

Banff Care Home Care Home Service

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Banff
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Telephone: 01261 815 550

Type of inspection:
Unannounced

Completed on:
19 March 2021

Service provided by:
Banff Care Ltd

Service provider number:
SP2004006637

Service no:
CS2003014166

About the service

Banff Care Home is registered to provide a care service to a maximum of 56 older people and 10 of those places can be provided to adults with a learning disability. At the time of inspection there were 56 people living in the home. The care home is a large purpose-built property on two floors, with gardens to the side and rear. It is located on the edge of the coastal town of Banff.

This service has been registered since 2002.

This was a follow-up inspection to evaluate the service's progress towards the requirements and areas for improvement made at our previous inspection on 25 January 2021.

What people told us

The atmosphere within the service was much improved. We saw people engaged in meaningful activities, freely moving around the home, having indoors visits from loved ones and using the outside space. We observed some positive and respectful interactions between staff and the people living in the service. People seemed happier, there was more conversation, more use of the communal living areas and life in the home seemed more relaxed.

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 check on the progress the service had made towards the requirements and areas for improvement, following our inspection, on 25 January 2021.

The service had implemented a robust action plan following our previous inspection. This meant that there was a focus on making improvements that were necessary to keep people safe during the COVID-19 pandemic.

Banff Care Home has made significant progress towards meeting the requirements and areas for improvement detailed in the section of this report, 'outstanding requirements,' and 'outstanding areas for improvement'. For this reason we have re-evaluated the grade for, '7.1 People's health and wellbeing are supported and safeguarded during the COVID-19 pandemic,' from weak to adequate.

We have also re-evaluated the grade for, '7.3 Staffing arrangements are responsive to the changing needs of people experiencing care,' from weak to adequate.

Although considerable progress was evidenced during this inspection, it is important the service continues to develop their newly formed systems for managing falls and staff training, so that people benefit from a culture of continuous improvement. This will ensure that the initial improvements to people's health, safety and wellbeing from the changes the service has made, will progress and continue in the long term. **(Please see area for improvement 1.)**

Areas for improvement

1. The service should continue to develop, implement and review its system for the management of falls and its system for identifying and meeting staff training needs, so that the improvements to people's health, safety and wellbeing will progress and continue in the long term.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

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

Requirements

Requirement 1

By 01 March 2021 the provider must make significant improvements in how service users at risk of falls are supported. In order to do this, the provider must:

- a) Ensure that a falls risk assessment has been completed for all service users and that the risk assessment is reviewed regularly and updated with new information.
- b) Ensure that measures taken to reduce the risk of falls to people are the least restrictive and help people, where possible, to remain active. Ensure that these measures are regularly reviewed, including the use of supportive equipment, and reflect people's needs, wants and wishes.
- c) In the event that people's needs change or they have a fall, ensure they are reassessed with regard to risk and that any changes are updated in their care plan and communicated to staff.
- d) All falls, accidents and incidents must be analysed, so that learning and improvement can take place, so as to prevent future falls.

This is in order to ensure that 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);

'My care and support meets my needs and is right for me.' (HSCS 1.19); and

'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.' (HSCS 4.14).

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations Scottish Statutory Instrument 2011 (SSI 2011/210) Regulation 4(1)(a) and (d).

This requirement was made on 25 January 2021.

Action taken on previous requirement

This requirement was the subject of an inspection report issued on the 25 January 2021. At the end of the timescale, the 10 March 2021, the provider had met the requirement.

The service had developed a comprehensive falls management system, that followed best practice guidance. For instance, some people had in-depth risk assessments and detailed care plans, ensuring their

risk of falls were minimised, while promoting a more active lifestyle. This reduced the likelihood of people falling and subsequent injuries and helped people stay active and well.

It also improved other aspects of people's health and wellbeing as it prompted medication reviews. People had medication that was no longer required either reduced or stopped by their GP. This recognised and met people's changing needs.

The service had management systems in place to monitor and analyse falls, and were using these incidents as learning opportunities to prevent future falls.

Staff had been re-trained in falls management and were better at recognising and using the least restrictive option, to keep people safe. For example, bed rails and sensor mats that were no longer required had been removed. This ensured people were able to stay active and independently move around the care home, when safe to do so.

This progress needs to continue, if people's health and wellbeing is to benefit in the long term. This will ensure that improvement is continuous and measurable. We discussed and sent copies of the self-evaluation tools recommended by the Care Inspectorate.

Met - within timescales

Requirement 2

By the 01 March 2021 the provider must:

- a) Always have suitably competent and qualified staff on duty in sufficient numbers with the right skills to meet the individually assessed needs of people who use the service.
- b) Keep a record of the dependency and needs assessment that identifies the minimum staffing levels and deployment of staff. This must consider people's physical, social, psychological and recreational needs and choices in relation to the delivery of their care.
- c) Ensure that staff receive training appropriate to the work they perform and the needs of the people they support.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'Staffing Levels are right, and staff work well together.' (HSCS 3.3).

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations Scottish Statutory Instrument 2011 (SSI 2011/210) Regulation 15(a) (staffing).

This requirement was made on 25 January 2021.

Action taken on previous requirement

This requirement was the subject of an inspection report issued on the 25 January 2021. At the end of the timescale, the 10 March 2021, the provider had met the requirement.

The service had reviewed its staffing. Priority training needs were identified and met by a range of measures and included training on areas such as stress and distress, dementia and falls.

A staffing analysis resulted in additional staff being employed for meaningful activities and supporting indoor visits from relatives and loved ones. This significantly improved the atmosphere in the care home. People seemed happier and more engaged with activities. We could see that people were using communal rooms more often (while maintaining social distancing), engaging in conversations, using the outdoor space and generally staff and residents seemed more relaxed.

The service also deployed staff differently, which helped to match the numbers and skill sets of staff with people's needs.

Progress needs to continue in relation to staff training, so that people benefit from a culture of continuous improvement. This should be a continuous cycle of identifying staff training needs, updating staff's knowledge and skill sets and evaluating staff's understanding, so that people have confidence in the staff that support them. We discussed alternative ways the service could use to achieve this, in addition to the measures they currently use. This could include, using team meetings to update and reflect on best practice guidance; using supervision to problem solve and reflect on practice; and using free resources from professional organisations such as the Scottish Social Services Council and NHS Education for Scotland. We also discussed ways the service could capture the impact the additional staff training has on people's outcomes.

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 service should improve how all people, in particular those who stay in their bedrooms, are supported to take part in meaningful activities and engagement, to help support their health and wellbeing and improve the quality of their day.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My care and support meets my needs and is right for me.' (HSCS 1.19); and

'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).

This area for improvement was made on 15 February 2021.

Action taken since then

This area for improvement has been met.

The service had employed additional activity co-ordinators and we saw some positive and meaningful activities and interactions between staff and the people living in the service. Activities were personalised to people's likes and interests. Additional staff were allocated to enabling indoor visits from relatives and loved ones, which had a positive impact on people's sense of wellbeing and belonging.

Previous area for improvement 2

The service should make improvements to the care plans and supporting documents in relation to managing and supporting residents who experience behaviour that may be distressing.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My personal 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 16 October 2018.

This area for improvement was made on 16 October 2018.

Action taken since then

This area for improvement has been met.

The service had made significant progress towards meeting this area for improvement. Staff had refreshed their in-house training in managing stress and distress. People's care plans were reviewed and now contained detailed person-centred measures to prevent distress and what steps staff should follow if people did become distressed. For example, distraction and calming techniques. Additional external training was in the process of being devised by healthcare professionals.

The work was being reviewed and supported by the management team and incidents of distress were being analysed so that the service could learn from prior events.

This work is on-going and will need to be regularly reviewed so that it continues to reflect people's current needs.

Previous area for improvement 3

The service provides care and support to individuals with a learning disability. We did not see any specialist communication tools in place for supporting people with a learning disability. The service should seek to adopt valid tools for communication for people with learning disabilities.

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

'I receive and understand information and advice in a format or language that is right for me.' (HSCS 2.9)

This area for improvement was made on 16 October 2018.

Action taken since then

This area for improvement has not been met

Some progress had been made. People's needs had been reviewed by external health and social care professionals. Part of this review included referring people to speech and language for an assessment, so that potential communication tools could be assessed and provided. In the interim some pictures are being used to help people communicate.

However, to meet this area for improvement staff will need training in the communication methods used by people and be able to apply those communication methods for all interactions. We will follow this up at the next inspection.

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 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
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	3 - Adequate

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