

Care service inspection report

Full inspection

Ardenlee Care Home Service

Bullwood Road
Dunoon



HAPPY TO TRANSLATE

Service provided by: TC Carehome Ltd

Service provider number: SP2003002621

Care service number: CS2004059227

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

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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	5	Very Good

What the service does well

Ardenlee continues to provide a good quality service to residents and relatives. We found the staff to be enthusiastic and keen to provide the best service to residents.

What the service could do better

The service continues to redecorate and refurbish the internal environment. The manager should review the content and appropriateness of some staff meeting minutes.

What the service has done since the last inspection

A new drug administration system has been implemented and an intermediate care bed has been commenced.

Conclusion

The service continues to perform to a good and in some areas a very good standard and should continue with the continuous improvement agenda.

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com

This service was registered with the Care Inspectorate in October 2011.

Ardenlee Care Home is situated in the West Bay area of Dunoon with views overlooking 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 30 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."

Recommendations

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

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

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 5 - Very Good

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 following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0345 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We wrote this report following an unannounced inspection which took place on the 4 February 2016. The inspection was undertaken by one inspector.

As part of the inspection, we took account of the self-assessment form that we asked the provider to complete and submit to us.

We sent 20 care standards questionnaires to the manager to distribute to residents and four were returned. We sent 20 care standards questionnaires to relatives and eight completed questionnaires were returned.

We also asked the manager to give out 15 questionnaires to staff and we received seven completed questionnaires.

During this inspection process, we gathered evidence from various sources, including the following:

We spoke to:

- 10 residents
- three relatives
- four care staff
- the cook
- the manager
- domestic staff.

We looked at:

- supporting evidence from the self assessment
- service users' personal plans
- health and risk assessments
- minutes of review meetings
- training records
- staff appraisals
- staff supervision records
- minutes of staff meetings
- the monthly newsletters
- activity records and photographs
- minutes of residents' meetings
- medication administration records (MAR)
- policies and procedures
- quality assurance policies and procedures
- notice boards and information leaflets on display
- accident and incident logs
- comments and complaints logs
- maintenance records
- observation of staff practice including lunch being taken by residents
- the environment.

We used the Short Observational Framework for Inspection (SOFI2) to directly observe the experience and outcomes for people who were unable to tell us their views.

On this inspection we used SOFI2 to observe the lunchtime experience of five residents.

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.firescotland.gov.uk

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.

We received a completed self assessment document from the service manager. We were satisfied with the way the service manager had completed this and with relevant information they had given us for each of the headings that we grade them under.

The manager identified what they thought they did well, some areas for development and any changes they planned. The self assessment gave some indication of how the people who use the service had taken part in the self assessment.

Taking the views of people using the care service into account

Comments from residents are contained throughout the report.

Taking carers' views into account

Comments from relatives are contained throughout the report.

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 was performing to a good standard in this quality statement. We decided this after we spoke with residents, relatives and staff. We looked at newsletters, minutes of reviews, minutes of meetings, activity plans and residents care plans.

Minutes of residents' meetings contained some good discussions around activities and outings. Residents had suggested a range of activities they would like to take part in including table tennis and outings to the local garden centre. Residents were asked about the quality of the meals and if they liked the choices of meals and were asked for suggestions for future menus. Residents' views were sought on the continued use of the Sunday lunch club and if they felt it was intrusive. Residents responded positively about the visitors.

The service now has two activity workers that provided activities on a group and individual basis throughout the day. A car had been purchased that can carry a wheelchair to provide small group outings.

Residents' reviews were taking place every six months and their care plans were reviewed monthly. Residents and relatives confirmed that they had been involved in developing their plan of care and had attended review meetings.

We noted that feedback from the service's own quality questionnaires was positive and the manager had developed an action plan to address any issues arising from the questionnaires.

Relatives and residents told us, "I think my relative is very well looked after, the staff keep me informed, I think all the residents are very well looked after".

"All staff are caring and supportive".

Care and support at Ardenlee is very good".

"Care is satisfactory, the staff are very helpful and caring".

Areas for improvement

We noted that some language used in minutes of staff meetings was inappropriate and information about individual residents should not be recorded in meeting minutes.

Grade

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 service was good at ensuring residents' health and welfare needs were being met. We decided this after we spoke with residents, relatives and staff. We looked at health care assessments, risk assessments, residents' care plans and medication administration policies and procedures including medication administration records (MAR).

The service had recently installed medication 'pods' in residents' bedrooms to make the medication administration process more person centred. Staff had worked with and sought advice from the NHS Pharmacy technician. Staff had medication administration training and had their competency assessed to administer medication safely and senior staff were carrying out random medication audits on a daily basis.

The manager had introduced the use of body maps for residents who were admitted or transferred from hospital. The body maps ensured that residents' skin condition was regularly checked.

Staff and management had set up a 'falls' group to look at ways to reduce the number of falls residents experienced in the home. The falls group was made up of care staff, the activity worker, the chef and handyman. This ensured that all risks and hazards were identified in the home and strategies were put in place to reduce the risk of falls. The service had begun to use the falls tool "Managing falls and fractures in care homes" and they were looking to source falls training for staff.

The activity worker had introduced a programme of daily exercise for residents which helped residents maintain their balance and mobility.

The service had improved the way it manages and monitors residents' food and fluid intake. Fluid charts now contained target amounts of fluid for individual residents and there were action plans in place where it was identified that residents were not drinking sufficient fluids. The manager told us that the local community nurse visits the home regularly to give advice on residents' health matters including diet and skin care.

The cook told us that she had a list of residents' dietary requirements and their food preferences. All meals were home cooked and on the day of the inspection residents were observed to be enjoying their lunch. The cook told us that she was currently completing a vocational qualification in catering.

Comments from residents and relatives included, "I like it here, we are getting well looked after".

"My relative is doing well at Ardenlee, their health has improved and they are taking part in activities".

"My friend has dementia and needs help with daily tasks. They are always tidy and well kept".

Areas for improvement

We looked at MAR records and body maps in residents' rooms, we found that generally most were correctly signed and dated, however we noted that some body maps were incomplete and some topical creams were handwritten on the MAR.

Grade

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

The service was performing to a good standard. We spoke with residents, relatives and staff and looked at minutes of meetings and inspected the environment.

Residents and relatives commented, "The home is very bright and clean".

"The home is very much like a home from home, very friendly warm, comfortable and very clean. My relative's clothes are all marked and always kept clean. Their room is beautiful and cosy".

Areas for improvement

Comments from relatives included, "The quality of the environment is not as good as it should be, carpets are in bad condition on stairs, landings etc. not safe for elderly people".

Grade

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 was performing to a good standard in this quality statement. We decided this after we spoke to residents, relatives and staff. We looked at accident and incident reports, maintenance records, and inspected equipment and the environment.

The manager had recruited extra domestic staff to cover the 6pm to 10pm shift to allow night staff to free up time to undertake care tasks.

Accident and incident records were appropriately recorded and actioned. The service had completed the Multifactorial risk assessment for falls prevention.

We found that equipment used for moving and assisting residents had been regularly checked and serviced. The environment including furnishings and décor were generally in a good state of repair and we found evidence of repairs being reported and actioned timeously.

Areas for improvement

The manager told us that the programme to remove the unsuitable showers in residents' bedrooms continued. The showers were being removed when the room became vacant and were being decorated.

The main stair and top floor corridor carpet was worn and would benefit from being replaced. The manager informed us that they had secured funding to purchase new carpets and was waiting until the decoration of the corridors had been completed before purchasing them.

Grade

4 - Good

Number of requirements - 0

Number of recommendations - 0

Quality Theme 3: Quality of staffing

Grade awarded for this theme: 4 - Good

Statement 2

“We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.”

Service strengths

The service was performing to a very good standard in this quality statement. We looked at staff recruitment files and spoke with residents, relatives, management and staff.

In the recruitment files we saw that a checklist was used to note progress with the application process for example:

- completion of an application
- health check
- overseas check where indicated
- passport, visa, work permit checks
- qualifications
- identity check
- request and receipt of references, including one from the previous employer
- PVG check (Protecting Vulnerable Groups)
- SSSC (Scottish Social Services Council).

The check of SSSC (Scottish Social Services Council) registrations assisted the service to ensure that staff had the appropriate qualification, experience and skills to undertake the work they were employed to do. SSSC regulates care staff standards of qualifications, skills and practice. These checks also assisted to ensure that staff employed in the service were safe to practice.

Where necessary, staff were made aware of the need to register with SSSC within a given timescale from the time of their commencement of employment. We saw that some staff had conditional registration status with SSSC.

Staff confirmed that they had received a period of induction which included shadowing more experienced staff. The manager and depute undertake post induction interviews over a three month period and ensure new staff have regular supervision meetings.

We concluded that the recruitment practices showed that the service provider had robust procedures and practices which were very well managed systems. This assisted them to make sure appropriate staff were employed and contributed to safeguarding service users and their relatives/carers.

Areas for improvement

The service is currently performing to a very good standard and should continue to follow safer recruitment best practice and encourage residents and relatives to participate in the recruitment and induction process.

Grade

5 - Very 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

The service's performance was good in this quality statement. We spoke with residents, relatives and staff, we looked at staff training and induction records and staff supervision files.

A member of care staff had trained as a moving and assisting instructor which meant that all staff had their moving and assisting training regularly refreshed. The requirement regarding moving and assisting had been met.

Staff told us that they had opportunities to complete vocational qualifications and we noted that nineteen care staff had completed SVQ 2 or SVQ 3 and the depute manager was training to become a work place assessor.

Staff supervision took place on a regular basis and staff were encouraged to sign up to the Scottish Social Services Council's website to complete their post registration and training records that would enable them to maintain their registration.

Comments from staff included, "I have worked in Ardenlee for over a year now and before working here I had no experience in the sector of care. From what I have gained since starting is more than I could have imagined. The level of care for our residents is outstanding in my opinion through the training that is provided".

Comments from relatives included, "The staff are very caring and supportive to everyone when you watch them interact with everyone".

Areas for improvement

The service is performing to a good standard and should continue to promote training and development opportunities for staff.

Grade

4 - Good

Number of requirements - 0

Number of recommendations - 0

Quality Theme 4: Quality of management and leadership

Grade awarded for this theme: 5 - Very 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

The service was performing to a very good standard in this quality statement. We spoke with residents, relatives and staff, we looked at the participation strategy, and the quality assurance policies and procedures.

Residents and relatives spoken with stated that they found the manager very accessible and had confidence in the management and staff team.

Areas for improvement

The service was performing to a very good standard and should continue to involve, residents, relatives, staff and external stakeholders in the quality assurance process.

Grade

5 - Very 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 service was performing to a very good standard in this quality statement. We looked at the operational improvement plan, the quality assurance tools and audits and spoke to residents relatives and staff.

The manager and staff had improved the way residents were served their meals which freed up more time for care staff to spend assisting residents to eat. A relative told us that they were able to visit at meal times to assist their relative to eat and enjoy their meals.

The management team had produced comprehensive service improvement plans for care and support, the environment, staffing and management and leadership. The improvement plans identified and prioritised areas for action which included timescales and staff responsible for reviewing the outcomes of actions taken.

The manager was keen to encourage and develop staff to take responsibility for service improvement and had strategies to help build capacity within the workforce to achieve continuous improvement. The manager and depute provided mentorship to senior care staff and staff spoken with told us that they felt supported to develop their professional knowledge and practice.

The management and staff had developed a comprehensive action plan to implement the new drug administration systems and we could see that the action plan was regularly reviewed and that medication audits and staff competency checks were taking place.

We noted that from the range of meetings that took place that staff views were sought and valued and that they felt they had a say and could influence decision making within the service.

Areas for improvement

The service should continue with the service improvement plans to enhance the quality of the service and promote good outcomes for people who use the service.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

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

Previous requirements

1. The provider must ensure training about moving and handling is provided to new staff by an accredited trainer to comply with the Manual Handling Operations Regulations (1992) as amended (2002).

This is in order to comply with SSI 2011/210 Regulation 15 Staffing - a requirement relating to staff skills and training.

Timescale for implementation: within 2 weeks of receipt of this report.

This requirement was made on 20 February 2015

See quality theme 3, statement 3 for action taken on this requirement.

Met - Outwith Timescales

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

Previous recommendations

There are no outstanding recommendations.

6 Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

7 Enforcements

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

8 Additional Information

There is no additional information.

9 Inspection and grading history

Date	Type	Gradings
20 Feb 2015	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership 5 - Very Good
27 Feb 2014	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership 5 - Very Good
28 May 2013	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership 5 - Very Good
16 Jan 2013	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership 4 - Good
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
26 Oct 2010	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	4 - Good
		Management and Leadership	4 - Good
23 Jun 2010	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and Leadership	4 - Good
12 Jan 2010	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and Leadership	3 - Adequate
3 Jun 2009	Announced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and Leadership	3 - Adequate
11 Nov 2008	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and Leadership	3 - Adequate
30 Jul 2008	Announced	Care and support	3 - Adequate
		Environment	2 - Weak
		Staffing	3 - Adequate
		Management and Leadership	3 - Adequate

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