

St Modans Care Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
24 April 2024

Service provided by:
St. Modans Care Home Limited

Service provider number:
SP2010011228

Service no:
CS2010249579

About the service

St Modans Care Home is registered to provide a care service to a maximum of 56 older people and nine adults with an acquired brain injury. The home has three units which are: frail elderly, dementia care and acquired brain injury. At the time of our inspection there were 64 people living in the care home.

The provider is St Modans Care Home Limited which is part of the Meallmore Group.

St Modans Care Home is a single storey purpose-built care home situated in a quiet residential area in the town of Fraserburgh, Aberdeenshire. All bedrooms have en suite toilet facilities, bathing and showering facilities are shared. The landscaped gardens can be accessed from all three units.

The provider's aims and objectives stated that St Modans aims to 'ensure all residents are given the opportunity to actively participate in any decision-making process affecting them, their environment or their choice.'

About the inspection

This was an unannounced inspection which took place on 18, 19 and 22 April 2024. The inspection was carried out by one inspector 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 13 people using the service and seven of their family
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

Prior to the inspection, we asked the service to issue surveys to people in the service, their families, to staff and visiting professionals. We received a very high level of response: 17 people who use the service responded, 20 responses from relatives, 16 from visiting professionals and 55 staff responses. The results of these surveys informed our inspection.

Key messages

- People experienced very good standards of care and support.
- The opportunities for people to remain active and engaged were very good.
- The quality of the meals was praised by people. The variety and presentation of meals was very good.
- People living with dementia were supported to live well and when additional support was needed, this was done in an outcome focused way.
- Managers responded appropriately when risks to the health and wellbeing of people changed.
- Relatives were encouraged and supported to be active in the service and to continue their role as carers.
- The number of staff on duty was changed to reflect the changing needs of people.
- The staff team worked very well together to ensure that people experienced stable and consistent care and support.
- Department heads and shift leaders had the responsibility of overseeing standards to ensure that people experienced consistency.

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?	5 - Very Good
How good is our staff team?	5 - Very Good

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

How well do we support people's wellbeing?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People were very satisfied with the quality of their lives in St Modans Care Home. Relatives and friends were confident that their loved one was in the right place to get the care and support they needed.

People appeared very well, staff had ensured that the right support had been provided to assist people with their personal care needs. People said that they never felt rushed and staff would take time to support people to choose their own clothing, jewellery etc. This helped people retain their identity and helped them look their best.

People led active and interesting lives. The designated activities staff took time to establish what was of the interests of people. What people wanted to do greatly informed the activities provided. This meant that people were passing their time doing things that they wanted.

People were kept informed of the proposed activities for the day, by 'What's on today' information posters. Providing information in this format made it much easier for people to make independent informed choices.

Staff recognised the importance to people's health and wellbeing of keeping active. Movement and exercise regularly featured on the activities programme. These sessions were really enjoyed by people, they were having fun whilst keeping fit and healthy.

People had a choice of where to spend their time. There were smaller lounges and seating areas that each had their own decor and feel. In one area we felt that the domestic feel helped make people feel at home and there were lovely social interactions between people. The efforts taken to creating an environment that offered people choice, had contributed to very positive experiences for people.

People said that the standards of care they received were 'second to none' and the staff were 'the best'. We felt that the stability in the staff team contributed to the high levels of satisfaction that people expressed. People knew the staff and staff clearly knew people very well. This meant that people got the care and support they needed when they wanted it.

The care and support provided to people to help them live well with dementia was very good. Staff knew the triggers or situations that caused increase stress and anxiety. As a result, strategies and interventions were put in place to prevent people becoming stressed. The home had recently created an excellent sensory room. We felt the staff had recognised the benefits to people's wellbeing of having this resource and had worked hard as a team to improve people's outcomes. We heard from people and their relatives of the benefits this room had on their mental wellbeing and general health. The staff team demonstrated a commitment to continual improvement and working together to bring innovation and very good resources into home life.

There was a very good clinical overview, and this showed that people were clinically well. This demonstrated that people at risk of skin breakdown received the right care and support to keep their skin healthy. This was reflected in the very low number of wounds in the home. The falls that occurred were reviewed and the possible causes analysed and acted upon. This input resulted in reducing numbers of

falls. People experienced responsive care and support that helped keep them well.

People were very positive about the meals, saying they were very tasty, and the variety was good. The dining rooms were very sociable at mealtimes. Whilst staff recognised the importance of helping people to eat and to drink well at mealtimes, they also placed importance on the social aspect of the dining service. People enjoyed chatting and socialising whilst they enjoyed their meal.

One person was receiving additional support in the evenings to help reduce the risks of falls and distress. The staff who were responsible for meeting this person's needs, had access to detailed information on specific risks and how to manage these and also to detailed information on their likes, dislikes and how they liked to pass their time. As a result, the quality of this person's experiences was very good and their daily records showed they enjoyed varied and outcome focused activity and engagement.

The service had an infection prevention and control lead (IPC), who continued to oversee IPC practices to ensure that compliance with safe practices remained. This helped ensure that there were consistently good standards of IPC in the home.

A review of medication management should take place. This will ensure that when there is a shortfall in the delivered medications that this is followed up in timely manner. This will prevent medications being out of stock.

People were connected and involved in the service to an excellent level. An example is the planning for the sensory room. People and their relatives were involved from the start and their input was valued and acted upon. This resulted in people being aware of the room and the purpose of it. This we felt contributed to the success and effectiveness of the sensory room.

There was planned training sessions for relatives to access the sensory room and use it with their loved one without the need for staff support. This demonstrated that relatives were being supported to be involved in the service and in the care of their loved one.

Managers had facilitated two drop-in sessions for relatives that specifically focused on dementia. These sessions were a platform for education and informing people about dementia but was also a support network. Relatives spoke about the benefits of being able to talk to other people who knew exactly what they were experiencing. This resource helped people feel reassured, supported and reduced their anxiety and feeling of being on their own.

Two relatives said that they enjoyed their supper with their spouse every day. They spoke about how this had enriched their lives and enabled them to carry on with an everyday event that had occurred prior to moving into the home.

The service included people in home life beyond the expectations of many. We felt that the measures taken to include relatives in home life and the development of the service, and in the care and support of their loved ones, is an example for other care homes to aspire to.

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Managers were responsive to the needs of people in determining how many staff were on duty. It was identified that the number of falls occurring in the late evening were higher than at other times. This information was used to inform the need for additional staff at this time. As a result, the number of falls had reduced. The planned addition of an activities person in the evenings who would support younger adults, was in response to the need for a provision that was reflective of what their peers experienced. This responsive approach to staffing meant that people were in the right service to get the right care and support.

The staff team was stable, and staff told us they really enjoyed being part of the St Modans team. Staff said they felt valued, respected and that their contributions and suggestions were welcomed. This helped staff buy into any of the changes or improvements. People could be confident that the staff team worked well together to help support stable and consistent care and support.

Shift leaders oversaw the standards of the care and support provision. This meant that they could direct staff as needed. The positive impact of this was evident at mealtimes. The shift leader took charge of the meal service, and this ensured that the service ran smoothly.

Heads of departments took responsibility for their own area of expertise. The chef was responsible for establishing satisfaction with the meals that were provided. This meant that changes to the menu were informed by what people wanted. The housekeeper oversaw the standards of cleanliness. This contributed to the very high standards of cleanliness in the home. The delegation of responsibility and oversight to heads of department demonstrated awareness of their skills and valued their role in contributing to the very good standards of care provision.

Staff had completed the necessary training that helped them have the skills and knowledge to do their job. However, we felt that the very high numbers of staff who had completed the Promoting Excellence Framework training, had contributed to people living with dementia experiencing very positive outcomes.

Managers had planned training sessions on the Safer Staffing Legislation. They had recognised the need of staff to be aware of this new legislation. Managers were committed to ensuring that the knowledge and development of the staff team, was current.

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 service should ensure that people's preferences are sought and that people are supported to participate in home life and enabled to make their own choices.

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

'I am recognised as an expert in my own experiences, needs and wishes' (HSCS 1.9);

'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership' (HSCS 4.7); and

'I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve' (HSCS 4.8).

This area for improvement was made on 7 March 2023.

Action taken since then

Managers had made the necessary improvements to ensure that people were included in home life. Regular meetings were held and these were used to ask people about any changes they wanted or any activities provision. Care reviews were used as a platform to establish if people were happy with the care and support they received and if there was anything that could be improved upon. It was clear from the managers oversight that feedback and input from people greatly informed change and improvements. This recognised people as being experts and reassured them that their opinions mattered.

This area for improvement has been met.

Previous area for improvement 2

The service should ensure that people are supported to stabilise their weights by ensuring they receive the appropriate nutritional intake and the necessary levels of support to enjoy their meal or snack.

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

'If I need help with eating and drinking, this is carried out in a dignified way and my personal preferences are respected' (HSCS 1.34); and

'I can enjoy unhurried snacks and mealtimes in as relaxed an atmosphere as possible' (HSCS 1.35).

This area for improvement was made on 7 March 2023.

Action taken since then

Shift leaders oversaw the mealtime service and this ensured that the service ran smoothly. People did not have to wait long for their meal and there was direction of staff when it was identified that someone needed more assistance. The quality and variety of the meals was very good and people said they enjoyed the meals. The addition of the small extra calorie puddings in the afternoon was an opportunity for people who were at risk of losing weight, to increase their calorie intake. Managers had a very good overview of people's weights and enhanced monitoring was in place when a risk of weight loss was identified. We felt that the measures in place helped reduce the risks to people and generally meant that weights were stable.

This area for improvement has been met.

Previous area for improvement 3

The service should ensure that all factors which may contribute to people's distress are included when the assessment and analysis of episodes of distress are completed.

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

state that:

'My care and support meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 7 March 2023.

Action taken since then

The strategies that had been put in place to reduce people's stress and distress were very effective. This helped people to live well with dementia. Care plans clearly identified factors which may increase people's stress and anxiety and what staff can do to minimise the impact. For example, if loud noise was a factor, staff could support the person to a quieter lounge. The creation of the sensory room had a very positive impact on some people's distress. Relatives spoke about the therapeutic benefits of this room and how it had 'worked wonders' for their loved one. Protocols for the use of as required medication clearly stated when this medication should be administered and the alternative strategies that should be tried first. This meant that the use of as required medication was very low. The high numbers of staff who had completed the Promoting Excellence Framework meant that they had the skills, knowledge and confidence to care and support people living with dementia and, to help them live well.

This area for improvement has been met.

Previous area for improvement 4

The service should make improvements to the quality assurance processes to ensure that they are reflective of areas that have impacted on people's wellbeing and outcomes.

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 7 March 2023.

Action taken since then

Managers had very good oversight of the service. This helped inform decision making about staff numbers and allocation of staff. Department heads had the responsibility of overseeing the standards in their own department and this ensured there was consistency in standards. Shift leaders oversaw the quality of the care and support people received to ensure that there was consistently good standards experienced.

Managers were responsive to what people said and change and improvement was informed by their input.

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?	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	5 - Very Good
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	6 - Excellent

How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

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