

Care service inspection report

Clinton House Nursing Home

Care Home Service Adults

Ayr Road

Shawsburn

Larkhall

ML9 3AD

Telephone: 01698 883043

Inspected by: Barbara Montgomery

Type of inspection: Unannounced

Inspection completed on: 20 February 2013



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Service provided by:

Clinton House Strathclyde (Care Homes) Ltd

Service provider number:

SP2003002417

Care service number:

CS2003010566

Contact details for the inspector who inspected this 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	4	Good

What the service does well

Clinton House had some very good ways of making sure that residents and relatives could participate in the life of the home and comment on the quality of care.

The home had a full and varied activities programme. Activities were seen as a vital and integral part of the service.

Everyone who lived here had a single room and some rooms were large enough to use as a bedsitting room.

The home had a committed and well motivated staff team who conducted themselves in a way that showed that the residents were their priority.

What the service could do better

The home needs to make some further changes to the care plan layout and content and then have everyones care plan in the new format as soon as possible.

The provider must make sure that all of the laundry environment, laundering procedures and laundry equipment complies with current Health and Safety legislation and Infection Control Standards.

What the service has done since the last inspection

There were now firm plans to replace the carpet in the main ground floor corridor.

The manager was in the process of establishing a programme of regular planned one to one supervision meetings with all staff.

The home had started holding regular staff meetings.

Weekend catering arrangements had been improved.

The new manager has been carrying out an in depth review of staffing levels, staff shift times, remits, and deployment and had made some changes for the better.

Conclusion

This was a small home with only 26 residents which gave it a homely atmosphere and meant that staff got to know everyone well. The home was making satisfactory progress with the things that we made requirements and recommendations about in the last report.

To retain and further improve the grades the home needs to give particular attention to its ongoing refurbishment programme, completing the new care plans and ensuring that there are enough staff on duty particularly at busy times.

Who did this inspection

Barbara Montgomery

1 About the service we inspected

Clinton House Nursing Home is owned and managed by a private provider, Clinton House Strathclyde (Care Homes) Ltd. The home is in the small village of Shawsburn, near Larkhall. It is registered to provide a care service to 26 older people including up to 8 younger adults with physical disabilities. The home had a new manager.

The aims and objectives of the service state that: "All care provided in our homes is delivered in a professional manner, adopting a holistic approach to care, whilst affording dignity and respect to each individual Service User in accordance to our company motto, 'Dignitas Qualitas Caritas' - 'Dignified Quality Care'."

The service had written commitments to:

- * offer support to promote maximum independence with minimum restriction
- * acknowledge social, emotional and religious needs
- * facilitate service user participation and choice in the planning of care as much as possible
- * provide care in a relaxed and comfortable environment incorporating choice in the participation of activities.

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.

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

The inspection took place over the course of one day. We had a meeting with the manager and spoke to staff on duty and the activities manager for the company. We spoke to one resident, spent some time in the main lounge. and inspected the premise. We also looked at some records and policies. (Please see Quality Statements for more information about what these were)

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

Staffing Levels: The provider must at all times adhere to condition 2 of the services condition of registration as detailed in the Registration Certificate and as applied under the Public Services Reform (Scotland) Act 2010 Timescale: within 2 days of receiving this report. (note this requirement was made following an upheld complaint)

What the service did to meet the requirement

The rota now included staff who worked between the hours of 8pm and 10pm as specified in the homes staffing agreement. Please see Quality Statement 1.3 for more detail about this.

The requirement is: Met

The requirement

Staffing Levels: When assessing dependency levels and calculating staffing requirements managers and nursing staff need to make sure that they are taking, not only basic care needs, but all other relevant factors into account as well as listening to the views of staff, residents and relatives.

What the service did to meet the requirement

We are satisfied that the new manager was working with the owner and staff team to comply with this. Please see Quality Statement 1.3 for further information.

The requirement is: Met

The requirement

Environment: To complete the current programme of renovation and refurbishment - (i) replace the carpet in the main corridor. (ii) establish a rolling programme of renovation and refurbishment so that once a good standard of accommodation is achieved it can be maintained.

What the service did to meet the requirement

While progress had been made the requirement was not yet fully met. Please see Quality Statement 2.2 for further information.

The requirement is: Not Met

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

We made six recommendations in the last report. We followed up on progress with five of these and found that they were being satisfactorily progressed. All were still within agreed timescales. Please see Quality Statements for more detail.

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.

Last completed in October 2011.

Taking the views of people using the care service into account

We spoke to one resident who was very happy with the home and the care. Residents we met in the homes lounge were observed to be relaxed and settled in their surroundings and in the company of staff.

Taking carers' views into account

We did not speak to any visiting relatives on this occasion.

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

We followed up on progress with a recommendation in the last report. We found that the home's performance remained very good in the areas covered by this statement. We concluded this after we spoke to the manager, looked at residents meeting minutes and food forum minutes and looked at a sample of residents personal plans.

Care Planning and Reviews

In the last report we made one recommendation about participation in care planning and reviews which the home was progressing satisfactorily. We noted that care plan paperwork now had a relatives communication record and that this was in use in files we looked at. The manager told us that staff were working on questionnaire/consent forms for finding out resident / family wishes in relation to attending reviews and signing care plans and also in respect of what sections of care plans residents would like copies of. The home had plans to replace the keyworker files in residents rooms with a "remember I'm me" chart with key information for care staff.

Residents /Food Forum Meetings

Minutes we looked at demonstrated very well that the home had invited residents views about catering at weekends, had listened to their views and made changes for the better. (see Quality Statement 1.3)

Areas for improvement

The home should complete these pieces of work within the timescale agreed in the last action plan. We have made no new recommendations

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

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

Service strengths

We followed up on progress with a requirement and recommendation from the last inspection report and from an upheld complaint. We found that the home's performance remained adequate in the areas covered by this statement. We concluded this after we spoke to the manager and staff on duty, looked at a sample of care plans and staff rotas.

Staffing Levels

In the last report we said that when assessing dependency levels and calculating staffing requirements managers and nursing staff need to make sure that they are taking, not only basic care needs, but all other relevant factors into account as well as listening to the views of staff, residents and relatives. We also said that the home must comply with its current staffing agreement. The new manager has been carrying out an in depth review of staffing levels, staff shift times, remits, and deployment and had made some changes for the better. These included a slightly earlier start time in the morning and one handover meeting for everyone. To comply with the homes staffing agreement new staff had been recruited to cover the period from 8pm to 10pm.

Written Care Plans and Recording

In the last report we made a detailed recommendation about written care plans and recording. Residents files now had indexes and dividers to make it easier to access information. Staff had been making progress with getting everyones care plan in the new format. However the format was still being worked on and a number of further improvements were being made. Plans were in hand to create a record of each resident's review history with the date of all previous reviews and the planned date for the next review.

Mealtimes

Catering at weekends had been improved and residents were no longer offered just soup and sandwiches on Saturday evenings. Catering staff were now employed for longer on Saturdays. And with residents' agreement they now had a 'take away' and a cooked dinner alternate weeks. On 'takeaway' nights the menu had also been extended so that people could choose to order something other than fish and chips.

Areas for improvement

Staffing Levels

The manager has advised that having more staff between 8pm and 10pm was proving to be of limited benefit; and staff have found that additional workers earlier in the evening between 5pm and 7pm would be more beneficial. We have advised the manager that we will work with the home so that it can put in place a rota that adequately meets the needs of residents at all times and particularly critical times in the day. We have again emphasised that dependency tools should only be a guide in this process and asked the manager to provide the Care Inspectorate with a copy of proposed staffing arrangements. We will review progress at the next inspection. We have not made any new requirements or recommendations.

Written Care Plans and Recording

We made a number of observations and suggestions about care plans during the inspection visit. Files were still very bulky and would be easier to use if older information was archived. Some old care plans were still in files and not clearly marked as no longer in use. It is important that current and most regularly used information is to hand at the front of files. Staff need to make sure that the order in which they keep information is straightforward and easy to follow; for example some files we looked at still had food and nutrition related information in different sections. Also having a page that covers 'personal choices' in all areas of life was not helpful and not needed; it is better if this information is next to the activity of daily life to which it applies, as was the case with the food preferences sheet. (see recommendation 1)

Grade awarded for this statement: 3 - Adequate

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. Care Plans and Recording
Make the further changes we have suggested to the layout and content of care plans.

(National Care Standards Care Homes for Older People Standard 6 Support Arrangements)

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

Please see Quality Statement 1.1

Areas for improvement

Please see Quality Statement 1.1

Grade awarded for this statement: 5 - Very 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

We followed up on progress with a requirement and two of the three recommendations made in the last inspection report . We found that this services performance remained good in the areas covered by this statement. We concluded this after we: spoke to the manager and saw round the home.

Renovation and Refurbishment

In the last report we said that the owner needed to complete the refurbishment programme to retain the previous grade. The manager told us that the dispute with the supplier/manufacturer of the carpet in the main corridor had now been resolved and the carpet was going to be replaced.

Housekeeping and Infection Control

The home was in the process of employing some housekeeping staff in the evenings. The new manager had made some improvements to systems in the homes laundry to improve efficiency and infection control.

Areas for improvement

Renovation and Refurbishment

Similar signs of excessive wear and tear could now be seen on the upstairs carpet as well. As regards establishing a rolling programme of renovation and refurbishment the owner and the manager need to agree a budget and a programme with timescales for future decoration and refurbishment. This is to ensure that the standard of accommodation is further improved and work already done is maintained.

Housekeeping and Infection Control

The homes laundry was poorly located just off the busy main public hallway near the front door. This was not ideal when transporting soiled items and the laundry would be better situated in a less public area. The room was also very small and not well ventilated. It did not have separate 'in' 'out' doors which would be the norm in a new laundry space for soiled laundry coming in and clean laundry going out. We have signposted the home to Care Inspectorate and NHS best practice guidance and legislation. We noted that the laundry was the subject of a previous requirement which we have now repeated. (see requirement 1)

Bedrails

Some older type beds with bedrails had been replaced. To ensure that these are phased out altogether a timescales should be agreed with the owner for replacing them all with high low beds and crash mats. (see recommendation1)

Grade awarded for this statement: 4 - Good

Number of requirements: 1

Number of recommendations: 1

Requirements

1. Housekeeping and Infection Control

The provider must make sure that all of the laundry environment, laundering procedures and laundry equipment complies with current Health and Safety legislation and Infection Control Standards.

This is in order to comply with:

SSI 2011/210 Regulation 4(1)(a)(c) - Fitness of premises

A provider must-

(a)make proper provision for the health, welfare and safety of service users;

and

(d)where necessary, have appropriate procedures for the prevention and control of infection.

Timescale for improvement: To be agreed with provider.

Recommendations

1. Bedrails

Agree a timescale for the phased replacing of all bedrails with high low beds and crash mats.

(National Care Standards Care Homes for Older People Standard 4 Your Environment)

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 Quality Statement 1.1

Areas for improvement

Please see Quality Statement 1.1

Grade awarded for this statement: 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

We followed up on progress with a recommendations we made in the last inspection report. We found that the home's performance was good in the areas covered by this statement. We concluded this after we spoke to the manager and looked at staff meeting minutes and supervision policy and procedure.

Staff Support and Supervision

In the last report we made a recommendation about staff meetings and staff supervision. We noted that the manager had held a meeting for trained nursing staff and a full staff meeting and that there were plans to hold regular quarterly meetings. The manager had introduced a supervision policy and procedure. The policy gave good guidance on purpose, topics and supervision records. Once all nursing staff have had supervision training the home will establish a programme of regular one to one meetings for all grades of staff. These meetings had started and the manager told us that the response so far had been positive.

Areas for improvement

It would be a good idea to include a question about supervision in the new employee survey.

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

Please see Quality Statement 1.1

Areas for improvement

Please see Quality Statement 1.1

Grade awarded for this statement: 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

We followed up on a recommendation made in the last report. We found that the home's performance was good in the areas covered by this statement. We concluded this after we spoke to the manager.

Quality Assurance

We made a recommendation in the last report about several ways in which quality assurance could be improved. We noted that the home had plans to introduce satisfaction surveys for relatives, staff and professional stakeholders. The Activities manager also told us of plans to update residents questionnaires to include both qualitative and quantitative questions. We have asked the home to email us a copy the new format.

Areas for improvement

At the next inspection we will review progress with the following: recording monthly statistics relating to critical care needs with a format to record any follow up action

needed and also recording findings from night time spot check visits and any action required. We have made no new recommendations.

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

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	5 - Very Good
Statement 3	3 - Adequate
Quality of Environment - 4 - Good	
Statement 1	5 - Very Good
Statement 2	4 - Good
Quality of Staffing - 4 - Good	
Statement 1	5 - Very Good
Statement 3	4 - Good
Quality of Management and Leadership - 4 - Good	
Statement 1	5 - Very Good
Statement 4	4 - Good

6 Inspection and grading history

Date	Type	Gradings
27 Nov 2012	Unannounced	Care and support 4 - Good Environment 4 - Good Staffing 4 - Good Management and Leadership 4 - Good
30 Mar 2012	Unannounced	Care and support 4 - Good Environment 3 - Adequate Staffing Not Assessed Management and Leadership Not Assessed
12 Dec 2010	Unannounced	Care and support 5 - Very Good Environment Not Assessed Staffing Not Assessed Management and Leadership Not Assessed

Inspection report continued

18 Oct 2010	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed Not Assessed Not Assessed
10 Mar 2010	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good Not Assessed 5 - Very Good Not Assessed
28 Oct 2009	Announced	Care and support Environment Staffing Management and Leadership	4 - Good Not Assessed 4 - Good Not Assessed
30 Mar 2009	Unannounced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good 4 - Good
20 Mar 2009	Announced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good 4 - Good

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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