

Glenisla Home Care Home Service

Banff Road Keith AB55 5GT

Telephone: 01542 882 925

Type of inspection:

Unannounced

Completed on:

31 May 2022

Service provided by:

Parklands Limited

Service provider number:

SP2003001893

Service no: CS2003008821



Inspection report

About the service

Glenisla Home is a two storey building in the small rural town of Keith. The home is registered to provide nursing and residential care for up to 42 older people. At the time of our inspection there were 40 people living in the home.

The 42 bedrooms are all for single occupancy, 20 bedrooms have en suite toilets and some have en suite showering facilities. Additional toilets, bathrooms and wet rooms are available on both floors.

The lounge and dining rooms are spacious and comfortable well decorated areas. There is additional seating areas located throughout he home. Landscaped gardens surround the home and there is an additional enclosed garden.

Glenisla Home is part of the Parklands Group.

About the inspection

This was an unannounced inspection which took place on 25 and 27 of May 2022. The inspection was carried out by one inspector 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 16 people using the service and three of their family
- · spoke with staff and management
- · observed practice and daily life
- reviewed documents
- spoke with two visiting professionals.

Key messages

- People expressed high levels of satisfaction with the management and staff team.
- The staff team were stable and they consistently provided very good levels of care and support.
- People moving into the home settled quickly and were supported to make friends with fellow residents.
- · People were supported to remain active and this helped keep them healthy.
- People passed there time with social activities that they enjoyed. People were encouraged to try new activities and experiences.
- The quality of the meals and the choices available were very good.
- The home was fully open to visitors and this contributed to visiting being a positive experience for people.
- The management team had a focus on continual improvement and were committed to improving people's outcomes.
- Some bedrooms required updating and this was included in the the service improvement plan.

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?	5 - Very Good
How good is our leadership?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People appeared very well. Staff knew what was important to help people look their best and retain their own sense of style and individuality.

Staff were warm, kind and friendly in their interactional and engagement with people and their relatives. Staff took time to sit and speak with people. These conversations were meaningful and often humorous. One person's anxiety was reduced by the staff holding their hand and reassuring them through a calming voice. We felt that staff demonstrated compassion, respect, and genuine love for people.

People were very positive about the quality of the meals, 'The food is just excellent'. Menus were available on the tables and staff were on hand to give further details of the meals. This helped people make informed choices at mealtimes. One person said that their appetite can be variable, and the staff are very good at offering alternative lighter meals and snacks. Kitchen staff were kept up to date when the nutritional needs of people changed, this meant people received the right type of diet to meet their nutritional needs and helped keep them well.

The opportunity to catch up with friends at mealtimes was very important for people. The relaxed cafe style dining room helped create a sociable and welcoming experience for people.

It is important for health and wellbeing for people to remain active. People had their walking aids at hand, and this helped them mobilise safely from area to area. Movement and physical activity were a regular activity on the planner. The yoga sessions were popular, and these helped people retain muscle strength and balance. The service was supporting people to remain well and reduce the risk of falls, through regular exercise.

People should lead fulfilling lives and reach their full potential. The activity provision was seen as the responsibility of all staff. This meant that there was a varied day for people. Staff knew the preferences of people, and this was used to help them pass their time. The group doing the baking activity, were fully involved and they were proud that they had made the pudding for the supper that night. Staff were supporting people to lead productive and fulfilling lives.

We felt the experiences of people living with dementia were positive. People who would have been unable to participate in many of the group activities, were supported to be occupied and engaged in an activity that was beneficial and appropriate to them. This meant that the quality of their day was as positive as more able people.

Care plans were detailed, and person-centred. When the needs of someone changed, their care documents reflected this change. This meant that staff delivered the care and support that was right for the person.

People who had additional and more complex needs had risk assessments and monitoring tools in place. This would help staff identify factors that may increase the risk to people and ensure that the necessary information is available to allied professionals. Improvements are needed to the use of bedrails to ensure that these assessments are up to date and relevant.

Relatives said that communication with the home was very good. They were updated if their loved one's health changed. Relatives who lived away from the area, said that they received frequent updates on what has been happening in the home and how their loved one is participating. This resulted in high levels of confidence in the quality of the service and staff team.

The home was following the open with care guidance and was fully open to visiting. Visiting was relaxed and there was a choice of where the person wanted the visit to take place. This resulted in positive visiting experiences.

Community links were good. Bus runs were taking place and links with the local school and sports centre continued. Staff were supporting people to be recognised and valued in the local community.

Staff worked hard to create an environment that was homely, however, met the expected infection control standards. Compliance with protective equipment and handwashing meant that the risks of cross contamination from infections, was low.

How good is our leadership?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

The auditing processes in place helped the service improve the quality of the service it provided.

The service development plan was comprehensive and was focused on making improvements to the quality of the service and to improving outcomes. The plan was discussed at staff meetings. This meant that staff were aware of changes and of their role in making any improvements.

The improvement to the gardens and outdoor spaces had been included in the overall improvement plan for the home. The management team had recognised the importance of the outdoors to people.

Quality audits were regularly undertaken. Areas such as, medication, nutrition, and infection control, were assessed for compliance. Any improvements identified through these audits was then summarized and acted on. This meant that safe practices were maintained.

Resident meetings took place monthly. People were asked for their feedback and also for suggestions on what they wanted. This information was followed up at the next meeting to assess if it had been acted on. This made people feel that their contribution was valued and recognised people as being experts in their own experiences and wishes.

The management team and staff had recognised what was important to people and what they wanted. There was an improvement focused culture in the service, and a determination to enhancing people's experiences and quality of their lives.

The environment has been included in the service improvement plan. It was positive the management team had identified where upgrades were needed in the bedrooms. However, we felt that it may be beneficial to prioritise these improvements. Some areas could be quickly changed to make the improvement necessary for example, curtains in one bedroom that were too thin and let too much light in. (See area for improvement 1.)

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Areas for improvement

1. The management team should prioritise the improvements needed to the environment, in particular bedrooms. This will help set a realistic timeframe and ensure that changes that could be made quickly, are completed.

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

'I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices' (HSCS 5.23).

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 management/staff should take the health and social care standards into account when carrying out assessments, developing and reviewing people's care plans. This will help ensure that people's care and support needs are met and the level of care they receive continues to be right for them.

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). 'My care and support meets my needs and is right for me' (HSCS 1.19) and 'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

This area for improvement was made on 30 July 2019.

Action taken since then

Care plans were detailed and person-centred. The health and social care standards were incorporated into people's care plans. This helped make care plans outcome focused. Robust pre-admission assessments took place to insure that the service could meet the needs of the person. This meant that any new admission to the home could be reassured that their needs would be met and that they would get the care that was right for them.

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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very 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	5 - Very Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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