It would also benefit from adding comments from residents, relatives and staff.

This would give residents, relatives and staff an opportunity to give their views on the quality of all areas of the home.

From this inspection we graded this service as:

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

Quality of care and support

Findings from the inspection

We found residents were receiving a good level of health care and support. Residents we spoke with were happy living there and told us they were well looked after.

A particular strength was oral care with staff clear about their role in this. This contributed to residents continued health and wellbeing.

During inspection we spoke with the dentist who told us 'this is the best home I have been in for oral care.'

We carried out a Short Observational Framework for Inspectors (SOFI). This is a tool used by inspectors to observe the mood and engagement of service users and the quality of staff interactions. Using this tool we observed staff who offered choices, spoke respectfully to residents and engaged in easy chat. We could see a positive effect on resident's mood and quality of life as they obviously knew staff well and enjoyed their company.

We found not all residents had a stimulating environment which would help keep them healthy, motivated and provide focus for their day.

When the inspection volunteer asked residents about activities they told her:

'There's not much to do though we were out for a trip recently.'

'There's not too much in the way of activities now. We used to have things going on during the week but it's mostly at the weekends now.' (See recommendation 1, under quality theme 1)

We found care plans did not reflect the person centred approach staff used to support residents. This meant they did not identify what was important in the resident's life and how to maximise their independence and quality of life although staff we spoke with could tell us how they did this. (See recommendation 2, quality theme 1)

We were pleased to see that although some residents had 'as and when required' (PRN) medication for stress and distress these were rarely administered as de-escalation techniques were used to calm the situation. However when we looked at PRN care plans we found the quality of guidance was inconsistent. (See recommendation 3, under quality theme 1)

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 3

1. The activity programme should improve to offer a stimulating environment to all residents.

National Care Standards, Care Homes for Older People, Standard 17, Daily life

2. Care plans should be person centred, outcome focused and should include improved life history work.

National Care Standards, Care Homes for Older People, Standard 6, Support arrangements

3. The quality of "as and when required" (PRN) medication should be consistent across all care plans.

National Care Standards, Care Homes for Older People, Standard 15 Keeping well-medication.

Grade: 4 - good

Quality of environment

Findings from the inspection

We found the environment was good for residents on their dementia journey. Residents told us they liked their bedrooms and had personalised their space with family photographs and ornaments.

The home was uncluttered which gave residents space to freely move around. There was plenty of natural light and residents were able to easily look out of windows giving them a view of the garden or as one resident told us a comfortable seat to 'pass the time watching the coming and goings of staff and visitors.' Lounge areas had small clusters of seats and settees to encourage conversation. There were large pictures and photographs on corridor walls to help resident's orientation while memory boxes and large name plates identified individual bedrooms.

Each unit had a secure garden with interests such as chickens, raised flower beds and a marquee. There were plenty of places to sit and residents were encouraged to use the outdoor space. This encouraged residents to be mobile and enjoy the benefits of being outside. However the service should explore ways for more residents to independently access the garden. Staff told us they preferred to accompany residents when they went out in the garden as they felt there was a falls risk due to residents being unsteady on their feet.

The home had carried out their own Kings Fund environmental audit before inspection and had picked up on most of the same areas we did. Some of the areas they identified for improvement had already been fixed or there was a plan to do so. The management team were very open to areas we felt should be improved and we discussed these in detail at feedback.

These included:

- Toilet seats, flush handles and rails should be in a contrasting colour
- Taps should be clearly marked hot and cold
- There should be a calendar clearly visible with the date and day

This will ensure the home offers residents an environment that supports them on their dementia journey. (See recommendation 1, under quality theme 2)

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. There are areas of the environment that should be improved to ensure the home is dementia friendly.

National Care Standards, Care Homes for Older People, Standard 4, Your environment

Grade: 4 - good

Quality of staffing

Findings from the inspection

All staff had an informed level dementia training, many had achieved skilled level and some were progressing to enhanced level. This meant that residents were supported by staff who had the knowledge and skills to support them through their dementia journey.

There was a dementia 'champion' however we found this role should be developed as it is not being used to full potential.

Staff we spoke with were aware of the ethos of the service. In discussion, it was clear that staff had a sound value base for working with people with dementia. We discussed the overall view of working with people with dementia and all staff stated that they really enjoyed it and they felt they had an affinity with this client group.

Staff were supported through regular supervision and annual appraisals with paperwork showing they had identified training needs. When we then looked at the training action plan we could see they had started on the training they had requested or had a date to start. This will ensure staff continue to develop their knowledge and gain new skills.

The Inspector Volunteer was given very good feedback about the staff from residents and through her observations she felt staff were patient, attentive, friendly and caring. We observed very good interaction between residents and staff. There was a calm relaxed atmosphere in all units throughout inspection. When we spoke with staff they had very good values and were motivated to support residents as best they could.

We held staff focus groups and they spoke about how they used their relationships and knowledge to support residents. They told us that teamwork was a strong feature within the home and housekeeping and catering colleagues were fully involved with residents wherever possible.

Some senior staff we spoke with did not know about the Scottish Social Services Council (SSSC) portal. We would expect the home to encourage all staff to be aware of the SSSC website and the information available there. Staff should also be encouraged to use the SSSC learning log to ensure their training and reflective practice is available as part of their re-registration.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of management and leadership

Findings from the inspection

The management team use various methods to quality assure the service. There were resident surveys carried out, regular resident and staff meetings, supervisions and appraisals. We could see that action plans were developed for any issues raised and we could see issues ticked off as achieved.

There were audits of all parts of the service such as accidents/incidents, care plans and medication with action plans for any issues.

A new manager had been in post for six months. We spoke with residents and staff who told us he visited the units daily chatting with people asking if there were any issues. Residents we spoke with confirmed they knew the manager and saw him around the units. When we spoke with staff they told us they felt supported by the management team. Staff felt that they were supported to develop their practice and could make decisions and take ideas to the management team.

We found no evidence of residents, relatives and staff involvement in the Care Inspectorate self assessment process. This is an opportunity for residents, relatives and staff to assess the quality of care and support that is lost. (See recommendation 1, under quality theme 4)

There were six nursing vacancies due to recent leavers. The home had recruited nurses with some waiting for PIN numbers and some waiting for references before they could start in this role. The home had contracted three agency staff to ensure they had consistency until all the posts were filled. We have asked the manager to keep the inspector up to date with regular updates to the situation.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. Residents, relatives and staff should be involved in the self-assessment process.

National Care Standards, Care Homes for Older People, Standard 11, Expressing your views

Grade: 4 - good

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

Previous requirements

Requirement 1

The provider must ensure residents do not run out of prescribed medication.

This is to comply with SSI Regulations 2011/210 regulation 4(a)

This requirement was made on 2 June 2015.

Action taken on previous requirement

We looked at medication sheets to check residents had been administered all the medication they had been prescribed. We did not find any evidence of missed medication. We spoke with two nurses who administered medication and they told us they had not run out of any prescribed medication. We looked at the ordering system and were happy everything was in order.

Met - within timescales

Requirement 2

The provider must ensure that they follow safe recruitment practice at all times to ensure that staff are suitably qualified and competent to provide a care service that meets the health, welfare and safety of residents.

This is in order to comply with SSI Regulations 2011-210 15 (a)

This requirement was made on 2 June 2015.

Action taken on previous requirement

We looked at files of three newly appointed staff and found all relevant paperwork to be available and correctly filled in.

Met - within timescales

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

Previous recommendations

Recommendation 1

Resident review paperwork should be signed by the resident or their representative to show they agree with what has been written.

National Care Standards, Care Homes for Older People, Standard 6, Supporting arrangements

This recommendation was made on 2 June 2015.

Action taken on previous recommendation

We looked at care plans and found they were not signed by the resident or their representative. This recommendation is repeated.

Recommendation 2

The home should provide a stimulating environment

National Care Standards, Care Homes for Older People, Standard 17, Daily life

This recommendation was made on 2 June 2015.

Action taken on previous recommendation

Three new activity co-ordinators had recently started which meant there were four in the home. They are all about to have training to support them to provide activities to people living with dementia.

The co-ordinators had recently started to ask residents what activities they would like to do and their ideas will be used to develop a person centred activity programme. This is an area that is being developed however we did not see enough evidence to consider this met therefore we repeat the recommendation.

Recommendation 3

Staff should be observing residents nutritional input.

National Care Standards, Care Homes for Older People, Standard 14, Lifestyle-Keeping well-Healthcare

This recommendation was made on 2 June 2015.

Action taken on previous recommendation

We looked at care plans and found relevant and up to date nutritional information with evidence of the dietician being contacted if there were concerns. If appropriate food and fluid charts were completed to monitor residents nutritional input. We consider this met.

Recommendation 4

Annual appraisals should identify specific training and development needs.

National Care Standards, Care Homes for Older People, Standard 5, Management and Staffing Arrangements

This recommendation was made on 2 June 2015.

Action taken on previous recommendation

We looked at annual appraisals for some staff. We found training and development needs had been identified. When we looked at the training action plan we found staff had already started their identified training or had a date to begin. We consider this recommendation met

Recommendation 5

All staff should have up to date training and refreshers.SSSC Code of Practice, Code 6, as a social service worker you must be accountable for the quality of your work and take responsibility fore maintaining and improving your knowledge and skills.

This recommendation was made on 2 June 2015.

Action taken on previous recommendation

At previous inspections we had found that although training was being provided staff did not turn up. The manager had written to staff to advise them of their duty to attend and advising them disciplinary action would be taken if they did not keep their training up to date. At this inspection we looked at training records and found a high percentage of training had been delivered with staff up to date with refreshers. This has been met.

Recommendation 6

The manager should be more visible around the units.

National Care Standards, Care Homes for Older People, Standard 5, Management and Staffing Arrangements

This recommendation was made on 2 June 2015.

Action taken on previous recommendation

A new manager was now in post and visited each unit at least once every day. This has been met.

Recommendation 7

There should be an action plan developed for all issues raised in the staff survey.

National Care Standards, Care Homes for Older People, Standard 5, Management and Staffing Arrangements.

This recommendation was made on 2 June 2015.

Action taken on previous recommendation

A staff survey had been carried out last year with an action plan developed from issues raised. This has been met.

Complaints

An upheld complaint resulted in the recommendation that:

The manager needs to demonstrate that the service has systems in place to ensure that units have enough stock of personal protective equipment items at all times essential for personal care.

Actions:

All units submitted a request each week for the equipment they needed. Stock cupboards were checked daily and discussed and recorded at the morning meeting.

We looked at orders and found units always had the amount of personal protection equipment they needed. This recommendation has been met.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings
2 Jun 2015	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
9 Jul 2014	Unannounced	Care and support 4 - Good Environment 5 - Very good Staffing 5 - Very good Management and leadership 4 - Good
17 Mar 2014	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
6 Nov 2013	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good

Date	Type	Gradings	
		Management and leadership	Not assessed
7 Nov 2012	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 4 - Good 4 - Good 4 - Good
26 Jan 2012	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good Not assessed Not assessed
22 Aug 2011	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 3 - Adequate Not assessed Not assessed
3 Dec 2010	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 3 - Adequate Not assessed 4 - Good
15 Jun 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good 3 - Adequate Not assessed 4 - Good
9 Feb 2010	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good Not assessed Not assessed
12 Jun 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
7 Nov 2008	Unannounced	Care and support Environment Staffing	3 - Adequate 3 - Adequate 3 - Adequate

Date	Type	Gradings	
		Management and leadership	3 - Adequate
10 Jul 2008	Announced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can 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.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

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

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

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