

Renfrew Care Home Care Home Service

70-72 Cockles Loan Renfrew PA4 OPF

Telephone: 0141 886 5131

Type of inspection: Unannounced

Inspection completed on: 6 September 2017

Service provided by:

Renfrewshire Council

Service provider number:

SP2003003388

Care service number:

CS2009217106



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About the service

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

Renfrew Care Home is registered to provide care and support to a maximum of 60 older people who may have dementia. There are five units over two floors which provide single, en suite accommodation, lounge and dining areas. One of the ground floor units provides specialised dementia care for up to twelve people. There is a passenger lift to the upper floor where balconies offer outdoor access.

The service is located close to local amenities and public transport. There is off street parking at the front of the house and enclosed garden areas at the rear.

Renfrew Care Home aims to "promote communication, provide information and develop working partnerships with residents, families and outside agencies to ensure our residents feel valued, respected and that the home is viewed by the local community as a useful resource and is an integral part of the community of Renfrew".

What people told us

Before the inspection, we sent care standards questionnaires to the manager to distribute to residents and relatives. We received eight completed questionnaires and spoke to thirteen residents and two relatives. They told us they were very happy with the standard of care. Some of their comments were:

"my family and I are regular/daily visitors and observe the home to be well organised and managed; my mother states that it is a 'great place' and the staff are 'lovely'"

"staff always approachable and pleasant - peace of mind that my dad is well cared for"

"it's great - staff all very helpful if you need it - very caring - nothing too much trouble"

"staff very kind - no problems getting help - can't speak too highly of staff"

"very happy - I like it and feel safe; staff are very nice, pleasant"

"I go to bed and get up when I want; food is quite good - plenty of coffee and snacks; staff are very good - very professional and treat me with respect"

"couldn't fault the staff; always told about activities but prefer to watch own television - no one to talk to"

"they (staff) are very good - she (resident) wouldn't be here if it wasn't; they're good at phoning if she's had a fall or anything"

"home from home - made very welcome and can make tea; staff very kind and jolly and know residents very well"

Self assessment

The service had not been asked to complete a self assessment before the inspection. We looked at their own improvement plan and quality assurance paperwork. These demonstrated their priorities for development and how they were monitoring the quality of the provision within the service.

From this inspection we graded this service as:

Quality of care and support5 - Very GoodQuality of environmentnot assessedQuality of staffing5 - Very GoodQuality of management and leadershipnot assessed

What the service does well

Residents told us that they were well looked after and staff were very kind and helpful. Staff knew residents well and were friendly and respectful in their interactions.

At their regular meetings with the manager, residents were encouraged to give their views about the quality of the service and any proposed changes. We saw good examples of the service responding positively to residents' requests. A resident who attended meetings with catering staff was in the process of seeking residents' views about new menus

Relatives' meetings had not been happening regularly because of the low numbers attending.

Care plans were person centred and had good detail about residents' interests and preferences, and how they wished to be supported by staff. We saw that records relating to residents' distressed reactions and how staff should respond had improved, and health care staff were consulted when specialist advice was needed to improve residents' health and wellbeing.

Most staff had completed dementia training linked to Promoting Excellence which meant they had up to date knowledge and skills in supporting residents and their families.

For residents with more advanced dementia, Namaste care sessions continued to offer a relaxing atmosphere where they enjoyed different sensory experiences. This resource could be further developed when more staff complete the training.

Monthly assessments showed that the service provided significantly more care hours than those assessed as required to meet residents' needs. We were told that management was hoping to increase the number of care staff on day shifts to take account of residents' higher dependency needs

The service used monthly audits to identify any issues and help reduce the number of falls for individual residents. Other monthly audits were carried out and equipment was regularly serviced to keep people safe.

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The service's good links with the local community meant that residents had access to different activities and events. Residents were enjoying the new beauty treatments on the monthly programme which offered a variety of other activities and outings. While there were good examples of individual residents enjoying their chosen gardening and household chores, we saw only a few residents taking part in meaningful activities. Outings for snacks and meals could also be more varied.

Funding had recently been secured for a musical project involving the residents' singing group and local primary school children who regularly visited the service. It also involved weekly input from a musician, and support for other music based activities.

Newsletters produced by a relative were colourful and informative about what was happening in the service.

Staff told us they enjoyed their work, teamwork was generally good and support was always available from senior staff. They had regular supervision and access to relevant training. Meetings provided opportunities to discuss care related issues and put forward ideas and suggestions on how the service could develop.

What the service could do better

Further work was needed to ensure that residents' care needs were fully considered in care plans. Care plans and review minutes needed to be dated and appropriately signed. Risk assessments for the use of sensor mats or other similar equipment should also be in place and signed by the resident or their representative. (see recommendation 1)

Care plans regarding residents' end of life wishes could be further developed.

The monitoring of daily food and fluid intake for residents at nutritional risk could be improved in relation to recording all meals, fluid amounts, daily totals and targets. The outcome of discussions with health staff regarding weight loss should also be clearly recorded. (see recommendation 2)

We found inconsistencies in the recording of discontinued medicines and the application of topical creams did not always accurately reflect the directions on administration records. This was the subject of a previous recommendation that is repeated. (see recommendation 3)

The service needed to review the dining room menu boards to ensure that they could be easily read by residents. The writing should be clear and the description of choices consistent.

Pictorial menus would be beneficial for residents with cognitive impairment and dementia.

Records relating to staff supervision could be more accountable in relation to actual dates and expected frequency. There were also significant gaps in dates for some staff.

As part of individual staff development, the service should consider identifying more staff to become 'champions' to support good practice and knowledge in different aspects of residents' care.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 3

- 1. Care plans should reflect residents' care needs and risk assessments should be in place for the use of sensor mats and other measures used to maintain residents' safety. National Care Standards Care Homes for Older People, Standard 6 Support arrangements
- 2. Daily food and fluid intake records should be fully completed to ensure close monitoring of individual residents' nutritional status. National Care Standards Care Homes for Older People, Standard 13.6 Eating well
- 3. The administration and recording of prescribed medication should always follow best practice guidance. National Care Standards Care Homes for Older People, Standard 5.2 Management and staffing arrangements and Standard 15.6 Keeping well medication

Complaints

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

Inspection and grading history

Date	Туре	Gradings	
20 Jul 2016	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 4 - Good
13 Oct 2015	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 5 - Very good 4 - Good 4 - Good
12 Mar 2015	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
17 Nov 2014	Unannounced	Care and support Environment	4 - Good 4 - Good

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Date	Туре	Gradings	
		Staffing Management and leadership	4 - Good 4 - Good
5 Mar 2014	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 5 - Very good 4 - Good 4 - Good
6 Sep 2013	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
8 Feb 2013	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 3 - Adequate Not assessed 3 - Adequate
16 Jul 2012	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 3 - Adequate 4 - Good 3 - Adequate
19 Jan 2011	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed Not assessed
9 Jun 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good Not assessed
2 Dec 2009	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 4 - Good Not assessed

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