

St. Margaret's Home - Dundee Care Home Service

Victoria Road
Dundee
DD1 2NB

Telephone: 01382 223865

Type of inspection:

Unannounced

Completed on:

2 October 2019

Service provided by:

The Trustees Of St Margaret's Home

Service provider number:

SP2003000092

Service no:

CS2003000509

About the service

St. Margaret's Home is situated in a residential area of Dundee, close to the city centre. It is registered to provide care for up to 32 older people. The home is overseen by a board of trustees. The home benefits from its elevated position within the city, affording views of the River Tay. Accommodation is provided across two floors, with access to an outdoor roof garden from the upper lounge floor. Limited parking is available on the site.

At the time of inspection an extension to the ground floor was being built to provide additional communal accommodation and two extra bedrooms for people.

What people told us

During this inspection we spoke with eight residents, three family visitors, three visiting health professionals and four staff.

Comment included:

"Staff seem to be experienced in looking after the residents".

"Says she likes it".

"Staff seem to be regular although some changes occur".

"I am in regularly and things are always ok".

"It's nice here, the staff are very kind".

"It's ok, I would prefer to be home, it's fine".

"We are very appreciative of the care provided".

Two people told us they felt bored and three lonely at times in the service.

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?	3 - Adequate
How well is our care and support planned?	3 - Adequate

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 evaluated the service is performing at an overall good level. An evaluation of good applies to performance where there is a number of important strengths which taken together clearly outweigh the areas for improvement. The strengths will have a significant positive impact on people's experiences and outcomes, however, improvements are required to maximise wellbeing and ensure that people consistently have experiences and outcomes which are as positive as possible.

People who use care services should feel confident they will be supported with compassion, dignity and respect. To help us assess how well the service was performing we spoke with residents, their families and carried out observations. It was positive to hear that people felt they were treated with kindness and dignity. Comments included 'The staff are very nice' and 'Nothing's too much bother, they respond quickly when I need help'.

From our observations we saw that staff treated people well and involved them in conversations and offered good reassurance when supporting a person. An example of this was when assisting a person to mobilise, staff discussed what was happening and why, chatting with the person.

To help people get the most out of life, it is important that care services encourage meaningful activity. The service employed two activity co-ordinators, people told us that overall they enjoyed the range of activities with each co-ordinator bringing different skills. We heard of people being supported to take part in group activities as well as one to one support. During our visit we heard a group discussion about the latest newsletter and activities that were planned, saw people enjoy darts, dominoes and crafts. One person was also being supported to go out shopping and for a coffee. She told us that she enjoyed doing this and found it good for her wellbeing - 'It feels great to get out and about'. The service needed to continue to build on activity provision, however, it was acknowledged that the ongoing building works had some impact on this.

People should receive care and support that is safe and effective. We found that health assessments were carried out on a planned and regular basis. Where a risk was identified a specific care plan was in place. This helped to optimise people's health and wellbeing.

We spoke with three visiting health professionals, each told us that they were satisfied that the service worked well and made appropriate and timely referrals to them. They told us that staff followed guidance well about how best to support residents.

People should feel confident that care interventions are safe and effective. Although medication administration was mostly managed well, we found areas where practice should be enhanced. This was particularly relating to handwritten entries, protocols and homely remedies. **(See area for improvement one.)**

We observed two mealtime experiences for people, whilst this was overall very positive with nicely presented meals offered in a supportive way, consideration needs to be given to the noise levels from the kitchen area.

Areas for improvement

1. To ensure service users receive care and support which is safe and effective, the service provider should address the quality of medication management. This should include, but is not limited to:

- handwritten entries on medication administration sheets
- implementation of protocols for as required medications
- ensuring homely remedy agreements are accurate and not duplicating regular medication.

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

How good is our leadership?

4 - Good

We evaluated the service is performing at a good level. An evaluation of good applies to performance where there is a number of important strengths which taken together clearly outweigh the areas for improvement. The strengths will have a significant positive impact on people's experiences and outcomes, however, improvements are required to maximise wellbeing and ensure that people consistently have experiences and outcomes which are as positive as possible.

People who use care services should feel confident that the organisation providing their care and support is well led and managed, with robust and transparent quality assurance systems in place.

The service used a range of audits to help ensure that people's needs were being addressed. This included checks of care plans and medication management. At the last inspection we asked the service to consider developing an improvement plan outlining short and medium term achievable goals. We saw that the service had implemented some areas for improvement using a recognised format to help monitor and assess these changes.

The service was in the process of completing the King's Fund Environmental Tool. This will help them to identify environmental improvements to take forward to ensure a high standard of accommodation designed to suit residents' needs.

These were in the early stages of development and needed to be taken forward, specifically considering a wider range of improvement areas, timescales and monitoring of progress. We have continued this as an area for improvement. **(See area for improvement one.)**

Areas 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 would benefit from a clearly written improvement plan which outlines short and medium term achievable goals.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes'. (HSCS 4.19)

How good is our staff team?

4 - Good

We evaluated the service is performing at a good level. An evaluation of good applies to performance where there is a number of important strengths which taken together clearly outweigh the areas for improvement.

We would expect that staffing levels were appropriate to meet people's needs and that staff work well together as a team.

At this inspection we reviewed whether staffing levels, skill mix and deployment of staff met the needs of people living at St. Margaret's.

Through our discussions with residents and staff we were satisfied that staff offered good support and that they were responsive to people's needs.

We saw that staff were present in all communal areas and responded promptly to calls for assistance from people using alarm points. Residents confirmed that staff offered them good assistance at the times they needed it.

How good is our setting?

3 - Adequate

We evaluated the service as performing at an adequate level. This means that whilst strengths could be identified these just outweigh weaknesses. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people is reduced significantly because key areas of performance need to improve. Improvements must be made by building on strengths whilst addressing those elements that are not contributing to positive experiences and outcomes for people.

It is important that the setting promotes people's independence and is relaxed, welcoming and free from intrusive odours. We found the home to be clean and homely.

Since the last inspection the new extension had been progressed. At the time of our visit the building work was in full development with numerous contractors on site. This had a significant impact on the services ability to promote independence and free movement around the communal sitting area on the ground floor. The management team were hopeful the work would be completed quickly to allow them to take forward actions identified in their developing improvement plan to promote independence.

We heard that residents would be involved in the layout of the new setting and decide how best to use the additional space. This is important as people should have access to premises that are equipped and furnished to meet their needs and wishes.

Whilst there had been some steps to implement an improvement plan this needs to be further progressed. The requirement made at the last inspection is continued. **(See requirement one.)**

Requirements

1. In order to ensure that the environment meets with the Health and Social Care Standards set by the Scottish Government, the provider must put in place an improvement plan by 31 December 2019. This plan must detail both short and medium term environmental changes and improvements which are realistic, measurable and achievable.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'I can use an appropriate mix of private and communal areas, including accessible outdoor space, because the premises have been designed or adapted for high quality care and support' (HSCS 5.1), and in order to comply with The Health and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. SSI 201 Regulation 10 2 (a) Fitness of Premises.

How well is our care and support planned?

3 - Adequate

We evaluated the service as performing at an adequate level. This means that whilst strengths could be identified these just outweigh weaknesses. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people is reduced significantly because key areas of performance need to improve. Improvements must be made by building on strengths whilst addressing those elements that are not contributing to positive experiences and outcomes for people.

Assessment and care planning should reflect people's needs and wishes and guide staff practice. We found that care plans were clearly written and provided an adequate guide to the care and support people needed. Plans contained essential information about specific health conditions, providing staff with an overview of residents support needs.

Following the last inspection we could see that the service had reviewed the format of the plans and had introduced these for new people coming into the home as well as some existing residents. This was work in progress. We made a few suggestions about how to develop the plans further which would help to focus on people's strengths, goals and wishes. We reinforced the importance of using the Health and Social Care Standards as a useful tool for planning care in a more outcome focused way.

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

Requirements

Requirement 1

In order to ensure that the environment meets with the Health and Social Care Standards set by the Scottish Government, the provider must put in place an improvement plan by 14 December 2018. This plan should detail both short and medium term environmental changes and improvements which are realistic, measurable and achievable.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'I can use an appropriate mix of private and communal areas, including accessible outdoor space, because the premises have been designed or adapted for high quality care and support.' (HSCS 5.1), and in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. Scottish Statutory Instrument 210 Regulation 10 2(a) Fitness of Premises.

This requirement was made on 9 October 2018.

Action taken on previous requirement

The service had commenced an improvement plan. The management team told us that this would be progressed on completion of the new extension. We discussed why it was important to proceed with the plan without delay. This would allow them to take into account the new build and plans for making it as beneficial to promoting good outcomes for people.

Not met

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 current safety measures and equipment constitute a limit to people's freedom and risk assess these accordingly. Where a range of options exist, the least restrictive option should be chosen and there should be regular evaluation of this aspect of care, involving both the service user and their family wherever possible. Paperwork should reflect the legal requirements for consent and consultation.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'If my independence, control and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively.' (HSCS 1.3).

This area for improvement was made on 9 October 2018.

Action taken since then

At the last inspection we reported that we could see that equipment and technology were being used in order keep people safe, however, there was less evidence that this had been discussed thoroughly with people and their families as the least restrictive option. We saw this time evidence that the manager consulted with people via telephone and had recorded verbal agreements to any restrictions. This should be followed up timeously with written consents.

Previous area for improvement 2

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 would benefit from a clearly written improvement plan which outlines short and medium term achievable goals.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19).

This area for improvement was made on 9 October 2018.

Action taken since then

This area continues to be progressed.

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?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very 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?	3 - Adequate
4.2 The setting promotes and enables people's independence	3 - Adequate

How well is our care and support planned?	3 - Adequate
5.1 Assessment and care planning reflects people's planning needs and wishes	3 - Adequate

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànanan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿੱਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.