

Rutherglen Care Home Care Home Service

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Rutherglen
Glasgow
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Telephone: 01416 478 899

Type of inspection:
Unannounced

Completed on:
15 February 2024

Service provided by:
Advinia Care Homes Limited

Service provider number:
SP2017013002

Service no:
CS2017361020

About the service

Rutherglen Care Home is registered to provide a care service to older people. The service provider is Advinia care homes Ltd. The service provider's website is: <http://www.advinia.co.uk/our-care-homes/>

The care home is situated in a residential part of Rutherglen, Glasgow. There are good transport links and access to local amenities.

The service presently operates three of nine separate houses (six are currently closed.) Each house provides up to 30 single bedrooms, none of which have en-suite facilities. There are shared toilets, one bath and one shower for 15 people on each side of the house.

A large open plan communal lounge/dining area is available with access to outdoor seating in small courtyard gardens in each of the houses for people to use.

At the time of this inspection there were 78 people living at the home.

About the inspection

This was an unannounced follow up inspection which took place on 15 February 2024 between 10:00 and 15:00. 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.
- spoke with eight staff and management.
- observed practice and daily life, and
- reviewed documents.

Key messages

- The management and staff team had focussed on improving the areas identified at previous inspections.
- We saw warm and caring relationships between residents and the staff team.
- People had access to a range of meaningful and social opportunities.
- Managers had good oversight of the home.
- The home was undergoing environmental upgrades.
- The service had met the 2 outstanding requirements that was issued from the previous inspection.

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

Requirements

Requirement 1

1. By 1st February 2024, the provider must review staffing arrangements so that people's care and support needs are met more responsively by staff. To do this, the provider must, at a minimum:

- a) implement systems to calculate staff hours needed in keeping with Care Inspectorate guidance, taking into account the layout of the building;
- b) allocate staff with the right skills to promote smaller group living and more responsive care and support; and
- c) review staff roles so the wider team can provide more person centred care.

This is in order to comply with Regulation 4(1)(a) and Regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011 (SSI2011/210)

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

'I am confident that people respond promptly, including when I ask for help.' (HSCS 3.17).

This requirement was made on 3 August 2023.

Action taken on previous requirement

Safer staffing tools were used to assess the number of staff required to meet the needs of people living in Rutherglen Care Home. These were reviewed daily and updated in response to people's changing needs. This was reflected in the number of staff available daily and at night.

Staff roles and skills had been reviewed, resulting in staff being redeployed across the home. This and daily observations of staffing levels ensured sufficient staffing to meet the personal care needs and support mealtimes and engagement. This reassured us there was enough staff to meet people's physical and social needs.

Staff training had been reviewed, and a comprehensive training plan was implemented. Recent training included outcome-focused care planning, promoting excellent dementia care, restore2 and moving and handling. To understand staff skills and abilities, nursing staff carried out and observed staff practice and provided opportunities for reflection and feedback. This enabled staff to develop their strengths, skills and interests to achieve good outcomes for people.

Met - within timescales

Requirement 2

By 1st February 2024, the provider must ensure people's toileting needs are met with greater dignity. To do this, the provider must, at a minimum:

- a) ensure people have access to an increased range of equipment to support their individual personal care needs, such as wheeled commode or shower/commode chairs;
- b) support people to access the nearest toilet more easily and offer choice; and
- c) refresh a previously submitted action plan setting out how en-suite facilities are to be created and establish new timescales.

This is to comply with Regulation 10(2)(d) (Fitness of premises) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

'The premises have been adapted, equipped and furnished to meet my needs and wishes.' (HSCS 5.16) and 'I can easily access a toilet from the rooms I use and can use this when I need to.' (HSCS 5.2).

This requirement was made on 3 August 2023.

Action taken on previous requirement

Communal bathrooms and shower rooms had been redecorated with homely touches added to them. The provider had purchased new equipment for those who required this. During our walk round, we saw that people had access to different types of equipment. People told us how this supported them when bathing and accessing the toilet. This ensured that people's choice and dignity was respected.

An environmental action plan had been developed with detailed areas of the home that had been identified for refurbishment and investment. This included a five-year plan to create en suite facilities for people living in Rutherglen Care Home. This will decrease the number of rooms to make space for the en suite facilities.

During the inspection, the communal lounge in one of the units was undergoing refurbishment. We saw new flooring being fitted and a new kitchen area being installed. The lounge was also being split into separate areas to offer a choice of where people could spend time. An action plan was in place for this to be replicated across the remaining two operational units by the end of February. The changes to the communal lounge and the introduction of the new kitchen areas will mean residents and visitors can use them to prepare drinks and snacks. This will ensure the communal areas provide a relaxed, homely and comfortable environment for people to use.

Met - within timescales

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 support people's wellbeing and social inclusion, the provider should review how they plan and enable people to participate in a range of activities of their choosing, both indoors and outdoors. In doing this they should:

- a) develop a personalised programme of activities, including everyday activities such as washing up or sensory input for each person depending on their needs and wishes;
- b) consider any staff training needs so a wider group of staff can offer support; and
- c) ensure activity provision is discussed with the whole team, and related outcomes are being met and evaluated.

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

'I can choose to have an active life and participate in a range of recreational, social creative, physical and learning activities every day, both indoors and outdoors' (HSCS 1.25); and 'I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential.' (HSCS 1.6).

This area for improvement was made on 3 August 2023.

Action taken since then

The area for improvement was not assessed at this inspection and remains in place.

Previous area for improvement 2

So that people can have greater control over their medication and a more homely environment, the provider should:

- a) consider more person centred approaches to medication storage such as individual medication cabinets in bedrooms; and
- b) review the number of staff who administer medication, expand this if possible with appropriate training and competencies in place.

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

'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24).

This area for improvement was made on 3 August 2023.

Action taken since then

This area for improvement was not assessed at this inspection and remains in place.

Previous area for improvement 3

So that people can enjoy three meals a day and drinks or snacks when they prefer, the provider should:

- a) review the organisation of mealtimes so breakfast does not run into lunchtime;
- b) consider how smaller group living can be supported better, allowing more access to a kitchenette, so drinks and snacks can be provided at times preferred; and
- c) reduce reliance on a timed "tea trolley" in favour of more homely and flexible approaches.

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

'I can enjoy unhurried snack and meal times in as relaxed an atmosphere as possible.' (HSCS 1.35)

This area for improvement was made on 3 August 2023.

Action taken since then

This area for improvement was not assessed at this inspection and remains in place.

Previous area for improvement 4

So that people can be sure quality assurance drives change and improvement where necessary, the service provider should:

- a) consider inclusion of self evaluation using the quality framework for care homes for older people within the quality assurance system;
- b) ensure the action plan for en-suite facilities is brought back into focus;
- c) ensure feedback is obtained from stakeholders, people who use the service and their representatives and actions are taken in response;
- d) enhance staff leadership skills to build capacity for improvement; and
- e) empower staff at all levels to be involved in service improvement and consider use of "practitioner" roles as described by Scottish Social Services Council to support existing staff roles.

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).

This area for improvement was made on 3 August 2023.

Action taken since then

This area for improvement was not assessed at this inspection and remains in place.

Previous area for improvement 5

So that staff have the right knowledge, competence and development to care for and support people, the provider should:

- a) ensure training is provided in dementia care, with consideration as to how this can match the Promoting Excellence Framework, so more staff have dementia skilled and enhanced equivalent training; and
- b) consider other topics which may not be included in the mandatory topics currently, such as specific health conditions. e.g. diabetes.

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

'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).

This area for improvement was made on 3 August 2023.

Action taken since then

Staff training had been reviewed and there was a comprehensive training plan in place. Recent training included outcome focused care planning, restore2 and moving and handling. Staff were attending weekly training on the promoting excellence dementia framework. Training for diabetes and Parkinson's was scheduled for the coming weeks.

Staff observations were taking place which provided opportunities for reflection and feedback. This enabled staff to develop their individual strengths, skills and interests to achieve good outcomes for people.

This area for improvement has been met.

Previous area for improvement 6

So that staff development supports improving outcomes for people, the provider should:

- a) implement regular staff competency assessments with encouragement for reflection; and
- b) consider use of national resource such as "Step into Leadership" which includes supervision tools and supports staff at all levels in their development.

This is to ensure that care and support is consistent with the Health and Social Care Standard (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).

This area for improvement was made on 3 August 2023.

Action taken since then

This area for improvement was not assessed at this inspection and remains in place.

Previous area for improvement 7

So that people experience a setting that is best suited for their needs and promotes choice and independence, the provider should demonstrate how information from regular audits and people's feedback inputs into a robust environmental improvement plan.

This should include:

- a) reduction of noise and throughflow of traffic in communal areas;
- b) homely touches, improved comfort and privacy within communal areas and bathrooms; and
- c) a plan to move towards smaller group living with easier access to kitchenette facilities, so people can take part in everyday activities such as washing up or setting tables.

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

'The premises have been adapted, equipped and furnished to meet my needs and wishes.' (HSCS 5.16).

This area for improvement was made on 3 August 2023.

Action taken since then

This area for improvement was not assessed at this inspection and remains in place.

Previous area for improvement 8

So that people's preferences for future care needs are known and recorded, the service provider should use best practice in anticipatory care planning and ensure this links to Electronic Key Information Summary (E-KIS) so out of hours services are aware.

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

'My future care and support needs are anticipated as part of my assessment.' (HSCS 1.14).

This area for improvement was made on 3 August 2023.

Action taken since then

This area for improvement was not assessed at this inspection and remains in place.

Complaints

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

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