

Drummond Grange Nursing Home Care Home Service

7 Kevock Road
Lasswade
EH18 1HT

Telephone: 0131 654 2881

Type of inspection: Unannounced
Inspection completed on: 2 October 2017

Service provided by:
Barchester Healthcare Ltd

Service provider number:
SP2003002454

Care service number:
CS2003010630

About the service

Drummond Grange was previously registered with the Care Commission in December 2008 and transferred its registration to the Care Inspectorate on 1 April 2011. It provides nursing care for a maximum of 111 people.

The service is situated in a rural location in Lasswade, Midlothian. The service is surrounded by large gardens with mature trees and wheelchair friendly paths.

The building itself has two floors but is split into five units. On the ground floor there are units called Buccleugh and Melville. These units provide care for younger adults with physical disabilities.

Upstairs is a unit called Pentland, which also provides care and support for younger adults. On the same floor as Pentland is Kevock, which provides care and support for older adults.

Next to Kevock there is Dalhousie, which provides care and support for older adults living with a dementia; this is also called Memory Lane.

The service also has a physiotherapy gym, a full-time physiotherapist and three activity coordinators.

What people told us

Before inspection we received 21 completed questionnaires from people that use the service and 16 completed by relatives. All strongly agreed or agreed that overall they were happy with the quality of care they or their relative received. One person said "I would not want to be anywhere else, I love it here" while another said "The care and staff are like family."

We did get some comments which suggested how the service could improve and we discussed this with the service at the time. One person said "I like living here but sometimes I feel staff can't spend as much time with me as I would like." "I do not get enough fresh air." A relative said to us that they felt that communication with them as a resident's legal representative could be improved.

While on inspection we spoke to 22 people who used the service. All were very happy; in particular, one person told us that the unit manager was "excellent". Another two people were very happy with service, commenting on the difference the service's physiotherapy had made to them.

Self assessment

The Care Inspectorate did not ask for a Self Assessment this year.

From this inspection we graded this service as:

Quality of care and support	4 – Good
Quality of environment	4 – Good
Quality of staffing	4 – Good
Quality of management and leadership	4 – Good

Quality of care and support

Findings from the inspection

We saw that the service was performing at a good level. We have made one recommendation in this area.

All care given to each resident was looked at monthly. This is good as it makes sure that the care experienced for people is up to date. We found that this could be improved by checking all care records and including activities in this check. We have made a recommendation about this.

On one occasion we could see that there was a tool in place to promote a person's skin health. This was not as accurately completed as it could have been. This led to discussions with the unit manager, care staff and relatives. Ultimately, we were satisfied that the person had all their needs met, although paperwork was not up to date.

In this example the person experienced a good outcome; however, care staff cannot rely upon their knowledge of people's care needs and have to rely upon up to date written records. This will make sure that people experience consistently good outcomes.

Every six months we could see that people's care and support needs were reviewed. This is good as it gives people, relatives and the service the chance to regularly make comment about their experiences. This could be improved by recording more details of the review discussions.

We saw a lot of importance placed on improving what people can do for themselves. The service is unique as it has its own dedicated physiotherapy gym and physiotherapist. One person has been helped to improve their ability to stand independently.

While at the service we discussed the importance of how people feel, the role of being active and having something to do. The service was keen to increase the value of this area and made several exciting improvements to change the way they do things. We look forward to seeing this next time.

Overall, we saw that meal times were organised, peaceful and people who needed assistance were helped in a dignified and discreet manner. This means people's meal time needs were met in a caring way. We did speak to the service at the time about some improvements that could be made. We will comment about this further under Staffing.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. It is recommended that care is organised in a more person centred way. This means that the service promotes people's emotional needs, details their rehabilitation goals and details and evaluates regularly what activities people want to do indoors and outdoors.

National Care Standards, care homes, Standard 14 - Keeping Well

The service could make use of the following best practice resource:

<http://hub.careinspectorate.com/improvement/useful-apps/2014/06/dementia-personal-outcomes-for-people-living-with-dementia/>

Grade: 4 - good

Quality of environment

Findings from the inspection

The service was operating at a good level and we have made one recommendation.

During the inspection we found that the home to be overall clean and hygienic. We could see that there was regular cleaning schedule in operation. It was good to hear the manager directly ask the cleaner to use stronger cleaning materials and do extensive cleaning at a time when there were some people who were unwell to reduce the risk of other residents becoming ill.

However, we found a couple of bedrooms and a communal area to have a lingering unpleasant smell. The manager was quick to respond and all carpets had been replaced by the end of the inspection.

We were happy that the manager took quick action in these areas which directly improved the experiences of residents. However, this led us to look at the overview of cleaning in the home. This will be discussed under Management and Leadership.

We found that the building was maintained well and the in house maintenance team kept good records and fixed things quickly. There was opportunity for things to be missed when they were directly the responsibility of Head Office to organise as the home did not know their schedule. As a result of this we saw that one piece of equipment was overdue for a safety inspection. This has now been corrected.

While we were there we noticed two things that needed to be fixed to maximise safety for people. We discussed this with maintenance and they were quick to put this right. However, this suggests that the overview of this maintenance function could be improved and we will discuss this in Management and Leadership.

We discussed the plans in place should there be an emergency situation. We could see that each unit had information of what help the person needed to move around but we could not see information on next of kin or significant others. This would be important if people could not move back into the building immediately and residents' relatives and friends needed to be informed. The manager informed us that this improvement is already planned and we were confident that this would be completed without delay.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. It is recommended that the service has the overview of the maintenance schedule for all maintenance jobs so that the service can ensure that all maintenance checks are carried out in a timely way.

National Care Standards, care homes, Standard 4 – Your Environment.

Grade: 4 – good

Quality of staffing

Findings from the inspection

The service is operating at a good level. We have made two recommendations.

Overall we heard from staff that they received supervision on a very regular basis. We also heard that training took place regularly. Staff told us that it was a good place to work. They felt supported by senior staff and felt that they were very positive about the amount of training that they received.

We could see that staff were recruited in a safe way. Background checks were done on staff through references and criminal record checks were also done by the service. Taking up references help the service employ people who are the most suitable for the job while criminal record checks make sure that people who are not suitable to care for other people are not offered jobs. This maximises better outcomes for people and it was good to see that the service operated in this way.

We saw that personal supervision records were sufficiently detailed. We could not see in supervision records discussion about staff re-registering with the regulatory care bodies. Re-registration with regulatory care bodies is important as people cannot continue to work without doing this. Having a regulatory body for care helps people to have better care experiences as people can only re-register if they have met an acceptable standard of competence.

We did see that the administrator kept a record of who was due to renew their professional registration and would remind staff coming up to this period. However, this could have been improved by the staff's line manager having this regularly documented in the supervision and appraisal records as a check of how staff are progressing in this area.

We discussed with the staff and the manager how much staff used their own initiative and the extent of leadership amongst care staff. This came about as we saw one example where staff knew of a person who had repeatedly declined assistance in one area of care. The staff had continued to record this repeatedly over a period, as the person was able to make their own decisions and had the right to make their own decisions.

We would have expected the staff to have tried and recorded alternative actions like increasing attempts to offer care, offering advice to the person or referring to a specialist for further advice. We have made a recommendation about this.

While the vast majority of observations of staff practice at meal times were very positive, we saw some examples where staff practice could have been improved, particularly around assisting people to eat and drink. While the service advised us that practice is regularly observed, this could be improved by a formal process of observed practice. We have made a recommendation about this.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. It is recommended that the service improves staff's confidence and knowledge in using their own initiative, improving leadership amongst staff.

National Care Standards, care homes, Standard 5 – Management and Staffing Arrangements.

The service could make use of the following resource:

<http://hub.careinspectorate.com/knowledge/useful-links/2014/02/step-into-leadership/>

2. It is recommended that the service introduces policy and procedures on formal observed staff practice. Such observations could cover person centred practice, moving people safely and maximising protection from infection and medication competence.

National Care Standards, care homes, Standard 5 – Management and Staffing Arrangements.

Grade: 4 – good

Quality of management and leadership

Findings from the inspection

The service was performing at a good level and we have made one recommendation.

We found that the manager had a good overview of all areas of the care home operation. We could see well structured systems to monitor on a regular basis the running of the kitchen, the cleaning, the laundry, the building and equipment maintenance and the care of residents.

In addition, there were other safeguards to check the quality experienced by people. Every month each resident had a special day where all aspects of their care was checked. In addition to this, the managers walked around the building regularly checking for issues. On a daily basis, all senior staff had a meeting to keep up to date in all areas of the home. However, we found that the audit systems could benefit from further improvement. We found that issues were being identified, yet there was not always a record of the action taken to make things better and a follow up to make sure the action sorted the problem. As a result, we have asked the manager to review the auditing systems. We have made a recommendation about this.

We saw that when people had problems with their skin, that the units reported this in detail to the manager very regularly. This gave detail on any changes, what treatment was being used and what other professionals were involved. It was good to see this close monitoring which will help people to experience good outcomes.

The use of medication in the home was audited very regularly. This appears to have improved care outcomes for people as we saw that people got the right medication at the right time. In addition, we saw that staff were good at recording the effect of a medication. This is important as it helps to decide if a medication is working or if alternative action is needed. This gave us confidence that people would experience good outcomes.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. It is recommended that the auditing systems include a record of the action outcome and outcome evaluation.

National Care Standards, care homes, Standard 5 - Management and Staffing Arrangements.

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 continue to comply with the existing staffing schedule until such time as an application to vary has been submitted and granted. The number of persons working in the care service must be appropriate for the health and welfare of service users. This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI/210), regulation 15 (a).
Timescale: Within 48 hours of 18 August 2016.

This requirement was made on 9 October 2017.

Action taken on previous requirement

This requirement was retained at the last inspection as a variation had been received to vary the staffing schedule. The service confirmed at this inspection that this variation request has now been cancelled. The service has no plans to change its staffing levels at this stage.

Met - within timescales

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

Previous recommendations

There are no outstanding recommendations.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

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

Inspection and grading history

Date	Type	Gradings	
9 Mar 2017	Unannounced	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
7 Dec 2016	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
21 Mar 2016	Unannounced	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed

Date	Type	Gradings	
21 May 2015	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	4 - Good
30 Oct 2014	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	4 - Good
10 Apr 2014	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
13 Dec 2013	Unannounced	Care and support	1 - Unsatisfactory
		Environment	1 - Unsatisfactory
		Staffing	1 - Unsatisfactory
		Management and leadership	2 - Weak
1 Aug 2013	Unannounced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	2 - Weak
27 Jul 2012	Unannounced	Care and support	2 - Weak
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
9 May 2012	Unannounced	Care and support	2 - Weak
		Environment	2 - Weak
		Staffing	2 - Weak
		Management and leadership	2 - Weak
11 Jan 2012	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	4 - Good

Date	Type	Gradings	
16 Nov 2011	Unannounced	Care and support Environment Staffing Management and leadership	1 - Unsatisfactory Not assessed 3 - Adequate 1 - Unsatisfactory
7 Jul 2011	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
18 May 2011	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 1 - Unsatisfactory 2 - Weak 1 - Unsatisfactory
11 Mar 2011	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate 2 - Weak 3 - Adequate 2 - Weak
18 Jan 2011	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 1 - Unsatisfactory 2 - Weak 2 - Weak
31 Aug 2010	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 1 - Unsatisfactory 2 - Weak 2 - Weak
17 May 2010	Announced	Care and support Environment Staffing Management and leadership	2 - Weak 1 - Unsatisfactory 2 - Weak Not assessed
23 Feb 2010	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good Not assessed

Date	Type	Gradings	
4 Jun 2009	Announced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
14 Jan 2009	Unannounced	Care and support	4 - Good
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	Not assessed
4 Jun 2008	Announced	Care and support	4 - Good
		Environment	2 - Weak
		Staffing	4 - Good
		Management and leadership	4 - Good

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