

Fairknowe Care Home Service

Fairknowe House
3 Cargill Road
Maybole
KA19 8AF

Telephone: 01655 882 308

Type of inspection:
Unannounced

Completed on:
4 August 2022

Service provided by:
Mead Medical Services Limited

Service provider number:
SP2003002327

Service no:
CS2006124775

About the service

Fairknowe House is registered to provide a care home service to a maximum of 40 older people who may have physical needs and/or dementia. The service provider is Mead Medical Services Limited.

Fairknowe House is situated in Maybole, South Ayrshire. The home is a large, converted villa, with purpose-built extensions. Accommodation is spread over two floors, with premium rooms on the upper floor and the majority of rooms divided into two distinct units on the ground floor. There is a choice of sitting rooms available for people to use. The home has an accessible well-maintained garden.

The service states its aims as:

'To provide a highly professional and experienced staff to look after residents in a caring and sympathetic way, so that their privacy and dignity are respected, and active independence encouraged where possible. To regard all residents as individuals with the right to make decisions regarding their care and choices where possible and to be fully involved in drawing up their own care plan'.

There were 33 people living at the service when we visited.

About the inspection

This was an unannounced which took place on 2 August 2022 between 9am and 5.45pm and on 3 August between 9.30 pm and 4.30 pm.

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 10 people using the service and 4 of their family members
- spoke with staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals

Key messages

Staff cared for people with kindness and compassion. They had developed warm relationships with the people they support.

People had been supported to maintain good contact with family and friends during the pandemic. The service had followed government guidance 'Open with Care'

People's health needs were escalated to healthcare professionals when needed.

The management team need fully complete all quality audits to ensure standards of care and service provision are maintained.

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
How good is our staff team?	4 - Good
How good is our setting?	3 - Adequate
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 evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People living in Fairknowe House were supported by staff who were familiar with their needs. Staff were good at promoting people's choices and preferences. They showed compassion and kindness towards the people they supported. People told us that staff were friendly. One person said, "The staff are lovely, they look after me well".

People had access to a range of meaningful activities both inside and outside the home. The activities coordinator worked hard to support people to take part in group and one to one activity that were of interest to them. One person said, "I enjoy the activities, it's good to have company and a chat".

Staff knew about individuals' food and drink preferences and supported them with their specific dietary needs. This helped support people's nutrition and hydration needs. Mealtimes were busy with many people choosing to eat in the bedrooms. Consideration should be given about how best to deploy staff to fully support people with eating and drinking and avoid delays in food being served. See area for improvement 1

People benefited from being supported by a knowledgeable nursing and care team. The healthcare needs of people living in the home were well managed. Staff contacted a range of health care professionals for advice and support when needed regarding individuals' healthcare needs. One person said, "The care here is good, the staff get the doctor for me when I'm unwell". Visiting healthcare professionals confirmed that staff followed advice and directions to support people's health needs.

To ensure safe and effective medication administration there was a need to improve the management of medication prescribed 'as needed'. This included ensuring that protocols were in place to guide staff and improving records of the 'as needed' medication administered. **See area for improvement 2.**

Personal plans contained good details of how best to manage the care and support needs of individuals. This ensured people's assessed needs were managed in a consistent way, following agreed plans of care. People were being protected from harm because there were effective systems in place to assess, monitor and manage risks.

People living in the home were supported to keep contact with their families, friends, and their local community. The systems in place to support visits of families and friends were working well. The service was following the current government guidance, 'Open with Care'. We were told, "Staff always make sure that visitors have their Covid tests done before visiting".

People living in Fairknowe House benefit from living in an environment that is clean and tidy. The housekeeping team were working hard to maintain good standards of cleanliness in the home. Staff we spoke with had a good awareness of current infection prevention and control guidance (IPC) and their responsibility to maintain good standards to protect people from infection and harm.

There was a good supply of PPE and clinical waste bins in the home. PPE was being stored safely and supplies were being regularly replenished. This ensured that staff had access to PPE and clinical waste disposal at the point of use.

Staff had received IPC training and we saw that they used and disposed of PPE correctly. There were systems in place to ensure that acceptable standards of cleanliness of the environment and equipment are maintained. This promotes good health outcomes for people by protecting them from infection.

There was a need to improve the sluice and domestic service rooms in the home. The provider took prompt action to review the facilities. They have presented an action plan to the Care Inspectorate detailing the improvements to be made and timescales for completion. We will continue to monitor progress with this issue.

Areas for improvement

1. To support people's nutrition and hydration needs effectively the provider should review and develop the management of mealtimes.

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

"I can enjoy unhurried snack and mealtimes in as relaxed an atmosphere as possible ". (HSCS 1.35)

2. To ensure that people's health needs are managed effectively the provider should ensure that medication prescribed to be administered 'as needed' is managed in line with current guidance.

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

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

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.

The management team gathered the views of people using the service to inform service development. They listened to comments and acted on any concerns. People told us,

"You can talk with the manager any time, she listens to what's being said."

"The manager has made a real difference in the home."

This approach reflects a culture of continuous service improvement to support good outcomes for people.

Having effective systems to assess and monitor the quality-of-service provision helps drive service development and improvement. This results in good outcomes for people living in the home.

The provider had systems to monitor and assess the standards of service provision. However, we saw that some audit outcomes were not being used to fully inform action plans. There was also some inconsistency with verifying that issues had been addressed. This could impact on the effectiveness of service improvement. The provider had recently reviewed their quality assurance system and were implementing an electronic system of audits. This would help improve the assessment and monitoring of service provision. We will monitor the impact this has on promoting better outcomes for people at the next inspection.

How good is our staff team?

4 - Good

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

People commented positively about the skills and knowledge of the staff team. They told us,

"The staff are lovely, they are all very kind."

"The staff work very hard, they are good at their jobs. I would give them full marks".

Families told us that they received regular updates about any changes in their relatives' health. One person said, "Staff are good at phoning me to let me know if there are any changes with how my relative's is"

People living in the home were being supported by a skilled and competent team of staff. The records of training evidenced that staff were up to date with core training. We noted that staff had attended a range of needs led training sessions. Staff commented positively about the training that they attended. They said training was relevant to their role and helped them improve their knowledge and practice. There were systems in place to assess the impact training had on staff practice. This help ensure people continued to be supported by knowledgeable and competent staff.

Staff had access to regular one to one supervision meetings with a senior member of staff. This allows staff to discuss their training and development needs and reflect on their practice. Staff told us they felt that supervision sessions were a good support. This helps staff promote good practice and improve outcomes for people.

The service was planning to assign key workers for people. This would support communication by identifying a point of contact for individuals and their family and friends. There are plans to develop 'champion' roles for staff relating to specific aspects of care and support. This would further enhance staff knowledge, promote good practice within the team, and improve outcomes for people. We will monitor the progress with the development of these roles at the next inspection

How good is our setting?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

People told us the home is a nice place to live and visit. People told us,

" I have a lovely room, I'm very comfortable here".

"It's a homely place, I'm always made to feel welcome when I visit.

People's bedrooms were nicely decorated and personalised. Families were encouraged to bring in items from home to create a space that individuals were familiar with.

There was good access to the garden. People told us how much they enjoyed getting outside. We saw people were able to access the garden when they wanted.

We saw that there was a shared bedroom being used in the home. There was no information within the personal plans of the people sharing to indicate that this was their choice. To protect people's choices, there should be evidence that this arrangement has been discussed and agreed.

See area for improvement 1

There were several bedroom doorways that had barriers across them. We were told that this was to prevent other residents going into the room and disturbing the occupant. However, there was no evidence to indicate that this had been discussed and agreed. A risk assessment should be in place to determine that this measure is consented and is being used in the best interest of the individual.

See area for improvement 2

During the previous inspection we made an area for improvement regarding the need to enhance the quality of the care home environment to support individuals who live with dementia or had limited vision. The management team have completed an audit of the environment and included the outcome in the development plan for the home. The improvements have still to be completed. This area for improvement will continue.

See Area for improvement 3.

We looked at the records of health and safety checks carried out in the service. We saw that some records were incomplete. It is important to ensure that regular safety checks of the environment and equipment are carried out to protect people from harm.

See area for improvement 4.

Areas for improvement

1. To promote individuals' choice the provider should ensure that if people are sharing a bedroom, agreement and consent is sought from them or their representatives.

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

'My human rights are protected and promoted, and I experience no discrimination.' (HSCS 1.2)

'My views will always be sought, and my choices respected, including when I have reduced capacity to fully make my own decisions.' (HSCS 2.11).

2. To respect people's rights and promote their wellbeing the provider should ensure that any equipment that may be restraining is risk assessed to determine that it is being used in the best interest of the individual. This includes, but is not limited to, barriers on bedroom doorways.

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

'My human rights are protected and promoted, and I experience no discrimination.' (HSCS 1.2)

'If my independence, control and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively.' (HSCS 1.3)

3. The service provider should enhance the quality of the care home environment to support individuals who live with dementia, and/or limited vision, linking any changes made to best practice.

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

'I can independently access the parts of the premises I use, and the environment has been designed to promote this.' (HSCS 5.11)

'The premises have been adapted, equipped and furnished to meet my needs and wishes.' (HSCS 5.16).

4. To protect people from harm the provider should ensure that systems are implemented to ensure that all health and safety checks of the environment and equipment are completed.

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

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

The information in personal plans reflected the individuals' choices and preferences. Plans included information about what was important to the person and what their preferred routines were. This ensured people's needs were being managed in an agreed manner promoting their choices.

People and their representatives were involved in regular care reviews. This gives people opportunity to formally discuss their care and support and make decisions about their future care. The outcomes of discussions and decisions from care reviews were reflected into individuals care plans. This helps guide staff regarding people's choices and respects their decisions.

People and their families were being involved in work to further enhance information in personal plans. The service was using 'Life Story' documents gather information about people's choices and wishes. We will monitor the impact this has on promoting better outcomes for people at the next inspection.

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

To ensure people are supported well the service should ensure that staff treat people with dignity and respect at all times.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I experience people speaking and listening to me in a way that is courteous and respectful, with my care and support being the main focus of people's attention.' (HSCS 3.1).

This area for improvement was made on 15 July 2021.

Action taken since then

We observed that staff were respectful in their approach to people. The dignity and privacy of people was supported and promoted by the staff teams.

This area for improvement has been implemented.

Previous area for improvement 2

To ensure good outcomes for people experiencing care, the manager should ensure a range of meaningful activities are available for everyone living in the home. Account should be taken of the abilities and preferences of individuals. Staff should be fully aware of their role and responsibility in providing opportunities for social and recreational opportunities to people throughout the day and within the socially distanced environment.

This is in order to ensure 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 15 July 2021.

Action taken since then

There was a diary of activities and events on display. We observed that people enjoyed taking part in group and one to one activities both inside and outside the home.

Staff demonstrated a good understanding of the benefits of meaningful activity for peoples wellbeing.

This area for improvement has been implemented.

Previous area for improvement 3

The service provider should enhance the quality of the care home environment to support individuals who live with dementia, and/or limited vision, linking any changes made to best practice.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I can independently access the parts of the premises I use and the environment has been designed to promote this.' (HSCS 5.11); and 'The premises have been adapted, equipped and furnished to meet my needs and wishes.' (HSCS 5.16).

This area for improvement was made on 15 July 2021.

Action taken since then

The management team had carried out an audit of the environment of the home using the Kings Fund Tool - 'Is your care home dementia friendly'. The outcome of the audit was reflected into the development plan for the home.

There was still a need to action the areas for development to ensure that the environment of the home was improved particularly for people living with dementia or who had visual impairment.

This area for improvement will continue.

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

How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good

How good is our setting?	3 - Adequate
4.1 People experience high quality facilities	3 - Adequate

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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