

Thorntree Mews Care Home Service

17 Arnothill Mews Falkirk FK1 5RZ

Telephone: 01324 626 090

Type of inspection:

Unannounced

Completed on:

8 November 2024

Service provided by:

MMCG (CCH) (3) Limited

Service no: CS2013319184

Service provider number:

SP2013012124



Inspection report

About the service

Thorntree Mews is a care home that is registered for 40 older people, some of whom may be living with dementia and/or a physical disability. The Provider is MMCG (CCH) (3) Limited.

The care home is in a residential area close to Falkirk town centre, and is near to local amenities including shops, train and bus routes.

The care home is a spacious converted period type house with accommodation on two levels. It is divided into two self-contained units, each with a lounge, dining area, other quiet areas and bedrooms. The care home has an enclosed garden at the rear and a seated area at the front.

About the inspection

This was an unannounced inspection which took place on 7 and 8 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 staff and management
- · Observed practice and daily life
- · Reviewed documents
- Spoke with visiting professionals.

Key messages

- The service had made important improvements to people's nutrition and hydration
- Staff worked well as a team and created a warm atmosphere
- The leadership team had a good overview of people's needs
- There were regular opportunities to participate in social and recreational activities indoors and outdoors
- The service was working on their learning about a new digital care planning system.

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?	5 - Very 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 experiencing care benefitted from a holistic health assessment. The leadership team met weekly to review key clinical areas including, but not limited to, nutrition and hydration, wound management, medicines and any changes to people's health. Referrals were made to appropriate external professionals as and when required and staff followed their recommendations. People then could expect to experience safe and high quality care and support.

People could access food and drink that was suitable for their dietary needs and preferences. They were receiving fortified diets as required which was having the desired effect of weight gain in those who were at risk of malnutrition. Staff found it easy to access snacks and foods that could add calories to people's meals and finger foods for those who preferred not to sit at a table to eat. Alternative choices were available for those who did not like what was on the menu and snacks were available for people who were unable to sleep at night. Staff were trained in texture modified diets as per the International Dysphagia Diet Standardisation Initiative (IDDSI). Care plans reflected people's eating and drinking needs making it clear to staff what level of support people needed.

The service could further improve the way they record what people eat and drink. The service was in the process of adapting to a new digital recording system and some staff had recorded entries for people who did not need to have a food or fluid chart resulting in partially completed charts. We discussed with the leadership team the importance of records being accurate and staff being aware what details they needed to record for each individual. They said they would ask the digital system providers to remove the incorrect entries and make sure staff were aware of who to record this information for. Otherwise the care plans contained personalised, outcomes focused information and people were involved in reviewing their planned care which meant they could expect their needs, wishes and choices to be met.

There were opportunities for people to go out and enjoy their local community or participate in group or individual lifestyle choices according to their preferences. These were advertised well on noticeboards, monthly and weekly planners and in newsletters, using a combination of words and pictures to aid understanding of what was on offer. The service had shared-use of a minibus and used taxis when this was not available. One person said, "I go out to the garden centre to buy clothes" and another said, "I like it in my room, I'm happy not to take part. There is plenty available." This meant people could choose to take part in a range of social and recreational activities indoors and outdoors or choose to spend time alone.

Staff interacted warmly with people they were supporting. Staff gently encouraged people to be as independent as possible with their mobility or with eating and drinking, always offered choice and offered assistance when required. There was a calm, relaxed atmosphere so people could benefit from being supported and cared for sensitively by respectful staff. One family member said, "It is a slow pace and a sedate atmosphere, which is good."

How good is our staff team?

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.

The service was using the latest guidance about staffing to arrange staffing. They used a staffing tool and professional judgement to arrange staffing to suit the needs of people experiencing care in a process of continuous assessment. The leadership team informed people experiencing care and their nominated family members about staffing decisions at meetings, by email or informal chats. The service had recruited extra staff to cover staff absence and there was a pool of staff also available to cover staff absence. There was only occasional use of agency nurses as new nurses had been recruited earlier in the year. This meant people experiencing care could expect to be supported by staff who knew them well.

Newly recruited staff were supported well in their role by more experienced staff. Their induction training was good and they were required to pass a competency assessment prior to, for example, using lifting equipment. Even though experienced staff were busy, they were flexible to changing situations and understood the importance of making sure they were available to support newer staff to bring about good outcomes for people.

Staff worked very well as a team and communicated effectively with each other. One staff member said, "We have a brilliant team and a lot of people who have worked here for years.", another staff member agreed they had enough time and resources to do their job, "because everybody helps everybody. It runs fine." The leadership team took on board suggestions made by staff, for example, in the dementia unit a staff member suggested the use of blue coloured plates in the dining room so there would be a greater contrast between food and the plate, making it easier for people to see what was on their plate. This was put in practice and, along with an increased focus on nutrition and hydration, had the effect of people eating more and gaining weight. This meant people could have confidence they were being cared for by staff who could anticipate issues and plan for any known vulnerability.

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 people to have a smooth admission into the care home, the service should ensure that any equipment identified during the pre-admission assessment is in place before they are admitted.

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).

This area for improvement was made on 27 October 2023.

This area for improvement was made on 27 October 2023.

Action taken since then

Pre-admission assessments recorded what equipment was required and was in place on admission. People had access to pressure relieving equipment, specialist walking aids or lifting equipment and cushioned seating. We were assured the leadership team would provide specialist equipment prior to admission or not offer a placement if they were unable to provide this equipment.

This area for improvement has been met.

Previous area for improvement 2

To support people to have food and drink that meets their needs, preferences and wishes, the service should, as a minimum, ensure that:

- a) People identified as having a MUST score of 1 or above and therefore at risk of malnutrition are offered a food fortified diet throughout the day.
- b) Staff are trained in texture modified diets as per the International Dysphagia Diet Standardisation Initiative (IDDSI).
- c) Snacks and meals are offered throughout the day.
- d) Any relevant documentation is kept up to date and reflects each persons' current needs.

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

'My meals and snacks meet my cultural and dietary needs, beliefs and preferences.' (HSCS 1.37).

This area for improvement was made on 27 October 2023.

This area for improvement was made on 27 October 2023.

Action taken since then

Please refer to 'How well do we support people's wellbeing?' for information.

This area for improvement has been met.

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?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

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