

Hansel Alliance at Red Rose House Care Home Service

Red Rose House
Lockhart Campus
Boglemart Street
Stevenston
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Telephone: 01294 441280

Type of inspection:
Unannounced

Completed on:
18 October 2022

Service provided by:
Hansel Alliance

Service provider number:
SP2003000261

Service no:
CS2012309533

About the service

Red Rose House is a respite service located in Stevenston. It was previously named Taigh Mor and was located in Beith. This was the first inspection since the service has moved. The provider is Hansel Alliance and is commissioned by North Ayrshire Health & Social Care Partnership to provide respite care to a maximum of eight adults with a learning disability and complex needs.

Red Rose House is a single-storey building. There are eight spacious individual bedrooms with en suite facilities. Each bedroom has access to the large enclosed garden. There is a range of communal areas for guests to access, such as a sensory room, sensory bathrooms - equipped with jacuzzi baths, gym, games room, lounges and a large dining/sitting room with an accessible kitchen which is equipped with a rise and fall cooker and worktop area. Communal areas and bedrooms are fully accessible with tracking hoists throughout the service.

The aim of the service is "to be the service of choice for individuals in North Ayrshire with a learning disability and/or additional complex needs."

About the inspection

This was an unannounced inspection which took place on 13 and 17 October 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 six people using the service and three of their family;
- spoke with eight staff and management;
- observed practice and daily life;
- reviewed documents; and
- spoke with visiting professionals.

Key messages

Guests benefited from high quality accommodation and excellent state of the art facilities.

Guests could choose to participate in a range of social activities and outings during their stay.

Choice and independence was promoted within the service.

The service should continue to improve medication management practice.

The service should review staffing levels to take account of people's additional support needs.

People enjoyed positive relationships with staff who were kind and supportive.

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

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 strengths impacted positively on outcomes for people and outweighed the areas for improvement.

People using services have a right to build trusting relationships with the people who support and care for them. We observed warm and friendly interactions between staff and people being supported, with kind reassurance from staff when it was required. Guests appeared comfortable in the company of staff and were happy to be there.

Personal plans should set out how people's needs will be met as well as promoting individual wishes and personal choice. The personal plans sampled provided clear information about the person detailing guidance on health needs and how people liked to be supported. This included what people could do for themselves, therefore promoting independence. Personal plans were outcome focused and progress was documented within the daily notes. This ensured that staff had relevant information to provide the right person-centred care to people using the service.

People's health and wellbeing should benefit from their support. A range of external professionals were involved with different aspects of people's care. We heard positive feedback from professionals who advised that the service contacted them if they had any concerns and would keep them up to date with any changes. One professional told us, "They meet the needs of people", whilst another told us, "The service was able to support people with complex needs". It is important that different organisations work together and share information where appropriate, to ensure people experience consistency and continuity. We heard about the strong links with the Community Learning Disability Team. People can expect to be fully involved in all decisions about their care and support. There was no information within personal plans about people's reviews. The manager recognised and was working on this. We will follow this up at the next inspection.

People should be confident that their medication is managed safely. There were systems in place to support medication management. However, there had been some errors over recent months. The service was taking the necessary steps to reduce the errors and minimise risk to people. (See area for improvement 1.)

We could see that people were well connected with family and friends. Relatives were able to visit at any time. Staff were able to support people in making and receiving calls and video calls if required.

People should be able to have an active life and participate in a range of activities. A detailed activity planner was displayed and we saw evidence of people's involvement and choice being promoted in deciding what activities they would like to participate in and what meals they would like during their stay. Relatives told us, "There are lots of activities" and "They do so much more at Red Rose than they get to do at home", whilst another told us their loved one was always encouraged to participate in different activities. Staff told us of the recent trips to the zoo and Loch Lomond. We observed people getting ready for the day to go for a trip to Braehead and out for lunch. One person told us they were looking forward to going to the cinema during their visit.

Guests at the service should benefit from an environment that is clean and tidy. The staff team ensured there was a good standard of cleanliness in the home. Current guidance was being followed and there was access to appropriate Personal Protective Equipment (PPE) throughout the home, which was used

appropriately when it was required. Staff had received Infection Prevention and Control (IPC) training and were confident in putting it into practice. This promoted good health outcomes for people by protecting them from infection.

Areas for improvement

1. To ensure that medication is managed safely and in line with best practice guidance, the service should continue to carry out medication refresher training and assess the impact of training to ensure staff understand their responsibilities in managing medication safely.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 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 the strengths impacted positively on outcomes for people and outweighed the areas for improvement.

It is important that care services have effective systems in place to assess, monitor and evaluate the quality of services provided. This is done by gathering evidence using audit tools, feedback from people using the service and their relatives, and carrying out direct observations of staff practice. This information should help drive service development and improve outcomes for people they support.

Red Rose House had an effective quality assurance system in place. We saw evidence of monthly audits being carried out. Any issues found were followed up and actioned. The management team recently increased competency checks for administration of medication due to an increase in medication errors.

Direct observations of staff practice had reduced over the last few months. The service would benefit from more direct observations of practice to monitor service delivery and ensure people are getting the support that is right for them.

Regular one-to-one supervision time with managers supported staff to reflect on their practice and how it impacts on improving outcomes for people.

People and families were kept up to date with newsletters, and pre and post visit phone calls and surveys were used to gather feedback about people's experience.

People should be confident that they are being supported by trained, competent and skilled staff. The service had a clear overview of staff training. Training was planned to ensure staff training was kept up to date. There was a mixture of face-to-face training and online training. Staff spoke of being able to access additional training if required and that specific training was prioritised if there was a new guest coming to the service.

Red Rose House supported people with varying levels of complex needs. It is important that they are supported by the right number of people. We recognise that staffing has been a challenge across the sector and that this had an impact on services. To ensure that all guests receive appropriate care, support and engagement from staff, the management team should review staffing levels and deployment of staff in

accordance with individuals' dependency levels and need for one-to-one support. (See area for improvement 1.)

Ongoing, sustained and regularly evaluated development of a care service should be directed by a comprehensive improvement plan. An improvement plan and annual operational review detailed the planned improvements within the service and the action so far.

Areas for improvement

1. The service should ensure that staffing requirements are regularly assessed and take account of people's additional support needs.

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

'My needs are met by the right number of people' (HSCS 3.15).

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	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

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