

ForebankCare Home Service

26 Forebank Street Dundee DD1 2PB

Telephone: 01382 206161

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Unannounced

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Service provided by:

Forebank Limited t/a Forebank Care Home

Service no:

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SP2007009143



Inspection report

About the service

Forebank is a care home service owned by Brooksbay Care Group based in Dundee. The service is registered to offer support for up to 56 people. The service has been registered since April 2002.

The home is situated close to the centre of Dundee. Since McGonnagall unit was re-located to new premises (McGonnagall House) the service has commenced a refurbishment of the home. One area of the home was closed at the time of this inspection for refurbishment.

The home's ethos of care states "we are committed to providing a good quality of care to each and every person receiving our services. We will listen to you to enable us to provide you with individual care and support based upon what you are telling us".

What people told us

During this inspection we spoke with ten people living at Forebank and six visiting families. Everyone spoken with was positive about the care and support provided at the service.

Comments included:

"Like it, but no for good". (A person on respite care)

"Food, pretty good".

"It's absolutely marvellous".

"Home away from home, if not better".

"Plenty to do, they keep you going".

"Staff must be handpicked, they're wonderful".

"I go to meetings, have a say in my care".

"The place is lovely".

"Aye, happy here".

"They're all good company".

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?	4 - 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?	4 - Good

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

How well do we support people's wellbeing?

4 - Good

We evaluated Forebank Care Home as performing at an overall good level in relation to outcomes for people experiencing care.

We would expect that people were treated with dignity and respect and were reassured to observe many sensitive and caring interactions from both care and ancillary staff.

Residents and relatives confirmed our findings that staff supported people with kindness. Typical comments included:

There appeared to be adequate staffing levels across the home and people told us that staff responded to requests for assistance promptly. It was good to see that staffing levels were planned to allow social time with residents and allow for care delivery at a relaxed pace.

It is important that people are able to participate in and enjoy activities and opportunities which are meaningful to them. People told us that they enjoyed the majority of activities available. During our visit small groups were enjoying visits out to a local restaurant for Christmas lunch.

The service had access to a mini bus at least two days a week. This enabled people to have time out of the home. We heard of visits to local places of interest to individuals which prompted reminiscence discussions.

The manager and activity staff were planning to review activity provision to ensure that it met the changing needs of residents.

Residents could be confident that staff had an overview of their health care needs and consulted with other health care professionals as needed.

We could see that mostly health assessments were carried out according to people's assessed needs and that a care plan was in place. However, we did find that some assessments were not being carried out at the agreed intervals. This included where a person should have been weighed weekly and where some fluid balance charts were not fully completed. Accurate completion of assessments helps to monitor people's health.

(See area for improvement one)

It is important to enjoy a healthy and balanced diet and to have access snacks and drinks throughout the day. Residents told us that they enjoyed the food available and that it was good quality.

[&]quot;They've awfy nice".

[&]quot;They take time to have a wee blether with us".

[&]quot;Yes, they knock on my door before coming in".

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The director of care had recently commissioned a review of nutrition across the home. The findings of this were now being assessed and new menus tested. The service was planning to consult with residents on any proposed changes to ensure people continued to enjoy meals and snacks.

We were present at two lunchtimes, it was pleasing to see that people were offered visual choices of meals and that staff offered the right level of help according to people's needs.

However, we noted, that no-one was offered any choice of drinks and that staff did not always know what was on the menu when residents asked. The manager agreed to take this area for improvement forward.

People using care services should expect that any treatment or intervention they experience to be safe and effective. Mostly people were receiving their medication as prescribed and timeously. However, we did find some areas where good practice guidance was not being followed.

Areas which needed to be reviewed included:

- protocols for as required medication (this was introduced during the inspection process).
- responsibilities for administering and signing for topical applications.
- homely remedy protocols.
- ensuring that any medication protocols are up-to-date and reviewed (including covert medication).

(See area for improvement two)

Areas for improvement

1. The provider should ensure that all health assessments and monitoring tools are used as intended to monitor people's health and wellbeing. This includes (but is not limited to) weight monitoring at identified intervals and fluid intake monitoring.

This is to ensure that care and support is consistent with the Health and Social Care Standard which state that 'I am supported to make informed lifestyle choice affecting my health and wellbeing, and I am helped to use relevant screening and healthcare services' (HSCS 1.28).

2. The provider should review medication administration and management systems to ensure that they are safe and effective

This is to ensure that care and support is consistent with the Health and Social Care Standard which state that 'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

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?

4 - Good

People using the service should expect to have a personal plan which is right for them and sets out how their needs will be met as well as their wishes and choices.

We sampled plans and whilst some did provide this level of detail, this was not consistent across all plans. We discussed with the management team that some plans were not fully up-to-date and that others were illegible.

The management team decided that a process would be implemented to review and update all care plans and to archive out of date information. Care plans going forward would be typed to ease use for everyone.

We could see that the service had a pre-admission process for when they met people prior to admission. This was used to assess if they could meet people's needs and to assist in the early development of care plans.

People using services should be fully involved in developing and reviewing their personal plan and have it available to them if they choose.

We saw that most people had life histories and there was some evidence of resident and family input into these. These are useful to help support people's preferred lifestyle and to guide staff about people's likes, dislikes and preferences. The service should continue to develop these where residents are willing to share information.

We found that support was reviewed at six monthly intervals and that residents and their relatives were invited to discuss their care and support.

People told us that they were kept informed of any changes in relation to support and were involved in the review process. However, this was not always reflected in review papers. The service should make sure these fully reflect discussions and the views of residents and relatives.

Complaints

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

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Detailed evaluations

How well do we support people's wellbeing?	4 - 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	4 - Good

How well is our care and support planned?	4 - Good
5.1 Assessment and care planning reflects people's planning needs and wishes	4 - Good

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Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

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