

Spiers Care Home Care Home Service

6 Janesfield Place
Beith
KA15 2BS

Telephone: 01505 503 324

Type of inspection:
Unannounced

Completed on:
17 October 2024

Service provided by:
SCCL Operations Limited

Service provider number:
SP2014012299

Service no:
CS2014326143

About the service

Spiers Care Home is registered to provide a care service to a maximum of 45 older people. Within the maximum of 45 places, two places can be provided for named individuals under the age of 65 years. The provider is Anavo Care Group Limited.

The home is in the centre of Beith and is close to local amenities and transport links. Accommodation is located on the ground floor and is built around a central courtyard and garden area. There is some access to the enclosed central garden areas.

All bedrooms are single occupancy with ensuite toilet facilities and some with a shower. There are three units, each with their own separate lounge/dining areas.

There is a small therapy/relaxation room and a hairdressing salon. There is also a café room, used mainly for visitors. The accommodation on the upper floor is used only for staff for manager's office, training room and maintenance.

About the inspection

This was an unannounced follow up inspection which took place on 17 Oct. The inspection was carried out by one inspector 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 three people using the service and two of their relatives
- Spoke with 12 staff and management
- Observed practice and daily life
- Reviewed documents
- Reviewed progress on requirements

Key messages

- Stable and consistent management in place.
- Staff team working well together.
- Improvements to the care home environment.
- Feedback from people and relatives was positive about the changes and improvements.

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

Requirements

Requirement 1

By 30 August 2024, the provider must improve the mealtime experience to support people's health and quality of life.

To do this, the provider must, at a minimum:

- a) ensure that staff have training to ensure they know how to complete nutritional risk assessments and fluid charts accurately
- b) ensure that personal plans reflect people's nutritional and hydration needs
- c) review the number of staff on shift and how they are deployed to ensure that people are supported to eat and drink

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).

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) and 'I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm' (HSCS 3.21).

This requirement was made on 18 July 2024.

Action taken on previous requirement

We observed the mealtime experience throughout the various dining areas of the care including Garden View, Melrose and Blair Lodge. We noted improvements had been made to the presentation of the dining areas. Tables well set and presented, and people were comfortable.

Melrose unit has been completely redecorated and refurbished, with a new kitchenette in place and staff computer table removed, so that staff are not having to sit in residents areas to do administrative tasks. This also helps with confidentiality, managing information and data protection.

Meals were delivered via heated trolleys to other units in the care home, this was good, safe transportation of food. Some people choose to have meals in their bedrooms, with food appropriately transported.

Staff were well organised in attending to people who required assistance first, followed by others as appropriate.

Good quality food was provided by catering staff who also participate in the mealtime experience.

Kitchen staff have information and details of each person's preferences of special diets, such as diabetic or high calorie depending on the needs of the person.

Met - outwith timescales

Requirement 2

By 30 August 2024, the provider must ensure that medication administration procedures and records are completed to a high standard to ensure that people receive their medication as prescribed.

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).

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 "If I need help with medication I am able to have as much control as possible" (HSCS 2.23).

This requirement was made on 18 July 2024.

Action taken on previous requirement

We reviewed a sample of the medication administration records (MAR sheets) and checked. We noted they were in good order, neat and tidy. The staff signatures sheet was at the front of each MAR folder.

Each person had an updated photo ID with personal and important details at the front.

PRN protocols for as-required medications were well written and personalised to each individual, with good descriptions and explanations of the reasons for and when to administer.

Homely remedies were in place and other recording for medication such as insulin and peg tube feeds were in place and signed accordingly.

The treatment room was in order and daily temperatures for this and fridge were recorded as required.

Met - outwith timescales

Requirement 3

By 30 August 2024, the provider must demonstrate that there is a stable management system in place to support better outcomes for people living in the home, and that quality assurance and improvement is well led.

To do this, the provider must, at a minimum:

- a) ensure the implementation of quality assurance systems that continually evaluate and monitor service provision to inform improvement and development of the service
- b) use feedback from people living in the home, their families and staff to inform service development
- c) ensure that outcomes of audits, people's views and adverse events are used to inform a service improvement plan

d) review the service improvement plan regularly to ensure that actions detailed are effectively improving outcomes for people living in the home

This is to comply with Regulation 4(1)(d) 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 benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This requirement was made on 18 July 2024.

Action taken on previous requirement

Since the last inspection there has been a consistent manager and now there is also a deputy in place to support. There is also consistent support from the regional manager role as well.

We received positive feedback from people in the care home, relatives and staff of how much better the place is, including the atmosphere. The staff feel better and improvements are happening.

The new deputy has started and is doing well fitting into the service and making positive progress, working well with the manager and building and developing the team.

Met - outwith timescales

Requirement 4

By 30 August 2024, the provider must implement an immediate improvement programme for the care home environment. This should include the central secure garden area, Melrose unit in particular and a general refurbishment and upgrading programme for the care homes internal and external environment.

This is to comply with Regulation 14 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' (HSC 5.24).

This requirement was made on 18 July 2024.

Action taken on previous requirement

The new sluice DSR room is fitted with a wash hand basin, flooring and wall panelling, making this easier to clean and keep dirt free.

Melrose unit is fully refurbished. New lighting is better than before, with much more light for people to see. Décor is nice and the rooms at the time of inspection had all been decorated with the Halloween theme.

The staff station that used to be in the lounge areas has been removed and two small offices have been set up for the staff, along with computers and documentation. This makes the space more private and deals with confidentiality. Additionally, this means the lounge dining room areas are focused on the residents, and not staff sitting at tables looking at computer screens and the associated documentation that tended to gather around these areas.

The external garden area has been tidied up, but due to the time of year not much else happening. New garden furniture has been bought and the maintenance person has painted with wood stain preservative. The service should look to providing other garden furniture such as pagoda or small shelter for people to sit outside and enjoy the fresh air. One person was out in the garden well wrapped up but enjoying the fresh air. This could be improved.

There is an ongoing programme to upgrade and refurbish the other lounges and continue to improve the environment in the home.

Met - outwith timescales

Requirement 5

By 30 August 2024, the provider must ensure the facilities are of a high standard.

To do this the provider must, at a minimum:

- a) ensure the manager does a daily walkaround to assess the safety, cleanliness and maintenance of the home and garden and act promptly on any findings
- b) put in place planning, systems and procedures for the home to be decluttered, maintained and kept clean, after agreeing and sharing this plan with the team
- c) seek to be less risk averse and make the garden more freely accessible to residents

This is to comply with Regulation 14 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' (HSC 5.24).

This requirement was made on 18 July 2024.

Action taken on previous requirement

As part of the ongoing refurbishments we observed during this follow up visit, we noted the domestic team to be working hard to ensure the care home environment was clean, tidy and well presented and free from any offensive odours.

We saw that good cleaning schedules were in place and the staff team worked well together to maintain good standards of cleanliness.

The lounge areas looked much better and there was less clutter in the corner areas and the computer screens and other documentation that the staff needed to work with has been removed and situated in the small staff rooms that have been set up for this purpose. This means the lounge dining areas are focused on the people in the care home and confidential and sensitive documentation and discussions can take place in the more suitable staff offices.

Met - outwith timescales

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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Care Inspectorate
Compass House
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