

Kyle Court Nursing Home Care Home Service

23 Lochore Avenue
Paisley
PA3 4BY

Telephone: 01418 491 889

Type of inspection:
Unannounced

Completed on:
11 July 2022

Service provided by:
HC-One Limited

Service provider number:
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Service no:
CS2011300847

About the service

Kyle Court Nursing Home is a care home for older people situated in a residential area of Paisley, close to local transport links, shops and community services. The service provides nursing care for up to 60 people, 30 of whom will have a diagnosis of dementia.

The home is purpose-built and provides accommodation over two floors, in single bedrooms with en-suite toilet and wash hand basin. There is a range of shower rooms and bathrooms. Each unit has a choice of sitting and dining areas. A large, enclosed garden, which is well-tended is accessible from the ground floor. Two lifts are easily accessible to residents on both floors.

About the inspection

This was an unannounced inspection which took place on 5 and 6 July 2022 between 09:30 and 17:30. 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 ten people using the service and four of their family and friends
- gathered views from four family members by email and one by telephone
- spoke with 15 staff including management
- observed practice and daily life
- reviewed documents
- obtained feedback from visiting professionals.

Key messages

- Personal plans are well-written and focus on what is important to people.
- Proactive working with wider health professionals.
- Well managed medications using a new eMAR system.
- People's wishes and choices are valued around end of life care.
- Positive dining experience that is individualised and dignified.
- Very good ethos in the home which supports visiting and meaningful contacts.
- Infection, prevention and control practice is robust and well managed.
- Strong visible leaders who support a motivated, kind and caring staff team.
- Outstanding quality assurance with detailed analysis that promotes positive outcomes.

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?	6 - Excellent

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 the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

1.3 People's health and wellbeing benefits from their care and support

People's health and wellbeing was supported well by staff who were knowledgeable about people's individual choices and wishes. Personal plans were detailed, well-written, with clear outcomes and goals. This meant staff could provide consistent care and support that was based on what was important to people.

Risk assessments were detailed and incorporated well into personal plans. This ensured people's care and support was linked to best practice. Staff had made appropriate referrals to a wide range of health professionals. Advice had been included into personal plans, which were regularly evaluated. We were impressed how detailed the evaluations were and really captured what had happened over the previous month. One professional said, 'they work very well in collaboration with external professionals. They carry out care interventions as advised'.

Medications were well managed using an eMAR system, that had recently been rolled out. People benefited from regular reviews of medications, such as antipsychotics. As required medication protocols were updated and linked to people's personal plans, such as stress and distress or pain management. This meant people had confidence that any treatment or intervention was safe and effective. One relative told us, 'He is cared for exceptionally well, he isn't agitated which tells me he's happy. If anything happens with regards to his medication or if there is anything to report, then the staff will call me straight away'.

Plans in place that anticipated future care needs were respectful and extremely person centred. People's wishes and choices were clearly valued around palliative and end of life care. Feedback from all relatives was overwhelmingly positive. People felt involved and included in all aspects of people's health needs and support. Someone spoke of when their relative had been really unwell, 'I asked that she be kept at Kyle Court and not taken to hospital. I am and have been informed of any concerns the staff have about her health. On the occasions it has been a serious concern, a GP has been called and I have immediately been notified'.

People benefitted from a dignified, and positive dining experience. Food and nutrition, overall was managed well. Regular mealtime audits were carried out which had highlighted some areas for development. The quality and variety of food was good, and people told us they enjoyed the meals. Although someone said, 'The meals can be a wee bit repetitive, but they are tasty enough'. Staff demonstrated a good understanding of nutritional risks and food fortification when additional calories are needed for people's meals. People with dementia had their nutritional needs met in individualised ways, for example giving people snacks on the move.

1.4 People experience meaningful contact that meets their outcomes, needs and wishes

People spoke very positively of being able to keep in touch with those important to them. Staff had supported people to have a range of meaningful contacts. This included visits within the home and also supporting people to go out. The service demonstrated confidence in using the Scottish Government 'Open

with Care' guidance for meaningful visits. One relative said, 'I can visit at any time'. Another confirmed they can, 'visit at various times and on different days'. People felt very welcomed into the home. Someone said when speaking about a relative moving in, 'It's like a community. I feel it's made a difference to us all'.

Staff used a variety of methods to support people to keep in touch. A relative said, 'Covid obviously raised real concerns for the staff and residents, but through it all I was extremely happy with both her care and communication from the staff. I was sent photographs, had FaceTime calls, as well as phone conversations'. People also spoke highly of the communication they received from staff, we were told, 'Communications with relatives are excellent and we are kept well informed. We are kept informed by phone and by email on a regular basis or should any issue, however minor, arise'.

Wi-Fi was available throughout the service and people used a variety of technology devices independently, or with support. Staff were proactive in setting up a 'buddy' system with an external partner. This is being piloted in the home to ensure people who do not receive regular visitors can receive phone calls from a 'buddy'.

A new reminiscence resource, 'Remembering Together,' was also being rolled out in the home. This was a helpful tool that encouraged communication for people and their loved ones. Staff had supported a new resident to use this as part of their admission. This had been effective to help people get to know them, as well as remember and celebrate important occasions and life events.

1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure

People's risk of infection was reduced as robust infection prevention and control practices were embedded into practice. Staff were knowledgeable about how to ensure the environment was cleaned in line with relevant guidance. Cleaning records and documentation were completed well with evidence of actions identified being addressed. All areas were tidy, organised, and the home was presented to a very high standard. One relative said, 'The home is clean and immaculate, I never find an issue when I am here'. We found people's bedrooms to be exceptionally clean and very personalised.

The management team were proactive in ensuring routine cleaning and checks were carried out, which included mattress and chair audits. This meant people could be confident they experienced an environment that was clean, including furnishings and equipment.

Staff practice was very good in the use of personal protective equipment (PPE). Staff were confident in demonstrating their knowledge around infection control principles and had completed relevant training. Staff also benefitted from being able to reflect on their practice, as had the opportunity to have their practice observed. People were supported to carry out hand hygiene and staff were regularly using alcohol based hand rub (ABHR) when expected. Signage had been sensitively displayed which was effective, yet created a homely environment. Visitors to the home were signposted to wash their hands on arrival which is good practice.

Clear policies and procedures were in place to support staff practice around infection prevention and control. This included staff and visitor testing, as well as a staff contingency plan to help in an emergency situation. Risk assessments had been well written and were individual. These supported staff in situations that may increase risk, such as those who find isolating difficult due to a cognitive impairment. Staff were able to communicate how they would support people during an outbreak situation, while minimising the risk to others.

2.2 Quality assurance and improvement is led well

We evaluated this key question as excellent, as performance was outstanding. The management oversight using quality assurance systems was extremely robust, inclusive and evidenced positive outcomes for people.

The provider had developed their quality assurance processes and were now using a system called, CornerStone. The management team had used this in a robust and proactive way. Quality audits were completed to a very high standard, were detailed and showed a transparent approach. We found the manager went over and above, and had introduced a number of additional areas to further support positive outcomes. This ranged from an overview of people's medications, to using a resilience tool to support staff wellbeing during supervision.

The service improvement plan was detailed, inclusive and dynamic. This meant feedback and people's views were valued and at the centre of the process. People benefitted from a culture of continuous improvement. Action plans were robust and followed through, and we could track clear improvements in practice. Areas identified from daily walk rounds, fed into weekly audits and then the overall service improvement plan. Regular staff meetings and discussions took place which ensured everyone felt involved. This demonstrated a proactive approach which was shared across the whole team. Staff were confident in providing detail of improvements and knew what was expected of them.

The clinical oversight in all areas was outstanding. We were impressed at the level of detail and analysis from significant events. This included in-depth consideration of different contributing factors if there had been a change to someone's health, such as weight loss. People experienced positive outcomes due to the proactive approach demonstrated. People had the opportunity to learn from events, with key points being transferred into people's individual personal plans. We found a number of examples where people's outcomes had improved through collaborative working. An example was someone who had experienced stress and distress. This was evident through people's personal plans and daily recording which demonstrated competence across the staff team.

People spoke very highly of the management team and acknowledged their proactive approach to communication. This ensured people felt valued and were encouraged to raise any issues, which were resolved promptly. They had adopted a problem-solving approach, in the true spirit of partnership. One relative commented on the caring ethos and the excellent standards within Kyle Court. Another echoed this, 'the ethos is good here. We were told this is your home and we want you to be happy here. So tell us if you are not happy. But we have never had any issues'.

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 activity programme provided should be appropriate for each resident despite their health and wellbeing needs. The programme should promote the choices and aspirations of each resident. Resident involvement in activities should be recorded in an outcome focussed way so that it is evident if the activity was a success for the resident.

This is to ensure 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 11 December 2019.

Action taken since then

People benefitted from a wide range of meaningful activities. A monthly meeting was held and people were actively involved in providing ideas. This gave people an opportunity to provide feedback on previous activities each month. Although the service is currently recruiting for an additional activities person, we found all staff supported people with activities. The range of activities were planned and considered people's wellbeing to include 'body, mind and soul'.

People were encouraged to keep moving through a variety of ways, this included Tai Chi, chair exercises and active lounge games including football skills. The service were involved in a pilot using the Care Inspectorate Care About Physical Activity (CAPA) resources. A number of people had 'personal moving more improvement records' in place. This supported staff by focusing on physical activity that was important to the individual and helped them achieve positive outcomes. People were also actively involved in looking after the garden and were growing a variety of plants.

The service had shared access to a mini-bus and people told us they had been out on a number of trips. This also included a visit to the cinema which people really enjoyed. We were impressed how the whole staff team were engaged with activities and actively took part. This included one to one activities for people who needed more support.

This area for improvement has been met.

Previous area for improvement 2

The management team and provider should complete the refurbishment programme as soon as possible, making reference to good practice guidance. All modifications should be for the benefit and wellbeing of residents. A copy of the refurbishment plan, with timescales, should be sent to the Care Inspectorate.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that: 'The home is suitable to promote the care and independence of residents, particularly those living with dementia'.

This area for improvement was made on 11 December 2019.

Action taken since then

The service had completed a number of refurbishments since the last inspection. Although some timescales had been extended due to the pandemic. Final work was being completed to paint the corridor on the upper floor. We found the home to be well presented and the environment was supportive of people living with dementia. People were given the opportunity to wallpaper a feature wall in their bedrooms. This helped people feel involved and created a positive, homely environment. A service improvement plan was in place to support further improvements.

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

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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?	6 - Excellent
2.2 Quality assurance and improvement is led well	6 - Excellent

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