

Meigle Country House Care Home Service

Dundee Road
Meigle
Blairgowrie
PH12 8SE

Telephone: 01828 640859

Type of inspection:

Unannounced

Completed on:

31 May 2018

Service provided by:

Priority Care Group Limited

Service provider number:

SP2003000048

Service no:

CS2003041947

About the service

Meigle Country House is located on the outskirts of Meigle village and sits in its own grounds, with views of the surrounding countryside. The service is registered to provide a care service for up to 23 older people, including up to two respite/short-term care.

All residents are accommodated in single rooms and 22 of these rooms have en suite facilities.

Meigle Country House's aims are:

- Building trusting relationships and find out what's important to people in everyday life.
- To empower and support the staff team to deliver the highest quality of care.
- To provide a homely and welcoming environment where everyone feels included.
- To maintain the open and transparent culture to ensure everyone has a say.
- To base all our actions on the principles of care.

This service is provided by Priority Care Group.

This service has been registered since 22 September 2003.

What people told us

We sent out 14 Care Standards Questionnaires (CSQs) to people using the service, relatives, and staff prior to our inspection. Four were returned to us. During the course of our inspection we also spoke to 10 residents, four relatives, and five members of staff. Most of the comments that we received about the service were very positive and are reflected here:

People using the service:

- "The staff are nice, that's the main thing."
- "The food is nice."
- "I used to do a lot of walking."
- "I have choices about my care."
- "I have a connection with some staff, others I don't."
- "I would be happier in a bigger room."
- "I haven't been out for a very long time, since getting a wheelchair I hope to get out more, I love the garden."
- "There is always a choice of food."
- "The management is good, their advice is good, I trust them."

- "The staff treat everyone with respect, no difference between people here."
- "The tea is too milky, just because I am old, doesn't mean I don't want a good strong, hot cup of tea!"
- "Everyone is very helpful, nothing is too much trouble."
- "The manager is very helpful."
- "Not as much support after hours."
- "If you ask for anything, you get it."

Relatives:

- "My relative is safe here."
- "I have no concerns."
- "It's a relaxed home, not clinical."
- "My relative is well looked after."
- "The manager is approachable."
- "Everyone is happy and welcoming."
- "The staff get to know the relatives really well."
- "The only problem is clothes going missing in the laundry."
- "I would recommend this place to anyone."
- "My relative had a birthday party in the conservatory."

Staff:

- "We all work well together as a team."
- "I really enjoy working here; its good because it's small."
- "We haven't had a staff meeting for a long time."
- "I am happy to come to work."
- "There is always support from the staff."
- "Manager is approachable, they always explain why things need to be done."
- "I don't get time to do the e-learning training courses."
- "If I'm honest, there isn't enough activities, though things have improved recently."

- "Would be good to get more people out and about."
- "It's well laid out."
- "We all get on really well."

Self assessment

The service had not been asked to complete a self assessment in advance of the inspection. We looked at their own improvement plan and quality assurance paperwork. These demonstrated their priorities for development and how they were monitoring the quality of the provision within the service.

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

We found that the service was operating at a good level for the quality of care and support and at a good level for the quality of management and leadership.

The service had worked hard to improve some areas of the home, especially in the lounge/dining room and bedrooms. A programme of refurbishment was ongoing at the time of our inspection.

We spoke to people living at the service, relatives, and staff who said that they thought that "Meigle Country House felt like a home", "I feel safe", and that "staff and managers are friendly and supportive". We saw that staff talked to people respectfully and supported people at a relaxed pace. The manager was visible in all areas of the home and made herself available to residents, staff, and relatives during the course of our inspection. It was good to see that the staff group were stable, with some members of staff working for several years at the service. This meant that they understood the needs of people well and were familiar with all areas of the home.

The service had looked at ways to improve activities within the home since our last inspection and had provided additional hours to support meaningful days. We found that the range of activities had been extended and the activities coordinator had ideas that she wanted to develop over the coming months. We shared some resources with the manager of the service and this will be an ongoing area of development.

We observed the dining room over a lunchtime period and found that staff were patient and kind and ensured that people's dignity was respected. People told us that the food was good and that there was always a choice available. We were pleased to see that there was a system in place to monitor people's dietary intake, preferences, and aids required to support independence during mealtimes.

We looked at support plans and found that they held relevant information about the support needs of each person. We saw that there was appropriate support and involvement from peripatetic professionals, such as the GP, district nurses, podiatry services, and mental health services.

It was good to see that the service was supporting some residents to manage their own medications, where this was safe to do so. This supported people to have more control over the timing of when they wanted their medication and to feel more in control of their own care.

The manager and deputy manager had both undertaken additional learning and development over the past year which included training in palliative care. The service was in the process of developing anticipatory care plans, and looking to work with residents and relatives to ensure that these were meaningful and person-centred.

What the service could do better

People and their representatives should expect to be involved in the planning and reviewing of their care. This is important to ensure that identified needs and interests are reflected and that support plans take account of any changes that are required. We found that reviews had not been carried out at six-monthly intervals, as is required of all services. This meant that we could not be confident that people had been consulted about their support or that plans accurately reflected people's stated outcomes **(see requirement 1)**.

People should expect to be able to control the heating and ventilation in their own bedrooms. Our inspection was conducted over two warm days and some residents and relatives told us that their bedrooms were too hot. This impacted on their quality of sleep and comfort. We found that these areas were very warm and fed this back to the provider, who assured us that they would look to resolve these issues as soon as possible.

Although hours had been increased for activities, some people expressed that there was not enough activities of choice. For example, one person said that she liked to walk but didn't often get opportunities to do this. When we discussed this with staff, they agreed, that although things were improving, there were still long periods when people were not engaged in meaningful activities. We also found that support plans did not always evidence people's preferred activities or how they would be supported to access these. The manager was looking at how all the staff could support meaningful days for people living at this service.

We found that although training courses were available via e-learning, some staff were not up to date with all their mandatory training requirements. People should have confidence that staff are trained, have the necessary skills, and can reflect on their practice. This is essential to ensure that staff are using safe practice and fully understand their responsibilities at work. We also discussed the importance of training to ensure that staff maintained their requirements for registration with the Scottish Social Services Council (SSSC) **(see recommendation 1)**.

We looked at a range of support plans and found that, although they contained a lot of clinical information about individuals, there was little personal information relating to preferred activities and meaningful days. We shared information to support improvement in these areas.

We found that although staff were receiving some supervision, it was not clear how often this was happening and there was little detail of discussions recorded. We found that there were missed opportunities for discussion about practice and learning and development needs. We shared resources with the manager to support improvement in this area **(see recommendation 2)**.

Requirements

Number of requirements: 1

1. The provider must make sure that personal support plans are reviewed with each resident and their carers or representatives, if appropriate, at least once in each six month period to ensure that the care and support provided continues to meet the needs of each individual. The provider should keep a record of these meetings and a minute taken. Minutes should contain a summary of the discussion held, the decisions made as a result of the discussion, and when this will be reviewed again. This should be implemented by 30 October 2018.

This is to ensure that care and support is consistent with the Health and Social Care Standard which states "My care and support meets my needs and is right for me" (HSCS 1.19).

It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 5(2)(b) - A provider must review the personal plan at least once in every six month period.

Recommendations

Number of recommendations: 2

1. The provider should ensure that staff receive appropriate training to ensure they can deliver service users' care in a safe, respectful, and supportive manner. In order to comply, the provider must:

(a) Demonstrate that all staff receive appropriate training to carry out the work they are to perform.

(b) Implement a written action plan to meet the training needs identified.

(c) Ensure that there is an effective system in place to monitor that staff are implementing the care service's policies and procedures and to identify where further training and support is necessary.

This is to ensure that care and support is consistent with the Health and Social Care Standard which states "I have confidence in people because they are trained, competent, and skilled and are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

2. The provider should ensure that staff receive supervision at the required intervals, as stated in their own policies and procedures. This is to support effective practice, good conduct, and staff to address deficiencies in their performance and to identify supports requires.

Scottish Social Services Council (SSSC) - Code of Practice for Employers.

Complaints

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
25 May 2017	Unannounced	Care and support 5 - Very good Environment 4 - Good Staffing Not assessed Management and leadership 5 - Very good
27 Apr 2016	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership Not assessed
14 Jul 2015	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
15 May 2014	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
17 Jul 2013	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and leadership 4 - Good
17 Apr 2013	Re-grade	Care and support 2 - Weak Environment Not assessed Staffing Not assessed Management and leadership Not assessed
17 Aug 2012	Unannounced	Care and support 5 - Very good Environment 4 - Good Staffing 5 - Very good Management and leadership 4 - Good
23 Nov 2010	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed

Date	Type	Gradings	
		Management and leadership	Not assessed
23 Jun 2010	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	5 - Very good
21 Sep 2009	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed
15 Apr 2009	Announced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
28 Oct 2008		Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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