

Rubislaw Park Care Home Care Home Service

Rubislaw Park Road
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Type of inspection:
Unannounced

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Service provided by:
Rubislaw Care LLP

Service provider number:
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CS2014332384

About the service

Rubislaw Park Care Home is a purpose-built, two-storey building set in the west end of Aberdeen. The building was significantly refurbished in 2015 and an extension was completed in 2018 to increase occupancy. It is owned and managed by Rubislaw Care LLP. The service is registered to care for up to 86 older people; at the time of the inspection occupancy was 71.

The layout has been designed to encourage small group living in small units, each with its own living and dining area. A number of shared facilities including a bar and cinema room provides opportunities for people to engage in with families, fellow residents and family. There are secure outdoor/garden areas.

Rubislaw Park states 'our home is built on a foundation of respecting individuals' needs and wishes and on providing the flexibility for residents to make their own choices. The home offers a homely living environment that is ideal for older people with care needs, overseen by a skilled and friendly team experiences in a personalised approach'.

This service registered with the Care Inspectorate on 22 April 2015

What people told us

Before the inspection we sent the service questionnaires to distribute to people who use the service, their relatives and friends; we had 18 returned. During the inspection we also spoke with people being supported in the service and some of their relatives and visitors. Most of the feedback was positive. One family shared with us their very personal experience of end-of-life care. They told us that the service "couldn't have done more" and they felt that the service looked after them as well as their relative. Some of the information shared with us related to individuals; this was shared with the management team at the end of the inspection. Individual comments included:

"I am absolutely happy with the meals."

"I am happy being here, I've made a few friends."

"when I buzz I sometimes have to wait a long time, especially at morning and at tea-time."

"the manager pops in from time-to-time."

"I would like a plainer biscuit sometimes with my cup of tea."

"I enjoyed spending time outside this morning."

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

4 - Good

We found the service to be good at supporting people's wellbeing. This means that there are a number of strengths which taken together, clearly outweigh areas for improvement.

We found there to be a positive and relaxed atmosphere in the home where staff knew people well and were responsive to individual need. It was clear that the service respected the needs of the immediate family as part of people's overall care. This was supported through people having fobs which allowed them independent access to the service as well as access to a well stocked bar/café area and opportunities for private dining for planned events. This helped people continue with some aspects of family life that they had built up prior to moving into the care service.

We found there were mixed experiences for people who had recently moved in to the service. For some, effective planning had supported them to have their room organised with items that were familiar to them and arrangements made to have additional services installed to help them keep connected with friends and family. However not everyone we spoke to had had this experience. One person told us they liked reading and usually enjoyed a daily newspaper. They had no books in their room and had no knowledge that there was a library within the home they could use. Plans for their newspaper to be ordered had yet to take place. We felt that plans could be enhanced at the point of admission to help promote orientation, social inclusion and reduce isolation.

People were able to choose suitably presented and healthy meals and snacks and attention had been taken to support a positive dining experience. We found that there had been an emphasis on improving the nutritional intake for people who were at risk of under nutrition and those with dementia. This meant that they had opportunities for increased support to help promote a good nutritional intake.

How people spend their day is important in maintaining people's physical and mental wellbeing. We felt that there were good links with the community and there were a range of planned activities. It was encouraging to see that the service had initiated a sporting memories group to support people's interests. During the inspection we saw people enjoying time outside, spending time with family and staff in the courtyard. We were, however, disappointed to see some of the smaller courtyard areas were not used and underdeveloped. This meant that opportunities for people to access the gardens independently were not maximised. The management team told us that plans were in place for development of these areas.

Helping people to maintain their mobility and falls prevention had been a key area of improvement for the service. Some people had been supported to personalise their mobility aid through an initiative called "pimp my zimmer". This helped people identify their own walking aid and encouraged its use which contributed positively to reducing falls and keeping people safe. Falls meetings provided opportunities to review and consider how they could further reduce people's risk of falling. However we found that on occasion not all of the falls records were considered at this meeting and the documentation did not always provide full information to help identify if there were trends or action that could be taken by the provider to help prevent a recurrence.

We were satisfied that staff knew their responsibilities included keeping people safe. We saw that the service had supported staff to increase their awareness of the local adult support and protection procedures and they told us that they felt more confident in identifying what constitutes an adult at risk. As a result the team had ongoing discussions about how best to support people who present with stress and distress reactions.

We found that medication management was good and we were confident that people received their medications in the way that it had been prescribed for them.

How good is our leadership?

4 - Good

We found that the service was good at quality assuring their performance and leading on improvement. This means that there are a number of important strengths which will have a significant impact on people's experiences and outcomes.

We found that recent changes to the management team had had a positive effect on the service. People told us that they felt there was now "a link between the business and operational side of the service." We felt that management presence on the floor supported the team well. It was encouraging to see that they were aware of and involved in the key priorities of the day. This helped them identify where additional support was required and respond appropriately.

A development plan was in place which outlined the key areas for improvement. We felt that the service would benefit from reviewing the plan at more frequent intervals to help them evaluate progress and help them work towards achieving their goals. Staff clearly knew and were involved in the improvements that had arisen from our last inspection; however they were not familiar with the detail of the improvement plan for the service. It is important that staff are fully appraised and involved in the plans for the development of the service so they are working towards a shared purpose and vision.

We saw that some units were leading in innovation and development. For example coaching conversations took place to support good practice in working with individuals who were at risk of under-nutrition. This contributed positively to nurturing and supporting the team to improve. It would be good to see this supported throughout the entire team.

Accidents and incidents were recorded and reviewed. We felt that many of the records that we looked at lacked important detail to help determine if there were actions that could be taken to prevent a recurrence. We also found that not all accidents records relating to falls had been reviewed as part of the monthly falls meetings. This meant that the information that informed discussion was incomplete (see area for improvement one).

How good is our staff team?

4 - Good

We found that the service was good at getting the staffing levels right to meet people's needs and that staff worked well together. We made this assessment because there were a number of important strengths; however improvements could be made to maximise people's wellbeing.

Staff demonstrated kindness in their engagement with the people they supported. This was because they knew them well, were responsive to their needs and people told us they had developed positive relationships with the care team. However we did find that the experience of some people newly admitted to the service was not as positive. They told us that although staff came into see them regularly, they were often rushed, task focused and did not spend a lot of time with them. This meant that it was difficult for them to settle into their new surroundings and build up trusting relationships with those providing their support. The management team had acknowledged this and were enhancing their support and planning before admission to help identify how best to support people on admission.

We found that the service had implemented safe recruitment practice and supported new staff well. This meant that they were helped to understand what was expected of them and supported to do their job well.

Staff were supported to share their experiences of what works well when supporting people. We found that a new coaching programme had been implemented in one of the units to support people who found it difficult to eat well. As a result, staff were encouraged to talk about what was working well and think about situations that could be barriers to supporting good nutrition. We felt that this was a positive way of supporting staff and considering and planning individual needs. It would be good to see this practice implemented throughout the home.

We felt that recent training had had a positive impact on people's practice. This was because staff were able to tell us about changes they had made to the way they worked as a direct result of training they had undertaken. This included manual handling and adult support and protection.

Staff were informed about people's needs and any changes in their wellbeing at the start of each shift. We felt that helped keep people informed of how best to support individual need. However, we found that communication could be improved where a person's need changed over the duration of the day; for example someone who was diabetic. This is important because it has an influence on their diet and food intake.

How good is our setting?

5 - Very Good

We found that the setting was very good at promoting and enabling independence. This means that there are major strengths in supporting positive outcomes for people.

The environment was clean, well maintained and comfortable. Facilities included a bar, a library and a private dining area and we found that there were no barriers to people accessing these, as a result people could freely move throughout the home. We saw that people frequently accessed the local community and the service had its own transport to help facilitate this. This meant that people could be supported to maintain links within the local area they had prior to coming in to the home.

The library had a computer and internet access and we saw that some people had their own personal telephone lines in their bedrooms. This helped them keep on touch with friends and family. We saw that staff had shopped for clothing for some people, we felt there had been a missed opportunity to help them be involved in choosing their own clothing through internet shopping this would offer them choice and let them have a say in what was being purchased. We saw that people's had brought items into the home to help give their bedroom some familiarity and make it feel like home. All bedrooms had en-suite facilities which helped support people to maintain independence in attending to their personal care where possible. Some people had keys to their bedrooms, this meant that they could lock their doors which helped keep their personal belongings safe and secure.

People who used the service were able to make themselves a drink and get a snack in some but not all of the units. One of the units had a training kitchen, however there was very limited crockery and provisions for it to be functional. As a result it was not frequently used. The ground floor was built round a range of courtyards, we found that the main courtyard leading to the reception area was regularly used for people to spend time outside. People accessed this area with the support and supervision of staff. The other courtyards which had direct access from each of the ground floor units were bereft of plants, chairs etc and views from bedroom windows etc not pleasant.

A call system was in use to help people summon support should they need. This helped give people confidence that staff were available should they need assistance. Not everyone was able to use or understood how to use the traditional call button that was part of the system and we found that assistive technology such as sensor mats was in use to support this. These are particularly useful where people are at risk of falls and helps people stay safe and independent.

How well is our care and support planned?

4 - Good

We found that the service was good at assessing and planning care in a way that meets people's needs and wishes. This was because there were a number of important strengths which outweighed the areas for improvement.

Everyone had a written plan of care. We liked the seven day care plan that people had on admission and felt that this was a good starting point to give staff important information about people's needs. We did however find that not all of the important information that was known about the person had been included in the plan. This meant that there was the potential for people's needs not to be considered at the point of admission. We were encouraged to hear that pre-admission assessment and planning was an area of improvement that the management team was working on to help bring about improvement.

The serviced recognised the need for important information to be made readily available to staff to help them understand people's needs. It was good to see a summary of the key aspects of people's care needs be discretely available in people's bedrooms. This meant that staff could easily access information on people's support needs.

We felt that plans contained good information on how to support people who presented with stress and distress reactions. Staff confirmed with us that they were knowledgeable about how to best support people and strategies to use for an early intervention. This contributed positively to preventing people experiencing stress from becoming distressed.

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

Requirements

Requirement 1

1. The provider must ensure that people are protected from potential harm. In order to do this the provider must:
 - Ensure that staff have a clear understanding of their roles and responsibilities in adult support and protection.
 - Demonstrate that the internal policy in adult support and protection is fully implemented by staff
 - Demonstrate that action is taken to promote positive outcomes for people where there are known risks that could be reduced; in particular in relation under nutrition and falls.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which states 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20) and 'I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or at risk of harm' (HSCS 3.21).

It is also necessary to comply with Regulation 210 4(1)(a) (Requirements for Care Services) of The Social Care and Social Work Improvement Scotland Regulations 2011.

This requirement was made on 8 February 2019.

Action taken on previous requirement

Following the last inspection the service had provided a range of training to staff in: adult support and protection, stress and distress reactions. We found that staff were more confident in what constituted harm and potential harm. As a result we saw that there were more discussions and reviews about actions that should be taken to keep people safe. We also found that there had been an increase in reporting incidents to management and relevant authorities. As a result referrals had been made to external agencies for support and plans of care were being regularly reviewed to help ensure that actions were right to help promote safety and well-being.

People who were at risk of under nutrition were reviewed regularly and monitored by the management team. This helped identify if the plans of action for increasing calories was being successful. We saw that people who had a poor nutritional intake were encouraged to eat more regularly and snack boxes were in place to help support this. This meant that there was a range of snack type foods available throughout the day for them. We were encouraged to see that there were regular discussions about how best to support people who had poor appetites. As a result staff shared what worked well and what didn't work well to help have a consistent approach to meeting people's needs.

Met - within timescales

Requirement 2

The provider must ensure that people receive their topical medications (medications that are applied to the skin) in the way that they have been prescribed.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which states 'any treatment or intervention that I experience is safe and effective (HSCS 1.24).

It is also necessary to comply with Regulation 210 4(1)(a) (Requirements for Care Services) of The Social Care and Social Work Improvement Scotland Regulations 2011.

This requirement was made on 8 February 2019.

Action taken on previous requirement

Topical creams and recording documentation were kept in people's bedrooms. This helped enable staff to apply them when they were required. We examined a sample of recording documentation and were satisfied that they were being applied in the way they were required.

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 consider the way in which the service will work towards meeting the Health and Social Care Standards set by the Scottish Government. The service needs to ensure that staff providing support to people have up to date and accurate information about their support needs.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) 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).

This area for improvement was made on 8 February 2019.

Action taken since then

We found that the service was considering the impact of any changes made to care or to practice on the people that use the service. This is consistent with the health and social care standards that identifies what people should expect from the care service.

Everyone had a plan of care and we felt that the seven day care plan was a good starting point that summarised the level of support required to meet people's needs. We have discussed in the body of this report the need to ensure that all important information is contained in this document.

Complaints

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

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 good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.3 Staffing levels and mix meet people's needs, with staff working well together	4 - Good
How good is our setting?	5 - Very Good
4.2 The setting promotes and enables people's independence	5 - Very 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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