

Mossvale Care Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
11 April 2022

Service provided by:
Mossvale Care Home Limited

Service provider number:
SP2011981788

Service no:
CS2011281824

About the service

Mossvale Care Home was registered with the Care Inspectorate in 2013 to provide a service to 61 older people.

The provider is Mossvale Care Home Limited.

The home is situated in the residential area of Craigend in Glasgow.

It is a purpose-built care home with its own parking and gardens. The service provides accommodation over two floors for up to 59 older people and two named adults below the age of 65 years. Each floor provides three communal lounge/dining rooms and single bedroom accommodation with ensuite shower and toilet facilities. The service is close to local shops and public transport.

There were 60 residents using the service during our inspection.

Mossvale Care Home aims to: "provide flexible, person centred care and support for older people, that enables them to maximise their quality of life, maintain good health outcomes, promote social inclusion, and enhance independence and wellbeing".

About the inspection

This was a full inspection which took place between Thursday 7 April 2022 and Friday 8 April 2022.

Feedback was provided to the provider on Monday 11 April 2022. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we spoke with six people using the service and five of their family representatives. We spoke with 10 staff members and the management team.

We observed staff practice and daily life in the care home.

We reviewed documentation including medication records, personal plans, maintenance records and quality assurance records.

Key messages

- Staff were good at responding to the changing needs of people.
- The care home was clean and tidy with good infection prevention control practices.
- People living in the care home were supported to maintain relationships with those important to them.
- The management team planned to make improvements to the quality assurance system in the care home.
- The care home planned to make improvements to the variety and quality of food.

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 leadership?	3 - Adequate
How good is our staff team?	4 - Good
How good is our setting?	4 - Good
How well is our care and support planned?	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 made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a positive impact on peoples' experience of living in the care home.

There was a stable staff team who knew peoples' needs and preferences well. That meant staff were able to recognise and respond to changes in peoples' wellbeing. There were good links with external health professionals. This helped to keep people well.

Medication was managed well. There was guidance available for staff on the administration of "as required" medication. This helped ensure individuals were supported to take the right medication at the right time.

There was a relaxed atmosphere at mealtimes with people having a choice of dining areas. Where people required help to eat and drink, staff provided this in a kind and patient manner. This meant that people were supported at a pace that suited them. The mealtime experience could be further improved by involving individuals more in menu planning and improving the choice and quality of food on offer (see area for improvement 1).

The home was clean and tidy but some areas would benefit from redecoration. A refurbishment plan was underway to improve the environment for people living in the care home. Staff had access to sufficient personal protective equipment (PPE) and this was being used appropriately. This helped protect individuals from the risk of infection.

People were supported to maintain relationships with those important to them. People spoke positively about the care homes approach to "Open With Care" guidance and visitors were able to visit without restriction. One person told us "visiting is good now, I can come at night and sit with my mum". There were appropriate infection prevention and control (IPC) safeguards in place. This meant individuals were protected from the risk of infection.

The service employed an individual who coordinated activities to meet the social and recreational needs of the residents. Some people had been supported to access the local community and a variety of internal events had been arranged. This included mindful walks in the local community, current affairs group, flower arranging and a knitting bee. An increase in activity staff would increase opportunities further for people to enjoy planned activities. This would improve peoples' wellbeing and sense of enjoyment.

Areas for improvement

1. To support individuals' nutritional need, the provider should ensure that individuals have access to a varied and nutritionally balanced diet. This should include, but is not limited to, a review of the current menu on offer which takes account of the views of those living in the care home.

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

"I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in menu planning" (HSCS 1.33).

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

Residents, relatives and staff spoke positively about the new management team and confirmed they had made a positive impact in the service. We saw evidence that team meetings had taken place. This allowed the staff team to share their views on the service. The management team were approachable and visible within the care home and available to support staff where required. This made staff feel valued. The management team routinely shared updates with relatives via email. This allowed those closest to people living in the care home to be kept up to date with daily life.

Since the previous inspection the service had reviewed the skill mix of staff within the service. This resulted in a reduction of the number of registered nurses on each shift. Registered nurses were supported by increased senior care assistants. The service should continue to evaluate the impact of the new staffing arrangement.

People benefit from a culture of continuous improvement. A new quality assurance system had been implemented and was providing an overview of key areas of service delivery in the home. This included accident and incidents, mealtime experience, medication management and oversight of staff training. However, this was not fully embedded. Some quality audits had been completed but actions had not been revisited. This meant that we could not be clear where improvements had been identified that this had been acted upon. We found that areas such as personal plan audits and practice observations had not yet been complete.

We saw evidence of a service improvement plan during the inspection. The manager had used questionnaires to gain feedback from residents and relatives which influenced the plan. Staff were actively encouraged to share views.

This had resulted in the service improvement plan which identified the strengths and where improvement was required.

The management team acknowledged that improvements were needed to ensure that quality assurance systems informed positive change. The organisational quality manager planned to offer additional support and oversight to help embed the new system in their quality assurance processes.

We will continue to monitor this at future inspections.

How good is our staff team?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

Staffing arrangements were determined by regular assessment of peoples' nursing and care needs. We found that there were sufficient staff to respond to peoples' needs, particularly where people experienced stress and distress. Interactions between staff and residents were warm and caring. People benefited from positive relationships and this made the care home a pleasant place to live.

The manager and deputy manager were visible within the care home and available to support staff where required.

People could be confident that new staff had been recruited safely and the recruitment process reflected the principles of "Safer Recruitment, Through Better Recruitment". New staff had been interviewed with employment references, protection of vulnerable group checks and registration of professional bodies checks being undertaken. Monthly checks were completed to check that professional registrations were up to date.

Newly appointed staff had received initial induction to the care home. This took account of key areas of training and allowed for protected time to adjust to their new role.

How good is our setting?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

People can expect to live in high quality facilities.

The care home was clean, tidy and clutter free throughout. The environment was bright and spacious. People could easily move around which promoted their independence. There was a range of appropriate equipment to meet people's needs. There was access to a secure garden area. At the time of inspection work was underway to prepare the outside space for spring and the start of a gardening club for those living in the care home.

Bedrooms were comfortable and nicely personalised which helped to give people a sense of belonging. People had their own room and en suite which promoted privacy. People could choose which lounge to spend time in and where they took their meals.

Those living and visiting the care home spoke positively about the environment in the care home. A service improvement plan was in place which identified recent decoration and planned refurbishment to enhance peoples' comfort and living experience.

We found that some maintenance and safety checks had not been completed due to outbreak restrictions and a vacancy of maintenance personnel. This vacancy had been filled and the provider had arranged for maintenance staff from another care home to complete the required checks. Dates confirming when this will be achieved were provided. We will continue to monitor this (see area for improvement 1).

Areas for improvement

1. To ensure that individuals are living in a safe and well maintained environment, routine safety checks must be completed. This should include, but is not limited to ensuring, internal and external safety checks are completed within the required timescale. Confirmation of completion must be submitted to the Care Inspectorate.

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

"My environment is safe and secure" (HSCS 5.17).

"I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment" (HSCS 5.22).

How well is our care and support planned?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

Personal plans help to direct staff about peoples' support needs and their choices and wishes. We found that the service continued to use a narrative approach to personal planning. This allowed individuals wishes and preferences to be considered over the 24 hour period. Personal plans had been completed in a person-centred way and involved those living in the care home.

Individuals care needs were supported by a range of health assessments. This meant that individuals could be assured that staff monitored their health needs. The service had begun to implement a recognised assessment tool (Restore 2) to support staff to recognise and respond to deterioration in peoples' health. This should be embedded into routine practice.

Where health and wellbeing assessments identified specific interventions additional personal plans were in place to guide and support staff in care delivery. This meant that individuals could be assured that they were being supported by a staff team that were aware of their needs.

However, not all personal plans reflected changes to individuals' needs. Improved auditing of personal plans would support development in this area (see Key Question 2 How good is our leadership). We will continue to monitor this at future inspections.

The service had an overview of six monthly reviews which identified those that had taken place and those planned. This is important to give those living in the care home and those closest to them the opportunity to be involved in their care and support.

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 review how they plan and deliver their activity programme. This is to ensure that a varied and meaningful programme is available to residents and that all residents of all abilities are given opportunities to fulfil any wishes and aspirations.

This ensures that care and support is consistent with the Health and Social Care Standards, which state 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)

This area for improvement was made on 3 September 2021.

Action taken since then

The care home was currently supported by one activity coordinator and had two vacancies for the role. Despite this individual working hard to meet social and recreational needs of those living in the care home, we were not assured that this area for improvement had been met.

We will repeat this area for improvement and follow up at future inspections.

Previous area for improvement 2

The manager in conjunction with people who experience the service, relatives and staff should develop a service improvement plan which identifies the strengths of the service and areas for improvement.

The development plan should be regularly reviewed to promote the continuous improvement of the service. This is to ensure care and support is consistent with the Health and Social Care Standards which state that: "I can be meaningfully involved in how the organisations that support and care for me work and develop." (HSCS 4.6)

This area for improvement was made on 3 September 2021.

Action taken since then

We saw evidence of a service improvement plan during the inspection. The manager had used questionnaires to gain feedback from residents and relatives which influenced the plan. Staff were actively encouraged to share views.

This had resulted in the service improvement plan which identified the strengths and where improvement was required.

This area for improvement has been met.

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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	4 - Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	4 - Good
How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
How good is our staff team?	4 - Good
3.1 Staff have been recruited well	4 - Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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