

Ranfurly Care Home Care Home Service

69 Quarrelton Road Johnstone PA5 8NH

Telephone: 01505 328 811

Type of inspection: Unannounced

Completed on: 16 February 2023

Service provided by: SCCL Operations Limited

Service no: CS2014326139 Service provider number: SP2014012299



About the service

Ranfurly Care Home provides care for up to 62 older people. The purpose-built home is located in a residential area of Johnstone and is near bus routes. It is on two levels and divided into four units. Each unit has a lounge and a dining room. The bedrooms have en-suite shower facilities and communal bathrooms and toilets are also provided. Residents have access to large garden areas. The provider has a minibus for outings. The provider's mission statement is 'to provide high quality care to our residents, peace of mind for their families, and be a great place to work'.

What people told us

This was a follow up inspection to evaluate the progress made in responding to requirements arising from a complaint investigation. We did not speak with people as a part of this visit.

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?	not assessed
How good is our leadership?	not assessed
How good is our staff team?	not assessed
How good is our setting?	not assessed
How well is our care and support planned?	not assessed

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

This key question was not assessed.

How good is our leadership?

This key question was not assessed.

How good is our staff team?

This key question was not assessed.

How good is our setting?

This key question was not assessed.

How well is our care and support planned?

This key question was not assessed.

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

Requirements

Requirement 1

To ensure people's end of life care is managed well, the provider must develop a detailed personal plan in consultation with people's family/representatives which identifies their individual support needs and wishes and how these will be met. To be completed by: 14 November 2022 This is to ensure care and support is consistent with Health and Social Care Standard 3.18: I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty. This is in order to comply with: Regulation 5(2)(b)(ii) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 14 November 2022.

Action taken on previous requirement

From the care plans sampled, we noted some progress in respect of the basic end-of-life care information recorded for people. We found that in some instances people and their family representatives had been consulted about their wishes and preferences in the event they would need support with end-of-life care. We noted examples where DNACPR information was recorded, as well as people's religious beliefs and who should be in attendance with them at the end of life. However, this was not consistent and some plans did not provide detailed and person-centred information on people's wishes. In one example, a person receiving end of life care, had not had a care plan put in place to confirm their individual needs and wishes and how these should be met.

A new system has been introduced to ensure all care records are subject to continuing audit and improvement. This should assist in promoting greater consistency in the quality of recording practice.

Overall we found that while some changes had been made in respect of care plans, we were not satisfied that sufficient progress has been made to meet this requirement.

Not met

Requirement 2

To ensure people experiencing care are supported by staff who have the appropriate training and skills, the provider must:

- a) revise and distribute the service policy and procedure on end of life care to care staff
- b) provide training on palliative/end of life care
- c) support staff to access best practice guidance on end of life care.

To be completed by: 14 November 2022 This is to ensure care and support is consistent with Health and Social Care Standard 3.14: I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes. This is in order to comply with: 4 of 5 Regulation 15(b)(i) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Areas for improvement

This requirement was made on 14 November 2022.

Action taken on previous requirement

Following the complaint investigation staff had been encouraged to reflect on the outcome and consider the issues impacting on their practice. In person training on end of life care has been arranged for all senior and nursing staff, with additional sessions planned for those unable to attend the first session.

We found that reflective accounts had been completed by staff, following training on communication and having difficult conversations with relatives. This had been received positively by staff who spoke of how this had been used to inform their practice.

There has been no revision to the policy and procedure in the service and, staff we spoke with were not familiar with the content of this or how to access best practice guidance. We discussed this with the manager who confirmed that work was ongoing to address these areas.

Overall, we found that while some progress had been made in respect of this requirement, further work was needed to ensure this was fully met.

Not met

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 and their families/representatives can have confidence, the provider should agree and record the expectations around when, and in what circumstances, relatives would want to be contacted. This is to ensure care and support is consistent with Health and Social Care Standard 3.13: I am treated as an individual by people who respect my needs, choices and wishes, and anyone making a decision about my future care and support knows me.

This area for improvement was made on 14 November 2022.

Action taken since then

We found that there had been limited progress in relation to the arrangements for communicating with family/representatives. From our sample of records, we found that important information about when and in what circumstances family should be contacted was not always clearly recorded in people's files. There was also inconsistency in terms of where this important information should be recorded and this meant that staff did not have ready access to current information on the communication arrangements with family relatives. The manager acknowledged that this needs to be changed to ensure clarity. A commitment was therefore given to ensure this was updated for all people receiving care.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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