

Drummond Grange Nursing Home Care Home Service

7 Kevock Road
Lasswade
EH18 1HT

Telephone: 0131 654 2881

Type of inspection:

Unannounced

Completed on:

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Service provided by:

Barchester Healthcare Ltd

Service provider number:

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Service no:

CS2003010630

About the service

This service has been registered since 2002. Drummond Grange Nursing Home is in the village of Lasswade. It provides accommodation and nursing care for up to 111 people. The service provider is Barchester Healthcare Ltd.

The home is a large detached building set in its own grounds with car parking facilities. On the ground floor there are Buccleugh and Melville units. These provide care for adults with physical disabilities. Upstairs there is one recently merged unit called Pentland/Kevoch which provides care for adults with physical disabilities and for older people. Plus, the Dalhousie unit upstairs provides care for older people living with dementia

There are dining and sitting rooms on each floor plus a dedicated exercise/physiotherapy suite and a sensory room on the ground floor. There are plans to provide a sensory room in Dalhousie unit also.

A pleasant courtyard is located in the centre of the building with outdoor seating areas. The aims and objectives of the service state: "At Drummond Grange Nursing Home we aim to be person centred in our approach to care. Our residents will be encouraged to live an independent life, rich in purpose, meaning and personal fulfilment. They will be helped to access all services and amenities available and appropriate to their needs and wishes within the community.

They will be valued for their diversity, language, culture and faith. Through this, each resident will attain and achieve all they can, making the most of all resources available to them."

What people told us

Before the inspection we received 13 Care Standard Questionnaires from residents and 19 care service questionnaires from relatives. These comments were mostly positive, though some people did suggest some improvements.

People said: "Nothing is any bother for them. It's a great place for my relative to stay. Plenty to do keep them occupied", "I am very happy with the care my husband received at Drummond Grange. Staff at all times are bright cheerful and I feel they really know my husband which makes me very happy" and "It can be very noisy at times", "Staff know I don't like broccoli but it still appears on my plate. Would like more offers of Chinese and Indian food."

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our leadership?	not assessed
How good is our staffing?	not assessed
How good is our setting?	not assessed
How well is our care and support planned?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

The service is performing at a very good level for key question one 'How well do we support people's wellbeing?'

We saw staff interact with residents in a kind and caring way. We found residents experiencing compassion, dignity and respect. We observed staff interactions to be genuine, warm and accepting of residents, while at the same time enabling and collaborative.

We looked at all areas of the home. In particular, we found that the way that Dalhousie unit was organised was comforting and enabling for a person living with dementia. Staff were very informed about people's likes and dislikes and what might help people feel better. This is very important as people living with dementia can find it difficult to say how they feel. Staff's attentiveness and knowledge gave us confidence that people's needs would be met and respected.

We saw that meal times were relaxed. Staff assisted people discreetly if help was needed. Staff also helped people to choose their favourite from the menu. We saw that there was plenty of meal choices for people. This tells us the service values people and wants to get it right.

Relatives told us that they very much had confidence in the service. They told us that they were informed promptly if their relative was sick or there was a change to their relatives health. This gives us confidence that people experience very good outcomes in the care they receive.

We saw that the service was very clean. This tells us that people's dignity and respect is important to the service. We heard that the service checks on people regularly when they are in their rooms.

However, we heard that people could choose if they wanted to opt out of this. This gives us further confidence that choice and privacy is also important to the service.

We saw that the service frequently observed how staff were interacting with residents and frequently checked the environment for safety and cleanliness. This tells us that the service strives to have very good standards of care.

Two residents did comment that sometimes there was not enough staff. We checked the rotas and found that there were slightly more staff than minimally required. We saw that the service worked out monthly how many staff it needed based on residents' needs.

We looked at staff recruitment and we found two areas where improvements could be made to give greater confidence that good outcomes are assured. This was in regard to staff recruitment and specifically about the total number of references received and the total number of interviewers for candidate selection. The service agreed to review their practices in this area and we have confidence that they will do so.

We were confident about the service's ability to meet residents' health needs. We saw that the service had a good way to overview residents most at risk of pressure ulcers and weight loss. We also saw that the service was good at making sure that people's skin was monitored regularly to maintain skin health.

We checked how the service helped residents manage their oral care and we saw they did this in a very good way. Residents had toothpaste prescribed as necessary and residents who needed assistance with their oral care received this as frequently as was required. We could see this was recorded in a way which gave confidence that needs were met. We advised on a small change to the way that this is recorded to give greater clarity.

We looked at the way that medicines were administered and found this to be very good. We advised at the time of how the recording of the administration of pain patches could be improved slightly. The service acted on our advice at the time and this was completed almost immediately.

We found that some improvements could be made by increasing the amount of aprons and gloves available for staff and ensuring that hygienic wipes were stowed away discretely. The service took this on board. Residents' health can be negatively affected if staff do not have ready access to this equipment.

At this inspection we saw improvements to activities and meaningful engagement. This is important as it helps people get the most out of life. We heard that the service had identified two groups of residents that would benefit more from one-to-one activities rather than structured group activities. We saw that some people had very personalised plans exploring what they like to do and how often. This recorded their hopes and dreams.

We heard that some residents had started swimming and other residents went on regular trips out to the shops and to local shows. The service was also considering providing cycling. We saw and heard that residents regularly visit the full time physiotherapist at the service's dedicated gym. Resident told us what a difference this resource made to their well being. One resident told us that his mobility had improved since being at the service. He could now walk a distance after targeted therapy. This was not possible prior to admission. However, we saw that some residents in specific parts of the home did not get the most out of life, all of the time. Sometimes there were delays in meeting people's specific physical or mental health needs. We discussed this with the service at the time and they agreed to ensure that all needs were met in a timely way. We saw that having suitable choices about how to spend one's time still needs further development across all parts of the service and we will look at this again at the next inspection.

How good is our leadership?

This key question was not assessed.

How good is our staff team?

This key question was not assessed.

How good is our setting?

This key question was not assessed.

How well is our care and support planned?

5 - Very Good

The service is performing at a very good level for key question 5.1 How well is our care planned?

We saw that the recording of information was very good. This includes care and support planning, care and support evaluation and reviews of care and support.

In particular, we looked at the how residents' needs were met and recorded for people living with dementia who may experience stress. We found that the information was very detailed and very person centred. Assessments and care planning reflected people's needs and wishes. We did on occasion see that there may have been differences between what residents may want and what relatives may want. We have asked the service to explore this further and to amend care plans as needed.

We saw that reviewing of needs was carried out regularly and relevant professionals and relatives were invited and recorded as attending. This is important so that the review is as meaningful and as effective as possible.

We did see regular evaluations of care needs. On occasion, we saw that all changes were not always transferred to all new care plans. We have asked the service to ensure there is continuity across all care plan areas.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

It is recommended that care is organised in a more person centred way. This means that the service promotes emotional needs, details their rehabilitation goals and details and evaluates regularly what activities people want to do indoors and outdoors.

National Care Standards, Care Homes for Older People, Standard 14.

This area for improvement was made on 2 October 2017.

Action taken since then

We could see that the service had reviewed the way it was providing meaningful interaction. It had identified two groups of residents that would benefit from more one-to-one interactions as opposed to structured group activities. The service had appointed a dedicated staff member to this task. The way the service records people's needs had changed to be firstly all about the resident and then about what help they may need.

The service had started to discuss with residents about what matters to them and what would be their hopes and dreams. This was recorded in a new individual book stored in residents' rooms. For some residents a memory book had been started. This shows with photos and comments what the resident has been doing. This helps relatives to see directly what residents have been doing. This new way of working was still a work in progress and needed to be rolled out to all areas of the service. This is something that we will look at again at the next inspection.

National Care Standards, Care Homes for Older People, Standard 4.

Previous area for improvement 2

It is recommended that the service has the overview of the maintenance schedule for all maintenance jobs so that the service can ensure that all maintenance checks are carried out in a timely way.

National Care Standards, Care Homes for Older People, Standard 5.

This area for improvement was made on 2 October 2017.

Action taken since then

We could see that this was now happening. There had been a new system designed to ensure the service was knowledgeable about visits from outside contractors organised by head office.

Previous area for improvement 3

It is recommended that the service improves staff's confidence and knowledge in using their own initiative, improving leadership amongst staff.

National Care Standards, Care Homes for Older People, Standard 5.

This area for improvement was made on 2 October 2017.

Action taken since then

We could see that this had been done. The service had promoted staff and trained these staff to a higher level. This involved these staff taking on a greater level of responsibility and leadership. We also saw that staff were encouraged to promote the Health and Social Care Standards. This tells us that staff were encouraged to use their own initiative and promote this within their teams.

Previous area for improvement 4

It is recommended that the service introduces policy and procedures on formal observed staff practice. Such observations could cover person centred practice, moving people safely and maximising protection from infection and medication competence.

National Care Standards, Care Homes for Older People, Standard 5.

This area for improvement was made on 2 October 2017.

Action taken since then

We could see that there were lots of observed practice happening of the environment and we could see that that any improvements were brought to the attention of the unit managers. Also, we saw these improvements were acted upon. We have suggested to the service that they could maximise the benefit of these observations by making them focussed on individual staff performance so that these can be discussed at supervision.

Previous area for improvement 5

It is recommended that the auditing systems include a record of the action outcome and outcome evaluation.

National Care Standards, Care Homes for Older People, Standard 5.

This area for improvement was made on 2 October 2017.

Action taken since then

We could see that this was happening. We found that there were actions, there was an outcome and that these outcomes were being evaluated to ensure that the initial action had been acted upon and had made the necessary improvement.

Previous area for improvement 6

The approach to skin care and tissue viability needs to be improved in line with best practice. In order to do this the provider should:

- * ensure that residents' skin integrity is examined when any changes to residents' skin is observed
- * improve care plan documentation to ensure that a clear, complete and accurate record of skin care is kept and any changes to residents' skin integrity are recorded and monitored and evaluate this at regular intervals
- * ensure that staff are observing and recording any improvement or deterioration in someone's skin condition and seeking appropriate medical intervention when required.

National Care Standards: Care Homes for Older People, Standard 4. Management and staffing and Standard 14.6: Keeping Well – Healthcare.

This area for improvement was made on 2 October 2017.

Action taken since then

We found that the deputy manager had initiated a new system to ensure that she was personally informed when people's skin changed in a way which could be a concern. We saw that the way that this was recorded for people was clear, complete and accurate and we had confidence that this was comprehensive and would ensure good outcomes for people.

Previous area for improvement 7

The provider must demonstrate that the service has systems in place to allow them to communicate effectively with families and representatives. In order to do this you must:

- * improve the system of communication to ensure that service reports promptly to families and representatives when incidents and accidents occur in the service.

National Care Standards: Care Homes for Older People, Standard 6.1: Support arrangements.

This area for improvement was made on 2 October 2017.

Action taken since then

We heard from relatives that the service was very quick to inform them if there was a change to their relatives' health or well being. We could see from accident and incident reporting that this was the case.

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health benefits from their care and support	5 - Very Good
1.4 People are getting the right service for them	5 - Very Good

How well is our care and support planned?	5 - Very Good
5.1 Assessment and care planning reflects people's planning needs and wishes	5 - Very Good
5.2 Families and carers are involved	5 - Very Good

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