

Southfields Care Home Service

Southfield House Care Services Ltd Slamannan Falkirk FK1 3BB

Telephone: 01324 851336

Type of inspection:

Unannounced

Completed on:

23 December 2020

Service provided by:

Swanton Care and Community (Southfield House Care Services) Limited

Service no:

CS2003055991

Service provider number:

SP2003003257



Inspection report

About the service

Southfields provides a care home service for adults with a learning disability aged 16-35 years. It is situated in a rural location near the village of Slamannan, near Falkirk. The service has been registered with the Care Inspectorate since 10 May 2004.

Southfields sits in extensive grounds that can be enjoyed by service users. The service has its own transport to enable service users to access the community and public transport links are available in Slamannan.

At the time of inspection six people were being supported by the service at Southfields.

This inspection was carried out by two inspectors from the Care Inspectorate.

What people told us

During our visit we spoke with some family members of people supported.

They spoke positively about the service and said their relative was happy there. The service had assisted with enabling people to keep good contact with family during the period of Coronavirus pandemic. Management had kept them informed of any important events and some of the main information they needed to know about.

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?	3 - Adequate
How good is our leadership?	3 - Adequate
How good is our staff team?	2 - Weak
How good is our setting?	3 - Adequate
How well is our care and support planned?	3 - Adequate
How good is our care and support during the COVID-19 pandemic?	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?

3 - Adequate

We evaluated this area as adequate. The service had managed to make some changes that had made some improvement for people's wellbeing and their experience of living at Southfields.

More training on values had taken place for staff, including for new staff during their induction. The atmosphere within the home was quite settled and people were relaxed as they went about their day. People were usually happy in each other's company and we saw people were comfortable with their support staff.

People were keeping in regular contact with family members and this was important to them. Due to the pandemic, usual arrangements for communication and contact had to be changed but we saw suitable alternatives had been put in place.

People were being supported to keep good health and wellbeing. Advice and guidance from external professionals were sought as necessary to assist someone in keeping well and happy. This area of people's support had clearly improved, and this should help people not to experience any unnecessary ill health or distress.

The service had more detailed information to guide staff about what people liked to do and how they liked to spend their time. People had one to one support and this meant they were able to have responsive and flexible support to suit their needs and wishes. People could decide at short notice to do something that was interesting to them.

However, whilst we thought there was more knowledge about what people liked to do, activity planning on this could be better. It was not clear how well people were being supported to engage in activities that they found interesting and meaningful. We thought robust plans for each person's day and week which would help provide routine and structure would be helpful. We were told this was being currently worked on by a member of staff.

We have made this an area for improvement for the service. We thought that at times people could be not engaged in any particular activity for periods of the day. The service provider should carefully consider each person's day and interests and have plans for activities for the person that staff can follow. **See area for improvement 1.**

Areas for improvement

1. People should spend their day and week being engaged in activities that suit them and their areas of interest. The service should make sure that people's activity plans for their day and week are very carefully considered with their needs and wishes central to any planning. Staff members should have the skills to facilitate a person to engage in activities of their choice and follow people's activity plans whilst also knowing when to be flexible and responsive to people's needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which states that: '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.' (HSCS 1.25) and '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

The management had an active presence within the service. People and their family members knew the management team. We heard that the manager was approachable and available. People can be confident the management are in touch with what happens in the service.

The manager was developing plans for the improvement of the service. He recognised that people could be supported better. We saw a number of actions that had been taken and how these could improve people's wellbeing. An example of this was redecoration plans that were happening for some of the communal areas in the home. We saw that people's needs and wishes informed these improvement plans in the service.

People can be assured that the management promote positive, respectful values. We saw this where there had been occasions when people's rights and wishes to be treated kindly and with respect did not happen and the management took actions to address this and reduce the chances of that happening again. These incidents had caused concern for people and it is important that people and their families can have confidence in management to take positive and constructive steps in response to matters like these.

Staff members reported that the manager had a vision for the service's improvement and how this would improve the quality of people's lives. This was good. Staff had received some support to improve their abilities and knowledge, plus there were some opportunities to reflect on and learn from the support they were providing to a person. This could be helpful, for instance, for understanding when a person had experienced distress and upset and what could have contributed to that.

Staff development was a key focus for the management team. This appeared to us as an appropriate focus and that supporting staff well through training and other development opportunities will help people to have a staff team who have strong values, work as a team, who understand their needs and wishes and have the skills and knowledge to support them well.

The manager acknowledged some of the quality assurance and checking that support was being provided to people to the standard they would wish for was not always happening as often as it should. Additionally, some of the routine support for staff to maintain or develop good social care practice was not always happening. We saw there were plans for the service to improve in these areas.

There was some evidence that the management team can improve their understanding of reporting responsibilities and the procedures for important areas such as communication with people's Welfare Guardians and adult protection matters. This had been brought to the manager's attention and steps were taken to address this.

How good is our staff team?

2 - Weak

During our inspection visit we had opportunities to spend some time with staff when they were supporting people and we had some individual conversations with staff, too. We observed that staff had a relaxed manner and people were comfortable with their staff member. In talking with staff, we found they were motivated to give people a good level of support and to help them enjoy their day.

People were often getting support from staff who knew them well but not always. We did find that quite a few staff were new and had only started at Southfields in the last few months. This often meant that people were getting support from staff who had a positive manner but had not developed a lot of knowledge about how best to support them or learning disabilities in general. People will benefit more from having a more settled staff team, with much reduced staff turnover. Some initial steps have been taken to achieve this and it was encouraging to see use of agency staff had stopped in recent months.

People should expect to have trained and skilled staff. This will help them keep well, have an enjoyable day and week and to achieve important goals they have in life. We examined training at the service and found it still needing to be developed. There were some concerning gaps in staff training, including health care needs, which we informed the management of and there were other ongoing training and development needs for staff that the service needed to have a detailed plan for.

People should be supported by staff who are able to predict or anticipate when they may become distressed or unsettled by something happening. We thought, in the main, staff could be good at responding to a person being agitated or doing something that causes concern but were not always able to recognise when this may happen and to do something before it happens. This is a learning need for staff.

We have made a requirement for the service that focuses on the service achieving a settled staff team who are suitably trained and skilled to support people with complex needs. This training should ensure all staff have training on epilepsy and training to support people's day and communication. We suggested this could include Makaton, talking mats and intensive interactions. **See requirement 1 below.**

Other aspects of support for staff were also not happening enough at this service. Staff members did not have regular supervision meetings with a senior staff member. Management had also not put in place a programme for undertaking observation of staff practice's and team and other meetings were not happening in a consistent way. These management activities not taking place would make it more difficult for staff to develop their practice, work as a team and for people to receive well organised, purposeful support each day.

We did get some feedback that some staff did not always have as positive an attitude as they could. There were staff development plans being progressed that could help with this.

Requirements

1. By 2 March 2021, in order to improve the the experiences of people living in Southfields, the service provider must ensure that the service has a stable staff team which is suitably trained.

The service must take steps to reduce the current level of staff turnover.

The service must review the training for staff and ensure that all support staff undertake relevant training to increase staff's ability to keep people safe, aid people's opportunities to communicate their wishes and to assist people to get the most out of life.

This is to ensure that care and support is consistent with Health and Social Care Standards, which states that: '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) and 'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty.' (HSCS 3.18).

Inspection report

It is also necessary in order to comply with Regulation 15 (a) and (b) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011(SSI 2011/210).

How good is our setting?

3 - Adequate

People had their own ensuite rooms which had been decorated to suit their taste. This was positive to hear as people will be more comfortable and relaxed in a room decorated to suit them and it is respectful of their choices.

This year some of the communal areas had been getting redecorated and we saw that one of the main lounges and a dining room had been given a more age-appropriate makeover. We saw people were using their lounge and dining areas during our visit. People's home looked pleasant and there were comfortable furnishings for people.

The general cleanliness of the care home was good. Many additional measures had been introduced to minimise any further risks due to the COVID-19 pandemic. The service had guidance in place and had also followed additional guidance provided by local health and social care partners.

The home was in quite a remote location and this meant people were more dependent on transport for accessing community facilities. This did not help to promote their independence nor provide opportunities for them be involved in and part of their local community.

The grounds were large, and we saw that some equipment, such as a trampoline, could be made use of in better weather. We also heard of potential developments such as the of growing vegetables and we thought that the grounds could enable people living in Southfields to engage in new activities that they could find rewarding.

Overall, we found the environment to be adequate. The improvements made were of benefit to people and had their needs and wishes as the main focus. That said, the remoteness does have drawbacks for people. In addition, at the time of visiting, there were only six people staying at Southfields and usually there are many more. As people have one to one support, we could see that if each person and their staff member were wanting to use the same area then this could prove to be too busy an environment for some. Staff's awareness and anticipation of when people may be uncomfortable with a situation needs to be very good. This also has relevance to the area for improvement mentioned before about how well people's day and week are planned.

How well is our care and support planned?

3 - Adequate

People's support folders were personalised. This was good to see as it reflects that a person's wishes have been considered and was respectful.

Within people's support folders we found that the information about their wishes and needs was organised well. The 'me at a glance' document helped staff get to know some important information about a person and helped them to get to know the person they were supporting. We also saw some useful and detailed support plans that would provide staff with good guidance about how best to support a person with specific needs or wishes they may have. People can have some confidence that staff are provided with helpful information about their needs and wishes. We suggested that an index system was introduced in people's support folders as this will assist staff to easily find some of people's more detailed support information and plans.

People should expect staff to have read and understood the important information in their support folders. However, we found that the monitoring records to show that staff have properly read a person's support folder showed only some of the staff had signed to say they had. This was concerning as it means people cannot be as confident as they should be that staff have familiarised themselves with important information about their care and support. Management agreed this would be addressed.

Staff recorded incidents of concern and accidents that a person may have. These were detailed in their description of what happened. Recently, the service has started to record 'debriefs' after such events and we could see discussion took place about what could be learned. This was good as it means over time as staff and the service learn from this, people may be better assisted to experience less distress, accidents or be involved in an incident that causes concern. This could help people to have a more relaxed day and peace of mind.

People having a key worker who is consistent and has a good relationship with them can be very beneficial to their experience of care and support. At this service we found key worker arrangements to be unclear. We discussed this with the manager and saw that some of the plans for staff development may help address this area of people's support. We suggested to the manager that a robust key worker system, with a co-worker or key working team may help achieve greater stability for a person supported. With motivated and consistent staff, people's support planning can be developed in insightful and positive ways which better reflects their wishes.

People benefited from the support of external agencies and professionals. We saw some good examples of where the service sought advice and guidance to support a person with a matter. There were times, however, when the service could have communicated more with other agencies or people's families to ensure all suitable support was being considered.

How good is our care and support during the COVID-19 pandemic?

4 - Good

People at this service received good support to protect them during this pandemic period. The service had regular contact with local public health professionals to discuss infection prevention and control. Guidance was followed which reduced the risk to people living at Southfields.

People's home was clean and tidy. There was some redecorating happening and this should make the home pleasant and attractive for people.

There were daily cleaning schedules and extra cleaning had been introduced to make sure that frequently touched areas were more regularly cleaned and disinfected each day to minimise risk of the spread of infection.

Throughout the home there were Personal Protective Equipment (PPE) stations, and these had good supplies of PPE. This meant staff were able to access PPE easily if needed when supporting a person. The care home had processes in place to minimise any risk of infection when managing people's laundry. We also saw people were supported to keep good hand hygiene. Measures such as these helped people to stay safe and well.

Staff were informed about infection prevention and control. There had been some training and awareness sessions for them to ensure good practice. There were procedures in place for staff to follow for arriving and leaving at the care home. We saw they did this. Staff were regularly tested for COVID-19 infection as well. All this helped everyone stay well.

One area that we discussed with the service to further monitor was ensuring staff are wearing face masks in areas such as the offices and other staff areas of the home.

The service had visiting arrangements in place and these were carefully considered and followed Public Health guidance. People were able to keep contact with family or other important people for them in a safe way.

We discussed with the manager how the cleaning of the care home is quality assured. Whilst we thought cleaning was being done to a good standard, we found that cleaning records were not routinely checked in a management audit process. We also discussed that the manager could review the general cleaning schedules and suggested that additional recording when people's care equipment is cleaned is necessary. These extra steps will help assure the cleanliness and safety of the care home for people.

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?	3 - Adequate
1.1 People experience compassion, dignity and respect	3 - Adequate
1.2 People get the most out of life	3 - Adequate
1.3 People's health benefits from their care and support	3 - Adequate
How good is our leadership?	3 - Adequate
2.1 Vision and values positively inform practice	3 - Adequate
How good is our staff team?	2 - Weak
3.3 Staffing levels are right and staff work well together	2 - Weak
How good is our setting?	3 - Adequate
4.2 The setting promotes people's independence	3 - Adequate
How well is our care and support planned?	3 - Adequate
5.1 Assessment and care planning reflects people's outcomes and wishes	3 - Adequate
How good is our care and support during the COVID-19 pandemic?	4 - Good
7.2 Infection control practices support a safe environment for people experiencing care and staff	4 - Good

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 cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

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

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.