

Bankhouse Care Home Service

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Lesmahagow
Lanark
ML11 0EF

Telephone: 01555 894875

Type of inspection: Unannounced
Inspection completed on: 29 November 2017

Service provided by:
MHA Auchlochan

Service provider number:
SP2008010194

Care service number:
CS2008192920

About the service

Bankhouse Care Home is situated in the village of Lesmahagow and is operated by MHA (Methodist Housing Association) Auchlochan. The service is set on a main bus route and is close to a range of local amenities including local shops. The service is registered to provide care for up to forty-nine older people. This included two places for older adults aged fifty years plus and two respite places for the same client groups. At the time of the inspection there were forty-seven people living in the service.

The needs of the residents were variable with the majority dependent on staff due to levels of frailty and varying mental health conditions, including high levels of dementia.

The service has a mix of accommodation available from single bedrooms with en-suite toilets to bed-sit style accommodation with full bathrooms and small kitchen areas for people to make snacks and drinks. There are a couple of rooms that can be used as double bedrooms but these were only used for couples if they wished to share. People were encouraged to personalise their own space. An emergency call system was fitted to allow residents to summon staff assistance when needed.

There were a range of communal areas within the building for residents to access as well as a dining area. Lifts were available between floors. A secure courtyard garden is available for residents to access.

MHA's mission statement is 'to improve the quality of life for older people, inspired by Christian concern - this is based on the provision of high quality person centred care and support; founded on respect for individuality, personal choice and dignity and focused on nurturing a person's spiritual and physical wellbeing'.

What people told us

Those living in the service commented highly on the care and support they received. People told us that staff were attentive and that they enjoyed taking part in the range of activities on offer.

Comments made included:

"it's as though I was meant to be here"

"I am full of praise for the place"

"cared for well and the girls are good"

Relatives and friends spoken with at the inspection, and questionnaires returned to us in advance, commented highly on the service this included care, activities, staff and management.

People commented on the positive improvements made since the manager took over the service in 2016 and advised that any issues raised were addressed promptly by management and the staff team.

Self assessment

A self assessment was not requested as part of this inspection.

From this inspection we graded this service as:

Quality of care and support

4 - Good

Quality of environment

not assessed

Quality of staffing

4 - Good

Quality of management and leadership

not assessed

What the service does well

Overall we found that people were well cared for and supported by staff. From discussions with residents, their relatives and responses to our questionnaires people told us they were well looked after and that their needs were being met. Families told us about their involvement in planning and reviewing support needs which helps promote person centred care.

Two requirements made at the last inspection in relation to quality of personal care plans and the management of medication had been addressed. We noted the personal care plans looked at contained good information about the person. We found information in plans were regularly updated and reviewed to ensure they reflected the individual's needs.

We noted improvements in the way the service managed people's medications to ensure that people received their medications as intended.

The regular completion of audits in relation to people's care needs, including administration of medication and record of weights were carried out and where needed actions put in place to address any concerns identified. This helped to ensure that people received additional support when needed.

The service continued to have good links with the local GP's and where needed referrals were made to other health professionals such as Dieticians and Dentists.

A range of activities are made available to people on a daily basis, this included on a one to one and group bases.

From our observations there was a good working relationship between the staff members' and meaningful dialogue and good communication was evident.

We noted that staff were safely recruited and inducted into the service. This was confirmed through discussions with staff. Staff had access to a wide range of on-line training modules as well as face to face training. Appropriate records were maintained reflecting training undertaken and planned to ensure that staff had the necessary skills and training to meet the varied needs of those living in the service.

Staff were registered with their relevant governing bodies and where any conditions had been applied to a person's registration management were aware of these and could support staff to meet these.

A new staff appraisal and supervision format had been introduced. The purpose of these was to monitor and support staff development in a confidential manner. We will review how effective this system has been at future inspections in improving staff performance and ultimately outcomes for people using the service.

What the service could do better

Although we have met the requirement in relation to personal plans we noted some areas where the content could be improved and we spoke to management regarding this. This included where we found conflicting

information or a lack of specific detail which could lead to difficulty in staff providing the most appropriate care to the individual (see recommendation 1).

We noted that the service was not always carrying out care reviews in line with legislation. However, we were satisfied that by the end of the inspection management had put in measures to address this. We will review if an appropriate review schedule has been maintained at the next inspection.

Although we were satisfied with the improvements in how medication was administered we continued to note some areas for improvement. However, we could see that improvements needed were generally being identified through the service's own audit and management were trying to address these.

We made a previous requirement relating to how the service took into account residents' dependency levels in relation to ensuring that the service was appropriately staffed to meet people's needs. As the service was still unable to demonstrate this we will repeat the requirement (see requirement 1).

Individual learning and development plans were being developed for staff. This would allow management, along with individual staff members, to agree a person's specific training needs. The manager would then be able to use this information to develop an effective training plan for the service as well as building up individual staff's skills where training was needed. We will review how effective this has been at the next inspection.

The service planned to roll out 'Promoting Excellence' training on dementia to improve staff's knowledge and practice when working with people living with dementia. In order to support this, a number of staff would be trained to deliver the training effectively. We will review the impact of this at future inspections.

Requirements

Number of requirements: 1

1. The provider must be able to show how the dependencies of those living in Bankhouse are taken into account when staffing the service. This is in order to comply with SSI 2011/210 Regulation 4(1)(a) - welfare of service users and Regulation 15(a) - Staffing
Timescale for implementation: one month from receipt of this report.

Recommendations

Number of recommendations: 1

1. Management should develop systems to more regularly audit personal plans to ensure that the information contained in these clearly reflects the care and support needs of the individual. National Care Standards Care Homes for Older People Standard 6 Support Arrangements

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	Type	Gradings	
16 Sep 2016	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
15 Jan 2016	Unannounced	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
28 Jul 2015	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
25 Nov 2014	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
3 Jun 2014	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
25 Sep 2013	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	4 - Good
20 Jan 2012	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
7 Jan 2011	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	4 - Good

Date	Type	Gradings	
		Management and leadership	3 - Adequate
14 Sep 2010	Announced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate
17 Mar 2010	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
28 Apr 2009	Announced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate

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