

Tarriebank House Care Home Service

Marywell
Arbroath
DD11 5RH

Telephone: 01241 874458

Type of inspection:

Unannounced

Completed on:

23 September 2019

Service provided by:

Tarriebank Limited

Service provider number:

SP2003000058

Service no:

CS2003000401

About the service

Tarriebank House registered with the Care Commission in 2002 and transferred its registration to the Care Inspectorate in 2011. The service is situated in a rural location north of the town of Arbroath. It provides residential care for a maximum of 24 older people and is a privately owned, independent service.

Accommodation is provided across both the original country house and a modern extension, with all bedrooms being en-suite. The home benefits from being surrounded by attractive gardens and countryside views. Outside seating is provided on a patio area and in various locations around the garden grounds. Inside the home there is a large living room and separate dining room as well as a small 'tea room'.

What people told us

During the inspection we had the opportunity to speak with a number of people using the service. Comments included:

- 'It's wonderful.'
- 'Very nice.'
- 'I'm a bit isolated and rather lonely.'
- 'It's perfect.'
- 'I've got on well.'
- 'The girls are nice.'

We were also able to speak to a small number of visiting relatives who reported being happy with the care provided and welcomed by the staff members at the home.

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?	3 - Adequate
How good is our staffing?	5 - Very 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

Tarriebank House has a stable and committed staff team, a number of whom have worked at the home for many years. The home benefit from a comprehensive team of domestic, catering, maintenance and gardening staff who are a strong resource for the home. We found the service to be performing at a good level under this key question.

People should experience compassion and respect from those who care for them and their wishes and preferences should shape how they are supported. We were pleased to observe many positive and warm interactions during the time of our inspection and hear much laughter within the home. Staff spoke confidently about person-centred care and were able to give examples of the way in which they supported people to make choices and live according to their preferences. People living in the home reported being happy with the standard of care they received. Comments made during the inspection included 'it's wonderful'.

It is important that people get the most out of life and are supported to be physically active both indoors and outdoors. We could see that good progress had been made in ensuring that a range of activities was available within the home and that people had the opportunity to attend events and occasions out with the home. We observed people enjoying a seated exercise class during the inspection and walking outside in the attractive gardens. Further opportunities exist to support people's use of the garden and participate in caring for the home's dog. We were able to suggest ways in which independence could be promoted at the time of the inspection and feel this is an area for development. An area for improvement is suggested. **See area for improvement 1.**

We would expect that people's health benefits from their care and support and that care is based on best practice guidelines at all times. We were pleased to hear from relatives that they had seen positive progress with their loved one's health since arriving at Tarriebank. Where nursing care is needed it is provided by the local district nursing team and staff reported good relationships with this team, to the benefit of those living in the home. It is important that food and drink meets people's wishes and we were reassured by the kitchen staff's knowledge of people's nutritional needs. People are able to feedback regularly to the cook, ensuring that the menu reflects their preferences.

The home have recently experienced a high turnover of residents and we saw that not all paperwork had been completed for 'as required' medications. This meant that clear guidance was not always available for staff in order to meet people's medication needs. We were able to highlight the importance of correct paperwork to the manager at the time of the inspection.

Areas for improvement

1. The provider should consider the ways in which independence could be promoted within the service.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state 'I am empowered and enabled to be as independent and as in control of my life as I want and can be.' (HSCS 2.2).

How good is our leadership?

3 - Adequate

We would expect that quality assurance and improvement is well led and that leaders are responsive to feedback, using learning to improve. We found the service to be performing at an adequate level in this area.

We had the opportunity to examine a number of audits which the management team were undertaking and could see that efforts were being made to gather information and monitor progress. At times however, the audits being undertaken did not identify the key areas which would result in improvement, meaning that opportunities to take action were missed. Care plan audits were not highlighting when care plans required updating and medication audits were not always identifying when errors had been made. As a result there was a risk that important information regarding people's care could be missed.

It is important that people feel comfortable to give feedback and that leaders are responsive, using learning to improve. We were able to examine some recent questionnaires which the service had used to gather views from residents, their relatives and staff. These provided an important opportunity for the service to consider their next steps. The service would however benefit from a comprehensive development plan to outline the future direction of the home. This would enable feedback to be used in a meaningful way and to allow the service to set goals and measure outcomes. We were able to suggest using the new Health and Social Care Standards and the Care Inspectorate Inspection Framework to guide both the audit process and the development plan. An area for improvement is suggested. **See area for improvement 1.**

Areas for improvement

1. The provider should consider reviewing their quality assurance processes to identify where improvements are needed and developing an improvement plan based on the information gathered. The plan could cover:

- What areas need to be improved
- What the desired outcomes will be for residents
- How the improvements will be made
- When the improvements will be implemented
- Who will be responsible for the improvements
- How the improvements will be measured.

Development should be guided by the Health and Social Care Standards and resources indicated in the Care Inspectorate Framework document.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state '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?**5 - Very Good**

It is important that staffing levels are sufficient to meet the needs of people and that staff work well together to benefit those in their care. We found the service to be performing at a very good level in this area. We observed staff to be present throughout the day in the communal lounge and were aware that buzzers were answered without delay. Staff members reported that they were able to spend quality time with people and we observed people being engaged with staff in jigsaws, conversations, walks and a quiz during the time of the inspection.

Tarriebank benefits from a comprehensive team of domestic, catering and maintenance staff who all contribute to life at the home. Staff are clear about their roles and were positive about their ability to work as a team. We found that catering staff had good knowledge of people's nutritional needs and sought regular feedback, which they acted upon. It was clear that support from the wider team allowed staff with direct care responsibilities to focus on people's needs. Opportunities exist for non-care staff to contribute to promoting people's independence and we were able to discuss these with the manager at the time of the inspection.

How good is our setting?**3 - Adequate**

Tarriebank is set in large, attractive gardens and many rooms benefit from pleasant views of the gardens and surrounding area. Accommodation is provided in both the original country house and a more modern extension. Although a homely environment has been created and is enjoyed by those who live there, the building continues to present challenges of storage, maintenance and access. We found the service to be performing at an adequate level in this key area.

People should expect that the setting will promote their independence and that they can freely spend time outdoors. We were able to observe people enjoying the sunshine on the outdoor terrace during the time of the inspection and taking walks around the garden areas accompanied by staff. Access to the garden is currently restricted in order to limit the risk of falls however this potentially limits people's independence and ability to take positive risks which enhance their quality of life.

It is important that people are encouraged to retain their abilities by moving around the home independently whenever possible. The home currently undertake a King's Fund audit and it is important that work towards clearer signage and good quality lighting continues. We saw that a number of environmental issues were audited regularly but actions had not always been taken to address the issues identified. Although good progress had been made towards meeting a previous requirement, some elements remain unmet.

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

The management team at Tarriebank are currently in the process of introducing an electronic care planning system to replace their paper based care plans. The home hope that the electronic system will bring many benefits but the transition has brought a variety of challenges which the home are still in the process of overcoming. We found the service to be working at an adequate level in this area.

It is important that assessment and care planning reflects people's needs and wishes and that care plans are updated regularly and as people's needs change. We found that care plans for people recently arrived at the home and for those staying for respite care were not complete and this concerned us. There was not always sufficient information to adequately guide care. At times healthcare assessments, such as falls risk assessments, were being completed but the relevant care plan was not updated, meaning that key information about changes to care could be missed. Staff require the most up to date guidance in order to clearly direct the care and support. This was not always immediately available. An area for improvement is suggested. **See area for improvement 1.**

We could see that efforts had been made to involve relevant parties in the review of care however, due to lack of response and delays, the obligation to review care every six months had not always been met. We were able to remind the provider of their statutory duty to ensure care and support is reviewed at least every six months.

Areas for improvement

1. The provider should ensure that care plans clearly identify all known needs and risks with guidance on how they should be managed. Plans covering essential needs should be available promptly after someone's admission to the home.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state '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) and 'I am fully involved in assessing my emotional, psychological, social and physical needs at an early stage, regularly and when my needs change.' (HSCS 1.12).

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 people are kept safe and that adult support and protection issues are recorded and reported properly, the provider must:

- Fully risk assess any individual at risk of harm from their own or others' actions.
- Ensure that care plans and risk assessments are updated and reviewed regularly and/or when significant events occur.
- Put in place a system to ensure that adult protection concerns are identified and referred to the correct agencies, including notifications to the Care Inspectorate, by 5 October 2018.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards, 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). It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. Scottish Statutory Instrument 210 Regulation 4 1(a) Welfare of Users.

This requirement was made on 11 October 2018.

Action taken on previous requirement

We can see that recent incidents have been passed on to the correct agencies and families and care managers informed at each stage. Risk assessments are in place and care plans give guidance in relation to adult protection concerns. Plans would benefit from updating if and when further events happen to ensure that the most up to date information is provided to staff. Plans would also benefit from a clearer outline of capacity and consent as the service continue to develop their new care planning system.

Met - outwith timescales

Requirement 2

In order to ensure that people are living in an environment which is safe and meets their needs, the provider must:

- Undertake a full environmental audit, identifying all hazards and potential hazards.
- Take all appropriate actions to remove or reduce environmental risks.
- Regularly review and update the environmental audit.
- Complete a monthly falls audit which identifies any locations or times of specific concern and take action to address these by 5 October 2018.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards, which states 'My environment is secure and safe.' (HSCS 5.17). It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. Scottish Statutory Instrument 210 Regulation 10 (1) Fitness of Premises.

This requirement was made on 11 October 2018.

Action taken on previous requirement

At this inspection we could see that the service have made some steps to consider and improve their environment by undertaking a King's Fund Audit, which examines how the environment affects people living with dementia. This was a positive development.

A monthly falls audit was being undertaken which comprehensively identified areas of concern and actions to be taken. The service were also undertaking a variety of environmental checks but, in some cases, this did not result in action being taken to address the areas of concern. As such, some risks and potential risks around health and safety remained unresolved. We were able to highlight these issues to the manager at the time of the inspection and explain the actions which would need to be taken in order to meet the requirement.

Not met

Requirement 3

In order to ensure that all staff members working within the service are registered with the appropriate professional body the provider must:

- Adhere to the requirements set out in the Registration of Social Workers and Social Service Workers in Care Services (Scotland) Regulations 2013 (which states that all social service workers must be registered within six months of starting their role).
- Develop a system of overview which identifies registration renewal dates and act in accordance with the regulations should registration lapse.
- Inform the appropriate professional bodies should a significant event occur regarding a staff member, following due process and notification guidance by 26 October 2018.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards, which states 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.' (HSCS 3.14). It is also necessary to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. Scottish Statutory Instrument 210 Regulation 9 (1) Fitness of Employees.

This requirement was made on 11 October 2018.

Action taken on previous requirement

We were pleased to see that the original issues of concern have now been resolved and that SSSC registration is monitored, with any lapses in registration resulting in the cessation of the care role until re-registered. We were confident that the service understood their obligations in this area and had systems in place to support good practice.

Met - outwith timescales

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?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
How good is our staff team?	5 - Very Good
3.3 Staffing levels and mix meet people's needs, with staff working well together	5 - Very 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

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