

# Orchard Care Centre Care Home Service

Lychgate Road  
Tullibody  
Alloa  
FK10 2RQ

Telephone: 01259 720 550

**Type of inspection:**  
Unannounced

**Completed on:**  
12 September 2024

**Service provided by:**  
HC-One Limited

**Service provider number:**  
SP2011011682

**Service no:**  
CS2011300783

## About the service

Orchard Care Centre is in a quiet residential area of Tullibody. The care home is registered to provide a service to a maximum of 56, 34 older people and 22 adults with dementia in two separate units. The care home is built on one level with enclosed secure gardens at the centre and rear of the building and landscaped gardens to the exterior.

The care service defines its aims and objectives as, "to provide a high standard of individualised care to all service users. It is the objective of The Orchard that all service users will enjoy a clean, smoke free, safe environment in private spaces and non-communal areas within the home and be treated with care, dignity, respect and sensitivity to meet the individual needs and abilities of the service user."

## About the inspection

This was an unannounced inspection which took place on 10 September 2024, 09:30 until 16:00, 11 September 2024, 09:30 until 18:00 and 12 September 2024, 09:30 until 13:00. 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 six people using the service and 13 of their families
- spoke with staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

**Key messages**

- People were enabled to get the most out of life
- There was a variety of in-house and out the home activities for people to take part in
- People's health needs were escalated to other health professionals when needed
- Improvement was needed in relation to recording of people's topical medication
- Improvement was needed in support planning for people who may experience stress and /or distress
- Improvement was needed in the recording of supporting documents
- Staff worked hard to meet people's care needs safely
- The service used a recognised tool to identify people's dependencies and this was used to inform the staffing levels.

**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?	4 - Good
How good is our staff team?	4 - Good

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

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

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

**Quality Indicator: 1.2 People get the most out of life.**

**Quality Indicator: 1.3 People's health and wellbeing benefits from their care and support.**

People and relatives benefited from a service that helped build and establish trusting and respectful relationships with staff. One relative told us, "Carers are excellent and understand my mum's needs", whilst another told us "My Dad is well looked after. The staff are magnificent. They not only look after his well-being but mine too."

People were enabled to get the most out of life, we saw a variety of in house and out of house activities taking place. The home engaged with the local community through accessing local cafe's, churches, community based services and links with the local schools and nurseries. There was dedicated activity staff who were very passionate about what activities were being offered to people. They arranged a weekly activity programme with a range of groups and a great selection of tailored one-to-one activities for people. This ensured people continued to feel enriched, stimulated and gave a sense of purpose.

Staff knew people well and worked hard to meet people's care needs. A recent change within the home's two units and its layout had impacted on staffs' ability to confidently support people and we saw there were very limited opportunities for meaningful engagement with people. Some staff that we spoke with indicated their days were very busy undertaking practical tasks, leaving little or no time to spend with residents. The management team were aware of the staff team challenges and assured staff were being supported to ensure people were being supported.

We observed plenty of snacks and drinks to be available throughout the day, including to those who preferred to be in their bedrooms. Meals were nicely presented and an alternative menu was on offer and tables were nicely set. Mealtime varied within both units, the newly refurbished Anbri unit was in the process of improving the organising and co-ordinating of the mealtime experience, which supported people to also experience a relaxed and unhurried meal.

Medication administration records showed most prescribed medication had been administered as prescribed and provided at a time that suited people. However, improvement was needed in relation to topical medication, we saw a range of different recording charts in place for topical medication, some gaps and some people didn't have any recording charts. This meant that people were at risk because they may not always receive the right medication or treatment at the right time. (See Area for Improvement 1)

People should be protected from harm and expect any health and wellbeing concerns to be responded to. We found that staff identified, assessed and monitored the health needs of people. Where there had been any health related concerns, healthcare professionals had been contacted quickly for advice. One visiting professional told us "there is a open door policy in home, staff, managers are helpful and knowledgeable."

During our observations we were aware that some people could experience episodes of stress or distress. Whilst all residents had a support plan in place, which contained relevant risk assessments that reflected people's current health and care needs.

Most support plans provided guidance for staff about how to care for and support people, however people who were identified as experiencing stress and distress, support plans were not as clear to guide staff on how to support people experiencing distressed behaviour. (See Area for Improvement 2).

We also saw a variance in the recording of supporting documents for people, there was gaps in people's personal care charts and should someone require additional monitoring for their food or fluid there was no set target or reason for the chart recorded. This compromised people's health by reducing the responsiveness and opportunity for staff to escalate people's care needs should changes occur. (See Area for Improvement 3).

## Areas for improvement

1. The service should ensure that topical medication is stored appropriately and people receive all of their medication as prescribed. This should include the accurate recording of effective administration of topical medication and include regular audit processes.

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).

2. To ensure that people who experience stress or distress are fully and appropriately supported, the service should ensure that people who may experience stress and/or distress have a clear and detailed plan which clearly identifies triggers and strategies to support people.

This is to comply with Regulation 4(1)(a) (welfare of service users) and Regulation 15(b)(i) (staffing) 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:

'My care and support meets my needs and is right for me' (HSCS 1.19) and '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 3.1)

3. The service should ensure that supporting documentation in recording of people's care needs are completed accurately and should someone require additional monitoring of their food or fluid then intake should be recorded with appropriate set targets and reasons recorded, so the service can remain responsive to people's changing care needs and escalate when needed.

This is to ensure that care and support is consistent with health and social care standards which states that:

'My personal plan (sometimes referred to as a 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)

## How good is our staff team?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

### Quality Indicator: 3.3 Staffing arrangements are right and staff work well together

Staff worked hard to meet people's care needs safely. One relative told us "the staff are amazing" and another told us "staff are stretched, wellbeing is given as much as can be with the staff." With the recent changes to units within the home, feedback from staff varied in relation to team working, one staff member told us "we work great as a team and Anbri unit is fantastic", whilst another said "since the changes we feel forgotten about and all the focus is on the new unit." We addressed this with the management who assured that the change was being supported by management through robust staff supervision and regular team meetings taken place. These meetings and supervisions are important to monitor staff's wellbeing and practice and to ensure people being supported experience a good quality of care and support from a competent workforce and concerns can be raised when needed.

People who use services have the right to have their needs met by the right number of staff who have time to support and care for them. The service used a recognised tool to identify people's dependencies and this was used to inform the staffing levels throughout the home. The home was recruiting new care staff and had a reliance on agency staff, however staff had experience of working across the home and where possible consistency of agency staff were used. This helped to provide continuity for people using the service.

We saw from training records that staff had completed a range of mandatory training both online and face-to-face in key areas, from moving and assisting, fall prevention and adult support and protection. Staff were clear about their roles and were, overall, deployed effectively.

## 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).

## Detailed evaluations

How well do we support people's wellbeing?	4 - 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	4 - Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

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