

Clarkston House Care Home Service

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Clarkston
Glasgow
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Telephone: 0141 6333 030

Type of inspection:

Unannounced

Completed on:

18 December 2018

Service provided by:

Northcare (Scotland) Ltd

Service provider number:

SP2003002314

Service no:

CS2014333443

About the service

Clarkston House Care Home is a care home registered for fifty older people, twenty-five of whom may have dementia. The provider is Northcare (Scotland) Limited. The service registered with the Care Inspectorate in May 2015.

The care home is a purpose-built four storey building. It is divided into two self-contained units, each with a lounge/dining room and kitchen. All bedrooms have en-suite shower facilities. The home has enclosed outdoor areas for people using the service. The home is near to local shops and train and bus routes.

Part of the aims and objectives of the service are 'to support our clients to be the best they can be and to be able to take calculated and assessed risks'.

There were 50 residents using the service at the time of the inspection.

What people told us

Prior to this inspection we issued 30 care standard questionnaires (CSQ) to residents and 25 to relatives. No CSQs were returned from residents, however 11 were returned by relatives of which 10 strongly agreed and 1 agreed that they were happy with the care provided. During the inspection we spoke to 5 residents and 7 relatives/carers. Views expressed about living in the home were generally positive. Specific comments included:

"I cannot imagine any way her care/the service could be bettered"

"My mum is very happy living here in the care home and the staff take excellent care of her. When I visit staff are friendly and welcoming and are always happy to answer any questions I have"

"I cannot fault the service provided"

"The monthly list of events always makes the place sound busy. However there are usually only a max of 4 trips outwith the home each month. Not everyone can go..."

"Delighted with all aspects mum is very happy"

"Staff are great and love my dad"

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

Care staff we spoke with were aware of the new Health and Social Care standards and we could see that they generally tried to follow these. Staff we spoke with were aware of people's personal routines and preferences and we saw positive interactions between residents and staff.

Residents received nutritious food and snacks and had access to hot and cold drinks throughout the day. The dining experience was positive and arranged to help people to eat and drink where needed. The quality of food was good and specific diets were catered for with residents' weights monitored where required. Fluid intake was also monitored where required to make sure people were getting enough to drink.

Some of the additional daily monitoring charts used by staff to ensure resident's safety and wellbeing were not always completed well.

(See area for improvement 1)

People receiving care and their relatives told us that they were happy with the standard of care provided and were kept informed about anything important. We saw that people were presented well and had been supported to maintain their dignity and respect in the way they were supported with personal hygiene and dressing.

The service continued to encourage and involve residents, their representatives and staff in developing the service. This included forums, meetings, questionnaires and coffee mornings. We could see where actions had been taken to help improve outcomes based on people's comments.

Where there had been any fluctuations in health, the service made sure there were investigations, reviews and changes made to the person's support. We could see that referrals were made to healthcare professionals where required including GPs, podiatrists and dentists.

Residents were given the correct medicines at the right times and received the medicines they needed to improve or maintain their state of health. We saw minimal areas for improvement and passed these on at feedback.

There was a good level of in-house activities and entertainment as well as trips out with the home and links to the local community. This helped make sure people spent their time in stimulating and engaging ways. Residents were also encouraged to use the on-site facilities to promote their self-esteem and wellbeing such as the café, cinema, hairdressers, pub and therapy room. Quieter areas were also available for people to access if they wished.

Areas for improvement

1. The completion of additional daily monitoring charts should be improved upon in relation to the tasks undertaken, how these were undertaken and the times of these interactions.

This ensures care and support is consistent with the Health and Social Care Standards, 1.19 which states "My care and support meets my needs and is right for me"

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

Residents' needs were assessed and reviewed regularly to help make sure the care they received was suitable. Where a need had been identified there was a care plan in place providing information on the management of this. Where there was a risk identified this was monitored on an appropriate risk assessment document with details on the management and on-going assessment of this.

Care plans showed that residents had been involved in their development and people we spoke with and who were able told us that this happened. We could also see people were involved in their formal 6 monthly review process. Where residents were not able to fully express their wishes and preferences, supporting legal documentation was in place.

The Health and Social Care Standards were used to guide and lead ways to support residents in a person centred way. The standards had also been used in the development of each resident's care plan. We found the care plans to be appropriate to care for the person and generally detailed any health related interventions where these were required. Some minimal elements of the care plans required consideration and we passed this on at feedback.

Health concerns of residents were monitored which helped identify ways in which these could be improved upon. Some records could have been better completed. (See area for improvement under Key Question 1)

Residents were involved in discussing their care plan and decision-making through taking part in their 6 monthly care reviews. This had helped to shape their plan of care in way that was meaningful to them. It also helped them to discuss how happy they were with the care they received. Where required, there were appointed carers with legal powers to make decisions or discuss care on behalf of individual residents. The service kept up to date information about this.

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

The recording of medication administration records should be improved upon to make sure they more accurately reflect changes made such as who requested the change and the date of the instruction.

This area for improvement was made on 13 October 2017.

Action taken since then

We saw that these were generally completed well. Some individual issues were passed on during feedback for the manager to action, however we consider this area for improvement met.

Previous area for improvement 2

Care plans should be developed further to make sure there is specific information recorded about how best to meet service user's needs. This should include the secondary care plans used within resident's rooms.

This area for improvement was made on 13 October 2017.

Action taken since then

We saw that care plan areas highlighted above had been improved upon. Some individual issues were passed on during feedback for the manager to action, however we consider this area for improvement met.

Complaints

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

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

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

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