

Mill Road Care Home Service

51 Mill Road
Armadale
Bathgate
EH48 3QL

Telephone: 01501 733 673

Type of inspection:
Unannounced

Completed on:
21 July 2022

Service provided by:
Community Integrated Care

Service provider number:
SP2003002599

Service no:
CS2003011069

About the service

Mill Road is a care home which provides care and support to four adults who have a learning disability and other support needs. Care and support is available 24 hours per day and is provided by Community Integrated Care. The service registered with the Care Inspectorate on 1 April 2002.

The property is owned by Community Integrated Care and is a detached bungalow with gardens to the front and rear. The house consists of two sitting rooms - one with a dining area and the other with snoezelen (therapeutic, relaxation) area, dining kitchen, bathroom, shower room, four bedrooms, laundry room and an office. It is located in a quiet residential area with easy access to local amenities, public transport and shops.

The aim of the service is "to change lives by delivering world-class support to people with care needs, and by being a leading employer of exceptional people".

There were four people living at Mill Road at the time of the inspection.

About the inspection

This was an unannounced inspection which took place on 20 and 21 July 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 two people using the service and two family members
- spoke with six staff and management
- observed practice and daily life
- reviewed documents
- received feedback from visiting professionals.

Key messages

- People looked happy.
- Care was personalised.
- Staff were kind and had good relationships with people living at Mill Road.

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?	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?

5 - Very Good

We evaluated this key question as very good where there were major strengths in supporting positive outcomes for people. There were very few areas for improvement.

People looked well and care was delivered in a personalised way. People were clean and well presented wearing clothing that suited their personality and personal preferences. People were treated with dignity, respect and genuine affection. There was consistency in the staff team and people were being supported by staff who were familiar and took time to sit and talk with them. People said that they like the staff. Family members told us that they had confidence in the staff team and the support that was being provided was "really good".

Staff were aware of and responsive to changes in people's health needs, they also had good links with healthcare professionals and people were supported to attend health screening appointments. This was helping to keep people healthy.

People were participating in meaningful activities both within the home and out in their local community. Activities were based on personal preferences, observations and feedback. Examples included art activities, jigsaws, spending time with relatives, visits to local amenities such as cafes and pub, going to the cinema and attending day services. The manager was encouraging people and staff to look at new activities that they wanted to do now that some Covid-19 restrictions had been lifted. This was helping people to keep active.

Staff understood how important it was to support people to eat well in a pleasant environment and everyone was involved in planning and choosing their menu for the week. Mealtimes were flexible to suit people's activities and people ate their main meal together. Fresh fruit and drinks were available throughout the day. This was helping to support people's health and wellbeing.

Staff were trained in key areas such as moving and assisting, first aid, medication administration, eating and drinking, epilepsy and adult protection. The provider was also supporting staff to complete qualifications to promote good practice and meet registration requirements with the Scottish Social Services Council. This was ensuring staff were confident in supporting people with all aspects of their lives and ensuring good health and wellbeing of people living in the home.

People were able to maintain relationships with people important to them. The home was working in line with the Scottish Government's 'Open with Care' guidance. Visitors were welcomed and there was flexibility to suit the resident and their visitor. There was a clear understanding and strong value place on how relationships can help to improve people's wellbeing.

The staff team were knowledgeable about visiting guidance and were following guidance on pre-visit Covid checks. Staff and visitors were undertaking Covid-19 testing before spending time with people living at Mill Road. The service was working to reduce the risk of spreading Covid-19 to people living in and visiting Mill Road.

Infection prevention and control procedures were helping to protect people from the risk of infection. The house was clean, tidy and uncluttered. All equipment within the home was clean and well

maintained. There were adequate supplies of personal protective equipment (PPE), hand sanitiser and separate bins for disposal. The service had a contract for the disposal of clinical waste.

Staff were wearing masks, however we observed occasions where staff masks had slipped down and were not immediately replaced. We also observed a delay in putting masks on when arriving at the home. This could increase the risk of spreading infection. The manager acknowledged this and had taken action to address this to ensure good practice for preventing the spread of potential infection.

The service was working hard to minimise the risk of infection to residents, staff and visitors. Community Integrated Care had supplied the service with pre-packed kits available containing additional PPE and access to chloride cleaning materials should the service have an outbreak of infection such as Covid-19. Staff understood procedures on how to manage an outbreak. This was reducing the risk of infection for people receiving care and support.

How good is our leadership?

4 - Good

We evaluated this key question as good as there were a number of important strengths which outweighed areas for improvement.

The manager was providing effective leadership. Although the manager was new in post, staff responded well to their support and guidance. The manager was motivated to make improvements to the service and was working to make sure the needs, wishes and outcomes of people were the focus of the staff team.

Team meetings and staff supervision was taking place on a regular basis. Staff reported that they felt supported and that there were opportunities for staff development and service improvement. Observation of staff competency was taking place and the manager agreed that it would be beneficial to extend these further such as recording observations of staff practice in infection prevention and control.

Community Integrated Care was committed to audit and self evaluation processes. Audits were being completed by the staff for key areas of service delivery, such as medication administration, support planning and people's finances. This was enabling staff to understand the service better, take responsibility and be accountable for service delivery. Health and safety audits were being completed on a regular basis by qualified tradespeople. These were all helping to ensure that standards of good practice were in place and that any areas of improvement were addressed.

There was a development plan for the service which identified key areas for improvement with timescales. The actions covered all aspects of the service from the property to service delivery. This plan had been written by the previous manager and was no longer up to date. In order to ensure that the development plan is current and relevant, we recommended that the manager updated the plan in order to enable them to identify and monitor progress with service improvement. We were confident that the manager would do this.

The service had an incident reporting process in place which the manager was reviewing. This meant that the service was learning from individual events. Action was being taken to address issues raised within incident recording. We felt that it would be beneficial for the manager to examine trends in incidents and considering whether there was any action that could help minimise the potential for these incidents recurring. The service was meeting their obligations by making appropriate notifications to the Care Inspectorate.

The service had a complaints, compliments and comments process. There had been no complaints or comments at the time of the inspection. The recording system prompted the manager to review and learning from any complaints and comments. Feedback on the service was very positive.

How well is our care and support planned?

4 - Good

The service was performing at a good standard at the time of the inspection. There were a number of important strengths which outweighed areas for improvement.

People's care and support was detailed within a personal plan. These were personalised with good information about people's needs and wishes. Risk assessments were in place which were used to enable people rather than restrict activities. Reviews of personal plans had been taking place with changes reflected within the plans. This information was helping to keep people well.

There were no consent forms for the use of wheelchair lap straps. This support had been agreed and people were able to indicate if they did not wish to use the lap straps. However, we considered it best practice to obtain written consent where there were potential restrictions to people's movement. The manager acknowledged this and agreed to put these in place.

Community Integrated Care had invested in a new electronic system for recording personal plans. The staff team were using the system well, however the system had numerous sections with some that were not always relevant. There were parts of the plan that were pre-completed which was not always relevant to the person. While regular staff knew people well, there was a risk that new staff would find it difficult to find key information to ensure people were receiving the right support. The manager was seeking support from colleagues on how to improve this.

Key workers had been given the responsibility for reviewing and preparing new personal plans. Reviews for all of the people had taken place and had involved family members where this was appropriate. Family members reported that they felt included and that the service was very accommodating in facilitating this.

At the last inspection, it was observed that the service's new system may give further opportunities for people to be involved in the personal plans. However, the format of the personal plans was not accessible for people who were unable to read. This meant that people were not fully aware of what was in their personal plans. We have made an Area for Improvement 1.

Areas for improvement

1. 1. The provider should ensure that personal plans are accessible to people. Particular focus should be on:
 - a) plans are in an accessible and meaningful format to ensure that people are fully involved in developing their plan and understand what is written in their plan.

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

- 2.17 "I am fully involved in developing and reviewing my personal plan, which is always available to me".

Complaints

There have been no complaints upheld about the service at Mill Road.

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?	4 - Good
2.2 Quality assurance and improvement is led well	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
5.2 Carers, friends and family members are encouraged to be involved	5 - Very Good

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