

Maple Ridge Care Home Care Home Service

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Type of inspection:
Announced

Completed on:
7 September 2022

Service provided by:
Maple Ridge Care Home Limited

Service provider number:
SP2018013131

Service no:
CS2018367220

About the service

Maple Ridge is registered to provide a care home service to a maximum of 18 adults with learning disabilities.

The home is situated in the suburbs of Inverness within easy reach of various community amenities. The accommodation consists of three inter-connected units including a semi-independent unit for four residents, a core unit for nine residents and an additional unit for five people with higher support needs. Each unit has a kitchen, dining room and sitting room. Five bedrooms on the ground floor have en-suite toilets and wet rooms. There is a large, attractive garden that people can enjoy.

About the inspection

This was an unannounced follow up inspection which took place between 7 and 9 September 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:

- focused on the previous requirement and areas of improvement made at the last inspection;
- spoke with four family members;
- reviewed documents; and
- asked visiting professionals for feedback on the service's performance.

Key messages

The provider now had a robust and effective quality assurance system in place that promoted positive outcomes and experiences of people.

Improvements had been made to the environment to ensure it was safe and comfortable for people using the service.

Staff were confident and competent on how to keep people safe should there be a fire.

Further work needed to be done so as people were meaningfully involving people in their reviews.

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 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 good is our leadership?

4 - Good

At the last inspection we required the provider to ensure there was a robust quality assurance system in place. Good progress had been made. We have re-graded upwards for one quality indicator following this inspection to an evaluation of good. See section below, 'What the service has done to meet any requirements we made at or since the last inspection'.

How well is our care and support planned?

4 - Good

We had made an area of improvement in relation to people being more meaningfully involved in their reviews. The provider was considering how they could enshrine this in practice. The area of improvement will remain until we can see further evidence of people's meaningful involvement in their reviews.

Areas for improvement

1. To ensure people's views are central to their care and support, the provider should promote the skills and abilities of individuals, so as they are more actively involved and central to their review process.

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

'I am fully involved in developing and reviewing my personal plan, which is always available to me.' (HSCS 2.17)

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 1 September 2022, the provider must develop and implement a robust and effective quality assurance system that promotes positive outcomes and experiences of people. In order to do this, the provider must set baseline standards from which the performance of the service can be measured and audited. This should lead to the development of a dynamic and responsive improvement plan that is regularly reviewed, evaluated and progressed. This should include:

- Timely training of staff in adult support and protection and how to support people who are experiencing stress and distress.
- Reviewing current Infection Prevention and Control cleaning schedules in line with good practice guidance.

- The opportunity for all staff to attend face to face team meetings and regular supervision to reflect on practice and ensure current good practice guidance is being promoted and followed.

This requirement was made on 25 May 2022.

Action taken on previous requirement

The requirement had been met. The provider had developed a robust and effective quality assurance system. When we considered this we were satisfied this allowed the management team to have a good overview of what was happening for people, their care and support, and generally how they were getting on.

The management had a service improvement plan in place. This contained a lot of useful information and we could see how it helped introduce and plan new developments and improvements. Some of these improvements had been achieved and others were monitored as ongoing.

Regular team meetings and supervision meetings for staff is part of quality assurance and improvement. We were pleased to see these meetings had commenced and focused on promoting high quality care for people.

The majority of staff had undertaken training focusing on protecting and promoting people's safety and well being. The manager had assured us, all staff will have completed this training in the near future.

Met - within timescales

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

So as people experience a high quality environment, the provider should action the areas identified in their environmental improvement plan. A priority should be en-suite bedrooms and replacing the cooker in the small kitchen.

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

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

This area for improvement was made on 25 May 2022.

Action taken since then

The areas identified above had been progressed and met. In addition, the provider was in the process of laying new flooring and installing a new shower unit in the home. All of the above meant people were living in a well maintained and safe environment.

Previous area for improvement 2

So as people experience a safe and secure environment, the provider must ensure all staff are competent and confident on their roles and responsibilities should there be a fire.

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

'My environment is secure and safe.' (HSCS 5.17).

This area for improvement was made on 25 May 2022.

Action taken since then

The areas identified above had been progressed and met. Staff were competent and confident when considering fire safety. The staff we spoke with on the day of the inspection knew what to do should the fire alarm be raised. The provider's quality assurance system ensured fire safety regulations were being followed.

Previous area for improvement 3

To ensure people's views are central to their care and support, the provider should promote the skills and abilities of individuals, so as they are more actively involved and central to their review process.

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

'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 25 May 2022.

Action taken since then

The area identified above had not been met. See key question 5 for further information.

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 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

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