

Canderavon House Care Home Service

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Stonehouse
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Unannounced

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South Lanarkshire Council

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About the service

Canderavon House is a registered care service provided by South Lanarkshire Council. The service provides care and support for a maximum of 43 people, of whom a maximum of 11 clients (8 in specified unit) can be in receipt of respite/short break care.

The home is accessible to local amenities, public transport links and is situated just off the main street of Stonehouse.

The building offers accommodation across four units, each room has en-suite facilities. The service also provides communal toilets and bathing facilities. Each unit provides shared public spaces, a lounge and dining area.

The grounds are well-kept, offering a secure and spacious area with plants and seating for residents and visitors to enjoy. There is car parking to the rear of the building.

One unit within Canderavon House is now a designated intermediate care unit, as part of the integration of health and social care. This involves admitting people from hospital for a short period of reablement. During this time staff support and promote their independence under continual supervision and assessment.

The anticipated outcomes for this short period of respite are to reduce unnecessary, prolonged periods in hospital and support individuals in returning to their own homes.

The home states its aim is to "provide a good quality of life for service users, affording privacy, dignity and choice in a homely, comfortable and welcoming environment. Independence and individuality are encouraged and service users rights as citizens promoted".

What people told us

Prior to this inspection we issued a total of 30 Care Standard Questionnaires to residents, relatives/carers of which a total of nine were returned. Six people strongly agreed and three agreed that overall they were satisfied with the standard of care and support provided by the service.

Seven people said they were unsure of how to make a complaint.

There was also an inspection volunteer involved in this inspection. An inspection volunteer is a member of the public who volunteers to work alongside the inspectors. Inspection volunteers have a unique experience of either being a service user themselves or being a carer for someone who has used services. The inspection volunteers' role is to speak with people using the service being inspected and gather their views.

Some of the comments we received were as follows;

'Canderavon is an excellent care home the staff are very welcoming and my mother receives very good care to suit her needs.'

'More stimulation needed is the only thing I would say is perhaps lacking.'

'I'm very well looked after, the staff are smashing. The food is good and plenty choices available.'

'I go home soon, its been a good experience, the staff are excellent and people are very sociable. The food is very good with plenty to choose from.'

'I enjoy living here, felt unsafe at home. The staff are good and my family can visit regularly and attend reviews. I have made friends and the food is good.'

'I like it here and staff are all nice, there are not many activities and don't get out except into the garden. Like my room and the foods ok most of the time.'

'I like living here but would prefer being at home, the staff are all very good.'

'Genuine care provided.'

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
How good is our leadership?	4 - Good
How good is our staffing?	5 - Very Good
How good is our setting?	4 - Good
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?

5 - Very Good

People who experience care have the right to be treated with dignity, respect and compassion and have confidence in the people who provide their care and support.

We received positive feedback from residents and relatives on staff and said they were all very helpful and attentive. We observed a group of staff who knew the residents well and treated them with compassion and respect.

Residents were well presented and were comfortable and relaxed with staff who displayed a good knowledge of their preferences and routines which led to a relaxed and friendly atmosphere.

Consultation was taking place regularly through meetings and questionnaires with access to advocacy services for residents who needed some assistance in communicating their views. There were action plans from

consultation ensuring people's views were positively actioned. Recent feedback on the lack of activity resulted in an improved activity programme which residents and staff said was continuing to improve.

Some staff had attended training on Caring About Physical Activity (CAPA) and were promoting mobility through a local walking group and trips to the local shops and amenities. The residents enjoyed visits from the local school children as well as organised entertainment and trips to places of interest. Regular evaluation of the this will ensure residents continue to enjoy activities as well as demonstrating how this has a positive effect individuals who experience distressed reactions.

Residents could be confident that staff had good relationships with other healthcare professionals and were good at seeking advice and support where needed to ensure people's health and wellbeing. There was an intermediate care unit which supported people's transition from hospital to home with a programme of rehabilitation and physiotherapy in order that they could return to independent living.

Medication was stored in individual rooms within secure medication pods and was administered by staff and audited regularly by the manager to ensure safe practice.

The home is spacious, and residents could wander freely between both floors. There was a large dining room which residents can access independently with drinks and snacks visible and available. Some residents made their own drinks from the pantry areas within the units. Staff supported people individually where required and completed additional monitoring charts if required to ensure people's wellbeing.

How good is our leadership?

4 - Good

People should be supported by a service and organisation that is well led and managed.

An effective quality assurance system had been developed and covered a wide range of key areas from healthcare, to the environment. This provided the manager and senior management with a full overview of what was happening within the service as well as up to date action plans and outcomes.

We could see this improved auditing system was working well and provided a good overview of the service, people's healthcare needs and management of this and we look forward to seeing how this is continues to develop and improve the service further.

There was a complaints and concern policy and the manager had a log to record any issues raised by residents or visitors. Feedback from consultation suggested people were not aware of how to complain and the manager was looking at ways to make this easier and ensure people were more familiar with this process.

Accidents and incidents were recorded and staff were recording any follow-up observation to ensure people's wellbeing. These were evaluated by the manager with measures to reduce risk of recurrence for example increased observation and the use of assistive technology.

The residents and relatives/carers we spoke to spoke positively of the support they received from the management and staff within the home and said they were kept informed through meetings and regular reviews ensuring people were kept up to date.

The manager promoted leadership and encouraged staff to attend training and be involved in the quality assurance systems within the home. Recently recruited staff we spoke to told us they felt well supported by their colleagues and manager, had received a good induction and had settled in well.

There was a very informative improvement plan which had been completed using the new framework for inspection. This informed people of what was happening within the service and what the future plans were going forward. We could see the plans involved increasing resident, staff and relative participation in the service particularly around activities and look forward to seeing how this has benefitted people at the next inspection.

How good is our staff team?

5 - Very Good

People using care services should have confidence in the people who provide support because they are trained, competent and respond promptly to requests for help.

The residents and relatives we spoke to spoke positively about the support they received from staff and said they were helpful and attentive. We observed staff responding to requests promptly in a nice dignified manner which residents responded well to.

We saw a group of highly motivated, competent staff who were happy to spend time interacting with residents and visitors.

Staff told us they worked well as a team and had good support from the manager who had an open door policy and was regularly seen talking to residents and observing staff practice.

Senior staff members had received the appropriate training and were able to administer medication and deal with visiting professionals appropriately.

Staff were aware of their responsibilities and the manager was promoting leadership through the development of staff champions. This involves staff who have expressed an interest in a particular area receiving additional training and support in order to assist their colleagues to improve their knowledge and practice further.

A record of staff registration with the Scottish Social Services Council was kept and this confirmed that staff were appropriately registered to work in service.

The provider organises regular face to face as well as online training. Staff told us they received appropriate training to support them in their role and to deliver positive outcomes for the people who use the service. Some staff had requested mental health training which the manager was currently organising. Staff completed monthly medication competency assessments, discussed medication at meetings and with training and regular auditing by the manager this ensured continued improvement.

Staff told us they felt well supported through regular meetings and supervision to discuss any concerns and felt they were listened to and valued by the manager. The minutes of staff meetings were emailed to those who were unable to attend to ensure everyone is kept up to date of any changes.

The manager carried out regular dependency assessments and staff told us they felt there were enough staff to meet people's needs. We could see that there were occasions where staff were given protected time to support social/recreational activities. The staff rotas were under review to ensure every day provided the same consistent staff numbers as these varied at times due to staff shift patterns.

How good is our setting?

4 - Good

People should benefit from high quality facilities that are comfortable, homely, safe and well maintained.

Canderavon is built over two levels with a passenger lift providing access to the first floor. Half of the first floor is currently being used for intermediate care and there are plans in progress to expand this to occupy the full floor.

All rooms provide single en suite facilities and were decorated to individual choice. There is a designated smoking room on the first floor and a spacious hairdressing room on the ground floor.

The home was clean, fresh and tidy and staff we spoke to told us they had plenty of equipment to assist them when providing care and support. Each floor has a pantry for residents and visitors to access to make drinks and snacks.

There are communal bathing and showering facilities on each floor and we found these clean and tidy. Staff had added ornaments and pictures which had made these areas more homely for people to use.

The manager was carrying out regular audits of the environment to identify any issues, this was having a positive effect on the home which was clean and tidy throughout. Appropriate safety checks of the environment and equipment were taking to ensure a safe environment for residents.

Appropriate safety measures including the use of assistive technology was used to reduce the risk of falls or people entering the wrong room. This was recorded within the care plans and was regularly assessed for effectiveness.

Repairs were recorded and reported to the providers centralised repair service. Some of these repairs were resolved quicker than others and we found some lengthy delays in repairs which appeared to be closed off within specific timescales without being resolved. This resulted in the manager having to continually request updates demonstrating a lack of acknowledgement and urgency at provider level.

The manager and staff had completed an audit of the environment using the Kings Fund Tool. This is an assessment tool used to improve the environment for people living with dementia. This had been used to make positive changes which benefited residents with improved signage which in turn encouraged independence and mobility.

Residents were able to wander freely around the home with no restrictions. Staff encouraged and supported people to wander and ensured any walking aids were within their reach to assist them.

There was an enclosed garden area to the rear of the building. The security of this area was under review to ensure residents safety and reduce the risk of gaining access to the car park unsupervised. We will continue to review this at future inspections.

How well is our care and support planned?

4 - Good

People should be able to benefit from care plans which are regularly reviewed, evaluated and updated which consistently informs all aspects of the care and support they experience.

The provider was in the process of introducing a new care plan format to ensure consistency across all South Lanarkshire Council residential establishments and was work in progress within Canderavon.

The care plans we looked at provided some good, person centred, information on individuals needs and preferences and how staff should support these.

Risk assessments were in place with details on how to monitor and manage the identified risk. The service had good links with external professionals who staff consulted if they had any concerns.

There were a few instances of inconsistent information within the plans which staff were able to clarify. Information on medical conditions, some of which complex and required specific knowledge and support should be incorporated into these new plans. This will assist staff to provide the appropriate care and support and should include evidence of input and advice from healthcare specialists relevant to these conditions.

Some residents experienced episodes of anxiety and distress. Staff were able to describe how they positively supported individuals at this time and it is this level of detail along with an evaluation on medication used to manage these episodes that will improve these plans further.

We saw that people's rights were respected and where there were issues of capacity, appropriate legal arrangements were recorded and in place. This meant that people experiencing care could be confident that their views would be sought and choices respected, including when they had reduced capacity to make their own decisions.

We found that overall they were completed well and look forward to seeing how these develop over time.

Six monthly reviews had been behind but the service had rectified this and were these were taking place regularly in order to discuss any concerns or changes in individual care. Relatives we spoke to said they were kept fully informed and had been involved in the review process resulting in confidence in the standard of care and support provided.

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

Requirements

Requirement 1

The provider must have an overview of the whole service. Quality assurance systems must be reviewed and improved in order to recognise risks, mitigate these and improve outcomes. Audits should include, but are not limited to;

- Health care audits, such as wounds, weights, falls and continence
- The quality of care plan information
- The quality of the environment
- Accidents/incidents
- Staff training

Health and Social Care Standards – My Support, my life;

4.19, 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes'.

4.23, 'I use a service and organisation that are well led and managed'.

This is to comply with: The Social Care and Social Work Improvement Scotland (Requirements for care services) Regulations 2011 (SSI 2011/210), Regulation 4(1) (a) – Welfare of users

Timescale for implementation: To be completed by 19 November 2018

This requirement was made on 12 July 2018.

Action taken on previous requirement

We found that the manager had implemented a new quality assurance system covering a wide range of topics from the environment to documentation. We found this improved auditing system was having a positive impact on the standards we saw at this inspection. Please refer to key question 2 How good is our leadership for further information.

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 service should develop the range of activities that are available for people who use the service on a day to day basis, ensuring that such activities are responsive to the age, abilities and preferences of the resident.

Health and Social Care Standards – My Support, my life;

1.25, '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'.

This area for improvement was made on 12 July 2018.

This area for improvement was made on 12 July 2019.

Action taken since then

This area for improvement has been met, please refer to quality theme 1 How well do we support people's wellbeing for further information.

Previous area for improvement 2

The manager should develop a plan to demonstrate how the environment will be maintained. This should include:

- A review of the communal bathroom areas

Health and social care standards - My Support, my life;

5.22, 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment'.

5.11, 'I can independently access the parts of the premises I use and the environment has been designed to promote this'.

5.21, 'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices'.

This area for improvement was made on 18 July 2018.

This area for improvement was made on 12 July 2019.

Action taken since then

This area for improvement has been met, please refer to quality theme 4, How good is our setting for further information.

Previous area for improvement 3

The manager should ensure that all portable heaters and hot water units have been fully assessed and are fully operational and safe to use, without posing any risks to residents/visitors and staff. Residents who choose to have portable heaters should have one which meets with the current health/safety and fire regulations. This should be documented within individual care plans demonstrating how staff have risk assessed and reviewed this regularly, to ensure individuals safety, taking into account the location and surface temperature of these heaters when in use.

Health and Social care Standards - My Support, my life;

5.17, 'My environment is safe and secure'.

This area for improvement was made on 12 July 2018.

This area for improvement was made on 12 July 2019.

Action taken since then

All portable heaters had been removed and the hot water units in the pantry areas had been locked and were no longer in use posing risk to residents and visitors. This area for improvement has 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 good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

How good is our staff team?	5 - Very Good
3.2 Staff have the right knowledge, competence and development to care for and support people	5 - Very Good

How good is our setting?	4 - Good
4.2 The setting promotes and enables people's independence	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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