

Lizdean Nursing Home Care Home Service

46 Portland Road
Kilmarnock
KA1 2DL

Telephone: 01563 525208

Type of inspection:

Unannounced

Completed on:

28 January 2019

Service provided by:

Blair and Fiona McKellar, a partnership

Service provider number:

SP2010011088

Service no:

CS2010271358

About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Lizdean is situated close to the town centre of Kilmarnock in Ayrshire. The service is registered to provide care and support to a maximum of 18 older people, of whom three may be short break or respite residents. There were 18 individuals who experience care within Lizdean at the time of the inspection.

The home is in a residential area and accommodation is provided on two floors. There is access to the upstairs by stairway or chair lift. Residents with impaired mobility are assessed for suitability before they are accommodated on the top floor of the home.

Lizdean aims include the delivery of care in: "a warm, homely, comfortable environment by staff skilled and trained to provide care with sufficient expertise to ensure that residents have complete confidence in their carers".

What people told us

An inspection volunteer was involved in this inspection. This is someone who uses, or has used services or an unpaid carer, who volunteer to take part in inspections. They talk to people who use the service, relatives and friends and make observations based on their own personal experience. This information is used by the inspector to report on the service and award grades. The inspection volunteer spoke with residents in communal sitting and dining areas and in residents own rooms.

For this inspection, we received the views of 9 people who experience care and 3 of their relatives via direct discussion. Responses were very positive about the quality of the overall service. We heard that the staff were attentive to the needs of the individuals living in Lizdean. People were happy with their meals and confirmed they were warm and comfortable in their bedroom accommodation. Relatives told us that staff communicated changes in their family members wellbeing. We spoke with an individual who hoped that when the weather improved there would be more opportunities to go out.

Comments made to the volunteer inspector included:

"Staff know what I can eat".

"I like my home".

"They cater for lots" - (when asked about things to do).

"I've been out shopping with staff".

"food lovely".

"Very good at keeping me informed how things are".

"used to go out more not s much now".

We also received six care standards questionnaires from relatives and people who experience care. When asked whether they were happy with the quality of the service all respondents strongly agreed or agreed that they were. Additional comments included:

"The staff are first class".

"A friendly bunch of carers who are always around to assist, support and meet my mothers needs, overall, Lizdean is a comfortable, safe setting, enabling mum to be content in her environment". "A very pleasant safe and secure environment offering the appropriate requirements to meet and provide a good quality of care. Overall, needs well met with efficiency and in a dignified manner".

"Care home was a god send".

"I would prefer to have a member of staff in lounge at all times to try and prevent falls as ladies try to get up out of seats in order to go to toilet without their zimmers".

One relative also commented about odours on occasions.

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

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| How well do we support people's wellbeing? | 3 - Adequate |
| 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? | 3 - Adequate |

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

How well do we support people's wellbeing?

3 - Adequate

People who experience care can expect that those who support them are courteous, respectful and compassionate, as this supports a trusting relationship, helping the person to feel at ease. Relatives we met confirmed that the staff treated people well. We concluded that those who live in Lizdean benefited from staff being genuine, responsive and kind to them. Staff supported individuals to feel included by acknowledging their needs, and offered support at a pace that was right for the person. This contributed to the homely, relaxed and welcoming feeling within Lizdean.

People who experience care should be confident that the care and support they receive benefits their health and wellbeing. Staff demonstrated through discussion that they were knowledgeable about the care needs, choices and wishes of people who lived in Lizdean. This helped promote health and wellbeing. External health care professionals were involved which helped people to stay as well as they could. However, this would be improved by ensuring that a consistent approach to managing unplanned weight loss is implemented. This would be achieved by making more timely referrals for specialist dietetic support and recording dietary and fluid intake to demonstrate the steps taken to fortify meals and snacks to reduce unplanned weight loss. See requirement 1.

Overall, residents could be confident that their medication was appropriately managed. This would be improved by adopting a more person-centred approach to medication administration in accordance with each individual's preferred daily routine. Secure cabinets had been installed in bedrooms to support this. Improved record keeping would give greater assurance that medication was given in accordance with the prescribers instructions or explain why medication was not given. The use of topical medication administration records would give direction to care staff and evidence the application of some prescribed skin treatments. See area of improvement 1.

Physical activity benefits people's quality of life, health and mood. We observed residents enjoying a chair based exercise session and floor netball. The service should consider how opportunity for physical movement can be incorporated into the daily activity programme for more people. Purposeful activity and maintaining community links are also known to benefit people's wellbeing. There were nice examples of community involvement including an individual who enjoyed an outing to support their local football team and of an individuals involvement with the local scout group. People who experience care benefited from a range of group and one-to-one activities. This took account of monthly musical entertainment, daily news discussion, board games, musical bingo, opportunities to use the garden and occasional trips into the town centre. The service should continue to build upon this by ensuring that people have opportunities for getting outside, are involved in their local community and by developing intergenerational activities and activities suitable for people who live with advanced dementia. Residents wellbeing can benefit from spending time with their named worker. Development of the key worker system would support the provision of meaningful activity and positive engagement. Activities should be linked to individuals personal wishes and preferences and reflect what is important to them and how they are supported to get the most out of life. See area of improvement 2.

We requested a recognised dependency assessment tool be used to establish the staffing levels required within the service and ensure that appropriate staffing resources were in place to meet the holistic needs of the individuals who experience care and support the ongoing development of the service. See area of improvement 3.

Individuals should experience a high quality environment that has been adapted to meet their needs. This can promote greater levels of independence and wellbeing. The providers acknowledged the limitations of the footprint of the building in terms of any further reduction in shared bedrooms or offering en suite facilities within Lizdean. Those who live there benefitted from an environment that was developing to enhance the experience of individuals; especially for those living with dementia. This included plans to replace the carpet on the ground floor and identify storage solutions. The Care Inspectorate guidance document 'Building Better Care Homes for Adults' and the "Kings fund" audit tool should be considered to ensure any changes planned are linked to best practice.

Appropriate legal documentation was in place to support the decision process on behalf of individuals who were unable to do so.

There were methods in place to give residents and relatives the opportunity to express their views. The management responded to any issues raised.

Where the service managed aspects of people's money, transactions were appropriately recorded. The manager agreed to implement minor changes to record keeping.

Requirements

1. To ensure that people's health benefits from their care and support, a consistent approach to managing unplanned weight loss should be implemented by 31.4.2019. To achieve this:

- timely referrals for specialist dietetic support should be made
- records of dietary and fluid intake should be implemented to identify the steps taken to fortify meals and snacks to reduce unplanned weight loss
- management oversight of weight loss should be improved.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11) and in order to comply with Regulation (4)(1)(a) Welfare of users, of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

Areas for improvement

1. To promote health, wellbeing and good skin care and to comply with best practice guidance medication administration records must be improved to accurately reflect when prescribed medication has been administered and the reason for any omission.

This is to ensure care and support is consistent with the Health and Social Care Standards which states that: I experience high quality care and support based on relevant evidence, guidance, and best practice. (HSCS 4.11)

2. To progress improvements in promoting positive outcomes through meaningful activity the role of the key worker should be developed.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: I can maintain and develop my interests, activities and what matters to me in a way that I like. (HSCS 2.22)

3. To ensure that individuals needs are met by the right number of people a recognised dependency assessment should be used to inform staffing levels.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: "My needs are met by the right number of people" (HSCS 3.15)

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?

3 - Adequate

People who experience care can expect their health needs to be assessed based on current good practice. Residents of Lizdean would benefit from improved accuracy when completing clinical assessments which determine the risk associated and guide care interventions for nutritional intake and developing pressure sores. Implementation of wound assessment records would support staff to monitor wound healing in accordance with best practice guidance. See area of improvement 1.

Each person's personal plan should be right for them. Individuals can expect to have a care plan which sets out their wishes and choices and details the specific support interventions to be taken by staff to achieve agreed outcomes in collaboration with them. Involving individuals, and their advocates, in the care planning and review process may support the development of care plans which capture each person as a unique individual. Monthly care plan evaluations and formal care reviews would benefit from being more outcome based and focused on each individual's experiences and quality of life. The 'Talking Points - Personal outcomes approach' resource may support improvement in this area. See area of improvement 2.

Care plans, evaluations and six monthly care reviews should be improved to evidence that individuals are able to participate in activities in accordance with their preferences and agreed outcomes stated in care plans. This should include how people living with dementia are involved in activities meaningful to them. See area of improvement 3.

We also raised with the manager the need for staff to review the use of detracting language used in care records. We will follow this up at the next inspection.

The management team gave a commitment to prioritising assessments and the quality of the content and structure of care plans.

Areas for improvement

1. To promote health and wellbeing and ensure that people who experience care receive the right care for them, the provider must review and where necessary, update risk assessments to ensure they contain accurate information.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that: "I am assessed by a qualified person who involves other professionals as required" (HSCS 1.13).

2. The provider should improve personal plans and six monthly reviews to reflect residents' needs, choices and personal preferences and how these are being met in sufficient detail with a strong focus on promoting independence and personal outcomes. There should also be guidance for staff in relation to appropriate strategies to use when supporting people in times of stress and distress.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that "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)

3. To evidence that people get the most out of life, care records should demonstrate that social activities have clear links to individuals' interests and preferences as stated in care plans.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that: I can

choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors. (HSCS 1.25))

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

To promote health and wellbeing medication must be administered in accordance with the prescriber's instruction. To do this, prescribed preparations must be available for administration.

Health and Social Care Standards: 3.14.

This area for improvement was made on 13 March 2018.

Action taken since then

This area for improvement is: met.

Previous area for improvement 2

To promote privacy and dignity the provider should:

- reduce the number of shared bedrooms unless through expressed choice to share with a partner, relative or close friend.
- explore possible options to support people who experience care to see visitors in private.

Health and Social Care Standard 5.26, 5.15

This area for improvement was made on 13 March 2018.

Action taken since then

The provider had taken advice about splitting existing double rooms into single bedroom accommodation. It was concluded that the resulting rooms would not be large enough.

The provider had identified some solutions, however, this was limited due to the ability of space.

On balance, this area of improvement is: met.

Previous area for improvement 3

To promote choice the provider should consider installing shower facilities.

Health and Social Care Standards 5.16, 5.28

This area for improvement was made on 13 March 2018.

Action taken since then

The provider had installed two over bath showers.

This area for improvement is: 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

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| How well do we support people's wellbeing? | 3 - Adequate |
| 1.1 People experience compassion, dignity and respect | 4 - Good |
| 1.2 People get the most out of life | 4 - Good |
| 1.3 People's health benefits from their care and support | 3 - Adequate |

| | |
|--|--------------|
| How well is our care and support planned? | 3 - Adequate |
| 5.1 Assessment and care planning reflects people's planning needs and wishes | 3 - Adequate |

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