

Greenfield Park Care Centre Care Home Service

291 Myreside Street Carntyne Glasgow G32 6BX

Telephone: 01417 780 368

Type of inspection: Unannounced

Completed on: 16 November 2023

Service provided by: HC-One Limited

Service no: CS2011300709 Service provider number: SP2011011682



About the service

Greenfield Park Care Centre is registered to provide a care service for 110 residents.

The centre is purpose-built and is in Carntyne, Glasgow. It is close to local transport links. Accommodation is on one level consisting of a main reception area, offices, and a relatives' room. Leading from this area are two wings, consisting of five units.

Each unit has a lounge with separate dining area and satellite kitchen. All bedrooms are single with ensuite facilities. There is a selection of small rooms throughout the building where residents can spend time or meet privately with visitors. There are recreational facilities including an art room, pub and hairdressing salon which are well used by residents. All units open out onto secure, well-maintained gardens. Parking facilities are available for visitors to the service.

About the inspection

This was an unannounced inspection which took place on 14, 15 and 16 November 2023. The inspection was carried out by two inspectors 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 15 people using the service and six of their families
- · spoke with staff and management
- observed practice and daily life
- reviewed documents
- obtained feedback from visiting professionals.

Key messages

- People's health needs were escalated to other health professionals when needed.
- The staff team worked hard to ensure the care home was kept extremely clean.
- People and their representatives were involved in planning their support.
- The staff team knew residents very well.
- · Communication with families was very good.

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

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Staff demonstrated warmth and compassion when interacting with people. We saw and heard this in the way they spoke with people and in how they recognised their needs. People stated they were pleased with the care they received. One person said: "I'm happy here and I really couldn't ask for anything more. The food is lovely and the care I get from the staff is second to none." Most staff had been in post for several years and as such they knew people and their families well which resulted in a friendly and relaxed atmosphere. This promoted a culture of respect throughout the service and promoted the Health and Social Care Standards.

The way people spend their day should promote feelings of purposefulness and wellbeing. Planned activities can contribute to wellbeing and are important in maintaining physical and mental health. The well-established wellbeing team provided different activities throughout the service. These activities were designed to meet the skills and abilities of people in the different units, which meant that people were able to get the most out of them. Examples of these were memory cafes, lunch clubs, dominoes, physical exercise and dancing.

The service had use of a minibus and there were outings planned on a regular basis for people. An art studio in the home, with a member of staff from Glasgow School of Art, was also available for people to attend on a twice weekly basis. People were regularly consulted on what type of activities they would like, what ones they had enjoyed and what they didn't like. The management team had a very good overview of activities. People identified as not being keen to participate in regular activity were highlighted to the activity coordinator for further encouragement and support.

People were supported by a range of visiting health professionals who told us that staff were responsive, followed advice provided and communicated well with them about health issues. One health professional told us, "A lot of work has been done here to develop knowledge around pressure wounds and treatment. The treatment now excels." These approaches helped keep people well and ensured their health needs were being met.

Medications were managed effectively with safe systems in place for storage, administration, and recording. Regular audits were undertaken and staff received regular training. This ensured people were supported well with their medication to maintain their wellbeing.

People came together for meals in each unit's dining areas. People told us they enjoyed the meals and snacks, and meals were freshly cooked on the premises. The chef had consulted with people to find out their likes and dislikes and devised the menus around this. We observed a lunch and evening meal service which were calm and relaxed. For those people who required mealtime support this was conducted in a dignified way. Throughout the day, people had access to snacks and drinks including home-made bakes. These measures meant people had a positive mealtime experience where they enjoyed their meal and sat with others if they wished.

We were reassured to see that the manager was working hard to re-establish links with the local community. People benefited from relationships with local primary schools and in-house church services. This helped maintain connection with the wider community and support people's spiritual needs. People were able to stay connected to family and other people who were important to them. This was supported very well and helped people maintain relationships that mattered most to them. Visiting was encouraged and a flexible approach was taken to suit people.

How good is our leadership?

5 - Very Good

We made an overall evaluation of very good for this key question, as the service demonstrated major strengths in supporting positive outcomes for people.

Relatives and people living in the home were highly complimentary about both the manager and staff group in general. One relative told us "It's amazing here, great, they are all so nice. Our relative is always well cared for. The family feels safe in the knowledge they are getting well cared for."

The manager had a very good overview of the service including accidents and incidents, people's healthcare needs including nutrition and wound care, and the environment including infection prevention and control.

There was a comprehensive quality assurance system for reviewing personal plans. This included how people's preferences, choices and care needs were being met. This was a sustained approach to ensuring personal plans were up to date with relevant information to support delivery of individualised care and support for each person.

Staff supervision and appraisals were regular, which gave them support and ensured the quality of care and support delivery was consistent and assured. Staff, without exception, found the management team to be supportive, accessible and approachable. They also told us the training they received improved their work performance. Observation of staff practice was regularly carried out to ensure they were putting learning into practice.

The service had devised a development/improvement plan with input from people living in the home, their representatives and staff. This means people have a say on how the service can continually improve in ways that matter to them. Systems were in place to safeguard people's finances.

We saw that safe recruitment practice was being followed. Staff were either registered or in the process of doing so with the Nursing and Midwifery Council or the Scottish Social Services Council. This meant people could be confident they were being supported by the right people. The service was very well led. People were supported in a person-centred way that recognised and respected their rights, wishes and needs.

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of staff knowledge and their competence, and how this supported positive outcomes for people, therefore we evaluated this key question as very good.

Staff were confident and supported the inspection process, whilst demonstrating knowledge, compassion and competence in their roles.

We reviewed the service's training records and found staff could access online training. Examples included health and safety, food safety, infection control, moving and handling and safeguarding. Most courses had achieved a high compliance rate. This ensured that people could be confident that they were being supported by a well-trained staff team.

The service provided practical training for specific health conditions which affected some people who lived in the home, examples of this included tissue viability, dysphasia and choking, dementia care and nutrition and hydration. This meant that people were being cared for by staff who understood and were sensitive to their needs to support positive outcomes.

Staff were supported to keep up to date with current and changing practice, with easy access to a range of good practice guidance. There was a range of approaches to suit different learning styles, examples included face-to-face training and online courses.

Staff described receiving feedback and some supervision, with an open-door policy to the management team that enabled guidance and support as needed. This helped to ensure that people's needs were met well whilst also supporting staff development. Staff told us that they felt valued, included and listened to by the management team.

How good is our setting? 5 - Very Good

We found significant strengths in aspects of the setting and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Each part of the home was clean, attractive and well cared for. The furnishings were of good quality in every unit. Chairs and sofas were comfortable and were laid out in such a way as to promote a homely and warm atmosphere. The flooring in each of the units was mainly laid to carpet and these were all clean and in good condition. In the bigger units there were two lounges, both well decorated and furnished, one being a larger lounge for people to mix with each other, and a smaller cosy TV lounge. There was plenty of social space and people chose where to spend their time.

In one of the units there was a sensory room with lighting and music that provided an area for relaxation. This was an area where people could go when feeling anxious or feeling stressed. The communal areas were welcoming, spacious and tidy. The environment and equipment were cleaned to a high standard and well-maintained. A relative said, "The home is so well- maintained and it's always spotless." The housekeeping team used an app and tablet devices to monitor their progress in cleaning areas of the home. The system gave an overview of all housekeeping activities to managers in one single view. It provided time management for the housekeeping staff and removed reliance on paper-based documents or schedules.

The home was well-maintained and decorated to a high standard. Any issues reported were actioned quickly, promoting people's health and safety. Maintenance records were in good order, with a clear process for highlighting any required work. Consequently, the general environment was safe and secure.

There was a courtyard garden outside of each unit with attractive tables and chairs. These were secure areas that were easily accessible for all. People could independently use the gardens, weather permitting.

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

We found significant strengths in aspects of assessment and planning, and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

It is essential staff have all the relevant information about each person to be able to deliver care and support effectively. Care and support plans were detailed, and information or guidance had been updated in all sections.

Where people were unable to make choices or decisions, supporting legal documentation was in place. This meant staff were clear about their responsibilities and supporting people with any decisions to be made or needed support to make. Personal plans contained information about future care planning, and people's wishes for resuscitation were noted when this was people's chosen outcome.

Contacts for relevant health professionals and family members were noted in plans, meaning people could be quickly contacted when issues arose. Relatives were invited to take part in reviews of care which gave an opportunity for them to give feedback and be involved in a meaningful way, in support of their family member.

When people's health needs had changed, personal plans and risk assessments were promptly updated. This ensured care and support delivered was responsive to people's changing needs. People's support plans and risk assessments were well completed and reviewed on a regular basis, meaning that they were up to date. This meant that people could be assured their health and wellbeing needs were 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

This area for improvement was made following a complaint investigation.

When a person who is experiencing care is unwell the appropriate medical observations should be carried out at regular periods and recorded. A clear monitoring and observational system should be in place to enable staff to do this.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This area for improvement was made on 20 July 2023.

Action taken since then

We examined personal plans and noted that the service had a system to record and monitor observations of people who may be unwell.

This area for improvement has been met.

Previous area for improvement 2

This area for improvement was made following a complaint investigation.

Each person who is experiencing care should have a clear and detailed plan in place in regards to how their personal care needs will be met. This should be developed in a person-centred manner and include preferences and routines. Where appropriate family/representatives should be involved. Personal care records should clearly record when someone has had a bath or shower or what care they have received.

This is to ensure care and support is consistent with Health and Social Care Standard 1.15: My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.

This area for improvement was made on 20 July 2023.

Action taken since then

We examined personal plans and evaluated that they detailed how people's personal care needs should be met. Plans were completed with the person, and carers where appropriate.

This area for improvement has been met.

Previous area for improvement 3

This area for improvement was made following a complaint investigation.

People who are experiencing care should have opportunity to participate in meaningful activities that are provided in a manner that meets their needs. Care plans should demonstrate how staff have explored hobbies and interests, with specific details of people's preferences and how they can continue to be involved in these. Where appropriate family and/or representatives should be involved in the development of this plan.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This area for improvement was made on 20 July 2023.

Action taken since then

The personal plans we sampled contained information on people's interests and how they could be supported to continue these, where appropriate. We observed the wellbeing team work with people as part of groups, but also on an individual basis.

This area for improvement has been met.

Previous area for improvement 4

This area for improvement was made following a complaint investigation.

There should be a falls tool in place to ensure accurate recording of any observations following a fall. Care plans should demonstrate learning and risk assessing in response to any accidents an individual may have. The relevant authorities should be notified of any accident that meets the criteria for a notifiable event.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This area for improvement was made on 20 July 2023.

Action taken since then

We examined personal plans and noted that the service had a system to record and monitor observations of people following a fall.

This area for improvement has been met.

Previous area for improvement 5

This area for improvement was made following a complaint investigation.

People experiencing care should have confidence that any observed bruising will be recorded, and appropriate prompt action will be taken to notify all relevant individuals and agencies.

This is in order to comply 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 area for improvement was made on 6 April 2023.

Action taken since then

We found that the service now responds appropriately to any injuries and notifies the Care Inspectorate, or other agencies accordingly.

This area for improvement has been met.

Previous area for improvement 6

This area for improvement was made following a complaint investigation.

To ensure the safety of people experiencing care the provider should:

a) ensure a falls prevention plan is implemented, and reviewed, in line with changes in people's assessed needs.

b) ensure an assessment of people's moving and handling needs is completed, and reviewed, on a regular basis. Any required equipment should be identified and sourced.

c) all care staff should receive practical and theoretical training on safer moving and handling of people.

This is in order to comply with: Health and Social Care Standard 5.23: I am able to access a range of good quality equipment and furnishings to meet my needs, wishes and choices.

This area for improvement was made on 6 April 2023.

Action taken since then

We found that the service had improved its approach to falls management and the assessment of people's moving and handling needs. We noted that staff had received training on the moving and handling of people. We observed the practice of staff and had no concern regarding the practice.

This area for improvement has been met.

Complaints

Please see What the service has done to meet any areas for improvement we made at or since the last inspection.

You can also see our website for details of complaints about the service which have been upheld. 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
3.2 Staff have the right knowledge, competence and development to care for and support people	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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