

The Meadows (Care Home) Care Home Service

Meadow Road
Dornoch
IV25 3SF

Telephone: 01862 811133

Type of inspection:

Unannounced

Completed on:

13 December 2018

Service provided by:

Dornoch Medical Care Ltd

Service provider number:

SP2004005108

Service no:

CS2003048911

About the service

This service has been registered since 2004.

The Meadows (Care Home) provides a care home service to a maximum of 40 older people. The care home provides long-term care, as well as short breaks and respite placements. At the time of this inspection there were 39 people using the service.

The Meadows (Care Home) is a purpose-built, two storey, privately operated care home set in spacious gardens in the coastal town of Dornoch, Sutherland.

The service is provided by Dornoch Medical Care Ltd.

The Meadows (Care Home) aims to:

"Offer elderly people the opportunity to enhance their quality of life by providing a safe, manageable and comfortable environment, plus support and stimulation, to help them to maximise their potential physical, intellectual, emotional and social capacity."

What people told us

The inspection volunteer spoke with five people who used the service during the inspection. People spoken with made very positive comments about the quality of care they received.

People told us:

"I get excellent care. They are all very supportive."

"It's fine here and very comfortable. I am well looked after and supported."

"It's alright here, they are good hearted people."

People we spoke with also gave positive feedback about the staff and told us:

"They are very friendly and patient with me."

"The staff are all good, friendly and helpful."

"First class staff, they are all very good."

When we spoke with relatives/carers they told us that they were very happy with the care their family member received. They told us that the home was always clean and that they loved all the new painted murals around the home. One relative told us that their family member had been involved in some of the paintings and had thoroughly enjoyed it.

Other comments from people who used the service and their relatives/carers are included in the body of this report.

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
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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

We found that in relation to this key question there were some major strengths which supported positive outcomes for people.

People who use the service should experience care and support where they are respected and valued.

People who use the service told us that; "staff are very kind and treat us with respect" and "staff look after us with patience and kindness." During our observations we noted that staff interacted positively with people who used the service. We saw people being care for in a caring and compassionate manner. People who use the service were called by their preferred names. It was easy to see that staff knew each person and their needs very well.

People should be able to choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and out.

The inspection was carried out two weeks before Christmas and there was a lovely atmosphere in the home. We observed people who used the service and staff singing and laughing as they got involved in making table decorations.

People should be supported to participate as a citizen in their local community in the way that they want.

There was evidence to support that people who used the service were very involved with their local community. We heard that people got out and about in the town for shopping and coffee, to their local pub, and regularly visited the local hub.

We also spoke to people who had been involved in a community project with the local museum. People who used the service were asked to get involved with developing a stone maze within the garden area of the museum. A booklet was developed called 'Fish tales and other stories' which gave the history behind this project, and contained photos of some of those involved painting the stones and slates.

People who use the service should be able to choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables and participate in menu planning.

There were some very positive comments made about the food. People told us there was always a choice and that if they didn't fancy what was on the menu, they could always have something else. During an observation at lunch time we noted that where people required support to eat their meal, this was offered by staff in a very dignified and respectful manner.

People's care and support should meet their needs and be right for them.

There was evidence to support that people who use the service received care from health professionals, for example, GP's, community nurses, dietician, dentist and so on, where necessary.

We looked at the way the service stored, dispensed and recorded medications for those people who were not able to manage their own. We found this to be generally of a satisfactory standard. Staff need to ensure that they consistently evaluate 'as required' medications for people who experience pain. This will ensure that the medications remain appropriate and that people's pain levels continue to be managed. **(See area for improvement 1)**

Areas for improvement

1. Where people receive 'as required' medications to manage their pain, staff should consistently evaluate each medication given. This will ensure that people's medications remain appropriate and that their levels of pain continue to be well-managed.

This is to ensure care and support is consistent with the Health and Social Care Standards 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?

5 - Very Good

There were major strengths which supported positive outcomes for people.

People's care plans should be right for them because they set out how their needs will be met, as well as their wishes and choices.

Care plans continued to be of a very good standard. We looked at a sample of four during the inspection. We chose these care plans from the observations we carried out and from speaking to people who used the service. We found that all four care plans contained health assessments in relation to people's nutritional, skin, continence and mobility needs. We could see that people's care plans had been developed using the information gathered from the health assessments.

The care plans we looked at had been developed using an outcome focussed approach. They contained very person centred, detailed information about people's health needs and also in relation to their social and emotional needs. There was guidance for staff on how to manage any risks and the levels of care to be provided to meet people's needs. People we spoke with confirmed that they were aware of their own or family member's care plan and confirmed they had been involved in its development. Staff need to ensure that where they carry out a monthly evaluation of people's care that it takes in to account any changes to their needs. They should also consider whether the care plan needs to be updated to ensure that it remains a current reflection of the person's health and wellbeing needs.

People should be fully involved in developing and reviewing their personal plan.

We found that people were being offered a regular six monthly review of their care plan and that the notes recorded in relation to these were of a good standard. We were able to see that where issues had been raised during a review these were taken forward. There was also evidence to support that people's care plans were updated as a result of the review process taking place. People we spoke with confirmed that they were invited to attend and be part of their six monthly review.

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 provider should ensure that work continues on the care plans for people who used the service. Where staff are carrying out monthly evaluations this should be done using a more outcome focussed approach.

National Care Standards, Care Homes for Older People: Standard 6 - Support arrangements.

This area for improvement was made on 30 August 2017.

Action taken since then

The manager and staff had made efforts to make further improvements to the care plans. Monthly evaluations of people's care were being carried out. We noted some improvement in the quality of these, however we found that in some these could still be better. We found that some evaluations could be more informative and tell the story of how the person's health and wellbeing had been over the previous month. Staff also need to consider whether there needs to be any changes made to the person's care plan. This will ensure that the information remains a current reflection of the person's needs and that the care given is at a level that is right

for them. This area for improvement has been met. Progress will continue to be monitored at the next inspection.

Previous area for improvement 2

The provider should ensure that where staff are being asked to record in SSKIN bundle documentation, or sign for prescription creams, that this is completed consistently and accurately. There should be a regular audit in place to ensure that the quality of the documentation is of a satisfactory standard, and that people who use the service receive their care and prescribed creams as planned.

National Care Standards, Care Homes for Older People: Standard 15 - Keeping well - medication.

This area for improvement was made on 30 August 2017.

Action taken since then

There was a definite improvement noted in relation to this area for improvement. The management were monitoring staff practice in this area and re-enforcing the need for this recording to be accurate through one to one supervision and staff meetings. This area for improvement has now been met.

Previous area for improvement 3

The provider should ensure that the service follow their own policy and best practice guidance, in relation to the care for people who are at risk of developing, or have an established pressure ulcer/wound. Regular photographs and measurements should be taken of any pressure ulcer/wound in order to evidence any progress/deterioration and support regular evaluation.

National Care Standards, Care Homes for Older People: Standard 6 - Support arrangements and Standard 14 - Keeping well - healthcare.

This area for improvement was made on 30 August 2017.

Action taken since then

The manager and deputy had really taken on board the advice and guidance we had offered and we were able to evidence a good improvement in relation to the above area for improvement at this inspection. We could see that the nurses were seeking advice and involving health professionals, for example, tissue viability nurses in the care for people who had a pressure ulcer. Regular photos were being taken and measurements recorded to provide evidence of progress/deterioration in any ongoing pressure ulcers/wounds. In the two care plans we looked at we found the records in relation to the assessment and treatment for pressure ulcers/wounds to be of a very good standard. This area for improvement has now been met.

Previous area for improvement 4

The provider should ensure that the service continues to work on the 'This is me' folders for people who use the service. Information gathered should be linked to the programme of activities. Staff should make efforts to improve the quality of activities provided to those people who live in the home and are unable to participate in group activities.

National Care Standards, Care Homes for Older People: Standard 12 - Lifestyle - social, cultural and religious belief or faith.

This area for improvement was made on 30 August 2017.

Action taken since then

We found that the service had really made progress in relation to this area for improvement. People were being encouraged to participate in activities based on their previous hobbies and interests. People were being supported to attend community events, visit their local pubs and restaurants and take part in community projects.

There was a new activities co-ordinator working in the home and she made efforts to spend time on a one to one basis with some of the people who were not able to participate in group activities or to go out in to the community. We also noted through our SOFI observation that some of the staff spent time reminiscing, reading and playing games with people at different times during the inspection. This area for improvement has now been met.

Previous area for improvement 5

The provider should ensure that staff have the appropriate skills and knowledge to enable them to carry out their roles confidently and competently. The manager should ensure that staff are provided with training/ refresher training in the following areas: Adult support and protection, moving and handling, palliative care and tissue viability.

National Care Standards, Care Homes for Older People: Standard 5 - Management and staffing arrangements.

This area for improvement was made on 30 August 2017.

Action taken since then

The service were making good progress in relation to this area for improvement. Training had been provided in the following areas since the last inspection; Adult support and protection, challenging behaviour (stress and distress), stroke and skin tears. Work needs to continue to ensure that all staff receive training in the above areas. All training provided should be evaluated and linked to direct observations of staff practice and supervision and appraisal. Progress will be monitored on this at the next inspection.

Previous area for improvement 6

The provider should ensure that there is personal protective equipment (PPE) available to staff at points of need throughout the home.

National Care Standards, Care Homes for Older People: Standard 4 - Your environment and Standard 14 - Keeping well - healthcare.

This area for improvement was made on 30 August 2017.

Action taken since then

The provider had taken appropriate action in relation to the above area for improvement and this has now been met.

Previous area for improvement 7

The provider/manager should ensure that the newly employed handyman has access to all the relevant guidance and training needed, to ensure that he is able to carry out all aspects of his role. For example, the monitoring of water systems in the home.

National Care Standards, Care Homes for Older People: Standard 5 - Management and staffing arrangements and Standard 4 - Your environment.

This area for improvement was made on 30 August 2017.

Action taken since then

The provider/manager had taken the appropriate action in relation to the above area for improvement. We looked at the records for the monitoring of the water systems in the home and other aspects of maintenance and found these all to be of a satisfactory standard. We interviewed the handyman and found that he had undergone training to enable him to fully carry out his role. This area for improvement has now been 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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