

# Meadowlark Care Home Service

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Forres  
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**Type of inspection:**  
Unannounced

**Completed on:**  
20 June 2024

**Service provided by:**  
Renaissance Care (No1) Limited

**Service provider number:**  
SP2011011731

**Service no:**  
CS2011303089

## About the service

Meadowlark service is owned by Renaissance Care (No1) Limited. It is registered to provide a care home service for a maximum of 57 older people, including people with dementia or mental health problems.

Meadowlark is a purpose built home located in Forres. There are three separate units, one of which has been specifically developed to support people living with dementia. All rooms are single occupancy, some have en-suite facilities.

The home is set within its own grounds and includes a pleasant private rear garden, which is overlooked by many of the rooms.

## About the inspection

This was a follow up inspection to assess the progress the service was making since the last inspection on 13 March 2024. An unannounced inspection took place on 19 June 2024. Two inspectors carried out this inspection. The follow-up inspection focussed on the outstanding requirements made during the previous inspection and evaluated how the service had addressed these to improve outcomes for people.

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 four of their family and friends
- spoke with eight staff and management
- observed practice and daily life
- reviewed documents.

## Key messages

The service had made improvements around supporting people who experience stress and distress, which meant the previous requirement was met.

The service had made improvements around people's satisfaction with how they spend their days, which meant the previous requirement was met.

People remaining in their rooms were lacking in meaningful interactions and activities, which meant a new area for improvement was made.

The home environment was worn and tired, and some areas were not clean and fresh, which meant the previous requirement was not met.

## How well do we support people's wellbeing?

Three requirements remained outstanding from our previous inspection. Since then, the provider had put actions plans in place to support the improvements needed.

The requirement around the service supporting people who may experience stress or distress has been met. People were being supported by staff who were trained to help them and strategies were in place to support. This reduced the risk of people becoming distressed. (See 'What the service has done to meet any requirements made at or since the last inspection')

The service had not made sufficient improvements relating to the requirement around the home environment being hygienic, this requirement has not been met. Some areas of the home appeared worn and unclean. During the inspection, the provider told us a refurbishment was due to commence in a few days time. We are hopeful this will assist with the upkeep and cleanliness of the home. We will assess the impact this has on people's outcomes at future inspections. We have therefore restated this requirement with a new agreed timescale of 26 August 2024. (See 'What the service has done to meet any requirements made at or since the last inspection')

We found the service had made improvements relating to the requirement around people getting the most out of life, this requirement has been met. The overall atmosphere within the home had improved and most people told us they were enjoying daily life. (See 'What the service has done to meet any requirements made at or since the last inspection')

However, some people choosing to remain in their rooms told us they were bored. Someone said, "I would like more to do." This meant that some people were under stimulated. Furthermore, someone else spoke about waiting too long when they call for assistance. This was negatively impacting upon their day-to-day life. The provider should support all people to have positive daily experiences and interactions. We have therefore made an area for improvement around people getting the most from their lives. **(See Area for improvement 1)**

## Areas for improvement

1. To support people's health and wellbeing and improve the quality of their day, the provider should improve how they support people, so all people's daily lives are meaningful and experiences are positive.

This should include but is not limited to, ensuring those who choose to stay in their bedrooms are able to take part in meaningful activities and engagement, and ensuring day to day experiences, tasks and interactions are provided in a supportive and timely manner.

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).

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

### Requirements

#### Requirement 1

By 8 May 2024, the provider must ensure people who experience stress and distress are supported using the least restrictive measures which are tailored to individual need.

To do this the provider must at a minimum:

- a) ensure all staff have undertaken recent training around supporting those who experience stress and distress
- b) ensure all staff are equipped with the knowledge, skills and understanding to effectively communicate with people experiencing stress or distress
- c) provide management oversight through direct observations, and on-going support and discussions in supervisions
- d) liaise regularly with mental health professionals around best approaches to use with people
- e) ensure people's personal plans are clear around how to support people and that staff have good awareness of individual need.

This is to comply with Regulation 4(1)(b) and (c) (Welfare of users) and Regulation 5 (Personal plans) 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:

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

'I experience people speaking and listening to me in a way that is courteous and respectful, with my care and support being the main focus of people's attention' (HSCS 3.1); and

'My personal plan (sometimes referred to as care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

**This requirement was made on 13 March 2024.**

## Action taken on previous requirement

Stress and distress strategies were in place, detailed and person-centred. For example, plans evidenced what may trigger people to become distressed and ways in which staff should support. Observation tools were in place to help understand causes of stress and anxiety and staff were using these to analyse behaviour and improve support. This meant assistance was specific around people's individual needs. People were less likely to become anxious or stressed due to this. Consequently, there was a more relaxed atmosphere in the home.

Staff were trained in how to support people who may experience stress. Staff had undertaken additional training provided by a dementia specialist nurse. Staff spoke highly of the training and said they felt better equipped to help people. This meant people were being assisted by staff who were knowledgeable around best methods to support. Staff were observed using their skills to de-escalate potentially stressful situations. For example, a staff member helped someone to relax when they were feeling anxious whilst walking. They spoke to the person and used distraction techniques to provide calming and nurturing support. As a result, this person's potential stress was reduced and they were seen smiling and laughing minutes later. This meant people felt at ease and there was a calm feeling within the home.

Medication protocols were in place to help people when they experience distress. The effectiveness of medication was being assessed and staff were using this to reflect upon people's support and needs. This showed the service was evaluating the best ways to assist people. The likelihood of people experiencing stress and distress was therefore reduced. This meant people were comfortable and content.

This requirement has been met.

## Met - outwith timescales

### Requirement 2

By 8 May 2024, the provider must ensure that the home environment is clean and that domestic tasks result in private and communal areas being hygienic and fresh.

To do this the provider must at a minimum:

- a) ensure there are sufficient domestic staff working each day and have a back-up plan if required
- b) undertake regular observations of the home environment to ensure cleanliness throughout
- c) promote a positive culture around maintaining a consistently clean, tidy and hygienic environment.

This is to comply with Regulations 4 (1) (a) and (d)(welfare of users and procedures for the prevention and control of infection) 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:

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

**This requirement was made on 13 March 2024.**

**Action taken on previous requirement**

Infection Prevention and Control (IPC) audits and daily walk rounds were being conducted by a variety of staff. This was to ensure the environment of the home was clean, fresh and homely. However, there was no evidence of an audit or action plan being undertaken for the month of June. This showed inconsistency around the monitoring of the general environment. This was increasing the likelihood of people's living spaces not being fresh and clean. This meant people may not see improvements in their surroundings.

Some areas of the home were tired and worn. For example, carpets in some rooms and corridors had stains on them and a fridge in one of the kitchenettes was not clean. Furthermore, the general environment in some places was un-fresh. There were unpleasant smells in some communal areas. This meant people were living in an environment that was not supportive of their health and wellbeing. The provider must ensure the home is fresh and hygienic to improve people's experiences and reduce the likelihood of infection.

Some equipment had not been cleaned when we arrived at the home. For example, cleaning tabs on hoists were not in date. This meant people had been assisted in the morning with supportive aids that were not freshly cleaned. This could increase the likelihood of infection and may impact upon people's health. The provider must ensure that equipment is cleaned daily in accordance with IPC guidance and procedures.

**This requirement has not been met. We have restated this requirement with a new agreed time scale of 26 August 2024.**

**Not met****Requirement 3**

By 5 June 2024, the provider must support people to get the most out of life when considering meaningful activity, purpose and stimulation.

To do this the provider must at a minimum:

- a) Ensure people's goals, aspirations and personal preferences are identified and that support plans evidence any steps taken towards meeting them.
- b) Ensure that meaningful activities are taking place each day which are in line with individual preferences.
- c) Ensure there is sufficient staffing in the home, to provide enough therapeutic and meaningful activity throughout the day.
- d) Promote a positive culture within the home where it is the responsibility of all staff to ensure that people are getting the most out of life and that opportunities for meaningful interactions are not being missed.

This is to comply with regulation 4(1)(a) (welfare of service users) 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:

'I am empowered and enabled to be as independent and as in control of my life as I want to be and can be' (HSCS 2.2); 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 requirement was made on 28 November 2023.**

## Action taken on previous requirement

Most people's days included things they enjoyed. Daily activities were taking place. A timetable of scheduled events was on display in communal areas and people had copies in their rooms. People were seen playing bingo and doing exercises in shared spaces. They were observed laughing and there was a good atmosphere. Someone told us, "I really like the bingo and fun things we do. I really like it here now." A family member said, "I do not think she is bored here. She is always happy when I visit." This showed that people's experiences had improved and that their overall quality of life was enhanced.

Staff culture around supporting people to enjoy daily life had improved. Meaningful interactions were observed between staff members and people. Someone was supported to eat their lunch, whilst the carer spoke to them and smiled at them. This resulted in a positive dining experience for this person, who ate their lunch and enjoyed the company. Staffing numbers were sufficient throughout the home to provide positive engagement with people. Interactions were being viewed as everyone's responsibility. For example, domestic staff were seen using people's first names and chatting to them about their days. This showed that all staff were familiar with people. As a result, the overall atmosphere in the home had improved and people were happier.

Personal plans indicated how people liked to spend their days. Someone's plan said they like going outside for a short walk. This person told us, "I have a walk most days in the garden with my friend." This showed us that people were getting the opportunity to do things that they enjoyed. Due to this, most people were positive about how they spent their days.

This requirement has been met. However, although there were improvements, the provider should continue to support positive experiences for all people living in the home. Some people who remained in their rooms were bored, whilst another spoke about delays when waiting for assistance. Due to this, some people's daily experiences were impacted upon and they felt some discontent. The provider must continue to develop a culture to support all people to feel fulfilled. We have therefore made an area for improvement around this. (See Area for improvement 1 in section 'How well do we support people's wellbeing')

**Met - outwith timescales**

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).



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