

Antiquary House Care Home Service

Westway
Arbroath
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Type of inspection:
Unannounced

Completed on:
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Service provided by:
Balhousie Care Limited

Service provider number:
SP2010011109

Service no:
CS2010271999

About the service

Antiquary House is a purpose-built care home located on the outskirts of Arbroath. The service is owned by Balhousie Care Limited and provides residential and nursing care on both a permanent and short-term basis.

It is registered to provide a care service for 58 older people and includes a purpose-built unit for those with higher dependency needs. There were 56 people living at the service when we visited. There are two flats which offer accommodation for adults with a disability. The flats were not in use during this inspection.

The stated aims of the service are:

'To deliver exceptional customer satisfaction through our commitment to good quality care in a responsive and understanding atmosphere'.

The service has been registered since October 2010.

We carried out our inspection over three days from 08 to 10 December 2021. We carried out this inspection using a blended approach of a visit to the service and remote inspection.

What people told us

We spoke informally with residents and relatives by telephone and via a 'Teams' video system; we also spoke to staff as part of our inspection. All of the people we met during our visit were positive about the service and we have included some of their comments here and throughout the report.

Residents told us:

'I like the staff very much, they are all very nice'.

'The food is lovely, always plenty to eat and drink, I had stovies for lunch'.

'I am never bored, there is always something going on'.

Relatives told us:

'Staff are really nice, keep me in touch they all go above and beyond - They really jolly my relative up and they pick up on her signals, how she is, her mood and adapt to that'.

'the girls are very respectful and they treat people like their own - with dignity - they look after me too'.

'It has been an extremely positive move for my relative. Staff have been very kind and helpful to her and the manager has made a huge difference'.

Staff told us:

'I feel really supported - it's a great team and if there is any issues or problems there is always someone I can go to'.

'The manager and deputy are really good - I like working here and helping people - I love my work'.

'Staffing levels have been ok, but we have been a bit short - we all try to help as a team'.

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 care and support during the COVID-19 pandemic?	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

During this inspection we considered three quality indicators (QI). We evaluated QI 1.1 - People experience dignity, compassion and respect as very good; QI 1.2 - People get the most out of life and QI 1.3- People's health benefits from their care and support as good. This means the overall evaluation for this key question is good. An evaluation of good applies where there are a number of important strengths which taken together clearly outweigh areas for improvement.

We observed that people were well presented and appeared comfortable in their surroundings. It was good to see and hear fun and banter, and warm supportive interactions between residents and staff. This supported a calm and relaxed atmosphere in the service. People living at the service told us 'everyone is very nice here', and 'the staff can't do enough for you'.

It is important that people remain connected to family and friends, and have opportunities to access their local community. We saw that people were enjoying visits from relatives in addition to trips out to the local community, as per current Scottish Government guidance 'Open with Care'. One person described how the cook accommodated her preferences; she told us 'the food is ok but I am fussy. I like to buy myself some foods and treats when I am out at the shops. The chef always cooks the things that I buy, which I prefer'. This meant that people were supported to have a say in decisions about their support and their preferences respected.

It is important that people have opportunities to maintain skills and hobbies and enjoy activities that are meaningful to them. There was some information in support plans about people's preferred activities and how they liked to spend their time. People who we met, all agreed that they had enough to do and enjoyed the activities provided in the home. Relatives told us, 'my relative enjoys the activities and the staff are great with her'. However, when we examined support plans it was difficult to see how activities linked to people's preferred activities recorded in plans, in addition, the recording of these did not reflect the positive work that we saw and heard in the service. **(See area for improvement 1).**

Support plans detailed good information about people's health and support needs. We saw that these were reviewed regularly and updated to reflect changes in people's care and support. There was evidence that

people had access to peripatetic professionals, such as; GPs, the dementia liaison team and for routine dental and optician check ups when these were required.

Details of professional visits were not recorded consistently. This meant that these were difficult to find and risked new or unfamiliar staff not being able to access this information easily. In addition we found some recording in plans lacked detail, or that key information was missing. For example, we found that portion sizes were not clearly described for people who required their dietary intake recorded. **(See area for improvement 1).**

In summary, we found that the service was working hard to ensure that people were supported and connected to families and the community. Staff knew the residents well and were familiar with their preferences and created a comfortable atmosphere in the service. People living at the service, and their families, told us that overall they were very happy and that the manager was available to them at all times and worked hard to resolve any issues promptly.

Areas for improvement

1. In order to ensure that support plans reflect the care and support outcomes that people require; the manager and staff team should further develop plans to be more person-centred, detailed and evaluative. This is especially relevant to food and fluid charts, documentation of peripatetic professional visits and meaningful activities.

This is to ensure that care and support is consistent with the Health and Social Care Standard (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 is consistent and stable because people work together well.' (HSCS 3.19)

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

3 - Adequate

During this inspection we considered two quality indicators (QI). We evaluated QI 7.2 - Infection control practices support a safe environment for both people experiencing care and staff as adequate, and QI 7.3 - Staffing Arrangements are responsive to the changing needs of people experiencing care as good. This means the overall evaluation for this key question is adequate.

We found that the service was clean, tidy and well presented. People and relatives who we spoke told us 'the place is always clean and tidy, and the staff always wear personal protective equipment (PPE)' and, 'they are always cleaning and seem to follow best practice'. The manager and staff team had worked hard to ensure that action points from a previous routine infection control visit from the Health and Social Care Partnership had been addressed and that cleaning audits and staff training was regularly monitored.

We found that some areas of the home required upgrading. These areas were difficult to clean to required standards due to chipped or damaged walls or flooring, and lack of handwashing facilities in sluice areas.

We heard that these areas had been identified in the service development plan for refurbishment or replacement, and that work was due to start imminently to address this. **(See Requirement 1).**

Staff, residents and their relatives should have confidence that staff are trained, competent and skilled. Staff should also be able to reflect on their practice and follow Health and Social Care Standards and deliver the standards expected by the service. Staff at Antiquary told us that they had received training in infection control, donning and doffing of Personal Protective Equipment (PPE) and hand washing.

We saw that training records confirmed that staff had completed competencies and were regularly updated with new guidance. This meant that people could be sure that they were receiving care in accordance with the latest guidance and being kept safe as possible.

In order to ensure best practice, the manager of the home as well as the infection control lead staff (Covid Co-Ordinators) carried out regular checks using the providers' Infection Control checklist. Through team meetings, catch ups and communications, staff were able to discuss any issues or concerns about promoting best practice. As a result staff were able to keep people safe and adapt their care and support practices to reduce the potential risk of infection.

People should expect to have support provided by people that work well together. This means they can expect their care to be right for them. Staff told us they worked well as a team and that the management team had been visible and supportive during the current pandemic. We saw that the manager and deputy had a good relationship with staff and ensured that they were supported through good communications systems and relevant training and audit processes.

Requirements

1. By 30 January 2022, the Provider must ensure that people experience care in an environment that is safe, well maintained and minimises the risk of infection.

In order to achieve this the provider must :

1.Complete works as laid out in service development plan to ensure that communal bathrooms are upgraded including replacement of flooring and repair of wall surfaces,

2.Upgrading of sluice areas including replacement of flooring and addition of handwashing sinks.

3. Upgrading of kitchen and servery areas including replacement of worktops

This is to comply with Regulation 3 -Principles; Regulation 4(1)(a)(d) - Welfare of Users and Regulation 15(a)(b)(1) - Staffing, of the Social Care and Social Work Improvement Scotland (Requirements for Care Services.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS), which state that: 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment.' (HSCS 5.22)

Complaints

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

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 care and support 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	4 - Good

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