

Fordmill Care Home Care Home Service

Barchester Healthcare Ltd
53 Mill Street
Montrose
DD10 8NE

Telephone: 01674 677 398

Type of inspection:
Unannounced

Completed on:
4 December 2024

Service provided by:
Barchester Healthcare Ltd

Service provider number:
SP2003002454

Service no:
CS2007142950

About the service

Fordmill Care Home is owned and managed by Barchester Healthcare Ltd and is registered to provide nursing care and support to a maximum of 60 adults. This includes older people, young physically disabled adults and older people with enduring mental health problems.

Fordmill Care Home is a purpose-built home located within the residential area of Montrose. The service is close to local amenities and transport links. The service operates on two levels, each floor being self-contained with shared accommodation. Three beds are available to provide intermediate care. A main dining room is located on the lower floor and can be accessed by the lift. The home has well maintained, landscaped grounds.

About the inspection

This was an unannounced inspection which took place on 3 and 4 December 2024. 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 21 people using the service and five of their families
- spoke with 15 staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- The home had recently been refurbished to a high standard and people were benefitting from a stylish, yet homely environment.
- Holistic care and support was actively promoted using a whole team approach.
- Care and support was led by people's strengths.
- Meaningful connection was important and all staff went above and beyond to help people achieve personal, positive outcomes.
- Staff took time to discuss and identify people's dreams and aspirations, and brought them to life.

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?	6 - Excellent
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?

6 - Excellent

We evaluated this key question as excellent. An evaluation of excellent describes performance which is sector leading and supports experiences and outcomes for people, which are of outstandingly high quality. We can be confident that excellent performance is sustainable and that it will be maintained.

The home was recently refurbished to a very high standard and had a relaxed, homely feel. People told us, 'It's not a run of the mill home, it has a five star feel' and 'It's great in here, it's all about the person, I'm happy'. It was clear to see that the staff knew people really well, and were focussed on a person centred approach, in order to help people achieve positive outcomes.

Care and support was given by a long standing staff team, who were knowledgeable, skilled and experienced. Feedback we received was overwhelmingly positive. We were told, 'Care staff are determined and dedicated. Staff look at people as individuals. It's like a big family'. Care was led by people's strengths and this enabled people to be supported to develop existing skills as well as explore new ones. For example, some people were enjoying laughing yoga for the first time and others were acting in the Fordmill pantomime. This kept people motivated and gave them a sense of purpose.

Families and friends were able to visit whenever they wanted, and were encouraged to be part of people's care. People were enjoying time together in the café area, socialising. This enabled people to maintain meaningful connections with loved ones. Families told us, 'There is a nice, caring relationship within the home' and 'It is important that I am involved - I come in every day, the home's great'. Staff were described as being 'respectful', 'Excellent' and as 'Having a gift', as to the way they looked after and interacted with people. Staff spent a lot of time finding out in detail, people's life stories and what their interests, hobbies and achievements were, prior to coming into the home. Activities were therefore person centred and more meaningful to people. We were told by a relative how positive it was that staff had been able to discover information about their loved one that they didn't even know. As a result, people were being cared for in a nurturing, caring environment, supported by staff who went above and beyond for them.

A range of health assessments and life story work had informed the basis of people's care plans. Plans described care in detail, and had been compiled with people and their loved ones. Clinical care was monitored closely and reviewed regularly, to ensure high standards were maintained. Monitoring tools were in place to ensure people's clinical needs, such as skin integrity and nutritional status were met. Where required, advice and support was sought from a range of external health professionals. The senior clinical team had excellent oversight of all clinical processes, which were identifying and driving improvements. For example, the manager had a 'lessons learnt' process whereby any identified clinical issues were discussed with staff to ensure improvements were made. This meant that the dedicated team of nurses and carers were striving to keep people well and maintain their health.

People's health was considered holistically, with staff not only supporting people with their physical needs, but their social and emotional wellbeing needs too. Staff told us that one person who came into the home to be nursed palliatively, was able to return home after receiving an excellent standard of care and support. People were supported to move regularly and remain as active as possible. People told us, 'I have good fun at the exercises' and 'I get out walking in the garden'. Staff recognised the need to promote independence and build on people's existing skills. This contributed positively to people's confidence and overall physical and mental wellbeing. As a result, people were exceeding their original expected outcomes, which made a huge, positive impact to people's lives.

A clear, organised process for medication administration was in place. Where people were experiencing stress and distress, there were protocols in place detailing strategies and approaches specific to the person on how to alleviate symptoms before considering 'as required', (PRN) medication. The manager had excellent oversight of all medications and any issues identified and rectified promptly. People were confident and reassured that they were receiving their medications safely.

A falls committee met regularly to review any slips, trips and falls. The committee included staff from all departments and considered health, environment and activities. This demonstrated a whole team approach to recognising risk and preventative measures to reduce the occurrence of falls, and encourage safe mobility in and around the home. This demonstrated that the home was proactive in their approach to risk assessment and this was excellent practice.

People's hopes, dreams and aspirations were identified and brought to life. People's lives were significantly enhanced by a range of personal and meaningful activities. There was a whole team approach, with all staff recognising and taking every opportunity to engage with people. The senior activity coordinator was commended and recognised for the commitment and enthusiasm which was evident not only in day to day activities, but within more personalised outcomes that people had experienced. For example, staff had been able to virtually transport a resident back to his place of residence overseas, via one of the Fordmill, in house flights. Another resident had been supported to grow and pot his favourite flowers for his wife's grave. People who were unable to participate in group activities out with their rooms, were given one to one attention. This was the focus for one activity coordinator who ensured that time was spent with people in their rooms with activities such as hand massage, music therapy and sometimes just a chat and cup of tea. Everyone was involved in activity in the home. Younger residents were acknowledged as having different interests and these were also catered for. One person had a visit from a piercing studio and musical activity tailored to their age group. Special occasions were celebrated with great enthusiasm including the arrival of a Clydesdale horse for Remembrance Day. People we spoke to could not have praised enough, the care and attention to detail that had gone into making each activity meaningful, and specific to the person. As a result, compassionate care was normal, everyday practice.

People had access to the outdoors as well as the local community. The engagement with the community was exceptional, with the community café in house being a great success for everyone. People benefitted from intergenerational visits with local nurseries and high schools coming to join in the fun. Where people were no longer able, one to one activities were promoted to soothe and relax. For example, a therapist regularly came in to offer massage therapy using people's chosen essential oils. Another resident was enjoying a spa bath with a glass of wine. As a result, people's quality of life was excellent and their wellbeing enhanced.

The environment was extremely clean and tidy and was decorated to a very high standard. Cleaning protocols were in place and staff were knowledgeable and adhering to the current guidance regarding infection prevention and control.

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.

Staff looked after people in an individual, person centred way. Care wasn't rushed and people were supported at their own pace. People told us, 'The staff are lovely, always prepared to come and help' and 'They are very respectful and always ask mums' permission to provide her care and support. They seem to have a nice friendly banter'. All staff took the time to sit and spend periods of time with individuals, having a chat or doing activities. This made days more meaningful and strengthened relationships.

New staff had been recruited safely, and the recruitment process reflected the principles of "Safer Recruitment, Through Better Recruitment" guidance. New staff had been interviewed with employment references, and Protection of Vulnerable Group (PVG) checks being undertaken prior to employment. The home had a resident ambassador in the past who participated in interviewing new staff. People could be confident that staff had been recruited safely, and that recruitment processes were robust.

The home benefited from a long-standing staff team, who knew individuals well. Staff were visible, and worked well together as a team. We were told, 'Everyone comes together, no matter what department' and 'I find the staff very nice'. As a result, it was positive that people were being cared for by a consistent staff team.

The manager used a dependency tool to inform staffing levels in the home. It was clear to see that staffing arrangements were being used flexibly, to accommodate the changing needs of the residents. For example, where people's needs increased if they were unwell, staff were able to discuss this with the manager and were moved to accommodate this. As a result, staff worked in all areas of the home and knew all of the residents well. Consultation with staff regarding staffing arrangements was evident, however, consultation with residents, relatives and external professionals would strengthen this further.

Staff were happy and told us, 'I have support from everyone in the home', 'We all muck in, we always get help if we want' and 'I love it here'. This made staff feel valued and maintained staff morale.

Staff meetings took place regularly, with a focus on the people in the service. Daily morning meetings and clinical care meetings focussed on the health and wellbeing of residents. This enabled staff present to discuss and assess the effectiveness of the care and support. This helped people receive the care and support that kept them healthy and well.

The home were very good at ensuring staffs' wellbeing, and celebrating successes. For example, several staff had recently achieved a qualification in care, and the home had held a graduation ceremony for them. They also acknowledged special occasions such as birthdays and mothers' day, with gifts for staff. In addition, the home also had an employee of the month award. This gave recognition of staffs' skills and strengths and made them feel valued. It also contributed to staff retention.

Staff supervision was being carried out on a regular basis and was seen as supportive and meaningful. Staff told us, 'It gives me a chance to air my views or have a rant!', 'We are always asked what development we want'. As a result, staff morale had improved, and staff had opportunities to express their views and wishes.

The manager had very good oversight of all training, and compliance was at an above average level. There was a variety of training for staff, both online and face to face. This included adult support and protection, moving and handling and palliative care. Staff translated their training into practice, to enhance the care and support people received, and felt this had enabled them to be competent in their roles. This was evidenced in the very good practice we observed for example, staff adhering to infection prevention and control guidance.

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?	6 - Excellent
1.3 People's health and wellbeing benefits from their care and support	6 - Excellent
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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