

Marchglen Care Centre Care Home Service

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Fishcross
Alloa
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Telephone: 01259 750 703

Type of inspection:
Unannounced

Completed on:
17 September 2024

Service provided by:
ARIA HEALTHCARE GROUP LTD

Service provider number:
SP2013012090

Service no:
CS2013318121

About the service

This service registered with the Care Inspectorate on 30 August 2013.

Marchglen Care Centre is provided by Aria Care Group Limited. The care home is registered to provide care for 37 people. The service provides support for adults who have Learning Disabilities and complex needs; Learning Disabilities and/or neurological and Physical Disabilities; Physical Disabilities and complex needs, or Physical Disabilities.

The purpose built home is located in a small village a short distance from Alloa. The home is separated into four units arranged over one floor. Three of the units were open at the time of the inspection. All the rooms have ensuite shower facilities and there are a number of accessible garden areas.

On the day of the inspection there were 26 people living in the care home. The service states its aim is to "provide high-quality nursing care and offer a day-to-day programme of agreed meaningful activity, this will enable the residents to maximise their independence and purpose."

About the inspection

This was a focussed follow up inspection which took place on 17 September 2024. The purpose was to follow up on two requirements and one area for improvement made at the inspection on 23 May 2024. 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 and spent time with people using the service
- spoke with staff and management
- observed mealtime practice
- reviewed documents.

Key messages

- Improvement was still required for the leadership and training for staff throughout the home.
- Improvement was still required to carry out a holistic assessment of people's care needs in order to identify staff training to meet people's needs.
- Improvements had been made in relation to the mealtime experience of people living in the home, however improvement was still in its infancy and not part of staff's daily practice.
- We spoke with and spent time with three people who use the service.

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

Requirements

Requirement 1

By 2 September 2024, the provider must ensure the service remains responsive to changes and develops a culture of continuous improvement. To do this, the provider must, at a minimum:

- a) Review the current leadership within the individual units and assess the knowledge, skills and expectations of the leaders.
- b) Identify any training required for unit leaders to help assist them to be competent to fulfil their role.
- c) The manager to have oversight and regular meetings with unit leaders to ensure actions have been taken to drive improvement.
- d) The manager should carry out observation of practice to identify any training needs or areas for improvement.
- e) Review the home's service improvement plan by identifying specific improvements for individual units.

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This ensures care and support is consistent with the Health and Social Care Standards, which state: 4.19 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.'

This requirement was made on 23 May 2024.

Action taken on previous requirement

The new manager had worked hard to review the leadership within the home and identify unit leads. Training had taken place, and regular meetings carried out, however there was no observations of practice taking place to identify specific training needs of unit leads or to review if training was being transferred into practice. A service improvement plan was in place but not reflective of the home's current needs and outstanding requirements for improvement.

This requirement was not met and have therefore extended the timescale to 28 October 2024.

Not met

Requirement 2

By 2 September 2024, the provider must ensure the service met people's care needs by the right number of staff who have time, skills and knowledge to care and support them. To do this, the provider must, at a minimum:

- a) Carry out a holistic assessment of people's health, care and social needs.
- b) Identify training needs of staff specific to people's care needs and devise a training plan.
- c) Devise a process when deploying staff to units which considers skill mix, staff wellbeing and positive outcomes for people.
- d) Ensure staffing numbers meet people's needs by incorporating people's, staffs' and relatives' feedback.

"This is in order to comply with section 8 of the Health and Care (Staffing) (Scotland) Act 2019."

This ensures care and support is consistent with the Health and Social Care Standards, which state: 3.14 '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.'

3.15 'My needs are met by the right number of people.'

3.19 'My care and support is consistent and stable because people work together well.'

This requirement was made on 23 May 2024.

Action taken on previous requirement

We were not confident that a holistic assessment had been carried out by the service of people's needs. A training needs analysis exercise was carried out but no information had been gathered or collated to drive improvement and develop a training plan for staff to support people. The deployment of staff remained the same as previous inspection.

This requirement was not met and have therefore extended the timescale to 28 October 2024.

Not met

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 and create a positive dining experience for people, the provider should ensure that staff are aware of the importance of mealtimes for people's daily routine, it promotes social interaction, builds a sense of community and increases nutritional intake.

This should include, but is not limited to:

- a) A review of the experience in each individual units for people. Looking at environment, table presentation and service.
- b) Plan to identify and action any areas for improvement.
- c) Staff have knowledge and awareness of the importance of mealtime experience.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 1.35 "I can enjoy unhurried snack and meal times in as relaxed an atmosphere as possible."

This area for improvement was made on 23 May 2024.

Action taken since then

We saw a review of the dining experience had taken place for each unit by the manager and supported by the chef and could see some improvement had been made within specific units, however there was no plan recorded or actions identified. Staff had knowledge and awareness of the importance of the mealtime experience and the improvement needed time to be embedded in daily practice.

Therefore this area for improvement has been repeated.

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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