

# Care service inspection report

# Moyness Nursing Home

Care Home Service Adults

76 Grove Road Broughty Ferry Dundee DD5 1JP

Inspected by: Shona Adam

Molly Clunie

Type of inspection: Unannounced

Inspection completed on: 17 January 2013



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## Service provided by:

Balhousie Care Limited

# Service provider number:

SP2010011109

## Care service number:

CS2010272061

## Contact details for the inspector who inspected this service:

Shona Adam Telephone 01382 207200 Email enquiries@careinspectorate.com

# 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 N/A

Quality of Environment N/A

Quality of Staffing 4 Good

Quality of Management and Leadership 4 Good

### What the service does well

The staff team in Moyness continue to be committed and motivated to providing a good quality of care and support to the residents in their care.

### What the service could do better

The service should continue to make sure that any gaps that have been identified in personal plans are addressed, this ensuring that all documentation is signed where appropriate and up to date.

## What the service has done since the last inspection

Staff have been provided with a good variety of training in topics that are very relevant to the needs of the people whom they are caring for.

## Conclusion

The new manager continues to have a positive impact on the home. Staff work well as a team. This has contributed to the good level of morale that staff told us about during our visit.

## Who did this inspection

Shona Adam Molly Clunie

# 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. This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

If we are concerned about some aspect of a service, or think it needs to do more to improve, 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 based on best practice or the National Care Standards.
- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 ("the Act") and secondary legislation made under the Act, or a condition of registration. Where there are breaches of Regulations, Orders or conditions, a requirement may be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

Moyness Nursing Home provides residential and nursing care for a maximum of 33 older people on a long-term or respite basis and is situated in the Broughty Ferry area of Dundee. The home belongs to the Balhousie Care group.

The premises consist of a large Victorian mansion house and a purpose built two storey extension, set in large secluded gardens. Movement within the home is assisted by the provision of a passenger lift. Ramps are provided to ease access to the home and garden areas.

The Philosophy of Care document states that the main objective of the home is for all personnel to work towards the common goal of achieving a safe, happy and comfortable environment for residents and staff to enjoy.

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

Quality of Care and Support - N/A

Quality of Environment - N/A

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.

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 0845 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 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 report was written following an unannounced inspection that took place on Wednesday 9 January 2013 at 6.30 am and Thursday 14 January 2013 at 9.00 am by Inspectors Shona Adam and Molly Clunie.

In this inspection evidence was gathered from various sources, including the relevant sections of policies, procedures, records and other documents, including;

- evidence from the service's most recent self assessment
- · personal plans of people who use the service
- training records
- · health and safety records
- accident and incident records
- complaints records
- Public Liability Insurance Certificate
- Certificate of registration
- · Schedule of staffing
- questionnaires that had been requested, filled in and returned to the care service from people who use the service, their relatives or advocates and staff members
- · discussions with various people, including:
  - the manager
  - care staff
  - the people who use the service
- observing how staff work
- · examining equipment and the environment.

## 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

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

The service provider identified what they thought they did well, some areas for development and any changes they had planned.

## Taking the views of people using the care service into account

We spoke informally with three residents who lived in the service. All indicated a good level of satisfaction with the quality of care and support that they received. One lady told us that she particularly liked seeing the GP when he visited every Thursday afternoon.

## Taking carers' views into account

There were no carers present at the times of the unannounced inspection.

# 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 - NOT ASSESSED

Quality Theme 2: Quality of Environment - NOT ASSESSED

## 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

Please see inspection report dated 13 August 2012 for further information in relation to this statement.

### Areas for improvement

Please see inspection report dated 13 August 2012 for further information in relation to this statement.

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

The service was found to have a good level of performance in relation to this statement. We know this because we examined the following;

- information that was provided in the services self assessment
- detailed staff training records
- · discussion with 4 members of staff
- observation of staff care practices.

Staff that we spoke with told us that they worked very well together as a team. One staff member explained that staff sometimes rotated shifts between days and nights. This provided them with a very valuable and worthwhile insight into how the staff team worked over different times of the day and also promoted good team relationships.

We watched how staff carried out care practices with residents. It was very clear that staff knew residents needs, likes and dislikes very well. We saw residents being treated in a very dignified and respectful manner.

We inspected 4 staff training files and found that a wide variety of training had been undertaken which included the following;

- Continence
- Tissue viability
- Diabetes
- Hydration/subcut fluids
- Best practice in dementia care learning facilitator training
- HASP
- Medication
- · Care standard and customer care
- Accidents and incidents
- · Policy of the month
- · Living with macular disease.

The training that had been delivered was seen to be very relevant and appropriate to the needs of the residents that the staff cared for.

Good working links had been developed with the NHS care home peripatetic team. The manager and staff told us that this was a valuable resource that had provided the staff team with some good training that had assisted them in their day to day care practices.

Regular staff meetings were seen to take place. Minutes of meetings were readily available and provided a good level of information. We also saw that there was a system of appraisal and supervision in place to ensure continuous staff development.

# Inspection report continued

## Areas for improvement

The manager had identified the following areas for improvement in the services self assessment;

To continue to develop links with the NHS care home peripatetic team. To encourage staff to identify their own personal strengths and take on champion roles.

We will look at progress made by the service in achieving these at the next unannounced inspection.

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

The Inspectors briefly reviewed the grade for this statement and found that the service had maintained the good level of performance that was identified at the last inspection.

Please see inspection report dated 13 August 2012 for further information in relation to this statement.

### Areas for improvement

Please see inspection report dated 13 August 2012 for further information in relation to this statement.

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

We found that the service had a good level of performance in relation to this statement.

The service used a variety of procedures for quality assurance purposes.

We saw that the home manager carried out daily walk rounds of the service and discussed issues such as the environment, staffing and activities. We thought that this was good practice. The manager told us that she was able to take prompt action when she identified any issues or areas of concern.

The service carried out an evaluation/assessment of each residents HASP (personal plan) every 30 days. This had assisted staff in identifying where there were gaps in recordings or information that required to be updated.

A good system was in place for the acknowledgement and investigation of complaints. A clear auditable trail was evident. We saw that detailed written investigations with outcomes and actions noted were completed and shared with the complainant.

A number of area specific audits were carried out on a regular basis. These included the following areas;

Medication administration and record keeping. Environment and health and safety. Accident and incident reporting.

Where deficits had been identified, we saw that action plans had been developed and written detail of what had been done to rectify them. We thought that this was good practice.

It was of particular interest that a low number of falls were experienced by residents who lived in the service. We saw that staff were very proactive in taking action to make sure that risks were minimised.

## Areas for improvement

The manager identified the following areas of improvement in the services self assessment:

To continue monitoring through action plans dealing with issues as quickly as possible.

To involve staff more in monitoring and completion of action plans.

We will look at progress made by the service in achieving these at the next unannounced inspection.

**Grade awarded for this statement:** 4 - Good

Number of requirements: 0

Number of recommendations: 0

# 4 Other information

## Complaints

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

### **Enforcements**

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

#### Additional Information

Not applicable.

### **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 - Not Assessed				
Quality of Environment - Not Assessed				
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	Туре	Gradings	
13 Aug 2012	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good Not Assessed Not Assessed
22 Feb 2012	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate Not Assessed 3 - Adequate 3 - Adequate
11 Nov 2011	Unannounced	Care and support Environment Staffing Management and Leadership	2 - Weak Not Assessed 3 - Adequate 3 - Adequate
16 Jun 2011	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate 4 - Good 3 - Adequate 3 - Adequate

# Inspection report continued

2 Jun 2011	Re-grade	Care and support Environment Staffing Management and Leadership	2 - Weak Not Assessed Not Assessed Not Assessed
30 Nov 2010	Unannounced	Care and support Environment Staffing Management and Leadership	<ul><li>3 - Adequate</li><li>3 - Adequate</li><li>3 - Adequate</li><li>3 - Adequate</li></ul>

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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### Translations and alternative formats

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