

Care service inspection report

Ardenlee

Care Home Service Adults

Bullwood Road
Dunoon
PA23 7QJ

Inspected by: Kevin Dale

Type of inspection: Unannounced

Inspection completed on: 16 January 2013



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Service provided by:

TC Carehome Ltd

Service provider number:

SP2003002621

Care service number:

CS2004059227

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Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of Care and Support	4	Good
Quality of Environment	4	Good
Quality of Staffing	4	Good
Quality of Management and Leadership	4	Good

What the service does well

Ardenlee provides a valued service to residents and relatives. The service continues to develop care planning and person centred care. Residents' comment that staff are friendly and very hard working and that generally the quality of the care is good.

What the service could do better

The service needs to ensure that staff receive training in pressure ulcer prevention and that all wounds are recorded and documented. Work continues to take place to ensure there are sufficient bathing facilities for residents.

What the service has done since the last inspection

The service has made some good improvements to the environment including the refurbishment of some bedrooms and the installation of a sluice. Staff training is taking place and the laundry and domestic arrangements have improved.

Conclusion

Ardenlee offers a good quality service, improvements to the care and support of residents is ongoing and there has been some improvement to the environment. Management and staff are committed to provide a good quality service to residents and relatives.

Who did this inspection

Kevin Dale

Lay assessor: Not Applicable.

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission. Information in relation to all care services is available on our website at www.careinspectorate.com.

The Care Inspectorate will award grades for services based on findings of inspections. Grades for this service may change after this inspection if we have to take enforcement action to make the service improve, or if we uphold or partially uphold a complaint that we investigate.

The history of grades which services have been awarded is available on our website. You can find the most up-to-date grades for this service by visiting our website, by calling us on 0845 600 9527 or visiting one of our offices.

Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a recommendation or requirement.

A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.

A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reforms (Scotland) Act 2010 and Regulations or Orders made under the Act, or a condition of registration.

Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Inspectorate.

Ardenlee Care Home is situated in the West Bay area of Dunoon with views over looking the Clyde Estuary. It is registered to provide accommodation for a maximum of 33 older people with 32 single rooms some of which can be used as double rooms. All rooms provide en-suite facilities. At the time of the inspection there were 31 residents living in the home.

The home's aims and objectives state: "Our home is run for the residents, moving into a new home need not mean the loss of dignity, privacy or independence, but rather the chance to do more with staff on hand to help."

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 4 - Good

Quality of Environment - Grade 4 - Good

Quality of Staffing - Grade 4 - Good

Quality of Management and Leadership - Grade 4 - Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

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2 How we inspected this service

The level of inspection we carried out

In this service we carried out a medium intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

What we did during the inspection

This unannounced inspection took place on the 16 January 2013. During the inspection, evidence was gathered from a number of sources including:

- discussion with residents and relatives
- discussions with staff
- supporting evidence from the up to date self assessment
- service user's personal plans
- staff personnel files
- training records
- minutes of staff meetings
- minutes of residents' and relative meetings
- accident and incident logs
- comments and complaints logs
- risk assessment policies and procedures
- observation of staff care practices
- examination of the environment and equipment

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

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

The requirement

The provider must ensure that there is sufficient provision of bathing facilities, sluice rooms and domestic service rooms within the home.

This is in order to comply with SSI 2011/210 10(2)(a) Fitness of premises.

What the service did to meet the requirement

A sluice room with a sanitiser had been installed on the first floor and mops and buckets were now stored in a separate room. Work had still to take place to provide more bathing facilities. The manager had undertaken a review of residents who were able to use the showers in their room, and quotes had been sought for installing some wet floor areas. This Requirement is partially met and is continued.

The requirement is: Not Met

The requirement

The provider must develop and maintain an accurate and detailed care plan and monitoring record which clearly states what a service user's hydration needs are (where this need has been identified) and the action that staff are to take to achieve the desired hydration levels and what action to take if this is not being achieved.

This is in order to comply with SSI 210, 5(1) - A provider must prepare a written plan ("the personal plan") which sets out how the service user's health, welfare and safety needs are to be met.

Timescale - 4 weeks from receipt of this report.

What the service did to meet the requirement

The manager has developed more accountable and detailed care plans for hydration and is liaising with Community Health care staff for advice and information.

The requirement is: Met

The requirement

The provider must only appoint staff to senior care positions who have both the appropriate qualifications and the necessary experience and competencies for the position.

This is in order to comply with SSI 210, 15(a) - A provider must having regard to the size and nature of the care service, the statement of aims and objectives and the number and needs of service users ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of service users.

Timescale - 12 weeks from receipt of this report.

What the service did to meet the requirement

Senior support staff have commenced vocational qualifications in care which will assist them to meet the registration requirements of the Scottish Social Services Council.

The requirement is: Met

What the service has done to meet any recommendations we made at our last inspection

1. The provider should support staff and offer necessary training in order to enable them to develop detailed care plans that will satisfactorily address service users identified hydration needs.

National Care Standards: Care Homes for Older People; Standard 5, Management and Staffing Arrangements)

Action taken: The manager has provided some in house training and training with health care professionals to meet residents' hydration needs. Report writing and recording training was due to commence in the next few weeks.

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The Self Assessment identified areas where the service was performing well and areas for development.

Taking the views of people using the care service into account

We spoke with 8 residents during the inspection, most made positive comments about the staff, quality of food and the environment. We observed an activity taking place and residents involved appeared to be engaged with the activity and enjoy the experience.

Taking carers' views into account

One relative spoken with had concerns that at times there was a lack of staff to observe the lounge area. We spoke to the manager regarding this, who told us that she would speak to staff to ensure there was always a member of staff in the lounge area.

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

The service has a brochure and participation strategy displayed in the front hall.

The service had recently developed a new website which gave good information on the accommodation and activities offered at the home.

Details of the local advocacy service was available and displayed.

A newsletter is produced monthly and contained some good information on events and activities. The activities worker told us that they have a good relationship with the local primary and secondary school. Children visit regularly to take part in activities with residents and the local radio station has plans to interview residents to talk about their life history.

Relatives and residents spoken with stated that they had no hesitation speaking to staff or management if there were any issues.

Residents and relatives are involved in fund raising and the manager is developing a fund raising committee.

We found evidence of residents and relatives being involved in care planning and reviews.

Areas for improvement

We noted that some social work reviews were out of date. We discussed with the manager the importance of continuing with the in house reviews and sending the minutes to the relevant care manager.

The manager should continue to develop the participation strategy to ensure there is meaningful engagement with residents and relatives including residents who are difficult to reach.

We discussed with the manager the benefit of using comments and complaints about the service as a tool to quality assure the service.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We ensure that service users' health and wellbeing needs are met.

Service strengths

The manager reported that due to the reduced occupancy levels residents dependencies and needs were being better met.

The service had implemented the Mental Welfare Commission's best practice guidance on the administration of covert medication. We found evidence in care plans that discussions had taken place with residents' families on the use of medication that alters mood or reduces agitated behaviour. We found that residents' medication had recently been reviewed by their GP.

We found evidence of staff consulting with local health care professionals with regards to dietary and hydration advice.

Areas for improvement

We noted that details of wounds were not recorded in residents' care plans and that staff had not received training in pressure ulcer prevention. We sign posted the manager to wound assessment best practice documents and recommended that she source training for staff.

We found that the number of resident falls had reduced, however action plans to prevent further falls should be more robust and specify what actions had been taken to prevent falls.

The manager was to provide care plan training to staff that included person centered care and non judgemental recording.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

Service strengths

See Quality Statement 1.1 in Quality Theme 1.

Areas for improvement

See Quality Statement 1.1 in Quality Theme 1.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

We make sure that the environment is safe and service users are protected.

Service strengths

The service continues to refurbish residents' bedrooms and lounge areas. We found that the bedrooms were refurbished to a good standard and that some unused showers in bedrooms had been removed to improve disabled accessibility. The front hall had been redecorated and new easy chairs purchased which created a more welcoming private area. Children's toys had been provided for visiting children and the home had created a sensory room with a treasure chest. The manager said that she was trying to make the home more dementia friendly and had put up a washing line in a corridor with a basket, clothes and clothes pegs.

We found the home odour free, bright and fresh. Radiator covers had been fitted to radiators in residents' rooms and some window frames had been repaired.

Areas for improvement

Action continues to be required to be taken to ensure that there is sufficient bathing facilities for residents.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths

See Quality Statement 1.1 in Quality Theme 1.

Areas for improvement

See Quality Statement 1.1 in Quality Theme 1.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

Staff had recently received training in moving and handling, medication administration, challenging behaviour and nutrition. The manager had produced a training matrix for 2013 and linked it to staffs' personal development plans. The manager was undertaking "job chats" with staff and supervision notes indicated that staff care practice and development needs were discussed.

The service's training and development policy had recently been updated to reflect best practice guidance.

Areas for improvement

We discussed with the manager the importance of linking the training matrix to the organisational development plan. For example looking at the increasing numbers of residents with dementia and providing staff with more specialist dementia training that would enhance residents' outcomes.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths

See Quality Statement 1.1 in Quality Theme 1.

Areas for improvement

See Quality Statement 1.1 in Quality Theme 1.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Service strengths

The manager had recently reorganised the staffing of the laundry and kitchen and held regular meetings with domestic and care staff. This has had a positive impact on the quality of laundry and domestic services.

Areas for improvement

The manager should continue to develop the service improvement plan and consolidate the good work already undertaken.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

4 Other information

Complaints

The 2 Requirements and 1 Recommendation arising from the complaint had been met.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 4 - Good	
Statement 1	4 - Good
Statement 3	4 - Good
Quality of Environment - 4 - Good	
Statement 1	4 - Good
Statement 2	4 - Good
Quality of Staffing - 4 - Good	
Statement 1	4 - Good
Statement 3	4 - Good
Quality of Management and Leadership - 4 - Good	
Statement 1	4 - Good
Statement 4	4 - Good

6 Inspection and grading history

Date	Type	Gradings
20 Jun 2012	Unannounced	Care and support 4 - Good Environment 3 - Adequate Staffing 4 - Good Management and Leadership 4 - Good
24 Nov 2011	Unannounced	Care and support 5 - Very Good Environment Not Assessed Staffing 4 - Good Management and Leadership Not Assessed
23 Jun 2011	Unannounced	Care and support 4 - Good Environment Not Assessed Staffing Not Assessed Management and Leadership 4 - Good

Inspection report continued

26 Oct 2010	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good 4 - Good
23 Jun 2010	Announced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 3 - Adequate 4 - Good
12 Jan 2010	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
3 Jun 2009	Announced	Care and support Environment Staffing Management and Leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
11 Nov 2008	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
30 Jul 2008	Announced	Care and support Environment Staffing Management and Leadership	3 - Adequate 2 - Weak 3 - Adequate 3 - Adequate

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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ہے بایتسرد می م وونابز رگی د روا ولکش رگی د رپ شرازگ تعاشا ہی

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