

Newark Care Home Care Home Service

Southfield Avenue
Port Glasgow
PA14 6PS

Telephone: 01475 705800

Type of inspection: Unannounced
Inspection completed on: 31 August 2017

Service provided by:
Silverline Care Caledonia Limited

Service provider number:
SP2014012299

Care service number:
CS2014326119

About the service

Newark Care Home is registered with the Care Inspectorate to provide a care home service to a maximum of 60 older people. The service has been registered since 2011 with the Care Inspectorate.

The home is close to the town centre of Port Glasgow and is near to local shops and public transport. The accommodation is within a two-storey building of a modern style. Each person living there has their own bedroom and en-suite facilities. The home is split into four 'units' and each unit has its own living room, dining room and quiet lounge area. There is access to a safe, enclosed garden area.

Their Philosophy of care is 'We respect each resident as an individual with different needs and preferences. Our philosophy of care and its delivery reflect this, enabling every resident to enjoy life to their fullest potential, living with peace of mind.'

What people told us

The views of people using the service and relatives have been included in this report. For this inspection we received views from 13 people using the service. We spent time in the company of other people living in the home who were not able to talk to us, we observed how they were supported and cared for by staff. We had an Inspection Volunteer with us who also spoke with the people living in the home and their relatives.

Before the inspection, we sent care standards questionnaires to the manager to distribute to residents and relatives. One relative returned a completed questionnaire and we spoke with seven relatives individually during the inspection.

Most of the people who lived in the home said they were 'content' with the overall quality of the service. People told us 'I'm fine, I'm quite happy,' and 'I am happy where I live', however two people told us that they would have liked to go to bed/got up at a different time. We discussed these comments with the staff and management team.

Relatives said they were overall satisfied with the care provided at the home. They told us 'staff are polite and attentive' and 'the food and laundry service is good'. One family member told us he was unhappy about the 'state' of his wife's room so he had painted it himself. On the whole relatives felt that staff were 'good' to their relatives 'but they seem busy.'

Self assessment

We did not ask services to submit a self-assessment for this year. Instead, we asked services for their improvement or development plan. This demonstrated their priorities for development of the service and this was discussed during the inspection.

From this inspection we graded this service as:

Quality of care and support	3 - Adequate
Quality of environment	3 - Adequate
Quality of staffing	3 - Adequate
Quality of management and leadership	3 - Adequate

Quality of care and support

Findings from the inspection

We saw that staff know the people living in the home well and there were warm, positive interactions. One family member told us: 'I am happy with the care.' However, the service was not operating at the level we would expect and we have graded this quality theme as adequate.

We observed a lunchtime meal and found that it could be improved. People told us the 'food was good.' However staff need to ensure that they offer choice to people living in the home and that the setting is calm and the tables nicely presented. This change would offer people a stimulating and pleasurable experience. See recommendation 1.

Staff responded to requests from people who need support to use the bathroom. We saw evidence that the continence promotion in the home did not follow best practice. This could result in people not receiving the product most suited to their needs in a dignified way. See recommendation 2.

The home was in the process of changing to a new electronic care plan system called 'Nourish'. Some of the information we read confirmed assessed needs and we found good liaison with external health professionals. We found it difficult to get a comprehensive overview of particular needs, such as nutrition, because the electronic system took a while to update. Some information was still in the paper care plans. Staff need to be fully aware of different dietary needs. The Nourish system needs to be fully operational as soon as possible to better support the assessed needs of people. See recommendation 3.

We could see some people enjoyed and engaged in meaningful activities. We asked the service to consider developing activities so that all people, even those cared for in bed, might enjoy more enhanced meaningful life.

We looked at the way pain was managed for those people who required this. We found the records and assessments were not accountable. This needs to improve to ensure that pain management in the home meets the needs of people. See recommendation 4 (this recommendation was not met following a recent complaint).

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 4

1. The home needs to review the dining experience. Choice should be provided. The tables should be set and menus on display. The dining room should be calm and a pleasant place for people to enjoy their meal.

National Care Standards for Care Homes for Older People: Standard 13 - Eating well.

2. Staff should follow best practice to promoted continence. Products should only be used for the person they are prescribed for and stored in a manner that is dignified and accountable.

National Care Standards for Care Homes for Older People: Standard 6 – Support arrangements, Standard 14 Keeping well – healthcare and Standard 16 – Private Life.

3. All care plans need to transfer to the new system as soon as possible to ensure they are up to date and accountable. The assessed needs of the people living in the home should be supported by rigorous and accurate records. Particular attention needs to be paid to nutritional needs, pain management and Caring for Smiles.

National Care Standards for Care Homes for Older People: Standard 6 Support arrangements, Standard 14 Keeping well – healthcare and Standard 15 Keeping well – medication.

4. The manager needs to demonstrate that when a person living in the home is at risk of developing pain, a proper system is in place to address this. Treatment should be recorded. Systems should include training staff to recognise when a person is unable to communicate pain.

National Care Standards for Care Homes for Older People: Standard 5 Management and staffing, Standard 6 Support arrangements and Standard 14 Keeping well – healthcare.

Grade: 3 – adequate

Quality of environment

Findings from the inspection

We found some improvements were made to the environment since the last inspection. However the service was not operating at the level we would expect and we have graded this quality theme as adequate.

There were pleasant areas for people to enjoy such as the garden, the prayer room and the bistro. There were areas of the home that were not as clean as we would expect. We found some furnishings and equipment needed replaced. We were concerned that both infection control practices and comfort was compromised by these deficits. This environment was a disadvantage to people living in the home. Families told us the environment was: 'not good'. A person living in the home said: 'I would like my room to look pretty.' Action was taken by the management team when we highlighted our concerns on day one of our visit. Work was on-going. See requirement 1.

We discussed the reasons a door to one unit was locked. It was agreed that the door should be left open for people living in the home to walk around more freely. Robust risk assessments were required to ensure people were safe. We asked staff to refer to best practice to inform their future practice and awareness. We saw some people were able to enjoy walking around freely during the second day of our visit.

Some measures were in place to make the environment suitable for people living with dementia. We discussed the use of the best practice tool 'The Kings Fund Audit' to assist with further improvements, such as signage. See recommendation 1

There was a management programme in place to identify the priorities for improving the environment. We found the programme needed more robust action to ensure that the environment was pleasant and safe for people. See recommendation 2.

Requirements

Number of requirements: 1

1. The environment must improve to ensure the safety and well-being of people living in the home. In order to achieve this the service must:-

1. Ensure that the pantry areas are kept clean and are refurbished as soon as possible.
2. Ensure that people have clean chairs.
3. Ensure that the environment is free from clutter to keep people safe.
4. Ensure there is enough clean equipment to meet the needs of the people living in the home.
5. Ensure that the home is decorated and furnished to a level which is acceptable to the people living in the home and their families.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011 No 210: regulation 4(1)(a) - requirement for the health and welfare of service users. And regulation 10(1)(d) fitness of premises.

Timescale for improvement to start within 24 hours of receipt of this report and be completed by 31 January 2018.

Recommendations

Number of recommendations: 2

1. The management team need to take account of best practice guidance, including the Kings Fund Audit, when assessing how appropriate the environment is for people living with dementia.

National Care Standards for Care Homes for Older People: Standard 4 - Your environment.

2. The management team need to ensure that the programme for environmental improvements is responsive to the needs of the people living on the home and action is taken as soon as possible.

National Care Standards for Care Homes for Older People: Standard 4 - Your environment.

Grade: 3 - adequate

Quality of staffing

Findings from the inspection

Staff were responsive to the needs of people and positive relationships were evident. A relative told us: 'they care about my brother'. However, not all staff were performing at the level we would expect and we have graded this quality theme as adequate.

Staff were attentive and kind. We saw some examples of unsatisfactory moving and assistance practice. We heard some comments and phrases used by staff which were not respectful. Staff training could improve practice and awareness and promote safe, respectful care. See recommendation 1.

We discussed the need for staff to lead by example and be accountable for their actions. We want staff to monitor and challenge practice or language which is not acceptable. Staff also need to ensure that record keeping is robust and accountable. These changes would contribute to good outcomes for people living in the home. See recommendation 2.

The home was supporting staff to develop roles such as 'dementia champion' and 'continence champion.' These roles will enhance staff knowledge and improve outcomes for people living in the home. We noted that staff had access to good training opportunities to develop their skills and knowledge and better support people.

We asked the management team to review the number of staff on night duty and the availability of staff who work the twilight shift. We were concerned that some people living in the home were unable to go to bed or get up when they chose because of staffing restrictions. One person told us: 'I would have liked to stay up longer.' The management team had visited the home in an evening to begin a review of this.

Staff told us the system for communicating with families when accidents happen had improved. One family member told us: 'they keep in touch with me which is good.'

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. Staff practice needs to support and promote a comfortable and safe experience for people living in the home. In order to do this the manager needs to:
ensure staff use respectful language when speaking about people who live in the home;
ensure good practice is used to assist people to move around the home;
demonstrate that staff are competent to write care plans and keep these up to date;
provide further training about good practice.

National Care Standards for Care Homes for Older People: Standard 5 - Management and staffing arrangements and Standard 17 Daily Life.

2. The manager needs to ensure that a system is in place to challenge practice which is not acceptable or appropriate. Staff need to be responsible for their actions and be confident to challenge practice amongst their peers.

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

Grade: 3 - adequate

Quality of management and leadership

Findings from the inspection

The management team were responsive and co-operative. One relative told us: 'the manager is nice.' One external professional stated: 'I have experienced excellent staff and management at Newark.' And another said: 'I have observed all staff interacting very positively with residents.'

Overall monitoring and quality assurance systems used by the management team were not at the level we would expect. We have graded this quality theme as adequate.

The provider and external management team need to have an enhanced overview of the home to support the manager and to improve the care and support provided to people. For example, a more responsive approach to the environmental programme would ensure that areas of concern were addressed promptly. See recommendation 1

A new auditing system was being introduced. In time these audits will cover a variety of areas including the environment and health and safety. The plan for a more accountable way of developing and improving the home will benefit people living there. A previous recommendation about quality assurance systems will continue. See recommendation 2.

We could see that there were systems in place to aid communication. For example, the 'flash meetings.' An external professional commented: 'the manager has always been very open and staff keep me informed with any concerns. The manager and depute work very well together there is a real feeling of team work there.'

The management team need to promote collective responsibility for staff actions, language, writing and practice. This would help establish a person centred workforce across the home. See recommendation 3.

Senior staff in the home should lead by example and be confident that tasks delegated to staff will be completed. The leadership potential of senior carers and nurses in the home needs to develop so that they have the skills and competence to improve outcomes for people living in the home. See recommendation 4.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 4

1. The provider and the external management team need to be more involved in the home to support the management team. A more responsive approach to the environmental programme would ensure quicker improvement.

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

2. Managers need to strengthen the way the quality assurance systems, auditing and follow-up plan are used to inform, monitor and improve standards of performance across the service.

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

3. The manager needs to ensure staff know about their duty to have a collective responsibility for actions, language, written records and practice.

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

4. The leadership skills of senior carers and nurses needs to be developed so that they have the skills and competence to manage the care and support of people living in the home.

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

Grade: 3 - adequate

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

Recommendation 1

Staff should ensure that residents' personal plans fully and accurately reflect their health and welfare needs and how these have been met taking account of the way that positive outcomes and experiences have been promoted. The quality of these records should be monitored to maintain consistently good standards.

National Care Standards - Care Homes for Older People, Standard 5: Management and staffing arrangements; Standard 6: Support arrangements.

This recommendation was made on 30 August 2016.

Action taken on previous recommendation

A new care plan system 'Nourish' was being introduced. This needs to become fully operational before we can determine if this recommendation has been met.

Recommendation 2

A clear and consistent approach to staff practice and recording that complies with the Caring for Smiles programme should be established.

National Care Standards – Care Homes for Older People, Standard 5: Management and staffing arrangements; Standard 6: Support arrangements.

This recommendation was made on 30 August 2016.

Action taken on previous recommendation

A new care plan system 'Nourish' was being introduced. This needs to become fully operational before we can determine if this recommendation has been met.

Recommendation 3

The way the quality assurance system and action planning is used to inform, monitor and improve standards of performance across the service should continue to be strengthened.

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

This recommendation was made on 30 August 2016.

Action taken on previous recommendation

A new auditing system 'PerfectWard' was being introduced. This needs to become fully operational before we can determine if this recommendation has been met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings	
15 Feb 2017	Unannounced	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
30 Aug 2016	Unannounced	Care and support	5 - Very good
		Environment	3 - Adequate
		Staffing	Not assessed
		Management and leadership	4 - Good
8 Mar 2016	Unannounced	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
11 Aug 2015	Unannounced	Care and support	5 - Very good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good
27 Mar 2015	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good

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