

## Auchinlea Care Home Care Home Service

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Largs  
KA30 9NU

Telephone: 01475 673500

**Type of inspection:**

Unannounced

**Completed on:**

26 June 2018

**Service provided by:**

Bertinaley Care Limited

**Service provider number:**

SP2006008166

**Service no:**

CS2006116406

## About the service

Auchinlea Care Home is a care home for older people who require residential care. The service is privately owned under the company name of Bertinaley Care Limited and is situated within a residential area in the coastal town of Largs, North Ayrshire. This service has been registered since 2006.

The accommodation is homely and welcoming. It is over two floors and consists of single bedrooms, most have an en suite toilet. There is a lift to get to the first floor. There is a lounge and a lounge/dining area. There are assisted bathing facilities and a well maintained garden.

Auchinlea can provide a service for up to 20 older people, including a maximum of four places for respite care. At the time of the inspection there were 17 people using the service.

## What people told us

For this inspection, we received views from 21 of the people using the service and relatives and carers. Overall, feedback was positive and indicated satisfaction in the quality of care, meals and accommodation at Auchinlea. Comments made included "I love it here, I have a lovely room, the staff are all very kind, the food is lovely and plenty of it." One lady said of the staff; "they are the best", this individual felt safe and well looked after.

One resident reported ongoing issues with the hot water temperature in their room. This was being investigated. One individual felt that fees were too high.

Comments made in care standards questionnaires from service users and relatives were as follows:

"Very happy with my care."

"Very clean smells good."

"Very happy overall with my care no complaints, very happy with my room, love to enjoy the lounge with my friends."

"Happy with care and support provided, very clean, notice all the work that goes in to keeping it so."

"Happy with all the care provided. No complaints. Home clean and tidy. No complaints."

"Good care, 1st class, no complaints, happy with the home, love my own room - garden and lounge."

"Very good care, settled in well, very happy place. Very clean and comfy home from home environment."

"Very happy and settled. Very clean smells nice."

"I have complete confidence in the staff at Auchinlea Care Home. My mother is very well looked after. I am always made welcome and I can discuss any concerns I may have with the staff. Nothing is too much trouble for them."

## Self assessment

The provider was not asked to submit a self-assessment prior to this inspection. Areas where improvements were planned were reflected in the service development plan.

## From this inspection we graded this service as:

Quality of care and support

3 - Adequate

Quality of environment

3 - Adequate

Quality of staffing

3 - Adequate

Quality of management and leadership

2 - Weak

## Quality of care and support

### Findings from the inspection

We observed staff treat residents with warmth, kindness and compassion. Staff had developed meaningful relationships with residents and relatives. However, there remained times when staff were task focused and where interaction could be better. This meant there were missed opportunities for meaningful engagement. We saw that privacy and dignity were considered during support interventions. People who experience care confirmed they were treated with respect and given choices in their day to day care.

A stable staff group provided consistency and continuity of care as staff knew of the care needs, choices and wishes of residents. This helped promote health and wellbeing as staff were able to recognise any deterioration in their presentation. Good links with external health care professionals had been established which helped people to stay as well as they could. Residents and staff told us there were enough staff to respond to residents needs.

To focus on what matters to individuals, care plans should be more outcome focused and more detailed to show how the care and support has been personalised for each individual. To ensure people get the support they need personal plans should be updated to reflect each individuals current needs. Positive outcomes for individuals may be better reflected if daily care records and care plan reviews focused more on the residents' experience. A series of risk assessments were used to help identify residents' needs. Residents would benefit from improved accuracy when completing these. The approach to reducing falls may be improved by streamlining the falls risk assessments used and ensuring that appropriate action plans are completed to direct staff in the interventions required to reduce falls. See recommendation 1.

Residents could be confident that their medication was being appropriately managed. However, adopting a more person led style of medication administration in accordance with each persons preferred daily routine would further enhance outcomes. There remained a few gaps in record keeping therefore we repeated a recommendation to allow further improvement. See recommendation 2.

Appropriate legal documentation was in place to support the decision process on behalf of individuals who were unable to do so.

Most residents said they were happy with the food served and that their preferences were accommodated. There had been a change in catering staff. Menus were being reviewed to ensure residents got the meals and snacks they liked. The cook discussed plans to reduce the use of ready prepared foods. Visual aids would support people with cognitive impairment to make meal choices. Catering and care staff were knowledgeable about people's needs and worked well together to ensure they were met.

Residents benefited from a range of recreational activities. This took account of physical activities and opportunities to go out. The service should continue to build upon this by improving the opportunities for getting outside, involving the local community and activities suitable for people who live with dementia. Physical activity is important in promoting wellbeing and should be further developed. The service was referred to the "Care about Physical Activity" resource pack.

Residents wellbeing can benefit from spending time with their named worker. Development of the key worker system would support meaningful activity and positive engagement. See recommendation 3.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 3

1. To ensure that residents' care and support meets their needs and is right for them personal plans should be improved to clearly detail their needs, wishes and preferences and set out how they will be met in a way they find acceptable.

This is to ensure care and support is consistent with the Health and Social Care Standard which states that: My personal plan (sometimes referred to as a care plan) is right for me because its sets out how my needs will be met, as well as my wishes and my choices. (HSCS 1.15)

2. To promote health and wellbeing and comply with best practice guidance. Medication records must be improved to accurately reflect when prescribed medication has been administered and the reason for any omission.

This is to ensure care and support is consistent with the Health and Social Care Standard which states that: I experience high quality care and support based on relevant evidence, guidance, and best practice. (HSCS 4.11)

3. To promote wellbeing, socialisation and engagement for people the service manager should improve the key worker system.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: I can maintain and develop my interests, activities and what matters to me in a way that I like. (HSCS 2.22)

**Grade:** 3 - adequate

## Quality of environment

### Findings from the inspection

Auchinlea was friendly and relaxed creating a warm and welcoming atmosphere. All bedrooms were single. Most had an en suite which promoted privacy and dignity. We saw that residents were encouraged to personalise their bedrooms to make them more homely. We found hairdressing treatments for all residents were carried out in a particular bedroom. To protect this individuals privacy this practice must be reviewed. See recommendation 1.

To make Auchinlea a pleasant place to live domestic and maintenance staff worked well to ensure that the accommodation was appropriately maintained and odour free. The safety check on the electrics was due. The manager agreed to notify us when this was completed. Less clutter would improve the overall presentation of the environment for those individuals living in Auchinlea. Some adaptations had been made to provide a supportive environment for residents who live with dementia. This is an area of on-going development and relates to a recommendation in theme 4 of this report about implementing a specific improvement strategy aimed at improving the quality of experience for those who live with dementia.

The main lounge was very crowded. Improved use of the communal space would make other areas more appealing to residents. This could be achieved by improving the lay out of lounges and identifying alternative areas for staff to have meal breaks and complete administrative work.

Residents needs were supported by a range of equipment, this was serviced and checked to promote safety.

Residents on the ground floor would benefit from bathing facilities on this level. The provider planned to install a wet floor shower facility on the ground floor. To improve privacy and choice for residents this should be progressed. see recommendation 2.

Residents benefited from free access to a small, secure and well maintained garden area. This enhanced their independence.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 2

1. To promote privacy the service must not use an individuals' personal bedroom space for the purposes of general hairdressing.

This to ensure that care and support is consistent with the Health and Social Care Standards which state that: "I am supported to understand and uphold my rights." (HSCS 2.3)

2. To improve privacy and choice for residents the provider should improve the shower/ bathing facilities on the ground floor.

This to ensure that care and support is consistent with the Health and Social Care Standards which state that: the premises have been adapted, equipped and furnished to meet my needs and wishes. (HSCS 5.16)

**Grade:** 3 - adequate

## Quality of staffing

### Findings from the inspection

The staff team engaged with inspectors and presented as being motivated to provide high standards of care.

Overall, residents and relatives spoke positively of the staff team. We saw many good examples of positive engagement and staff responding to residents with patience and compassion. This helped promote a pleasant and relaxed atmosphere. We also observed occasions where staff interaction could have been better.

Residents could be confident the provider monitored staff registration status with their regulatory bodies and employed safe recruitment procedures. Some aspects of the recruitment process should be enhanced to achieve full compliance with best practice guidance document "Safer Recruitment through Better Recruitment" on the Care Inspectorate HUB.

To support staff development there was a schedule of one to one supervision sessions where staff could discuss training, practice and development issues with their line manager. The deputy manager acknowledged that improvements could be made. This may be achieved through supporting staff to reflect on their work practice and learning. This would help individual staff members of staff to identify what they do well and where they need to improve their knowledge base and skills. The manager was directed to the SSSC "step into leadership" on line resource to support improvement in this area.

Residents should be confident that staff are appropriately skilled. To support this there was an ongoing training programme to support staff to attain the required SVQ qualifications to register with the SSSC (Scottish Social Services Council). Staff had attended training in a range of relevant areas. To promote best practice and support staff to gain the skills, knowledge and competence to meet the needs of residents ongoing training in Palliative Care and completion of the 'Promoting Excellence Framework' dementia training programme was planned. We have made a related recommendation in theme 4 of this report regarding the implementation of a specific improvement strategy aimed at improving the quality of the experience of individuals who live with dementia.

We have made a recommendation in theme 1 relating to developing the key worker role to support improvement in residents wellbeing through meaningful activity and engagement.

### Requirements

**Number of requirements:** 0

### Recommendations

**Number of recommendations:** 0

**Grade:** 3 - adequate

## Quality of management and leadership

### Findings from the inspection

Care services benefit from strong, supportive leadership. Residents, relatives and the staff team commented that a recent temporary disruption to the management arrangements had not significantly impacted on the overall operation of the service. Staff commented that managers were approachable and responsive. An open door policy and a regular meeting schedule with residents, relatives and staff promoted good communication. It was evident that the manager enjoyed a good rapport with residents and relatives. This helped the manager to resolve any issues promptly.

Recent organisational issues had resulted in some staff feeling less valued. However, we saw that the provider had taken steps to offer reassurance to the staff group about the future of the service.

Effective quality assurance systems support ongoing improvement. Residents could be confident that the quality of aspects of the service were being monitored. Quality assurance would be improved by using short periods of observation to help capture the experiences of people living in Auchinlea. This would allow reflection on good practice observed and where practice could be further developed to promote improved quality of life for residents. Care Plan audits should be improved to ensure residents needs are accurately assessed and planned care reflects people's needs and wishes. See recommendation 1.

Managers demonstrated a strong commitment to improving the service by producing a service improvement plan. This would be enhanced by the inclusion of a specific dementia improvement strategy. See recommendation 2. A self evaluation exercise based on the new Health and Social Care Standards may help to inform the improvement plan. Residents, relatives and staff should be involved in evaluating the service.

Where the service stores money on their behalf, residents can expect a safe, secure and well managed system of recording, receipting and auditing. However, we identified discrepancies in some residents personal funds. The provider ensured that shortfalls in residents funds was immediately replenished. The service informed and cooperated with the appropriate agencies and took steps to improve the systems in place so that residents could be confident their money was safe. The provider planned conduct an investigation into this matter. This has influenced the grade awarded for this quality theme. We will continue to monitor practice in this area outwith the inspection process. See requirement 1.

Residents and relatives could be confident that systems were in place to deal with concerns or complaints.

### Requirements

#### Number of requirements: 1

1. The provider must improve the systems in place to ensure that money held on behalf of service users is securely stored and appropriately managed. To do this the provider must:

- Ensure clear financial policies and procedures for the management of residents' funds are documented and evidenced in practice.
- Implement proper controls to limit access and ensure safekeeping of residents funds.

- Ensure that regular reconciliations are performed between the cash and account balances held for residents and the individual residents' account balances in the records maintained by the management of the home to ensure that the records are correct. These reconciliations should be performed by one member of staff and evidenced by another.

This is to ensure that practice complies with the Regulation 4 - Welfare of Residents and Regulation 14 - Facilities in Care Homes of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/2010).

Timescale for compliance: 30 July 2018.

## Recommendations

### Number of recommendations: 2

1. To promote positive outcomes for people who experience care. The provider must ensure that quality audits are improved to ensure that deficits in practice and record keeping are detected to effect continued improvement.

This to ensure that care and support is consistent with the Health and Social Care Standards which state that: I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.  
(HSCS: 4.19)

2. To support the provision of quality care and support, to people who live with dementia, the service should devise a specific dementia improvement strategy based on best practice guidance. This should take account of the skills of the staff, meaningful recreational activity and the care home environment. Residents, relatives and staff should be involved in the development of this.

This is to ensure care and support is consistent with the Health and Social Care Standard which states that: My care and support meets my needs and is right for me. (HSCS1.19).

**Grade:** 2 - weak

**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

To promote health and wellbeing and comply with best practice guidance. Medication records must be improved to accurately reflect when prescribed medication has been administered and the reason for any omission.

National Care Standards, Care Homes for Older People – Standard 6: Support arrangements, Standard 5: Management and staffing and Standard 14: Keeping well – medication.

**This recommendation was made on 3 October 2017.**

#### Action taken on previous recommendation

Overall, there was an improvement in record keeping, however, we continued to find gaps in recording. This recommendation is repeated to allow further improvement.

### 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).

### Enforcement

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

## Inspection and grading history

Date	Type	Gradings
20 Sep 2017	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
23 Mar 2017	Unannounced	Care and support Not assessed Environment Not assessed Staffing Not assessed Management and leadership Not assessed
6 Oct 2016	Unannounced	Care and support 3 - Adequate Environment 3 - Adequate Staffing 3 - Adequate Management and leadership 3 - Adequate
26 Nov 2015	Unannounced	Care and support Not assessed Environment Not assessed Staffing Not assessed Management and leadership Not assessed
29 May 2015	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 3 - Adequate Management and leadership 3 - Adequate
29 Jan 2015	Unannounced	Care and support 3 - Adequate Environment 3 - Adequate Staffing 3 - Adequate Management and leadership 4 - Good
23 May 2014	Unannounced	Care and support 4 - Good Environment 3 - Adequate Staffing 3 - Adequate Management and leadership 4 - Good

Date	Type	Gradings	
24 Jan 2014	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
5 Nov 2013	Unannounced	Care and support Environment Staffing Management and leadership	1 - Unsatisfactory 3 - Adequate 1 - Unsatisfactory 2 - Weak
23 Apr 2013	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
29 Nov 2012	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 4 - Good
25 Oct 2012	Re-grade	Care and support Environment Staffing Management and leadership	Not assessed 3 - Adequate Not assessed Not assessed
7 Jun 2012	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 2 - Weak 3 - Adequate 3 - Adequate
15 Nov 2011	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 4 - Good
9 Jun 2011	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 3 - Adequate 2 - Weak 4 - Good

Date	Type	Gradings	
12 Jan 2011	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 3 - Adequate Not assessed Not assessed
6 Jul 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good 3 - Adequate Not assessed Not assessed
5 Feb 2010	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 3 - Adequate Not assessed Not assessed
21 Aug 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good 2 - Weak 4 - Good 4 - Good
9 Mar 2009	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
4 Sep 2008	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate 2 - Weak 3 - Adequate 2 - Weak

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