

Ashgrove Care Home Care Home Service

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Dunoon
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Type of inspection:
Unannounced

Completed on:
1 April 2022

Service provided by:
McKenzie Care Ltd

Service provider number:
SP2012011987

Service no:
CS2012313839

About the service

Ashgrove Care Home registered with the Care Inspectorate on 04 February 2014. The provider is McKenzie Care Homes Ltd.

Ashgrove is a modern purpose-built three storey home. It has 65 single ensuite bedrooms with a range of communal dining and shared living spaces. There is a safe courtyard style garden and access to a minibus for home outings.

The home is located in Kirn, Dunoon and is registered to provide care including residential care and nursing care to older people and people with dementia.

"Our aim is to welcome everybody into the home, both family and friends. We will try and make the transition into the home as welcoming as possible, and hope that our residents find it an enjoyable and happy place to stay."

This was a focused inspection to evaluate how well people were being supported during the Covid-19 pandemic. We evaluated the service based on key areas that are vital to the support and wellbeing of people experiencing care during the pandemic.

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

At the time of the inspection the service was supporting 63 people.

What people told us

As part of our inspection process, we spoke to several relatives and residents as well as external health and social work professionals.

The feedback we received for the service was good. People told us that the staff treated people with dignity and respect.

Individual comments included:

"My relative is so well cared for. They have access to anything they want and nothing is too much bother for the staff."

"I believe they are well cared for and they get full nursing care."

"My relative is very well cared for and gets regular meals and drinks."

"I am able to phone my relative when I want."

"I have turned up for a booked appointment to be told they were closed."

"I am kept up to date with restrictions by the home."

"The home is extremely well managed. I don't know how they have coped over the last two years and they still keep smiling."

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?	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?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

We observed staff using inclusive language and supporting residents in a dignified and respectful manner. Discussions with people who use the service, and their relatives were positive. One person said, "I have no issues here and I like it much better than my last home." Another said, "I can't fault it here, they are kind and considerate."

We spoke with health and social work professionals who said staff regularly contacted them for advice and information. They described a good multi agency relationship that informed and upskilled staffs working practices. People's health and wellbeing benefited from the multi professional approach to their care and support.

At the time of the inspection the activity coordinator role was vacant. The provider was actively recruiting to this role, and we recognise the nationwide recruitment issues faced by providers at this time. Due to this, activities did not take place regularly and the service did not have a set activities plan. One person said "I don't know of any meaningful activities my relative is involved in." Another said "I don't actually know if they do any activities." However, we observed staff creating meaningful moments whilst undertaking the tasks expected of them. We discussed ways to improve activities for those living in the home with the management team. People benefit from an active life that includes, but is not limited to, a range of recreational, creative, social and physical activities.

The service was using the Scottish Government Guidance 'Open with Care' as instructed. However, not all relatives were informed of the guidance. One person said "We aren't aware of the Scottish Government 'Open with Care Guidance'. We haven't received documentation on this." People said they had not been informed when the home had been closed due to Covid-19 and communication with the home was inconsistent. We gave this feedback to the management team and discussed ways in which this could be improved. People benefit from a service that regularly facilitates meaningful contact with family and friends.

We sampled care plans to see if they reflected people's care and support. Overall, we found the care plans and risk assessments to be up to date and contained information relevant and necessary to inform a person's care and support. However, plans varied in content and should include outcome focused information for every individual using the service. We also found notes to be task orientated and did not include meaningful activity. The provider advised of their plan to implement an electronic care planning system. This could improve care planning and enable staff to complete documentation in an outcome focused way, including a person's notes. (See area for improvement 1.)

Areas for improvement

1. Care plans, daily notes and review minutes should be outcome focussed and written in a person-centred manner. They should take account of all the needs of the resident which should include but not be limited to;

1. Daily notes
2. Risk assessment documentation
3. Medication documentation
4. Meaningful activity documentation
5. Review documentation

This is to ensure care and support is consistent with the Health and Social Care Standards 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).

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

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Regular Covid-19 testing was in place for all people entering the home, per the current Scottish Government guidance. Staff clearly understood the guidance on accessing tests for Covid-19, both for themselves, and those who live in the home. They also knew the current guidance in relation to isolation periods and when these should be established. Keeping all people entering the service protected from the risk of infection.

All staff had received, Covid-19, IPC and PPE (Personal Protective Equipment) training. We saw staff use PPE correctly and were confident when 'donning and doffing' their PPE. Staff told us the training had improved their practice. They stated they felt confident to carry out their roles effectively during the Covid-19 Pandemic. People benefitted from a staff team who were trained and competent to effectively carry out IPC.

Supervisions and team meetings were regular and up to date at the time of the inspection. Staff said they found the management team very supportive and an open door policy was in place. We noted supportive and nurturing relationships between the management and the staff team. One person said "All staff have worked very hard during what must have been difficult times for them. They are always approachable and they make time, even in times of pressure." The open and transparent approach the full staff have adopted has impacted positively on people's care and support.

We found the domestic staff team to be competent in their roles. They confidently discussed the NIPCM and the differences within the cleaning pathways. This robust approach helped to reduce the risk of infection within the home environment.

We noted the home was free from odours, clean and tidy. However, the service was using several different cleaning schedules. This created confusion and meant staff did not always complete the correct documentation. We discussed this with the domestic management team and they quickly implemented cleaning schedules in line with best practice from the NIPCM (National Infection Prevention and Control Manual) during the inspection. This quick and robust approach by the domestic staff team reduced the risk of infection within the home environment immediately.

The service had recently been affected by an outbreak of Covid-19. This meant some aspects of quality assurance had not been completed due to staff shortages. The management team were aware of this and had plans in place to review the current systems and processes. We discussed ways in which to improve quality assurance with the management team. They assured us this would improve the quality assurance practice in the service (See area for improvement 1).

Areas for improvement

1. To keep people safe, the provider should implement their organisational quality assurance systems to monitor, audit and evaluate areas of practice. This can include but not be limited to:

1. Infection prevention and control measures
2. Care planning
3. Risk assessments
4. Medication
5. Supervision
6. Maintenance

This is 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); and 'My environment is relaxed, welcoming, peaceful and free from avoidable and intrusive noise and smells' (HSCS 5.18).

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

Quality management and quality assurance systems are vital to the overall effective management of infection prevention and control. The provider should review quality management and assurance systems to improve the continuous management of infection prevention and control audits. This should include, for example:

- decluttering domestic storage rooms and sluices
- the safe use of colour-coded domestic equipment
- inclusion of touch points, shared equipment, and furniture in cleaning schedules
- the management, placement, and renewal of mattresses
- ease of access to, and placement of all PPE including masks
- the management of clinical and domestic waste streams and
- the supply of appropriately sized foot operated bins.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'My environment is secure and safe' (HSCS 5.17) and 'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22) and I 'benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes'. (HSCS 4.19)

This area for improvement was made on 9 December 2020.

Action taken since then

This area for improvement was the subject of an inspection report issued on 9 December 2020.

We found the provider had implemented all of the above infection prevention and control measures in the home. We found cleaning schedules to now be in place. Pedal bins and PPE stations had been placed strategically throughout the home providing staff with safe and effective PPE management. Clinical waste was being effectively managed by an outside agency. All areas were clutter free and all staff used the correct colour coding for domestic tasks.

This area for improvement has been met.

Previous area for improvement 2

When there is a noted decline in someone's health, in this case weight loss, staff should continue to review and develop care plans, and keep complete and accurate details of what the person experiencing care has had to eat each day.

This is in order to comply with:

Health and Social Care Standard 1.15: 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.

This area for improvement was made on 14 June 2021.

Action taken since then

This area for improvement was the subject of a complaint report issued on 14 June 2021.

Care plans contained the relevant risk assessments and monitoring charts for weight loss. The risk assessments and charts were up to date at the time of inspection. However, we discussed with the management team ways in which to further improve the information gathered.

This area for improvement is has been met.

Previous area for improvement 3

There should be a system in place to ensure that staff are keeping detailed, accurate records of each individual's fluid intake and output. Clear daily goals should be set and recorded in care plans which also offer advice to staff on how to maximise meeting daily intake goals.

This is in order to comply with:

Health and Social Care Standard 1.15: 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.

This area for improvement was made on 14 June 2021.

Action taken since then

This area for improvement was the subject of a complaint report issued on 14 June 2021.

Care plans contained the relevant risk assessments and monitoring charts for fluid intake. The risk assessments and charts were up to date at the time of inspection. However, we discussed with the management team ways in which to further improve the information gathered.

This area for improvement is has been met.

Previous area for improvement 4

The manager should carry out a full reviewing for the checking in and out system to ensure that there is clear records of every belonging someone brings with them and where it can be located. A full review of the laundry should be carried out to identify any areas that may be improved to minimise items going missing or being misplaced. There should be a record of responsibility and tracking in relation to items placed in the home safe.

This is in order to comply with:

Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This area for improvement was made on 13 August 2021.

Action taken since then

This area for improvement was the subject of a complaint report issued on 13 August 2021.

The provider had introduced a system to organise and manage residents belongings. A staff champion took responsibility for creating a detailed inventory of peoples items. Labels were then applied in order to further reduce items being misplaced or lost within the home.

This area for improvement is has been met.

Previous area for improvement 5

When there is an increased risk of falls identified, there should be regular reviews and updates to care plans and risk assessments to address this and minimise risks. These documents should provide clear, consistent and practical advice for staff, in how to support a person who is experiencing care who has a high risk of falling. There should be evidence of family and/or representatives involved in this process, where appropriate. Any bruising or injuries should be fully investigated and recorded.

This is in order to comply with:

Health and Social Care Standard 1.14: My future care and support needs are anticipated as part of my assessment.

This area for improvement was made on 14 June 2021.

Action taken since then

This area for improvement was the subject of a complaint report issued on 14 June 2021.

Care plans contained the relevant risk assessments and monitoring charts for falls. The risk assessments and charts were up to date at the time of inspection. However, we discussed with the management team ways in which to further improve the information gathered.

This area for improvement is has been met.

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	4 - 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?	4 - Good
7.2 Infection control practices support a safe environment for people experiencing care and staff	4 - Good
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	4 - Good

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