

# Ryan Meadows Care Home Care Home Service

149 Glasgow Road East Kilbride Glasgow G74 4PA

Telephone: 01355 279789

Type of inspection:

Unannounced

Completed on:

6 May 2024

Service provided by:

Keane Premier Healthcare Ltd

Service provider number:

SP2008010039

**Service no:** CS2022000327



# Inspection report

#### About the service

Ryan Meadows is a registered care home to provide care and support to a maximum of 60 older people. The provider is Keane Premier Healthcare. Ryan Meadows Care Home is a purpose-built home situated in Nerston Village which is a residential area on the outskirts of East Kilbride.

It has easy access to local amenities and transport links. Accommodation is provided over two floors, with 60 single rooms, five with en-suite shower facilities and 55 with en-suite toilet facilities. There is a passenger lift providing access to each floor where there is a spacious communal lounge, dining area and bathing facilities.

There is a well maintained, spacious garden area for residents and their visitors to use. There is a car park to the rear of the home. At the time of this inspection there were 55 people living at the home.

# About the inspection

This was a follow up inspection which took place on 06 May 2024 between 10:00 and 15:15. The inspection was carried out by an inspector from the Care Inspectorate. The purpose of this inspection was to follow up requirements from a previous complaint investigation.

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.

# Key messages

Care plans were descriptive and offered useful information regarding the person's likes, dislikes and assessed needs for eating and drinking. This meant their nutritional needs were known by care staff.

Eating and drinking training had been completed within the service. Care staff were knowledgeable on how to fortify food and drinks, and on textured diets.

Food and fluid intake recording had improved. These records were being audited on a daily basis.

Recording for prescribed supplements had improved.

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

## Requirements

#### Requirement 1

By 24 November 2023, the provider must ensure that people are being supported to eat and drink well, and their health and wellbeing regarding their nutritional and hydration needs are being met.

To do this the provider must at a minimum:

- a) Ensure people's nutritional and hydration needs assessment informs the appropriate level of monitoring and evaluation.
- b) Develop and implement clear treatment plans for people who are at risk of weight loss and/or dehydration.
- c) Involve people experiencing care or their representatives in giving feedback about the quality and choice of food and the timing of meals and snacks.
- d) Involve staff supporting people in the assessment of any obstacles to the provision of the right support at the right time and the recording of this.
- e) Ensure people are supported and encouraged to eat and drink well and are offered appropriate food and fluids at the right times in line with their assessed needs.
- f) Ensure that staff demonstrate the necessary skills to support people safely with their nutrition and hydration needs and set out a plan of support staff to keep those skills up to date.
- g) Ensure supplements are given as prescribed and appropriately recorded.
- h) Ensure management have oversight of people's eating and drinking needs and records and the use of this information to inform actions as part of continuous quality improvement.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me. This is in order to comply with: Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This requirement was made on 4 October 2023.

#### Action taken on previous requirement

This requirement was made following a complaint investigation. A follow up inspection was undertaken on 20 February 2024. The requirements were not met at that time. They were extended until 26 April 2024.

Care plans reflected people's individual needs and likes and dislikes with regard to food and nutrition. The service had liaised with people's representatives and external professionals regarding concerns of weight loss to identify positive and successful outcomes.

People had been involved in the review of the menu and changes had been implemented based on this. These reviews were ongoing to ensure people's views were regularly sought and considered on the choices and quality of foods.

Training on food and nutrition had been delivered to the majority of staff. Staff were knowledgeable on food fortification and the different levels of textured foods. Prescribed supplements were being recorded accurately.

Dining experience and meal service audits were being undertaken by the manager and were noted to have improved. Food and fluid intake recordings had improved and were being reviewed on a daily basis to ensure they remained accurate and that targets were being met. We were reassured that people were receiving appropriate care and support to eat and drink well.

Met - outwith 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

The service provider should ensure that people, and where appropriate their families, are supported to discuss and develop anticipatory care plans. These should include people's wishes to meet their future care needs.

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 1.4).

This area for improvement was made on 15 December 2023.

#### Action taken since then

This area for improvement has not been assessed 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.

#### To find out more

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