

Mavisbank Care Home Service

Lennox Crescent
Bishopbriggs
Glasgow
G64 1XF

Telephone: 0141 772 6162

Type of inspection:
Announced (short notice)

Completed on:
16 February 2021

Service provided by:
HC-One Limited

Service provider number:
SP2011011682

Service no:
CS2011300752

About the service

Mavisbank Care Home is a purpose-built facility occupying two floors and providing accommodation for 60 people in single rooms, with en-suite (toilet and wash hand basin) facilities. There are lounge and dining areas and adapted bathrooms and shower rooms on both levels.

The service is registered to provide care and support for up to 45 older people and 15 younger people who have a physical or sensory impairment. There were 38 people living in the home at the time of the inspection.

On site parking is available and the service is close to bus and rail links.

The provider, HC-One has the following mission statement:

"Our company is built on the principles of involvement, accountability and partnership. We want HC-One homes to be the kindest homes in the UK with the kindest and most professional staff, where each and everyone matters and each and everyone can make a difference".

We carried out an inspection of the home using virtual technology. We used the Health and Social Care Standards to review the quality of care for people, these can be accessed here <https://www.gov.scot/publications/health-social-care-standards-support-life/>

What people told us

We did not speak with residents during this inspection as it was a focussed inspection using virtual technology.

We contacted four families for their views on the care of their relative. We received one reply:

"The home has been amazing. The window visits have been good for us but my relative did not like the video calls. Phone calls have also been a help - staff have been very good at keeping in touch and keeping me updated with any plans to change my relatives' care. I can't fault them. Phoned every step of the way. Supportive of both resident and family. Staff are really good - these are testing times. Important to share some good experiences as I know the home has been through a hard time."

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 good is our care and support during the COVID-19 pandemic?	3 - Adequate
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Further details on the particular areas inspected are provided at the end of this report.

How good is our care and support during the COVID-19 pandemic?**3 - Adequate**

This was a follow up inspection to assess the progress the service had made on a requirement identified at the inspection on 26 October 2020. We concluded that the requirement relating to care planning and recording had been met.

During the previous inspections in November and December, requirements had been made. We subsequently noted improved outcomes for the health, welfare and safety of people living in the home. Infection, prevention and control was safer and staff were more aware of their responsibilities. Quality assurance systems and processes were becoming embedded in practice and the management team were more proactive in working to improve outcomes for residents and to support staff.

These requirements were met.

To acknowledge the progress made we have re-graded the service upwards to Adequate (3) following this inspection.

Areas for improvement

1. All care plans should be written in a person centred manner and be fully reflective of the residents choices, preferences and assessed needs. Each section of the care plan should be fully completed. Risk assessments and assessment tools should be completed accurately to inform future care and intervention needs. The home should consider developing 'champion' roles within the staff team to lead on identified areas of need.

This is to ensure 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 supported to discuss significant changes in my life, including death or dying, and this is handled sensitively.' (HSCS 1.7)

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

Requirements

Requirement 1

By 31 December 2020, the provider must ensure that all records about residents' care and support set out how the health, welfare and safety needs of the individual are to be managed and met. In order to do this the provider must ensure that:

- Personal plans and care records are accurate, sufficiently detailed and reflect the care planned and provided.
- Risk assessments are kept up-to-date and the outcomes used to inform care planning.
- Assessment tools are fully completed so that they inform the plan of care.
- Nutritional care plans accurately reflect the assessed needs of each resident.
- Anticipatory care plans are meaningful and reflect the wishes and choices of residents.

This is to ensure care and support is consistent with the Health and Social Care Standards which state:

'My personal plan is right for me because it sets out how my needs are to be met, as well as my wishes and choices.' (HSCS 1.15)

'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)

This is in order to comply with Regulation 5(1) Personal Plans of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

This requirement was made on 26 October 2020.

Action taken on previous requirement

We noted, in the care plans we sampled, that progress had been made in keeping them up to date and more accurate. We could see that the nutritional needs of residents were assessed and evaluated, involving other professionals where required. Staff continued to be clinical in some of the language used in the care plans and this was not reflective of how a resident might describe the care they would prefer. Staff should try to write care plans in a person centred manner so the needs and choices of residents are clear and not lost in clinical language.

The end of life care plans were still variable in quality but we could see where a family had been consulted and their views respected in the care plan for their loved one who was not able to speak for themselves. We also saw another plan which contained some personal information which was a good attempt by staff to record expressed wishes and preferences for a resident. The care plans need to develop more so that each resident has a plan that is reflective of their needs and preferences. This would ensure that staff were fully aware of their wishes and be able to offer responsive and respectful care when required.

We saw audits of care plans that had been completed by the external management team. The outcomes of these audits would be discussed with the relevant staff to ensure that action and improvements were made to the care plans.

Met - outwith 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 improve the range and availability of meaningful activities offered in the home considering the abilities, preferences and choices for everyone living in the home

This area for improvement was made on 1 May 2019.

Action taken since then

Not assessed at this inspection. The home is still subject to covid restrictions therefore a full assessment of progress made would not be possible with a virtual inspection.

Previous area for improvement 2

The provider should review and develop the management of mealtimes to ensure that people are supported to enjoy their meals in a relaxed atmosphere respecting their choices and preferences. The provider should review the menu in consultation with people living in the home to ensure their choices and preferences are reflected.

This area for improvement was made on 1 May 2019.

Action taken since then

Not assessed at this inspection. The home is still subject to covid restrictions therefore a full assessment of progress made would not be possible with a virtual inspection.

Previous area for improvement 3

The provider should support all staff with dementia care training such as the 'Promoting Excellence programme for dementia learning and development' This would ensure that staff develop the skills and knowledge to deliver responsive, person centred care which reflects the principles of dignity, privacy and respect in line with the Health and Social Care Standards. The provider should formally assess the impact training has on staff practice to determine learning and understanding.

This area for improvement was made on 1 May 2019.

Action taken since then

Not assessed at this inspection. The home is still subject to covid restrictions therefore a full assessment of progress made would not be possible with a virtual inspection.

Complaints

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

Detailed evaluations

How good is our care and support during the COVID-19 pandemic?	3 - Adequate
7.1 People's health and well being are supported and safeguarded during the COVID-19 pandemic	3 - Adequate
7.2 Infection control practices support a safe environment for people experiencing care and staff	3 - Adequate
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	3 - Adequate

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
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