

Airthrey Care Care Home Service

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Type of inspection:
Unannounced

Completed on:
2 May 2023

Service provided by:
Airthrey Care Ltd

Service provider number:
SP2003002718

Service no:
CS2006128186

About the service

Aithrey Care Home is a purpose built care home for up to 52 people. The service is provided by Meallmore Ltd. The home is within a residential area in the village of Airth. It consists of two connected single storey buildings, referred to as Airthrey Care and Mercat House.

All bedrooms have en-suite facilities. There are a variety of communal lounges and dining rooms throughout the home. The home also has a large garden and an enclosed patio area.

In their mission statement Meallmore say that: "Meallmore services will consistently be a great place to live and a great place to work. As a team we will provide all people using our services with excellent personalised care and support, delivered by a trained and professional caring team in a quality and safe environment. We will be recognised across Scotland as the most trusted care provider."

About the inspection

This was an unannounced inspection which took place on 27 April 2023 and 2 May 2023. 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:

- spent time with a number people using the service and spoke to ten of their family.
- spoke with 12 staff and management.
- observed practice and daily life.
- reviewed documents.

Key messages

- The home is fresh and welcoming
- People like the staff supporting them
- Staff felt that communication within the service had improved
- Some people felt communication with the home still needed to improve.

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?	5 - Very Good
How good is our staff team?	5 - Very Good
How good is our setting?	5 - Very Good
How well is our care and support planned?	5 - Very 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

In this part of the inspection report we considered three quality indicators;

Quality Indicator: 1.1 People experience compassion, dignity and respect.

Quality Indicator: 1.2 People get the most out of life

Quality Indicator: 1.3 People's health and wellbeing benefits from their care and support.

We assessed the service as Very Good for all three quality indicators which means overall we evaluated this key question as Very Good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Staff were very visible within the communal areas of the home and responded to people's needs quickly. The interactions we observed were warm and kind. In order to maximise information sharing the home operates a keyworker system. One person told us "Staff, especially X, are excellent at interacting with my mum. X in particular is good at chatting to my mum about our family and I feel she's really taken time to learn about my mum. Mum still has capacity, although at times can be quiet, X is good at involving mum with her chat."

The home had two activity co-ordinators working throughout the week, meaning there were activities most days in the morning and afternoon. People who did not enjoy group activities received one-to-one time with the activity coordinators. The home completed life story work with people and collected information about their likes and dislikes but it was not clear how often this was reviewed and linked to personalisation of activities within the service. A newsletter was circulated in order that friends and relatives could see photographs of the things their relatives were taking part in and could participate in if they wished to. The home has started fortnightly meetings for activity planning in the home and could involve people living in the home and their relatives in this.

The home encourages people not to visit before 10:00 in order that people living in the service can get up and ready at their own pace. Mealtimes were protected in order that people could eat without being interrupted which promoted good food and fluid intake. There was a good variety of food on offer at every meal. People were offered a visual choice in order that they could choose what they would like to eat. Staff were very aware of people's likes and dislikes in terms of food, portion size, where they chose to eat their meals and the level of assistance they required to eat and drink well. People who required a textured diet received this but the food was not attractively presented and we discussed this with the management team at feedback.

The home had very good oversight of people's health needs. Care planning demonstrated that all aspects of people's daily living needs had been assessed and a care plan was attached. The service used relevant risk assessment tools to keep people and staff safe. Care plans were reviewed six monthly in line with legislation. The service had well established links with external professionals and contacted them when necessary to ensure that people's health needs were met. One person told us "My relative is a resident. I know he can be difficult at times but all staff from carers, cleaners, staff nurses have looked after him well and with respect. Several staff are truly outstanding and go above and beyond their duty to help both my husband and myself cope with this difficult time. I have been kept informed of his situation, care plan, changes in his health etc."

How good is our leadership?**5 - Very Good**

In this part of the inspection report we considered one quality indicator:

Quality Indicator: 2.2 Quality assurance and improvement is led well

We assessed the service as Very Good for this quality indicator which means overall we evaluated this key question as Very Good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

The service used an electronic care planning system which covered all aspects of the home. Daily handovers ensured that up-to-date, relevant information was communicated to staff and appropriate actions were taken as necessary. The service have changed the format of handover recording to cover several days. This means that staff who have been off work can catch up quickly with events in their absence which they find helpful. Staff said that communication was better and they were clear regarding their roles within the service. Flash meetings were held regularly. They covered important areas of practice within the home such as accidents, incidents, falls, weight and skin integrity/wound care. This meant all heads of department met regularly and shared information which supported good care of people in the service. This meant people's care and support were consistent because people worked together well.

Monthly review of people's plan of care and regular auditing of care plans and risk assessments meant that management and staff regularly evaluated people's experience within the home to ensure that they received the right care and support including as their needs changed. The provider also quality assured the service regularly. Management noticed areas that required updated or changed within these audits and we suggested that they analyse further in order to link the audits to training needs for staff. People told us they were involved in this process. One person told us "We have had meetings with the nurse practitioner to discuss and review my Mother's care and have been fully involved in the whole process. Their care and patience with my Mother has been excellent, despite being busy they always seem to have time to reassure and calm her when she is being particularly difficult or is upset. They are also approachable if we have any concerns. They normally phone me if there are changes affecting her health or mental wellbeing." This meant people experienced stability in their care and support from people who knew their needs, choices and wishes.

Management had clear understanding of their role in monitoring practice and identifying, directing and supporting improvement. There were well established systems for monitoring standards of care. The service has recently implemented staff champions across a variety of departments within the home and intend to develop these further. All actions arising from audits form the body of the service's ongoing improvement plan.

How good is our staff team?**5 - Very Good**

In this part of the inspection report we considered one quality indicator:

Quality Indicator: 3.1 Staff have been recruited well

We assessed the service as Very Good for this quality indicator which means overall we evaluated this key question as Very Good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People living in the service could be confident that staff had been recruited in line with Safer Recruitment guidance. The service ensured that two references were obtained and appropriate checks were carried out on all new members of staff and that they did not commence working for the service until this was done. There was a focus on values based recruitment which ensured that people planning on working for the service were aware of their role and responsibilities to care for people, meet their needs and keep them safe from harm.

There has been a high turnover of staff within the service following the pandemic and the home has worked hard to make new staff feel welcome and support them into their roles. They have formalised their induction process with the introduction of a 12 week probationary process linked to a role appropriate workbook and introduced a mentorship programme which staff found both informative and helpful. Training offered during induction was clearly linked to the needs of people living in the service. The induction process enabled new staff to familiarise themselves with their new roles, the organisation and the care home setting and the people they would be supporting.

There was a focus on the Health and Social Care Standards, SSSC registration and the Codes of Practice. Staff had access to relevant policies and procedures.

How good is our setting?

5 - Very Good

In this part of the inspection report we considered one quality indicator:

Quality Indicator: 4.1 People benefit from high quality facilities

We assessed the service as Very Good for this quality indicator which means overall we evaluated this key question as Very Good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

The home was designed for the purpose it serves. The downstairs unit Airthrey was of circular design which assisted people walking with purpose. The home was clean and well maintained. There were a variety of living spaces for people to spend their time, depending on whether they wanted company or privacy and this included access to outdoor space. An outdoor space to the front of the home had been designed for communal activities involving the local community. The service was preparing for the forthcoming Coronation and had a garden party planned, the social spaces of the home had been decorated with posters and bunting and looked festive.

Comfortable furniture, laid out in a way that encouraged socialising, had been placed in communal lounges. Staff were very visible in the social areas of the home and we saw that they were attentive to people, asking if they wished to have anything to drink and replenishing hot drinks if they became cold.

People's rooms were decorated according to their own tastes. Rooms were ensuite and if people required assistance with personal care they received this in private. People had enough space to meet their needs and wishes. We discussed people being able to personalise the entry to their room via memory boxes for ease of orientation.

The front door into the service is code-controlled. Equipment checked during inspection was clean and had been serviced in line with legislation which meant people experienced an environment that was secure and safe.

How well is our care and support planned?**5 - Very Good**

In this part of the inspection report we considered one quality indicator:

Quality Indicator: 5.1 Assessment and personal planning reflects people's outcomes and wishes.

We assessed the service as Very Good for this quality indicator which means overall we evaluated this key question as Very Good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People living in the care home and those important to them were involved in developing their personal plans. They contained a lot of information about people, including life story work, and demonstrated that staff knew the people they were supporting well and what was important to them, including important relationships and support required to maintain them. If people had a spiritual faith the service supported them to maintain their connection with it if they wished.

People were encouraged to make choices on a day-to-day basis. The service carried out baseline health and wellbeing screening to identify what needs required to be monitored regularly in order to ensure they had current information about people's health needs and how they would meet these. They contained details about things which were important to people, for example what they liked to eat, what they liked to wear, how they liked their routine. People were assessed to ascertain what support they needed to carry out activities of daily living and the level of support they required. People were encouraged to maintain their skills and independence.

Review meeting minutes and action plans evidenced reviews were taking place within statutory timescales. The home had established links with external professionals who could provide guidance and support if required. Where people were not able fully to express their views, individuals who were important to them or who had legal authority were involved. The service was aware when a person had a Power of Attorney or Guardianship order in place.

People had anticipatory care plans in place. These contained information that was particular to the person should they become ill and require end of life care.

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 that people receive responsive care and support which adapts as their needs change the provider should ensure that care plans are clear, person-led and up-to-date in relation to people's needs and that staff are confident in accessing them and know their purpose and usage.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that "I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty." (HSCS 3.18) and "My care and support is consistent and stable because people work together well." (HSCS 3.19).

This area for improvement was made on 26 August 2022.

Action taken since then

The service have very good managerial oversight of care planning within the service and do this regularly with action plans attached for individual staff to address. The service were advised to analyse their care plan audits and link them to staff training requirements.

Previous area for improvement 2

To support people's dignity and wellbeing whilst eating, the provider should ensure staff have training appropriate to their role and are deployed effectively.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that "If I need help with eating and drinking, this is carried out in a dignified way and my personal preferences are respected." (HSCS 1.34) and "I have confidence in people because they are trained, competent and skilled." (HSCS 3.14).

This area for improvement was made on 26 August 2022.

Action taken since then

The service have improved and standardised their induction process and introduced a mentorship programme which lasts for the duration of new staff members' probationary period. This has improved staff confidence and communication within the service for new members of staff.

Previous area for improvement 3

To ensure that people continue to receive good outcomes the provider should ensure that staff receive regular supervision in order that their learning and development supports this.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that "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." (HSCS 3.14).

This area for improvement was made on 26 August 2022.

Action taken since then

Staff received supervision six monthly and this, in addition to other improvements made to communication within the home, mean this area of improvement has been met.

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?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

How good is our staff team?	5 - Very Good
3.1 Staff have been recruited well	5 - Very Good

How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good

How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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