

# Inspired breaks Care Home Service

Lower Flat Dunollie Windygates Road Leven KY8 4DP

Telephone: 07711727385

Type of inspection:

Unannounced

Completed on:

11 October 2024

Service provided by:

Inspired Breaks Ltd

Service no:

CS2023000298

Service provider number:

SP2023000189



# Inspection report

#### About the service

Inspired Breaks was registered on 8 September 2023 and provides 24 hour residential care and support for up to five adults. There were four people living in the home at the time of our inspection, including two people accessing respite.

The house is located in a residential area of Leven, has adequate on-site parking and there is good access to public transport, the town centre and social resources. The care home is privately owned by Inspired Breaks Limited.

The home provides a very pleasant environment supporting a domestic model of care. Accommodation consists of a two storey Victorian stone villa, with respite provided in the ground floor flat and long term care provided in the first floor flat. There are very good facilities, welcoming communal areas and accessible gardens.

# About the inspection

This was an unannounced inspection which took place on 9 October 2024 between 9am - 8pm. The inspection was carried out by one inspector from the Care Inspectorate. This was our first inspection of this service. To prepare for the inspection we reviewed information about this service. This included registration information, information submitted by the service and intelligence gathered since registration.

In making our evaluations of the service we:

- spoke with two people using the service and seven of their family.
- · spoke with five staff and management
- observed practice and daily life
- · reviewed documents.

# Key messages

- People enjoyed very good care and support.
- · Staff were experienced and worked well together.
- Quality assurance and record keeping required improvement.
- · Relatives were highly satisfied with the service.
- · People enjoyed very good facilities.

# 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 leadership?	3 - Adequate
How good is our staff team?	4 - Good
How good is our setting?	5 - Very Good
How well is our care and support planned?	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?

5 - Very Good

We evaluated this key question as very good, as the significant strengths outweighed any areas for improvement.

Service provision reflected a domestic model of care. People's wellbeing and confidence were enhanced as the service promoted a person-centred approach to all aspects of care and support. People were encouraged to remain as active as they could be, including getting out and about. People were fully involved in making decisions. One person described how much they had enjoyed their day out, while others clearly had every opportunity to have the day that they wanted. Comments from relatives included, "we need more services like this" "(my son) wouldn't go if they were not happy" and "(my brother) gets out and about, is extremely happy".

The flats were clean, fresh and homely. People experienced dignity and respect, they were supported to get the most out of life, they enjoyed meaningful days and were protected by good housekeeping and infection prevention and control.

The flats were welcoming and homely. Staff clearly knew people well and we observed consistent kind and humorous interactions between staff and people. We were confident that people were being treated with dignity and respect. Staff were held in high regard. Comments from relatives included, "Tina and her team are inspirational", "their focus is in exactly the right place" and "they have got it right".

There was very good provision of food and drink and, where people who had been at risk of weight loss, were recovering and thriving. People were central to the planning, shopping and preparation of food and these were used as an opportunity to build skills and independence. The meals were enjoyed in an unhurried, relaxed atmosphere.

Staff were confident in their ability to look after the people in their care and mitigate risk while supporting people's independence. However, we found some slippage in their training and in establishing their roles and responsibilities. This should be addressed in order to provide assurance around what is done to sustain high quality care and support. Please see requirements recorded under key question 2.

Although we found some inconsistencies in the standard of record keeping, care plans sampled were detailed and person centred. They reflected people's needs and how they liked their care and support delivered. There were various risk assessments in place to monitor key aspects of someone's care such as medication, weight or food and fluid intake. Records reflected people's current needs and reviews were up to date. Relatives told us they felt listened to and involved in all decisions made regarding their loved ones. Their comments included, "I felt my input was appreciated".

We found medication was managed well and systems allowed a flexible approach necessary to support a person centred approach and maintain people's usual routine. We felt confident that people could receive the right medication at the right time and that any issues had been properly managed.

#### How good is our leadership?

#### 3 - Adequate

We evaluated this key question as adequate, where there are some strengths which have a positive impact on people; however, some key areas of performance need to improve. The culture of care, vision and values positively informed practice and the provider had a collaborative approach to support people.

We found staff continually evaluated people's experiences to ensure that as far as possible, people are provided with the right care and support in the right place to meet their needs and wishes.

Staff described having access to a raft of e-learning, good communication, teamwork and support in terms of leadership and resources. They reported feeling confident in raising any issues or concerns. The provider had promoted staff autonomy but systems to ensure staff are clear about roles and responsibilities have yet to be fully introduced. **Please see requirement 1**.

The provider had a clear understanding about what is working well and what improvements were needed. We found some systems in place to monitor aspects of service delivery, however, quality assurance processes were at an early stage. Oversight and audits of key functions have not been embedded. As a result, it was difficult to evidence the provider's evaluation of performance and improvement planning. We highlighted areas where our assessment of core assurances identified improvements required. Please see requirement 2.

Since the service had opened, there had been few significant events that would have required notification to the Care Inspectorate. Discussion with the service provider identified that although records of accidents, incidents and complaints were maintained, there had been some slippage in submitting notifications. Notification of significant events is an important factor in providing for the health, welfare and safety of people using care services. **See requirement 3**.

Relatives reported their confidence in management and provided examples of their involvement in planning care and support and effective action taken to address incidents where things have gone wrong. Their comments included, "we are perfectly happy with the service" and "the owner is lovely and I can trust all of them".

#### Requirements

- 1. By 25 November 2024, the provider must ensure service users' health, safety and well-being needs are met and that service users experience a service with well trained staff. In order to do this, the provider must as a minimum evidence:
  - a) safer recruitment checks have been completed
  - b) staff have clear roles and responsibilities
  - c) staff training is up to date and competency checks are carried out
  - d) formal procedures are in place to guide staff practice.

This is to comply with regulations 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and section 7 of the Health and Care (Staffing) (Scotland) Act 2019 (as substituted for regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210)).

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and

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: '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 3.14) 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11) and 'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24).

2. By 6 January 2025, the provider must make proper provision for the health, welfare and safety of people using the service. To do this the provider must evidence that effective quality assurance systems are in place and result in consistent good standards of care and support for people living in the home.

This is 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).

and

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).

3. By 6 January 2025, the provider must ensure that all significant events, as detailed in the Care Inspectorate's document 'Records that all services (except childminders) must keep and guidance on notification reporting', are notified to the Care Inspectorate.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011, (SSI 2011/210) Regulation 4 - Welfare of Service Users.

### How good is our staff team?

4 - Good

People should have confidence in the staff who care for them. We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement. Our evaluation reflects the improvements needed in staff recruitment and training records. Please see requirements recorded under Key Question 2.

Staff told us they felt valued, it was a good place to work and the provider was described as approachable and supportive. We found the right number of staff with the right skills present, because the provider understood the needs and wishes of people living here, accessing respite and their families.

Relatives told us staff were hospitable and approachable, which made it easy to raise any issues. People described staff as being, "great" and that they felt "happy" about getting out and about. One relative described being "extremely happy" with staffing and that their loved one "gets on fine with all of them" Another said how they had been impressed by staff right from the start, which had resulted in improvements in their own wellbeing.

We found staffing arrangements allowed for more than just basic care needs to be met. Staff were motivated to ensure people got the most out of their time. We found staff had time to provide compassionate care and engage meaningfully with people, which meant they could choose how to spend their day. Staff were deployed effectively, which meant routines and schedules could be maintained while still accommodating "spur of the moment" activity. Staff were experienced and confident in their day to day job. They described how they were able to work as a team. They were fully staffed and could rely on bank staff or pick up overtime where there was short notice absence. Staffing numbers were determined by service user need and/or complexity of care. We found staff were motivated and effectively building relationships with people and their families.

#### How good is our setting?

5 - Very Good

We evaluated this key question as very good, as the significant strengths outweighed any areas for improvement.

People should benefit from high quality facilities which support their outcomes. We found the accommodation had been equipped and decorated to a very high standard. The service was homely and welcoming. The service benefited from bright spaces with plenty of natural light.

Each flat had a separate dining room, kitchen and lounge for people's use and which was seen to promote independence. Each flat had a simple layout which allowed people to easily orientate themselves. Bedrooms were spacious and had well appointed ensuite shower facilities. A large shared bathroom was also available. The flats were clean, tidy and generally well looked after, with no evidence of intrusive noise or smells. There is a large secure garden to the rear of the property. Communal areas within the home were clean, tidy and free from clutter, which ensured that cleaning tasks could be carried out effectively.

The home had a relaxed, welcoming atmosphere. People had a choice of where they wanted to spend their time. Some people enjoyed spending time in the shared lounge/dining areas, whilst others preferred to be in their own rooms.

We found the overall environment was of a very good standard of upkeep which helped to ensure people could enjoy a pleasant setting. There were regular audits and checks carried out relating to the environment and upkeep of equipment. The service was clean and fresh. There was a domestic model of care and good standards of housekeeping and infection prevention and control. This meant people could be kept safe within a very homely environment. Equipment was well maintained, with servicing and safety checks being carried out at planned intervals. This helped to ensure people were safe.

## How well is our care and support planned?

4 - Good

We evaluated this key question overall as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement. The involvement of family in planning care and support was clearly an asset here.

Assessment and personal planning should reflect people's needs and wishes. We found that care plans held a good level of detail with which to guide care. Plans were clearly individualised and had involved people and their families in their development

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Plans sampled included a section describing the person in detail, which meant staff could familiarise themselves with people's lives, hobbies and interests. This provided an important background to care and in identifying what a good day would look like for people.

Overall, risk assessments to assess residents' care needs were carried out regularly and then used to inform the care plan. We found care records contained sufficient detail to guide staff in delivering day to day care, but there were inconsistencies and a lack of clear structure regarding what records should be included for each person. We recognise work to improve care records had been started and can monitor progress at our next inspection.

# 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
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
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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How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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