

Crossgate Care Centre Care Home Service

Meiklewood Road
Kilmarnock
KA3 2EL

Telephone: 01563 523311

Type of inspection: Unannounced
Inspection completed on: 5 December 2017

Service provided by:
Shaftesbury Care Grp Ltd

Service provider number:
SP2011011680

Care service number:
CS2011300604

About the service we inspected

Crossgate Care Centre is a care home registered for 66 older people who may have dementia and/or physical/sensory needs and includes:

- 16 places in Willow Unit for older adults and older people with mental illness, dementia, brain injury
- two places for specified named adults

The service may also provide respite for up to four people at any one time. The provider is Shaftesbury Care Group Limited. This service registered with the Care Inspectorate on 31 October 2011.

The home is located in the north end of Kilmarnock with easy access to local amenities. The care home is purpose built. Accommodation is provided over two floors and divided into four units Afton, Carmel, Willow and De Walden. Each unit has lounge, dining, toilet and bathing facilities. Residents are able to move freely between units. All bedrooms are single occupancy and have en-suite shower facilities. The home has an enclosed garden for people using the service and a minibus to support residents to access the community.

The aims and objectives of the service are:

"To provide a friendly residential setting within a care home environment.

To provide a quality of life which enables service users to retain their independence, identity and sense of value.

To provide stimulation and encourage activities and social events.

To provide physical and emotional support to service users, family and friends.

To maintain and develop close links with the community.

To deliver the best possible care to all service users at all times".

How we inspected the service

We wrote this report following an unannounced inspection. Two inspectors carried out this inspection on Tuesday 5 December 2017 between 9.30am and 5pm. We gave feedback to the deputy manager on 5 December 2017.

During this inspection, we gathered evidence from various sources. We spoke with six residents, three relatives and a range of people working in the service. We looked at the service's development plan, personal plans, risk assessments, activity programme, maintenance records and quality assurance processes.

Taking the views of people using the service into account

For this inspection, we received views from six residents. People told us that they were happy with the quality of the service.

Comments included:

"I am happy here".

"The food is really good".

"Staff take good care of us and will come and spend time having a chat".

"Staff are wonderful".

We saw some good engagement between staff and people experiencing care and that friendships had developed between some residents.

Taking carers' views into account

For this inspection, we received views from three relatives. People told us that they were happy with the quality of the service.

Comments included:

"The place is on the up. Wonderful. I feel lucky to have got x here".

"I am happy with the care x receives. Staff know x well and accommodate their day to day routine".

"You get a good impression of the home. The home is good. Staff are very good at keeping me informed about any change in x and involve them in activities".

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 service should continue to develop person centred care plans which reflect the person and what and who is important to them. This will ensure that care continues to be delivered around the needs and preferences of the person rather than the service.

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

This recommendation was made on 9 May 2017.

Action taken on previous recommendation

The manager and deputy manager were continuing to review current care plans and planned to introduce a new format which was more personalised. We encouraged the service to implement the new format with one or two people and evaluate to ensure that they reflect the person and what is important to them. The manager had planned a rolling programme of training/information for staff and relatives around the proposed changes to the care planning format. In addition, we asked the service to review and ensure that residents receive adequate support with nail cutting to ensure that it supports their overall health and wellbeing. This recommendation was repeated.

Recommendation 2

The provider should ensure that robust risk assessments are in place and reviewed on a regular basis to protect people from avoidable risk or harm.

National Care Standards Care Homes for Older People, Standard 5: management and staffing arrangements

This recommendation was made on 9 May 2017.

Action taken on previous recommendation

Generic and individual risk assessments were in place and reviewed on a regular basis identifying possible hazards and risk reducing measures to keep people safe. The service was aware of the need to continue to review this dependent on the needs and experience of residents. This recommendation was met.

Recommendation 3

The service should review arrangements for the provision of respite care in accordance with the National Care Standards, short breaks and respite care to ensure that this is a positive experience for people using this service.

National Care Standards Short Breaks and Respite Care Services for Adults.

This recommendation was made on 9 May 2017.

Action taken on previous recommendation

The management team had continued to review the provision of respite care within the home and decided that the environment was not suitable given the changing needs of residents. This recommendation was met.

Recommendation 4

The service should consider how it can provide residents with access to quieter areas within the home to promote meaningful interaction and purposeful activity between residents, families and staff.

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

This recommendation was made on 9 May 2017.

Action taken on previous recommendation

There had been continued development of the environment within the home. There were three quieter rooms and seating outside lift areas between units. We encouraged the service to continue to use the Kings Fund EHE Environmental Assessment Tool in developing a supportive design for people with dementia. This recommendation was met.

Recommendation 5

The service should review maintenance records to ensure that appropriate certificates and contracts are held within the service and that there is a robust system to ensure that appropriate remedial action is taken where this is identified. This will ensure that issues affecting the safe environment are not overlooked.

National Care Standards Care Homes for Older People, Standard 4: Your environment, Standard 5: Management and staffing arrangements

This recommendation was made on 9 May 2017.

Action taken on previous recommendation

Records showed that maintenance checks were being undertaken. However, it was not easy to identify from records the dates of some checks. This was discussed with the handyman. This recommendation was repeated.

Recommendation 6

The service should ensure that all residents have regular access to a safe outdoor space to enhance their quality of life and wellbeing.

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

This recommendation was made on 9 May 2017.

Action taken on previous recommendation

The service was involved in the Care About Physical Activity (CAPA) improvement programme and was encouraging people to be more active and developing the environment to encourage movement and exploration. During inspection, we observed several people independently accessing the garden area to reduce stress and improve wellbeing. We saw that there were plans to develop the garden in coming months to encourage engagement and activity. For example circular pathways and raised flower beds. This recommendation was met.

Recommendation 7

The service should continue to monitor staffing levels and deployment of staff on each shift to ensure that this meets the holistic care needs of residents at all times. This should include reinforcing staff accountability and responsibility for their respective roles.

National Care Standards Care Homes for Older People, Standard 5: Management and staffing arrangements

This recommendation was made on 9 May 2017.

Action taken on previous recommendation

The service was continuing to monitor and deploy staff to meet the needs of residents. The Care Inspectorate had agreed changes to the skill mix of staff on shifts which had resulted in a reduction in the use of agency staff to meet the core rota. In addition, we saw that handover arrangements between shifts had been improved to ensure continuity of care. This had resulted in improved outcomes for residents. For example, we saw that there was a calm and pleasant atmosphere and that staff had time to engage people in meaningful conversations and activities. The staff team were working well together to support good outcomes for residents with some volunteering their own time to support activities outwith the home. This recommendation was met.

Recommendation 8

The provider should review and develop quality assurance systems and processes. This should include developing a service improvement plan showing how they intend to build on strengths and move the service forward in coming months. This should be done in consultation with residents, relatives, staff and other stakeholders.

National Care Standards Care Homes for Older People, Standard 5: Management and staffing arrangements.

This recommendation was made on 9 May 2017.

Action taken on previous recommendation

There was a service improvement plan which should continue to be developed to ensure that it is informed by all processes for assuring quality within the service, and include the person responsible, timescales, and how this will be monitored and reviewed to ensure that it is achieving the required outcome. This recommendation was 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	Type	Gradings	
9 May 2017	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
8 Dec 2016	Unannounced	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
15 Dec 2016	Re-grade	Care and support	Not assessed
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	4 - Good
26 May 2016	Unannounced	Care and support	3 - Adequate
		Environment	2 - Weak
		Staffing	1 - Unsatisfactory

Date	Type	Gradings	
		Management and leadership	1 - Unsatisfactory
8 Jan 2016	Unannounced	Care and support Environment Staffing Management and leadership	Not assessed Not assessed Not assessed Not assessed
24 Aug 2015	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
5 Jan 2015	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
19 Jun 2014	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
16 Jan 2014	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 4 - Good 4 - Good
29 Oct 2013	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
6 Mar 2013	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 3 - Adequate Not assessed
22 Jun 2012	Unannounced	Care and support Environment Staffing	3 - Adequate 4 - Good 3 - Adequate

Date	Type	Gradings	
		Management and leadership	4 - Good
6 Feb 2012	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate

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