

Kinning Park Care Home Care Home Service

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Kinning Park
Glasgow
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Type of inspection:
Unannounced

Completed on:
6 July 2023

Service provided by:
Kinning Park Care Home (Scotland)
Limited

Service provider number:
SP2012011864

Service no:
CS2012309487

About the service

Kinning Park Care Home is registered to provide residential and nursing care to a maximum of 30 frail older people. This includes, two places for respite/short break places for older people, and five places for adults aged 50 years and over.

The provider is Kinning Park Care Home (Scotland) Limited.

The service is in a two storey conversion located in the Kinning Park area of Glasgow, close to local amenities, public transport and motorway links. All bedrooms are ensuite. The communal rooms are on the ground floor and a lift provided access to the bedrooms and an activity lounge on the first floor.

There were 28 people living in the care home at the time of inspection.

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.

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 10 people using the service and six family members
- spoke with 12 staff and management
- received feedback from two visiting professionals
- observed staff practice
- reviewed documentation.

Key messages

- Staff were respectful and responsive to people's changing needs.
- People supported benefited from positive relationships with staff who knew them well.
- People supported and their relatives were happy with the care and support received and of the staff who provide the support.
- The range of activities provided helped benefit people's wellbeing.
- People's care and support plans had been completed to a good standard.
- Management team were knowledgeable about what aspects of the service needed to be improved.
- Improvements to the environment were made and further refurbishment was planned.

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?	4 - Good
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 made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a positive impact on people's experience of living in the care home.

People were supported by care staff who were familiar with their choices and preferences. Staff were kind, caring and attentive towards people and there were enough staff available to support people.

People being supported and relatives had confidence in the staff team, and this meant that they felt safe, secure, and well-cared for. Some of the comments from people supported included:

"It's good here and I like the care staff."

"Good choice of meals."

"The staff are wonderful and tremendous, and I go to any activities that are going."

"The food served is nice and I enjoy going to the hairdressers."

Families we spoke to told us that staff kept them well informed and involved in their relative's care. Several relatives told us they were 'always contacted if anything changed in their relative's health or wellbeing.' Comments from relatives received included:

"Staff are fantastic and have become part of our family."

"Mum settled so well, and this offered lots of reassurance to us."

"We are always contacted if anything changes for X."

"Can't fault them in anyway."

Regular access to meaningful activities is important for keeping well and having a sense of wellbeing. Staff helped people celebrate important events including birthdays and anniversaries. A varied activities programme had been developed and shaped by people's interests and included, a breakfast club, music playlists for each person, chair-based activities, bingo, home baking, outings, art club, and quizzes. This meant people had been given opportunities to engage in activities within the home and connect with their local community.

Mealtimes were overall well managed with people being offered choice. Staff provided support in an unhurried way at mealtimes and throughout the day. Management should continue to review mealtimes to enhance people's experiences and promote choice.

A range of assessments meant staff detected changes in each person's health. Staff made appropriate referrals for support from external professionals when a specific need had been identified. Feedback from visiting professionals indicated that staff strived to provide good standards of care.

People could be confident that medication was appropriately managed, meaning they received the right medication at the right time. When medication had been prescribed on an "as required" basis, staff followed protocols which promoted the rights of people.

Staff had access to sufficient personal protective equipment (PPE) and this was being used appropriately. This helped protect individuals from the risk of infection.

How good is our leadership?

4 - Good

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

Feedback received from people supported, relatives, and professionals was positive about the communication and responsiveness of the staff and management team.

Daily handover meetings were being used to good effect in identifying people's changing needs, and supports required to reduce risks.

The service continued to use a multi-disciplinary team approach with external agencies with the placement of people within the service. This provided a holistic assessment of the needs of people and identified how they could be best met.

Systems and processes were in place to gather feedback from people supported, relatives, staff, and professionals. This included regular meetings for people and relatives to give their views. This allowed stakeholders to respond and help shape the development of the service.

People who use care services should benefit from a culture of continuous improvement with robust and transparent quality assurance processes. The management team had a good overview in place, including medication, the environment, and infection prevention and control, all of which promoted the health and safety of people. Audit records were of a good standard. We suggested to enhance the audits completed. The manager should record better to evidence the actions taken to rectify any irregularities and timescales for improvements the audits identify.

The service had not always submitted information that should have been potentially notified to other agencies and the Care Inspectorate. To ensure that the service meets its regulatory requirements, we made an area for improvement. (See area for improvement 1)

Regular team meetings were taking place, which all helped to demonstrate that staff were supported well by the leadership team in their roles, and could support people safely.

The management team ensured that there were appropriate staff numbers and skill mix to meet the needs of people using the service.

The manager was committed to improving the quality of life for people. It was good to see that a service development and improvement plan was in place which recognised the majority of issues arising from the inspection with clear plans to address these. We were reassured by the manager's responsiveness to feedback during the inspection that they were committed to making improvements to the service.

Areas for improvement

1. The service should ensure that any incidents, accidents, and causes for concern are notified to the Care Inspectorate as per our notification guidelines: 'Records that all registered services (except childminding) must keep and guidance on notification reporting' (Care Inspectorate 2020).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19); and

'I use a service and organisation that are well led and managed' (HSCS 4.23).

How good is our staff team?

4 - Good

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

Staff had good values and were people focused, respectful of the people supported in trying to meet their needs. Staff, not directly involved in people's care, felt that their role was important and that there was a strong sense of shared responsibility. This helped to drive improvements and the strong sense of teamwork.

A blended approach was used with staff training and development. The manager worked well with external organisations to ensure staff could keep their skills and knowledge up-to-date. The training undertaken meant staff had been helped to obtain necessary knowledge and skills to support people. This supported the quality of people's care and helped to increase staff confidence and work satisfaction.

The provider was also supporting staff to obtain a qualification in care to maintain their professional registration with Scottish Social Services Council (SSSC).

Staff practice had been observed and competency assessed to ensure the correct application of learning. This helped keep people safe and well. Examples of direct observations also included staff members showing compassion for the people they were caring for with feedback provided.

Staff supervision was planned for on regular basis. On sampling these, we could see that these were reflective discussions and allowed staff time to reflect on their own development and practices.

It is important to make sure that people are safe in a care home and that recruitment processes help to select appropriate candidates. Recruitment files sampled showed that there were systems in place to make appropriate checks to staff being employed. However, improvements were needed to staff recruitment to consistently assure that prospective employees are assessed as appropriate for the post. (See area for improvement 1)

Staff consistently told us the management team were approachable and available to support them where needed. Staff were encouraged to share views to feel listened to with the management team. This supported a positive working relationship between management and staff teams.

Areas for improvement

1. The provider must ensure that the recruitment of all staff to the service is conducted in a safe manner, and is reflective of guidance available from the Care Inspectorate 'Safer recruitment through better recruitment.' <https://hub.careinspectorate.com/resources/national-safer-recruitment-guidance/>

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS) which state that:

'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24).

How good is our setting?

4 - Good

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

Cleanliness was of a good standard, and effective systems were in place to assess and check the cleanliness of the home in terms of infection prevention and control.

People's rooms were personalised to their own taste, with some people bringing specific items of furniture to make their room feel more individual.

People should expect that their environment is well looked after with clean, tidy, and well-maintained premises, furnishings, and equipment. Although, communal lounges and dining area were nicely decorated, clean and odour free, some areas of the home would benefit from redecoration and investment. A refurbishment plan was underway to improve the environment for people living in the care home (see area for improvement 1).

People benefitted from having access to a secure garden area which people used to enjoy the good weather when we visited.

The home offered a range of equipment which helped keep people comfortable and well. This included electronic beds, specialist mattresses for people who may be at risk of skin breakdown, specialist seating and bathing equipment.

The management team and maintenance worker ensured the environment was being well maintained and in a good state of repair. Audits were used to check that the environment was safe and any areas which needed to be addressed had been included in action plans.

A range of contracts were in place with external companies which meant equipment had been serviced and maintained aligned to manufacturer and legal guidance.

Areas for improvement

1. The service should continue to develop the environment improvement programme to maintain the care home to ensure that the premises, equipment, and furnishings are well maintained.

This ensures care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My environment is relaxed, welcoming, peaceful and free from avoidable and intrusive noise and smells' (HSCS 5.18); and

'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22).

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.

People using the service and relatives are involved with the production of care plans and care reviews. Care plans sampled were comprehensive, person-centred and easy to read.

The service used an electronic care plan system. This had been effective for monitoring if the support needs of people were being carried out as planned. This included ensuring the hydration and nutritional needs of people who had been identified at risk were being met. The plans created a strong sense of the identity of each person and reflected how their levels of independence should be promoted.

Nursing staff worked effectively with external health professionals to inform the care plans. This supported good and evidence-based practice and promoted people's access to treatment and specialist assessments. However, we found that some care plans had not been consistently evaluated and the management team addressed this during the inspection.

The management team had a system to ensure that care plans are formally reviewed with the person supported and/or their representative every six months. This provided opportunities for people to get meaningfully involved in shaping and evaluating the care plans.

Care plans included any required supporting legal documentation. This ensured that people's rights were protected, and that people supported and/or their representative were involved in making decisions and choices where necessary.

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

To ensure wound photography is useful and appropriate, the provider should review the policy to support staff in ensuring that photographs are dignified, clear and consistent. We have signposted the provider to best practice guidance.

This area for improvement was made on 20 October 2021.

Action taken since then

The service was using wound best practice guidance. We sampled people's care records where wound care was being delivered, and assessed that the photographs of wounds taken were clear and appropriate to help maintain people's dignity.

This area for improvement was assessed as being met.

Previous area for improvement 2

Care plans for people who require support to maintain good skin integrity should:

- include recordings that clearly detail what support has been provided by a staff member each time they provide support; and
- the standard of these care plans should be monitored, and quality assured in line with good practice, to ensure that the right care is being provided at the right time to keep people well.

This area for improvement was made on 26 October 2021.

Action taken since then

We sampled people's skin care records, and we could see that people's care plans were consistently being recorded with the support provided. We did find that evaluations of the care plans was not always consistently completed, and this was addressed and actioned during the inspection. We have assessed this as overall being met.

This area for improvement was assessed as being met.

Previous area for improvement 3

The provider should ensure that people's care plans set out how their health, welfare and safety needs are to be met, and are regularly updated. In order to do this the provider must ensure that all residents have personal plans which:

- accurately reflect all their current needs by ensuring care plans are reviewed once in a six-month period. This should include all aspects of health, social and emotional care, and include the views of any appointed family member involved in people's care.

This area for improvement was made on 26 October 2021.

Action taken since then

We reviewed care records, and we could see that people's care plans were consistently being reviewed at least six monthly, and included the views of relatives, where appropriate.

This area for improvement was assessed as being met.

Previous area for improvement 4

To ensure that medication records are completed in line with best practice guidance, the provider should ensure the following:

- medication "as required" protocols should be introduced with clear outcomes recorded for individuals. This will ensure that people receive the right medication at the right time; and
- quality assurance audits for medication should include the monitoring of "as required" medications, and where possible, include observation of staff practice when supporting stress and distress.

This area for improvement was made on 26 October 2021.

Action taken since then

We saw that "as required" medication protocols were in place for people, where needed. It was clear that "as required" medication was only used as a last resort.

The management team were consistently auditing medication administered records and observations of staff practices.

This area for improvement was assessed as being met.

Previous area for improvement 5

The service should analyse the accidents and incidents within the home, to support any preventative action or referrals that may be needed to support mobility and independence for people.

This area for improvement was made on 26 October 2021.

Action taken since then

The service was consistently using a falls safety cross audit tool to analyse any falls people had, promote good practice, and assess if referrals to other professionals was required.

This area for improvement was assessed as being met.

Previous area for improvement 6

Staff should receive structured supervision that provides feedback and reflection on their practice, supports ongoing learning and improvement, and considers career development and responsibility.

This area for improvement was made on 26 October 2021.

Action taken since then

We reviewed staff supervision records and spoke with a number of staff who confirmed they had received regular supervision. This helped enable staff to have opportunities to reflect and develop their skills and knowledge.

This area for improvement was assessed as being 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	4 - 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
2.2 Quality assurance and improvement is led well	4 - Good

How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good

How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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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