

Isleshavn (Care Home) Care Home Service

Isleshavn Care Centre Mid Yell Shetland ZE2 9BT

Telephone: 01595 745720

Type of inspection: Unannounced

Inspection completed on: 4 August 2017

Service provided by:

Shetland Islands Council

Care service number:

CS2005097984

Service provider number:

SP2003002063



Inspection report

About the service

Isleshavn Care Centre is a residential and day service, which overlooks the Mid Yell pier and beach. The home was clean, tidy and 'homely' in appearance. Rooms and the lounge and dining room areas were decorated to reflect residents' interests. The home has ten bedrooms some with en-suite facilities. The service has an inner court-yard garden which people can access as well as a newly developed enclosed outside garden area.

The service is registered to provide a respite and care service to a maximum of ten adults and older people. A care at home service operates from the centre. The service has been registered with the Care Inspectorate since April 2011.

This report was written following an unannounced inspection from 9.15am to 5.00pm on Wednesday 2 August 2017 and Friday 4 August 2017. Feedback was given to the manager, assistant manager and staff during the inspection.

During the inspection evidence was gathered from a number of sources including discussions with:

- the manager
- the assistant manager
- social care workers
- five residents
- two relatives
- maintenance, housekeeping and catering staff.

We also looked at a range of policies, procedures, and records including the following:

- personal support plans
- accident and incident recording
- staff communication books
- minutes of care staff meetings
- social activities and events' planner
- health and safety records
- maintenance records
- cleaning schedules
- minutes of care staff meetings
- staff supervision and training records
- notifications
- complaint information
- photographic evidence
- previous inspection report
- staff rota
- in-house management quality assurance systems and audits
- Care Inspectorate questionnaires returned by residents and relatives.

During the inspection we also observed staff practice which included how staff cared for and spoke with people in the service and relatives. A general tour of the home was also carried out as part of the inspection visit.

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.

What people told us

We spoke with four people on the day, two relatives and a visiting professional, as well as staff who worked in the service. We also sent Care Standards Questionnaires (CSQs) for random distribution to people and their families. Most people strongly agreed or agreed that they were happy with the quality of care being delivered.

We received positive responses from people about the quality of service they received at the Isleshavn service.

Comments we received included:

- 'It's very comfy here'.
- 'I liked making the strawberry jam' .
- 'I've enjoyed my day'.
- 'They keep this place very clean'.
- 'The staff are nice and helpful'.
- 'I've no complaints'.
- 'There's a shortage of staff and no interaction with the elderly'.
- 'Staff do well, but grossly understaffed for the amount of clients, especially at night'.
- 'I'd like to see more staff employed at all times especially during the long hours of the night'.

People told us that the meals were nice, that a choice was always available, the home was a friendly place and staff were kind.

Where praise or concerns were raised, we fully discussed issues with the manager. We evidenced that the management were meeting the conditions of registration with regards to the staffing ratio and were regularly undertaking dependency audits. Both the management and provider were aware of the recruitment difficulties and were working to address these concerns.

Self assessment

The service had not been asked to complete a self-assessment in advance of the inspection. We discussed their priorities and looked at quality assurance paperwork. These demonstrated their priorities for development and how they were monitoring the quality of the provision within the service.

From this inspection we graded this service as:

Quality of care and support4 - GoodQuality of environmentnot assessedQuality of staffingnot assessedQuality of management and leadership4 - Good

What the service does well

We found the performance of the service for quality themes care and support; leadership and management to be good.

Staff were friendly and welcoming and we observed interactions, which were warm and sensitive to people's needs. People were relaxed and comfortable in their surroundings and there was a supportive and nice friendly approach and banter between staff and people in the home.

People were cared for by a staff team that demonstrated through discussion and observation of practice, an understanding of people's assessed needs. Staff were knowledgeable of how to meet such needs and were aware of people's likes, dislikes and individual preferences. We saw that people were assisted and enabled to maintain their identity and were treated with dignity and respect.

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. We observed people who were in the lounge area during an afternoon.

We saw good care being provided by the entire staff team. We saw staff listening to people's' requests and responding within an appropriate time. The interactions between staff and residents and relatives were observed to be open and friendly. The home had a relaxed atmosphere and staff were seen spending time with people but they said they would ideally like more time to support people. We saw some people joining in with jam making when we visited. The staff were seen to be trying their best to create opportunities to support people's interests.

We saw that there had been some improvement in the recording of detail in the support plans. Staff told us that they had 'ring-fenced' time to do keywork. However, we noted that there had been recruitment difficulties with staffing which was having some knock-on effects (please refer to recommendation 1).

Medications were being managed in line with good practice guidance. Which supported good recording, administration and auditing of the systems.

A risk-based approach was taken to manage the varied needs of residents during their stay. Risk assessments were in place and regularly reviewed. We noted that accidents and incidents were managed well and recorded.

Through discussion with staff we saw that people were protected from harm through staff guidance, training and awareness of the provider's adult support and protection procedures.

We saw staff received a range of training including: induction, medication administration, continence care, and support planning and dementia awareness. We noted that some staff were completing their studies in Dementia through a Stirling University course. Through discussion and observation of practice we evidenced that staff were using this knowledge to achieve better outcomes for people. The assistant manager said this would be ongoing.

What the service could do better

While we evidenced some improvements across the service, there is a need to continue with this approach, and ensure the successes and improvements continue, are sustained and embedded.

We spoke with the management team about the commissioning of the new fire detection system. Deadline dates were established to have the system up and running. In the meantime the service had an interim system in place.

We noted that a locked chemical cupboard in the laundry area could not be locked; this was reported to the management who stated that it would be reported to the maintenance person. We noticed that one of the corridor areas were quite dark, we were informed that the area was being repainted a lighter colour and better lighting was being considered.

Although staffing levels were maintained in accordance with the service's conditions of registration, staff and management were concerned about the service due to ongoing issues with the problems of recruitment, due to local availability. The provider was trying to address the concerns and was looking at ways to sustain the service. The entire staff team were seen as committed to the service and the people they were supporting (please refer to recommendation 1).

Although we saw that the auditing systems had been improved and better monitored there is a continued need to make sure that these systems continue to be appropriately audited and monitored by the management and staff.

We discussed with staff and management various best practice initiatives including accessing websites such as the Care Inspectorate 'The Hub', Social Services Knowledge Scotland, 'Step into Leadership' pathway, 'The badges scheme' and other Scotlish Social Services Council literature. We asked the management to share these good practice guides with the team.

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Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The management should review the recruitment/staffing issues to make sure stakeholders are appropriately supported.

National Care Standards Care Homes for Older People. Standard 5: management and staffing arrangements; standard 6: support arrangement; standard 9: feeling safe and secure.

Complaints

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

Inspection and grading history

Date	Туре	Gradings	
1 Aug 2016	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
11 Feb 2016	Unannounced	Care and support Environment Staffing Management and leadership	Not assessed Not assessed Not assessed Not assessed
10 Aug 2015	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 4 - Good 4 - Good
11 Dec 2014	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
30 Jan 2014	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 4 - Good 3 - Adequate
30 Jul 2013	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 4 - Good 3 - Adequate
29 Jan 2013	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate 4 - Good 4 - Good 3 - Adequate

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Date	Туре	Gradings	
19 Sep 2012	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
19 Jan 2011	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed Not assessed
16 Jun 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good
1 Feb 2010	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed
14 Sep 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good 4 - Good
13 Feb 2009	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good 4 - Good 4 - Good 4 - Good
18 Jul 2008	Announced	Care and support Environment Staffing Management and leadership	5 - Very good 4 - Good 4 - Good 4 - Good

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