

Saltgreens Care Home Care Home Service

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Eyemouth
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Telephone: 018907 51440

Type of inspection:

Unannounced

Completed on:

23 November 2018

Service provided by:

Scottish Borders Cares LLP, t/a SB
Cares

Service provider number:

SP2014012415

Service no:

CS2015335096

About the service

The service registered with the Care Inspectorate on 12 August 2015.

Saltgreens is located near the centre of the town of Eyemouth. The care home is situated near to the harbour and close to local shops, cafes and pubs. Saltgreens care home consists of five flats over three floors. Each flat has a kitchen, living room and seven single bedrooms with toilet attached. The home also has various small communal areas where people can sit with other residents or visiting family and friends.

SB Cares. describe their aims as:

- To provide high quality care and support to help you to remain as independent as possible, to provide services which meet your assessed needs and identified personal outcomes in a way that is suitable for you.
- To promote your independence, dignity and privacy, enabling you to make choices and decisions regarding the day to day aspects of your life.
- To work with other health and social care professionals to ensure you receive the appropriate level of support to enable you to achieve the outcomes identified with you during your stay.

What people told us

During the course of our inspection we spoke with eight residents, four relatives and 10 staff.

The residents told us that they felt the care they experienced was very good with many appreciative comments and they spoke highly of the staff and the manager.

Other comments we received include;

"Very happy with the care my mother has had since she moved into Saltgreens. Staff are always happy to discuss her wellbeing with us and are loving and caring people doing a wonderful job!"

"I am very pleased with the care my relative has been given. She is very independent and does not ask for help but the staff are very good and help her. Since being in the care home her health has improved as she is not eating or drinking enough at home. She was always falling and ending up in hospital so regular meals and drinks has helped greatly"

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?	4 - Good
How good is our staffing?	4 - Good
How good is our setting?	4 - Good
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?

5 - Very Good

Staff demonstrated the principles of the health and social care standards in their day to day practice which meant that staff showed empathy and compassion and promoted positive relationships between staff and residents.

We observed that residents were respected and listened to and that their wishes and preferences were sought. This also included positive relationship building with other residents as well as family members friends and carers. Because peoples dignity and choice was always at the fore front people experienced support that encouraged independence at all times.

There was evidence to show that residents were involved in some decision making which was meaningful to them. However some of the opportunities to involve residents in some of the decision making has been limited and could be developed and expanded upon to ensure that everyone's views are taken into consideration.

We observed residents having the opportunity to access advocacy when required and this was clearly documented within the support plan. This ensures that those who are most vulnerable in society are able to have their voice heard on issues that are important to them.

During our inspection we observed a range of activities that residents could involve themselves in. This included a group of residents going out to a local garden centre to see the Christmas displays and have a coffee and scone. When we spoke with residents on their return they told us how much they had enjoyed the trip out.

Over the last eighteen months the care home has made links with a local nursery. Eight children visit once a week where they join some of the residents in activities.

We saw very good interactions between the residents and children and gave the opportunity for some of the residents to reminisce about their days as a child and also time they had spent with their own children or grandchildren.

As the home is located in the centre of the town. People have access to local amenities. We saw that one resident had been shopping with a staff member and had popped into the local pub on the way back. This promoted a good understanding of positive risk taking and independence. This also ensured that for that individual they could maintain relationships from their local area.

People benefited from a good medication management system. Medication that should be given as and when would benefit from some clearer guidance. We discussed this with the manager about how this could be developed and what information could be included to highlight what a person's needs are when they required extra medication. This is especially important when using medication that helps with people who are displaying distressed behaviour.

Residents and their families had discussed their future wishes with staff and these were documented within the support plan. This ensured that everyone was aware of each individual's wishes should their health deteriorate.

Meals are served in each individual unit which are ordered from Apetito every week. Residents are given a choice of two options at lunch and tea. Breakfast is served and made within the individual units. The people we spoke with all said they enjoyed the meals with one person preferring the previous system when all meals were cooked in a main kitchen.

How good is our leadership?

4 - Good

The new manager has been in post for two months. There had been a good transition between managers as the new manager had worked in the care home for a number of years and knows the residents well.

We could see that people's care was evaluated and altered to reflect their changing care needs. This ensured that each individual received the right support and care at the right time.

There are systems in place to monitor aspects of service delivery. However due to the change of manager and also the appointment of two senior support workers we noted that some of this had fallen behind.
(Area for improvement 1)

The manager expressed her vision of the future of Saltgreens and how residents would benefit from this. The development plan referred to environmental improvements as well as staff training and development.

The manager also had plans to explore how the staff group were meeting the health and social care standards and what this would mean for residents. This ensured that the staff team could identify people's strengths and encourage residents to reach their full potential and take informed risks which promoted choice.

Areas for improvement

1. To make sure people feel safe and supported the systems that are in place to monitor aspects of service delivery should be completed within specific timelines. This could include evaluations to show clear outcomes of service delivery that could impact on residents care and support.

This is to ensure that care and support is consistent with the Health and Social Care standards, "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19)

How good is our staff team?

4 - Good

Saltgreens uses the dependency tool Isaacs and Neville to determine how many care staff should be working at the care home at any one time. We saw that this was well used and reflected the needs of each individual. This enabled staff to be proactive and reassure residents that their needs can be responded to promptly as and when required.

During our inspection we spoke with staff on duty. Some were based within an individual flat while others floated around all the flats. The staff group told me they enjoyed working in this way as this enabled them to gain a good understanding of the people they supported. They also said that as they got to know people better this helped them to be responsive to peoples changing needs and could pick up on any changes and respond to these quickly.

We discussed with the manager the options for staff being based within one unit or to be more flexible over all the units. We could see that this had the potential to reduce the opportunities of staff gaining a good insight to the different residents throughout Saltgreens.

The manager told us that they had recently reviewed this and that the residents and the relatives preferred a more stable team. The feedback was that when they felt that things were not so good it had been when the staff team were moving all the time. The manager planned to review the situation to ensure that residents were well supported and that the outcomes achieved were as positive as they could be.

We observed staff that were motivated and keen to ensure that residents received a good quality of direct care. However at times the opportunities to do activities for example baking or crafting could be hampered due to the commitments of delivering direct care. These opportunities could be very beneficial for those residents who display more distressed behaviour that could be alleviated by the use of distracting activities.

(Area for improvement 1)

Staff were encouraged to develop their management skills and we spoke with three senior support workers who had recently been given extra duties to fulfil these roles. The senior support workers we spoke with enjoyed their post and were keen to develop so as they could support the staff team around them.

Areas for improvement

1. To ensure people feel reassured that the staff team that support them are dynamic and able to think inventively about different opportunities. The service should look to see how they can develop how they can support staff to have the opportunity to share good practice and communicate how they can do this.

This is to ensure that care and support is consistent with the health and social care standards 4.25
"I am confident that people are encouraged to be innovative in the way they support and care for me"(HSCS 4.25)

How good is our setting?

4 - Good

Residents' at Saltgreens benefit from a home which is laid out into five smaller units which encourages person led support and creates more opportunities to do smaller group activities which promotes happiness and wellbeing.

The small group living style encourages good working relationships between the staff team and residents. Of the staff that are based within an individual flat this ensures that they can build much stronger relationships and have a good understanding of resident's needs.

The property has a lift which enables people to move freely from floor to floor. We observed one resident who visits another resident to play dominoes on a regular basis. For those that are unable to manage stairs the lift does not limit their ability to access other areas in the building or access the outdoors and local community.

Residents rooms are decorated with their own belongings and are well presented, however a little small if a person's needs were to change and they needed the use of a hoist for safe moving and handling purposes.

The service is based within the local town close to all amenities and the service has been involved in the dementia friendly awareness programmes. This programme links with all the local businesses and shops who will receive training to enable them to see how their premises could be more dementia friendly. It will also enable a higher profile to encourage members of the community to become dementia friends. This contact with the community ensures the residents that access the community are supported in a way that promotes independence which is safe and accessible, especially for those residents who have dementia.

There is plans to commence work to upgrade all the kitchens within the five units. This will include all new electric appliances, new worktops and units. This will ensure that each resident has access to safe and usable equipment that could be used to promote independence and wellbeing and further opportunities to bake or prepare a meal. This will be especially beneficial for those residents who come for a short stay and want to maintain their independence and continue to cook their own meals.

Once the kitchens have been completed there is a plan to paint front doors, skirting's and some walls but this is not underway at time of writing this report. All of this refurbishment plan will be followed up at the next inspection.

How well is our care and support planned?

4 - Good

The support plans we observed during our inspection had comprehensive assessments carried out and peoples choices and preferences were well recorded. Staff were led and guided by the information within the care plan to meet residents' health and social care needs.

Support plans were reviewed on a regular basis however there was some that needed to be updated and completed. With the start of the new seniors being in post the service was putting a plan in place to get these reviews all up to date.

Anticipatory care was documented well and included information which highlighted conversations that included both the residents and their families. This ensured that the staff team could follow the wishes of that person should their health deteriorate. We also observed support plans for those who came into the short stay beds in regards to anticipatory care which was not as well documented. We discussed this with the manager and there was plans to develop this in the future.

Supporting legal documentation was all in place and if this was not in place it was clearly documented why. This is most beneficial for those residents that are unable to state their wishes and will reassure them that there is a specific person they have nominated to act on their best interests should their capacity to make decisions change.

Support plan documentation for short breaks is currently being re-assessed and developed throughout the service of SB Cares. This is to ensure that the information that is received, which could be at very short notice, is right and that the staff team have the appropriate information to maintain people's routines and independence. This will help support them to return home following their short break.

We observed two short stay support plans which had a varying degree of social history and information to what they like or disliked or how they managed their daily routines. We also observed some documentation not being completed or wrongly completed all of which could have a negative impact on the support that person was receiving.

(Area for improvement 1)

Areas for improvement

1. To reassure people in the short stay areas that the staff have the most current and up to date information the service should further develop their auditing processes to ensure that the information that is in place is the most current and up to date information. This will enable staff to deliver the best direct care and maintain people's abilities and independence.

This is to ensure that care and support is consistent with the health and social care standards

"My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices" (HSCS 1.15) and

"I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11)

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

Requirements

Requirement 1

The service provider must ensure that all records are maintained to ensure care is safe and the health and well being needs of people are being met are accurately and consistently maintained.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011/210 Regulation 4 Welfare of users - a requirement that a provider must make proper provision for the health, welfare and safety of service users.

Timescale for implementation: within 24 hours of the receipt of this report.

This requirement was made on 27 February 2018.

Action taken on previous requirement

We observed audit tools being used and **programme** used to audit each support plan. Medication audits were being completed and we observed TMARS in each support plan. There is on-going development with the staff team in regards to how they document effectively and this is also being audited to pick up on any issues individual staff members may have.

Met - outwith timescales

Requirement 2

The service provider must ensure that air temperatures in the care home are monitored to ensure that comfortable temperatures are maintained in all living areas.

Where problems are identified appropriate and effective remedial action must be taken.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011/210 Regulation 10 (2) (c) Fitness of premises - a requirement that a provider must ensure premises are fit to be used for the provision of a care service.

Timescale for implementation: within one week of the receipt of this report.

This requirement was made on 27 February 2018.

Action taken on previous requirement

We visited six rooms during our inspection and all rooms were of an appropriate temperature. Some rooms were felt to be cold but this was by the choice of that resident. The radiators have been changed to ensure that all rooms are warm and of a comfortable temperature and this is checked on a regular basis.

Met - outwith timescales**Requirement 3**

The service provider must ensure that a safe environment is maintained at all times and that all furnishings, fittings and equipment provided are safe and appropriate for a care home for older people.

This is to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011/210 Regulation 4 Welfare of users - a requirement that a provider must make proper provision for the health, welfare and safety of service users.

Timescale for implementation: Within four weeks from the receipt of this report.

This requirement was made on 27 February 2018.

Action taken on previous requirement

We observed a robust action plan in regards to the refurbishment plan. New kitchens in each unit are scheduled to start on 4 December 2018. Following this there is plans for redecoration to doors and skirtings. This plan will be followed up at the next inspection.

Met - outwith timescales**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 good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

How good is our staff team?	4 - Good
3.3 Staffing levels and mix meet people's needs, with staff working well together	4 - Good

How good is our setting?	4 - Good
4.2 The setting promotes and enables people's independence	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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