

Burnbrae Care Home Service

Burnbrae Road
Falkirk
FK1 5SD

Telephone: 01324 501850

Type of inspection: Unannounced
Inspection completed on: 2 September 2016

Service provided by:
Falkirk Council

Service provider number:
SP2004006884

Care service number:
CS2003011554

About the service

Burnbrae care home is registered to provide care for older people. There are 28 places and the service provider is Falkirk Council.

The service is located in a quiet residential area of Falkirk overlooking Dollar Park. The building is on two levels and divided into four units. Each of the four units has its own communal lounge/dining area. All of the bedrooms are single rooms with washbasin. Two of the bedrooms have an en-suite toilet. Communal toilets and bathrooms are well located and there was a good range of facilities including wet floor shower and assisted baths.

A pretty courtyard is located in the centre of the building and has pleasant outdoor seating.

People who reside at Burnbrae choose to be known as residents and therefore we will refer to this preferred term in our report.

The inspection focused on standards of care for people living with dementia. We are using a sample of 150 care home services to look in detail at the standards of care for people living with dementia and this service is one of those selected as part of the sample.

The areas looked at were informed by the Scottish Government's Promoting Excellence: A framework for health and social care staff working with people with dementia and their carers and the associated dementia standards. It is our intention to publish a national report on some of these standards during 2017.

What people told us

We spoke with eight residents during our inspection. Comments we received were overall positive, some of which are outlined below:

"Food is fine - nice variety."

"There is enough things to do, it is up to you if you want to join in or not"

"I can go somewhere quiet if need be"

"Staff look after us well"

"Visitors can have tea with us"

"I would not change anything, I am quite happy"

"No complaints at all"

"Staff are very helpful and thoughtful"

"There is lots to do"

"It's too noisy sometimes"

We received eight returned care standard questionnaires from residents. All agreed or strongly agreed that staff met their healthcare needs and felt supported during difficult times. Some comments received are outlined below:

"The quality of care here is in my opinion very good. The staff are friendly and helpful."

"I have a spacious bedroom and I keep it the way I want it."

"I was supported to attend a funeral by carers."

"My friends and family are always made welcome."

We spoke with six relatives as part of our inspection. We also received five returned care standard questionnaires from relatives and carers. Comments received are outlined below:

- "I have no complaints whatsoever"
- "Staff always try to include my relative even though their abilities are limited"
- "Really good care and attention"
- "Very good at informing us if there is any change"
- "Home is very clean"
- "Staff have become like friends"
- "My mum is well looked after, very happy and staff deserve a medal"
- "I am very impressed with how my relative has improved in the last year, she looks better than she ever has"
- "Staff always make us feel welcome"
- "My relative would like more opportunities for social activities and to meet other residents"
- "Staff go out of their way to help"
- "Excellent facility and staff"
- "We are extremely satisfied with the treatment our relative receives, in all respects"
- "Staff deal with difficult situations in a very patient, friendly and professional manner and should be praised for this."
- "My friend would like staff to spend more time chatting and sometimes feels isolated in own room"
- "Staff are relaxed, sympathetic and most attentive."

During our visit, we used a Short Observation Framework Tool for Inspection (SOFI) which assists us to record how people interact with residents who have dementia or cognitive impairment. Staff were courteous, attentive and respectful towards residents who were supported and encouraged to enjoy a musical quiz. This activity also demonstrated the benefits of music as residents were able to enjoy reminiscing and recognised the music from their era. We observed that residents appeared happy and content during and after this activity.

Self assessment

Every year all care services must complete a 'self assessment' form telling us how they feel 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 provider completed this and the relevant information included for each heading that we grade services under.

The provider identified what they thought the service did well and some areas for improvement.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	5 - Very Good
Quality of staffing	4 - Good
Quality of management and leadership	4 - Good

Quality of care and support

Findings from the inspection

We looked at six care plans during our inspection. We saw that information recorded was informative regarding individual care needs and highlighted the routines and preferences of the residents. Appropriate risk assessments were in place. Relatives were consulted and informed with regard to any changes in a person's care needs. It was pleasing to see that residents were supported to take part in social activities both within the home and in the community and were enabled to do so. We saw there were regular visits from the Community Psychiatric Nurse and regular clinics held within the home. This meant that the changing needs of residents were discussed and any care requirements updated.

We observed during meal times that choices were offered and staff were attentive and responded to resident's needs as they arose. We noted that residents were able to access snacks and drinks throughout the day in the kitchenette area, which could also be used by relatives. This promoted continuing independence and choice.

Medication records we looked at could be improved, including the recording and application of lotions and creams. Some care plans did not record the monthly weight of residents when this was stated as a requirement in their care plan. We did not see oral health care assessments for residents.

We noted one resident's care plan had not recorded the changes to their health, involvement with other professionals and changes in medication. Although we were told this verbally, it was disappointing the care plan did not reflect the changes. The manager took steps to rectify this during our inspection. Reviews of resident's care needs were not always carried out within the six month timescale.

We have made a requirements and recommendations below in line with our findings.

Requirements

Number of requirements: 1

1. All care plans should be reviewed at least once in every six month period or when there is a significant change in a persons health, welfare or safety needs.

This is in accordance with SSI/2011/210 5 Personal plans.

Recommendations

Number of recommendations: 3

1. The management team should take action to ensure that staff signatures are recorded at all times once medication has been administered. The use of "as required" medication should also record the reason this was given and the outcome of this. Application of topical creams should be recorded with more detail as to how and where creams are applied.

This is to meet National Care Standard 15 - Care Homes for Older People - Keeping Well - Medication.

2. The management team should ensure that oral health care assessments are improved and take steps to work with "Caring for Smiles" programme.

This is to meet National Care standard 14 Care Homes for Older People - Lifestyle - Keeping Well - Healthcare

3. The management team should ensure that care plans record the weight of residents each month if this has been identified as action to be taken.

This is to meet National Care standard 14 Care Homes for Older People - Lifestyle - Keeping Well - Healthcare

Grade: 4 - good

Quality of environment

Findings from the inspection

We found the care home environment to be of a high standard of cleanliness. Décor was plain and pleasant and residents could access the enclosed garden independently. Noise was minimal. Residents we spoke with in their rooms were happy to show us how these could be personalised with photographs and some had their own furnishings from home. During our observations in lounges, these were bright, spacious and had plenty room for people to move around safely.

All statutory checks and maintenance with regard to water, fire safety and moving and handling equipment were up to date. A system was in place for general day to day maintenance. The service also kept a log of all accidents and these were followed up with appropriate action as required. We were able to see a cleaning schedule of all tasks undertaken and when these took place. The documentation we looked at assured us that residents lived in a safe, clean and healthy environment.

We did not see signage in the home to orientate residents to bathrooms and toilets. Some of the names of residents were stuck on the door on a piece paper, which could easily come off. Improvements in this area would assist residents to identify their rooms and find their way around more easily as well as prompting people to use and find the toilet areas.

Some accidents recorded by the service had not been reported to the Care Inspectorate as required when a person is injured and has follow up medical treatment.

We have made a requirement and recommendation below in line with our findings.

Requirements

Number of requirements: 1

1. The service must notify the Care Inspectorate of all notifiable events using the e-form system.

This is to comply with The Social Care and Social Work Improvement Scotland (Applications and Registration) Regulations 2011.

Recommendations

Number of recommendations: 1

1. The service should consider providing signage within the home to assist with orientation, in particular, to bathrooms and toilets.

This is to meet National Care Standard 4 - Care Homes for Older People - Your Environment

Grade: 5 - very good

Quality of staffing

Findings from the inspection

We met with six members of staff who had a variety of roles within the home. Staff spoke highly of their working environment. Staff also felt supportive of each other and all were in agreement they worked well as a team. We received sixteen returned care service questionnaires from staff, all of whom agreed or strongly agreed they had the skills to support people using the service. Staff also indicated they had opportunities to meet up with other staff to discuss their day to day work. We saw from records that staff attended regular meetings to share information and discuss training opportunities.

We noted during our observations of staff interacting with residents that they were patient, attentive and respectful. We felt that the staff knew the residents well due to the relationships they had formed and were able to attend to their needs effectively.

We were able to see from staff records of newly appointed staff that procedures had been followed with regard to various background checks prior to commencing. We also saw that staff had to undertake an induction period that took into account mandatory training. This meant that residents were cared for by appropriately trained and knowledgeable staff.

We felt that training opportunities could be improved, in particular with regard to caring for residents living with dementia. Staff that we spoke with agreed with this. We noted that not all staff were up to date with required refresher training, for example, moving and handling. The management team should ensure that all staff have attended mandatory training within the required timescales. We have made a requirement in this regard below.

Requirements

Number of requirements: 1

1. (a) The provider and management team must ensure that all staff have attended the required mandatory training with regard to the health and welfare of service users within the required timescales.

(b) The provider and management team should ensure that all staff have completed training relevant to the care and support needs of people who use the service and are able to demonstrate their understanding of this learning. This is with reference to dementia training equivalent to the "Promoting Excellence" framework.

This is in order to comply with Regulations 4(1)(a) and 15(b)(i) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

Timescale: To be completed within six months of receipt of this report.

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

We were able to see that the management team had audits in place for various aspects of the service, for example the environment, medication, training, and care plans. In discussion with the management team, we were advised that leadership roles had been implemented and this meant staff members had additional responsibility and shared their training and knowledge. These roles included champions for nutrition, continence and skin care.

The service had a complaints policy and procedure in place, we could see that most concerns were acted upon or resolved as they arose.

In discussion with staff members and management team we were satisfied that staff were supported to meet the conditions of SSSC (Scottish Social Services Council) registration and to obtain necessary qualifications. Staff told us they felt well supported and could approach the management team at any time. We were satisfied that residents received care from appropriately qualified staff who were well supported in their role.

We saw from records that residents attended regular meetings and their views were considered in terms of suggested improvements. It was pleasing to see that residents were also involved with the interview process of prospective new staff. Surveys were also circulated for people to complete regarding the service.

We felt that not all staff were offered the same opportunities for regular supervision and this should improve. It would also be of benefit if staff were able to reflect on their learning and how this has informed their practice during supervision sessions.

We noted that the audits in place required to be developed and undertaken regularly so that identified issues could be rectified, in particular with care plans, medications and training as these were areas we identified for improvement.

The service should continue to develop how feedback is obtained from residents and consideration given to the collation of relatives and stakeholder views. An action plan upon these findings would be beneficial.

We have made a requirement and recommendation below in line with our findings.

Requirements

Number of requirements: 1

1. Supervision.

By three months of receipt of this report, you must demonstrate to the care inspectorate that:

- (a) There is a supervision programme in place for members of staff.
- (b) Members of staff are given the opportunity to meet with their manager in line with current policy, currently every two months (supervision meetings).
- (c) Supervision meetings take account of the staff member's training and development needs within the role that they are employed to do.
- (d) A record is maintained of each and every supervision meeting and that the record is signed by the employee and manager as an accurate record of the supervision meeting.

This is in order to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

Recommendations

Number of recommendations: 1

1. The service should continue to develop and undertake audits on a regular basis to identify areas of improvement.

This is to meet National Care Standard 5 - Care Homes for Older People - Management and Staffing Arrangements

Grade: 4 - good

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

Recommendation 1

The service provider should upgrade the dirty utility facilities to ensure provision of a dedicated hand wash sink and safer cleaning methods for commode pots and urinals.

National Care Standards for Care Homes for Older People, Standard 4.2 - Your Environment.

This recommendation was made on 11 March 2016.

Action taken on previous recommendation

The management team have requested that this work is carried out and is currently being assessed by the Local Authority. We will follow this up at our next inspection.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings	
10 Feb 2016	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
4 Mar 2015	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
4 Mar 2015	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
17 Feb 2014	Unannounced	Care and support	Not assessed
		Environment	4 - Good
		Staffing	Not assessed
		Management and leadership	4 - Good
17 Oct 2013	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	Not assessed
11 Feb 2013	Unannounced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
21 Oct 2010	Unannounced	Care and support	4 - Good
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	3 - Adequate
4 Aug 2010	Announced	Care and support	4 - Good
		Environment	3 - Adequate
		Staffing	4 - Good

Date	Type	Gradings	
		Management and leadership	3 - Adequate
8 Feb 2010	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 4 - Good Not assessed
2 Jul 2009	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate 3 - Adequate 3 - Adequate 3 - Adequate
18 Mar 2009	Unannounced	Care and support Environment Staffing Management and leadership	1 - Unsatisfactory 1 - Unsatisfactory 1 - Unsatisfactory 1 - Unsatisfactory
11 Dec 2008		Care and support Environment Staffing Management and leadership	2 - Weak 2 - Weak 2 - Weak 2 - Weak

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