

# Shalom Nursing Home Care Home Service

163 Main Street Dreghorn Irvine KA11 4AF

Telephone: 01294 214 623

Type of inspection:

Unannounced

Completed on:

2 May 2022

Service provided by:

Z A Care Limited

Service provider number:

SP2014012286

**Service no:** CS2014325153



## Inspection report

#### About the service

Shalom Nursing Home is registered to provide a care service for up to 46 older people. At the time of the inspection there were 46 residents living in the home.

The service is located close to the amenities within Dreghorn, North Ayrshire. There is parking at the rear of the home. There is a small garden area to the front of the service.

Living and bedroom accommodation is separated into four areas over two floors. The service provides single room occupancy. The majority of rooms have en suite facilities. The upper floor is accessible via a passenger lift. There are a number of lounges and dining areas for residents to use. The home has a hairdressing salon.

It is the provider's aim that 'all of our service users have the right to live in a clean, comfortable and safe environment, and be treated with dignity, respect and sensitivity in relation to their individual needs and abilities. Our nursing and care staff will be responsive to the individual needs of service users and will provide the appropriate degree of care to ensure the highest possible quality of life within our home'.

## About the inspection

This was an unannounced which took place on 27 April 2022 between 09:30 and 17:00 and on 28 April 2022 between 09:30 and 16:30.

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 people living in the home and visiting family members
- talked with members of staff and management teams
- · observed staff practice and daily life
- · reviewed a range of documents
- spoke with visiting healthcare professionals.

## Key messages

There was a stable team of staff working in the home who knew residents and their families very well.

Staff demonstrated good awareness of people's health needs and how best to support them.

The systems in place to support visits from families and friends were working well.

The content and format of some of the audit tools could be improved to further enhance the assessment and monitoring of service provision.

## 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?	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.

Individuals choices and preferences were supported by a staff team who knew residents and their families well. Families commented how good staff were at keeping them informed of any changes in their relative's health. People told us that this reassured them about the care and support their relative received.

People living in Shalom nursing home benefit from being supported by a skilled, knowledgeable nursing and care team. The healthcare needs of people living in the home were well managed. Staff were knowledgeable about the range of health care professionals they could call on for advice and support when needed.

Staff understood the importance of meaningful activity to help support individuals' wellbeing. The activity and care workers were good at engaging people in group and one to one activity. People told us that they particularly enjoyed the musical events that were held in the home.

Medication was managed safely and supported individuals' health needs. However, there was a need to improve the management of medication prescribed 'as required'. The development of more detailed protocols to guide staff to consistently administer this medication to best support regarding the management of this medication would ensure greater consistency with its administration.

See area for improvement 1.

Personal plans should set out how an individual's assessed needs will be met taking account of their wishes and choices. The plans we sampled detailed how individuals' clinical needs were to be managed and how risks were being minimised. However, there was a need to improve the information within personal plans about individuals' choices, abilities and what was important to them. Further development of personal plans to reflect a more person-centred approach will help promote individuals' choices and preferences regarding their care.

#### See area for improvement 2.

Peoples' wellbeing benefited from having contact with their families and friends and staying connected to their local community. The systems in place to support visits of families and friends were working well and were responsive to individual's needs. Relatives said that the home worked hard to ensure that people had opportunities to maintain contact and regular visits. Staff also supported people to stay connected with family and friends using technology such as face time and emails. People were supported to celebrate notable events such as birthdays and anniversaries.

People living in Shalom nursing home were safeguarded from infection as the environment of the home had an acceptable standard of cleanliness. Housekeeping staff showed that they were knowledgeable about cleaning schedules and procedures in line with current guidance. We saw that laundry areas were clean and well managed.

The home was adhering to current guidance regarding infection prevention and control measures (IPC). This helps to protect people living in the home from the risk of infection.

There were systems in place to assess and monitor cleanliness of the home and IPC measures. Further development of the audit tools used would improve the monitoring of IPC and provide consistency with maintaining high standards of cleanliness to protect people using the service.

See area for improvement 3.

#### Areas for improvement

1. To ensure that medication prescribed 'as required' is administered in a safe and consistent manner the provider should ensure that clear protocols are developed to quide staff.

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

Any treatment or intervention that I experience is safe and effective (HSCS 1.24).

2. To promote individuals' choices and preferences regarding their care the provider should develop personal plans to reflect a more person-centred approach. People and their representatives should be involved in developing the information in their personal plans.

The provider should ensure that staff receive appropriate training to ensure that they understand how to develop person- centred personal plans.

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

'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).

'I have confidence in people because they are trained, competent and skilled' (HSCS 3.14).

3. To ensure consistency of approach to assessment and monitoring of cleanliness of the home and equipment, the provider should further develop their quality audit tool. This should take account of current infection prevention and control quidance.

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

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

## How good is our leadership?

4 - Good

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

It is important that services have effective systems to assess and monitor the quality of service provision.

## Inspection report

This helps drive service development and improvement which results in good outcomes for people living in the home.

To monitor and assess standards of service provision the management team used a range of audit tools and directly observed staff practice. This helped to ensure that acceptable standards were maintained, and any issues identified were addressed.

People told us that the management team were visible in the home, listened to comments and acted on any concerns. The views of residents and their relatives were used to inform service development. This approach reflects a culture of continuous service improvement to support good outcomes for people using the service.

To continue to achieve good outcomes for people the provider should review the content of some of the audit tools in use. This would better direct the auditor and improve consistency of approach to developing the service.

#### See area for improvement 1

People should expect to live in a home that is well maintained and welcoming. The environment of the home was clean and tidy, but some areas of the home would benefit from refurbishment. The provider should develop an improvement plan detailing the programme for refurbishment of the home.

#### See area for improvement 2.

#### Areas for improvement

1. To ensure a consistent approach to service development the provider should review the content of some of the audit tools in use. This should include, but not be restricted to, the care plan audit and medication audit.

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

- 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).
- 2. To improve the environment of the home the provider should develop a refurbishment plan. This should include, but not be restricted to, improving servery areas and communal sitting rooms. The plan should detail the timescales for refurbishment to take place.

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

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

## 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 make improvements to the way that individuals' preferences and interests are recorded and how individuals' desired outcomes in this area are being met.

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).

This area for improvement was made on 21 May 2019.

#### Action taken since then

This area for improvement has not been implemented. This subject will continue as an expanded area for improvement as detailed in Key Question 1 of this report.

## 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	5 - Very 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?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

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