

## Grange Care Home Ltd Care Home Service

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Kilmarnock  
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Telephone: 01563 524877

**Type of inspection:**

Unannounced

**Completed on:**

31 May 2018

**Service provided by:**

Grange Care Home Ltd

**Service provider number:**

SP2004006800

**Service no:**

CS2004076623

## About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com).

This service registered with the Care Inspectorate on 1 April 2011.

Grange Care Home is a care home (with nursing) registered for 22 older people, including a maximum of three respite placements at any one time. The provider is Grange Care Home Ltd. At the time of the inspection, there were 21 residents living in the care home which is located in a residential area of Kilmarnock.

The care home is a converted period property consisting of 18 single bedrooms, 11 of which have en-suite facilities that include their own shower and another two having their own sink and toilet. There are also two shared rooms which have en-suite shower facilities. An open plan lounge, conservatory and dining area are located downstairs with good access to the garden.

The comprehensive aims and objectives of the service are centred around good quality care, a rewarding life experience and the rights of residents with a focus on:

- privacy
- dignity
- independence
- fulfilment
- citizens' rights.

## What people told us

We spoke to three residents and two relatives. The inspection volunteer, whose role within the inspection is to seek the comments and views of residents and relatives and make observations of routines and staff practice, spoke with 13 residents and five relatives. There were consistently high levels of satisfaction with the quality of the overall service. We also received 12 care standards questionnaires from residents and their relatives. When asked whether they were happy with the quality of the service, 10 respondents strongly agreed that they were and two agreed. Comments included:

"Nothing bad I could say. The staff are of good quality - they are very good with me."

"This is a good home. I would advise anyone to come here."

"You couldn't do better anywhere else."

"The home is what I imagined it would be like - it's very good. I also feel I can go to the staff with any problems."

"I like it - I think it's very good. If I wasn't here I would be sitting at home doing nothing. I can go to bed when I like. I went to bed at 11pm last night - me and a friend were sitting up laughing."

"Staff are very good with us - very polite."

"A lovely family run business - very family orientated."

"It's a weight off my mind knowing (relative) is safe and cared for."

"Pleased with all aspects of care – excellent."

"Staff are friendly – they respond quickly. If I need help, I get it. Activities are excellent."

## Self assessment

The service had not been asked to complete a self-assessment in advance of the inspection. We looked at their own development plans and the approach to quality assurance. These demonstrated that staff were monitoring the quality of the service and progressing the priorities for development to a very good standard.

## From this inspection we graded this service as:

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

## What the service does well

People should experience safe, high quality care and support that is right for them, taking account of their needs, wishes and choices. We found that people experiencing care had been treated with warmth, kindness and compassion. The staff team had the skills, knowledge and experience needed to deliver stable, high quality care and support using a person centred approach informed by good practice. Residents and their families told us that they had confidence in staff, trusting them to respond to changes and manage assessed health and wellbeing needs properly. We concluded that the skilled and enabling approach taken by staff had helped to reduce risks and had supported residents to stay as well as they could whilst promoting independence, personal choices and positive experiences. Comments included:

"I'm very happy with my (relative's) care – exceptional."

"To my knowledge the care staff in Grange nursing home treat residents with tender, loving care which I appreciate very much."

"There have been times when staff have gone over and above what is expected of them to help me."

"Can't fault it. Staff are excellent without exception. (Relative) has a lovely room. He's been on various trips and enjoys the company. Care and attention is excellent."

People told us that they were happy with the way staff had involved them when planning and reviewing the care provided. We found that meaningful involvement had been supported by the development of positive relationships and an inclusive culture where residents' views and choices, and those of their families had been sought and respected in a spirit of genuine partnership. As a result, people had been able to make informed choices and maintain control over their daily lives as much as possible.

Personal plans should give clear direction about how to deliver care and support and must reflect people's choices and preferences. This is important in ensuring that safe care is provided according to the needs and wishes of individual residents. We spoke with staff, looked at these records and focussed more closely on individuals receiving more complex support. It was evident that residents' health and wellbeing needs had been managed properly in an informed and responsive way. Overall, the content of personal plans was satisfactory with some areas for improvement.

To maintain wellbeing, residents need to receive the right medication at the right time. We confirmed that medication had been well managed. Robust monthly audits included a review of each resident's medication and follow up in relation to any issues or planned actions. We saw that external audits carried out by the supplying pharmacist had commented on the "excellent" standards being maintained.

Staff told us that they had been well supported by the management team and we saw that very good learning opportunities had been provided. Ongoing staff development had been monitored and well implemented including the approach to supervision, reflecting on personal practice and maintaining registration with professional bodies. We discussed the benefits of staff becoming more familiar with self directed learning resources such as the 'open badges' developed by the Scottish Social Services Council.

It is important that residents are supported to have an active life, participating in a range of creative social, physical and learning activities, both indoors and outside. It was evident that this had been valued as an important part of daily life. The lifestyle coordinator was highly motivated and very good opportunities for companionship, enjoyment, physical exercise and mental stimulation had been delivered with input from the wider staff team. Opportunities to get out and about also meant that residents had not become isolated from the wider community. We observed residents and their families enjoying time outside in the garden and using the thoughtfully developed resources that were easily accessible for anyone to use.

The service's involvement in the CAPA (Care About Physical Activity) project had further enhanced the enabling culture promoted by staff, resulting in positive outcomes for individual residents. We saw examples where strength, balance and mobility had improved. Residents had also been encouraged and supported to be more involved in household tasks, gardening and visits to the ability bikes at Ayrshire Athletics Centre, all of which supported people to be more active.

Care services benefit from strong, supportive leadership and a positive culture where people feel motivated and treat each other with respect, working effectively together to support good outcomes and experiences for people. This was evident and we saw that the management team delivered consistent, stable care and support informed by evidence based good practice within a clean, homely and well maintained environment.

A range of quality assurance checks and audits had been established to monitor performance on an ongoing basis. We saw that this had been carried out in a way that informed and promoted very good standards. The forward thinking approach and the commitment towards a culture of continuous development had seen the introduction of several good practice initiatives such as 'Playlist for Life', the 'CAPA' programme and involvement in the 'My Home Life' movement, all of which had benefitted individual residents. Work was also underway to raise awareness and understanding of the new 'Health and Social Care Standards'.

A recommendation made at the last inspection in relation to staff recruitment had been acted on and met.

## What the service could do better

We continued a recommendation made at the last inspection about the development of a localised dementia strategy. This is to support each individual living with dementia to achieve their potential and promote their right to personhood, full citizenship and optimum participation in daily and community life. The manager intended to progress this work using the learning and recommendations from the 'My Life, my care home' report on the experiences of people living with dementia in care homes in Scotland – see recommendation 1.

Personal plans should be improved to reflect residents' personal outcomes and experiences more fully as this was lacking in the six monthly reviews and care plan evaluations we looked at. Some care plans needed to be updated and a few records, including anticipatory care plans were incomplete, although we did see that this had been discussed at a staff meeting. These aspects of the personal plans we looked at did not reflect the in-depth knowledge that staff had about individual residents and how they had used this to inform care and support. A more detailed audit tool should be developed to quality assure the content of personal plans – see recommendation 2.

The dementia strategy should be added to the service development plan.

An annual schedule should be developed to inform the quality assurance framework reflecting the checks and audits undertaken and the minimum frequency.

Accident and incident records should be amended to include details about next of kin notification. This is in order to record in a consistent way that is easily checked and audited.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 2

1. An evidence based dementia strategy informed by best practice should be developed, setting out the approach to supporting residents living with dementia. This is to reflect the Health and Social Care Standards 4.11 "I experience high quality care and support based on relevant evidence, guidance and best practice."
2. Personal plans should be reviewed to address the areas for improvement identified and a more detailed audit tool should be developed to quality assure the content of these records. This is to reflect the Health and Social Care Standards 1.15 "My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices."

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Inspection and grading history

Date	Type	Gradings
24 Nov 2017	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership Not assessed
26 Sep 2016	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 5 - Very good
5 Jun 2015	Unannounced	Care and support 6 - Excellent Environment 5 - Very good Staffing 5 - Very good Management and leadership 6 - Excellent
3 Jun 2014	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 6 - Excellent
7 Jun 2013	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 5 - Very good
10 May 2012	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 5 - Very good
22 Oct 2010	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing Not assessed Management and leadership Not assessed
27 May 2010	Announced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good

Date	Type	Gradings	
		Management and leadership	5 - Very good
12 Jan 2010	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	Not assessed
29 May 2009	Announced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
26 Mar 2009	Unannounced	Care and support	Not assessed
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
16 Dec 2008	Announced	Care and support	5 - Very good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good

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