

# St. Mary's Care Home Care Home Service

39 Panmure Street Monifieth Dundee DD5 4EG

Telephone: 01382 533376

## Type of inspection:

Unannounced

## Completed on:

30 June 2018

## Service provided by:

RC Diocese of Dunkeld

## Service no:

CS2015337290

Service provider number:

SP2015012478



## About the service

St. Mary's Care Home is a service for older people set in the Angus town of Monifieth. It is registered to provide 24 hour care for up to 30 people.

The home provides residential care for people. It has strong links to the local Catholic Church.

The service was registered with the Care Inspectorate on 27 July 2015.

## What people told us

We asked the manager to issue 10 care standard questionnaires (CSQs) to each resident and relatives. All relatives returned these and three residents did.

Of the 13 responses all said that they either agreed (4) or strongly agreed (9) that they were overall happy with the standard of care in the home.

We spoke directly with six residents and four families during our visit.

Their comments included:

'The managers set very high standards here'.

'Everyone is really good, I know most of the staff well'.

'No issues whatsoever'.

'Very good'.

'There is good entertainment, something to do everyday'.

'The girls are very caring'.

'They are lovely'.

'I'm very happy here'.

'It's like a big family'.

#### Self assessment

We did not request a self assessment this year.

## From this inspection we graded this service as:

Quality of care and support5 - Very GoodQuality of environment5 - Very GoodQuality of staffing4 - GoodQuality of management and leadership4 - Good

## Quality of care and support

#### Findings from the inspection

People should experience high quality care and support that is right for them. Residents told us that this was a good place to live and that they felt safe and secure.

Relatives told us they felt confident that their relatives were well cared for.

We observed staff to be kind and caring towards people, and to involve them in decision-making.

People's health benefited from their care and support. Staff helped them access other health professionals to meet specific health needs. We spoke with a visiting health professional and she told us that she was confident in the support people received at St. Mary's

Regular health assessments were carried out and, where someone had a health need, there was a care plan in place. This helped to ensure that health issues were monitored and addressed promptly.

The service had improved their medication systems in relation to topical applications. We were satisfied that all medications were being given as prescribed. This helped maintain or improve people's health.

We asked people about the quality of meals and mealtimes. They were very complimentary about the choices and quality of food. We saw that during the hot weather people were provided with extra drinks, fruit and icelollies. This helped to keep people hydrated.

Residents continued to participate in a variety of activities each day. They spoke very positively about these and specifically about enjoying the garden. Plans were progressing for the sensory garden.

#### Requirements

Number of requirements: 0

#### Recommendations

Number of recommendations: 0

Grade: 5 - very good

## Quality of environment

#### Findings from the inspection

People lived in an environment that was clean and well maintained. There were several communal areas for people to use. Quiet lounges allowed residents to receive quests in privacy.

Each person had their own room which they were able to decorate and personalise to their preference. We heard that people had been offered the choice to move rooms when bedrooms with more facilities had been opened in the new extension.

People were enjoying getting out in the garden. We also saw one person walking in the garden supported by staff on our evening visit.

The range of activities planned included groups from the local community visiting. Some residents also enjoyed getting out either on the home's bus or to a local reminiscence group 'Café of Memories'.

#### Requirements

Number of requirements: 0

#### Recommendations

Number of recommendations: 0

Grade: 5 - very good

## Quality of staffing

#### Findings from the inspection

People should have confidence that their staff team support and care for them well. Residents told us that they got on very well with the staff. They told us staff responded to them promptly when they summoned assistance and responded to any requests they had.

People told us that staff were kind, caring and respectful to them. This was consistent with our observations during the inspection. We saw some people being supported to mobilise, with encouragement and reassurance whilst maintaining as much independence as possible.

The service had continued to provide a range of training opportunities for staff, this included mandatory training as well as some additional training specific to people's needs. However, dementia awareness training had not progressed as expected. We signposted the manager to the Promoting Excellence Framework and associated learning resources. (See recommendation one)

People should be confident that staff supporting them have been recruited safely. We sampled recruitment files of recently employed staff. Appropriate safety checks (references and protection of vulnerable groups) had been carried out. We asked the service to review the interview process to ensure this was competency based.

#### Requirements

Number of requirements: 0

#### Recommendations

#### Number of recommendations: 1

1. The provider should ensure that staff receive the appropriate level of dementia awareness training.

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

Grade: 4 - good

## Quality of management and leadership

#### Findings from the inspection

People should be confident that their service is well led and have systems in place to help identify aspects of the service that are working well and where improvements would benefit people.

At the inspection in August 2017, we asked the service to ensure that there was an appropriate system in place to monitor the safety of the environment. The service had made some progress by the last inspection in February 2018 and had by this inspection fully implemented a range of risk assessments, audits and taken actions where identified improvements were needed.

Residents, visitors and staff all told us that they felt supported and could approach the management team at any time, and they would try to resolve any issues.

Regular meetings supported people to be involved in developing the service, residents felt they were listened to and any suggestions actioned, where possible.

A specific dementia improvement strategy should be considered to promote staff knowledge and learning, best practice and positive outcomes for people living with dementia.

#### Requirements

Number of requirements: 0

#### Recommendations

Number of recommendations: 0

Grade: 4 - good

What the service has done to meet any requirements we made at or since the last inspection

## Previous requirements

#### Requirement 1

The provider must ensure that there is an appropriate system in place for carrying out and monitoring the safety of the environment. This includes ensuring that they manager has an overview of all systems in place and monitors these.

This must include (but is not limited to):

- Developing environmental risk assessments and taking steps to minimise risks identified.
- Carrying out regular and planned environmental audits.

This is to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 10

This requirement was made on 1 February 2018.

#### Action taken on previous requirement

A range of risk assessments had been carried out, the manager carried out some audits and delegated others. She had a good overview of all systems in place.

Met - outwith timescales

## What the service has done to meet any recommendations we made at or since the last inspection

#### Previous recommendations

#### Recommendation 1

In order to ensure that staff are able to offer people the correct support, care plans should reflect all support needs and their role in meeting these needs.

Health and Social Care Standards - Responsive Care and Support (1.25)

#### This recommendation was made on 1 February 2018.

#### Action taken on previous recommendation

The service continued to make improvements to the care plans. We discussed that some areas of the plans would benefit from further scrutiny to ensure clear guidance was in place.

#### Recommendation 2

In order to maintain people's health, staff should ensure that topical medications are applied as prescribed and records kept that these have been applied.

Health and Social Care Standards Experiencing My Care and Support - My care and support meets my needs and is right for me. (1.19)

#### This recommendation was made on 1 February 2018.

#### Action taken on previous recommendation

We examined topical medication administration charts and were confident that people were now receiving their creams and lotions. People also told us that staff did give them their topical medication.

#### Recommendation 3

The service should revise recruitment practices to ensure that people can be confident that staff who care for them have been recruited safely.

Health and Social Care Standards - Wellbeing 4.24

#### This recommendation was made on 1 February 2018.

#### Action taken on previous recommendation

We examined a sample of recruitment files and saw that people had been recruited safely. We discussed with the manager the benefits of competency based interview questions.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

## Enforcement

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

## Inspection and grading history

| Date        | Туре        | Gradings  |   |
|-------------|-------------|---|---|
| 8 Aug 2017  | Unannounced | Care and support Environment Staffing Management and leadership | <ul><li>3 - Adequate</li><li>3 - Adequate</li><li>3 - Adequate</li><li>3 - Adequate</li></ul> |
| 14 Feb 2017 | Unannounced | Care and support Environment Staffing Management and leadership | Not assessed<br>Not assessed<br>Not assessed<br>Not assessed                                  |
| 6 Jun 2016  | Unannounced | Care and support Environment Staffing Management and leadership | 4 - Good<br>4 - Good<br>3 - Adequate<br>3 - Adequate  |

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