

Glenhelenbank Residential Home Care Home Service

Glenhelenbank Residential Home Main Road Luncarty PERTH PH1 3EP

Telephone: 017388285916

Type of inspection:

Unannounced

Completed on:

7 July 2023

Service provided by:

Seaward Care Ltd

Service provider number:

SP2021000142

Service no:

CS2021000238



Inspection report

About the service

Glenhelenbank Residential Home is a small privately owned care home located in the village of Luncarty, north of Perth.

It provides care and support for up to 13 older people. There are communal showers and bathrooms close to people's bedrooms.

The service states that it aims to provide a service where: "Individuals are respected, honesty and trust are generated, loyalty is honoured, individuality and dignity are assured, and privacy is respected with the mental and physical wellbeing of residents being of the utmost importance".

About the inspection

This was an unannounced inspection which took place on 4 and 5 July 2023. The inspection was carried out by two inspectors from the Care Inspectorate and an inspection volunteer. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with eight people using the service and two of their family/friends
- spoke with six staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- Staff were very good at developing meaningful relationships with people.
- People were supported to get the most out of life, as they had access to a wide range of meaningful activities that offered opportunities to be creative, be physically active and to have fun.
- People were supported to stay in touch with their family and friends and to be involved with the wider community.
- Leaders supported a motivated and consistent staff team.
- Work needs to continue meeting the identified environmental improvements that were agreed at registration.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good
How good is our setting?	3 - Adequate
How well is our care and support planned?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

We evaluated how well people's health and wellbeing was supported. We made an overall evaluation of good, as there were a number of important strengths which, taken together, outweigh the areas for improvement.

People should expect good quality care that is right for them. It is important that people experience warm, positive relationships with staff who care for them. We observed many kind, warm, compassionate interactions between staff, people experiencing care and their visitors. We also received many positive comments from people which included; "absolutely, everyone treats me very well" and "the staff are extremely kind and pleasant to me".

There was a range of group activities and some individual time spent with people living within the service. Seasonal events were celebrated, which helped people remain orientated to the pattern of the year and stay connected to the wider world. Feedback from those spoken with confirmed people were happy with the activities on offer and that there was always plenty for them to do which they enjoyed. People commented that they never had time to get bored as there was always something to keep them busy. People were involved in planning activities, and this was a regular item discussed at meetings to ensure activities are meaningful to people.

People's health and well-being benefitted from staff who knew them well and worked well together. Comprehensive, regular health assessments were in place, which provided effective oversight of people's health care needs. Good communication within the staff team meant people were kept up to date about people's changing needs. The service had good links with medical and allied health professionals and was responsive to people's changing needs.

Medication was administered as per instruction and there was a system in place to audit and review the safe administration of medication. This helped to ensure that people were supported to take the right medication at the right time.

People should expect to be given support with eating and drinking in a dignified way and have their personal preferences respected. Mealtimes appeared to be a calm, pleasant part of the day. People were encouraged and enabled to eat their meals independently, with just the right level of support from staff, where needed. Feedback from people spoken with indicated they were very happy with the quality of meals they were receiving. Comments included; "the food is lovely, all home cooked and really tasty".

Overall, we found the home was clean and tidy. Housekeeping and domestic staff had good awareness of the requirement for enhanced cleaning and laundry management. We viewed people's rooms and found them to be fresh and clean. The service has a comprehensive prevention and protection plan in place and everyone we spoke with said that the care home was kept clean and tidy.

How good is our leadership?

4 - Good

We made an overall evaluation of good, as there were a number of important strengths which, taken together, outweigh the areas for improvement.

Relatives and people living in the home were generally very complimentary about both the manager and staff group. Comments included: "everyone has been exceptionally kind to me and my parent" and "communication is really good".

The manager had several effective systems and audits in place including accidents and incidents, complaints and people's health care needs including nutrition, medication and care planning.

People living in the home benefited from a happy, well organised staff group. People told us they were supported and encouraged to give their views and raise any concerns. These were welcomed and responded to positively. This showed the service valued people's comments and suggestions.

The service had an improvement plan in place which was being regularly updated and evidenced the improvements that have taken place in the home. There was also evidence of people living in the home and their families being involved in the decision making of service delivery.

The management team demonstrated a clear understanding about what was working well and what improvements were needed, to ensure that the needs, outcomes and wishes of people living in the service were the main drivers for change.

Safe systems were in place to safeguard people's finances.

How good is our staff team?

4 - Good

People should be able to have confidence in the staff who support and care for them. We made an overall evaluation of good for this key question. There were several important strengths which, taken together, outweigh the areas for improvement.

Staff showed care and patience when supporting people living in the home. They assisted people with positive encouragement and at the person's own pace.

The process of recruitment and induction was well organised and documented. The provider had centralised systems which meant a consistent process could support safer recruitment systems. To keep people safe, staff did not start work until all pre-employment checks had been concluded. Staff were either registered or were aware of the need to register (new staff) with the SSSC (Scottish Social Services Council), however, there was no regular management overview of this. **An area for improvement is made.**

The provider had relevant induction training in place to support new staff in gaining a good level of awareness around the care and support needs of the people in their care and the policies and procedures in place to guide and support them. As a result, the process reflected the needs of people experiencing care.

The recruitment process clearly involved staff demonstrating the principles behind the Health and Social Care Standards. There was written information and shadowing opportunities to support staff become confident in their role and provide the right care and support to meet people's assessed needs.

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Regular supervision and appraisal sessions were used to further support staff's personal and professional development. There were clear records of learning being undertaken and planned, which documented each individual staff member's progress.

The training plan and learning opportunities were suitable to meet the needs of people living in the home and individual staff roles. This meant people living in the service could be confident that staff had the right training and knowledge to provide the care and support they needed.

Areas for improvement

1. In order to ensure the service has an overview of staff's registration status with the SSSC, an audit of new registrants' applications and overview of the wider staff team's registration should be developed.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.' (HSCS 3.14) and 'I use a service and organisation that are well led and managed.' (HSCS 4.23)

How good is our setting?

3 - Adequate

We assessed this key question as adequate. While these strengths had a positive impact, key areas needed to improve. The focus was on the quality of the facilities.

People benefitted from a warm, comfortable, welcoming environment with plenty of fresh air, natural light and sufficient space to meet their needs and wishes. The environment was relaxed, clean, tidy and well looked after, with no evidence of intrusive noise or smells.

People had the correct mobility aids to enable them to mobilise as independently as possible and there was enough signage to help people find their way around without help.

Corridors and circulation areas were clear of hazards and a record of accidents and incidents was maintained. These measures helped to ensure people were safe and comfortable living in the care home. Examination of records, observation and discussion with staff and people who use the service verified that routine maintenance and repairs were carried out promptly.

We found that the service upheld good standards of infection prevention and control. Spot checks indicated that bedrooms and communal areas were both very clean and high traffic areas such as door handles and rails were cleaned regularly. This meant that any chain of infection could be broken at the earliest opportunity and people were kept safe.

The provider has carried out extensive improvements to the environment over the last year and it is hoped once all the necessary refurbishments have been fully completed, the quality of the facilities within the home will be significantly improved for all living and working in the home.

How well is our care and support planned?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Personal care and support for people was directed by comprehensive digital care plans. These were actively used by staff to support people. They contained relevant information to each person and were updated regularly, to reflect people's changing needs. They covered aspects of people's physical and social care needs and, where possible, outlined what people were able to do for themselves in order to promote people's independence. The plans were informed by a range of recognised assessment tools such as falls risk assessments, weight recordings, malnutrition risk assessments and pressure care assessments and actions were taken in response to assessment outcomes. Formal reviews were held six monthly, which gave people and their family an opportunity to review and discuss any changes to their care needs.

Anticipatory and end of life care planning was underway to ensure people could be fully involved in decisions about current and future support needs. The quality of information in end-of-life care plans was variable with some more fully completed than others. Good information in end-of-life care plans would allow staff to respect people's wishes and promote a dignified death and the service should consider how they ensure adequate information is recorded for each person to ensure this.

Legal documentation was in place as expected. This meant that the service could evidence who holds legal authority for decision making for individuals, which is essential to ensure the right people are consulted for financial and welfare decisions.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The provider should improve and develop the infection control audit tool, which it has recently introduced.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state that: 'My care and support meets my needs and is right for me.' (HSCS 1.19) and 'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11).

This area for improvement was made on 17 November 2021.

Action taken since then

The service have a robust infection prevention and control audit tool in place which covers all aspects of the care home and staff practice. This was seen to be implemented routinely and action plans developed to address any shortfalls identified.

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This area for improvement has been met.

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our leadership?	4 - Good
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2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.1 Staff have been recruited well	4 - Good
How good is our setting?	3 - Adequate
4.1 People experience high quality facilities	3 - Adequate
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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