

Glenbervie Care Home Care Home Service

Glenbervie Business Park Bellsdyke Road Larbert FK5 4RB

Telephone: 01324 461322

Type of inspection:

Unannounced

Completed on:

21 November 2024

Service provided by:

Glenbervie Care Limited

Service no:

CS2016344000

Service provider number:

SP2016012646



Inspection report

About the service

Glenbervie Care Home is a care home offering accommodation for older people and adults with complex care needs.

Situated in the town of Larbert within a business park, Glenbervie care home has extensive grounds surrounding the care home and there is a large and well developed garden.

The care home offers accommodation over two floors with two units on each floor; Glenalmond and Glencoe on the ground floor and Gleneagles and Glenrosa on the first floor. Glenalmond and Glencoe provide accommodation for adults with complex care needs. Gleneagles provides accommodation for older adults with dementia, frailty and care and support needs. Glenrosa currently provides care for both older people and for adults with complex care needs but this unit is moving towards providing care for only adults with complex care needs.

Each unit has ensuite shower rooms, lounge and dining area, quiet rooms, bathrooms and toilets. There is a large multi-purpose room and training room on the first floor and a café area and pub on the ground floor.

About the inspection

This was an unannounced inspection which took place on 18 and 19 November 2024. 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 people using the service and their family members
- Spoke with 18 staff and management
- · Observed practice and daily life
- · Reviewed documents
- · Spoke with visiting professionals.

Key messages

- · There was a friendly and happy atmosphere in the service
- Staff worked well as a team and those they were supporting were important to them
- There was full and clear information in people's personal care plans
- The service could improve the way they transport food to people's bedrooms
- Staff training in some areas was not up to date
- There were opportunities to engage in meaningful activities indoors and outdoors.

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 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?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People living in the service benefitted from a holistic health assessment. Individual risk assessments were updated regularly to reflect current need. People were referred to appropriate health professionals as needed and were facilitated to attend community appointments. This meant people experiencing care could expect to be assessed by a qualified person, who involves other people and professionals as required.

Staff knew those they were caring for well as there was full information about people's care and support needs in their individual care plans. Care plans gave examples sentences of what staff could say when an individual was experiencing stress or distress. Information was personalised and outcomes focused to the extent that a new staff member could read the care plan and have a good understanding of the person's needs and preferences. Care plans were audited regularly and actions were followed up to ensure these documents contained accurate and up to date information. People were involved in regular reviews with the appropriate professionals and family members, where appropriate, so they could be sure their planned care was right for them as it set out how their needs, wishes and choices would be met.

People's nutrition and hydration needs were supported by a healthy and varied diet. There were alternative choices available day and night when people did not like what was on the menu. People were supported to order take away food if that was their preference. For those who required a fortified diet, there were high calorie foods available in all units and texture modified food and drinks were available for those who required them. Mealtimes were at a relaxed pace so people could enjoy eating and drinking in an unhurried atmosphere.

We had a concern about one fridge and one freezer in different units which were not clean. There was a build up of food particles and fluid spillage on the door seal and the inner door. We brought this to staff's attention and it was cleaned the same day. We noticed uncovered meals being transported on a trolley from the dining area to people's bedrooms. This meant there was an increased risk of contamination (see area for improvement 1).

There was extensive opportunities for people to engage in meaningful activities both indoors and outdoors. Staff were working hard to include all people living in the service. People could choose to take part in group or individual activities. There were regularly planned activities such as a cooking and baking class, a coffee morning and exercise classes and other opportunities such as hydrotherapy, crafts, a one to one chat or hand massage and visits to local attractions. One person said: 'I go upstairs (to the activity room) and go out with the minibus to different places. I go to the shops; I like that. It is good to go out and have a look about. I was out last week.' People then were supported to have an active life and participate in a range of recreational, social, creative, physical and learning activities, both indoors and outdoors.

Areas for improvement

- 1. So that people experience safe and high quality care and support, the service should protect people from the risk of contamination by ensuring:
- a) All unit fridges and freezers, including the door seals, are clean and free from food and drink debris

- b) Meals being transported from one area of the home to another have a food appropriate cover on them
- c) All staff who handle food have up to date training in food safety.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

How good is our staff team?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People living in the service benefitted from a staff team who worked well together. Staff checked in with each other regularly and communicated information in good time. Staff were clear about their roles and flexibly adapted in response to changing situations to ensure care and support was consistent and stable. They were aware of where to find information about people's care and support needs and helped each other willingly. One staff member said: 'We share the same work ethic and make sure everyone is looked after.' and, 'It is a team effort. We all muck in.' There was a calm and happy atmosphere which meant people were benefitting from a warm environment.

Staff received training in specialist subjects from external professionals so they could competently care for those with complex needs. Staff training compliance was low in some areas. We had a discussion with the leadership team about improving compliance and recording training numbers to accurately reflect the staff currently working. They submitted an action plan and progress will be reviewed at the next inspection.

Staffing levels supported the needs of people living in the service. The service used a staffing tool and professional judgement to arrange staffing so that people experienced more than basic care needs. They employed more staff than the staffing tool determined to allow for staff absences. Staff said they had enough time to care for and support people. People and their family members said, although staff could be busy at times they always responded to people's needs. One family member said: '(name) had a couple of falls and they (staff) were there very quickly.' This meant people experiencing care could be confident their needs would be met by a kind and compassionate staff team.

Decisions about staffing arrangements were communicated to staff in person or via a digital platform. Information about staffing levels was displayed on notice boards in graph form; the manager said it may not be clear to some people what this meant so information about staffing was also communicated to people living in the service and their families in person or via email or text. This meant people could expect the service to be open about decisions on staffing.

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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 staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

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