

# Inspection report

## Greenbank Nursing Home Care Home Service

Ayr Road  
Irvine KA12 8DF

**Inspected by:** Charmaine Dickson  
**(Care Commission Officer)**

**Type of inspection:** Unannounced

**Inspection completed on:** 30 January 2006

**Service Number**

CS2003034596

**Service name**

Greenbank Nursing Home

**Service address**Ayr Road  
Irvine KA12 8DF**Provider Number**

SP2003002353

**Provider Name**

Carrick Care Homes Ltd

**Inspected By**Charmaine Dickson  
Care Commission Officer**Inspection Type**

Unannounced

**Inspection Completed**

30 January 2006

**Period since last inspection**

16 Months

**Local Office Address**Suite 3  
Sovereign House  
Academy Road  
Irvine  
KA12 8RL

## **Introduction**

Greenbank Care Home in Irvine provides care for up to 40 older people, some of whom may have dementia. The home is located close to the town centre, close to all amenities and the main bus route. It shares the site with its sister service Fullarton Care Home.

The Manager for both services is supported by a team of nursing, care and ancillary staff specific to each service, with the exception of the Activity Co-ordinator who work across both services.

The residential facilities are located on two floors and accessed by a passenger lift.

The accommodation consists of single bedrooms with en-suite facilities, most have views of the landscaped garden areas and drive ways. There is a safe enclosed sensory garden which is well used in warm weather.

The communal areas located on each floor consist of lounge cum dining area, two separate lounges, one of which is designated as a smoking area for residents and their visitors.

Bathroom and toilet facilities are located close to these areas.

The organisation states that its vision is:

" Taking care of the lives in our hands "

The service was registered on 1 April 2002.

## **Basis of Report**

Before this unannounced visit the Care Commission Officers reviewed the Pre Inspection Return and Self Evaluation documents, received for this inspection year. The Action Plan from the inspection conducted on 4 September 2005 and Notifications to the Care Commission from this service were also reviewed. This information gave the focus for this inspection which was an unannounced inspection for the home for the year 2005 - 2006. The inspection was conducted by two Care Commission Officers, Lorna Clark and Charmaine Dickson on 30 January 2006. They spoke with six residents, six relatives, the Manager, Deputy, two staff, the Administrator and the Chef. They made general observations from a tour of the home. The Care Commission Officers examined the following records:

Staffing rotas

Care plans

Individual risk assessments

Accident, incident and complaint records.

Staff training records

Key worker responsibilities

Medication and fire safety records

The Care Commission Officers took all of the above into account and reported on whether the service was meeting the following National Care Standards for Care Homes for Older People:

5 Management and Staffing Arrangements

6 Support Arrangements

This inspection report should be read in conjunction with the report from the last inspection conducted on 29 June 2005

**Action taken on requirements in last Inspection Report**

There was one requirement which had been addressed.

**Comments on Self-Evaluation**

Please see the last inspection report

**View of Service Users**

The six residents interviewed made complimentary statements about the care they received. One lady was concerned " that they could do with more staff at times " but she was not complaining, " the girls work so hard and are very helpful " One person was hoping that the Activity Co-ordinator had managed to arrange his swimming session.

**View of Carers**

Relatives spoken with were very happy with the care being provided. One person stated " I would be happy to come here myself when I needed to "

## **Regulations / Principles**

### **National Care Standards**

#### **National Care Standard Number 5: Care Homes for Older People - Management and Staffing Arrangements**

##### **Strengths**

During this visit residents spoken with were complimentary about the care and support they received.

Staff were observed to be supportive and sensitive to the needs of the residents.

The management team and staff members met regularly and best practice, policies and procedures were discussed.

Staff received regular training opportunities and there is a planned programme of statutory training in place.

It was reported that the numbers of staff with relevant SVQ qualifications which will be required by them for register with the Scottish Social Services Council (SSSC) was over 50%. A number of staff will be commencing their training in March of this year.

The recruiting, selecting and vetting procedures for staff, volunteers and students on placement comply with the regulations.

There were good financial and administration systems observed which were maintained comprehensively.

A record was maintained of accidents and incidents and comprehensive and consistent recording of these in the resident's care plans, daily notes and accident records was noted.

All safeguards and interventions that were identified when a re-assessment of need had been conducted, was noted clearly within the resident's care plan. A monthly audit of accidents was conducted.

The service has all appropriate policies and procedures in place and staff were knowledgeable about those pertinent to their working practices.

Medication administration records were examined and found to be in order. Fire safety records were regularly maintained.

At the time of the last inspection the organisation was required to conduct an assessment of residents' needs and ensure that there were sufficient staff available to meet this assessed need. It was reported that there had been more staffing hours allocated which enhanced the staffing levels particularly at night. Relatives spoken with were satisfied with the staffing levels. Staff records confirmed that there had been more hours allocated since mid December 05.

##### **Areas for Development**

The dependency levels of the residents and specifically their mobility needs were high. The service should continue to monitor the needs of residents and ensure that at all times staffing is in place to meet these needs.

#### **National Care Standard Number 6: Care Homes for Older People - Support Arrangements**

##### **Strengths**

The Care Commission Officers examined a sample of care plans. The standard of record

keeping was good. Each person's care plan consisted of detailed information about their individual preferences, likes and dislikes.

Health needs were noted and regular health checks were pursued for residents.

Residents health, nutrition, mobility and dietary requirements were monitored regularly.

Support and guidance was sought from health professionals when needed.

Residents were supported to take prescribed medicines and records were maintained.

Reviews of each resident's care plan were conducted regularly, with family and representatives of the resident's choice being invited to participate.

Support arrangements were in place to reflect the person's assessed needs, discussions and consultation about the choices made by each resident were noted.

The use of restraint with cot sides was recorded and discussed with the resident and relatives. Risk assessments for activities were noted.

The service continues to encourage the residents and their family members to meet regularly to discuss the care they receive as well as the types of activities, celebrations, outings and leisure pursuits they wish to have organised. This is not only reflected in each resident's review notes but within the minutes of the Residents' and Relatives meetings which were held regularly.

### **Areas for Development**

A key worker system is in operation. The service should consider how to promote the role of keyworker within the care team. Although the service continues to support and encourage all care staff to attain qualifications, for many of the staff pursuing their SVQ III accreditation there is little opportunity for them to contribute to the recording and report writing aspects of the care planning process. This is an essential part of the tasks staff need to be able to undertake competently and with confidence, to develop their skills and experience. The service should consider how to promote the role of keyworker within the care team whilst identifying ways of incorporating into their responsibilities, the recording and report writing which contributes to the care planning process. ( see Recommendation 1 )

**Enforcement**

None

**Other Information**

None

**Requirements****Recommendations**

1 . The service should consider how to promote the role of keyworker within the care team whilst identifying ways of incorporating into their responsibilities, the recording and report writing which contributes to the care planning process.

National Care Standards, Care Homes for Older People, Standard 6: Support Arrangements.

**Charmaine Dickson**

**Care Commission Officer**