

Care service inspection report

March Glen Care Centre

Care Home Service Adults

2 Gannel Hill View
Fishcross
Alloa
FK10 3GN

Inspected by: Amanda Welch

Type of inspection: Unannounced

Inspection completed on: 18 February 2014



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Service provided by:

Caring Homes Healthcare Group Limited

Service provider number:

SP2013012090

Care service number:

CS2013318121

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Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of Care and Support	4	Good
Quality of Environment	5	Very Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership	5	Very Good

What the service does well

The service is providing a very good standard of care and support across a range of areas.

The staff have worked hard to change their practice where required to ensure that everyone who lives at March Glen experiences a good quality of life.

We found that communication and commitment to participation was very good. Service users and their families told us that they were very much in control of making decisions about their lives.

What the service could do better

The manager of the service should continue to provide support to all units to ensure high standards are maintained and the improvement agenda remains a priority within this service.

What the service has done since the last inspection

The service recently came under a new registration as a result of a change in the Provider name. During this inspection we found a service wide commitment to on-going development and improvement.

We found that service users were confident in their surroundings and there was a welcoming and friendly atmosphere across all the units within the service.

Staff had attended a wide range of training to support their practice.

Conclusion

This is a very good service that is placing service users at the heart of the care and support provided.

Who did this inspection

Amanda Welch

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission. Information in relation to 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.

Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a recommendation or requirement.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reforms (Scotland) Act 2010 and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Inspectorate."

March Glen Care Centre is a purpose built care home in the Fishcross area of Clackmannanshire. providing care for up to 36 service users with a wide range of needs. The service is provided in four separate units, three of which have single room accommodation. The fourth unit can accommodate six service users in bedsit type accommodation with en-suite shower facilities. Two of the units accommodate people with physical care needs including complex care needs and two support people with learning disabilities, one of which provides care and support for service users with learning disabilities who may present with challenging behaviours.

The building is a new build finished to a very high standard and includes pumped oxygen and hoist tracking to meet the needs of service users. There is a spacious café area used by service users, families, visitors and staff, and each of the four units has good communal space available. The service employs an activities co-coordinator and an occupational therapist who work in groups and with individual service users.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 4 - Good
Quality of Environment - Grade 5 - Very Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - Grade 5 - Very Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We wrote this report following an inspection of the service. The inspection was carried out by Inspector Amanda Welch. Visits were made to the service on 13, 17 and 18 February. Feedback was delivered to the managers of the service on 18 February. During the inspection evidence was gathered from a number of sources including the following:

- Policies and procedures including participation strategy
- Minutes of meetings
- Evaluation documents
- A sample of service user care and support plans
- Examination of training and other staff records
- Discussion with the managers and staff
- Discussion with the training co-ordinator
- Discussion with people who use the service
- Discussion with a relative
- Observation of practice

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects

of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

What the service has done to meet any recommendations we made at our last inspection

This is the first inspection made under the new registration.

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: No

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The service submitted an electronic self assessment as requested by the Care Inspectorate. This identified some strengths of the service as well as some areas for improvement. The assessment contained a wide range of relevant information.

Taking the views of people using the care service into account

We spoke directly with five service users during the inspection. They told us that they were happy and that they liked staff. Comments included:

" The staff work hard here"

"I've got a smile on my face"

"I like ...(staff member)"

We received four completed Care Service Questionnaires. All confirmed that, overall they were very happy with the quality of service they received.

Taking carers' views into account

We spoke with the relative of a service user during the inspection. Overall they spoke positively about the service. Specific discussion regarding a concern is highlighted within the report under theme 2 statement 2.

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

During the inspection we examined evidence and spoke to people who lived at the service and a relative of a service user to confirm that participation and inclusion in all aspects of service delivery was at a very good standard. Service users and their relatives were encouraged to become involved in a range of activities that supported service delivery such as service audit and review. This promoted a strong sense of ownership within the service and we could see that service users were confident in their interactions with staff and other service users. This approach enabled service users to feel in control and experience a strong sense of responsibility for their own lives.

Documentation and also discussion with service users confirmed that there was an overall culture of participation and inclusion within the service. We observed interaction between support staff and service users. People who used the service were offered choices and we could see that staff were skilled in negotiation and in encouraging service users to take responsibility for their decisions and lives. The use of Easy Read documentation, pictures and symbols had also enhanced the opportunity to understand and make decisions for service users with more profound learning disabilities and communication difficulties. This evidence was further supported by minutes of service user meetings, records of discussions between keyworkers and service users and in individual records of support planning and review.

People who used the service were very clear in telling us about the decisions and choices they made. In Aberfoyle unit a service user worked with the service occupational therapist to use the Talking Mats system. We were invited to observe a session and saw how the service user made confident choices about the things they liked to do in their home and the things they didn't like. There was a strong sense of empowerment for the service user during this session and we could see they felt confident in the choices they were making.

We found that evidence to confirm support from staff to improve self-esteem and feel well, had led some service users to feel confident to take steps to develop life skills so that they could work towards moving into more independent type living situation or do more for themselves within the unit. This was a very good example of empowerment in practice and we look forward to seeing how this progresses.

Service users throughout the service told us that they liked the staff and had positive working relationships. This had enabled service users to develop trust and engage with the service, to work together to meet agreed aims. Social contact with staff and other service users had been an important step for some service users in learning new skills and forming positive relationships with others.

We examined a range of evidence that showed how service users influenced service delivery and development. Highlights in recent service newsletter showed how service users had requested a range of fun activities and photographs confirmed that organised activities both within the service and out in the wider community were enjoyed by many service users. We could see that service users were enjoying the choices they made and some told us about particular events they had enjoyed.

Overall we could see that service users enjoyed a range of opportunities to influence not only their own care but also wider service delivery.

Areas for improvement

The service identified in their self-assessment that they remained committed to promoting participation throughout the service to ensure everyone has a chance to voice their opinions and become involved in service development.

In particular the service should continue to ensure that communication with service users and their families remains open and supportive to ensure positive outcomes for all. See comments under Areas for improvement in Quality Theme 2, statement 2.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We ensure that service users' health and wellbeing needs are met.

Service strengths

During the inspection we examined a range of evidence to confirm that staff delivered a good standard of care and support across the service. In some areas of the service, very good practice had been established for some time. In one unit within the service we found very positive steps in introducing new and improved practice and understanding for staff which was in a process of development. We have therefore graded the service as good, to reflect the overall standard of care and support at present.

Systems and practice in place across the service that supported good outcomes for health and wellbeing included; person focussed planning, meaningful risk taking assessment, a strong multi-disciplinary approach and good communication within staff teams.

During the inspection we spent a large proportion of time in Aberfoyle Unit. We spoke with nursing and support staff, service users and a family member. We found that practice had developed positively and there was an open and welcoming atmosphere in the unit.

We observed good practice throughout the inspection and found that staff worked positively with service users and each other. We examined records of incident reporting and monitoring that confirmed a marked reduction in behaviours that were challenging and a reduction in the use of 'as required' medication. This promoted a strong sense of self control for service users who were supported to learn how to manage their emotions and reactions to situations in a way that deescalated situations rather than increased anxiety and risks to safety for all in the unit.

We spent time discussing practice and improvements with the charge nurse in Aberfoyle. We found that changes in staffing and a positive commitment to inclusion had led to improved care and support plans being implemented with a range of additional guidance in specific areas of support. We examined four support plans across the service and found clear guidance on how to offer support and care that was designed to meet individual need. As a result, service users experienced optimum health and well-being relative to their current medical condition.

We also examined specific plans in relation to aspects of health and well-being. Some service users had 'exercise passports' in place. We found that for one particular service user, the clear guidance and photo descriptions for staff on how to support them had led to improvements in posture and overall mobility.

On-going support from the service Occupational Therapist across all units supported a coordinated approach and ensured service users were receiving the most appropriate type of care and support.

We found that staff in all units were knowledgeable about the service users they supported and identified that training was accessible. Records confirmed that mandatory training was up to date. Staff spoke about additional training they had attended to develop their practice. We were informed that staff within Menteith unit had attended specific training on massage therapy to support their work with adults with complex physical conditions. A range of sensory equipment was also being installed within the unit to enhance the surroundings and experiences for those service users. Other staff throughout the service had attended additional training in areas such as diabetes, epilepsy and multiple sclerosis. This meant that all staff were confident in their day to day practice and had built positive working relationships with service users, built on trust and confidence in their skills.

Other areas of strength in the service included a commitment to promoting healthy lifestyles with service users. This included the wide availability of activities both in the service and in the community. Aberfoyle unit had also worked closely with kitchen staff to develop a healthy menu that was based on good principles of nutrition and offered choice and new flavours for service users. Nutritional and health records in care plans confirmed that service users were maintaining healthy weight or losing weight if required.

Overall staff across the service spoke confidently about their work and we were confident about their values and commitment to person centred practice which in turn led to a strong sense of physical and emotional wellbeing for service users.

Areas for improvement

Some support files in Aberfoyle unit were still in the process of being changed and a plan was in place to take this forward. This was planned in conjunction with further opportunities for staff to discuss practice in a reflective way in areas such as consistent working, values in practice and communication. The manager should work with staff within this unit to ensure that appropriate support and training is offered to ensure continued development in this area.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

Service strengths

Evidence in support of this statement can be found in Quality Theme 1 Quality Statement 1.

Areas for improvement

See Quality Theme 1 Quality Statement

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

We make sure that the environment is safe and service users are protected.

Service strengths

This is an area where we found the service was reaching a very good standard. We found strong evidence that confirmed the physical environment was maintained to a good standard but also that staff practice supported an environment that felt safe and secure for service users.

A range of regular checks ensured that the environment was clean and well maintained. We confirmed this during a physical check of the communal areas of the building. This included Health and Safety checks, maintenance and repairs checks and infection control audits. This ensured up to date guidance and procedures were being followed. As a result, the risks of illness through cross contamination within the home were reduced and the manager and staff ensured that March Glen was a safe place to live.

Records of service user meetings confirmed that discussion was held regularly on the environment and in particular, décor, furniture and furnishings. Service users in Aberfoyle had recently decided to paint over some of the wall art in their unit and to replace this with photos of themselves enjoying activities. We look forward to seeing this at the next inspection.

We spent time chatting with service users in their lounge area within two units and found these to be a comfortable and relaxing place to be. Interaction between service users and staff was positive and we could see good working relationships that promoted trust and confidence.

Overall, we could see that not only policies, procedures and systems helped service users remain safe and secure in their home but also the approach used by managers and staff had promoted a strong sense of stability and security for service users.

Areas for improvement

The service identified in their self-assessment that they remain committed to planned redecoration within the building.

During the inspection we spent time with the relative of a service user. They raised concern about the impact the behaviour of a new resident within the unit was having on their family member. In particular, challenging behaviour and aggression had led the service user to inform their relative, staff and social worker that they felt unsafe. We discussed this with the manager and staff within the unit. We were confident that any challenging situations were managed well and service users were not at risk to their safety. The relative was also confident that this was the case.

We recognised that situations such as these do arise when new people are introduced and a period of assessment takes place. It is important that communication between the service user, their relatives and the staff team remain on going. In particular the manager and staff should continue to work with the service user and their relative to provide reassurance and develop strategies to manage feelings of anxiety and that reduces the negative impact of feeling unsafe and threatened.

The manager and relative both confirmed that there was on going discussion with the service user regarding their concerns. We will follow this up at the next inspection.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths

Evidence in support of this statement can be found in Quality Theme 1 Quality Statement 1.

Areas for improvement

See Quality Theme 1 Quality Statement 1.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

During the inspection we spoke with members of the staff team including the manager, nurses and support staff, service users and one relative. We found staff were enthusiastic about their role and took pride in describing the achievements of service users. Service users told us they liked the staff and described positive relationships. Comments from staff included:

"I look forward to coming to work"

"All of my training is up to date"

"We are in a transitional period at the moment with lots of staff changes"

We examined a small number of supervision records during the inspection. These confirmed that this was used as an opportunity for sharing and updating information on the service. Staff confirmed that they found discussion and review with their line manager to be a positive experience.

Minutes of team meetings also highlighted the opportunities staff had to update information about the service and the people who lived there. This supported a consistent approach for service users and reduced anxiety and distress. We found that staff had also been given the opportunity to discuss practice and use the meetings for problem solving.

For example, information on medication commonly prescribed for service users in Aberfoyle had recently been discussed with the staff team. This had enhanced their understanding of certain conditions and how medication impacted on these. The charge nurse confirmed that they had observed improved practice on a day to day basis as a result of greater understanding.

Opportunities for training and continued learning were available to all staff. Courses attended by staff included moving and handling, first aid, health and safety and a range of health related topics. Staff also had access to a range of more in depth on line courses and we examined records that confirmed a keen uptake of courses. Recent courses completed include diabetes, palliative care and equality and diversity. The manager of the service commented that the learning from these courses had enhanced practice and understanding for staff across the service.

Overall, we found the working atmosphere across the service to be open and relaxed. Service users experienced pleasant and friendly day to day living alongside positive and supportive staff.

Areas for improvement

The service identified in their self assessment that they were committed to supporting staff motivation and commitment to learning and practice development.

Analysis of returned Care Inspectorate questionnaires identified that not all staff were receiving regular supervision from their manager. Examination of records and supervision audits however showed that the majority of staff had had access to supervision at least once since the new year. We will follow this up at the next inspection.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths

Evidence in support of this statement can be found in Quality Theme 1 Quality Statement 1.

Areas for improvement

See Quality Theme 1 Quality Statement 1.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Service strengths

During the inspection, we saw that the service had a strong commitment to quality assurance and in particular involving service users, relatives, carers and other stakeholders such as health professionals in the assessment and improvement process.

The service continued to use a wide range of strategies both internal and external to ensure standards were maintained and improved as required. We examined very good records of a range of checks and audits including medication, finance, support planning and review.

A recent complaint regarding the monitoring of staffing levels had recently been upheld. A requirement had been made about this for the service to ensure that at all times units had the appropriate number of qualified and competent staff to meet the needs of all service users.

We discussed service planning and rotas with the manager and deputy manager. We were confident that an effective system was being used to monitor shift allocation and monitor absence. The manager should now consider introducing a specific tool to provide clear account of the regular assessment of need and how this is linked to staff deployment.

Overall, the systems used by the service ensured that a high standard of service delivery was maintained and continually developed. The involvement of service users, their relatives and staff ensured that a wide variety of opinions were heard and confirmed with everyone the importance the service places on them.

Areas for improvement

The service identified in their self-assessment that they remain committed to promoting effective quality assurance throughout the service to support a continuous improvement agenda.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

4 Other information

Complaints

A complaint regarding staff cover was recently upheld. See comments under Quality Theme 4, Statement 4 for information.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 4 - Good	
Statement 1	5 - Very Good
Statement 3	4 - Good
Quality of Environment - 5 - Very Good	
Statement 1	5 - Very Good
Statement 2	5 - Very Good
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Management and Leadership - 5 - Very Good	
Statement 1	5 - Very Good
Statement 4	5 - Very Good

6 Inspection and grading history

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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