

Allanbank Care Home Service

Bankend Road Dumfries DG1 4AN

Telephone: 01387 249935

Type of inspection: Unannounced

Inspection completed on: 16 February 2018

Service provided by:

Embrace (Allanbank) Limited

Care service number:

CS2004057340

Service provider number:

SP2007009437



About the service we inspected

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

Allanbank is a care home registered to provide care and support for up to 67 people at any one time. The care home provides different levels of care and support to residents.

The service is registered to deliver care in three unit areas as follows:

Carlavin/Kelton Units - 12 beds of which Carlavin is for adults over the age of 18 with mental health conditions and/or neurological disorders and Kelton is for people with nursing needs.

Craigs Unit - 24 places for older adults with physical/sensory condition and/or memory impairment/ dementia requiring nursing care: further subdivided into Kissock Unit - eight residents, Glensone Unit - eight residents, Roan Unit - eight residents.

Glenkiln Unit- 31 places for older adults and older people with physical/sensory conditions and or memory impairment/dementia who do not require nursing care: further sub-divided into Drumburn Unit - eight residents, Dalquhairn Unit - eight residents, Meikle Unit - eight residents and Kier Unit housing seven people on a private basis.

At the time of this inspection, 53 people were living in the care home

Situated near the town centre of Dumfries, the care home is purpose-built, sitting in its own grounds, over two floors with disabled access, linked by a passenger lift. Unit accommodation is designed around two courtyard gardens with connecting unit corridors between Craigs and Glenkiln Units. The service has all single en-suite bedrooms which look out onto garden areas. Each unit has it's own lounge/dining area and access to garden space.

The service states that:

"every individual irrespective of their physical, social or psychological condition have the right to be treated with dignity and respect and to be supported to maintain choice and control over their own lives".

How we inspected the service

The purpose of this inspection was to follow up any progress made by the service from the last inspection in June 2017. We reviewed the recommendations made at the last inspection and also followed up on complaint activity and have not re-graded the service.

Since the last inspection, the service has undergone a change in manager and was in the process of changes following a change of provider.

We found that the service has fully met five recommendations out of seven made at the last inspection. We have repeated two to monitor progress. We also found that service had met a recommendation made from complaint activity.

Taking the views of people using the service into account

For this inspection, we received views from 12 people using the service. People were positive about the quality of care.

Comments included:

"I like living here"

Taking carers' views into account

We refer to relatives, friends and advocates as carers. They do not include care staff. Relatives largely commented positively about the service during this inspection. They stated:

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

It is recommended that the provider continues to develop the activities programme to ensure it reflects the up-to-date needs and preferences of service users, and that activities staff receive training appropriate to that role.

[&]quot;Yes, I can go out - the staff take me"

[&]quot;Staff are good - some better than others"

[&]quot;Yes- the staff come if I use my buzzer"

[&]quot;My room is lovely - I'm very happy here"

[&]quot;I can get something else if I don't like what's on the menu, but I like the food so, no complaints"

[&]quot;I think their activities are good - the activity staff are great"

[&]quot;My mum has dementia, the staff look after her very well"

[&]quot;The staff have been very welcoming"

National Care Standards, care homes for people with mental health problems and care homes for older people, Standard 17.1: Daily life.

This recommendation was made on 4 August 2015.

Action taken on previous recommendation

At this inspection, we found that the service has developed and introduced a very good planned programme of activities. We found that the two activity co ordinators had worked hard to implement a planned diary of events and group activities.

The service had taken account of peoples' wishes and preferences and worked hard to promote the health and wellbeing of people. Activity staff confirmed they had received support and access to training such as the NHS IDEAS team activity events and this had given them the opportunity to meet and share ideas with other services. In addition, the service was in the process improving the environment to enhance activities for residents. For example, the service had created a library, and planned to introduce a "bar" and activity room and make better use of grounds in the spring.

MET

Recommendation 2

The service should continue and demonstrate development of the keyworker role for staff, care management, life story work and meaningful activities. Personal planning should continue to be developed, to reflect the holistic care and support, including meaningful engagement, communication needs and positive outcomes for each resident.

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

This recommendation was made on 18 January 2017.

Action taken on previous recommendation

The service has continued to experience changes in staffing. The service is maintaining minimum staffing numbers, however, we found a feature of covering the rota meant staff changes in units made it difficult to build and establish meaningful relationships and provide continuity of care. The service has a keyworker system in place and residents were positive about the care they received. We found that the service was beginning to create a sense of community.

We have repeated this recommendation to monitor progress.

NOT MET

Recommendation 3

The service should continue to develop their training programme to Scottish Government Promoting Excellence, 2011 to an enhanced level for managers and nurses

National Care Standards, care homes for older people - standard 6: support arrangements.

National Care Standards, care homes for older people, Standard 5: Management and staffing arrangements Promoting Excellence framework, Scottish Government 2011.

This recommendation was made on 13 June 2017.

Action taken on previous recommendation

The provider had delivered training with support from the NHS IDEAS team at a skilled level. The service is in the process of implementing a training plan for all staff. This is to include Promoting Excellence at enhanced level.

We have repeated this recommendation to monitor progress.

NOT MFT

Recommendation 4

The service should ensure that residents have opportunities to engage in meaningful activities as part of life story work and key worker roles. In addition, staff should receive training in customer care.

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

This recommendation was made on 18 January 2017.

Action taken on previous recommendation

We found a calm atmosphere, supported by a more robust complaints procedure.

Staff presented as committed and caring and residents said they were listened to and their views sought about their routines and care needs.

MET

Recommendation 5

The service should continue to implement and develop their quality assurance systems and participation strategy. They should increase and demonstrate the extent to which it takes into account the views of residents, relatives and staff in improving the service. The service should introduce a development plan which clearly identify matters arising and action taken.

National Care Standards, care homes for older people - standard 11: expressing your views.

This recommendation was made on 18 January 2017.

Action taken on previous recommendation

The manager had a development plan which had been implemented and was in the process of introducing an updated plan for future goals for the service. Residents, relatives and staff views are taking into account through auditing and other means. For example, through surveys and feedback. The service had implemented changes in things that mattered to residents such as activities and mealtimes and menus.

MFT.

Recommendation 6

The provider should ensure that the complaints procedure is appropriate to the needs of service users. Any "concerns" raised by residents, relatives and staff should be treated with respect, thoroughly and fairly investigated, appropriate remedial action taken and documented as necessary. The provider and staff team should demonstrate a more customer care approach to issues raised by people using the service and the complaints process should be extended to ensure that a complaint has been fully addressed.

National Care Standard, care homes for older people - standard 5: management and staffing arrangements, standard 6: support arrangements and standard 11: expressing your views.

This recommendation was made in October 2016 and on 1 March 2017.

This recommendation was made on 13 June 2017.

Action taken on previous recommendation

The service has a more robust complaints process. Residents are asked their views in a variety of ways and issues raised are addressed timeously. This has resulted in a reduction of complaint activity and residents and relatives confirmed that they are confident about raising issues.

MET

Recommendation 7

The management of the service should ensure that the quality and content of notifications submitted are accurate and clear.

National Care Standard, care homes for older people - standard 5: management and staffing arrangements.

This recommendation was made on 13 June 2017.

Action taken on previous recommendation

Notifications submitted are sufficiently detailed, relevant and accurate.

MET

Recommendation 8

This recommendation was made as a result of complaint activity.

A record of all relevant communication with families and those representing people using the service should be kept and used to inform the care provided and any assessment of risk. The same standards of record keeping should be applied to people receiving a respite service as to people who are permanently resident.

National Care Standards Short Breaks and Respite Care Services, Standard 5 (7) (VIII) Management and Staffing Arrangements.

This recommendation was made on 17 January 2018.

Action taken on previous recommendation

We confirmed that the service has implemented the same recording systems for people receiving respite care as those who are permanently resident.

MET

Recommendation 9

This recommendation was made as a result of complaint activity.

The provider's newly updated pre-admission assessment should be fully used for all people using the service, including those receiving a respite service. The sections on equipment used by individuals, mobility aids, falls risk and use of bedrails should be fully completed and used to address needs and risks and to improve outcomes for people using the service.

National Care Standards Short Breaks and Respite Care Services, Standard 4 (1) Positive Experiences.

This recommendation was made on 17 January 2018.

Action taken on previous recommendation

At the time of this inspection, there were no residents receiving respite care and we could not confirm outcomes for people receiving respite support. We have repeated this recommendation to review care delivery at future inspections.

NOT MET

Complaints

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

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Туре	Gradings	
13 Jun 2017	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 3 - Adequate 3 - Adequate
1 Mar 2017	Unannounced	Care and support Environment Staffing Management and leadership	Not assessed Not assessed Not assessed Not assessed

Date	Туре	Gradings	
18 Oct 2016	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
23 Feb 2016	Unannounced	Care and support Environment Staffing Management and leadership	Not assessed Not assessed Not assessed Not assessed
4 Aug 2015	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
12 Mar 2015	Announced (short notice)	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
24 Nov 2014	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 2 - Weak 2 - Weak 2 - Weak
21 Aug 2014	Unannounced	Care and support Environment Staffing Management and leadership	1 - Unsatisfactory 2 - Weak 2 - Weak 1 - Unsatisfactory
13 Mar 2014	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 3 - Adequate 3 - Adequate 2 - Weak
10 Jan 2014	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate

Date	Туре	Gradings	
10 Oct 2012	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate3 - Adequate3 - Adequate3 - Adequate
28 Mar 2012	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed
8 Dec 2011	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed
2 Nov 2010	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 3 - Adequate Not assessed
1 Sep 2010	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 3 - Adequate 4 - Good
31 Mar 2010	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
24 Apr 2009	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 3 - Adequate 3 - Adequate
8 Dec 2008	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak 3 - Adequate 3 - Adequate 3 - Adequate

Date	Туре	Gradings	
4 Jul 2008	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate3 - Adequate3 - Adequate3 - Adequate

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