

St. Johns Care Home Service

11 High Cross Avenue
Melrose
TD6 9SQ

Telephone: 01896 822168

Type of inspection: Unannounced
Inspection completed on: 8 February 2018

Service provided by:
Mansfield Care Limited

Service provider number:
SP2005007720

Care service number:
CS2009195955

About the service

St. Johns is a care home registered to provide a care service to a maximum of 17 older people. Two of these placements can be used for emergency respite care. At the time of the inspection there were 13 residents living in the service, all on a permanent basis.

St. Johns is owned and operated by Mansfield Care Limited.

This service has been registered since April 2009.

The service is situated in Melrose, within easy reach of the local amenities, including shops, cafes and transport.

The home has two parts. The original building which is on two floors; and a ground floor extension to the back of the building, looking out onto well established gardens. The main house has a dining room and main lounge where most of the residents spend their time.

The provider's stated philosophy of care is:

"All our care homes have the same philosophy:

To provide safe, comfortable surroundings where all our residents can feel at home.

Our homes are run to meet the needs of our residents, and their wishes come first.

We offer holistic care and support of the highest professional standards, personalised to meet each individual's needs, wishes and choices."

What people told us

We received one completed residents' care standards questionnaire and five completed relatives'/carers' care standard questionnaires prior to the inspection visit. All indicated that overall they were satisfied with the quality of care that this service provided.

During the inspection we met all of the residents and spoke individually with five of them. We also spoke with a relative who was a regular visitor to the home. We received positive comments about the kindness of the staff and how overall they were satisfied with the service being provided.

Some residents were less able to tell us what they thought about the service or the care they received. We spent time observing how these residents interacted with staff and how they spent their time. We saw that residents responded positively to support from staff and enjoyed chatting with them.

Self assessment

We are not requesting self assessments from providers for this inspection year. Issues relating to quality assurance, acting on feedback from people using the service and the quality of the service's improvement plan were considered throughout the inspection.

From 1 April 2018 the new 'Health and Social Care Standards' will replace the existing Care Standards. These standards seek to provide better outcomes for people who experience care, and services should now be

familiarising themselves with these. We would encourage services to prepare for the implementation of the standards by working with staff and people experiencing care to raise awareness and explore what they mean in their specific setting, and consider how they impact on their work.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of environment	4 - Good
Quality of staffing	not assessed
Quality of management and leadership	not assessed

What the service does well

St. Johns provides very good standards of care and support in a clean, attractive and comfortable environment.

During our inspection we saw that residents appeared well cared for and were supported in a caring and respectful manner by staff. There was a good team approach to meeting the support needs of the residents and their relatives/carers.

The feedback we received from residents and relatives/carers indicated that they were satisfied with the standards of care and support provided and with the environment.

We heard and saw that requests for assistance were promptly responded to. Staff were seen to regularly check on residents who were less able to summon assistance and/or those who preferred to spend time in their bedrooms. This contributed to residents' safety and wellbeing.

Residents' personal plans and other care records guided staff on how each resident should be supported with their health and care needs.

There was improved provision of activities, which included both group and one to one activities, and recognised the importance of physical activity. This helps to support residents to maximise their mental and physical wellbeing.

Medication records were well maintained. Medication was stored appropriately and regular audits took place to ensure correct practice.

Staff were well supported and kept up-to-date with current best practice.

The home is set in attractive gardens. The resident areas were furnished and decorated to a good standard. There had been ongoing refurbishment since our last inspection visit which ensured that the home maintained its attractive appearance and was a pleasant and safe place to be.

Environmental checks were carried out thereby ensuring that the environment was safe and residents and staff were protected.

New staff had been recruited and inducted in a safe and robust manner to protect residents and staff. Professional record checks were regularly made to ensure that staff were appropriately registered.

A range of quality assurance systems monitored record keeping and service provision.

The management team demonstrated they were motivated to improve the quality of the service by promptly responding to identified areas of improvement, including feedback that we gave at the end of each of our visits.

What the service could do better

Noticeboards should regularly be updated to ensure people are kept informed about events.

Alternative meal and snack options were to be promoted.

In further developing the service's activities programme and meeting individual residents' needs we directed the service to the good practice resource pack "Care... about physical activity". Use of this tool will support the service to continue to make improvements in this area of care and also acknowledge what works well.

The service should improve the recording of hygiene records to evidence the level of care and support they are providing, this includes assistance with bathing or showering **(see recommendation 1)**.

We suggested ensuring that action points identified at residents' meetings are followed up at subsequent meetings and reported on in the minutes. This is so those attending the meetings can be reminded of the decisions made and given information relating to the progress of action points.

Staff who took charge of the home were to be reminded of the Care Inspectorate's document 'Guidance on notification reporting'.

Bedrooms at the rear of the home have patio doors giving direct access to the garden. Risk assessments should be fully completed, balancing residents' right to freedom with safety **(see requirement 1)**. In taking this forward the manager was in the process of obtaining estimates for fencing and gates to enable this area of the garden to be secured.

The service should review its risk assessment of hot and cold water systems to ensure appropriate monitoring is in place **(see recommendation 2)**.

In making further improvements to the service we directed the service to the good practice tool "The King's Fund Enhancing the Healing Environment Care Home Assessment tool" which helps service's to develop a more supportive environment for people with dementia. This will help to identify where improvements can be made to signage to help people find their way around the home and orientation aids.

The service should review its risk assessments for potential hot surfaces in resident areas to ensure potential hazards are minimised **(see recommendation 3)**.

Routine checks were to be made to ensure mattress turning charts were regularly completed.

We will follow-up these areas for improvement at the next inspection.

Requirements

Number of requirements: 1

1. Risk assessments should be fully completed on the use of the patio doors leading from bedrooms at the rear of the home, balancing residents' right to freedom with safety, in order to ensure potential hazards are minimised.

This is to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, SSI 210. Regulation 4.(1) A provider must make proper provision for the health, welfare and safety of service users.

This takes account of National Care Standards, Care homes for older people – Standard 4: Your environment and Standard 9: Feeling safe and secure.

Timescale: An action plan indicating how the service will meet this requirement is to be submitted to us within three weeks of receiving this report.

Recommendations

Number of recommendations: 3

1. The service should improve the recording of hygiene records, including when assistance has been given with bathing and showering, to evidence the care and support they are providing.

This takes account of National Care Standards, Care homes for older people – Standard 5: Management and staffing and Standard 6: Support arrangements.

2. The service should review its risk assessment of hot and cold water systems to ensure appropriate monitoring is in place.

This takes account of National Care Standards, Care homes for older people – Standard 4: Your environment.

In actioning this we directed the management team to the Health and Safety Executive's guidance "Health and Safety in Care Homes".

3. The service should review its risk assessments for potential hot surfaces in resident areas, including uncovered radiators, heated towel rails and the electric fire in the lounge, to ensure potential hazards are minimised.

This takes account of National Care Standards, Care homes for older people – Standard 4: Your environment.

In actioning this we directed the management team to the Health and Safety Executive's guidance "Health and Safety in Care Homes".

Complaints

One complaint was investigated and upheld since the last inspection. This resulted in a requirement and a recommendation. These have both been met.

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Inspection and grading history

Date	Type	Gradings	
10 Feb 2017	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
16 Dec 2015	Unannounced	Care and support	5 - Very good
		Environment	4 - Good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
12 Mar 2015	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
24 Feb 2014	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
28 Jan 2013	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
17 Feb 2012	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	4 - Good
		Management and leadership	Not assessed

Date	Type	Gradings	
28 Oct 2010	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed Not assessed
19 May 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 4 - Good Not assessed
25 Jan 2010	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed
10 Aug 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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