

## Meigle Country House Care Home Service

Dundee Road  
Meigle  
Blairgowrie  
PH12 8SE

Telephone: 01828 640859

**Type of inspection:**

Unannounced

**Completed on:**

3 April 2019

**Service provided by:**

Priority Care Group Limited

**Service provider number:**

SP2003000048

**Service no:**

CS2003041947

## About the service

Meigle Country House is located on the outskirts of Meigle village and sits in its own grounds, with views of the surrounding countryside. The service is registered to provide a care service for up to 23 older people, including up to two respite/short-term care beds.

All residents are accommodated in single rooms and 22 of these rooms have en suite facilities.

Meigle Country House's aims are:

- Building trusting relationships and find out what's important to people in everyday life.
- To empower and support the staff team to deliver the highest quality of care.
- To provide a homely and welcoming environment where everyone feels included.
- To maintain the open and transparent culture to ensure everyone has a say.
- To base all our actions on the principles of care.

This service is provided by Priority Care Group.

This service has been registered since 22 September 2003.

## What people told us

During our inspection we spoke to people living in the service and their visitors. They told us:

'The food is fabulous, lots of variety.'

'I don't like it when I don't know the carer but that's happening less often these days.'

'My relative has settled very well here. It's an exceptionally good care home.'

'I looked at many homes before deciding on this one and I think I've made a good choice.'

'The staff are very good to me, we have a good laugh.'

'I have lunch or dinner with my relative, you're always made to feel very welcome here.'

'You couldn't get more dedicated staff. If you ask for help, you get it.'

'There's enough activities going on for me but I like just watching my TV.'

'The staff really understand and know my relative.'

'I like the choice of food. At breakfast I can have a full cooked breakfast if I want, it's like being in a hotel. This morning I had my bacon roll and it was lovely.'

'This is a nice place.'

## 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
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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?	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**

People should expect to be treated with compassion, dignity and respect. During our inspection we observed a homely, calm and relaxed atmosphere throughout the service. People told us that they felt safe, secure and well looked after. They told us that they were treated with respect and were encouraged to do as much as possible for themselves, with the reassurance that if they needed help it would be provided.

We saw genuine warmth and kindness between staff and residents with much laughter and good banter. Staff were knowledgeable about people's needs and appeared confident in their approach which was professional, respectful and non-judgemental.

We saw three mealtime services during the inspection. Most people chose to eat their meals in the dining room although some preferred to remain in their own room and this choice was respected. Catering staff were enthusiastic and knowledgeable about nutrition, people's individual needs and preferences. The quality of food was very good and people always had a choice of meal. If they wanted something different from what was on the menu, this was made available. People commented favourably about this and we saw that the dining experience was pleasant, sociable and not rushed. Staff provided assistance to some of the residents who needed more help.

Meaningful activity can be therapeutic, health promoting and enjoyable. Most people told us that they felt there was enough to do but some noted there was not enough activities, or events that they were interested in. Activities should be more person specific, have more choice and a greater variety. People should expect to be involved in activity planning. We saw that care plans relating to activities were incomplete and discussed with the manager the need for staff to more familiar with people's interests so they can better understand what would promote stimulation and independence. The manager agreed that there should be more choice, variety and person-centred activities available which we will follow up at our next inspection.

People could be confident that their health needs were being met. Meigle Country House benefitted from dedicated GP support from the local surgery and we saw that staff sought relevant professional help when needed. Regular health assessments were carried out by staff and where there was an identified need, an appropriate care plan was in place. We were satisfied that people received their medication at the correct time and as prescribed. The service was in the process of moving over to a system of administering medication from original containers. We discussed the need for regular audits of the new system to ensure effective monitoring and control.

## 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

We thought that Meigle Country House was performing at a good level in relation to 'How well is our care and support planned?'

People should expect that assessments of their care needs and care plans reflect their individual needs and wishes.

We looked at a sample of care plans and were satisfied that they provided sufficient accurate, up to date information that enabled staff to provide effective support. The care plans detailed people's needs, preferences, likes/dislikes and individual choices. We thought the care plans could be developed to be more outcome focused and reflect more fully what matters to people. We will consider this further at the next inspection.

Care plans were monitored on a monthly basis and at least six monthly review meetings had been held. There was evidence of input from people and their families and minutes of the meetings included detailed information about the discussion that had taken place.

Staff told us that they did not always have sufficient time to read people's care plans which would ensure that they had up-to-date knowledge of each person and enable them to provide the correct care and support. The manager told us that she was in the process of implementing one page profiles which would give staff an overview of the person and how best to support them. This will help to ensure that there is continuity of care, particularly if staff are contracted from an agency and do not know the person well.

We spoke to an external professional who told us 'Meigle Country House provides a good service, particularly when you require flexibility. In the event of emergency placements they always try to help and offer support in most situations'.

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

### Requirements

#### Requirement 1

The provider must make sure that personal support plans are reviewed with each resident and their carers or representatives, if appropriate, at least once in each six month period to ensure that the care and support provided continues to meet the needs of each individual. The provider should keep a record of these meetings and a minute taken. Minutes should contain a summary of the discussion held, the decisions made as a result of the discussion, and when this will be reviewed again. This should be implemented by 30 October 2018.

This is to ensure that care and support is consistent with the Health and Social Care Standard which states "My care and support meets my needs and is right for me" (HSCS 1.19).

It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 5(2)(b) - A provider must review the personal plan at least once in every six month period.

**This requirement was made on 20 July 2018.**

#### Action taken on previous requirement

Care plans were monitored on a monthly basis and at least six monthly review meetings had been held. There was evidence of input from people and their families and minutes of the meetings included detailed information about the discussion that had taken place.

**Met - within timescales**

## 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 staff receive appropriate training to ensure they can deliver service users' care in a safe, respectful, and supportive manner. In order to comply, the provider must:

- (a) Demonstrate that all staff receive appropriate training to carry out the work they are to perform.
- (b) Implement a written action plan to meet the training needs identified.

(c) Ensure that there is an effective system in place to monitor that staff are implementing the care service's policies and procedures and to identify where further training and support is necessary.

This is to ensure that care and support is consistent with the Health and Social Care Standard which states "I have confidence in people because they are trained, competent, and skilled and are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

**This area for improvement was made on 20 July 2018.**

### Action taken since then

The provider set out the training they expected staff to complete within specific timescales. Staff were provided with a range of in-house training and e-learning opportunities. The manager kept an overview of all training that staff had completed. We saw that not all staff had completed all of the training as expected by the provider. The manager advised that they have a number of staff trained to deliver training within the home and will support further staff to complete this. The service should continue to review training to ensure it meets the learning needs of their staff in relation to supporting people's care needs.

### Previous area for improvement 2

The provider should ensure that staff receive supervision at the required intervals, as stated in their own policies and procedures. This is to support effective practice, good conduct, and staff to address deficiencies in their performance and to identify supports requires.

Scottish Social Services Council (SSSC) - Code of Practice for Employers.

**This area for improvement was made on 20 July 2018.**

### Action taken since then

Staff had received supervision and appraisals consistent with the service's policies and procedures. We discussed with the manager the recording of these meetings which should demonstrate dialogue in relation to staff performance, training needs and supports required.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

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