

South Beach HouseCare Home Service

7 South Crescent Road Ardrossan KA22 8DU

Telephone: 01294 468234

Type of inspection: Unannounced

Inspection completed on: 3 November 2017

Service provided by:

Church of Scotland Trading as Crossreach

Care service number:

CS2003001139

Service provider number:

SP2004005785



About the service

This service has been registered since 2002.

South Beach House is provided by the Church of Scotland's Board of Social Responsibility, which is now known as Crossreach. The care home is a large, extended, detached house situated on the sea front in Ardrossan. The home is easily accessible by public transport and is close to local amenities. It is situated in its own grounds and provides accommodation for up to 42 older people; a maximum of 4 of the registered places may be used for respite care. A "Step Up, Step Down" service to people who required additional support following discharge from hospital, prior to going home was being established. Eight of the bedrooms were allocated to new care provision.

At the time of the inspection there were 38 service users.

The service has a service user Charter Of Rights which states that:

"We believe that you deserve the best service possible". It also has a value statement which aims to: "treat everyone as an individual, involve them in decision-making about everything which affects them, be transparent and act with integrity, be fair and accountable and to serve and support everyone in a spirit of grace, humility and compassion".

What people told us

We asked the service to distribute care standards questionnaires. We received seven from residents and seven from relatives. All respondents strongly agreed or agreed that overall, they were happy with the quality of care. Two respondents disagreed that the home was clean and free from smell and that the service asked them for feedback. One resident disagreed their privacy was respected by staff and residents. One person disagreed they could live their life in keeping with their cultural and religious beliefs. One person thought that staff did not support their relative/friend to stay in touch with friends, relatives and their own community.

The following additional comments were made:

"Very happy with the care I get, the home is very good, staff are good at bringing out the best in me".

"Stuffy, more fresh air".

"Happy with the care...food could be improved seems to be a lot of mince and potatoes. All the staff are friendly and caring towards us as a family which we greatly appreciate".

"On occasional visits, residents with incontinence issues are taken to be changed, but the chair/chairs are not being properly wiped/cleaned as staff don't appear have access to disinfected wipes or other, baby wipes have been used on occasion. Also litter in heaters - surely fire hazard".

"Overall, very pleased with the service and care mum gets, staff are always helpful and friendly. Key worker [named] keeps me informed about everything that happens".

"Seems settled and content with life in the home. The staff are enthusiastic, friendly and efficient. There is always something happening whether it is a simple quiz or a visiting music group and there are regular outings.

Always made welcome by the staff and have been encouraged to become friends of the house. The home is generally a happy place, with only the odd exception".

"Caring staff who do their best as the home has become very busy of late. More infirm are not included in outings as often although I appreciate this is due to staffing. The home has improved visually, still in need of some renovation. Overall a well run home". This relative also named a staff member and praised their care and enthusiasm".

"It's a nice place to be and I have no faults with anything. Everything is perfect to me".

We spoke with seven residents and the relatives of four service users during the inspection. Positive comments were made about the quality of care and support. The staff were described as "nice" and "good". A relative observed that the staff were kind and caring to all, patient and considerate. They felt confident that their relative was well looked after. Relatives confirmed that staff communicated well with them about their family members health and wellbeing. One resident confirmed that they were able to choose when they went to bed and whether to join in social activities. They said they enjoyed the quiz. Another resident we met liked to attend the hairdressers. Some residents said they enjoyed the daily church service.

Food was complimented by most of the residents we spoke with. One resident told us her meal was cold. The manager followed this up. One relative described "plain food just as she likes". A relative we spoke with was pleased that staff had taken the trouble to obtain a plate that kept their relatives meal warm. Another resident told us they liked to make their own tea.

One relative we met commented that the environment was "not the prettiest" however, overall residents confirmed that they were warm and comfortable and happy with the accommodation. One individual commented on her lovely bed spread.

Self assessment

The provider was not asked to complete a self-assessment. Planned improvements should be reflected within a service development plan.

From this inspection we graded this service as:

Quality of care and supportnot assessedQuality of environmentnot assessedQuality of staffingnot assessedQuality of management and leadershipnot assessed

Quality of care and support

This quality theme was not assessed.

Quality of environment

This quality theme was not assessed.

Quality of staffing

This quality theme was not assessed.

Quality of management and leadership

This quality theme was not assessed.

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

Recommendation 1

The keyworker system should be developed to ensure that residents care plans are fully implemented and that staff have the time and support to discharge their responsibilities in terms of meaningful activities.

National Care Standards, care homes for older people - Standard 6: Support arrangements.

This recommendation was made on 27 April 2016.

Action taken on previous recommendation

There was a keyworker system in place.

We looked at care plans, spoke with staff and the managers. We heard that staff had allocated time to spend with their key residents. However, care records did not evidence the extent of this intervention. We suggested that key workers be involved in the residents day process, this could be achieved by the key worker arranging a specific outing or meaningful activity of the residents choice.

In order to improve continuity and communication key working arrangements should be reviewed and improved for the "Step Up Step Down" service users.

The manager accepted ongoing improvement was needed in this area.

This recommendation is: not met and therefore, repeated.

Recommendation 2

Topical medicine administration records should be consistently completed in accordance with prescribers instruction or skin care personal plan.

National Care Standards, care homes for older people - Standard 6: Support arrangements.

This recommendation was made on 27 April 2017.

Action taken on previous recommendation

Overall we found some improvements. However, there remained some gaps in record keeping. We noted that the quality of directions for application would benefit from being more detailed. The manager was directed to alternative recording documentation designed specifically for this purpose.

This recommendation is: not met and therefore, repeated to consolidate improvement.

Recommendation 3

Food and fluid records should be improved to evidence the full extent of nutritional support offered.

National Care Standards, care homes for older people - Standard 6: Support arrangements.

This recommendation was made on 27 April 2017.

Action taken on previous recommendation

Overall we found that sufficient improvements had been made.

This recommendation is: met.

Recommendation 4

The provider should formally set out how they intend to deliver the "Step Up, Step Down" service. This should take account of but, is not limited to the following areas:

- Amendment to the care services aims & objectives
- Admission and discharge protocols
- Implementation of appropriate care documentation to support the assessment, care planning and evaluation process

- Deployment of staff to support effective communication and continuity of care.

National Care Standards, care homes for older people - Standard 6: Support arrangements and Standard 5: Management and staffing arrangements.

This recommendation was made on 27 April 2017.

Action taken on previous recommendation

The aims and objectives had not been reviewed.

The management and staff discussed admission and discharge protocols. The management team were clear that a full pre admission assessment was completed prior to every admission. This helped to ensure that the service could meet each individuals needs.

There were formal risk assessments in place. These included a "MUST" nutritional assessment, a "Waterlow" pressure sore risk assessment, falls risk assessments and a moving and handling assessment.

The content of personal plans varied. Some were very brief whilst others were completed in more detail. We suggested that the personal plans would benefit from being more outcome focused. Personal plans should be clear about the reason for admission and should evidence consultation with service users and agreement about each individuals goals and wishes. The manager was keen to make improvements in this area and began working on a revised personal planning format appropriate to this client group. Personal planning should take account of promoting independence and independent living skills. We suggested reinstatement of a small kitchen area to support this. The management also planned to create a small lounge area to offer additional choice of public space as the main lounge was crowded and noisy at times.

Due to the planned short-term nature of this aspect of the service, review dates require to be more frequent than the current four weekly review system in place for long-term residents. We asked that the manager consider a weekly team meeting to evaluate each individuals progress and support needs.

There had been no changes to the key working system or deployment of staff to take account of the specific needs of the "Step Up Step Down" service. We suggested the manager give consideration to identifying a team of staff who would be responsible for the "Step Up Step Down" service users. This would improve key working arrangements, record keeping, continuity of care and communication.

The manager was keen to progress a more person-centred approach to administering medication for the eight short term service users. The manager was sourcing lockable cabinets to store and administer medications within each persons bedroom. This would allow medication to be given in accordance with each persons daily routine and not an institutional medicine round approach.

Recommendation 5

The staff team should participate in infection control training.

National Care Standards, care homes for older people - Standard 5: Management & staffing arrangements.

This recommendation was made on 27 April 2017.

Action taken on previous recommendation

This recommendation is: met.

Recommendation 6

The "Step Up-Step Down" aspect of the service should be formally evaluated.

National Care Standards, care homes for older people - Standard 5: Management & staffing arrangements.

This recommendation was made on 27 April 2017.

Action taken on previous recommendation

The service had issued some quality questionnaires to gather service user feedback on this aspect of the service. This could be extended to include other professionals involved in the service.

The manager planned to change how this aspect of the service was managed. This included implementing new outcome focused care documentation, a person-centred approach to medication management and a review of the key working arrangements.

These changes should be formally evaluated to ensure that changes are effective.

This recommendation is: not met and therefore, repeated.

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	Туре	Gradings	
5 Apr 2017	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
23 Nov 2016	Unannounced	Care and support Environment	3 - Adequate 3 - Adequate

Date	Туре	Gradings	
		Staffing Management and leadership	3 - Adequate 3 - Adequate
2 Jun 2016	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 3 - Adequate 2 - Weak 2 - Weak
25 Nov 2015	Unannounced	Care and support Environment Staffing Management and leadership	Not assessed Not assessed Not assessed Not assessed
30 Jun 2015	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 4 - Good 5 - Very good 5 - Very good
9 Dec 2014	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 5 - Very good 4 - Good
15 Jul 2014	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 5 - Very good 5 - Very good
26 Sep 2013	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 5 - Very good Not assessed Not assessed
9 May 2013	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 5 - Very good 4 - Good 5 - Very good
11 Jun 2012	Unannounced	Care and support Environment	4 - Good 5 - Very good

Date	Туре	Gradings	
		Staffing Management and leadership	5 - Very good 5 - Very good
19 Oct 2011	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 5 - Very good 5 - Very good Not assessed
25 Jan 2011	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed Not assessed
7 Sep 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 4 - Good
11 Mar 2010	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 4 - Good
23 Sep 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 5 - Very good 5 - Very good
16 Mar 2009	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 4 - Good
11 Dec 2008	Announced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good

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